Presidential Religious Liberty Commission

Sixth Hearing Transcript

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Museum of the Bible

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SIXTH HEARING OF THE RELIGIOUS LIBERTY COMMISSION

Mary Margaret Bush (00:01:29):

The Religious Liberty Commission. My name is Mary Margaret Bush. I'm the commission's Director and Designated Federal Officer, and it's my pleasure to announce the opening of our proceedings today and introduce our chairman, Lieutenant Governor of Texas Dan Patrick.

Lt. Gov. Dan Patrick (00:01:46):

Thank you, Mary. Good morning, everyone. Thank you for coming. We have a few people who are delayed because of weather and a canceled flight and a delayed flight, so hopefully they'll join us a little bit later. Great to have you with us. I've asked Reverend Franklin Graham to open us up.

Rev. Franklin Graham (00:02:07):

Let us pray. Oh, heavenly Father, we come today to pray for our nation, for our President, for all of our men and women who are serving in the military, watch over and protect them, we pray, Father. And Father, as this commission, we thank you for our leadership, for our chairman. Father, we pray as this commission does this work that you'll use the findings of this commission to strengthen our nation to strengthen religious freedom. And so, Father, we praise you today that

we live in a country where we can have a commission like this. Father, we ask for your help. We ask for your wisdom, and we thank you and we give you the praise. We give you all honor and all glory. And we pray this in the name of your Son, my Lord, and Savior Jesus Christ. Amen. Amen.

Lt. Gov Patrick (00:03:08):

Amen. Thank you, Reverend. As often happens we open our hearings with a five-to-10-minute opening with someone from the government. We've been blessed to have the President here to one of our hearings, and today we have Assistant Secretary for Health and Human Services, Brian Christine. Brian, welcome, sir.

Asst. Sec. Christine (00:03:41):

Good morning.

Members of the Religious Liberty Commission, distinguished speakers, healthcare professionals, leaders of Faith, and defenders of Freedom, it is a privilege and an honor to stand before you today for this important hearing on religious liberty and healthcare. President Trump established this commission in May of 2025 with a clear directive to examine the foundations of religious liberty in America, to identify current threats to that liberty, to develop strategies to preserve and strengthen its protections for all Americans. Religion and liberty are foundational to our beloved republic. They're not competing loyalties, but complimentary callings and have been since our republic's Genesis. Alexis de Tocqueville, during his 1831 Trip to America, astutely observed that Americans combine the notions of Christianity and of liberty so intimately in their minds that it is impossible to make them conceive the one without the other. Now, this unorthodox approach has not only made us the most enlightened and free nation to ever exist, but acts as the unifying principle and steadfast idea that binds each element of the Great American experiment into a single sacred and purposeful aim.

It is our golden thread that stitched the 13 colonies together, and it is woven throughout our republic's existence. But for the Greeks, it was Homer's *Odyssey* that animated their ideals through generations. For the Romans, it was the legend of Romulus and Remus that defined the culture that they would create. But for us, the United States of America, our thread is neither epic nor myth. It's far greater. It is the enduring providence of our Creator who delivered a people from tyranny into liberty, guided 13 colonies from the swamps to the stars, and raised this nation from humble beginnings to unparalleled prosperity. To recuse the benevolent hand of God from the American story is to deny our history, to abandon reality and reject the very heritage that our Founding Fathers so boldly forged. For from the beginning, long before this republic found its footing, the conviction that God had a purpose for this new land burned in the hearts of those who crossed the Atlantic.

On the 21st day of November in the year of our Lord, 1620, 102 pilgrims, while anchored in Provincetown Harbor, created the very first governing document of the New World: the Mayflower Compact. And in it, they declared their endeavor was undertaken for the glory of God and the advancement of the Christian faith. A decade later, the Winthrop fleet embarked upon its own perilous voyage that was fraught with a magnitude of trials and tribulations. Amid that journey, John Winthrop delivered a sermon that would not merely be etched in the annals of history, but would leave an indelible mark. Standing before his shipmates aboard the flagship *Arabella* Winthrop articulated what at the time appeared to be nothing more than a simple

charge, a set of expected standards each were to live by, so that despite the immense difficulty and uncertainty before them, that they as a body would remain united in civility, steadfast in their mission and favorable in the eyes of the Lord.

Winthrop's Proclamation, which is known to history as a model of Christian charity, laid the foundation for how the new world would operate. It prophetically recognized that despite the rugged, naked and untamed terrain they would soon be entering, it would be transformed into a shining City Upon a Hill. And his confidence did not rest upon his crew's ability to acquire great wealth or raise an unbreakable military. Winthrop's intuition, much akin to the pilgrims before and our Founding Fathers after, was a byproduct of the values, the convictions, and the principles of the Christian faith that would be the bedrock of the new society that they sought to create. It's a society that has been oriented in a manner that gave God his due, Caesar his due, and the people their due. And this aspiration was rooted in the fact that religious liberties are as essential as our civil [liberties].

And they always go together. For if the foundation of one be sapped, then the other will surely fall. And these rights are not abstract notions. They're not born of parchment or decree, nor are they the subjective constructs fashioned by the will of mortal man. They are enduring, they're intrinsic, they're natural, and they are endowed by God. Because they're not born of man, they shall not be surrendered to man. For what God giveth, no man can taketh away. And it's precisely this reality that the Mishna speaks to with both timeless wisdom and a sober warning. Be careful with the authorities for they befriend a person only for their own purposes. They appear as friends when it benefits them, but they do not stand by a person in his time of need. And so, we must never forget rights endowed by our Creator, rest upon an unshakeable, universal, and eternal foundation.

They stand outside of common trends. They stand outside the ambitions of current leaders and the ever-changing sentiments of the polis. They prosper because they are rooted in a transcendent power that confers both dignity and durability. And yet, if our rights are degraded to mere social constructs capable of being negotiated and renegotiated by subjective beliefs and temporary authority, then their protection, the very contract of the state is in jeopardy. In a world where liberty, which is God's gift to man, stands not at the bedrock of our society, but on a pile of sand, then sacred principles become provisional, truth is adjustable, and justice becomes contingent. In that situation, man is thrown into a perilous limbo, eager to cling to novel creeds, and ever-changing dogmas that seem to create promises and meaning, and yet dissolve into disorder, frustration, and even spiritual despair. And it's in that hollowed space where immutable principles once stood that GK Chesterton's prophetic warning rings out to us today, "When men choose not to believe in God, they don't thereafter believe in nothing. Rather, they become capable of believing in anything." In recent years, as we have drifted from our fundamental truths, this proclamation rings all the truer. Every civilization in every era of mankind will whether consciously or not orient their lives around some moral hierarchy and bend the knee to a governing authority. It will be either one rooted in truth and reason, or one degraded by distortion and destruction.

Under the previous administration, the latter prevailed. Truth was sidelined, science was weaponized, and our rights as Americans, as parents, and most fundamentally as humans made in the *Imago Dei*, the image of God, were infringed upon. Our citizens were coerced, they were lied to, and they were intimidated with fear. Physicians like myself and nurses were threatened with loss of license, and voices crying out in the wilderness, like Robert F. Kennedy Jr or Dr. Jay

Bhattacharya, were canceled. As the 18th Assistant Secretary for Health, I stand before you today to say that we are fighting day and night to put the indomitable ways of the past to rest. And I promise you, I make a compact with you, that we will never, never, never let this happen again. Under the leadership of President Trump and Secretary Kennedy, immense inroads have been made. We are working to bar hospitals from providing irreversible sex rejecting procedures on minors as a condition of Medicare and Medicaid participation.

The Affordable Care Act has been modified to once again reflect reality and therefore prohibits sex rejecting procedures on minors from its essential coverage requirements. And we have reversed interpretations of Section 1557 of the Affordable Care Act to remove gender identity from federal sex discrimination protections. And we have issued regulatory guidance that reflects our devotion to truth, our recognition of the Natural Law and our conviction that the Laws of Nature and Nature's God are not theoretical constructs, but are enduring principles essential to the preservation of justice. Genesis 1:27, proclaims, “Male and female, He created them.” And so, we are not interchangeable, we are intentional. We are not a product of chance, but a brilliant and beautiful design. Within our differences, harmonious, deliberate, and yes beautiful, we portray the precise image of our father. Scripture declares that we are made in His image. Our Founders recognize the profound burden of that truth when they inscribed for the world to see the self-evident truth that we are endowed with certain unalienable rights, and that among these are life, liberty, and the pursuit of happiness.

The right to life is sacred is inherent and is first among our rights. And that's why it is not only troubling, but even heartbreaking to consider the countless lives lost under the deeply distorted euphemism that abortion is a right. To call abortion healthcare and to compel the American people to fund it is to demand that taxpayers subsidize the ratification of innocent life. This is not charity. It is not compassion. It is not justice. President Trump is committed to restoring a culture that champions life. And that endeavor starts by ending taxpayer funding for abortion and protecting conscience rights for Americans who should never have to check their morals at the door to practice their profession. Within the first four days of this administration, President Trump signed an executive order ensuring the enforcement of the Hyde Amendment. And I'm proud to say that the Department of Health and Human Services remains steadfast in our responsibility to assure that federal taxpayer dollars are not ever used to fund or facilitate abortions or their providers.

We in this room know better than anyone that science is a gift from God. Its entrustment demands that we may behold the order, the beauty and the transcendent glory of the world. Science and truth are and have always been foundational to the church. from her cathedrals and monasteries, great universities were born. By her charity, the science of healing advanced. And guided by her vigilant care, intellectual inquiry was not suppressed, but was summoned to soar. But science does not triumph morality, nor is it sovereign. It was not intended as a vessel to grant man the authority of the one true Creator, but so that he may faithfully serve as a steward over God's creation. At our department, Health and Human Services, we are committed to maintaining a clear distinction between human advancement and providential authority. When science is severed from the divine, then humanity is reduced and morality is bypassed. The pursuit of knowledge must never be abandoned at the cost of human dignity. And in keeping with this commitment, the National Institutes of Health under Dr. Bhattacharya has notified the scientific research community that NIH funds will not be used for research involving human fetal tissue obtained from elective abortion.

This prohibition removes federal incentives for the procurement and the use of aborted fetal tissue. It applies to both intramural and extramural research. It affects new awards, renewals, and ongoing projects that rely upon such tissue. Now, despite our victories, the path in front of us remains robust and abundant with work that demands action. For we, like the revolutionary generation, are residing in times that try men's souls and such times demand the same courage, the same wisdom, the same discipline, and the same fortitude. We too, all of us, we too must stand ready to answer the call of our time while refusing to fall below the standard our forefathers set. For after all in our remarkable history, few generations have been afforded the opportunity that we have the opportunity to safeguard liberty amidst a time of immense uncertainty. And I know each of you here welcomes such a call. Not merely as Americans, but as people of faith, we carry a civic duty to preserve and pass down the gift that we have been gifted. And I am certain, I'm certain that in time history will gaze upon this generation, the current stewards of our republic, and history will see a people who ceased to abandon their ship amid a menacing storm. I am confident that this era will be marked not by retreat, but by resolve. Not by surrendering before hardship, but by standing firm against it. And my inclination behind such optimistic sentiments is not steered by a sense of innocence or ignorance. It's not bolstered by a blind romanticization of our nation, but rather, my demeanor prevails because it is rooted in the ideals that permitted 13 colonies to become a blessing upon God's earth and to people on perpetual pilgrimage to become a more perfect union.

As we commemorate these historic milestones while remaining steadfast in the noble and profound pursuit that gathers us here today, then let us commit ourselves to a legacy not merely remembered, but revered. May we continue to act as a beacon of salt and light and remain steadfast in our faith, committed to our principles, generous in our service and firm in moral certainty that America's exceptionalism flows from her virtuous people, her monumental history, and her marvelous God. And let us resolve that when our time comes and the Lord calls us home, that we can say, as St. Paul wrote to the young bishop Timothy, “I have fought the good fight. I have finished the race. I have kept the faith.” God bless you all. Thank you for letting me be with you. God bless President Trump, Vice President Vance, Secretary Kennedy, and God bless our glorious republic. Thank you very much.

Lt. Gov Patrick (00:19:48):

Thank you. Secretary Christine. Secretary, Mr. Secretary. Well, thank you Mr. Secretary, and obviously elections matter. That was strong. That was strong. We're going to change out our podium here in a moment. Start with our first witness.

I'm going to do the first witness. Good morning. Thank you for joining us, Dr. Ethan Haim you'll be our first witness. You have a floor.

Dr. Ethan Haim (00:22:47):

Thank you all so much for having me. My name is Ethan Haim. I'm a general surgeon in Dallas, Texas. So, my story starts in February of 2022, when the Attorney General of Texas, Ken Paxton, released an opinion that pediatric gender interventions could be investigated as child abuse. In response to this, in March of 2022, Texas Children's Hospital, the largest children's hospital in the world, released a statement claiming that they were going to shut down their gender program. This is the same type of thing you're seeing today, where you have a major children’s hospital that will release a statement that they're shutting down their transgender

program because of some type of legal risk in order to maintain compliance. So, in the months that followed, TCH not only continued their program, but expanded into a multimillion-dollar multidisciplinary clinic. The directors of the transgender program were giving speeches at the hospital's most prestigious lecture series.

Internally, it became an institutional-wide priority, but externally, you wouldn't even know that this program existed. But over a year later, on May 16th, 2023, Christopher Rufo, the journalist, had released a story that blew the scandal wide open. It was based on evidence provided by an anonymous whistleblower inside of the hospital. And when it came out, it was all over the news. It only got bigger in the days following, because on May 17th, the Texas Senate voted to pass SB 14, which was a law that banned these interventions. And it was in a bill that was passed with bipartisan support, partially because of Rufo's story coming out the day before.

Two days later, the Texas Attorney General announced an investigation into the hospital. Five days later, another whistleblower spoke out. This was an anonymous whistleblower who was a nurse who worked inside the transgender clinic. She told Rufo that the reason she spoke out was because of the first whistleblower that first whistleblower was me. I knew this was happening because I worked inside the hospital. The surgeons who were doing these surgeries told me they were doing it, but I decided to blow the whistle because of my faith in God. This had compelled me to do so, because if we're all products of God's Creation, as I believe, then it is my job as a surgeon to heal those creations. This does not mean creating something new, but restoring that which has already been made. What was happening inside of this general clinic was complete inversion of that. They were mutilating and sterilizing healthy young children because these doctors believe they hold the power to transform a boy into a girl, that they are the authorities that govern creation.

To do nothing in this situation is to be complicit, something that I believe can never be forgiven. After the story came out, no one knew who I was. So, I thought that was going to be end of it. I didn't break any law. I was naive to believe this, but boy was I wrong. I thought I was just going to go on with my life. So, this all started a month later in June, 2023, when the DOJ sent armed agents to my home on the day of my graduation from surgical training, one of the most important days of my life. That's when I found out that I was being investigated by the United States Department of Justice. Soon after, this is when things really, really go downhill. But soon after I found out I was under surveillance by HHS, the FBI, the Department of Homeland Security, and something called HSI.

The DOJ threatened my wife because ironically enough, she had just been hired by the DOJ as an assistant US Attorney in Dallas. They had leaked my name to activists in TCH who began leaving reviews on my online doctor profile, accusing me of raping my patients. The DOJ said that they would bring me to a jury trial even if they knew they were going to lose, even on a technicality. And it was at that time that I knew and, and it was at this time that no one knew who I was because I hadn't gone public yet. At that moment, I could have made everything go away because they said all I had to do was apologize to the hospital and I would avoid felony charges. It was clear that this had nothing to do with the law, but everything to do with dominion.

It was the belief in an authority that was beyond their own that was an internal insult for them. They needed me to renounce my faith, bend the knee, and legitimize their twisted morality. After I responded to their bogus olive branch, by giving them the middle finger, which was delivered through my attorneys, of course, they indicted me in a federal grand jury. I was charged with

four HIPAA-based felonies that carried a decade in prison. To make sure I knew how super serious they were, they sent three heavily-armed US marshals to my home at 7:00 AM like I was a criminal mastermind. My wife was six months pregnant. And this is when the real circus began. The first indictment was nothing more than a cheap fiction, something to make me look like a criminal so that the New York Times and the Washington Post could launder the DOJs lies directly into the world's largest audience. But once we pointed out that their allegations were contradicted by their own evidence, the whole thing fell apart.

You would think that at some point shame would kick in and they would give up, right? Wrong. They just got a second indictment. This one was even crazier than the first. They charged me with a non-existent crime, and they failed to proofread their indictment and left in a critical typo. So, their second indictment felt just as fast as the first one. But did they hesitate? Absolutely not. They went and got a third indictment. This indictment proved so incomprehensible that we pretty much gave up trying to make sense of it. But I include all of this not to generate sympathy because compared to other people who were prosecuted under the Biden regime, I had it relatively easy. I include all of these details to make a point. These people knew I was innocent, but they were relentless. Every single day they went to work and this is what they dedicated their energy to.

But it wasn't only the feds. They had the enthusiastic compliance of people I had known for years. People I considered friends and mentors. I thought these were regular decent people, but when evil showed up to their door, they let it in. So, my point is this, for those of us who believe in God and the Christian principles that this country was founded on, the threat to our religious liberty is existential because the agents of this anti-human ideology have proven relentless in their pursuit of power and shameless in their abuse of it. They will smile as they put the noose around your neck, proclaim you guilty of something they do not comprehend. And as you look out to the crowd, there will be a hundred familiar faces cheering at the moment the floor drops from below your feet. Every single one of them aware of your innocence, but cheering nonetheless.

This is no doubt, very bleak, but this is the truth. And all of you know this is the truth. And you also know this has not gone away. This has not been defeated, but only grown more malignant. So, one of the most important truths I discovered during my prosecution is that those who would violate our religious liberty do not operate by a limiting principle. There is no policy or law they're unwilling to violate. If this commission's objective is to protect our religious liberty, then we cannot only go on defense. We have to make sure these people are held accountable for what they've done. We have to use our authority to make sure these people are held accountable, because if we don't, then it will be our children who are on the gallows. Thank you.

