



March 15, 2023

Senator Julie Gonzales  
Chair  
Senate Judiciary Committee  
Colorado General Assembly  
200 E Colfax Avenue  
Denver, CO 80203

Senator Robert Rodriguez  
Vice Chair  
Senate Judiciary Committee  
Colorado General Assembly  
200 E Colfax Avenue  
Denver, CO 80203

### **Catholics for Choice Supports SB23-190**

Dear Chair Gonzales, Vice Chair Rodriguez, and members of the Senate Judiciary Committee:

Catholics for Choice is a nonprofit organization that encounters, educates, and emboldens people of faith who support reproductive freedom. Since 1973, we have worked in the United States and around the world to ensure that all people everywhere can freely determine their sexual and reproductive destinies with dignity, respect, and affirmation. That same year, the Supreme Court issued its landmark ruling in *Roe v. Wade* cementing the constitutional right to abortion. Now more than ever, following the overturning of this decision and nearly fifty years of affirming precedent, lawmakers must pass policies that ensure equitable access to quality, timely, and affordable healthcare. On behalf of the overwhelming majority of pro-choice Catholics and Coloradans, Catholics for Choice urges you to support SB23-190, which would prohibit the use of deceptive advertising by anti-abortion centers.

Also known as crisis pregnancy centers or fake clinics, anti-abortion centers (AACs) masquerade as abortion providers but deliberately deceive pregnant people through lies, disinformation, and propaganda. In Colorado, as in much of the U.S., the nineteen clinics<sup>i</sup> that actually provide abortion services are far outnumbered by the state's sixty AACs.<sup>ii</sup> More often than not, these centers are not licensed providers — and are therefore not subject to the same regulation requirements as legitimate abortion clinics — and employ no staff authorized to perform medical services. Instead, they aim to pressure people to decide against abortion by intentionally leaving out the full range of options, falsely claiming that abortion is unsafe, or lying about how far along a client is in their pregnancy.

What's more, many AACs mimic the names of nearby abortion clinics in the hope that patients will arrive at the wrong building for their procedures or use language, colors, logos, and interior decorations or medical equipment to market themselves as real abortion clinics and steer people away from time-sensitive care. Some AACs even claim to offer so-called "abortion reversal," an unproven and unethical procedure that supposedly halts the effects of medication abortion after the first dose

**In Good Conscience**

of pills. The American College of Obstetricians and Gynecologists has denounced such shameful assertions, noting that they are “not based in science and do not meet clinical standards” of care.<sup>iii</sup> One thing is clear: these AACs exist to coerce people, and coercion is not healthcare.

Unfortunately, most AACs are religiously affiliated, many are Catholic, and it is not uncommon for them to place people in religious mentoring and counseling programs that are riddled with guilt-inducing anti-abortion messages. In reality, weaponizing our faith as justification for dubious and deceptive advertising tactics contravenes a sacred principle at the very heart of Catholicism: our deep respect for the primacy of individual conscience. The Catechism of the Catholic Church confirms that “in all they say and do, the human person is obliged to follow faithfully what they know to be just and right” and “a human being must always obey the certain judgment of his [sic] conscience. If he [sic] were deliberately to act against it, he [sic] would condemn himself [sic]” (paragraph 1790).

As Catholics, we believe that we must use all the resources available to us to form our consciences so that we can make the best possible decisions for ourselves. This means that all people deserve access to comprehensive, accurate medical information based in sound science when making choices about sexual and reproductive health, ensuring that we can follow our own consciences and honor the right of others to do the same. AACs do just the opposite, pushing lies and dangerous “abortion reversal” treatments at the expense of jeopardizing patient health, well-being, and safety and trampling their conscience-based decisions about abortion.

To make matters even worse, AACs actively target marginalized people who already face the highest barriers to accessing care — particularly the Black, Latinx, Indigenous, Asian American, Pacific Islander, and immigrant communities. Since their inception in the late 1960s, fake clinics have become more adept at outreach and marketing to people working to make ends meet and communities of color. Patients with Medicaid coverage may find AACs on lists offered to patients of facilities that provide free pregnancy testing. Some of these centers also buy advertising on Black television and use targeted advertising on websites frequented by Black and Latinx people.<sup>iv</sup>

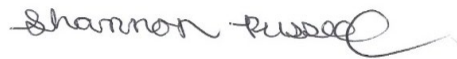
According to the Family Research Council, AACs are even developing special initiatives to target urban communities of color they see as “underserved.” Care Net — one of the nation’s two largest networks of AACs with more than 1,100 affiliates, 30,000 volunteers, and a stated mission to “empower women and men considering abortion to choose life for their unborn children and find abundant life in Christ” — developed an urban initiative “to reach underserved and over-aborted people.” In Colorado, AACs specifically advertise in places where people may not have access to a comprehensive clinic, post Spanish-language billboards in neighborhoods with a large number of immigrants, and use mobile vans to target students on campuses. The limited medical services that they sometimes offer, such as STI testing and ultrasounds, are designed to entice low-income people and those who are uninsured or underinsured and cannot afford to pay out-of-pocket for the services they need.

Once again, this is antithetical to our Catholic social justice tradition. Our preferential option for those living in poverty compels us to center the lives of marginalized people who are too often denied the basic human right to maintain personal bodily autonomy, to have or not have children, and to parent children in safe and sustainable communities. Indeed, our faith values demand that we dismantle sinful structures of oppression that AACs perpetuate and rely on — such as systemic racism, gender inequality, economic insecurity, and immigration restrictions — so that people can freely choose how best to build and care for their families.

Ultimately, Catholics believe deeply in the values of dignity, compassion, and justice and want all of our neighbors to be able to access the medically-accurate and compassionate care that they decide is right for them — no matter who they are, what identities they hold, where they live, or how much money they make. I implore you to listen to those who want and need access to abortion care and to demonstrate moral leadership by supporting SB23-190 and other pro-choice legislation. It is simply the right thing to do and, given the nationwide abortion access crisis, it is more urgent than ever.

