


AMANDA NEDWESKI

STATE REPRESENTATIVE • 61ST ASSEMBLY DISTRICT

January 22, 2024

Assembly Committee on Health, Aging, and Long-Term Care
Testimony on Assembly Bill 975

Chairman Moses and esteemed members of the Committee - thank you for holding a public hearing on Assembly Bill 975.

First, I am 100%, absolutely, unabashedly pro-life. If it were up to me alone, there would be no abortions in this world. I believe that life begins at conception, and that an abortion at 1 week, 14 weeks, or 20 weeks are equally as tragic in ending a life.

Certainly, this is not up to me alone, and people have a wide range of personal feelings about this issue. As a realist and a pragmatist, I authored this life-saving legislation to ask the people what they want. To find out where we truly are in this society. What is the value of life?

I am not without compassion for women in crisis. In my heart, compassion led me to sign onto legislation that would allow exceptions for abortions in the tragic incidence of incest or rape, as any normal person might do.

Normal human nature, that gives us the desire to help one another, inspired me to author legislation that would fund critical services for mothers and babies provided by pregnancy resource centers, such as the Alliance Women's Clinic in my hometown of Kenosha.

I know there are healthcare accessibility, educational, and cost problems that I cannot solve here today with this bill, but that I have demonstrated my commitment to women's health with support for over the counter birth control accessibility and extended prescriptions for oral contraceptives.

Sadly, I also know that we are a country that has witnessed an unbelievably mournful disintegration of the value of life in our culture since 1973. I know that we have a hope problem.

I also know that everyone in this room cares deeply about their community and about the people of the great state of Wisconsin. I know that we don't always agree, but that when we listen to the people we serve – and to each other - the best solutions come forward. It's time to listen to the People about abortion.

Assembly Bill 975 is a nothing more than a proposal to ask the voters of Wisconsin a question.

Should the current law allowing abortions up to the postfertilization age of 20 weeks be changed to a 14 week postfertilization age?

Last month, a Dane County judge ruled that the 1849 law does not actually apply to consensual abortions, but that it only applies to feticide - defined as, "the intentional killing of a preborn child without maternal consent." As a result of this decision, elective abortions are currently being performed in Wisconsin under the law passed in 2015, which allows abortions to a postfertilization age of not more than 20 weeks [253.107\(3\)\(a\)](#).



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District Attorneys Urmanski, Chisholm, and Ozanne – three defendants in the case for counties in which abortions are now being performed – agreed that they would respect the declaration of the judge and refrain from prosecuting consensual abortions as a crime under §940.04. Therefore, the requested injunction to prevent them from prosecuting was not needed or issued.

The FACT is that consensual abortions up to 20 weeks are legal in Wisconsin today. That is the sad reality.

WHY ARE WE HERE TODAY?

43 states prohibit abortions after a point in time in pregnancy. Most European countries also limit abortion to the first trimester. Allowing abortion well into the second trimester is rare throughout the U.S. and the rest of the civilized world. We are here to ask the People of Wisconsin if they agree.

The proposed ballot question in AB 975 is responsive to standards that **public opinion** has deemed normal in many other states, whether we like it or not. No other aspects of Wisconsin's existing abortion-related laws are changed with this legislation. There will still be exceptions for medical emergencies after 14 weeks, and all other waiting period and ultrasound requirements remain in place.

The current majority on our state's highest court have already usurped the constitutional authority of the People's duly elected representatives on other issues. The People should be deciding on abortion, not the Court.

WHAT ARE THE POSSIBLE OUTCOMES?

1. If voters say "yes" to this referendum question, the law changes to allow abortions up until 14-weeks.
2. If voters say "no" to this referendum question, nothing changes. The 20 week standard remains the law.
- 3.

WHY OPPOSE A REFERENDUM?

In truth, putting this referendum on the April 2024 ballot is a political threat to all sides. Lobbies and organizations have been using unsettled abortion arguments as fundraising mechanisms for decades. Political parties use abortion as an emotional shiny object to distract people from what's really going on.

If the People have a voice in settling this issue, we might actually be able to focus on some other issues that affect our state. It would force us to talk about everything, not just this singular issue. That doesn't mean the fight is over, it means that we have a better idea of where and how to examine the cultural conflict on abortion going forward. It puts the power back in the hands of the People, where it belongs. It's high time that we stop exploiting the lives of the unborn to leverage political gain.

I will do everything I can in my life to give a voice to those who cannot speak for themselves, but I will not participate in using God's precious gift of life to fight my adversaries. We have a hope problem – it cannot be solved with policy. We must listen to the hearts of the People.



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Ask yourself, why are you afraid of the People's truth?

What we are NOT here to discuss today:

1. Whether abortion is right or wrong morally.
2. Healthcare affordability and accessibility.
3. The rights of a pregnant woman versus the rights of an unborn child.
4. Scientific assertions as they relate to the concepts of viability or the ability of an unborn baby to feel pain at any given stage in pregnancy.
5. Roe vs. Wade or the Dobbs decision
6. The criteria that legally constitute a medical emergency, as those are already outlined in current law.
7. Whether or not men have a right to an opinion on abortion.
8. Social injustice claims as they relate to abortion.
9. Medical practices and related laws and regulations about abortion.
10. Specifics of laws in other states or countries.
11. Statistics – you know where to find them.