Lt. Gov. Patrick (<u>00:32:07</u>):

As we always do, we'll hear from all the witnesses and we'll go back for questions to all of you. Once again, elections matter. That would've never happened today. Never happened today. Our next witness is Kaley Chiles. Kaley, you have the floor.

Kaley Chiles (<u>00:32:27</u>):

Good morning. My name is Kaley Chiles. I'm a licensed counselor in Colorado. Thank you so much to President Trump and this commission for the opportunity to share my story. I became a counselor because I know the truth's power to set people free. When we learn to understand

ourselves, confront pain, and pursue healing through a counseling relationship, those tools do not rust or depreciate with time, they can shape the rest of our lives. And this is the kind of service I felt called to provide. My own life experiences played a critical role in this calling. During my high school years, there was deep tension in my family and I longed to learn the skills for meaningful conflict resolution. Around the same time, I began experiencing grand mal seizures, sudden seizures with no known cause. I had to give up my driver's license and I wasn't even allowed to be alone for a time in case I passed out. As a 17-year-old, that loss of independence was jarring, but that season of suffering changed me. It forced me to slow down, to reflect, and ultimately to trust God more than I ever have before. Those experiences also shape my desire to help others navigate suffering and find hope. In counseling, the client sets the goals and I walk alongside them as we chart a path forward. This teamwork requires trust, authenticity, and the freedom for us to speak freely.

My first counseling job was in a male prison. Later I worked at a dual diagnosis adolescent facility, one level down from young people who are actively suicidal. In both places, I saw the depth of human struggle, but I also witnessed the incredible potential for transformation when people have the chance to talk to someone they trust. Because what often brings someone into counseling is only the service issue. Addiction, anxiety, anger, depression may be the presenting struggle, but those are often the fruit of something deeper. Counseling is about uncovering the root, the fears, the wounds, the questions underneath the surface. So real healing can happen. If you only address the fruit and you ignore the root, the problem simply grows back in another form.

In 2022, while reviewing state statutes that govern licensed counselors, I discovered Colorado had passed a law dictating which counseling conversations my clients and I are allowed to have. On issues of sex, if the client's goal is to regain comfort with their body, the government prohibits that conversation. But Colorado expressly encourages me to push minors toward so-called transition, which often includes harmful drugs and surgeries. I was stunned. In my practice, questions about identity and sexuality often arise even when my clients come in for completely different challenges. But under this law, if those questions come up, I would be required to promote the government's talking points even when they were opposed to the client's goals.

I knew I couldn't stay silent while Colorado inserted itself into my relationship with my counselors or with my clients and put them at risk. So, I contacted Alliance Defending Freedom, and we filed a lawsuit challenging Colorado's counseling censorship law. I have seen how the law rejects truth. There's always a human cost. For me, the cost was immediate. It cost me both the jobs I had at the time. I received death threats and complaints against my license from people who have never met me or my clients. But the deeper cost falls on the young people affected by these laws. And Colorado families aren't the only ones impacted. 23 states and over a hundred local governments have adopted similar counseling censorship laws. These laws insert the government into private counseling conversations and attempt to control a client's goal. And the stakes are incredibly high. Research suggests that roughly 90% of children experiencing sex related distress will regain comfort with their sex if allowed to work through their feelings without being pushed to transition.

But an even higher number will become lifelong medical patients with irreversible consequences if pushed down the path to transition. This is why medical authorities around the world are approaching transition procedures with caution. One recent case study found a psychologist and

surgeon liable for malpractice for recommending and performing the removal of a teen girl's healthy breasts without examining the root of her distress. Despite this legal vindication, she will never recover what she lost. The First Amendment is not an abstract principle in a counseling office. It ensures open dialogue in the pursuit of truth. But Colorado's law silences the very conversations that allow us counselors to explore the root of a young person's pain with them. My case was heard by the US Supreme Court this last fall, and I'm hopeful they'll reaffirm that the government can never censor conversations simply because it disagrees with the client's personal goals or viewpoint expressed. Young people wrestling with identity deserve counselors who are free to speak, ask questions, listen with compassion, and walk alongside them in their search for hope and restoration. I hope that this administration will also continue to preserve this foundational freedom even for the most vulnerable among us, our children.

Lt. Gov. Patrick (00:38:28):

Thank you. Kaley.

Abby Sinnett. Abby, go ahead. Thank you.

Abby Sinnett (00:38:37):

Thank you, Chair Patrick and members of the commission, for inviting me here today. I'm really glad to be here. My name is Abby Sinnett and I have been a women's health nurse practitioner for about 13 years. I'm also the co-founder and CEO of Bella Health and Wellness, which is a non-profit independent Christian medical practice in Colorado. And we offer obstetrics, gynecology, infertility, family medicine and pediatric care in Colorado. Bella actually started in 2012 when my mom, Dede Chism, and I were on medical mission in the high Andes mountains of Peru. During that trip, we became really convicted that everyone has a story, that everyone deserves to know that they are made good, and that life needs to be protected. Those convictions are really rooted in our Catholic faith. And so, we came home and we launched a practice in Denver, Colorado where we were able to practice dignified life-affirming care according to our faith.

We launched Bella as the first comprehensive life-affirming practice that offered OB/GYN care in the state of Colorado. And since that time, we have been proud to deliver the highest standards of care to over 28,000 patients. So, I'm here today to tell you about how Colorado tried to make it illegal for pregnant women in our home state to receive medical care that helps save their babies' lives. I'm also here to tell you that thankfully Colorado failed and my specialty as a women's health nurse practitioner. And in Bella's OB/GYN practice, we often prescribe progesterone, a natural hormone. It is found in the woman's body. It's essential to both achieving and maintaining pregnancy. And it's really been used in medicine for over 75 years. It's often used for risk of miscarriage to prevent preterm birth for infertility or menopause, really a whole slew of things.

But progesterone is actually also the only known treatment that can help a pregnant woman who has taken the first abortion pill and decides that she wants to continue her pregnancy. And so, here's the science in a nutshell. What's commonly called the abortion pill is actually two pills. The first mifepristone, it blocks the progesterone receptor sites in the uterus that makes it so that oxygen and nutrition to the baby stops. The second pill misoprostol, that's administered about 48 hours later, that causes the contractility in the uterus that expels the baby from the womb. The reality is that the decision to have an abortion is often really stressful. And some women take that

first pill, the one that interferes with the progesterone. And then they change their mind and they maybe want to keep their baby. I've also actually cared for women who've taken that first pill, but only because they were tricked or forced.

And so, if a woman takes mifepristone willingly or not, and she wants to save her babies, providers can prescribe progesterone to help overcome those progesterone-blocking effects. That treatment is commonly known as abortion pill reversal. And at Bella alone, we have seen dozens of healthy babies born to moms of abortion pill reversal. So, you might be wondering why in the world would anybody target this treatment? It's using a safe, naturally occurring hormone that could potentially offer life-saving treatment. If a pregnant woman is choosing to seek help, shouldn't she have the right to choose to save her baby? Unfortunately, lawmakers in my home state of Colorado disagreed. And in 2023, Colorado became the first state in the country, well actually the world to make it illegal to give progesterone for abortion pill reversal. Now, please note it's still perfectly legal to use progesterone in recurrent pregnancy loss, preterm birth, IVF or really any other reason actually.

And in fact, in Colorado, they were actively promoting the use of progesterone in gender affirming care. But the state made it illegal in one and only one case: if a mom has used mifepristone to try to save her baby. So, in other words, according to Colorado, you have the right to choose abortion, but you do not have the right to change your mind. And that prohibition was a ridiculous violation of my religious convictions as a healthcare provider. As a Catholic provider committed to the sanctity of life, I knew that I could never turn my back on a woman or that baby that she wants to save simply because she took or was forced to take mifepristone.

But at the same time, we knew that if we violated that law, we risked financial fines and the potential loss of our license. So, everything that we had built in our careers and everything that we had built at Bella was on the line if we followed our religious convictions. So, mom and I prayed really hard and we spot sought spiritual counsel. And then we realized that faith requires courage. And so, we filed a lawsuit. And with the help of Becket Fund, we sued Colorado the day that the law was signed. But interestingly, just hours before that law took effect, a woman contacted us seeking abortion pill reversal just hours before. And by the next day, we were able to obtain a temporary restraining order, protecting her ongoing treatment so that we could continue her abortion pill reversal therapy. I wish I could say that that was the end of it, but it wasn't.

It took nearly two years of hard-fought litigation that should have been obvious from the start really. There is no scientific or constitutional justification for banning abortion pill reversal. The state of Colorado had violated our free exercise conscience. They'd violated our rights as religious healthcare providers. And a federal court ultimately granted us permission and permanent injunction, permanent protection to continue providing life-affirming medical care. You guys, the road to victory felt long, especially given the modern healthcare environment where independent faith-based clinics are already being suffocated from all sides and just simply fighting to exist. But we never doubted that this was the path that Christ called us to take. And along the way, he blessed us. Since the day that we filed our lawsuit, at least 20 babies have been born to moms who received abortion pill reversal at Bella. 20 babies that wouldn't otherwise be here. Praise God. I want to share a picture of sweet twin baby girls that were born to a mama who received abortion pill reversal care at Bella during our lawsuit.

Their story has a happy ending. But make no mistake, abortion pill reversal is still under attack. In states like California and New York, they're still targeting religious providers who would offer

abortion pill reversal. As commissioners, you have the opportunity to strengthen free exercise and conscious protections for religious healthcare providers and patients across the country. From the earliest days of this nation, religious freedom has protected the right of people of faith to serve, to serve their communities according to their conscience. That freedom is just as essential today in medicine. As a medical professional, as a woman, as a mom, I want the government leaders to understand that there is no political debate that should override the importance of a mother's choice to try to save her baby. There is a need to protect scientific life-affirming care. Thank you.

Lt. Gov. Patrick (00:48:13):

Something bad is going on in Colorado, obviously. Valerie Kloosterman the floor is yours,

Valerie Kloosterman (00:48:22):

Mr. Chairman and members of the commission, thank you for this opportunity. My name is Valerie Kloosterman. I'm not going to get through this without crying, so I apologize. I'm a wife. I'm a mother, and most importantly, I'm a Christian. I grew up in a farming community near Grand Rapids, Michigan, and that's where my husband Mike and I are raising our four beautiful kids. I've attended a United Reform Church my entire life, and my faith in Christ led me to enter the healthcare profession to care for patients in a way that honors God and also blesses them. And because I am a Christian, that means I am also a Christian physician assistant. I believe and know that everyone is created in the Image of God and worthy of love and respect, that God created humans, male and female, as a reflection of His Image and for His glory, and that God doesn't make mistakes.

My first job after graduate school was at a local outpatient clinic called Metro Health. My mom and my grandmother worked in the same healthcare system, and they both worked there for over 40 years. So, I was the third generation to work there. I loved my patients and I loved serving our community for 17 years, caring for patients of all ages and all backgrounds. Some of my pediatric patients grew up and brought their own kids back to see me. Spending a lot of time with my patients was important to me because their health and their stories really mattered. My coworkers became like family to me.

But in 2016, the University of Michigan Health began acquiring our clinic. And by 2021, the clinic was renamed as a state operation. In May of 2021, the University of Michigan assigned a company-wide mandatory training that forced me to affirm statements about sexual orientation and gender identity that conflicted with God's Word and with my beliefs, I could not complete this training unless I pledged my agreement to University of Michigan Health views. My family and I prayed about this for three weeks, and my office manager told me to go speak with the Department of Diversity, Equity and Inclusion, but they wouldn't meet with me until after the training was due. And I knew that if I didn't complete it, I would be fired. I had asked the DEI department for a religious accommodation and explained why affirming those statements would violate my conscience. Three weeks later, the HR and DEI department summoned me to a meeting and interrogated me about whether I would use pronouns that went against biology and whether I would refer patients for transgender surgery.

I was shocked. I had never asked about these topics, and there had been no patient that had ever complained. But I explained that because of my faith and my medical judgment, I could not use pronouns that conflicted with biology. I stated that I could use patient names and instead of

pronouns to respect their wishes. At this, one of the DEI officials named Thomas clinched his fist and told me that I could not take the Bible or my religious beliefs to work with me. Thomas asked whether I knew what would happen if every provider took their religious beliefs to work. And I said that patients would experience compassionate care because Christian healthcare providers viewed everyone as made in the Image of God and that we treat our patients with the love described in 1 Corinthians 13. Thomas called me evil for not giving patients exactly what they wanted.

But I respectfully explained that medical providers are not required to give patients everything they ask for, such as antibiotics, opioids, or surgery, if that would go against the provider's medical judgment. When I had said that I had treated patients who were gay and lesbian for several years without any complaints, he called me a liar. He said that if he was my patient and I used his name rather than his preferred pronouns, he would never come back. And Thomas claimed that using a patient's name instead of preferred pronouns would lead them to suicide. And I would be the cause. I was able to cite scientific studies and research that showed otherwise. And although he had no medical training, Thomas shot back that he had studies that would always disprove my studies. But all I was asking for was that a simple accommodation. But the Department of Inclusion had no space for Christian beliefs.

Less than a month later, I was fired. The staff member who was supposed to advocate for me, summoned me into a conference room with my termination letter on the table. She told me, today is your last day. You no longer work for the University of Michigan. They wouldn't allow me back on the property, I had to turn over my badge. I couldn't say goodbye to my beloved coworkers. Even worse, some of my patients I knew were waiting for important test results. And I never got to follow up and I never got to say goodbye. These were patients who had trusted me at their most vulnerable moments, and I let them down.

A few weeks later, my coworkers boxed up my belongings, and one by one, they came out to the parking lot to give me hugs and to cry with me. They told me they were sorry and that they did not understand why such a great provider would be fired without explanation. Every time I drive past the clinic, which is across from our grocery store near the library in the post office, I fight back tears. I think of my friends still working there. Many of my patients have actually reached out and told me that they were very upset when they found that I was fired. But it's been a blessing to me that some of them have come to see me at my new clinic. And by the grace of God, I was able to find another job. And to this day, I continue serving patients of all backgrounds motivated by my Christian faith. What happened to me broke my heart. I don't want anybody else to experience this kind of religious discrimination. And that's why I founded First Liberty Institute. And in 2022, we filed a lawsuit in federal court. In 2023, the court held that the hostility I experience likely violated the free exercise clause, and that the hospital's refusal to accommodate my religious beliefs while accommodating the preferences of other providers, likely violated Title VII and the Equal Protection Clause. But after that ruling, the University of Michigan tried to throw the case out of court and into arbitration.

But with the help of Clement & Murphy, we appealed to the sixth Circuit, which held that my case belonged in court, and the hospital was too late to change the forum. And almost five years after I was fired, we're seeking a final judgment so that other people of faith are legally protected from this kind of heartache. And I'm praying that God would use my case to protect religious freedom for my children and the next generation so that they can freely live out their faith in the workplace. And not in fear. “For God has not given us a spirit of fear, but of power and of love

and of sound mind." 2 Timothy 1:7. For this case is not really about me: It's about God and honoring the call that he has given me. And in closing, if I may, I'm so very grateful for this administration's commitment to protecting conscious rights.

The Department of Health and Human Services has launched an investigation because of my case. And I am hopeful that HHS will continue its important efforts to investigate conscious complaints and enforce existing laws. I would also offer three recommendations to the commission. First, to encourage Congress to add a private right of action to the Church amendments such as the Conscious Protection Act, which is recently introduced. A law like this would've made it easier for me to find a lawyer and seek justice without procedural hurdles. Second, that hospitals receiving federal funding should be required to adopt written policies that clearly define conscious protections with internal procedures, ensuring that providers like me can receive religious accommodations without retaliation. And third, the government should prohibit staff trainings or policies that coerce providers like me into violating our conscience. Whether it's by forcing us to affirm statements or participate in procedures that would be considered harmful to patients. Instead, to receive federal funding, hospitals should train their staff about the legal protections of conscious rights and religious freedom so that providers like me know their rights and that leadership respects those rights. Thank you for listening to my story. And may God be glorified.

Lt. Gov. Patrick (00:58:01):

All of you are courageous and magnificent. Dr. Carson.

Dr. Ben Carson (00:58:05):

I want to thank each of you for the courage that you've exhibited. Having spent most of my career in medicine, I realize that there is sort of a silent code. Everybody has to stick together and nobody wants to stick out. And you all have done that. I appreciate that. Dr. Haim, did they ever confront you with the real reason that they were persecuting you or they continue to come up with all these subterfuges?

Dr. Haim (00:58:36):

Well, you know, luckily, the, the case was dismissed with prejudice on January 24th, 2025, after the Trump administration was inaugurated. But you know, I think that as the case unfolded, the real reasons became very clear. I mean, you could just assume the reason why they came after me is because of everything. If a random person like me who has no power, no resources, is just like a regular guy, if I can blow the whistle and then within 24 hours the conduct, I exposed was made illegal, it can then initiate investigation of more whistleblowers, that's an existential threat to these forces of evil because it shows that a regular person can do something about it. And that's why, that's why I believe they had to destroy me, and that's why they had to use all these resources to try and make it happen.

Because if I survived, then that would lead other people to do the same thing in which it did. Because that second whistleblower, her name is Vanessa Sivadge, she ended up going public about a year later, the same day that I was arraigned for the first indictment, alleging an even more significant system of misconduct in the clinics, which involved alleged Medicaid fraud, using false diagnoses to get insurance to pay for these interventions, which I believe is something

that's going on all around the country, which my wife also happens to be investigating for the Texas Attorney General in an ironic turn of events.

Lt. Gov. Patrick (01:00:27):

Ryan?

