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Member Agencies

Blackstone Valley
Advocacy Center

Domestic Violence
Resource Center of
South County

Elizabeth Buffum
Chace Center

Women's Resource Center

Task Force

Sisters Overcoming
Abusive Relationships

Affiliate Members

Center for Southeast Asians

Crossroads Rhode Island

Family Service of Rhode Island

McAuley Ministries –
McAuley Village

Progreso Latino

YWCA Rhode Island

To: Representative Robert E. Craven, Chair of the House Judiciary Committee
Honorable Members of the House Judiciary Committee

From: Lucy Rios, Executive Director
RI Coalition Against Domestic Violence

Date: April 8, 2025

Re: **Opposition to House Bills 5295, 5296, and 5661**

On behalf of our network of member agencies and SOAR, our taskforce of survivors, the Rhode Island Coalition Against Domestic Violence (RICADV) appreciates this opportunity to express our **opposition to House bills 5295, 5296, and 5661**. These bills advance harmful restrictions and efforts to establish fetal personhood as part of a broader anti-choice scheme that threatens reproductive freedom and body autonomy.

- H. 5295 criminalizes the knowing and intentional failure of a physician, nurse, or other licensed medical person to provide reasonable medical care and treatment to an infant born alive as a felony.
- H. 5296 provides duties/obligations of medical personnel to born-alive infants resulting from an abortion punishable as a felony along with a civil action for compensatory/punitive damages/automatic one year license suspension.
- H. 5661 expands the statute of limitations with respect to any wrongful act resulting in the death of a child in utero or within six (6) months after the birth of the child, to ten (10) years after the death of the child.

These bills are a blatant attempt to undermine individuals' right to abortion. Restricting any access to reproductive health services and choices places particularly dangerous burdens on victims of domestic and sexual violence. Victims of domestic violence are at a significantly higher risk for unintended pregnancy because partners who use violence will often sabotage or interfere with their partner's birth control in an attempt to exercise control over their reproductive decisions. In a 2010 study conducted jointly by the University of California-Davis School of Medicine and the Harvard School of Public Health, researchers found that at least 35% of domestic violence victims reported reproductive control by their abusive partner either by contraception interference or coercion to become pregnant.¹

Restrictions that complicate access to contraception provide additional leverage for people who use violence to threaten, trick, or intimidate their victims into continuing with an unwanted pregnancy. The legislature should act to ensure that all Rhode Islanders have reliable access to the reproductive health and contraception options they need. This will prevent unintended pregnancies by at-risk domestic violence victims who face additional danger when a pregnancy is added to a violent and abusive relationship.

Reproductive justice is directly tied to survivor justice. We appreciate your consideration of this important legislation and urge you to oppose H. 5295, H. 5296, and H. 5661.

¹ "Pregnancy Coercion, Intimate Partner Violence, and Unintended Pregnancy," Miller, et al. *Contraception*, Volume 81, Issue 4, 2010.