Upon conclusion of this testimony, Rep. Rozar and I will take questions as they relate to the content and context of the bill. The public hearing is a forum for asking questions, not for political grandstanding with tear-filled campaign speeches directed at the cameras. I am not here for theater, and I request that we treat all in attendance today with the respect they deserve for showing up and expressing their views without having to be roped into highlight reels for campaign fodder.

Debate should take place in executive session, not with people who have come to testify, regardless of their viewpoints.

With that, I yield to Representative Rozar.



DONNA M. ROZAR

STATE REPRESENTATIVE • 69TH ASSEMBLY DISTRICT

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Testimony before the Assembly Committee on Health, Aging and Long-Term Care

Assembly Bill 975

January 22, 2024

Thank you, Chair Moses and members of the Assembly Committee on Health, Aging and Long-Term Care for holding this hearing on Assembly Bill (AB) 975. Also, I would like to thank Representative Nedweski for her thorough testimony in favor of this Bill.

I support AB 975 because it uniquely allows the public to weigh in on a highly contentious issue in our state. Since 1973, when *Roe v. Wade* was decided, the general public has never directly influenced abortion policy in the United States. Rather, nine unelected judges have decided the fate of abortion policy in our country and if allowed to do so, the Wisconsin Supreme Court will uphold a horrible ruling by a single circuit court judge overturning the prevailing law. If AB 975 passes the legislature and is signed into law by Governor Evers, the general public will vote on the implementation of this law by a statewide binding referendum in April. Thus giving voters at-large the ability to decide abortion policy in Wisconsin.

Additionally, I expect those on the other side of the aisle to put their figurative money where their mouth is by supporting AB 975. There is a lot of discussion about involving the public at-large with some polls showing that limited access to abortion is fairly popular. This Bill gives the other side what has been requested and I ask that we give the voters a chance to decide and not play political games with this crucial issue.

Thank you for your kind attention and support of this Bill. It is my sincere hope that we can work together to give Wisconsinites a voice on this pivotal issue.



MARY FELZKOWSKI

STATE SENATOR • 12TH SENATE DISTRICT

Testimony on AB 975

Assembly Committee on Health, Aging and Long-Term Care

Senator Mary Felzkowski

12th Senate District

January 22, 2024

Good afternoon Chairman Moses and Committee Members,

Thank you for taking the time to hear testimony on Assembly Bill 975, contingent legislation updating Wisconsin's 175 year old abortion law, which will create regulations that mirror the stance of today's Wisconsinites when it comes to this issue.

As my co-authors have explained, this bill will allow for abortions up until 14 weeks post-fertilization. This legislation employs a dual step process before it can become enacted into law. First, the bill must move through the legislative process in both houses, just like any piece of legislation, and then be signed into effect by the Governor. Following that, it must be ratified by the voters this spring, where every Wisconsinite will have the ability to weigh in directly on this uniquely sensitive issue.

Since Roe was overturned, I have spent countless hours speaking to my constituents, hearing their perspectives, and trying to understand the weight of this particular issue. Surveys from the constituents of the 12th Senate District, as well as anecdotal conversations I've had in the grocery stores and libraries up north, indicate to me that 14 weeks is a compromise most of my constituency feels comfortable with.

However, out of an abundance of respect for how sensitive this issue is, we would like to hear directly from the voters whether they agree that this is what they want the law to be - striking a balance between protecting life, and showing compassion and respect for women who find themselves in difficult situations.

When it comes down to it, we are asking this Committee a simple question: Do you want to give your constituents an opportunity to weigh in on this issue directly?

Thank you all for taking the time to listen to testimony and debate on this important legislation.



Assembly Bill 975
Written Testimony
Assembly Committee on Health, Aging, and Long-Term Care
January 22, 2024

Chairperson Moses and members of this committee, thank you for holding this hearing on Assembly Bill 975.

Assembly Bill 975 seeks to amend current abortion regulations by adjusting the prohibition timeline to 14 weeks postfertilization, except in cases of medical emergencies. This bill takes a thoughtful and balanced approach to addressing the complex issue of abortion while maintaining a focus on protecting the health and well-being of both the pregnant woman and the unborn child.

The proposed bill preserves the existing definition of "postfertilization age" from current law and adjusts the prohibition threshold to 14 weeks. This limit is comparable to regulations currently in place in most European countries.

This change is well-grounded, considering the medical advancements and increased understanding of fetal development. The bill maintains an exception for medical emergencies which threaten the pregnant woman's life or which risk "substantial and irreversible impairment of major bodily functions." This ensures that the health and safety of the pregnant woman remain paramount, aligning with ethical medical practices. By doing so, the bill strikes a reasonable balance that respects the right to life for the pregnant woman and the life of the unborn child.

Finally, the inclusion of a referendum ratification requirement places this important issue before the people. Allowing the electors to vote on the implementation of the proposed statutory provisions ensures that the community has a say in shaping its values and policies. This level of public participation adds an important layer of legitimacy to the legislative process.

I urge the committee to carefully consider the merits of Assembly Bill 975 and recognize its potential to create a balanced legal framework that respects the diverse perspectives on this sensitive issue.

Thank you for your time and consideration of this bill.

Testimony against Bill 975

My name is Maya Seshan, and I am a medical student at the Medical College of Wisconsin in Milwaukee and hopeful future OB/GYN from West Allis. My words today are in no way on behalf of my institution, although I know many of my classmates share my opinions.

