

SENATOR V. JOHNSON: Mr. Speaker, members of the Legislature, I could not in good conscience vote for Senator Marsh's amendment because I felt that Senator Marsh's amendment in the last analysis and when applied would have the effect of harassing, so to speak, a number of volunteer organizations that do provide counseling services to pregnant women and those volunteer organizations may very well be organizations like Emergency Pregnancy Service in Omaha or Birthright which I think exists in a variety of communities in our state or Planned Parenthood which is in Omaha and other communities in our state. It seemed to me that for us to establish standards for the kind of counseling that is occurring today in a number of crisis pregnancy organizations would not be appropriate, particularly in connection with this measure. So for that reason I felt that Senator Marsh's amendment was not one that I would vote for. But now I turn to Senator Labeledz's amendment and what Senator Labeledz is doing is establishing some standards to be applied by individuals who provide some type of very short counseling, so to speak, to a woman who has made a decision to have an abortion and the woman will see a physician about her decision to have an abortion. When she visits that particular physician, she undoubtedly will be referred by that physician to a nurse practitioner in the office or to a social worker in the office or to some other kind of counselor. And at that time, at that time, that individual will provide information to that woman with respect to the items that currently exist in the informed consent law and with respect to the new items that would exist in the informed consent law if LB 663 were to pass the Nebraska Legislature. Now the kind of information that is to be provided is relatively factual in nature. It is relatively factual in nature. It is not the kind of information that calls for a long, lengthy give and take, it calls for sort of a psychological and emotional nexus between the person providing the information and the person receiving the information. It is not necessarily that kind of information that truly calls for what I would call the therapeutic healing process, the psychological healing process, the emotional healing process. It is simply the provision of factual information. Incidentally, right now we think it important for our physicians to provide factual information to patients before patients undergo tonsillectomies, appendectomies or what have you because virtually every patient today as a matter of the physician-patient relationship is required to consent to the