

March 15, 2021

The Honorable Dick Durbin  
Chairman  
Committee on the Judiciary  
United States Senate  
Washington, DC 20510

The Honorable Charles E. Grassley  
Ranking Member  
Committee on the Judiciary  
United States Senate  
Washington, DC 20510

RE: H.R. 5 hearing on March 17, 2021

Dear Chairman Durbin, Ranking Member Grassley, and Members of the Senate Judiciary Committee,

My name is Dr. Regina Renee Frost. I submit this testimony for the Senate Judiciary hearing scheduled for Wednesday, March 17 on H.R. 5. I write with deep concern about the ways in which H.R. 5 threatens my ability to serve my patients and pursue my calling as an OB-GYN.

While I am a doctor and a caregiver, above all else, I am a woman of faith. It is my faith that drew me to become an OB-GYN, my faith that called me to open my own practice to treat women with dignity and compassion, and my faith that helps me navigate the daily challenges associated with my profession.

Because of my faith, I am committed to treating every patient with dignity and love, without regard to race, religion, sexual orientation, or gender. That is because I believe that every person is created in the image of God and possesses inherent dignity. *Genesis 1:27*. And Christ commands us to love our neighbor as ourselves. *Matthew 22:39*.

As a woman and as a minority, I have worked to build community among female physicians by leading Women Physicians in Christ, a ministry of the Christian Medical and Dental Associations (CMDA). Having these communities of support are especially important for Christian women who, like me, can face many substantial and unfair burdens on our ability to become and practice as physicians.

I am not alone in the commitment to my faith in my medical practice. CMDA likewise encourages its 20,000 members to treat all patients in a non-judgmental and

compassionate manner, consistent with the humility Jesus modeled and the love Jesus commanded us to show to all people. CMDA partners with an association of over 150 clinics in the United States which focus on serving the neediest members of society, including the uninsured, immigrants, and children. And CMDA urges its members to follow the example of Christ and care for patients with dangerous infectious diseases, even at the risk of their own lives.

My Christian faith has given me a passion for helping others. For example, during medical school, I served on a mobile medical team in Nyahururu, Kenya, attending to the needs of women, children, and the elderly. Last year, just before the pandemic hit the United States, I was on a team working at a clinic in Uganda that served the needs of women from two rural villages. And every day as an OB-GYN, I am present during the most intimate moments in the life of a mother, father, and child. I have the privilege of placing children into the arms of their mothers for the very first time. I also have to deliver the life-altering news of infertility and guide mothers and fathers through the tragedy of a lost pregnancy. This work cannot be done impersonally; I cannot leave my humanity at the door. I give all my patients the degree of care that I would a close friend or loved one. I treat them how I would want to be treated. I provide them with the advice that I would want to receive, bringing my best judgment to their situation.

My work as an OB-GYN, my service to those in need, and my leadership of a ministry to women physicians all flow directly from my Christian faith. *See 1 Corinthians 10:31* (“So whether you eat or drink or whatever you do, do it all for the glory of God.”). I sincerely believe that Christians should feed the hungry, give water to the thirsty, provide homes to strangers, clothe the needy, care for the sick, and visit prisoners. *Matthew 25:31-46*. By serving others, we serve and honor God. *Id.* (“Truly I tell you, whatever you did for one of the least of these brothers and sisters of mine, you did for me.”). I believe that God is just as interested in what I do to serve others, including as a doctor, as He is in what I do on Sunday mornings at church. *Isaiah 58:1-12* (“Is this not the kind of fasting that I have chosen: to loose the chains of injustice and untie the cords of the yoke, to set the oppressed free and to break every yoke?”).

While walking with women through some of their greatest joys and sorrows, I am called to offer more than just my medical expertise—I am called to provide the compassionate guidance of a friend, to be Christ’s outstretched arms for the women who enter my practice.

Just as my conscience requires me to treat the women in my care as I would want to be treated, it also requires me not to do things to them that are immoral or against my best medical judgment. For instance, I cannot perform an elective abortion or provide sex reassignment surgery. But H.R. 5 demands that doctors like me be willing to violate our consciences and our medical judgment in these ways. If

this bill passes, I and fellow religious medical professionals nationwide could be subjected to crippling lawsuits and punitive government actions that could force us out of medicine. H.R. 5 will coerce us into choosing between serving the patients we love and violating the very faith that animates us to serve in the first place.

It would be a deeply painful situation, but it would not be a choice. I cannot do that. My religious objections are based on the teachings of my faith. I believe, for instance, that the unborn are persons created by God who deserve my respect. *See, e.g., Jeremiah 1:4-5* (“Before I formed you in the womb I knew you, and before you were born I consecrated you; I appointed you a prophet to the nations.”); *Psalms 139:13-16* (noting that God “formed my inward parts . . . knitted me together in my mother’s womb,” and knew “the days that were formed for me, when as yet there was none of them”). I believe it would be wrong for me to personally participate in causing their death. *See, e.g., Matthew 5:21 and 19:18* (affirming the commandments against taking innocent human life).

I cannot take the life of a child in one room and guide another child into this world in the next. That would not only undermine my most deeply held religious beliefs and my medical judgment but also the oath I took as a medical professional.

H.R. 5 gets things backwards. The federal government can and should *protect* healthcare providers’ conscience rights. But H.R. 5 *punishes* those rights, to the great harm of our entire society. And the timing couldn’t be worse. In addition to the pandemic, which is already stretching the healthcare community thin, we face a growing shortage of primary care and specialist doctors. H.R. 5 will make things much, much worse by driving out current doctors and keeping away future doctors.

My fears are supported by experience. I have already heard from many physicians who have been terminated or faced significant opposition because of their religious beliefs. Thousands of CMDA’s members have reported similar concerns and experiences nationwide. H.R. 5 will make these problems exponentially worse.

If H.R. 5 becomes law, I fear that future stories like mine—stories of a medical career motivated by faith and dedicated to lovingly serving others—will die on the vine. Young women like me will never have the chance to pursue a medical career of service like I have if they are told that a willingness to perform life-ending procedures is a litmus test to enter the medical field. And millions of pro-life expecting mothers nationwide will be deprived of having medical care provided by women who share their fundamental belief that their unborn child bears the image of God and should be treated with equal justice as the rest of God’s people.

Medical professionals have the privilege and the honor of serving those in need. For doctors like me, our job is our calling. And we do not take this calling lightly. Each and every day, we make decisions in reliance on our medical judgment and the

best interest of our patients. The government should not insert politics into these critical and deeply personal medical decisions.

My faith is at the heart of who I am. It is what drives me to put the needs of women and their children first every day. It makes me a better doctor. For decades, our country has recognized that a diverse nation like ours can deliver high-quality medical care without making taxpayers force people of faith to violate their core beliefs. If we forget that insight, we will hurt both doctors and patients.

Thank you in advance for your careful consideration of these critical issues,

Dr. Regina Frost