Please do not hesitate to reach out to me at [srussell@catholicsforchoice.org](mailto:srussell@catholicsforchoice.org) with any questions or for further information.

Respectfully,

A handwritten signature in black ink that reads "Shannon Russell". The signature is written in a cursive style with a long, sweeping tail on the "l" at the end.

Shannon Russell  
Director of Policy, Catholics for Choice

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<sup>i</sup> <https://reproaction.org/fakeclinicdatabase>

<sup>ii</sup> <https://www.incedana.com/>

<sup>iii</sup> <https://www.acog.org/advocacy/facts-are-important/medication-abortion-reversal-is-not-supported-by-science>

<sup>iv</sup> <https://www.essence.com/lifestyle/health-wellness/fake-pregnancy-centers-popping-across-country-pose-serious-threat-black-mothers/>



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March 15, 2023

Senate Judiciary Committee  
Colorado General Assembly  
200 E. Colfax Avenue  
Denver, CO 80203

**RE: SUPPORT SB23-190**

Dear Committee Members:

The National Women's Law Center (Law Center), based in Washington, D.C., is a non-profit legal and advocacy organization dedicated to the protection and advancement of gender justice. The Law Center is submitting comments in support of Senate Bill 23-190, concerning policies to make punishable deceptive actions regarding pregnancy-related services.<sup>1</sup> We urge the Committee to advance this critical bill.

At the Law Center, we use the law in all its forms to change culture and drive solutions to the gender inequity that shapes our society and to break down the barriers that harm all of us – especially those who face multiple forms of discrimination. We know that access to reproductive health care – including abortion – is vital to gender equity. Access to accurate information about abortion care coupled with meaningful access to abortion care itself are key parts of ensuring one's liberty, equality, and economic security. Everyone, no matter where they live or their financial means, should be able to obtain accurate, scientifically based medical information about reproductive health care when they seek care, without intimidation, shame, or delay tactics. As such, we strongly support attempts to curb deceptive advertising and ensure Coloradans are able to access medically sound health information, like Senate Bill 23-190.

I. SB 23-190 Protects Coloradans from Harmful, Deceptive Practices

Anti-abortion centers (AACs) — sometimes called Crisis Pregnancy Centers or Pregnancy Resource Centers — are nonprofit organizations, fake clinics, or mobile vehicles that pose as a legitimate health care center. They often claim to help pregnant people, but they instead aim to coerce, deceive, scare, and manipulate pregnant people into carrying pregnancies to term. They often spread lies and disinformation about abortion care, contraceptives, and other aspects of sexual and reproductive health,<sup>2</sup> as well as purposely mislead pregnant people into thinking they are obtaining legitimate health care. In fact, because they are generally not legitimate health care facilities, they are not commonly subject to the same licensing, privacy, or regulatory requirements as legitimate reproductive care clinics. Many are located close to facilities that are known to provide abortion care, and they commonly target

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<sup>1</sup> Co. S.B. 23-190, Reg. Sess. 2023.

<sup>2</sup> Amy G. Bryant et al., *Why Crisis Pregnancy Centers are Legal but Unethical*, 20 *AMA J Ethics* 269 (2018) <https://journalofethics.ama-assn.org/article/why-crisis-pregnancy-centers-are-legal-unethical/2018-03>.

communities of color and low-income communities<sup>3</sup>—a particularly reprehensible tactic, given these are the same communities that are already subject to significantly more hurdles in accessing reproductive care.<sup>4</sup>

AACs have long and widely used manipulation, misleading information, deceit, and shame to achieve their goals. A recent report and investigation of the AAC industry’s presence in nine states concluded that AACs “may systemically obstruct access to medical care” through their tactics in presenting themselves as medical facilities.<sup>5</sup> Government has both the authority and a duty to regulate deceptive practices. AACs’ deceptive practices also have gained the attention of lawmakers in other states and localities<sup>6</sup> as well as in the federal government<sup>7</sup>. A 2006 Congressional investigation found that 87% of surveyed anti-abortion centers provided false or misleading information about abortion, “misrepresent[ing] the medical consequences of abortion, often grossly exaggerating the risks.”<sup>8</sup> The report concluded that this tactic could effectively frighten people seeking abortion care and discourage people from obtaining care, stating that it “denies [people] vital health information, prevents them from making an informed decision, and is not an accepted public health practice.”<sup>9</sup>

If passed, Senate Bill 23-190 would protect Coloradans from the harm and deceit propagated by AACs. When seeking reproductive health care, as with any type of medical care, Coloradans deserve to trust that they are given accurate, medically sound information. Residents of Colorado should not have to worry about facing disinformation or being subject to unnecessary delays. Rather, Coloradans should be able to access the quality, medically accurate care they want, when they want it.

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<sup>3</sup> AM. COLL. OF OBSTETRICIANS AND GYNECOLOGISTS, ISSUE BRIEF: CRISIS PREGNANCY CENTERS (Oct. 2022),

<https://www.acog.org/advocacy/abortion-is-essential/trending-issues/issue-brief-crisis-pregnancy-centers>.

<sup>4</sup> Kiara Alfonseca, *Why Abortion Restrictions Disproportionately Impact People of Color*, ABC News (June 24, 2022), <https://abcnews.go.com/Health/abortion-restrictions-disproportionately-impact-people-color/story?id=84467809>; Benjamin Rader et al., *Estimated Travel Time and Spatial Access to Abortion Facilities in the US Before and After the Dobbs v Jackson Women’s Health Decision*, JAMA (2022), [https://jamanetwork.com/journals/jama/fullarticle/2798215?guestAccessKey=70c1bc40-5cc0-4bcf-a73d-a5b9b26ccf01&utm\\_source=For The Media&utm\\_medium=referral&utm\\_campaign=ftm\\_links&utm\\_content=tf1&utm\\_term=110122](https://jamanetwork.com/journals/jama/fullarticle/2798215?guestAccessKey=70c1bc40-5cc0-4bcf-a73d-a5b9b26ccf01&utm_source=For%20The%20Media&utm_medium=referral&utm_campaign=ftm_links&utm_content=tf1&utm_term=110122), (“American Indian or Alaska Native, Black, and Hispanic populations experienced large absolute increases in travel time to abortion facilities [post-*Dobbs*]”); Katherine Gallagher Robbins et al., *State Abortion Bans Threaten 6.5 Million Latinas*, NAT’L P’SHP FOR WOMEN & FAMILIES, [https://www.nationalpartnership.org/our-work/health/reports/state-abortion-bans-threaten-latinas.html?utm\\_source=nbc&utm\\_medium=referral&utm\\_campaign=hj\\_dobbs](https://www.nationalpartnership.org/our-work/health/reports/state-abortion-bans-threaten-latinas.html?utm_source=nbc&utm_medium=referral&utm_campaign=hj_dobbs).