Prior to medical school, I worked for over 5 years within the field of Obstetrics and Gynecology as a clinical assistant taking care of patients who suffered from severe gynecologic diseases and infertility. I witnessed extremely challenging pregnancies, painful labors, and necessary abortions. This is why I was appalled to hear of the further efforts by lawmakers within our state to restrict access to essential healthcare even after the clear December 5th ruling by judge Schippler. Though I appreciate the intentions of the representatives that authored this bill to “save lives”, I would like to strongly emphasize that the passage of this bill would only endanger them. Though a few of the authors of this bill have worked within healthcare, to my knowledge, none of the authors of this bill understand the nuances of every pregnant person’s life and therefore cannot speak to the barriers and complexities that all pregnant people face. This bill proposes restrictions that would ban abortion beyond 14 weeks for no scientifically or medically based reason.

In my own experiences of working in obstetrics and gynecology clinics, I have encountered numerous people for whom abortions beyond 14 weeks became necessary for reasons that were essential but outside of the strict definition of – “medical emergencies or serious risk of substantial and irreversible impairment of a major bodily function”. Sometimes these were financial burdens, oftentimes these were other complicating illnesses, and neither lawmakers nor physicians can define those critical needs for our patients/constituents. Reproductive choice means providing care for each individual in a way that is best for them- and curtailing these choices via restrictions is unacceptable.

As a student and future physician who serves the people of Wisconsin- it is undoubtedly my role to advocate for my patients and I am here to tell you that clear action is needed on this issue, and it is simple. This bill cannot pass. There is no need to re-litigate this issue and waste more time and effort on a referendum when the law, when our patients, and when the science is already clear. I implore you to oppose this bill.

Maya Seshan
MD Candidate MCW Milwaukee
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Dear Wisconsin State Assembly Committee,

My name is Madalynn Welch, and I am a medical student at the Medical College of Wisconsin in Milwaukee, Wisconsin. I am an aspiring physician in the field of OBGYN and reproductive justice; I am a retired CNA at the main birthing center in Madison, Meriter, where they also have some of the worst infant and maternal mortality rates; I am a doula; I am a sister; I am a daughter and granddaughter; and I am a sexual assault survivor. Through my different identities, I see the implications of reproductive access and justice.

Following the overturning of Roe v Wade, my 68-year-old grandma called me, crying, and said "Madalynn, I have never had to fight for my right to an abortion, but I am so scared for you and your sisters." I will never forget that.

I am proud of the hard work Planned Parenthood has done to resume abortion access in Wisconsin following the Dobbs decision, but it is not enough to have only 3 locations in all of Wisconsin that provide abortions. It is not enough to say abortions are banned past 14 weeks gestational age. It is not enough to tell my patient who lives paycheck to paycheck with no savings to financially plan and take the day off work, find childcare, find transportation, and drive 3 hours from Trempealeau, WI to Madison, WI to get an abortion before 14 weeks. It is not enough to tell my sister, in 8th grade, to get on birth control from now throughout her entire fertile years just in case "something" happens. It is not enough for a patient to ask me if they have a choice in their reproduction, and I respond, "I don't know". It is not enough for physicians, students, and residents to fear giving abortion information let alone performing, teaching, and learning abortions. It is not enough, nor fair, to tell any person ever that they must have a child unless they meet certain qualifications.

It is necessary for abortion access in Wisconsin to be unrestrictive. I urge you to expand rather than further restrict abortions in Wisconsin. Our patients, our friends, our classmates, and our loved ones need to feel safe and protected in this state – in healthcare and in politics.

Thank you for your time and consideration,

Madalynn Welch

MD Candidate

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Testimony in Opposition to Assembly Bill 975

Good afternoon, my name is Carly Klein. By day, I am a licensed clinical social worker who has been proudly serving the community of Milwaukee for eight years. By night, I am the outreach co-chair of Reproductive Justice Action- Milwaukee. We are THE grassroots organization that fought to have the abortion referendum added to Milwaukee's 2023 spring election ballot. Where over 75% of Milwaukee County voting residents showed their support for safe and legal abortion. We are the same organization that worked tirelessly to have a resolution passed by the Milwaukee County Board of Supervisors stating that they believe the abortion ban was a public health crisis.

Since the overturning of Roe v Wade, we have not stopped advocating for what the community wants and needs, which is safe and accessible abortion. It was due to the power of grassroots organizing and nonprofits abortion services resumed this September. We at Reproductive Justice Action- Milwaukee believe it is our responsibility to hold politicians accountable when they are making choices that are harmful to the community and that is why I stand before you today.

I am in opposition to Assembly Bill 975 due to its negative ramifications on the communities I work with. As a Social Worker, I have worked with both children and adults. I have assisted many pregnant people in accessing legal and safe abortions and for those who have never had to navigate that maze, let me tell you it's not as easy as the anti-choice and "family values" rhetoric makes it seem.

Even with abortion being legal again in our state, people are still being forced to carry out pregnancies due to the barriers of cost, mandatory waiting periods and lack of access in rural communities. I have heard countless heartbreaking stories of children who were forced to be raised by parents who never wanted them. Representatives do your family values include the middle school child, who no longer wants to be alive, because their parents told them that they wished they never existed every night? Or the child asking if they are going to return to therapy tomorrow because they are getting kicked out of foster care, have nowhere to sleep tonight and I can't give them an answer?

