

American Civil Liberties Union of RI American College of Nurse-Midwives American College of Obstetricians and Gynecologists Catholics for Choice GLBTQ Legal Advocates & Defenders (GLAD) Hope and Change Partnership Humanists of Rhode Island League of Women Voters, RI Medical Students for Choice National Council of Jewish Women, RI Action Team Perinatal Quality Collaborative Planned Parenthood of Southern New England Reproductive Health Access Project

Resolve New England RI Academy of Family Physicians RI Athiests RI Black Business Association RI Coalition Against Domestic Violence RI National Association of Social Workers RI National Organization for Women RI Pharmacists Association RI Religious Coalition for Reproductive Freedom RI Working Families Party Sojourner House Upstream Women's Fund of Rhode Island Women's Health and Education Fund

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

From: Nicole Jellinek, Chair, Rhode Island Coalition for Reproductive Freedom

Date: April 7, 2025

Re: Opposition to House Bills 5661, 5295, 5296

Dear Members of the House Judiciary Committee,

I write to express the opposition of the RI Coalition for Reproductive Freedom (RICRF) for three bills you are hearing today that work against reproductive freedom. RICRF is a Coalition comprised of 27 organizations working together to share resources, build strategies and coordinate efforts to connect reproductive freedom with social and economic justice. We focus on advocacy and legislative action to enact change. We envision a RI where everyone has access to affordable and comprehensive reproductive health care.

House Bills 5661, 5295 and 5296 are regressive efforts to reduce access to existing reproductive health care services. They are the types of bills that are being passed in Alabama, Texas, Idaho and more than a dozen other states to repress bodily autonomy.

H5295 and 5296 are unnecessary and advances gross mischaracterizations that have no factual basis in medical science. The true aim of these bills is not based in science or in health care; instead, they are meant to shame and stigmatize doctors who provide abortions and patients who need access to essential, time sensitive, safe and legal abortion care. These so-called "Born Alive" bills suggest that the actions of physicians need to be legislated: in fact, medical guidelines and ethics already compel physicians to respond in these difficult situations.

H5661 is proposed as part of a larger movement to establish "personhood" for the fetus. The concept of wrongful death typically applies after a person has been born and does not apply to a fetus. Please act to defeat these efforts.



Nicole Jellinek, Chair, Rhode Island Coalition for Reproductive Freedom