Ryan Anderson (01:00:28):

Yep. great. Thank you to all four of the witnesses, these were just so powerful testimonies and I'm sorry for what you've had to experience, but thank you for sharing. And I wanted to offer a couple observations and ask a question. Ethan, when we first met, you came out to visit my wife and me and our kids. And for those who don't know, we live on a small farm in Virginia, and it was around this time of year, it was lambing and kidding season. So, we had some baby lambs and some baby goats, which are called kids. And Ethan was helping my wife castrate the newborn lambs and kids. And the observation I wanted to make is that you don't need to be a devout Jew or devout Christian to realize that it's okay to castrate baby goats, but not to castrate baby humans.

And, and it just strikes me that before we even get to the religious liberty violations, something else has gone wrong in our legal system, in our healthcare system, that even though Texas had passed a law prohibiting sex-rejecting procedures, your hospital was still doing it. And that's why you had to blow the whistle. Or take the Colorado example, I mean, the fact that it's a one-way ratchet. The only therapy you can receive in Colorado is to encourage you to transition as a minor, right? So, it's a religious liberty violation, but you don't need to be religious to know that we shouldn't be trans-ing the kids. Same thing is true in Colorado with the abortion pill reversal. You could be a secular woman who took that first pill because you were coerced, and then you want to reverse it. Or you took that first pill because you were scared and then you regret it and you want to reverse it, right?

So, before we get to any of these four testimonies, a religious liberty violation, something else in the healthcare system has gone wrong. And I think that's important to note for our recommendation. The best protection for religious liberty in healthcare is not practicing unethical medicine in the first place. And what happened to all of you? You were being asked to practice unethical medicine. And it's not just religious people who have those scruples. So that's one observation. The other observation is, but in a certain sense, it is. Each and every one of you mentioned the Imago Dei. There is a worldview that the nation was founded on. We're going to celebrate the 250th anniversary of the declaration. The concept that we're all created equal and endowed by our Creator with certain inalienable rights. That's a philosophical theology. That's Thomas Jefferson's way of kind of glossing Genesis and giving us the Imago Dei in a political guise.

If you are a philosophical materialist who thinks we're all just evolutionary dust, well then yeah, the child in the womb has no dignity. Yeah. Just like you can castrate the baby goat, you can castrate the baby human, right? So, so there is, at a certain level, there's a philosophical theology disagreement going on here that I, I think we should be sensitive to. The American system of ordered liberty doesn't work on just any old given metaphysics and anthropology. There, there is a certain distinctive ecumenical, I mean, it's an interfaith issue. We had Catholic, Jew and Protestant expert witnesses on this panel, and there's a common worldview that made this American experiment tick. The question that I wanted to get to was, it strikes me that you know,

this particular panel was focused on healthcare providers and you all had your religious liberty violated.

But the reason that- I can tell because I know, I know Ethan and I, and- I know just from hearing your testimonies, the reason you all became healthcare professionals was not for your own personal glory and gratification, it was for your patients. And, and it strikes me that when there are religious liberty violations for the providers, the people who actually suffer the most are your patients. I don't know if there's like a distinctively Judeo-Christian way of doing dentistry. There might be. But it strikes me that there are distinctively Christian ways of doing mental healthcare counseling, of doing reproductive healthcare, of doing beginning of life, end of life. I mean, there, there are reasons why a patient might want to specifically seek out a person of faith as their medical doctor. And so, I just wanted the, the question was really for any of you, but particularly for, you know, for, for Bella Health, for, for Kaley, for mental health providers, can you describe why it is that your patients want you and want Bella as their healthcare provider? Because I it strikes me that you are offering something that you can't get from the secularist doctor, and that we should highlight that, that that strikes me as very valuable.

Abby Sinnett (01:04:48):

I am happy to share. Thank you for asking that question. It's so true. At the end of the day, each of us holds something that is so important in who we are. We know that we are made good. We are, we know that we have been created well, and, and we want that for ourselves. And our heart desires that for ourselves. And so, we seek those who can help us to be the best versions of ourselves. And how are we going to protect that? How are we going to protect that for our children? How are we going to protect that for our grandchildren? We go to the people who can help to protect those things, especially in the most vulnerable places of our bodies, our mind, our reproductive organs. Those are the most vulnerable places that we have. And so, we, as patients, as a mom, I seek somebody who's going to help me to do what needs to be done for my children. And I think, I think that's a really important piece.

Lt. Gov. Patrick (01:05:37):

Anyone else wish to answer? Ethan?

Ethan Haim (01:05:44):

I think it's, it's like the perception of human physiology as designed in a certain way. Where, you know, Aristotle, he defines it in Nichomachean Ethics as like the physiology is the way that a human can survive and thrive, right? Where there's this innate mechanism that's been created, which our job is to preserve. And it's the preservation of that physiology that is what means to heal. Like, to heal is not just anything. You can't just do anything and heal, right? It's the, the preservation of what's already been made. And, and what we see with everything, with all these, these forms of, kind of twisted medicine is these people who believe that there's this design that they can make that, that they're above these laws that control our world.

Lt. Gov. Patrick (01:06:44):

Bishop Baron.

Bishop Robert Barron (01:06:46):

Thank you very much. I found the testimonies very powerful. And this happens to me a lot on this commission. I listen to testimonies and I think I'm living in upside down land. You know, at times you wonder how, and it touches on Ryan's point about metaphysics and a basic philosophical and biblical approach to reality, it's been turned upside down. You know, the Colorado case just strikes me as a species of insanity. I mean that you wouldn't be able according to someone's own desire to reverse that process. But I want to ask all of you, it's a simple question, and I've got my own thoughts on it, but I'm curious to know yours. Why is this transgender issue of such central importance to the secular culture, why is that the one that we are fighting with such tenacity to preserve? What are your thoughts on that? Why that issue? Transgenderism.

Abby Sinnett (01:07:40):

It's at the very source of who we are created to be. It's it, if you want to strike at our faith, if you want to strike at who we are, you strike at our identity. It's evil. That's what it comes down to. Start at the evil or at the, at the basis.

Valerie Kloosterman (01:07:57):

We believe we're made in the image of God, and ultimately that's who they want to fight. The world is not a friend to Christ. And that met me at my front door, right? With my kids knowing they were going into a world that was not friendly. And we are not assigned gender at birth. It's assigned by God. But that is not what they want. The human wants to fight against that. And thankfully we've been given, you know, sound minds to be able to make that decision. Yeah, one of the things that, the illogical-ness of it, if that's even a word you know, I was told that I needed to affirm that gender is fluid, but yet I needed to form transgender surgery.

If I did the one and genders fluid, and they changed their mind, how illogical is that? So even just to have that conversation of how this doesn't even make sense, right? I wasn't even given that opportunity. I was stopped at the front door. And that's the scary piece, but that's also why I think all of us are willing to do what we're willing to do is not only for our jobs, but for our kids moving forward. Even if it's just a voice, even if I make no difference, my kids see me fight. And that gives them the opportunity to step forth as they get up to do the same thing.

Lt. Gov. Patrick (01:09:30):

Kaley.

Kaley Chiles (01:09:32):

I think part of it too is our preference, especially in the mental health field, to believe that counseling is not philosophical or existential. And the attempt to not impose values has become: you're not allowed to say what your values are. And as in a counseling relationship, it's important that the client can be authentic and transparent, and that the counselor can be authentic and transparent. And some combinations are just not a good combination. And it's really important for the client and counselor just to be able to acknowledge that. And so, if we can't even acknowledge that counseling is philosophical, it is foundational, it is existential, then it's going to be impossible to find a good fit for someone who can help you with that foundational level and then build upon it?

Ethan Haim (01:10:35):

Oh, you know, I think that the answer to that question can be illustrated in the final pages of George Orwell's 1984. I know it's kind of like an overused metaphor, but, you know, there's a scene between Big Brother and then Winston, the main character, where he is being tortured. And, you know, in order to be freed from the fiscal pain, he has to affirm this truth at two plus two equals five. And compared to what's happening today in our country, you know, that's kind of mild, right? It's like two plus two equals five. That's a much easier thing than a boy is a girl, right? And it, I think what that scene illustrates is that for the tyrants to maintain control of us, we have to take in this lie, un-dignify ourselves. We have to de-base ourselves, because only then can we become controlled. And when we believe in an authority that is beyond them, then we are not controllable. And I think that's what it comes down to, is, is these people need us to become debased and undignified. But for those of us who refuse to undignified ourselves, you know, we represent a great threat to them.

Lt. Gov. Patrick (01:11:56):

Kelly.

Kelly Shackelford (01:12:00):

Let me, Valerie, first, I just want to say it's a privilege that we get to represent you. But I've been doing this kind of work for 37 years. Litigation, religious liberty. Your kids did something. I've never seen thousands of cases. We got a letter before Christmas, early on in the case from your kids who had seen you come home being fired. And they sent us a letter saying that we told our parents that we don't want Christmas this year. We want to give the money to be able to fight for religious freedom for people like our mom. First, you've obviously got a big heart and you, you've transferred it to your children, but would you talk a little bit about what this is like for the family when you go through this? And I want to ask a quick question to Dr. Haim.

Valerie Kloosterman (01:12:51):

So, I have just a little quick little, I have two boys and two girls. I have a set of triplets. And then one more. Yeah, we raise our kids to be godly. And we thought we were doing a good job. And then this came and it gave us that opportunity to witness to them conversations we had around the dinner table that we didn't expect to ever have. But I do think it has given them the opportunity to ask questions to see our faith being lived out. But with that came consequences: missing baseball games, upcoming field trips that we have to say, sorry, we can't participate in because we have something going on, sadness to not being able to maybe a hundred percent give myself to them as a mom. And like I said in the beginning, right, I'm a wife, I'm a mother, but I'm a Christian.

And they know that, and they know that comes first. That, yeah, there are sacrifices that we make that we're willing to make to some extent. Do I wish it didn't come to my front door? Absolutely. It would've been easier, right? But we're called to be faithful and that includes this. And here, and right now. It's been five years. They had kind of said, “oh, your kids will be graduated from high school by the time this is done.” Now, they're like, “well, they'll be graduated from college by the time this is done.” So that timeframe we know is ongoing, right? But God is good. And in this has shown us He's working through us and we're willing to sacrifice. Mike and I have made that commitment. The kids have made that commitment, and

they've said over and over, mom, do this. Keep going. Don't stop. In the moments where we're frustrated and sad, they've said, keep going. We want you to keep going. Never have they said, I wish we didn't do this. And if that's what all this is for, it's worth it.

Kelly Shackelford (01:14:48):

Thank you, Dr. Haim. I'm, I was just thinking as you're testifying, we have laws that allow people to bring lawsuits if their civil rights are violated, and if they win, they get their attorney's fees recovered. But on the defensive side, there's really not that same thing. And I'm thinking of people like you who the federal government comes after, even in a criminal context. And if you don't have money, or have somebody come represent you, I'm just wondering if one of our recommendations shouldn't be- because we should, the, the government, the federal government should have all, shouldn't have all power over every citizen be able to come with criminal lawsuits, that you have to have millions of dollars to hire. I'm just wondering if we shouldn't have a recommendation that whenever the government does that to a citizen, a business or anything else, that if they lose, they have to pay for your attorney's fees and it should come out of that agency's budget so that they will stop doing the kind of horrible thing that they did to you.

Ethan Haim (01:15:49):

I mean, I absolutely think there, there should because I mean, just for us we raised $1.3 million in small dollar donations during the prosecution, which was amazing. It was because of people of faith who are willing to join this army, you know, in order to support us because they saw that we were not only, you know, defending the truth, but also fighting back to do what's right. But we still owe half a million dollars in legal fees. But, you know, thankfully one of my attorneys is here that [inaudible] is representing us in civil lawsuit. And I can't really go into the details of that, but I think that would be a recommendation that would be very warranted. Because, you know, the one thing I discover is that when you go through this legal process, you get crushed.

I mean, in the first couple of months when I was anonymous, we went through $300,000 in like not very long. I mean, we went flat broke very quick, and there was no way to stand up against the federal government because of their endless resources. So, you don't even do it. You know, you don't even, I mean, if it wasn't for, you know, ex-corporation [inaudible], I mean, I thank God for them being on our side. I mean, I wouldn't even try, I wouldn't even think about it because I know I'd be crushed. I wouldn't, you know, we have to pay our mortgage. Right?

Kelly Shackelford (01:17:12):

I would think if anybody would understand lawfare and government abuse, the President might have some experience with that. To do a recommendation. So, thank you. Thank you

Lt. Gov. Patrick (01:17:23):

Reverend Graham. And then Alice, I'll come to you next Reverend.

Rev. Graham (01:17:29):

Just a, a statement. There's a, a thread that runs through all four of these, and that is the thread of what's right and having the guts to stand for what's right, and having these guts to stand for what's right is what's cost them big time. And I just thank God for you and you are an

encouragement to others. And we pray that God will bless you and that His hand will guide and direct and that you'll prevail. So, I'm proud of you. You're, you're my heroes. Amen.

Lt. Gov. Patrick (01:18:14):
Allison.

Allyson Ho (01:18:16):
Dr. Haim, you said something and it really moved me, and I wrote it down. And when you were talking about your colleagues and friends that you thought might stand with you and didn't, you said, when evil showed up to their door, they let it in. And each of you, when evil showed up to your door, you strode out to do battle with it. And I'm so grateful for you and for your courage, but I wanted to give whichever of you would like to take the opportunity: what enabled you, like what do you give credit for when evil showed up to your door, you strode out to meet it? Whereas for a lot of people, the opposite is true. That when evil showed up to the door, they let it in. And any of you that would like to answer that.

Kaley Chiles (01:19:10):
I'd love to answer that because one of the things that we work through in counseling is one of the most common experiences in addiction is when your stated values are not the same as your lived values if someone were to watch your life. So, I think this is when we are grounded in what we believe. Many religions believe that sex is immutable. Biology demonstrates that sex is immutable. And when we are grounded in that, we have to ask ourselves, how do you move forward given that reality? And every day there are victims, there are human costs, there are people losing organs, losing family relationships, losing their sense of who they are as a human being. When we sit by idly.

Abby Sinnett (01:20:13):
Yeah. When I had my deposition a few years ago, I had a moment where I was being questioned and there was lots of things coming at me, and it got really, really intense. And there was a moment that just came upon me and, and I was reminded of the scripture, “For we are surrounded by so great a cloud of witnesses that we must persevere in running the race.” And that was a moment where everything just settled down for just a second. And I remembered that one, we are being carried and our faith carries us. And as a Christian woman, faith carries me, and we are being carried by something that is so big. Praise God for that. But also, that cloud of witnesses is one another. And what we can do together and what we can do with our community of faith, with faithful people who will step forward together, that makes it so that in those evil moments or in those really scary moments where it's coming at your doorstep, that you can step forward. So, “for we are so surrounded by so great a cloud of witness that we must persevere in running the race.” Thank you.

Valerie Kloosterman (01:21:16):
Yeah. I had said to my kids when I was coming home from being fired, I said, God is my God, not my job, not our finances, not even our health or our wellbeing, but God is my God. And to say, “yet not I, but through Christ and me” that I'm not ashamed of the gospel. I know there are plenty of providers who say, I'm just going to put my head down. I'm just going to do what I

need to do for the day. I know there are individuals in school who have said, you know what? I'm just going to give up healthcare because I fear what's going to happen. I fear repercussions. I fear what my life is going to look like in five years. And they've stepped away from healthcare. And we cannot have that happen. I want to go to a Christian healthcare provider.

I want to go to somebody who says, I want to care for you, all of you, not just in an assembly line or, because this is my job, but I want to go to somebody and I want my kids to go to somebody. I want my family to go to somebody. I want all of us to be able. And I fear, in 10 years, there's going to be a limited number of Christian people in healthcare because they fear what is happening to all of us on this panel. And I couldn't have done it on my own, my family, but my faith in God to say, "okay, God, this is in your hands." Whatever happens. And if it means I have to scoop ice cream because I lost my job, I'm willing to do that. But I do think it needs to be said that if we don't protect healthcare providers, now, the whole entire healthcare profession in 10 years is going to look entirely different. And I dread what that is going to look like.

Ethan Haim (01:22:54):

I think, I think that I would say a similar thing. It's because if we believe in the things we say, that there's a God above who judges us. Because as a Jew, it's like, I believe that we have a covenant to fulfill in that whatever happens on this earth doesn't matter as long as those covenants are fulfilled. You know, I can go to prison, I can lose all the money I ever have. That doesn't matter, as long as that right thing is done, because at some point, we will, we will ultimately be judged.

Lt. Gov. Patrick (01:23:29):

I'll just close out this panel. Bishop, you asked a question why these issues? And so, someone who's been involved in it from a legislative standpoint for a long time and dealing with the truth has to be the truth with Democrat control through two presidents. I remember when President Obama said, if you don't allow boys to use the girls' room, we will hold back your federal funding. And I talked to the superintendent of the Fort Worth School District that time. They had three transgenders out of 86,000 students. So, when you hear this conversation, we've had a lot of witnesses, members, that lost something. But this is pure evil. This is taking someone's life or changing a life or denying a child being born. This is evil. And we hear time and time again in this committee of all the hearings we've had, these administrations, they didn't just want to stop you.

They wanted to punish you. So many of our witnesses, they've been punished, and that is evil. And America better wake up to this. And you know, we have people watching today and they are probably saying, "is this the America that I live in?" So, one of the things we have to do, members on this commission, and our final report to the President, is we need to be sure that America knows their rights. And America knows that evil is among us. And I don't think it's an accident, Bishop. There's a leftist movement who wants to divide and destroy our families and destroy God and be God. It's clear. And the way you do that is destroy families on the simplest things. Transgender surgery, or boys playing girl sports. The simplest thing that makes some Americans say, well, I'm not really sure about that. So, any other questions, comments, members? Thank you. You are a great panel. We honor you. Thank you.

Members, we are on time so far, maybe running five minutes behind, but we will move forward. Jean Marie Davis, how are you? We, we needed a smile after that heart wrenching test. The floor is yours.