I strongly encourage each of you to stand up for what is just and right and vote against this referendum being added to the April 2024 election ballot. Reproductive Justice Action- Milwaukee is working closely with MARRCH to make abortion more accessible in Wisconsin. We are collecting petition signatures, showing support for expanding abortion access. Our petition demands align beautifully with the Reproductive Freedom Act being proposed by Representative Franchesca Hong and Senator Kelda Roys. Today I urge you to be on the right side of history and not only vote in opposition to Assembly Bill 975 but to sign on to Assembly Bill 775, 776, and 777.

I want to thank you for allowing me the time to voice my concerns with you today. I encourage each Wisconsin State Assembly member of the Committee on Health to stand in support of your community's health and safety by supporting reproductive freedom and access to life saving procedures in our state. We will be reaching out to each of you personally to discuss your support of the Reproductive Freedom Act. It is time we stop infringing on people's autonomy with harmful legislation, like Assembly Bill 975, and to start fighting for the freedom of the people.

Testimony By:

Carly Klein, LCSW, 53211

Reproductive Justice Action- Milwaukee

262-951-0011

Reproductivejusticeaction.mke@gmail.com

Good afternoon, my name is Johanna Nevin and I use they/them/theirs pronouns. I am a proud queer and transgender person with endometriosis, a Milwaukeean and founding member of a group called Reproductive Justice Action - Milwaukee (RJAM), which was formed after the overturn of Roe v. Wade. Through RJAM's work as a group we have learned that over 75% of Milwaukee County voters value the right to accessing abortion care— WITHOUT restrictions.

I am in opposition of Assembly Bill 975 because it would put an extreme limitation and restriction on accessing safe and legal abortions. That is the antithesis of what we know the people of Milwaukee county want. As representatives, you're supposed to work towards and advocate for our freedom(s), but Assembly Bill 975 is ripping away freedom. Not only is it ripping away freedoms that we are entitled to, these restrictions pose a great physical health risk to someone like me with endometriosis. With endometriosis, most pregnancies are likely to end in miscarriage or to be ectopic, which requires immediate action; abortion, to prevent the pregnant person from dying.

As a country, we are facing some of the worst inflation we have ever seen, and Wisconsin's experience is no different. Why should people be forced to birth children they can't afford? Let alone the bill from the hospital because of the forced birth. Is living below the poverty line part of the "family values" you speak of? What does placing any restrictions or limitations on accessing abortion actually do for anyone? I need answers. Because you work for us, not the other way around. You serve us, not the other way around.

I am asking and encouraging that you vote against this Assembly Bill 975 from being added to the April 2024 election ballot. Doing so would be aligning yourself with freedom, safety, and what the people of Wisconsin want and need. The results of shortening the availability to receive abortion care services

Testimony By:

Johanna Nevin

Reproductive Justice Action- Milwaukee

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TO: Members, Assembly Committee on Health, Aging and Long-Term Care

FROM: Gracie Skogman, Legislative Director, Wisconsin Right to Life

DATE: Monday, January 22nd, 2024

RE: Opposition to AB 975, 15 Week Abortion Referendum.

Thank you, Chairman Moses and members of the committee for your time today. My name is Gracie Skogman, Legislative and PAC Director at Wisconsin Right to Life, speaking in opposition to Assembly Bill 975.

The Heal Without Harm (HWH) Coalition, comprised of Wisconsin Right to Life, Pro-Life Wisconsin, Wisconsin Family Action, and the Wisconsin Catholic Conference, opposes the introduction of an abortion referendum during a time when the current state abortion ban, Wis. Stat. 940.04, continues to proceed through the court system. The HWH Coalition will continue to defend s.940.04, a lifesaving law which has saved over 1,500 lives¹ since the overturning of *Roe v. Wade*.

In the months following the overturning of *Roe v. Wade* and up until today, many Pregnancy Resource Centers across Wisconsin have seen a massive increase in clients and have been able to serve thousands of women who otherwise planned to seek an abortion. These women have been able to find supportive services such as ultrasounds, diapers, parenting classes, and housing.

We have heard firsthand from these women and been able to meet some of the children who are here today because of s.940.04. Their lives are unique, precious, and worthy of protection. 94%² of abortions happen before 15 weeks, meaning the vast majority of these children would not be here today if this proposal were to carry forward.

The abortion issue is not something that can be addressed in one legislative session, or through one piece of legislation. The pro-abortion industry will fight every day to expand abortion up until the moment of birth across this country, including here in Wisconsin.

The message of the pro-life movement is one of hope, hope for preborn children and hope for women facing challenging circumstances. Our message is one of compassion and support for women while the pro-abortion industry only offers death and despair. We call on all pro-life elected officials to stand courageously in defense of all preborn children and their mothers, and to advocate for full support for both. Thank you very much for your time,

Gracie Skogman

¹ <https://www.cbs58.com/news/study-more-than-1500-estimated-births-in-wisconsin-after-abortion-access-was-paused-after-roe-v-wade-was-overturned>

² <https://lozierinstitute.org/fact-sheet-abortion-at-15-weeks-in-the-united-states/>



ProLife
LOVE. FOR LIFE. WI.

**Testimony in Opposition to Assembly Bill 975: relating to abortion if the probable postfertilization age of an unborn child is 14 or more weeks and requiring a referendum
Assembly Committee on Health, Aging and Long-Term Care
By Matt Sande, Director of Legislation / January 22, 2024**

Good afternoon, Chairman Moses and Committee members. My name is Matt Sande and I serve as director of legislation for Pro-Life Wisconsin. Thank you for this opportunity to express our opposition to Assembly Bill (AB) 975, legislation that would prohibit abortion if the probable postfertilization age of an unborn child is 14 or more weeks and requiring a referendum.

