



## LEGISLATIVE AGENDA 132<sup>ND</sup> GENERAL ASSEMBLY (2017-2018)

### DISMEMBERMENT ABORTION BAN

The Dismemberment abortion procedure, also known as Dilation and Evacuation, is one of the procedures used in second trimester abortions. Banning this abortion procedure further protects the life of innocent children, especially against those lost to some of the cruelest abortion procedures. Ohio Right to Life believes the ban would fall under the same judicial protection as the late-term abortion procedure ban that was challenged in *Gonzales vs. Carhart* in 2007 where Justice Kennedy claimed protecting the life of an unborn child can be in the state's interest even before the point of viability.

*Sponsors: Senator Matt Huffman*

### UNBORN CHILD DIGNITY ACT

This bill seeks to promote the dignity of the unborn through proper burial while strengthening Ohio's laws on informed consent. Deceased unborn infants deserve the same respect as other human beings. Currently, the Ohio Revised Code prohibits the trafficking of the products of conception (2919.14), yet fails to establish protocols regarding the human disposal of aborted infants. Several states, including Indiana, have introduced legislation to ensure that miscarried, stillborn, or aborted infants are treated with dignity. If enacted this legislation would require the Ohio Department of Health to establish rules for the proper disposal of product of conception and define *humane disposal* as earthly burial and cremation.

*Sponsors: Senator Uecker*



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This legislation would require abortion-inducing drugs to be administered in accordance with “the protocol tested and authorized by the United States Food and Drug Administration as outlined in the final printed label of the abortion-inducing drug.” Texas passed a similar law in 2013, and it has been upheld by the federal courts.

In 2004, the Ohio Legislature passed a law requiring abortion providers to follow the FDA guidelines in dispensing Mifeprex (RU486), the “abortion pill.” The law remains in litigation to this day, but in October of 2012 it became enforceable. Because of this law and the recent changes in FDA guidelines, abortion providers like Planned Parenthood can only provide medical abortions using the pill up to 10 weeks into pregnancy. As we might expect, the abortion industry is finding ways to get around the law by experimenting with other drug regimens to make up for that lost revenue.

The goal of this legislation is to end the practice of using drugs off-label to induce abortions. An example of such a drug is Methotrexate, a chemo therapy drug that is being repurposed for inducing abortions. The bill would limit legal medical abortions to those using drugs specifically labeled for the purpose of causing an abortion. Mifeprex is the only drug currently labeled as such in the United States.

Additionally, this bill would include a provision regarding a procedure to reverse the effects of the abortion pill. The RU486 or “Mifepristone” medical abortion procedure is a two-day regimen used to terminate early pregnancies by blocking the hormone progesterone needed to sustain pregnancy. A second drug, Misoprostol stimulates uterine contraction to expel the dead baby. Women who choose medical abortion and regret it within the first two days before they take the second drug have a chance to save their baby. The reversal procedure has been successful in 59% of cases from May 2012 to June 2014. The procedure involves administering progesterone to the mother which can reverse the impact of the first drug and allow the baby to continue normal development.

This measure would require abortion facilities to tell women that chemical abortions possibly can be reversed to save their unborn baby’s life, ensuring that every woman considering an abortion of this nature would receive comprehensive information including the potential to reverse the effects of abortion-inducing drugs should she change her mind.

*Sponsors: Representative Brinkman and Representative Hagan*



## DOWN SYNDROME NON-DISCRIMINATION ACT

This legislation would prohibit an abortion from being performed on an unborn child on the basis of that child having Down syndrome. A study published by the National Center for Biotechnology Information and featured in the *New York Times* found that approximately 92% of unborn children diagnosed with Down syndrome are aborted. While elective abortion is never the right choice, it's particularly egregious that unborn children can be denied life simply due to the presence of a disability.

*Sponsors: Representative LaTourette*

## OHIO PARENTING AND PREGNANCY SUPPORT PROGRAM (Budget Amendment)

In the last two budget cycles, we pursued an increase in the discretionary TANF dollars to be allocated to funding the work of life-affirming pregnancy centers across the state. Ohio Right to Life will pursue a further increase in funding to increase the number of women who could be served by centers using the funds.

## FETAL ORGAN TRAFFICKING BAN

This legislation would prohibit fetal tissue trafficking. Federal law currently bans this practice, but a loophole currently allows tissue traffickers to compensate abortion clinics for donations. This bill would make the exchange of any form of compensation for fetal tissue or organs illegal, and would describe the legal penalties for engaging in this trade.

*Sponsors: Representative Conditt*