Jean Marie Davis (01:27:29):

Thank you. Good morning, commissioners. Thank you so much for the invitation to share my story with you today. My name is Jean Marie Davis. Today I serve as the executive director of two pregnancies resource centers, one in Vermont and the other in Massachusetts. So that is not where my story begins. My story begins in darkness. From the age of two to 29, I was sex trafficked around the nation in 33 different states. I experienced abuse, rape, and even attempts on my life. I was addicted to crystal meth, and I was trapped in a world that I had never thought I could get out of. Eventually, the abuse became so overwhelming that I tried to end my life. I believed that there was no way out until I unexpectedly found out that I was pregnant. When my trafficker found out he wanted me to give him $1,500.

And when I didn't want to give it to him, he wanted me dead. Not only did he want me dead, but the police told me in California that my family and other traffickers wanted me dead as well. I started calling shelters in the four states that the police said I would be safe in. But 27 shelters denied me because they said my situation was too severe. Finally, a domestic shelter in New Hampshire took me in when I only had $1.38 to my name. That shelter is the one that connected me to the Pregnancy Resource Center where I met a woman named Phyllis. She looked at me with compassion, and she gave me the five words that changed one of my lives forever. And that's “how can I help you?” For years, the only words I heard was threats, violence, and lay on your back. But that day, someone treated me like my life mattered. She first asked me about my pregnancy. I told her I wanted an abortion. She asked if I wanted an ultrasound. I said, I'll do the ultrasound. If it's a boy, I'll keep 'em. But if it's a girl, I was going to abort because I didn't want my daughter to go through what I went through.

Phyllis then asked me if I knew a man named Jesus. I told her that I didn't know if that man could actually help me, but I wanted what Phyllis had. There was something in her eyes. And at that day, that moment, I accepted Jesus Christ into my heart. And that changed my life. Because of that, it was a boy. And that now 11-year-old boy who saved my life is here today next to me.

At that pregnancy center, I felt something that I had never expected before: hope. And that changed everything. With the support of that center, I began rebuilding my life. I overcame addiction, pursued education, and eventually earned a degree at North Point Bible College. As only God could orchestrate. several years later, I became the executive director of a pregnancy center. Today, I help women who are walking through the same darkness I once lived, women escaping sex trafficking, fleeing from abusive relationships, women who believe abortion is their only option because no one has showed them another way. When they walk through our doors, they're meet with the same words that change me, which is, “how can we help you?” Because pregnancy centers exist for one reason, to provide real help for women who feel there's no options. Every day we provide pregnancy tests, parenting classes, essential items for families, along with assisting women in domestic violence and human trafficking situations.

We walk with women not just for a moment, but often for life. I know personally that this changed lives because I stand here today, proof that my life has been changed. But despite the life affirming and the lifesaving work, pregnancy centers across the country are facing growing attacks, and the government often try to silence them. In Vermont, the state passed a law

targeting privacy resource centers, threatening us with massive fines and restricting our ability to provide information and support to women in need. So, in 2023, I had no choice but to challenge Vermont's law with a difficult legal battle. I'm grateful, actually proud to share that last year we won that case. With the help of Alliance Defending Freedom, Vermont amended the its law to no longer discriminate against centers for offering life-affirming services. Pregnancy centers must be free to serve women and their families without fear of government punishment.

To silence these centers is to silence hope. My story proves things that critics often refuse to acknowledge. Pregnancy centers empower women, and sometimes they literally save women's lives. Today I sit before you, not as a victim, but as a mother, an overcomer and a leader, helping other women rebuild their lives. And I will continue to defend pregnancy centers because somewhere right now there's a woman that is just like me, escaping sex trafficking, pregnant, terrified, and wondering if there's someone out there that cares if she lives or dies. Pregnancy centers, make sure she hears the words that changed my life. “You're not alone. You matter. And there is hope.” The government should never deny this hope, simply because it doesn't like the center's faith or mission. Thank you.

Lt. Gov. Patrick (01:33:45):

Anyone looking to do a movie on someone's life should be looking to you. That's just- you're remarkable. Sherrie Laurie.

Sherrie Laurie (01:33:57):

Good morning. My name is Sherrie Laurie, and I serve as the Executive Director of the Downtown Hope Center in Anchorage, Alaska. I'd like to thank this commission and President Trump for this opportunity to share our story. Downtown Hope Center serves people experiencing homelessness and hardship in Anchorage, Alaska. Every day we serve 700 people, a cup of warm soup, a bag of lunch, and a nutritious, basically a nutritious lunch, during the day. The Hope Center serves everyone who seeks our services. We offer meals, showers, laundry service, mail service, and assistance to help them rebuild their lives. We also offer trauma and recovery classes and a job skill training program for culinary and bakery skills so people can get jobs and move on, helping men and women find healing, stability, and purpose in their lives. Over the years, thousands of struggling individuals have come through our doors, seeking help to alleviate the rigors of life on the streets of Anchorage.

Everything we do is motivated by the love of Jesus and the family, and the firmly held belief that every person, no matter how broken their lives are, has dignity, value, and God-given destiny to fulfill. We also operate an 80-bed woman shelter. The shelter is large open room with cots placed three feet apart for the women to sleep on at night. As you can imagine, Alaska's very cold in the winter and in the summer at times. And the cold's not just uncomfortable, it can be deadly, and nights on the streets are extremely dangerous. This past couple of weeks, they have been double digit minus zero temperatures. For many women, Hope Shelter provides something they've not felt in a long time, safety and protection. For years, Anchorage has faced a serious homelessness crisis. At times, roughly 1400 people are living on the streets year-round.

Alaska also has some of the highest rates of domestic violence in the country, four times the national average, and a serious problem with human trafficking. The majority of women who come to our shelter are survivors of sexual assault, sex trafficking, and severe domestic violence. Most arrive with nothing but the clothes on their back. Some have escaped a life-threatening

human trafficking situation, much like Jean Marie. Others have just been assaulted and show up at our door, injured at all hours of the night. This is why our shelter exists. We've heard women state, “when I came here, it was the first night and years that I felt like I could sleep in safety.” That's the kind of hope we provide to women. But unfortunately, the city of Anchorage disagreed. In January of 2018, the ladies were settling in for the night, and I received a call to come downstairs to handle a situation.

A 6-foot-one man dressed in a pink nightgown with a pink suitcase was standing at the door. He was extremely inebriated, very belligerent, and had a gash down his face, and it was bleeding. He had been delivered there by the police because he wanted to stay in a woman's shelter. The police brought him to the door and just left him. It was obvious to me that he needed medical attention. So, I called him a taxi and paid for him to go to the hospital to get stitches. He thanked me, called me Mother Theresa, and went on his way. After he left, the women in the shelter were visibly shaken. Many knew him from the streets. He was a violent man. Several told me that if I had allowed him to stay in the shelter, they would've left that night and gone and slept in the woods. And this is in the middle of January in Alaska. Because they felt unsafe, if he would've stayed there, they had actually surrounded the walls of the shelter getting away from him when he was in there. And understandably so. Asking a survivor of sex trafficking or sexual assault to sleep three feet away of a man, would destroy the very safety they came to find.

Within a week, I received a letter from the city of Anchorage. This gentleman filed a complaint with the Anchorage Equal Rights Commission against the Downtown Hope Center alleging discrimination based on gender identity. The city opened up an investigation and attempted to force us to allow men into our women's shelter, even though the city's own ordinance contained an exemption for homeless shelters. But the pressure to let men sleep next to women didn't stop. So, to protect the privacy and the dignity of the women in our care, we had to file a federal lawsuit. Our mission has always been clear. We serve everybody, we feed everybody, we clothe everybody. To this day, the man who filed the complaint still comes to our soup kitchen for lunch. But at night, our shelter is for women only. Thankfully, with the help of Alliance Defending Freedom, the court ruled in our favor.

But that wasn't the end of the story. Instead of accepting the court's decision, the city of Anchorage changed its non-discrimination ordinance and tried again to make us allow men into our women's shelter. This forced us into a second lawsuit. Thankfully, the courts again protected our freedom to exist consistent with our belief that God created men and women distinct in design. Our freedom to serve women should never have required years of litigation. Freedom is a God-given, right not a privilege granted by whoever holds power. Women should never have to worry whether their safety and privacy will disappear with another ordinance change. At the Hope Center, our mission is hope restored, hearts renewed, lives transformed, and we see it every day. Religious liberty is what allows us to remain faithful to the conviction that made this mission possible. That's why we're grateful for the work of what this administration doing to protect the first freedom. And we urge leaders at every level to safeguard it. So, ministries like ours can continue serving those we who need it most. Thank you for your time.

Dr. Carson (<u>01:40:28</u>):

Well, we appreciate that very much. I know how diligent you are because when I was Secretary we dealt with that issue. Thank you. We now will have Pastor Brian and Kaitlin Wadi.

Pastor Brian Wuoti (01:40:51):

Thank you to President Trump and this commission for allowing us to speak about our experience as foster parents. My name is Brian Wuoti, and this is my wife, Kaitlyn. We have dedicated many years to serving our community in Vermont. I'm a pastor and a school teacher and Katie homeschools our five children. Together, we've tried to live by God's call to do justice, love mercy, and to care for the orphaned. In 2014, we saw a growing crisis in Vermont. The opioid epidemic had hit our state particularly hard, and there were more children in foster care than there were loving homes to accept them. Our church had started a recovery group, but Katie and I felt called to do even more. So, we stepped forward and our family had the privilege of fostering and ultimately adopting two brothers. Foster care is partnership with the state, working together to bring children safety and stability, and whenever possible, reunification with biological parents.

For years, our relationship with Vermont's Department of Children and Families was a success. But in 2022, that changed. When we sought to renew our foster care license, the state introduced a new policy. It required parents to promote gender ideology, including telling children that they could change their sex and using inaccurate pronouns if a child desired. We told the state that we would love any child who came through our door. And loving a child means speaking the truth in love. We believe every child is wonderfully made. We would never tell a child that God made a mistake and that he or she was born in the wrong body.

Kaitlyn Wuoti (01:42:49):

This issue is deeply personal for our family. As a child, I struggled with gender dysphoria. My experience confirmed what research shows now. The majority of children who experienced these feelings will find peace with their bodies if they are given time, support, love, and the freedom to grow. I know personally that there is nothing compassionate about confusion. Love requires truth, and I will be forever grateful to my parents for loving me unconditionally and speaking truth in my life about who I am and how God created me. When we told Vermont that we would love and care for any child, but could not harm them in this way, the state revoked our foster license.

Vermont also revoked the license of another remarkable family, Bryan and Rebecca Gantt, for similar reasons. The Gantt specialize in caring for children with special needs and have adopted three children from the foster system. At the time their license was revoked, they had just agreed to welcome a soon-to-be-born baby boy whose mother struggled with addiction. That baby needed a home. But instead of putting the child's interest first, the state turned away a loving family that was waiting for him. This was heartbreaking, especially in a state where children have slept on police station floors because there were not enough foster families. Vermont excluded families like ours in the Gantts, not because we did anything wrong, but because the government did not like our beliefs. And Vermont is not alone. Kids are suffering in other states that have enforced similar policies, including Massachusetts, Oregon, and Washington State. These policies label families like ours unfit, even though many of us have spent years successfully caring for foster children. That raises a troubling question. If the government can declare families unfit to foster a child because we believe sex can't be changed, how long before the government decides we are unfit to raise our own biological children?

Pastor Wuoti (01:45:09):

Which is why we felt we had no choice but to sue the state of Vermont for violating our First Amendment rights, which we did in 2023, with the help of Alliance Defending Freedom. Thankfully, just last month after more than three years of litigation, Vermont finally agreed to rescind its decision. Allow us to reapply for our license and end its discriminatory policy. But this should never have required a courtroom. The government shouldn't target parents who embrace the truth that there are only two sexes, equal in worth different in design. Today, we are grateful to this administration for the steps it has taken to protect kids. We appreciate the Administration for Children And Families for sending letters to Vermont and other states warning them for their exclusionary policies that violate the First Amendment and federal funding guidelines. We know that when law rejects truth, there is a human cost. But when government respects religious freedom, more families step forward. More children find forever homes and communities grow stronger. Our hope is simple, that every child will have a chance to grow up in a safe, loving home, and that no state will stand in the way of families eager to provide one. Thank you.

Dr. Carson (01:46:49):

Well, thank you all for fighting so hard, for just logic and common sense. We appreciate that. And now Archbishop Cordileone from San Francisco.

Archbishop Cordileone (01:47:02):

That's good. Thank you.

In the winter of 1839, a woman in her mid-forties encountered a blind, partially paralyzed elderly woman on the streets of Paris who had no one to care for her. She carried the elderly woman to her apartment and took her in from that day forward, letting the woman have her bed while she slept in the attic. She soon took in two more old women in need of help. And by 1841, she had rented a room to provide housing for a dozen elderly people. The following year, she acquired an unused convent building that could house 40 of them. This woman's name is Jean-du-Gard. Now Saint Jean-du-Gard, whose profound act of charity led her to found the Little Sisters of the Poor, a congregation of women who vow themselves to be poor, as well as chased and obedient, in order to devote their entire lives to caring for the elderly poor.

These are women who deserve our utmost respect and esteem. And I can vouch for this from personal experience. Why then would these humble, holy and self-giving, women have to find themselves in a multi-year burdensome litigation with the federal government over a contraception insurance mandate that was part of the Affordable Care Act. Why must they be deprived of their God-given and constitutional right to serve the poor? And with such great sacrifice in accordance with their moral principles derived from their religious faith? The courage of this poor religious community to take on the federal government with its endless resources cannot be overstated. Their witness to heroic evangelical charity is unmatched. And all of us should take inspiration from their courage. Their fight to uphold religious liberty was not just for them and the thousands of vulnerable elderlies they serve, but was a fight for all of us and in some sense a fight for the soul of our country.

As we've heard over and over again this morning, so many times this has happened. People want to serve the poor with such great sacrifice and generosity and get bogged down in very expensive years-long litigation with the government. This is why it is important that we are here today. And I am grateful for the opportunity to address you and grateful for the work of this commission,

which can be a path to restoring unity in this one area of division. All of us, including non-believers, should be invested in the principle of religious liberty. It is through the faith community that the common good is often most effectively pursued. And without the freedom to publicly witness to our faith through charitable works, everyone suffers. In California, where I am from, there is a Catholic hospital being sued by the state because it refuses to offer abortions.

The State Attorney General sued St. Joseph Hospital in Eureka, claiming the hospital failed to perform an emergency abortion on a patient with twins. The AG claims that the hospital violated Californian's Emergency Services law, even though up to this event, there was never an expectation that a Catholic hospital would perform, have to perform an abortion, except in the situation that required an indirect abortion to save the life of the mother. Should the courts rule the wrong way in this case, all Catholic hospitals in California will be threatened. Then there is a case in Sacramento where another Catholic hospital refused to perform a hysterectomy for the purposes of gender transition. The state sued the hospital maintaining that the refusal to perform the surgery was in direct violation of California's Civil Rights Act, which forbids discrimination on the basis of sex. Again, should the courts rule the wrong way on this, all Catholic hospitals in California will be threatened.

Every year, there are bills introduced into our state legislature to expand private insurance coverage for sterilization, IVF, abortion, surrogacy, gender affirming care, and so forth. If these bills include a religious exemption, the exemption usually only covers organizations that fit a very narrow definition: employs people of their same faith, serves people of their same faith, and has the primary purpose of inculcating religious values. So here we have the secular government defining for religious communities what it means to be religious. Moreover, it contradicts our own definition of who we understand ourselves to be and our service to the community, especially on that second point. And so, it excludes all of our healthcare and social service institutions. Indeed, not only do we serve people of all faiths and none, we don't ask them what their religion is when they come to us for our help, we simply give it to them.

Moreover, what does it mean to inculcate religious values? We believe that simply by serving the sick and poor with the self-emptying love of Jesus Christ, we are inculcating religious values by that witness. It is a matter of witness not preaching platitudes. In my own city of San Francisco, I am proud that the first AIDS hospice was run out of one of our parishes. And it was assumed followed by Mother Theresa's missionary of charity sisters. Before the government established a home for those dying with AIDS, the church stepped up and led the way. And yet there are sadly, countless examples of government suppression of the church's ability to serve those out of reach of the government by enforcing a new and narrow kind of moral standard on faith communities that are at odds with commonly held moral standards from time in memorial. This is government intervention that does not tolerate genuine diversity despite rhetoric to the contrary.

And if we lose this fight, we will have lost the soul of our country. The Founding Fathers understood the value, even necessity of religion, of religious citizens, and the freedom to practice one's faith, which is different from the freedom to worship. The First Amendment is not simply about the freedom to worship as we believe, but to live and act according to those beliefs. The Founding Fathers understood that there had to be a check on secular government in order to prevent the constant tendency to overreach and control. They understood that communities of faith provide this check and may at times serve as the only barrier to the government descending into tyranny and despotism, which happens in parts of the world where robust religious freedom is not embraced in contrast to our own constitution, which is why robust religious freedom

benefits everyone in society, non-believers, as well as the religiously observant. The Framers of our Constitution knew what they were doing, and we adhere to their vision, to our flourishing, or violate it to our demise. Thank you.

Dr. Carson (01:54:46):

Well, we want to thank each of you for very inspiring testimony. You know, a lot of what you're dealing with is common sense or lack thereof. You talk about babies, think about the fact that their brain starts to develop at consumption, millions of neurons every day, later on billions of neurons a day. It continues to develop right up until the mid to late twenties, which of course is the reason that God gave kids parents.

Because obviously if they have an undeveloped brain, they're not going to make really good decisions on their own. You know, we have a society that's fighting against that. Think about it. And men being men, women being women, there's a reason for that of course, because if we change all of our sexes, if we had the ability to do that, fortunately God did not give us that ability because our craziness would take us to crazy places. But I appreciate the fact that all of you are brave enough to get out and talk about this. It is going to be helpful to our country. And now we'll take some questions from the panel. I can't see everybody's lights. Franklin Graham.

Rev. Graham (01:56:10):

I've got a question for you, Sherrie. Are things okay in Anchorage right now? I mean, you got anybody biting at your heels right now?

