

**AN ACT CONCERNING COMPASSIONATE CARE FOR  
VICTIMS OF SEXUAL ASSAULT  
SB 1343  
HUMAN SERVICES COMMITTEE HEARING  
COLIN MOORE,  
GOVERNMENT RELATIONS MANAGER  
PLANNED PARENTHOOD LEAGUE OF MASSACHUSETTS  
MARCH 13, 2007**

Dear Chairman Harris, Chairman Villano, and members of the Human Services Committee:

My name is Colin Moore, and I am the government relations manager for Planned Parenthood League of Massachusetts. I am here today to express support for Senate Bill 1343, "An Act Concerning Compassionate Care for Victims of Sexual Assault." I urge the committee to approve this important legislation without any modifications that would delay the ability of sexual assault survivors to avoid unintended pregnancy.

In 2005, Massachusetts enacted Chapter 91 of the Session Laws that year that also mandated that emergency rooms provide information about emergency contraception (EC) to all sexual assault survivors and EC itself upon request. Planned Parenthood, along with other advocacy groups, worked hard to defeat attempts to weaken the bill, which included, among other things, proposed refusal clauses and referrals to other hospitals.

We are proud that the law as passed contained none of these delays. Provision of EC to sexual assault survivors proved to be a clear example of "common ground" which legislators from across the choice spectrum could agree on. The bill passed overwhelmingly and easily withstood our former governor's veto.

After passage of the law, our former administration initially tried to claim that the law did not apply to religiously-affiliated hospitals. They quickly reversed themselves after hearing widespread criticism from the public. A phone survey of Massachusetts voters conducted last year by RKM Research found that 67% of Massachusetts voters oppose exempting Catholic hospitals from our emergency contraception law, including 62% of Catholic voters.

When used in a timely manner after a sexual assault, emergency contraception is very effective at reducing the risk of unintended pregnancy. Timely access is

imperative, as emergency contraception is most effective when taken within the first 24 hours. EC is safe and effective. It is not RU-486 (the abortion pill). If a woman takes EC during pregnancy, it will not harm the developing fetus or cause an abortion.

Hospitals that accept public funding have an obligation to provide the full range of appropriate care to their patients. These facilities have a responsibility to provide the standard of medical care to women who have been raped. The standards for compassionate treatment should be uniform across the state. Rape survivors should be given every opportunity to prevent an unintended pregnancy in a timely fashion, regardless of what hospital they arrive at for care.

Hospitals are not religious institutions. They are largely funded through public tax dollars, they hire staff with different religious backgrounds, and they serve patients from a wide variety of religious faiths. Rape survivors do not get to choose what emergency room they are brought to. No rape survivor should have her health jeopardized by the delay that a refusal clause could create. She should not be subjected to a second trauma by being refused treatment that is part of the standard of care that the medical community has endorsed for victims of these terrible crimes.

Emergency contraception provides a safe and effective method of preventing unintended pregnancy. SB 1343 will improve access to EC for rape survivors throughout Connecticut. I urge you to give the bill a favorable report.

Thank you.