<sup>5</sup> The Alliance, et al., *Deceptive & Misleading Marketing: Most CPCs Do Not Provide Medical Care*, A Study of the Crisis Pregnancy Industry in Nine States, at 26 (2021), [https://alliancestateadvocates.org/wp-content/uploads/sites/107/Alliance\\_CPC\\_Report\\_FINAL2-1-22.pdf](https://alliancestateadvocates.org/wp-content/uploads/sites/107/Alliance_CPC_Report_FINAL2-1-22.pdf).

<sup>6</sup> See e.g., Ct. S.B. 835, 2021, <https://legiscan.com/CT/text/SB00835/2021>; Jonah Valdez, L.A. City Council approves law targeting pregnancy centers that mislead on abortion, L.A. Times (Nov. 2, 2022), <https://www.latimes.com/california/story/2022-11-02/pregnancy-centers-abortion-los-angeles-new-law>; Sarah Holder, *New England Cities Fight Abortion Misinformation With Truth-in-Ads Laws*, BLOOMBERG (Aug. 18, 2022), <https://www.bloomberg.com/news/articles/2022-08-18/somerville-massachusetts-leads-cities-in-targeting-crisis-pregnancy-centers>.

<sup>7</sup> Warren, Maloney, Bonamici, Menendez Introduce Legislation to Stop Anti-Abortion Disinformation by Crisis Pregnancy Centers (June 23, 2022), <https://www.warren.senate.gov/newsroom/press-releases/warren-maloney-bonamici-menendez-introduce-legislation-to-stop-anti-abortion-disinformation-by-crisis-pregnancy-centers>.

<sup>8</sup> Special Investigations Division, Committee on Government Reform—Minority Staff, United States House of Representatives, *False and Misleading Health Information Provided by Federally Funded Pregnancy Resource Centers* (July 2006), <https://www.motherjones.com/files/waxman2.pdf>.

<sup>9</sup> *Id.* at p. 14.

II. SB 23-190 Promotes Meaningful Access to Abortion Care, Which Is Critical in Advancing Gender Equity

When a person seeks reproductive health care, including abortion care, they deserve to be able to access that care without being subject to harmful practices and fear of deception. Colorado has been a leader in protecting reproductive freedom and advancing SB 23-190 would maintain Colorado's leadership. With protections from SB 23-190 in place, Coloradans would have more meaningful access to reproductive health care, including abortion care. In addition to ensuring bodily autonomy, meaningful access to abortion care advances gender equity altogether. Access to reproductive care, including abortion care, can have long term consequences with respect to a person's economic security, workforce participation, and educational opportunities. Being forced to carry a pregnancy to term, on the other hand, may lead to diminished earnings, interference with career advancement, disruption of education, and fewer resources for children the pregnant person may already have.<sup>10</sup> When people can access medically accurate information about comprehensive reproductive health care, they are able to make well-informed decisions that are best for their health and wellbeing. As a result, families can thrive and we build communities where each of us can participate with dignity.

In conclusion, Senate Bill 23-190 is an important step in ensuring Coloradans have access to accurate health information so that they can make the best decisions for themselves and their families. No one should have to worry about being misled or deceived when seeking essential health care services. The National Women's Law Center urges the Senate Judiciary Committee to advance Senate Bill 23-190, which promotes Coloradans' access to accurate health information.

Sincerely,



Sawyeh Esmaili  
Senior Counsel, Reproductive Rights and Health  
National Women's Law Center

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<sup>10</sup> *Turnaway Study*, BIXBY CENT. FOR GLOBAL REPROD. HEALTH, <https://www.ansirh.org/research/turnaway-study>; Diana Greene Foster, *Presentation at the American Public Health Association Annual Meeting & Expo: Socioeconomic Consequences of Abortion Compared to Unwanted Birth* (Oct. 30, 2012), <https://apha.confex.com/apha/140am/webprogram/Paper263858.html>; Diane Green Foster, et. al., *Socioeconomic Outcomes of Women Who Receive and Women Who Are Denied Wanting Abortions in the United States*, AM. PUB. HEALTH ASS'N. (March 2018), <https://ajph.aphapublications.org/doi/10.2105/AJPH.2017.304247>.

My name is Dana Villareal and I am a recent graduate from the University of Colorado Boulder, here to express my support for SB23-190. This bill addresses the deceptive advertising that anti-abortion counseling centers use to lure unassuming people in and steer them away from abortion and other time-sensitive reproductive healthcare procedures.

Having recently graduated from CU Boulder, I experienced firsthand how necessary a bill like this is for students on college campuses in Colorado. During my first few years on campus, my friends and I received coupons in coupon books designated for students for one of the anti-abortion centers, Marisol Health, near campus advertising free pregnancy tests. Like so many students who received this coupon, my friend initially believed it was for an abortion clinic or a comprehensive reproductive health center. Additionally, when you search for free pregnancy tests on this center's website, there is no indication that they don't provide abortion services or abortion referrals, and they even advertise unproven and potentially harmful procedures like abortion pill reversal. This coupon is an example of how anti-abortion centers target students with unplanned pregnancies while obfuscating the fact that they don't provide all pregnancy outcome options

As an organizer with The Brazen Project during my senior year, we began raising awareness about the presence of anti-abortion centers on campus to combat their deceptive advertising. I talked with students, leaders of student groups, and members of student government who were both unaware and horrified. Some students knew about these centers and the harm they caused because they or their friends had unknowingly gone to a center seeking services. After sharing these personal stories, members of student government were inspired to introduce a resolution to condemn the actions of these centers on our campus.