Sherrie Laurie (01:56:21):

We are okay. Things in Anchorage aren't okay. We are in the middle of elections right now for the Assembly. And our Assembly has been the big problem with so many of these issues.

And so, in April, we should get a whole new Assembly and that will change the city. It's gone really downhill. They've, they've abated camps all over town, but that doesn't mean the people still aren't out there. They're in the woods further in the woods. And so, they made it illegal for people to camp in the city. It's, it's just not the same Anchorage it was 20 years ago at all.

Rev. Graham (01:56:57):

I know Alaska's been extremely cold this winter.

Sherrie Laurie (01:56:59):

Yes, it has.

It's still cold. When I left, it was minus 15.

Rev. Graham (01:57:05):

Are y'all full? I mean, do you turn people away at night?

Sherrie Laurie (01:57:11):

Our limit is 80, but we always go over. We have an apartment complex across the street for our students. So, if there's some ladies that I know are stable, I'll move them over there, bring more

in. We'll let ladies come in and just sit at the table all night if we have to. So rarely will we ever turn somebody away unless they're very belligerent and violent. So, but no, we, it's just too dangerous out there. It's dangerous for men on the street out there.

Rev. Graham (01:57:40):

Thank you for what you do.

Sherrie Laurie (01:57:42):

Thank you. It's my honor.

Dr. Carson (01:57:44):

You can see how stressful it is to some of those women to come into a shelter if they're willing to go out and sleep in the woods in Alaska, in the middle of winter. But, you know, why do they call it a women's shelter? Because it's for women. Just logical stuff. But logic and common sense doesn't seem to be that common anymore.

Okay, sir.

Rabbi Meir Soloveichik (01:58:15):

Thank you all very much for your testimony. I just wanted to speak briefly to what the Archbishop mentioned. I'm familiar with the case of the Little Sisters of the Poor because I'm on the board of the Beckett Fund, which has represented them for so long. And also, because I testified in Congress on behalf of the rights of Catholic organizations and others during the original debate over the Affordable Care Act. And I just wanted to highlight one point the Archbishop made, which is in this case, we're dealing with something even more pernicious than a violation of religious freedom, which itself would be egregious. What we're dealing with is the bureaucratic redefining of religion itself, and what it means to act in a religious capacity.

As I recall originally, the argument that was made by the Obama administration was that organizations that service those beyond their own faith are not considered religious organizations. So literally an organization titled Little Sisters of the Poor which proclaims how their faith motivates them to service the poor is not considered acting in a religious capacity. And it strikes me just as I was revisiting that in my mind, as you mentioned, that archbishop, that, and here we're getting to the legal realm, which is beyond my expertise, but it's certainly worth discussion and I'll mention it to the commission whether it needs to be further codified at the executive level and ideally at the congressional level, the legislative level, as to what the actual definition of a religious organization is and make it more explicitly capacious and therefore, of course, truer to what the actual nature of religion is. If you have any comments on that, please.

Archbishop Cordileone (02:00:08):

I find that definition curious and something of, I don’t know if red herring is the right word, because to be honest, I don't know of any faith-based healthcare or social service organization that serves only people of their own faith.

Rabbi Soloveichik (02:00:22):

Of course.

Archbishop Cordileone (02:00:22):

I don't know any that ask them their religion before they give them the service. So, there's something very wrong about this. It seems like a strategy ahead of time to exclude what we're trying to do to help people. It's thoroughly offensive because again, as you said, it contradicts who we say we are, again with all other faith-based organizations that I know. So, we do need to have a different- not so much a government definition, but a different approach to this, that religion decides for themselves how they work out, live out their faith, without government interference.

Rabbi Soloveichik (02:01:02):

Of course. Thank you.

Dr. Carson (02:01:04):

And thank you Rabbi for that question. You know, Jean Marie Davis, I am so impressed with that story and with your ability to express yourself and to lead after such a horrendous start. Where did you get that courage and determination from?

Jean Marie Davis (02:01:28):

Well, as I was talking with some of the witnesses here, I lost how to read and write. But it was because of Jesus Christ and reading the Bible every single day for the last almost 11 years that I've been walking with Jesus have I been able to learn how to articulate, learn how to communicate, learn how to put boundaries up, and also to learn how to stand for truth and stand for what's right. Because being sex trafficked, you have a pimp, we call that, you know, everybody in the world now calls it a trafficker, but we on the streets call it a pimp. They dictate to us what we are supposed to say and do. They tell us how we're supposed to live. They tell us when to get up and when to go to bed. And so, when you take away that dictatorship, which is what, like Vermont, you're dictating to us what we can do, that becomes a now a surrender type of feeling where you're taking away my voice, you're taking away my ability to decide what I would like to do as far as what is good and what is wrong.

And so, for that, I have worked very hard over these past, I want to say, not just the three and a half years of being a director, but really essentially the last 11 years of my life, because I have a son now, it, to be able to articulate my words to where he can, people could understand the heart, the feelings, and also know my stance.

Dr. Carson (02:03:09):

Interesting. Because as you're describing the pimp, I was thinking about some government people.

Jean Marie Davis (02:03:15):

That's all of government. I did not say that. I want to put that on the record.

Dr. Carson (02:03:24):

Why it is so important for us to watch out for the liberties that were given to us expressly in our constitution. Okay. Allyson?

Allyson Ho (02:03:34):

Yes. Thank you, Dr. Carson. I had a question for the Wuotis. First of all, thank you so much for being here, for all of you, for sharing your stories of sacrifice and courage. I think you said it was, how many years of litigation or the process where you weren't, you weren't able to foster, I think it was several, several years. I think you said three years.

Kaitlyn Wuoti (02:04:00):

Yeah, three to four years.

Allyson Ho (02:04:01):

Three to four years? You know, as a, as a mom, I often think to myself as saying, you know, the days are long, but the years are short. And it struck me, the human cost in those three years of children being served, especially young children. Sadly, in the world of litigation, you know, three years can be a drop in the bucket. But could you help us and the committee and the commission, the people that are watching, kind of get a better sense of when those three years, the cost in terms of the children that you weren't able to foster during that time? What was the human cost?

Kaitlyn Wuoti (02:04:43):

Yes.

Thank you for that question. We have five children, three biological, two adopted, and we don't need more children.

You know? But we did want to help. We did want to, to continue to help. And that was what's so jarring to me was why can't we just help? I particularly was devastated at the idea of never getting to foster again because it had become such a core part of our family culture and our family. We talk a lot about how we as believers in Christ are adopted into his kingdom. And we speak to our boys about that a lot. That we are all adopted in a way. And we were devastated at the idea of never getting to do that again. So, we're very thankful that we get to dive back in at this point. And do you have anything that you want to add?

Pastor Wuoti (02:05:52):

Yeah, we're excited. We've already called the DCF office in Brattleboro, Vermont. They seem to be a little bit relieved in some ways. I think we've made their job easier. There's going to be more families, more candidates stepping forward right. That the people that are on in the front lines as social workers, connecting children in need to, families are going to be able to have more options available. And so, we look forward to being able to go forward with them.

Kaitlyn Wuoti (02:06:21):

And that was the other thing. It wasn't just us in the Gantts that were affected by this. There were a lot, we know a lot of families that either had to back away silently or, just the day that Vermont signed the papers, Rebecca and I were at homeschool co-op together and we met a new woman who said that she wanted to become a foster parent, but she knew that with the new policies, she would, they would never allow her to. And Rebecca and I looked at each other from across the room. I said, should we tell her? And we were able to share like, the joy of the win and that she,

and she was so excited that she was going to get to join in helping the state. And all the other families that we know either had their license revoked or had to back away silently, they can jump back in. It will just open up so much more help for the state at this point.

Allyson Ho (02:07:21):

And thank you too for highlighting, as horrific as what's happened to each of you is, I think part of the point of your prosecution and persecution is precisely to keep others afraid and not coming, not coming forward. And so, thank you for refusing at great cost to yourselves, refusing to give into that because you're standing up not just for yourselves, your charities, your own mission, but also countless others. So, we're grateful to you. Thank you.

Ryan Anderson (02:08:00):

Yep. I just wanted to pick up on the exchange that Rabbi Soloveichik and Archbishop Cordileone had. Archbishop, you said something to the effect of, it seems like they're trying to weed us out. And I want to suggest more bluntly that I think a lot of this is intentional. I think there are various government bureaucrats who want to win, not just on whatever the ideological policy is, but also on eradicating the space of civil society and of faith-based civil society in particular. I can remember about a decade ago speaking to another archbishop and he was telling me, you know, this is back when the Little Sisters of the Poor case was first happening. It's when a bunch of these state cases were first happening. He said, 20 years ago, I would've picked up the phone, spoke to the governor, and I said, if you run through with this piece of legislation, I'm going to have to shut down all the Catholic hospitals or all the Catholic schools, or all the Catholic homeless shelters.

And the governor would've said, no, no, no, no, no. We need your services. I'll find a way of crafting legislation so it doesn't violate your religious liberty. He said to me, he's like, Ryan, if I made that phone call today, he would say, great. I get two for the price of one. Right? I get to shut you down and I get to impose my new orthodoxy. And so I just think, you know, the report that we make to the President needs to highlight that that's part of what's going on here. These are not accidental byproducts. This is intentional. That's by design. And, and then I think the other thing we need to highlight is just how important that space between the government and the individual citizen is. You know, we were talking at breakfast about Tocqueville and civil society, that in-between space, that mediating institutions are vitally important for the health of, of a republic like ours.

And I, I just thought, you know, the very first testimony we heard from Jean Marie, like, you know, the question that you heard was, what can I do to help? And have you met Jesus? Do you know this Jesus guy? There are things that faith-based social services can say and do that the government runs, secular agencies simply can't. And they can literally work miracles in a way that a government run homeless shelter, as good as it is, can't do what the Hope Clinic does. Right. And there, there are things that your pregnancy resource centers can do that they can't. And I just think it's vitally important to highlight just the miraculous work that is going on, and then how there are some government bureaucrats who intentionally want it to stop.

Bishop Barron (02:10:27):

Just a quick comment. I quite agree with that. I think they want us out of healthcare. They want us out of education. And to me, a lot of it hinges on that word love, like providing a loving home.

My intellectual hero, St. Thomas Aquinas would say to love is to will the good of the other. It doesn't mean make the other feel good about himself, give the other what whatever the other wants, it means to want what's truly good. And for a long time, largely religious leaders articulated that, we brought forward into the public conversation, what the good is, you know. As we faded more and more into privacy, and I think that's what they want, we're not articulating that. And so, the language has slid to love, means indulge someone, make them feel good about themselves. So, there's a legislative side to all this. I think we should pursue that. There's a judicial side. A lot of you talk about that. But there's a strong moral religious side that we, religious leaders, and there's Tocqueville again, we've got to come forward in the public space, articulate what is the human good. You know, I think we become more reticent and we've succumbed to the pressures from the secular ideology. We've got to keep articulating what the good is because otherwise we won't know what love really is.

Eric Metaxas (02:11:54):

Yeah. Thank you. Just a, a few, just a few comments. I listening to all this, I can't help thinking I've just finished this big book on the American Revolution and it becomes absolutely undeniable that the liberties we have in this country, everything we have in this country, comes from a biblical Judeo-Christian foundation. Our laws, everything comes out of that. It is not deniable. The Founders wanted to reconnect us to the Sinai Covenant, where we look directly to God. We have no king. We govern ourselves. So, all this is fundamentally a spiritual conversation. And I make these comments as a proud Christian Zionist. We have to understand this is a spiritual battle. And as I listen to all of these stories, it's so fascinating to me. We're dealing with evil. You have to say it. We shouldn't be any more ashamed to say that than we should be ashamed to say that we do what we do to honor God.

And every one of these stories, I mean, it's an amazing thing, as I heard you Jean Marie talk about the pregnancy center. My wife in New York City ran a pregnancy center. And when you see people, and this is what most of you have been talking about, trying to do good for strangers out of the love of God, who would try to stop you? You have to call it what it is. It is evil. Who would try to say to loving foster parents, no, you can't do this? No, you can't do that. We, I think that we have ourselves, even people of faith have become so secularized. We've become affected by the secular pressure that we even speak in secular language. And we're afraid to say, I do this for the love of God, and I praise God in my life.

And yes, what we're dealing with is evil. What we're dealing with is in many cases a death cult. They would be happier to see the baby killed, the woman raped and killed in the center of the children abandoned. They don't care. And I think we have to be much stronger in pushing back. We have to stop being timid. And I think that you know, because I wrote a book on Bonhoeffer in the Nazis, this has all happened before many times, and this is precisely what happened, the Nazis tried day by day to increase regulations in such a way to push people of faith out, out, out, out. And many people of faith allowed them to do that. And this brings me finally to think of the cops who brought the six-foot-one lunatic. Shame on those cops because if those cops had any courage, you wouldn't need to have courage and you wouldn't be here today. And all across our society, we have people, just as many Germans, were perfectly willing to look the other way because they didn't want any trouble not caring that because they're looking the other way, a Jew is in a box car going to his or her death.

They didn't care. And we have many Americans who don't care. And it is our job to make them care, to make them understand that when they look the other way, it will fall to such as you heroes to do your work. And I just think it's important for us to understand, I think it was Dr. Phil who said it some months ago, but it really is every single American has this responsibility to understand what it is we're talking about. And if each of us understood our duties as Americans and did the tiniest bit, you wouldn't find yourself in these positions. So, I just feel so honored to have heard your stories, and I know there are many who didn't, who don't get to tell their stories, but there is nothing more important than what we're discussing here. This touches on the liberties of every single human being in the United States of America. And we know there are dark forces that are at war with what God has done in this nation. And thank you for your heroism in living out your faith on this issue.

Lt. Gov. Patrick (02:16:29):

Thank you, Eric. Thank you for testifying. You all were terrific. Thank you very much. Thank you.

Lt. Gov. Patrick (02:18:01):

One of the important issues that we hear lots about are religious liberty taking away from people over the vaccination issue. And so, we wanted to, and we've had a few witnesses before that before, but this panel will be addressing that. Nancy and Isabella Costine, you'll be up first. Floor is yours.

Nancy Costine (02:18:20):

Thank you.

Lt. Gov. Patrick (02:18:21):

Pull the mic close to you or get lean into it a little bit.

Nancy Costine (02:18:25):

Okay. Thank you very much. We are very grateful to the commission for providing the opportunity to share our story, and we are also very grateful to the Trump administration for finally giving us a voice. My husband and I were raised in Roman Catholic families, but during my young adulthood, I had fallen away from my faith. After time, reflection, and repentance, I renewed my dedication to God. This dedication fuels our commitment to providing a strong foundation for our children based on Christian principles. My husband and I are also parents of two vibrant and healthy children who are excluded from education, enrichment services in New York State due to the repeal of the religious exemption for vaccines.

When we were blessed with our first child, I had a basic understanding of vaccination. We began a vaccine schedule with the intent to eventually meet the requirements for school entry. But after she experienced adverse reactions, I began to research and became aware of product development practices and the use of animal and human cell lines that conflict with our religious beliefs. We had an obligation to make the best judgment based on the available information and in good faith and conscience. After consideration and prayer, we determined that it was in the best interest of our child to seek a religious exemption. My children attended school with approved religious exemptions until 2019 when New York State removed a religious right that

had existed for over 50 years, denying 26,000 children access to education, enrichment and services.

Isabella Costine (02:20:16):

On my seventh birthday, I lost my right to an education in New York State after the religious exemption was repealed. When I blew out the candles on my cake that day, I was unaware how drastically my life was about to change. What happened that day in the seven years that followed has become etched into every part of who I am. Even though I'm very healthy, the state treated me as though I was dangerous and sick. My family would not comply with the new law because of our beliefs on faith, family, and human dignity. My school district wanted nothing to do with me. We were not allowed to begin the school year with our friends and teachers. I didn't understand why the bus was not stopping at our house anymore, and I became confused as we began two years of homeschooling. Homeschooling is a blessing for families when it is chosen freely.

My parents did not choose to homeschool. They tried their best to teach us at home, but could not recreate what my sister and I missed and needed. My sister and I felt alone, misunderstood and forgotten. We began a life filled with stress, isolation, and uncertainty, and I carry the effects to this day. Before, I was outgoing and it was easy for me to make friends. Now it is harder to make friends because it is hard to trust people, and I always feel that I will be judged. That was the saddest time in my life, and I prayed every day for my situation to change.

Nancy Costine (02:21:37):

Despite legal efforts in the summer of 2019, the children remained excluded from schools, camps, and other activities. Like thousands of families, employment prevents us from moving out of New York state. It broke my heart to watch my children suffer as a result of their exclusion. My husband and I experienced every bit of their pain and loneliness. Desperate to restore normalcy, we began to commute the children to private school out of state. We drive three hours every day to give them the opportunity to go to school. Our district will not provide bus transportation, resulting in incredible transportation costs. The unexpected tuition and costs are financially draining.

I am unable to work full-time due to the commute, costing us over a third of our household income. Career advancement is impossible due to my lack of availability. The amount of money and salary, retirement and benefits that have been lost due to the religious exemption repeal will never be recovered. The relentless worry has negatively affected my health. And though our children are banned from school grounds, we are still expected to pay our exorbitant school tax bills. The religious exemption was repealed, but secular exemptions remained. Lawmakers questioned the sincerity of our beliefs and disparaged our children, while removing their fundamental right to an education. And they said that our beliefs were utter garbage. The free exercise of religion includes a parent's right to direct a child's religious upbringing. Families should not be forced to sacrifice education, employment, privacy, financial stability, and the peaceful enjoyment of life in order to maintain religious convictions as they raise their children.

Isabella Costine (02:23:50):

My sister and I now enjoy a supportive and welcoming school community where God and prayer is a part of every day. And I'm so thankful for the opportunity to be back in class. While I love

my school, the long drive, long days, and the memory of what happened in New York is still very stressful. I always worry whether I will lose my place in class if religious exceptions are removed again. I worry about losing everything that took so long to build back. I take hours of dance lessons a week in New York. I often wonder why I can't sit in a classroom with those kids too. Though I'm a high honors student, my future is uncertain. I'm excited for high school, but there is a real possibility that I could be excluded again. Children who had religious exemptions were compared to criminals bringing weapons into school by those who took my right to an education.

