Linda J. Theis 2760 Timberview Court Findlay, Ohio 45840

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Dear Chairwoman Manchester, Vice Chair Cutrona, ranking Member Liston and members of the House Families, Aging, and Human Services Committee,

I thank you for the opportunity to provide Proponent Testimony on Sub. Senate Bill 157, the Born Alive Infant Protection Act that is now before you in this committee.

My name is Linda Theis and I come to you representing myself, my family, and as President of Right to Life Action Coalition of Ohio, a grassroots coalition of member organizations from the metropolitan areas of Ohio as well as county and small towns all across our state. My degree was in music education and over the years I have been a teacher and instructor, and served as a program director for the education/prevention arm of Women's Resource Center of Hancock County in Findlay, Ohio.

I know that many numbers and situations will be presented to you regarding the implications of this bill. My remarks go directly to its purpose – which is to offer to babies born alive unexpectedly after an abortion, the same routine medical care that is offered to other newborn babies. Abortion is not the issue at hand here. We are not talking about the pre-born infant, but the born infant, regardless of the circumstances surrounding his or her live entrance into our world.

In these United States we offer help - be it physical, intellectual, emotional, social, financial or spiritual - to those in need. We pride ourselves on being the most advanced in treatment the world over. And yet there are cases across our country and in our state where newborn infants are left to die after an abortion that somehow did not end their lives.

In those cases, the common sense, and always previously assumed, response to a live birth is to offer everything positive to try to save this new little life – and to do it as quickly and efficiently as humanly and compassionately possible.

In classrooms where I have been teaching Whole Person Education for the past 22 years, and in the situations that have arisen in my family of now married children and grandchildren, our message has always been one of opting for a positive solution when faced with a challenging situation. We weigh the options, consider all of the people involved and look at possible outcomes in an attempt to turn a negative situation into a positive one. In the case of a newborn, no matter how he or she came to be born alive, we look to the medical care of the child before all else. We weight the options. Do we opt for saving life before all else? Of course we do. Respect for the individual demands it.

There is often little or no time for due process, for discussion about what could be best for those around the newborn who needs immediate medical attention. We shouldn't need Sub Senate Bill 157 but we do. Sadly, we need it to guarantee that those in a position to offer supportive care in these emergency situations, are fully aware that the expected mode of operation is to still do what medical people do — offer medical care, and hopeful possibilities for a long life, to the infant in need.

Chairwoman Manchester, Vice Chari Cutrona, ranking Member Liston and members of the House Families, Aging, and Human Services Committee, thank you for the opportunity to share my thoughts on Sub. Senate Bill 157. I thank the sponsors and cosponsors of this bill and encourage your full support.

Sincerely,

Linda J. Theis

President, Right to Life Action Coalition of Ohio Recently retired Program Director/Teacher of Character And Relationships Education in the public schools (22 years) Mother of 6, Grandmother of 16