I believe that everyone should be able to make their own medical decisions in a timely manner, without fear of deceptive advertising and ideological coercion. Because of this, I urge you to vote yes on SB23-190.



CARE NET

# COLORADO

Pregnancy Center  
State Impact Report

helping communities flourish

In 2019, **33** pregnancy centers provided services & materials valued at nearly

# \$2 million

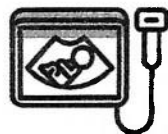
to the state of Colorado, serving **22,411** women, men, youth, & families.

## \$1,210,648 IN MEDICAL SERVICES



5,628 free pregnancy tests

3,300 free ultrasounds performed by registered nurses/medical sonographers



3,885 total STD/STI tests performed by registered nurses (2,812 patients tested - 34% male, 66% female)

8 out of every 10 pregnancy center locations in the U.S. are medical

## \$589,955 IN FAMILY SERVICES

9,276 free consultations with new clients (13% male, 87% female)

13,135 students attended free sexual risk avoidance presentations

1,789 clients received free parenting education (12% male, 88% female)

170 clients received free after-abortion support & recovery (5% male, 95% female)



## \$198,573 IN MATERIAL ITEMS



9,344 free packs of diapers

6,053 free packs of baby wipes

222 free new car seats



58 free new & used strollers

15,255 free new & used baby

clothing outfits

## MADE POSSIBLE BY

190 total staff, 18% of whom were licensed medical professionals

633 total volunteers, 8% of whom were licensed medical professionals






### DATA NOTES:

- Value of services is based upon materials and services provided by 33 pregnancy centers in the state of Colorado. At least 1 of these centers received state or federal funding in 2019.
- Total savings are calculated based on cost estimates of services, classes and baby items provided to clients. The sources for the cost estimates and valuation of items and services can be found in the Methodology section, pgs 12-14, of the 2020 CLI national pregnancy center report, "Pregnancy Centers Stand the Test of Time" ([www.lozierinstitute.org/pcr2020](http://www.lozierinstitute.org/pcr2020)), except for the following state-specific labor costs.

- The Colorado mean hourly wages referenced are as follows for: Social Workers in local/state government is \$24.77 per hour - BLS OES code 21-1029, Registered Nurses is \$36.65 per hour - OES code 29-1141, and, Diagnostic Medical Sonographers is \$40.35 per hour - OES code 29-2032.
- The estimated savings does not include housing and other monetary assistance provided to some clients. We advocate for our clients by networking with hundreds of county, state, and non-profit social service organizations around the country. We cannot quantify the value of emotional support given to the women we help through phone calls and caring volunteers.
- This report is a product of Care Net. Published March 2021.

# Born to Move Mountains

## GIVING BIRTH TO THE LIFE DECISIONS APP

Speakers  Games  Live Auction  Food!

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**\$25 TICKETS  
\$100 VIP**

The Venue @21st C Library  
1175 Chapel Hills Dr  
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**Life  
Decisions**

Connecting families facing pregnancy  
decisions  
with needed resources



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## Advocacy

# Facts Are Important: Medication Abortion "Reversal" Is Not Supported by Science

Facts are important, especially when it comes to policies and discussions that impact patients. Claims regarding abortion "reversal" treatment are not based on science and do not meet clinical standards. The American College of Obstetricians and Gynecologists (ACOG) ranks its recommendations on the strength of the evidence<sup>1</sup> and does not support prescribing progesterone to stop a medication abortion.

Despite this, in states across the country, politicians are advancing legislation to require physicians to recite a script that a medication abortion can be "reversed" with doses of progesterone, to cause confusion and perpetuate stigma, and to steer women to this unproven medical approach. Unfounded legislative mandates like this one represent dangerous political interference and compromise patient care and safety.

### What is Medication Abortion?

- Medication abortion is the use of medications, rather than a procedure, to end a pregnancy. This safe and effective evidence-based regimen includes a combination of two drugs—mifepristone, taken first, and misoprostol, taken at a later point under counsel from a clinician.
- Mifepristone stops the pregnancy growth by blocking the hormone progesterone; misoprostol makes the uterus contract to complete the abortion.

- Medication abortion is more effective when both drugs are used, because mifepristone alone will not always cause abortion. In fact, as many as half of women who take only mifepristone continue their pregnancies.<sup>ii</sup>
- Mifepristone and misoprostol are safe, effective medications that are also used for other indications.

### **So-called abortion "reversal" procedures are unproven and unethical.**

- A 2012 case series reported on six women who took mifepristone and were then administered varying progesterone doses. Four continued their pregnancies.<sup>iii</sup> This is not scientific evidence that progesterone resulted in the continuation of those pregnancies.
- This study was not supervised by an institutional review board (IRB) or an ethical review committee, required to protect human research subjects, raising serious questions regarding the ethics and scientific validity of the results.
- Case series with no control groups are among the weakest forms of medical evidence.<sup>iv</sup>
- Subsequent case series used to support use of medication abortion reversal have had similar limitations, including no ethics approval, no control group, under-reporting of data, and no reported safety outcomes.
- A 2020 study intending to evaluate medication abortion reversal in a controlled, IRB-approved setting was ended early due to safety concerns among the participants.<sup>v</sup>

### **Legislative mandates based on unproven, unethical research are dangerous to women's health.**

Politicians should never mandate treatments or require that physicians tell patients inaccurate information. This is an interference in the patient-clinical relationship and contradicts a fundamental principle of medical ethics.

Abortion is an essential part of comprehensive medical care, and a patient's decision to end a pregnancy following appropriate consultation with their trusted medical professional should be treated with respect.