Why is that okay? Do they say these things about children with medical exemptions or children who have no records and are allowed to attend school anyway? Why is my faith dangerous in school? When did it become okay to portray any group of children in such a horrible way? Please consider the experiences of children like me who are not allowed on school grounds. We are not allowed to play sports. We are not allowed to attend summer camp. Our opportunities for outside activities are very limited. I'm healthy. I have never harmed anyone, and I have not disappeared from my community. Some people like to believe that all of the children who are forced from their schools just disappeared. This is just not true. All children in the United States should have equal opportunities and access to education regardless of their faith. That is what our Founding Fathers envisioned so many years ago. No child should ever have to go through what I did. A child in New York state should enjoy the same religious liberty and access to education as a child living in Florida. I respectfully ask that you help to restore and protect religious liberty and access to education for thousands of children like me. Thank you very much for inviting me to share my story.

Lt. Gov. Patrick (02:26:06):

Thank you, Nancy. Thank you, Isabella. I told you last week when we talked, you would do a great job. Nothing to be nervous about. Karen, and you have a guest with you too.

Karen Amigon (02:26:19):

Yes. Good morning, Chair, Vice Chair and members of the commission. I am truly humbled and grateful for the chance to share our story and appreciate the work this commission is doing to examine and protect religious liberty in our country. My name is Karen and I am the mother of a beautiful 7-year-old little girl, and we live in Los Angeles, California. Like any parent, I want my daughter to grow up with the opportunity, community, and access to education. Yet in our state, she is not allowed to attend school because of our family's sincere religious beliefs regarding medical decisions. Like many little girls her age, she loves drawing pictures, asking endless questions, and dreaming about what she's going to be when she grows up. In 2018, I remember the moment I first heard my daughter's heartbeat. Even though I knew at the time I would be raising her as a single mother, I felt an overwhelming sense of gratitude and peace.

I believe then and still believe today, that God entrusted me with an incredible blessing and responsibility in becoming her mother. My daughter spent the first two months of her life in the NICU. During that time, I leaned deeply on my faith. I prayed constantly asking God to guide us through that season. When she finally came home, I presented her to the Lord and thanked Him for the miracle of her life. Since then, my faith has guided the way I raised my daughter and the decisions I make as her mother. We attend a church that we love very much. My daughter prays with me, and one of her favorite times of the day is when we read Bible stories before bedtime.

There is a verse that I hold very close to my heart as a parent, “train up a child in the way he should go, and when he is old, he will not depart from it.”

That passage from Proverbs reminds me that my role as a mother is not only to care for my daughter physically, but also to guide her spiritually according to the convictions of our faith. Those convictions also guided me when I prayerfully considered decisions related to my daughter's healthcare and medical treatment. Through sincere prayer, reflection, and research, I made the decision not to vaccinate my daughter. The decision was not made lightly. It was a deeply personal decision rooted in my faith and in my understanding of my responsibility before God as a parent when making healthcare decisions for my child. However, I soon learned that in California there is no longer a religious exemption for school attendance when it comes to vaccination requirements. In 2015, California passed a law known as SB 277. That law removed personal belief exemptions, and with it, religious exemptions were effectively eliminated, as well for families making healthcare and vaccination decisions based on sincere religious beliefs. As a result, families like mine who hold sincere religious convictions no longer have a pathway for their children to attend school while honoring those beliefs. Because of this law, my daughter is not allowed to attend public or private school in our home state because of our religious beliefs regarding vaccination. Currently, she is being homeschooled. Homeschooling has brought many blessings into our lives. I cherish the extra time I get to spend with my daughter and the opportunity to be involved in her learning.

But as a single mother who must work full time to provide for my child, homeschooling also comes with very real challenges. These, there have been many weeks where I have quietly prayed and wondered how we would make it financially while trying to balance work, teaching my daughter, and simply keeping our home running. Yet through those moments, I have witnessed God's faithfulness time and time again. Somehow there is always a way forward. I believe that exercising one's religious liberty should not come at such a heavy cost for families who are simply trying to live according to their sincere beliefs regarding healthcare and medical decisions for their children.

My heart breaks in ways I never expected. We live near several schools. An many mornings, my daughter sees the children with their backpacks walking to school. Sometimes she watches them and asks me why she cannot go to school like the other children. As a parent, it is incredibly difficult to try to explain to a 7-year-old child that she is not allowed to attend school because of her family's religious beliefs regarding vaccination. How do you explain to a child that something as simple and ordinary as going to school is not available to her because her mother followed her conscience and her faith when making healthcare decisions for her child? California is a beautiful state in many ways, but for families of faith, it can sometimes feel like our religious liberties are constantly under pressure. I am grateful that there are organizations working to address these challenges. In California, a Voice for Choice Advocacy has been working through the courts to challenge SB 277 and to seek the restoration of a religious exemption for families like mine who hold sincere religious beliefs about vaccination.

My daughter and I pray about this often. In fact, she has become what I lovingly call a little prayer warrior. We pray that the courts will see the injustice of denying families the ability to live according to their faith, while still allowing their children to access education. Scripture reminds us that it, it is for freedom that Christ has set as free. For families like mine, that freedom means being able to raise our children according to our faith and our conscience without being excluded from basic opportunities like education because of medical or vaccination

decisions. At the end of the day, I am simply a mother trying to raise my daughter according to my faith and my conscience. I pray that one day she will be able to walk into a classroom like every other child without her family having to choose between education in our deeply held religious beliefs, which do not allow me to vaccinate my child. Thank you for listening to our story and for protecting the freedoms that allow families like mine to live according to our faith. And if it's all right, my daughter wanted to share something really quickly.

Riley Grayson (02:33:47):

Good morning. My name is Riley Grayson. I pray to go to school like others.

Lt. Gov. Patrick (02:34:03):

Thank you, Riley. Thank you. Dr. Aaron Kheriaty.

Dr. Aaron Kheriaty (02:34:10):

Thank you, Chairman. Thank you to all the commissioners for this opportunity to address you. My name is Aaron Kheriaty. I'm a physician specializing in psychiatry and Director of the Bioethics Technology and Human Flourishing Program at the Ethics and Public Policy Center. The first part of my remarks will harken back to the first panel of the day and look at religious freedom for health healthcare providers. And then the second part of my remarks will circle back to the theme of this panel, which is religious freedom related to vaccines and informed consent for vaccines. When I was a medical student on my obstetrics clerkship, I was assisting my first patient on the labor and delivery service, but this woman's labor was not progressing well, so they decided to convert her from a vaginal delivery to a cesarean section. I was just scrubbed in on the case and assist with a c-section in the operating room.

I walked with the intern into the patient's room to obtain consent for the procedure. The patient still huffing and puffing from painful labor said, “I just spoke to my husband. We decided that while you're in there, you can go ahead and tie my tubes.” The intern responded, “are you sure?” And the patient replied, “yes.” That was the extent of the informed consent for an irreversible procedure that would render my patient permanently sterile. So then as the intern and I walked to the scrub station, I informed her that while I was willing to assist on the cesarean section, I would need to step out of the operating room and not help with the tubal ligation as a matter of conscience. The resident became irate asking “How dare you impose your views on the patient?” I replied that I was imposing nothing on anyone merely telling her what I was willing and not willing to assist on.

I didn't end up scrubbing in on that case. And for the rest of the rotation that intern made my life hell. I managed a passing grade. But the comments that ended up in my dean's letter and my residency application from obstetrics were unfairly critical, not because of my performance, but because I chose to exercise my rights of conscience. I believe that damaging a healthy organ system, in this case the patient's reproductive system, contradicted the ends and purposes of good medicine. In addition, the procedure of permanent sterilization also violated the moral teachings of my sincerely held Catholic faith. What's more, even as a medical student, I knew clearly that the so-called informed consent for this procedure was a total sham. I mean, what woman in the middle of labor wants in that moment to think about having another baby? That's clearly not the time to hurriedly make this irreversible medical decision.

I didn't realize it at the time, but I was also the only person in that case actually upholding the hospital's own policy. For this was Georgetown University Hospital, which as a supposedly Catholic institution, was legally bound to abide by the ethical and religious directives of the Catholic bishops, which forbade procedures whose sole aim was permanent sterilization. Now, after this incident, I ended up getting dragged before the obstetrics department chair at the behest of the Chief medical officer, the lead administrator in the hospital, to explain what happened. As a lowly medical student, the power dynamics were intimidating, and nobody from the hospital administration or the School of Medicine accompanied me through that process. The chair of obstetrics made excuses for violating the hospital's own policies, and the entire meeting was a farce. Another thing I did not realize at the time was that I was supposed to have been protected from retaliation by federal laws such as the church, the Coats Snow, and the Weldon Amendments.

These laws protect the rights of healthcare workers to decline participation in medical interventions that violate their conscience, religious beliefs and moral convictions, such as declining to participate in abortion or a sterilization procedure. Although I didn't know this, healthcare workers and trainees are also protected by these laws from retaliation. Should they, like I did, decline to participate. The Department of Health and Human Services issued a new non-discrimination final rule to protect conscience rights two years ago, actually in January, 2024. It encourages, but does not require that hospitals and clinics voluntarily post a notice of rights to ensure compliance and to educate the public about conscience statutes. Now, these laws were actually in place when I went to medical school, but I had no understanding of them. I had no understanding of my rights under federal law.

As a medical student actually interested in ethics, I was better informed than most students on these issues. Yet still through that whole process, I was never advised of my rights even after they were violated. And even after the top leadership in the hospital was notified of that fact. Clearly, if healthcare providers and trainees are not informed of their rights at orientation, then the laws on the books remain a dead letter. Those rights are if those rights are violated, individuals and trainees need support, not just from the HHS Office of Civil Rights, but they also need, as another panelist already suggested today, a private right of action in order to defend themselves and defend their rights in case the Office of Civil Rights is slow to respond to complaints as they have been under various administrations. Furthermore, these protections need to be extended in federal law to include other procedures, which were not common when these laws were first enacted, but which as we've heard today, are now ubiquitous, such as doctor assisted suicide, euthanasia, and sex rejecting procedures.

What advocates euphemistically term gender affirmative care. While euthanasia is briefly mentioned in the Affordable Care Act, this merely regulates payments to hospitals. That law alone does not protect the conscience rights of individuals in states that have legalized, for example, doctor assisted suicide. Okay, fast forward to 2021. When I was the director of the Medical Ethics program at the University of California, I was on a committee that was vetting all the COVID hospitals for the entire university, all five of our branch campuses that had hospitals up until the vaccine mandate, which our committee was not consulted on, which I found puzzling because this was clearly going to be the most ethically controversial of all the COVID policies that the university was enacting. Troubled by the draft policy that was about to go into effect, I published a piece in the Wall Street Journal co-authored with a law professor arguing that university vaccine mandates were unethical. That failed to persuade the university, failed to get a conversation going, even at the university and on our committee.

And so, they finalized the policy and I had gone public as an opponent of it. So, I had many people at the university reaching out to me worried that they were going to get fired, worried that their religious convictions were not going to be respected, worried that their concerns about safety and efficacy were not going to be respected and so forth. So, I made the fateful decision to try to challenge the university's vaccine mandate in federal court. And I like to tell people, if you want to go sideways with your employer really quickly, a very efficient way to do that is to sue them in federal court. So, the university wasted no time. Before the court even ruled in my case, they placed me on first what they called investigatory leave, then a month later on unpaid suspension. Then a month after that, they fired me.

So, they ran me through the paces to get rid of a full professor and director of their medical ethics program as quickly as they could. I'd been a professor there in the School of Medicine for 16 years, 20 years if you count my residency training. And I had won the Excellence in Teaching award three times from medical students. There had never been any complaints from patients or students against me. As we've already heard from the other panelists, when it comes to vaccines, laws in many states failed to protect conscience rights and religious liberty. While I'm not a lawyer, I failed to see how such laws could withstand judicial scrutiny, as it seems to me, they clearly violate the free exercise clause of the First Amendment. For example, states like California, which we heard about from Karen, where I work and practice, do not have laws allowing religious or conscience-based exemptions for parents who opt out of childhood vaccination requirements.

Many people have religious or moral objections, for example, to the use of cell lines derived from aborted fetuses or derived from embryos created and destroyed in the laboratory, which are very frequently used in the development and testing of many of the vaccines on the CDC's childhood immunization schedule. In states like California, if parents choose not to use these products, then they're not, as we just heard, not even permitted to send their kids to public or private schools. Those who cannot homeschool are left with no options. As Commissioner Ryan Anderson articulated during the first panel, one does not have to rely on doctrines of revealed religion to see that medicine has its own internal morality, that medicine should always and only be aimed at health and healing. By the light of reason alone, we can see that doctors shouldn't intentionally kill their patients, that doctors shouldn't intentionally destroy healthy functioning organs or organ systems, and that doctors should not force treatment on patients that patients decline for medical, moral, or religious reasons.

In our current confused culture, however, it's often, as we've seen today, it's often men and women of faith buttressed and given courage by their religious convictions who uphold these traditional principles of Hippocratic medicine. Some federal laws protect them in these circumstances, but these laws are neither well known, nor are they consistently enforced. They're also too narrow to cover new threats to the integrity of medical practice. After the excesses and authoritarian overreach by governments during COVID, the people of the United States are now pushing back and reasserting their rights of conscience and freedom of religion in healthcare and other realms of public life. I pray that this committee will assist them by strengthening and enforcing federal laws on the books, educating the public regarding rights that are already protected under law and leaning on states to do the right thing when it comes to free and informed consent. Thank you.

Lt. Gov. Patrick (02:45:56):

Thank you, Dr.

Kelly?

Kelly Shackelford (02:46:02):

Couple of things. I want to come to you Doctor a second. But I don't know if you're aware in New York we actually have a lawsuit that just went to the Supreme Court on behalf of the Amish. Are you aware of that case?

Nancy Costine (02:46:15):

Yes. The *Miller v McDonald* case? Yes.

Kelly Shackelford (02:46:17):

Yes. And so, so there's, there's some hope at least. We used to all, you know, have a religious accommodation in every state for people who had religious objections to vaccine mandates for their children. And it's a shame. I mean, in our case, we've got the Amish, you've just been trying to be left alone for 250 years, and they're coming in and saying, we're going to vaccinate your children. And that didn't go over too well. The good news, though, is the Supreme Court, they vacated the bad decisions below in New York, and looking at my mood, a recent victory, they sent a message down saying, why don't you redo this, this time, looking at parental rights and religious freedom. So, we were very encouraged that that happened, but you know, we're going to see what happens after that. But I'm hoping that that would solve, if we got a good decision, maybe that would solve both of your situations, but certainly it just brought to my mind that this is maybe something we can ask the President to do when this issue arises to the Supreme Court that the Justice Department would weigh in on behalf of religious freedom. So, I didn't know if you knew about that or not. So, I at least wanted to mention it and be praying for that result. And Doctor, I want to ask you a question, because this has confused me for years. I hear a lot from people who their pediatrician fires them because they won't, you know, do the vaccines, and it's because they're getting paid to do these vaccines. And I'm like, this seems like a horrible conflict of interest.

This would never be allowed in law or in any other profession. How does this work that, or should we have laws that deal with the fact that physicians should not be paid for giving certain drugs to people?

Dr. Kheriaty (02:48:14):

So, the, the payment is typically indirect. The way, first of all, it must be said that pediatrics is the lowest paid medical specialty of, of any specialty. It's at the very bottom, which might be a sad commentary on our priorities and how we value or don't value the health of our children, but be that as it may, that’s a fact of life. Fortunately, most kids are healthy most of the time. I mean, that's, that's part of the reason. And one of the things that brings young people into a pediatrics practice consistently is following the CDCs recommended vaccine schedule. When I was a kid, to be fully compliant with that vaccine schedule, I had to get all these vaccines just to go to medical school. There were 18 shots for something like five or six different vaccines. Some of them, you get more than once.

Today there's between 72 and 90 to follow the CDC's full vaccination schedule. So, the requirements have ballooned massively. Each of these products was tested only individually in its clinical trials phase for FDA approval, which means none of them have ever been tested in combination. And many people today have legitimate questions about the cumulative effects of so many shots which have not been well tested and studied, and the combination of these products when they're given when they're given with one another. And so, just for asking questions, very often, there's a mentality among pediatricians of this patient's going to put me at some degree of risk, which I think has no actual credible basis to it. And also, this is just a way to get people in routinely for visits that I can bill for. So, the payments come in directly in the form of billing the insurance company for well-child visits, for vaccine visits and so forth.

And that is a very significant source of revenue for many outpatient pediatrician practices. I don't know exactly how to resolve or settle that. Obviously, pediatricians who dedicate their life to the healthcare of children need to be adequately compensated, they need to be able to pay off their considerable medical student loans. So, as a doctor, I am sympathetic to the idea of like, I need to maintain a practice that's financially viable. But if pediatrics has come to be so reliant on the administration of these products in order to get people in the door, then we have to find other, other ways of, you know, basically making the practice of outpatient pediatrics more viable without forcing products that people may or may not want on parents and on, on their children.

Kelly Shackelford (02:51:04):

And, and I just want to say thank you to all of you for just sticking with your conscience, doing what you know is right, even though you're paying a price for it. And the thing that's going to happen as a result of even your testimony today is you're going to help millions of other people who have conscience beliefs. It might not be on this issue, it might be on something else. But thank you for- because I know it's not easy to do, not even to come and testify. So, thank you,

Lt. Gov. Patrick (02:51:37):

Dr. Carson.

Dr. Carson (02:51:40):

I want to thank all of you for your courage and standing up for such an important issue. You know we heard very little during the COVID vaccine controversy about complications from that. A lot more of that is coming out now.