The Heal Without Harm (HWH) Coalition, comprised of Wisconsin Right to Life, Pro-Life Wisconsin, Wisconsin Family Action, and the Wisconsin Catholic Conference, opposes the introduction of an abortion referendum during a time when the current state abortion ban, Wis. Stat. 940.04, continues to proceed through the court system. The HWH Coalition will continue to defend s.940.04, a lifesaving law which has saved over 1,500 lives since the overturning of *Roe v. Wade* on June 24, 2022. We ask the Wisconsin Legislature to wait until the court challenges are resolved before proposing new abortion limits.

The past three decades, the four organizations comprising the Health Without Harm Coalition have defended Wisconsin's pre and post *Roe* criminal abortion statute, s.940.04, from multiple attempts by pro-abortion Democrats to repeal it. We intend to sustain our defense of Wisconsin's abortion ban as Sheboygan County District Attorney Joel Urmanski moves forward with his appeal of the Dane County Court's recent ruling overturning it. We ask you, the Wisconsin Legislature, to do the same.

Judge Diane Schlipper's ruling that all of s.940.04 has nothing to do with a consensual, medically induced abortion defies the plain wording and meaning of the statute. It is an extraordinary leap in logic. This grossly erroneous ruling must be appealed, and the legislature's premature support for a new abortion ban, AB 975, signals to the state court system that the judge was correct in her ruling. This is the wrong message for Wisconsin's lawmakers to send.

We cannot predict the future. We simply do not know if the Wisconsin Court System will rule s.940.04 enforceable or unenforceable. If our elected judges rule the statute unenforceable, pro-life legislators will then have to pass a new abortion ban. That could look like many things. It could be an abortion ban from conception with no exceptions, such as 2023 Senate Bill 343 which the Wisconsin Senate just passed in October. It could be a six-week ban, or heartbeat bill, like 2021 Assembly Bill 1065. Or it could be a 14 week ban with a referendum like 2023 Assembly Bill 975 before us today. What is paramount is that the Wisconsin Legislature does not act before our courts make a final ruling on s.940.04. That would be anticipatory surrender. And it would have zero practical effect as the Governor has stated his firm intention to veto any bill that would place any limits on abortion.

Thank you for your consideration. On behalf of the tens of thousands of pro-lifers across Wisconsin that the Heal Without Harm Coalition represents, we urge you to oppose AB 975. I am happy to answer any questions from Committee members.



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**TESTIMONY IN OPPOSITION TO ASSEMBLY BILL 975
ASSEMBLY COMMITTEE ON HEALTH, AGING, AND LONG-TERM CARE
MONDAY, JANUARY 22, 2024
JACK HOOGENDYK, LEGISLATIVE AND POLICY DIRECTOR**

Chairman Moses and members of the Committee on Health, Aging and Long-Term Care, thank you for providing the opportunity to testify on Assembly Bill 975. I am Jack Hoogendyk, Legislative and Policy Director for Wisconsin Family Action and part of the Heal Without Harm Coalition.

The Heal Without Harm (HWH) Coalition, comprised of Wisconsin Right to Life, Pro-Life Wisconsin, Wisconsin Family Action, and the Wisconsin Catholic Conference, opposes the introduction of an abortion referendum during a time when the current state abortion ban, Wis. Stat. 940.04, continues to proceed through the court system. The HWH Coalition will continue to defend 940.04, a lifesaving law which has saved over 1,500 lives since the overturning of *Roe v. Wade*.

Mr. Chairman, as you and the members of this committee know, Wisconsin has a law on the books, statute 940.04 titled "Abortion," that provides protection for the unborn children of our state from the unscrupulous actions of rouge medical practitioners who might invade the womb of a pregnant woman to destroy the life of her unborn child. That law stood until that fateful day in 1973 when 7 men on the United State Supreme Court ruled that states had no right to pass laws protecting unborn children. Wisconsin's law was essentially struck down but has remarkably remained in the statutes, despite efforts over the years to revoke it.

After nearly 50 years, in June, 2022, the U.S. Supreme Court reversed that decision in its *Roe v. Wade* ruling and gave the power back to the states on this issue. As a result, statute 940.04 was once again the law in Wisconsin, and the unborn babies' right to life was protected.

Mr. Chairman, that law still stands. The practice of elective, intentional abortion, the killing of a healthy child in her mother's womb is illegal in Wisconsin. We must fight to preserve that protection. I know, a judge in Dane County has ruled that this statute only applies to "feticide" and not to elective abortion. And I know that our current Attorney General has opined that the law is unenforceable. Strangely, no one has ever made such a ruling or expressed such an opinion since 940.04 was passed, in spite of repeated efforts to revoke this statute.

Mr. Chairman, and members of this committee, as reported by the Pew Research Center, according to the Centers for Disease Control and Prevention (CDC) 93% of abortions occur before the 13th week of pregnancy.¹ To prohibit abortion at 14 weeks is virtually meaningless. Unborn children are human persons from the moment of conception. Why would we remove the protection that is place for the unborn except those who can survive until the 14th week?