## Additional ACOG Resources

[ACOG Practice Bulletin 225 Medication Abortion Up to 70 Days of Gestation \(October 2020\)](#)

[ACOG Committee Opinion 815 Increasing Access to Abortion \(December 2020\)](#)

## References

1. Hal C. Lawrence, M.D., "The American College of Obstetricians and Gynecologists Supports Access to Women's Health Care," *Obstetrics & Gynecology* vol. 125 1282, 1283 (Jun. 2015) available at [http://journals.lww.com/greenjournal/Fulltext/2015/06000/The\\_American\\_College\\_of\\_Obstetricians\\_and.2.aspx](http://journals.lww.com/greenjournal/Fulltext/2015/06000/The_American_College_of_Obstetricians_and.2.aspx).
2. Grossman D et al. "Continuing Pregnancy After Mifepristone and 'Reversal' of First-Trimester Medical Abortion: A Systematic Review," *Contraception* 92 206–211 (Jun. 2015).
3. Delgado G and Davenport M, "Progesterone Use to Reverse the Effects of Mifepristone," *The Annals of Pharmacotherapy* vol. 46 (Dec. 2012).
4. ACOG, Reading the Medical Literature
5. Mitchell D. Creinin, M.D., "Mifepristone Antagonization With Progesterone to Prevent Medical Abortion," *Obstetrics & Gynecology* vol. 135, 158-165 (Jan. 2020) available at <https://journals.lww.com/greenjournal/pages/articleviewer.aspx?year=2020&issue=01000&article=00021&type=Fulltext>.

American College of Obstetricians and Gynecologists  
409 12th Street SW, Washington, DC 20024-2188

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03/14/2023 08:12 PM

I was not able to submit my form. I was not getting any confirmation of submission. Including the details in my email below.

Name: Ethan Kopec  
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Position on Hearing Item: Against  
Representing: Self  
Phone: 7202857035  
Email: [Eman.kopec@gmail.com](mailto:Eman.kopec@gmail.com)  
Zip Code: 80127

Dear Members of the Committee,

I am writing to express strong opposition to the proposed bill SB23-188, Protecting Health Care Patients, Providers, and Assistors.

This proposed bill would violate the First Amendment rights of medical professionals and medical centers/hospitals that do not provide abortion-related services or “gender-affirming care.” Medical professionals and institutions should not be forced to provide services that go against their beliefs and values. This is a fundamental violation of the freedom of religion and the right to free speech.

Furthermore, this proposed bill would also violate the First Amendment rights of employers who do not provide abortion-related services or “gender-affirming care” in their insurance plan. Employers should have the freedom to provide insurance plans that align with their values and beliefs.

It is important to note that there is no evidence that suggests that these services are being denied to patients in the state of Colorado. Medical professionals and institutions are committed to providing quality care to all patients, regardless of their beliefs or identities.

In conclusion, I urge you to reject the proposed bill SB23-188, Protecting Health Care Patients, Providers, and Assistors. It is vital to protect the First Amendment rights of medical professionals, medical centers/hospitals, and employers. This proposed bill is unnecessary and would only create more harm than good.

Thank you for the opportunity to speak on this important issue.

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Thanks,  
Ethan



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I was not able to submit my form. I was not getting any confirmation of submission. Including the details in my email below.

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Hearing Item: SB23-188  
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Thanks,  
Ethan



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March 15, 2023

Chairwoman Gonzales and members of the Senate Judiciary Committee,

With the understanding that the abortion topic is an emotional one, we know that you will agree that it is important to focus on two key issues: 1) A woman's right to choose and 2) Science. Since Senate Bill 23-190 significantly contradicts **both** of these key elements, we strongly encourage you to OPPOSE this misguided and harmful legislation.

Senate Bill 23-190 would significantly limit a woman's right to choose. This is unacceptable! If a pregnant woman changes her mind after taking the abortion pill, why should her right to that decision be taken away? Thousands of women every year make this choice and SB 23-190 would deny this right. Politicians should not be involved in this decision.

It is important that we consider the science when communicating about Abortion Pill Reversal (APR). Scientific studies show that the APR is "safe and effective." The regurgitation of tired, misleading talking points about the APR needs to end. The link referenced above can be found on the National Institute of Health's website, a commonly accepted reference within the established scientific community.

Certainly, you agree that these decisions should be between a woman and her medical advisors. The vast majority of crisis pregnancy centers in Colorado have licensed medical professionals on staff. Their opinion and guidance should supersede the political grandstanding of government officials.

As for limiting "deceptive advertising," SB 23-190 is redundant, at best. Online companies like Google and Meta already have stringent policies in place that prohibit any misleading claims from pregnancy help centers, if not Planned Parenthood.

If you genuinely care about pregnant women understanding all of the choices before them, you will oppose coercive attempts to influence women, like those practiced at Planned Parenthood. Even some of the most pro-abortion leaders have testified to this unconscionable practice.

A quick visit to any pregnancy center in Colorado will quickly help you see that these are the places where women can truly find information about ALL of the options before them. In fact, many of these centers have programs in place for women after they have chosen abortion.

SB 23-190 is clearly harmful to women. It limits their access to medical truth and information. Certainly, this is not a stance the Colorado Senate wants to take! For these reasons, we encourage you to reject this ill-considered and deceptive piece of legislation.

Sincerely,

Scott Baker  
VP of Public Affairs



2401 Bernadette Drive Columbia, MO 65203 | (573) 445-9295 | [info@chooselifecoalition.com](mailto:info@chooselifecoalition.com)

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March 15, 2023

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Scott Baker  
VP of Public Affairs



Attempting to submit written testimony regarding Bill SB23-190Erin Bergstrom to:  
committees.lcs.ga@coleg.gov 03/15/2023 08:54 AMPlease respond to "Erin Bergstrom"

To whom it concerns.

I've been trying to submit written testimony about Bill SB23-190. However, at the end of this process, it is not confirming that you have received my input.

So here is my information again:

My name is Erin O'Roarke and I live in Loveland, Colorado 80538

I am against this bill.