But maybe you could, Dr. Kheriaty, enlighten us a little bit about alternative vaccines that don't utilize some of the products that-

Dr. Kheriaty (02:52:07):

Yeah. So interestingly, there are products available manufactured by the same pharmaceutical companies in many cases, that make vaccines that utilize fetal cell lines or embryonic cell lines. They, they have other products that they export to other countries that don't use those processes in the manufacture of vaccines. And so that, that's not the only ethical or religious objection that people have for vaccines. I want to emphasize that, but that's a very common one that many people cite for their reasons to decline certain vaccines. And those products are available, for example, in Japan, but not in the United States. And I'd have to do a deeper dive into the regulatory issues as to why that is the case. But it seems to me that there's room for the current

administration through the FDA and through HHS in general to look at, okay, it's not even leaning on these companies to produce more ethically acceptable alternatives to these products.

In many cases, they're already doing that. It's just a matter of the low hanging fruit of let's make those things that are available elsewhere in the world. Let's make sure that they get whatever necessary approval to be made available here in the United States. So, it seems to me that one would be an easy solve. I don't think it would obviate or basically , you know, take care of all religious objections to vaccines. But for many people, if that's the central issue, if it's their pro-life convictions or their opposition to abortion, and otherwise they might be they might be willing to take some of these products. That's a way, at least to address the concerns of that population. And also, to encourage pharmaceutical corporations to move away from the use of products that have inherent problems and are inherently unethical. So that seems to me to be a pretty easy win. It's something that the current administration could accomplish if it just sort of studied the issue and figure it out what the roadblocks were.

Lt. Gov. Patrick (02:54:18):

Cardinal Dolan.

Cardinal Timothy Dolan (02:54:20):

Thanks. You know a common theme in your eloquent testimony this morning has been parental rights. Parental rights. We, of course, are heavily concerned about religious freedom, but the two are very allied, aren't they? Rabbi, do you remember a couple months ago, you and I were on a panel on the *Pierce vs Society of Sisters*? And it was the centennial of that, and what it said, the Oregon School case, in 1925, Oregon passed a law that every kid had to be in a government school, everybody. So, there's no homeschooling, there was no religious schools. And the Oregon Supreme Court held it to be constitutional. It went all the way to the Supreme Court. Our Federal Supreme Court said in 1925, stunningly effective words, the child is not the creature of the state. The child is not the creature of the state. This has remarkable implications, not only in healthcare, not only in family unity, not only in, but also in in education as well. And we might be good Lieutenant Governor to remind, to kind of affirm, in a ringing way, that stunningly effective belief that the child is not the creature of the state.

Lt. Gov. Patrick (02:55:59):

Thank you. Thank you for bringing that up. Cardinal Dolan, 1925. Yeah, you wouldn't know it if you listened to a lot of people today.

Rabbi, did you have your light on? Okay, you did not. Any questions? You go Allison.

Allyson Ho (02:56:16):

To the moms, you know, I feel like come at me with everything you got right, and I will fight you tooth tong and toenail. To watch your child be hurt and to stick to your principles is next level courage. And I just, I just really want to express my deep gratitude for you as mothers to take the stand that you've taken. And to the daughters, I'm so grateful to my own Godly parents. They would often, I would feel like our home was so at odd, sort of with the culture that I lived in. And now I realize that they were preparing me for my home, which is not here. We are not home. This is not, this is not our home. And what you've experienced that has been, it's been evil and it's been intended to hurt you. And God is going to do amazing things. He already has today.

He is already doing amazing things here in this room, and everyone who's listening and watching you, that doesn't make it any easier. It doesn't excuse what was done to you. It doesn't make it any less evil. But it fills my heart with gratitude and appreciation for you. Thank you for being here today, and as the daughters and the moms. Thank you.

Lt. Gov. Patrick (02:58:10):

Ryan.

Ryan Shackelford (02:58:12):

Yep. this question is for Dr. Kheriaty. I listened with interest when you mentioned your proclivity for suing your employers.

But I want to ask you about one of your other lawsuits, because this morning in the first panel, the first witness, Dr. Ethan Haim told us about, how after he blew the whistle on Texas Children's Hospital, still performing sex rejecting procedures, the Biden administration went after him legally. Yeah, three different bogus indictments. After you spoke out against some of the COVID excesses, the Biden administration leaned on social media companies to censor you. And you had to, you know, eventually sue them as well. Share a little bit about that, because I think one of the patterns that we're seeing is that the religious liberty violation doesn't just stop, you know, at the violation. But then there are these, you know, coattails of persecution that follows.

Dr. Kheriaty (02:59:05):

Yeah. Thank you for that question, Ryan. The First Amendment seems to be a package deal. And the first freedom, of course, is the mention in the First Amendment is religious liberty. But once you go after that, I think exact, you're exactly right, that free speech is the next target. Because if you stand up and start defending your religious li liberty, then people want to literally shut you up and put a gag order on you. So, this was a case that I filed with the Attorney General of Missouri and Louisiana, *Missouri v Biden*. When we went to the Supreme Court a couple years ago, the case was known as *Murthy v Missouri*, and it was a case where five private plaintiffs, actually the federal government has pillaged our plaintiff, Dr. Bhattacharya, is now working for the defendant as director of the NIH.

So, he's no longer a plaintiff in the case. Dr. Caldor is now working for Health and Human Services as well. But now three private plaintiffs and these two states sued the Biden administration. And what we alleged was that they were coercing social media companies, pressuring social media companies to censor disfavored information online. And initially when we filed the case, the evidence that we had from the private plaintiffs was censoring speech related to criticizing the government's preferred COVID policies and information related to the 2020 election and questions about election integrity. What we found when we got more and more documents on discovery in this case, was that the censorship started on those issues, but then it expanded to other issues. It expanded to abortion, it expanded to gender ideology, it expanded to critics of our foreign policy critics of our monetary policy. Basically, once the government realized that it could do this, it could force Facebook and Google and Twitter to do its bidding even sometimes to change their own terms of service, to censor disfavored information on social media.

Then everyone seemed to get in on the game. So that was the bad news. The good news in the case is that the government is now settling the case with us. I just looked at the sort of final provisions of the draft settlement. I'm not allowed to talk about it, but we're getting at least a partial win in this case, and the government will be reprimanded for having done this. And so, I think the First Amendment stands or falls together. We have to defend religious liberty for all the reasons that we've talked about today. But once you start undermining that fundamental right, you're going to see other closely allied, closely related fundamental rights from free speech to the freedom of press, freedom of association, which was also undermined by many of the rules during COVID where people literally could not meet face to face. It seems to me that those things stand or fall together. And our Founding Fathers seemed to know what they were doing when they put them together as the, you know, first thing to be articulated in the Bill of Rights and as something of a package deal.

Lt. Gov. Patrick (03:02:12):

Any other questions? I have one Nancy for you. We had a Navy seal in our military hearing back in 2025, who testified that, in his group, the seals that did not take the vaccination for medical reasons were allowed to continue. But his reason was for his religious beliefs, and he was drummed out of the service, lost his healthcare. I think he lost his pension. And I remember that testimony very well. So, did I hear you say it's been a few witnesses ago, but did I hear you say that your daughter Isabella, would have been able to go to school if you had said, I don't want the vaccination for medical reasons, would they have allowed that? I may have misunderstood you.

Nancy Costine (03:03:06):

There are secular exemptions in New York State. It is incredibly difficult to obtain a medical exemption in New York, very difficult. There are a lot of children that have very legitimate medical reasons for not being vaccinated that are not being accepted by the school districts under pressure from the Department of Health. The districts are under heavy fines, which part of the *Miller v McDonald* case relates to the fines that were levied on the Amish for not complying. The same could be said for children who need medical exemptions but their districts are not giving them. However, there is a group of children that are allowed to sit in classrooms, children who do not have medical, medical records and are considered displaced. Originally, I think that thought was to help children who might be homeless, you know, someone who had needs the extra time to get settled to establish residency and to establish some kind of pediatric care.

I don't know what that expanded to now. But I do know in 2024, a Freedom of Information Act request was sent to the Board of Education in New York City asking them how many children who were unvaccinated or did not have complete vaccination records that are actually enrolled. And that number at that time in 2024 was 35,000. That's 10,000 children, more than the 26,000 children that had religious exemptions at the time of the repeal. So, my question would be, where is this fervent desire? If this was about public health, removing the children, destroying families, thousands of families left New York, families had to comply against their beliefs. Families had to find alternative ways to educate their children at great expense because of the excuse of public health. If that was the case, then where's the fervent desire to ferret out these children? And that's just in New York City, that that doesn't include the entire state.

Lt. Gov. Patrick (03:05:27):

And Cardinal Dolan, I think you've said a couple of times a day or maybe you and Reverend Franklin, that you see a thread going through testimony. It would seem like there's a thread going through blue states. That seems a thread to me, and not at all cases, but the majority of cases. There seems to be a thread going through the philosophy and the laws that are passed that I don't quite understand why reasonable people wouldn't be reasonable no matter the politics. Doctor, a quick question for you. You said when you were growing up, there were 18 vaccinations roughly, and today there are 70 to 90. Do we have data to know if more children are sick today than they were in your generation because of taking all those vaccinations?

Dr. Kheriaty (03:06:22):

Yeah, and of course, Secretary Kennedy has talked a lot about the epidemic of chronic disease, his focus being especially on children. So yes, young people today are not as healthy as they were 30 years ago, and there's an explosion of certain types of illnesses, particularly illnesses related to allergies that we just didn't see when I was growing up. I don't think we have definitive data to articulate all the causes of this, but it's a more than plausible hypothesis that the ballooning of the vaccine schedule and there, that that is to say it's a hypothesis that's supported by a considerable amount of evidence, that the ballooning vaccine schedule may be contributing to downstream unintended consequences, contributing to chronic illnesses. So, while we may be helping to prevent certain acute illnesses, maybe infectious disease in some cases the cost of that, it's not clear that we've struck a balance where the cost of that clearly outweighs the benefits.

So, this is, the important thing here is that scientists need to be able to ask questions and the silencing of dissenting opinions, the inability to raise your hand and ask a question is the hallmark of a, basically, of a totalitarian society. Right? Free and open debate on these questions is absolutely necessary. I think the NIH is under Dr. Bhattacharya's leadership is very serious now about getting to the bottom of what's causing the chronic disease epidemic among children. Hopefully we'll be able to fund some research that moves us closer to more definitive answers. But all of these possibilities, all these hypotheses need to be on the table. And we can't treat vaccines as though there's some sort of sacred untouchable cow. Once something gets on the CDCs recommended schedule, it's therefore unassailable for all eternity. That's just not how science works. Science advances by asking inconvenient questions by challenging what people think they know. And if you, anyone who studies the history of science knows that dogmas in science are overturned by the people that we consider to be the great minds of, you know, the scientific revolutions from Einstein to Newton to Galileo. So, the attempt to control speech within science and medicine the, the attempt to coerce people to basically go along with whatever the current quote unquote consensus happens to be. This is not only something that violates the First Amendment in many cases, but it's also bad science and bad medicine.

Lt. Gov. Patrick (03:09:09):

We do know that the drug companies are making a lot more money on it. We have that data. Thank you. Thank you, witnesses. You did a great job. And thank you ladies, young ladies, Isabella. Thank you. We have one more panel coming up.

Welcome. Thank you for your patience today and being here and traveling to get here. Dr. Kenneth Prager, you're up first.

Dr. Kenneth Prager (03:10:41):

Thank you. Thank you very much for the privilege of speaking to the Religious Liberty Commission. My name is Kenneth Prager. I'm a pulmonologist at Columbia University Medical Center in New York City, and I'm also the director of clinical ethics and chair of the ethics committee for the past 30 years, my interest in medical ethics began when I was a young attending physician in my hospital's intensive care units in the 1970s when I began to wonder if given advancing medical technology, which made it harder for certain patients to die, who had no chance of leaving the hospital alive, I was prolonging their suffering by prolonging the dying process rather than prolonging their lives. As an observant Jew, I turned to my religion's writings on medical ethics for guidance in how to negotiate these difficult scenarios. I can simplify its writings on end-of-life issues as follows, “whereas it may be permitted to remove an impediment to a peaceful death. One is never allowed to intentionally hasten death or to intentionally cause death.” This overarching principle has stood me in good stead for all my career in medicine and medical ethics. The devil, of course, is in the details and is what has made my work in medical ethics so challenging and interesting. It turns out that these same principles have also infused much of secular end-of-life medical ethics in this country until, that is, the legalization in some states, beginning in 1997, of physician assisted suicide or as it's usually called MAID or medical aid in dying. The beliefs of all religions impact on sensitive end-of-life decisions. Advances in medical technology can prolong life, but can also prolong the dying process in patient suffering. America's freedom of religion profoundly impacts end-of-life decisions of many patients and families as well as their caregivers. How to use this technology ethically in end-of-life situations may be influenced profoundly by religious beliefs.

Patients, families, and caregivers should be allowed the freedom to be guided by their religious and or moral beliefs in these situations. First, some definitions about terms that are often confused. Removal of life support, physician-assisted suicide or MAID medical aid and dying and euthanasia. Removal of life support involves removing a ventilator or other life support technology that supports that is keeping the PA patient alive. Based on state criteria, the patient is usually in an intensive care unit, dying of an untreatable medical condition. When these criteria are met, removal of life support is legal in all 50 states. What is critically important from an ethical perspective is that the intent is not to kill, but to remove an impediment to a peaceful death. Patients die of their underlying illness if the patient does not quickly die. The patient is not euthanized.

Medical aid in dying: It's currently legal in 12 states and has just been legalized in my state of New York and is legal in Washington DC. A patient likely to die within six months, requests from a physician, a lethal combination of drugs that the patient must be able to self-administer. The intent here is not to remove an impediment to death, but to cause immediate death. The justification for this is said to be that suffering terminally ill patients should have the autonomous right if they meet certain criteria to end their lives on their own terms. Let me be clear, this is an intensely personal decision, and I can understand the wishes of some patients to die in this manner, but I feel the potential abuses of legalizing MAID and the effects on the moral fiber of our society make the spread of legalizing MAID of great concern. The arguments opposing MAID are multiple. Since the time of Hippocrates 2,400 years ago, before the advent of Christianity, physicians’ medical ethics have opposed causing or hastening death even at the request of a patient.

Secondly, MAID weakens the value of the sanctity of life. Thirdly, legalizing it will almost certainly lead to a slippery slope in which criteria for causing death will be loosened, such as allowing it in non-terminal illnesses or even for patients with severe depression. This has already

occurred in Canada and in some countries in Europe. And fourthly, legalizing MAID may lead to a lessening of societal support for palliative care in favor of the less costly option of suicide. The third term euthanasia. It's illegal in all states currently legal in Canada and certain European countries and elsewhere at the request of a terminally ill patient or a patient suffering with a non-terminal disease, the patient or the physician or nurse injects the patient with a lethal dose of drugs killing the patient. Jewish views on these end-of-life issues vary among the three major denominations within Judaism.

Orthodox Rabbis who uphold the strictest approach to *halakha* or Jewish law are opposed to any action with the intent to hasten or cause death. They therefore oppose euthanasia and physician-assisted suicide. Rabbis and the conservative movement are more liberal in interpreting *halakha* and in withholding or withdrawing life support. But even they are opposed almost always to medical aid and dying and euthanasia. Reform rabbis are most liberal in allowing withholding or withdrawal of life support and even allow MAID in certain circumstances. As I mentioned before, made is currently legal in 12 states, a competent adult patient likely to die within six months, requests from a physician, a lethal combination of drugs that the patient must be able to self-administer. All states allow physicians to recuse themselves from participating in MAID on the basis of conscientious objections. But the states vary as to institutional opt-out provisions.

States also vary as to the obligations of required physicians who recuse themselves to enable their patients to obtain MAID. For example, must physicians inform a patient of the possibility of maid, must they refer a patient to a physician who will enable physician assisted suicide. Lastly, there's one other important end of life area where the intersection of religion and medicine is critically important, and that is with regards to brain death. Only four states, New York, New Jersey, California and Illinois, require hospitals to accommodate the religious beliefs of patients or families that do not accept brain death as death. What this required accommodation consists of in the four states varies. In the 46 states that do not require religious accommodation, it is legally permissible to remove what the family considers life support even over their objection. In summary, as medical technology advances, there will be more complex end-of-life scenarios in which the provisions of the Religious Freedom Restoration Act of 1993 will be tested. The act prohibits the government from substantially burdening a person's exercise of religion unless it demonstrates a compelling interest and uses the least restrictive means to do so. To quote from bioethicist Robert Truog, Bioethicist at Harvard and Boston, “families live with the memories of the death of a loved one for years.” Certainly, their religious, cultural, and personal preferences during that process should be honored or at least tolerated whenever possible. Thank you.

Dr. Carson (<u>03:19:19</u>):

Well, thank you. Thank you, Dr. Prager. And now we're hear from Dr. Leslee Cochrane.

Dr. Leslee Cochrane (<u>03:19:28</u>):

Good afternoon and thank you for holding this hearing and for your work defending religious liberty. I'm grateful for the opportunity to be here today. My name is Dr. Leslee Cochrane. I am a full-time hospice physician in California board certified in family medicine with additional certification in hospice and palliative care. For me, medicine is so much more than a profession, it's a calling. Guided by my faith, I strive to treat every patient with compassion, dignity, and respect. As a hospice physician, I care for patients who are frightened and vulnerable as they

near the end of life. My role is to relieve their suffering and to help patients live their final days in comfort and with dignity. It's not to hasten their death. In 2022, California amended its assisted suicide law to require even non-participating physicians like myself to acknowledge and document a patient's request for assisted suicide.

This effectively begins to initiate the process for the patient to obtain the drugs they'll use to end their life. Even physicians who objected to assisted suicide had to record this request, provide information about it, and refer the patient to a physician who had provide it. This was no accident. Legislative analysis before the law was passed warned that forcing physicians to document or facilitate assisted suicide was problematic and likely a violation of their rights. Yet the state pushed forward anyway. At the same time. The waiting period to obtain these lethal drugs was drastically shortened from 15 days down to just 48 hours. 48 hours leaves very little time for reflection, and it often is not enough time to address the needs and the concerns and the symptoms which drive most patients to even consider assisted suicide. In more than 20 years, as a hospice physician, I've seen how vulnerable patients are when they're facing a terminal illness.