Please do not water down one of the best laws in the United States protecting unborn children. Let's fight to preserve that law. And, if our state Supreme Court decides to hear arguments in an attempt to overturn that law, let's wait to see how they rule, and then, if necessary, we can consider new legislation to once again protect our littlest citizens. Many have said before me that the ultimate test of our greatness as a nation is the way we treat every human being, but especially the weakest and most defenseless. If we seek equal justice and true freedom for all, then we must defend human life.

We urge this committee to reject this bill. Thank you.

¹ [Abortion in the U.S.: What the data says | Pew Research Center](#)



WISCONSIN CATHOLIC CONFERENCE

TO: Representative Clint Moses, Chair
Members, Assembly Committee on Health, Aging and Long-Term Care

FROM: Tia Izzia, Associate Director for Human Life & Social Concerns

DATE: January 22, 2024

RE: Opposition to Assembly Bill 975, 14 Week Abortion Referendum

On behalf of the Wisconsin Catholic Conference, the public policy voice of the bishops of Wisconsin, thank you for the opportunity to testify in opposition to Assembly Bill 975, prohibiting abortion at 14 or more weeks and requiring a referendum before going into effect.

The Heal Without Harm (HWH) Coalition, comprised of Wisconsin Right to Life, Pro-Life Wisconsin, Wisconsin Family Action, and the Wisconsin Catholic Conference, opposes the introduction of an abortion referendum during a time when the current state abortion ban, Wis. Stat. 940.04, continues to proceed through the court system. The HWH Coalition will continue to defend 940.04, a lifesaving law which saved over 1,500 lives since the overturning of *Roe v. Wade*. We ask the Legislature to wait until the court challenges are resolved before proposing new abortion limits.

In the meantime, there is much that can be done to make abortion unthinkable. Each of us has a responsibility to make our state a place where mothers are not pitted against their children. We can do more to make our state a place where mothers who choose to raise their children and those who choose adoption are supported. We can do more to make Wisconsin a state where families want to come and can afford to stay.

As a Coalition, we call on the Assembly to pass bills that embrace both mothers and children: AB 114 extending postpartum care to a year after birth, AB 343 increasing the tax exemption for dependents and including preborn children, AB 344 funding for pregnancy resource centers, and AB 336 creating grants to support adoption. All four bills have already passed the Senate.

To build a culture that protects human life, there is still more that can be done, such as reducing birth costs, eliminating racial disparities in maternal and infant mortality, supporting birth mothers after adoption, removing sales tax on baby supplies and feminine hygiene products, and more. Nobody loses when we invest in women, children, and families.

We know that it is possible for both sides to come together to work to eliminate the barriers to welcoming children, instead of eliminating them.



Women deserve better than abortion. Children deserve better than abortion. Wisconsin deserves better than abortion.

We respectfully urge the committee to reject AB-975. Thank you again for the opportunity to testify today.

Testimony to oppose Assembly Bill 975

Thank you to the members of the Committee on Health, Aging, and Long-Term Care for hearing my testimony today. I am here to speak in opposition to Assembly Bill 975, which seeks to hold a referendum about a 14-week ban on abortions in the state.

I have been a member of the Madison Abortion and Reproductive Rights Coalition for Healthcare, also known as MARRCH, for over a year, and in that time I have participated in many community-led efforts to educate about and advocate for reproductive justice in Wisconsin. I believe that pregnancy should always be voluntary, that pregnant people should have access to safe and compassionate medical care, and that the government should not legislate the conditions under which pregnant people are allowed to access that care. Since the Dobbs decision, we have seen across the country that bans on abortion care place serious legal, emotional, and financial stress on medical providers, communities, pregnant people, and their families. People who need time-sensitive medical care, such as Kate Cox in Texas, are made to wait while hospitals confer with their legal departments to check what counts as a “medical emergency.” Decisions that should be made by patients, their healthcare providers, and their family members are left in the hands of lawyers, legislators, and law enforcement. Carving out “exceptions” for medical emergencies does not solve the problem that abortion bans endanger pregnant people’s health.

I oppose this bill not only because of the problems associated with “medical emergency” exceptions, but also simply because it seeks to limit abortions even earlier in pregnancy than current law, from 20 weeks to 14 weeks. During my time with MARRCH, I have spoken with many Wisconsinites—including women who remember the days before Roe was passed—about the state of reproductive freedom. People feel we are going backwards. They feel angry and dehumanized. I feel dehumanized, too. Bans on abortion imply that the people like me—cis women, trans men, and non-binary people who can become pregnant—can’t be trusted to make our own decisions about when and how it is right for us to get pregnant and have a child. I, like many of my community members, have felt the financial strain of the last few years. I know that if I were to become pregnant, I could not afford to have a child. I could not afford the physical and financial cost of carrying a pregnancy to term. Pregnancy and birth should always be chosen, never forced.

Please do not pass this bill. Please listen to the testimony of those here today who tell you that we do not want further restrictions on medical freedom and bodily autonomy. Please trust us to make our own choices about our health, our families, and our bodies.

Thank you.

Caitlin Benedetto
511 W Main St #302
Madison, WI 53703

Testimony before State of Wisconsin Assembly Committee on Health,
Aging, and Long-Term Care

Assembly Bill 975

January 22, 2024

Good afternoon,

Thank you for the opportunity to speak before you today regarding Assembly Bill 975. I am Dr. Mary Anne Urlakis. I am here with some of my family- my husband, Dr. Kenneth Urlakis, MD., Ph.D., and 3 of our eight children- my daughters, Eve Anna, Kateri Rose, and Mary Immaculee Urlakis.