I represent myself.

My phone number is 970-691-0320

My email address is peaceful\_mtn\_stream@yahoo.com

This is my written testimony:

I strongly urge you to vote against Bill SB23-190. The bill states that In Colorado, “a pregnant individual has a fundamental right to continue a pregnancy or to terminate a pregnancy by abortion; and pregnant individuals need timely and accurate information from qualified medical professionals to make informed decisions about their health and well-being.” If you believe this to be true, then this bill does pregnant individuals a grave disservice by trying to target and shut down pro-life voices and efforts in the State of Colorado. Women deserve to know all that they can to make informed and accurate decisions about an unplanned and perhaps crisis pregnancy. So don't attempt to silence or thwart the efforts of those organizations which offer additional information that pregnant individuals have the right to know. Please vote against this un-American, deceptive, and ultimately harmful bill.

Please let me know that you received this message.

Erin O'Roarke



Problem submitting Written Testimony SB23-188Haley Kopec to: committees.lcs.ga  
03/14/2023 08:08 PM  
History: This message has been replied to.

I was not able to submit my form. I was not getting any confirmation of submission. Including the details in my email below.

Name: Haley Kopec  
Hearing Item: SB23-190  
Position on Hearing Item: Against  
Representing: Self  
Phone: 3035884625  
Email: [haley.kopec@gmail.com](mailto:haley.kopec@gmail.com)  
Zip Code: 80127

**Written Testimony:**

Dear Members of the Committee,

I am writing to express strong opposition to the proposed bill SB23-188, Protecting Health Care Patients, Providers, and Assistors.

This proposed bill would violate the First Amendment rights of medical professionals and medical centers/hospitals that do not provide abortion-related services or “gender-affirming care.” Medical professionals and institutions should not be forced to provide services that go against their beliefs and values. This is a fundamental violation of the freedom of religion and the right to free speech.

Furthermore, this proposed bill would also violate the First Amendment rights of employers who do not provide abortion-related services or “gender-affirming care” in their insurance plan. Employers should have the freedom to provide insurance plans that align with their values and beliefs.

It is important to note that there is no evidence that suggests that these services are being denied to patients in the state of Colorado. Medical professionals and institutions are committed to providing quality care to all patients, regardless of their beliefs or identities.

In conclusion, I urge you to reject the proposed bill SB23-188, Protecting Health Care Patients, Providers, and Assistors. It is vital to protect the First Amendment rights of medical professionals, medical centers/hospitals, and employers. This proposed bill is unnecessary and would only create more harm than good.

Thank you for the opportunity to speak on this important issue.



SB23-190Roxie Olson to: committees.lcs.ga@coleg.gov 03/15/2023 04:27 PMPlease respond to "Roxie Olson"

Committee members:

This bill is a solution looking for a problem and a desperate attempt to silence and eliminate reproductive choice. Choice, by definition, implies options. SB190 attempts to ensure that only one option is presented to a pregnant woman and all others are silenced. It is a weaponization of government to criminalize, and thus eliminate dissenting voices. The language of the bill makes it clear that the ultimate goal is to close the doors of every crisis pregnancy center, labeled "fake clinic" within the bill. Contraceptive care and abortion are available or referred and publicly funded through every private and public health care facility in Colorado. Abortion tourism is advertised on billboards and across every form of media. Colorado is a self-proclaimed sanctuary state for abortion. In light of all this "reproductive freedom", why are the small non-profit organizations, which openly offer options, such a threat? Are there statistics supporting the laughable "safety" statement at the end of the bill? Please don't advance this bill.

Thank you.

Roxie Olson  
1678 Judson Dr  
Longmont CO 80501  
303-885-6305

[Sent from Yahoo Mail on Android](#)



2401 Bernadette Drive Columbia, MO 65203 | (573) 445-9295 | [info@chooselifecoalition.com](mailto:info@chooselifecoalition.com)

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March 15, 2023

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A quick visit to any pregnancy center in Colorado will quickly help you see that these are the places where women can truly find information about ALL of the options before them. In fact, many of these centers have programs in place for women after they have chosen abortion.

SB 23-190 is clearly harmful to women. It limits their access to medical truth and information. Certainly, this is not a stance the Colorado Senate wants to take! For these reasons, we encourage you to reject this ill-considered and deceptive piece of legislation.

Sincerely,

Scott Baker  
VP of Public Affairs

March 15, 2023

Senate Judiciary Committee  
Colorado General Assembly  
200 E. Colfax Avenue  
Denver, CO 80203

RE: SUPPORT FOR SB23-188

Dear Committee Members,

The National Women's Law Center (NWLC), based in Washington D.C., is a nonpartisan, non-profit legal and advocacy organization whose mission is centered on the protection and advancement of women's legal rights and opportunities. NWLC fights for gender justice—in the courts, in public policy, and in our society—working across the issues that are central to the lives of women and girls. We use the law in all its forms to change culture and drive solutions to the gender inequity that shapes our society and to break down the barriers that harm all of us—especially those who face multiple forms of discrimination. The Law Center strongly supports efforts to affirm and expand abortion access in Colorado, including Senate Bill 188,<sup>1</sup> and submits these comments for consideration as the Committee deliberates this vital legislation.

Access to reproductive health care is categorically fundamental to the advancement of gender equality. The decision to become pregnant or continue a pregnancy is a deeply personal choice that will have lifelong implications. The freedom to make one's own reproductive choices expands their ability to achieve equality within society by increasing earning potential, expanding educational opportunities, and limiting exposure to discrimination and bias.<sup>2</sup> This is especially imperative for Black, Latinx, Indigenous, LGBTQ, low income, and disabled women who are often routinely and systematically subject to inequities in health care, employment, and economic advancement.<sup>3</sup>

After decades of attacks on access to abortion, and especially since June 2022, when the Supreme Court overturned nearly 50 years of precedent guaranteeing the constitutional right to an abortion, reproductive freedom and health equity has been in a constant state of chaos.<sup>4</sup> People with capacity for pregnancy across the country are overwhelmed with uncertainty regarding where, when, and how they can access essential abortion care. And while anti-abortion extremists celebrated the

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<sup>1</sup> Co. S.B. 23-188, Reg. Sess. 2023.

