

## Sarah Inskeep

Opponent Testimony for Senate for Senate Bill 155
Ohio Senate Health, Human Services, and Medicaid Committee
Tuesday, October 22, 2019

Chairman Burke, Vice-Chair Huffman, Ranking Member Antonio, and members of the Senate Health, Human Services, and Medicaid Committee thank you for allowing me to testify in opposition to Senate Bill 155.

My name is Sarah Inskeep and I am the Ohio State Policy and Movement Building Director for Unite for Reproductive and Gender Equity, also known as URGE. URGE is a reproductive justice organization powered by young people in Southern and Midwestern states, which includes Ohio. At URGE we envision a world where all people have agency over their own bodies and have the power, knowledge, and tools to exercise that agency. We build this vision by engaging young people in creating and leading the way to sexual and reproductive justice for all. On behalf of our youth members and statewide chapters, I humbly ask you to stop Senate Bill 155, the Medical Misinformation Act.

This committee has heard extensively from medical professionals and doctors regarding the unproven claims and experimental nature of this bill. Forcing medical professionals to inform people of a procedure that is *not* supported by science, *not* regulated by the FDA<sup>1</sup>, and is widely denounced by credentialed organizations in the field<sup>2</sup>, is not only unethical but it will not improve the health of Ohioans.

The goal of the Medical Misinformation Act is not to make advancements in the field of reproductive and sexual health, but instead to shame and stigmatize individuals who make the decision to have an abortion and to spread misinformation about how abortion care actually works. If that were the true intent of this legislation, there would be hearings for bills related to topics such as contraception equity and implementing comprehensive, evidence-based, and culturally competent sexual health education in Ohio's schools. However, those topics are clearly not a legislative priority of this General Assembly.

Allow me to be very clear – abortion is a normal and an essential part of the full range of sexual and reproductive health care. The decision, if and when, to continue a pregnancy is a personal decision that should be made without political interference and in consultation with a trusted medical professional.

<sup>&</sup>lt;sup>1</sup>Grossman, D., Raifman, S., and Baba, F. "Abortion Pill "Reversal": Where's the Evidence?" March 2019. https://www.ansirh.org/sites/default/files/publications/files/medicationabortionreversal\_ib.pdf

<sup>&</sup>lt;sup>2</sup>The American College of Obstetricians and Gynecologist, *Facts are Important: Medication Abortion "Reversal" Is Not Supported by Science*, <a href="https://www.acog.org/-/media/Departments/Government-Relations-and-Outreach/FactsAreImportantMedicationAbortionReversal.pdf">https://www.acog.org/-/media/Departments/Government-Relations-and-Outreach/FactsAreImportantMedicationAbortionReversal.pdf</a>



It is important to acknowledge and hold people's diverse experiences with both pregnancy and abortion. That said, the narrative from groups that support this bill say most people regret their abortion. Members of this committee have heard the wide range of emotions and experiences from those who have shared their stories, including those we heard today. Therefore, to broadly assume that sentiment of regret is what the majority of people feel following an abortion procedure is simply wrong.

The notion from that legislation is about providing people with more "choices" is disingenuous. It is an attempt to co-opt messaging from the abortion rights movement and deceptively shift the narrative from people having the autonomy to make decisions about their bodies to forcing medical professionals to unethically inform patients of an unproven, false, experimental, and potentially dangerous "choice". Politicians should not mandate health care providers to give their patients biased counseling about an unsupported claim.

At its core, Senate Bill 155 is patronizing. Young people, LBG folks, gender nonconforming communities, and queer and trans people of color must have the autonomy, respect, and scientific information – without shame or judgement – to make decisions about their health care. We must trust people to know what is best for themselves, their families, and futures. People must be able to trust their health care providers to provide them accurate, unbiased, evidence-based information. Senate Bill 155 would do the opposite of this and would disproportionately harm our most marginalized communities that already face barriers to the health care and resources they need and deserve.

I humbly ask you to vote no on Senate Bill 155. Thank you again for allowing me to testify and I'm happy to take any questions the committee may have.