I am a degreed practicing bioethicist. I was the first graduate of the Medical College of Wisconsin's Graduate Program in Bioethics in 1994. I hold several graduate degrees and graduate certificates in Bioethics, Applied Ethics, philosophical ethics, healthcare ethics, and healthcare administration. I am the Executive Director, President, and Co-founder of the Dignitas Personae Institute for Nascent Human Life.

Each and every human person bears an inherent dignity and worth. Human life is sacred. Abortion is an act of violence that not only ends the life of a human child, but also inevitably harms women and families. The intentional killing of human children numbs society to the value of human life and degrades our capacity to perceive the inviolable dignity of one another.

Assembly Bill 975 proposes that an arbitrary developmental line be drawn at 14 weeks gestation, acquiescing in an apparent compromise

that preborn human lives under 14 weeks of age and under are somehow less worthy of life than those at 14 weeks and a day.

According the CDC Abortion Surveillance Summary, published November 25, 2022, (Authored by Dr. Katherine Kortsmit, et. al), 2020 data from a total of 620,327 abortions from 49 reporting areas were studied. The data demonstrated, and I quote: “ In 2020, 80.9% of abortions were performed at ≤ 9 weeks’ gestation, and nearly all (93.1%) were performed at ≤ 13 weeks’ gestation. During 2011–2020, the percentage of abortions performed at >13 weeks’ gestation remained consistently low ($\leq 9.2\%$). In 2020, the highest percentage of abortions were performed by early medical abortion at ≤ 9 weeks’ gestation (51.0%), followed by surgical abortion at ≤ 13 weeks’ gestation (40.0%), surgical abortion at >13 weeks’ gestation (6.7%), and medical abortion at >9 weeks’ gestation (2.4%); all other methods were uncommon ($<0.1\%$). ”

Thus, when one looks at the proposed legislation, it is evident that the limit would apply to a very, very small number of abortions in Wisconsin. On the contrary, it would codify the legal right to kill preborn children 14 weeks and younger, and would make it appear that this was compromise. Yet, Assembly Bill 975 essentially does nothing to protect the sanctity of human life.

Electrical impulses indicating brain development are detectable at 8 weeks gestation.

At 14 weeks gestation, preborn children grimace, smile, frown, squint, and pucker. At 14 weeks the baby’s external sex organs are formed, his or her intestines are working, kidneys make urine and release it into the

amniotic fluid; the liver is making bile. The baby's scalp pattern has developed. He or she is capable of coordinated limb movements. At 14 weeks gestation there is a sacred human life, worthy of dignity and respect. This is not a "clump of cells", rather, this is a living, growing, human person, a human life.

I believe that these tiny lives are worth fighting for. For the past 30 years of my professional life, I have fought for the sanctity of every human life. That is why my family and I are here today to voice our opposition to Assembly Bill 975.

Thank you for the opportunity to speak to you today.

Hominum Vita Pro Sacra,

Mary Anne

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A.M.D.G./JMJT

To the Committee on Health, Aging, and Long-Term Care-

I am writing to you today to speak out against Assembly Bill 975. This bill is very personal to me because my first pregnancy was induced at 31 weeks. Now my son is 22 and will soon graduate college. If this law was in place when Gabriel was born I don't know what the outcome would have been for myself or my son.

I woke up one morning and Gabriel had stopped moving in utero. My husband and I left for the hospital not knowing what the outcome was going to be. The first thing we heard was a heartbeat and our worst fears were gone. We still had a baby that was viable. The doctors admitted me while they figured out what was going on with my baby. Through ultrasound, doctors knew that I no longer had amniotic fluid and my water broke two weeks earlier. (Which I saw doctors for but they told me it was my bladder leaking). I was going to be sent home on bed rest to see if I could hold onto this baby for a while longer. The doctors then did a blood draw and I was told I had a high white blood cell count which meant an infection was coming. They wanted to make sure the baby and I were healthy and stayed healthy. **Let me say that one more time, my doctor wanted to make sure that my baby and I stayed healthy.** My doctor and I decided to induce and take the baby before the infection arrived. Gabriel spent 21 days in the NICU and then we got to take him home. I am grateful everyday that we decided to induce and give Gabriel the best option to survive.

Again, this is a decision that my doctor and I made together. My doctor did not have to wait until I was so sick that death was eminent for myself or my baby. That is even hard for me to type because I can't imagine going through that and I don't want any other mother to have to endure that ever.

An abortion ban of any kind is just not about baby within the first three months. It's about all women and their pregnancies and what is best for them. Women get to decide with their doctors. Not lawmakers.

Thank you for your time-

Heather Murray
Waunakee, WI

In Response to Assembly Bill 975

01/22/2024

Hello, thank you for providing this space today to discuss Assembly Bill 975. My name is Serene Arena—I am resident of Madison, and, amongst many other things, a mother to future Wisconsin voters. I have had in my life both a simple, straight-forward abortion—in which I was back at work the next day, feeding into our economic bottom line—and a major abdominal surgery—by which, of course, I mean the cesarian section during the birth of my first child. Anyone who has had *any* major abdominal surgery—where multiple layers of fat, tissue, and muscle are cut into and then sewn back up after your insides have been moved around and probed for one reason or another—they will tell you they are not back to work the next day, or the day after, or the day after that. There's also the potential health implications with major abdominal surgery, which are elevated further for those whose health is already at risk. This however is the defining parameter given by this bill as the only reason a person shouldn't give birth—if the person's life is at risk (I will note that the option to be forced to have a vaginal delivery in the instance that your life is at risk, which this bill so graciously provides for, also creates a scenario in which a person may have needless, additional physical implications). What is the "why" here? What advantage to the state does this bill bring?