<sup>2</sup> Nat'l Women's L. Ctr., *Abortion Rights and Access are Inextricably Tied to Equality and Gender* (2022), <https://nwlc.org/resource/abortion-rights-and-access-are-inextricably-tied-to-equality-and-gender-justice/>.

<sup>3</sup> Kiara Alfonseca, *Why Abortion Restrictions Disproportionately Impact People of Color*, ABC News (June 24, 2022), <https://abcnews.go.com/Health/abortion-restrictions-disproportionately-impact-people-color/story?id=84467809>.

<sup>4</sup> Terry Gross, *The U.S. faces 'unprecedented uncertainty' regarding abortion law, legal scholar says*, NPR (Jan 18, 2023), <https://www.npr.org/sections/health-shots/2023/01/17/1149509246/the-u-s-faces-unprecedented-uncertainty-regarding-abortion-law-legal-scholar-say>.

decision in *Dobbs v. Jackson Whole Women's Health*,<sup>5</sup> their crusade against women's health equality is far from over.<sup>6</sup> On a near daily basis, news breaks about another tactic deployed to restrict access to vital health care, even in states where abortion remain legal.

It is for this reason that legislation shielding abortion providers, patients, and assistors is crucial for ensuring health equity and strengthening gender equality across the country. Unimpeded access to abortion and gender affirming health care is a necessary component for ensuring every individual has the ability to live their life to the fullest potential, achieving whatever personal, educational, or professional goals they set forth. Safeguarding the ability to obtain essential health care is at the foundation of building an equitable and prosperous society.

The elements of this bill make certain that persons seeking reproductive and gender affirming health services protected by law in Colorado can do so without fear of discrimination, retaliation, or harassment by those seeking to impose political ideologies on the lives and wellbeing of others. The bill ensures that providers and physicians can administer comprehensive reproductive and gender-affirming health care without fear of having a contract terminated, insurance cancelled, or a license revoked because of their decision.<sup>7</sup> Furthermore, the bill prohibits law enforcement from making an arrest or obtaining a warrant to search or acquire electronic communications in connection with an investigation into health care activity that is legal in Colorado.<sup>8</sup> As communities of color are disproportionately targeted by police,<sup>9</sup> these provisions are critical to ensure that Black, Latinx, Indigenous, and LGBTQ individuals are not criminalized simply for seeking legally protected medical services. When equal health care access is codified by protections like those proposed in this legislation, every citizen benefits from the opportunity to live in a more fair, just, and flourishing environment.

Colorado has long stood at the forefront of advancing health equity and gender justice. As the first state to decriminalize abortion, several years before the decision in *Roe v. Wade*, Colorado has solidified its status as a safe haven for those seeking and providing equitable health care. Months before the Supreme Court's catastrophic *Dobbs* decision, the Colorado legislature passed the Reproductive Health Equity Act, which further reinforced the state's dedication to reproductive freedom, codified the right to abortion and contraception, and expanded Coloradans' access to equitable health care. When people can make the health care decisions that are best for their lives, communities thrive, building a society where each of us can participate with dignity. NWLC urges the Senate Judiciary Committee to advance Senate Bill 188, a significant step towards equality for all Coloradans, and a noble example for the rest of the country.

Sincerely,



Sudria Twyman  
Legal Fellow  
National Women's Law Center

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<sup>5</sup> *Dobbs v. Jackson Women's Health Org.*, 142 S. Ct. 2228 (2022).

<sup>6</sup> Nat'l Right to Life, NRLC Post-Roe Model Abortion Law (July 4, 2022), <https://www.nrlc.org/wp-content/uploads/NRLC-Post-Roe-Model-Abortion-Law-FINAL-1.pdf>.

<sup>7</sup> Co. S.B. 23-188, §2-5, Reg. Sess. 2023.

<sup>8</sup> *Id.* at § 6-12.

<sup>9</sup> Radley Balko, There's Overwhelming Evidence That the Criminal Justice System Is Racist. Here's the Proof. *The Wash. Post* (June 10, 2020), <https://www.washingtonpost.com/graphics/2020/opinions/systemic-racism-police-evidence-criminal-justice-system/>.



SB23-190Roxie Olson to: committees.lcs.ga@coleg.gov 03/15/2023 04:27 PMPlease respond to "Roxie Olson"

Committee members:

This bill is a solution looking for a problem and a desperate attempt to silence and eliminate reproductive choice. Choice, by definition, implies options. SB190 attempts to ensure that only one option is presented to a pregnant woman and all others are silenced. It is a weaponization of government to criminalize, and thus eliminate dissenting voices. The language of the bill makes it clear that the ultimate goal is to close the doors of every crisis pregnancy center, labeled "fake clinic" within the bill. Contraceptive care and abortion are available or referred and publicly funded through every private and public health care facility in Colorado. Abortion tourism is advertised on billboards and across every form of media. Colorado is a self-proclaimed sanctuary state for abortion. In light of all this "reproductive freedom", why are the small non-profit organizations, which openly offer options, such a threat? Are there statistics supporting the laughable "safety" statement at the end of the bill? Please don't advance this bill.

Thank you.

Roxie Olson  
1678 Judson Dr  
Longmont CO 80501  
303-885-6305

[Sent from Yahoo Mail on Android](#)



SB23-190 OPPOSECRUZ Family to: committees.lcs.ga@coleg.gov 03/14/2023 08:31 PM

Good day,

The system will not permit my submission of written testimony for SB23-190 and does not provide a reason. The online portal instructed me to contact you if I was having trouble. Below is the testimony I want submitted for the hearing on March 15, 2023. I am working and cannot attend in person.

This bill seeks to ban Abortion Pill Reversal and to restrict pregnancy center advertising without accurate information about these centers. At the press conference, pro-abortion groups unleashed a parade of mischaracterizations and lies about pregnancy centers. There are no deceptive practices, except for the wording of this bill.

