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[LWVSC Testimony, S.323, Senate Medical Affairs Subcommittee](#)

The League of Women Voters of South Carolina opposes all provisions of S.323. The foundational principle of the bill is to designate every fertilized egg a person with full legal rights, a premise that we reject. Building on that foundation, there is a horrific array of dangerous provisions that violate the moral and constitutional rights of all pregnant or potentially pregnant persons in South Carolina. Not just the fundamental right of all persons to make decisions about their own bodies, but rights of free speech and free association would be violated under this bill. Victims of rape and incest would be forced to continue their pregnancies, effectively condemning them to torture. Children, regardless of age, would be compelled to continue pregnancies for which they cannot possibly be prepared. Pregnancies involving fetuses that cannot survive to develop into living persons will be continued, prolonging the physical and mental suffering of those with wanted but hopeless pregnancies.

We are aware that many members of the public as well as expert invited speakers will testify to these and other objectionable aspects of the bill. We will focus on one that deserves more attention than it has gotten to date. S.323 provides that all non-emergency premature deliveries after nineteen weeks of pregnancy must be performed in a hospital or other facility that has neonatal services for premature infants (effectively, a NICU) and there must be two doctors in attendance, one of whom is to take "all steps reasonably necessary to preserve the health and life of the unborn child."

This provision suffers from the same terrible flaw as other items in this bill contingent on defining an "emergency." Who defines an emergency, and how? S. 323 defines "medical emergency" as follows: "a condition exists that has complicated the pregnant woman's medical condition and necessitates an abortion to prevent death or serious risk of a substantial and irreversible physical impairment of a major bodily function, not including psychological or emotional conditions." Is this the kind of emergency that would create an exemption from the listed hospital provisions? If the emergency waiving the requirement of a NICU and multiple doctors is not this kind of emergency, what is it?

What of the woman who begins spotting at 20 weeks and goes to her local hospital or health care facility that lacks the required resources, only to lose her fetus after several hours? Was she guilty of a violation? An ambitious prosecutor could make the case that she was, regardless of whether there was evidence of specific behavior that precipitated the processes underlying the stillbirth. Perhaps she could have gotten to a better equipped facility in time. Perhaps the fetus could have been saved. In this respect, it is important that our Attorney General has stated that stillbirths are qualifying conditions for parental leave. If this bill is passed, some who lost pregnancies, even badly wanted pregnancies, will need that time to work on their legal defense.

This is just one of the ways in which S.323 is not a protection for children, but the use of human gestation as an excuse to control those who are or can be pregnant, even those who plan their pregnancies but encounter difficulties. The South Carolina General Assembly has no moral right to inflict the dangerous wishes of an extreme minority on its citizens.

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