Independent of known scientific understanding and acceptance of fetal viability; independent of the intimidation this bill and its authors intentionally seek to create; independent of the amoral action of forcing birth onto its constituents and citizens; independent of the fact this bill was introduced by the Committee on Health, Aging and Long-Term Care, which by all accounts should be focusing its attention on ways to enhance public health— independent of all these very appropriate reasons for me to be standing here today, I'm here to address instead the undeniable fiscal and economic recklessness of a bill that forces WI citizens to give birth—an act that absolutely requires extended time for the body to heal; the fiscal irresponsibility of the state to force WI citizens to raise a child (or children) in potentially unhealthy environments, or alternately forces WI citizens to undergo a major surgery at a time when their health and life may be at risk, even

though a safer, less invasive option is practiced and available. All these examples put undue burden onto the state.

Without a companion bill that puts a family-first agenda on the table, one that infuses our state and its communities with parental and caretaking support, Assembly Bill 975 not only removes citizens from the workforce—meaning, out of the state's tax structure and economic growth—for either weeks, months, or years, but also removes WI citizens from consumer actions that further pay into that tax structure, by knowingly subverting their financial security and logistic ability to buy into the goods, services, and experiences that drive our economy and communities. This, as we know, is the system that generates, in part, the money that pays for our state to function, and includes the salaries of legislative officials.

What do I mean by a family-first agenda? I mean infrastructure that puts families and children first, so that adults can continue to sustain our economy: Government paid parental leave, robust communities of care that allow parents to choose what is best for raising their family. A government in partnership with family choice, not a government that infringes on family freedoms. That means narrowing the child caretaker shortage by making these positions a living wage; funding in-school and out-of-school programming; more social work positions with higher wages. That means supporting 0–12 educators—it means making all these positions attractive career paths that support the state in its efforts to keep all citizens—parents and others—engaged economically and with flexibility, for a sustained and robust state.

Without these considerations, Assembly Bill 975, as shown today, represents grotesque government overreach, intrusion into the freedom of family choice, and will create a heavier tax burden on the state to support citizens who are systemically forced into financial insecurity. This bill exposes itself for what it is: Cruel, but also careless, self-righteous, short-sighted, financially irresponsible to the state and its taxpayers—the opposite of what constituents vote each of you in as public servants for and expect of you.

Sen. Johnson Releases Statement on Wisconsin Republicans' 14-Week Abortion Bill

January 22, 2024

WASHINGTON – On Monday, U.S. Sen. Ron Johnson (R-Wis.) released the following statement on Wisconsin Republicans' introduction of Assembly Bill 975 which would protect the life of an unborn child after 14 weeks.

"The bill co-authored by Senator Mary Felzkowski and Representative Amanda Nedweski, while different from the referendum I suggested, fully aligns with the primary goal of allowing 'we the people' to decide: 'at what point does society have the responsibility to protect the life of an unborn child?'

"This bill is based on a number of surveys, polls, and laws existing in other states and countries which indicate that a consensus is forming around protecting life after 14 weeks. The fact that 86% of abortions performed in Wisconsin occur before weeks 13-15 of gestation is further evidence of this growing consensus.

"If signed into law, the bill would only take effect if it also receives a majority of votes in a statewide, binding referendum. In other words, the voters of Wisconsin will decide. The bill acknowledges that a mother can decide to end her pregnancy up to a certain point, but after 14 weeks, the rights of an unborn child take precedence unless the life of the mother is at risk.

"The extreme position on abortion is backed by Democrats who have supported measures that allow abortion up to the moment of birth. What the bill is proposing will allow the voters of Wisconsin to decide what a reasonable solution is to this profound moral issue."

Full text of the legislation can be found [here](#).

###

HUMAN BEING



7-8 WEEK OLD HUMAN BEING (FIRST TRIMESTER)

For you formed my inward parts; you knitted me together in my mother's womb. I praise you, for I am fearfully and wonderfully made. -Psalm 139:13-14

WHEN DO EMBRYOLOGY
TEXTBOOKS SAY HUMAN LIFE BEGINS?

THE FACTS:

Human development begins at fertilization, approximately 14 days after the onset of the last menstrual period... when a sperm fuses with an oocyte to form a single cell, the zygote. This highly specialized, *totipotent cell* marks the beginning of each of us as a unique individual.

Keith L. Moore, *The Developing Human: Clinically Oriented Embryology*, 10th edition. Philadelphia, PA: Elsevier, 2016.
Kindle Locations 739, 1094.

Development begins with fertilization, the process by which the male gamete, the sperm, and the female gamete, the oocyte, unite to give rise to a zygote.

T.W. Sadler, *Langman's Medical Embryology*, 13th edition.
Philadelphia, PA: Wolters Kluwer, 2015. p. 14.

Human embryos begin development following the fusion of definitive male and female gametes during fertilization... This moment of zygote formation may be taken as the beginning or zero time point of embryonic development.

William J. Larsen, *Essentials of Human Embryology*. New York: Churchill Livingstone, 1998. pp. 1, 14.

MissionariesToThePreborn.com

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