The truth, experienced in person and 30 years later as a volunteer, is that pregnancy centers have the capacity to help women and their babies through care, compassion, ultrasounds, as well as parenting mentors for women AND MEN! Over 60% of Care Net affiliates offer medical services staffed by licensed medical personnel. An academic journal, Conception, recently published an analytically rigorous study showing that pregnancy centers offer better and less costly pregnancy services to women than abortion facilities. Pregnancy centers also offer early pregnancy care services (initial prenatal exams, full panel STD testing, prenatal labs, pap tests and breast exams). Patient autonomy is respected and center come alongside pregnant clients to help them parent or help them with an adoption plan. At one particular center, 97% of patients provided positive feedback. Abortion Pill Reversal (APR) is successful 64-68% of the time, according to National data from Heartbeat International. All state guidelines are following for STD/STI results. I know of at least 3 centers providing one-on-one parent mentoring, and they do not discriminate on the basis of sexual orientation, race, religion or disability and provide pregnancy care to anyone, including LGBTQ patients. They also offer onsite professional counseling for clients who need support beyond their parenting coach. An audit of Life Network revealed 79.9% of our funding goes directly to programs that benefit the women, men and the families we exist to serve.

Please oppose this bill and know the facts so we don't prevent valuable resources to women who change their minds and need help.

Sonia Cruz  
29 N Ely St  
80911  
831-222-0815

To the House Health and Insurance Committee:

**SB23-190 Prohibiting Deceptive Practices at Anti-Abortion Centers**

Sponsors: Sens. Faith Winter and Janice Marchman, and Reps. Karen McCormick and Elisabeth Epps.

If enacted, SB 190 would:

**1. Ban the Abortion Pill Reversal (APR) treatment.**

I am an Advocate for Woman and Unborn children. Many Women who get Abortions either early on or later in their pregnancy regret their decision. When these women are experiencing the highest level of hormonal imbalances and are at their most vulnerable this is not a good time to make a decision that will impact the rest of her live or her unborn child's life. Many Women feel they were being forced to make a knee jerk decision based off others needs or opinions. I say, who will suffer the consequences, not the others but the mother and child. These women need counseling from people who care about them today and tomorrow. When that motherly instinct sets in to protect her child and when no one told her "She is already a mother". That is why the Abortion Pill Reversal is so important it gives these women who feel they made the wrong decision at a WEAK moment another chance, a chance to be a mother. These women now have a window in time, a chance for a do over to save their baby's lives. These Women who found out about the Abortion Pill Reversal through Pregnancy centers are very thankful for this life saving procedure.

Unfortunately, many Women who got abortions in the past never heard of the Abortion Pill Reversal and wish they had. These women today only have nightmares and regrets of their unborn children and their denied motherhood.

The Second-best thing about the Abortion Pill Reversal is that it's Progesterone, a natural Hormone that women naturally make in their bodies and carry so it is not harmful or alien to the women's body.

**2. Ban advertising of Pregnancy Resource Centers.**

Pro-Abortion lawmakers are attempting to shut-down life-affirming alternatives to abortion for women experiencing an unexpected pregnancy, again *eliminating choice*.

Pregnancy Resource Centers (PRC) are life-affirming centers that provide care and resources to assist women and families with immediate and ongoing needs related to unexpected pregnancy. Their focus and advertisement on alternatives to abortion is designed to empower a woman to welcome her child into the world. Pregnancy Resource Centers outnumber abortion clinics 51-20 in the state of Colorado, which is why the abortion-lobby is pushing Colorado lawmakers to eliminate life-affirming choices for women.

This is a violation of Pregnancy Resource Centers' First Amendment rights by compelling state-sanctioned disclosures for pregnancy centers regarding abortion, which has previously been acknowledged as a violation of freedom of speech by the U.S. Supreme Court.

This bill "prohibits a public entity from denying, restricting, interfering with, or discriminating against an individual's reproductive rights". This bill will, in fact, prohibit and deny any public entity, any open conversation, statistics, education, counseling or scientific documentation that is contrary to the pro-abortion narrative. In other words, it will deny the good people of Colorado our First Amendment Rights under our U.S. Constitution.

This bill falsely asserts it can determine the point at which a person's life is valuable. It will force Pro-Life Pregnancy Centers, doctors and nurses to provide abortions against their conscience in order to stay in business.

These women deserve another chance and need to hear the TRUTH about their Life Choices. Life begins at conception and lasts until natural death. May God soften your Hearts to say no to SB23-190.

Sincerely,

Adella Engel



**SB23-190 Written Testimony**  
**Bailey Foster** to: committees.lcs.ga

03/14/2023 09:13 PM

To whom it may concern:

I attempted to submit written testimony on bill online. Unfortunately, the form was not functioning properly. Please accept the statement below as my written testimony on the proposed bill.

It is my sincere belief that women are capable, intelligent individuals who have the right to know ALL of their options surrounding reproductive healthcare. And when a woman is making a choice about the outcome of her pregnancy, she should have the necessary resources and information to select the best option for her - including medically accurate information on abortion, abortion pill reversal, carrying a child, and giving birth (as well as information about adoption and parenting). If a woman chooses to terminate her pregnancy using the abortion pill - then regrets that decision after taking the first dose - she should have a second chance at choice and be able to pursue reversal of the chemical abortion under the medically sound guidance of a professional. It is cruel and inhumane to eliminate this choice for women.

Furthermore, progesterone (uses in abortion pill reversal) has been safely used for over 50 years to help prevent premature births, treat histories of multiple miscarriages, and even support pregnancies after IVF. It is ignorant to label this treatment as "unsafe" or unsupported by science. Additionally, the abortion pill itself comes with significant risk, as well as physical and emotional trauma. Yet women are not banned from seeking this option.

Please do a service to women who deserve the right to access every option, and oppose SB23-190.

With gratitude,

Bailey Foster

Sent from my iPhone