They're often physically exhausted, emotionally overwhelmed, and fearful of becoming a burden to those they love. Many patients come to hospice with severe, poorly controlled pain, especially those with advanced cancer. Some have already obtained assisted suicide drugs, and others are considering it because they're afraid that their suffering will become unbearable. But with proper hospice care, we can usually resolve those symptoms within just a matter of days. When the pain and distress are relieved, their fear fades, their hope returns, and the desire for assisted suicide often disappears. But under this new law in California, patients might end their life even before there was adequate time to provide that relief. Legalized assisted suicide has also created situations where vulnerable patients can be pressured toward it, even when this is not their true wish. In one case, a family member asked me to encourage their mother to consider assisted suicide.

She was a deeply religious woman who believed suicide was wrong, but her family hoped she might reconsider if a doctor told her, it was acceptable. In another case, I cared for a patient with questionable mental capacity, whose family was strongly urging them to pursue assisted suicide even though the patient was not in pain or distress. Thankfully, I had the freedom to protect those patients from that sort of pressure. But what happens when you remove the right of conscience of physicians to inter to intervene in those situations? Assisted suicide is never medically necessary to manage pain. The American Medical Association has stated that it's fundamentally incompatible with a physician's role as a healer and would pose grave societal risk. And this is not controversial. There are a variety of organizations all across the political spectrum that support this position that physician-assisted suicide should be prohibited, including the American Academy of Pediatrics, the American College of Physicians, and the National Council on Disability.

I could not in good conscience follow this new law, even if it meant my medical license would be at risk. And I certainly couldn't afford to challenge the state of California on my own. But Alliance Defending Freedom stepped in to represent me. Their attorneys ultimately were able to secure a court order permanently preventing California from forcing physicians like me to facilitate or participate in assisted suicide in violation of our conscience. But there will undoubtedly be future attempts to expand and normalize assisted suicide and force medical professionals to participate in it. The government should never force doctors to practice medicine in a way that violates their conscience or their duty to protect life. And no patient should ever be

made to feel that their life is a problem to be solved rather than a person to be cured for. In closing, I want to thank this commission and President Trump for holding these hearings and bringing attention to this real critical issue. We are in the midst of a profound spiritual and cultural struggle between a culture that protects life and one that accepts death as a solution. Your work as this commission is vital in defending religious liberty and affirming the dignity and value of every human life. Thank you.

Dr. Carson (03:25:32):

Well, thank you Dr. Cochrane for that perspective. And we will now hear from Ismail Royer.

Speaker 28 (03:25:42):

Thank you, Mr. Chairman, and thank you members of this commission and Mr. Vice Chairman. My name is Ismail Royer and I'm the Director of Islam and Religious Freedom at the Religious Freedom Institute. It's an honor to speak with you today and to serve as a member of the Lay Leaders Advisory Board for this commission. I'm here today to discuss the perspective of American Muslims in the healthcare field and their exercise of medical conscience. American Muslims make up a significant minority of the healthcare profession, an estimated 5% of the physician workforce for Muslims, while more than 10% of American Muslims, self-report as physicians or dentists. And for a significant number of Muslims in the healthcare field, Islam inspires and shapes their approach to their profession. And for this reason, Muslim healthcare providers may encounter ethical dilemmas in the course of their training and employment.

So first I want to discuss the theological foundations that inform the Muslim physician's moral outlook and the foundation of their conscience claims. The first of these is the inherent created dignity of man, the Quran states, “And verily we have dignified man.” Islam teaches that God honored Adam by creating him with His own hand and in His Image, and by blowing Adam's spirit into him. On one occasion, the funeral of a Jewish man passed by the prophet Mohammed and his companions, and the prophet stood up to honor him. One of the companions said to him, do you know that he's a Jew? And the prophet said, is he not a human soul? The dignity of the human person is accompanied by duties and rights with respect to God and his fellow creatures. And so, there is a duty upon each one of us to treat one another justly and to protect one another from harm.

And the prophet said, “let there no, let there be no harm nor returning of harm.” And this statement constitutes the most fundamental axiom of Islamic sacred law and ethics. In contrast, the ethos of modern medicine and indeed of secular modernity was neatly summed up in *Planned Parenthood v Casey*, in which the US Supreme Court defined the highest human good as the freedom to make “choices central to personal dignity and autonomy.” The idea that individual autonomy is the greatest good is now axiomatic in the contemporary secular medical profession. The ethical system of personal autonomy has displaced traditional ethics, and in this new system's hierarchy of goods, respect for human dignity, and the duty to do no harm now must give way of inconveniences in the slightest way, personal autonomy. And as a result of this fundamental contradiction between the ethics of human dignity and the ethics of personal autonomy, there are a number of areas in the medical field in which American Muslim healthcare professionals may experience severe crises of conscience.

And today I want to focus on the rising trend of states passing laws permitting physician-assisted suicide, as my fellow panelists have done. 13 states and the District of Columbia now allow the

practice and bills have been introduced this year in the legislatures of another 13 states. Illinois offers a case study as to how the rise of physician-assisted suicide poses ethical challenges for Muslim healthcare professionals. The state's End ff Life Options for Terminally Ill Patients Act was signed by the Governor in December, 2025, and takes effect in September of this year. Illinois's law purports to allow physicians to opt out of helping patients commit suicide. But in preparing this testimony, I spoke to an Illinois-based Muslim physician and bioethicist with the Darul Qasim seminary in Chicago, who told me that he and other Muslims he has spoken to in the medical profession are extremely anxious about this law for several reasons, and I'm going to list three of them in order of severity.

The first is that the fear of exercising the option to opt-out will not be honored. The law purports to provide this option, but many Muslims, he fears, will succumb to the perceived social and professional pressures to participate in assisted suicide, first of all, because it's sanctioned by the law. And even if it does allow them to opt out, it will become the norm. And exercising the right to opt out will be stigmatized or be the reason for pretextual consequences for their employment. And second, it's changing the practice of medicine. He told me that the fear is that they will slowly indoctrinate young doctors in medical school. Regardless of how they're raised, many doctors get their ethical education and medical school. And so, the issue here is not, he said just advocating for conscience rights for Muslim physicians, but by replacing the dictum to do no harm with do not infringe on its autonomy and the ethical hierarchy, they're changing the very practice of medicine.

And finally, his concern and our concern at Religious Freedom Institute is what is going on in Canada. Proponents of physician-assisted suicide don't like the term slippery slope, but there is a slippery slope. The medical aid in dying or MAID laws will certainly open the door to legalizing full-blown euthanasia as it has in Canada. In Canada, this began as a practice limited to gravely ill patients who were already suffering at the end of their life. The law was expanded to include people who were suffering from serious medical conditions, but not facing imminent death. And next year, it's going to be made available to those suffering only from mental illness. And Parliament has recommended expanding it to minors. As a recent article in the Atlantic, put it, “at the center of the world's fastest growing euthanasia regime is the concept of patient autonomy.”

Once you knock out the axiom that the human being is inviable and that physicians must do no harm and replace it with the ethics of personal autonomy, there is no substantive barrier to stop the state medical aid and dying laws from opening the door to full blown euthanasia as it has in Canada. I'll close with a statement from the Austrian political scientist, Eric Vogelin, and who said “the formula that freedom consists in, the domination of man over himself and nature has released an avalanche of destruction that cannot be stopped at will by those who have released it when enough destruction is worked to make them happy, the avalanche rolls on.” Thank you.

Dr. Carson (03:32:01):

Thank you for that perspective as well. And now we have Dr. Susan Bane, who was an OB/GYN resident. Many people have wondered how do they deal with the abortion issue?

Speaker 29 (03:32:13):

Well, that's exactly why I'm sitting here. Because I was specifically asked to talk about the environment, the medical students and residents face related to abortion and life affirming care.

So, I am Susan Bane. I'm a board-certified obstetrician and gynecologist, and I've practiced for about 30 years in North Carolina. I really want to start by acknowledging that abortion is a hard topic. It's a really hard topic, and I recognize that about one in four women in our country will have an abortion throughout her lifetime. So, there may be people in this room who have either directly or indirectly been affected by abortion. So, I want everyone to know my words while they may cause some pain or not meant to cause harm. So, I think the first thing we have to do is define abortion. The CDC defines an induced abortion as an intervention with the intention of terminating a pregnancy and not resulting in a live birth. So, the intention of this intervention, the purpose is to produce a dead baby. Now, that is in complete contrast with what you've heard throughout the day of the purpose of medicine, which is health and healing. As an OB/GYN doctor, I take care of two patients, a maternal and a fetal patient, a mom and her baby. And so, the direct and intentional killing of one of those patients is never healthcare. It never was, and it never will be.

So there comes a point in all of our training as doctors, where we have to decide what kind of doctor am I going to be? And my defining moment came at the very beginning of my intern year. I was on call. It was about midnight. I got a page from a nurse and labor and delivery. A mom and her baby had arrived, and the baby had down syndrome, and they needed me to come to start the abortion. And I called my senior resident and I just told him, I'm not comfortable participating in this. And he said, okay, I'll take over. As soon as I said that to him, I caught on my knees in my call room, I can remember the green scrubs and the long blonde hair. And I prayed and I said, God, "you have given me these convictions. You have got to give me the courage to follow through on them." No sooner had I said that prayer, my pager went off. It was a different nurse with a different patient in L&D.

I left the call room, I made a right turn, and I bumped into Dr. Frank Gay. He was an attending physician who introduced himself. And he said, are you the new resident with a pro-life feet on your lab coat? And I said, yes sir, I am. And he said, I just want you to know you are not alone. You may feel like it, but you're not. I smiled. I thanked him. And I thought to myself, wow, God, you answer prayers mighty fast. So, when I trained in the 1990s, students and residents like myself had the freedom to learn medicine in a way that was consistent with our beliefs. For me, my Catholic faith, the understanding of the Hippocratic Oath that I took, as well as the development of embryology and human development. Participation in abortion training in the late eighties and nineties was optional. If someone wanted to train, they could opt in, but it was never expected.

Today, that structure has changed. I don't have time to tell you exactly how it was changed. Maybe we can talk about it. But it was calculated and it was intentional. It resulted in many things. But one of the things that resulted in, in 2018, the Accreditation Council for Graduate Medical Education, the ACGME, an organization responsible for accrediting residency programs, changed the structure from opt-in to opt out. So, what that means now is part of the plan curriculum, residents must perform abortions unless they have a moral or religious obligation or objection. Now, on paper, that may sound like a reasonable compromise, but in practice, opting out is not as simple as that. Medical education is highly hierarchical. The medical student reports to the resident. The resident reports to the fellow, the fellow to the attending. You're under constant evaluation. And the people who are also evaluating you are the ones who are then deciding your future course.

Let me contrast one other story from when I trained versus what a resident would experience today. I was on morning rounds; I was told to go into room OR12 to assist with the DNC. I assumed the baby was dead. The mom had miscarried. The attending had me put the ultrasound transducer on her abdomen, and it was a living baby. I was able, without any fear, threat of punishment or retaliation to step out of that OR room. Contrast that to today's trainees. That morning, they may have gotten a lecture from an attending teaching them that induced abortion is essential healthcare. I've even heard them say it's bread and butter care for an OB/GYN now. So that student, that resident goes to, OR 12, and the attending is the same one who did that lecture this morning. And you have to be brave enough to stand up for your beliefs.

Many, it's impossible. And they stay, and then they normalize that as part of their practice. So, I am on the board of the American Association of Pro-Life Obstetricians and Gynecologists AAPLOG. And we hear from students, from residents and even attending physicians all across this country, things that should deeply concern this commission. Medical students tell us that they are told over and over again by program directors, they should not enter the field of OB/GYN if they're not willing to do induced abortions. They're told residents have to go to Planned Parenthood. They're told they can opt out of watching the surgeries or participating in the surgeries, but they're highly encouraged to go to the ultrasounds, to listen to the counseling, to actually, some of them even have been in the room when a woman takes the first abortion drug mifepristone.

The busiest part of AAPLOG's website is from women who want to find a life-affirming doctor. Many will not put their name on our website, practicing physicians all across this country for fear of retaliation. So, this is happening at a time in our country when 40% of the counties across our country are considered maternity deserts, not having adequate obstetrical care for them. So, if students, residents, and even practicing physicians are being silenced, we have to have some solutions. And I have a whole bunch of them, but I'll let that happen maybe during the conversation.

Lt. Gov. Patrick (03:40:26):

Thank you. Questions?

Ryan Anderson (03:40:34):

What are your recommendations?

Dr. Bane (03:40:39):

Policy change for sure. So, through the appropriations process we can move back to that opt-in process. These graduate programs, these residencies receive a lot of GME funding from the federal government. It was actually in the 2025 House labor bill but it didn't make it to the Senate. It was also one of the White House's budget priorities in 2026. So, the appropriations process is one process. The Center for Medicare and Medicaid they represent about two thirds of the funding that graduate medical programs get, the residency programs, and that's about $13 billion. And the ACGME actually violates the Coat Snow amendment with the opt-out option. And so, funds should not be going to programs that violate federal law. And then laws representative Greg Murphy, a urologist, as well as Senator James Langford, have introduced a bill called Conscious Protections for Medical Residence Act.

And that is changing back to opt-in if you want your federal funding for your graduate medical education program. At AAPLOG, we care deeply about the next generation, and we are starting a Hippocratic Academy to get students as they enter into medical school, to be able to learn in the summer of each of their four years, and to have that support that Dr. Gay actually gave me when I started my internship so that they are not indoctrinated into what is really now what they're calling essential healthcare. And I'll go back to, let me just let you know how it happened briefly. So, in 1991, a small group of OB/GYNs in my field decided to institutionalize abortion and academic medicine. And they created a subspecialty. We actually have a subspecialty in my field called Complex Family Planning. And the purpose of that subspecialty is to learn, is to train to do second and third trimester abortions started as one program at the University of San Francisco, California, and they're now 38 of those programs across our country.

So, the next generations have to be given that support system so they can understand that they can practice life affirming medicine. We just had our national conference and we scholarship-ed about 80 current medical students and residents there so they could have my Dr. Gay moment and be surrounded by people. And then the last thing is there is a huge contrast between when women want to be able to trust, they're going to go to an OB/GYN or a family practice doctor that's going to provide healthcare for both mom and baby. So, the contrast between life affirming medicine and medicine that includes death as a therapeutic modality. We've got to get the stories of women and doctors out to show the beauty of life-affirming medicine.

Lt. Gov. Patrick (03:44:13):

Dr. Carson

Dr. Carson (03:44:15):

For patients who are clearly terminal and who along with their families don't want to prolong that, should physicians in training be giving a little more attention to how to keep such patients comfortable and let them just go rather than spending so much time and effort on a terminal patient?

Dr. Cochrane (03:44:46):

That is an excellent question. And one of the most shocking testimonials I could give you is the amount of education I had in medical school about the ultimate outcome of 100% of all of our patients. They are all going to die. And we spent zero class hours talking about death and dying. Now, this was a while ago and it's gotten a lot better, but I remember the first patient quite vividly, who I had in the ICU that was dying. And as a young intern, I was perplexed. And the, I got on the phone to, to find out what I was supposed to do, and the phone call went back and forth, and my attending kept saying, and so what's wrong with the patient? And I gave them all the medical information. He goes, no, what's wrong with the patient? And finally, he said, your patient is dying.

And I remember how that hit me. And I had a family that was panicked and they were, they were frantic because they were looking for me to help them. And I had no training in how to provide comfort care. Fortunately, my attending did, gave me some information. We were able to do that. And then the other thing I want to address is this incredible myth, this incredible myth that's been perpetrated that there is this thing called untreatable pain. It, it is not true. Okay? I've been doing this for over 20 years. There has never been a patient that I've ever seen where we couldn't

control their pain. And in serious cases, where the pain is intense, there is a very ethical option known as palliative sedation, where we can use enough medication to where the patient is in comfort. So yes, we need education about how to address death and dying.

It should be a mandatory part of medical school curriculum. It should certainly be a mandatory part of residency training. And there is a, there is this narrative out there that just needs to be combated, that people need to have assisted suicide because they're going to be intractable pain. I've had a handful of patients who, despite excellent care, have decided to end their lives. And I can tell you on the day that each of those patients took their assisted suicide medicine, they had a visit from a nurse, are you in pain? No. Are you short of breath? No. Are you anxious? No. Are you uncomfortable in any way? No. The reason why people are doing this is not because they have symptoms out of control for one patient, his decision point was, the day I can't walk to the bathroom on my own is the day I no longer want to live.

And this is where we have to have this conversation about is the highest value autonomy? Certainly, if you have children, you know, in your household, the highest value is not autonomy. You do not let your children run out into the street when they decide they want to run out into the street. As a parent, you protect them. And, you know, we have our Founding Fathers who talked about life, liberty, and the pursuit of happiness. And there's an order to that. I would say to you, you can't pursue happiness or autonomy if you're dead. So, life comes first. And, these values and, and Dr. Bane is talking about, it really begins with the indoctrination in our trainings. If we are mentoring, if we are mentoring and saying to the next generation of physicians that your duty is to do whatever your patient asks you, even if it's to harm them.

You know, and Dr. Prager so eloquently pointed out, the Hippocratic Oath existed for thousands of years. It's been well recognized that this problem is going to present itself where doctors are going to be asked to do things that are not going to be in the best interest of their patients. And they need to be prepared to resist that. And if you don't have the training, you know, if you don't, if no one's willing to speak the truth, and you don't really know the truth, how can you support it? And I think in medical school, this could really be a work for the commission that this should be a required part of training in medical school. That teaching and training and preparation about providing excellent palliative care at the end of life should be a requirement.

Dr. Kenneth Prager (<u>03:49:03</u>):

I would just add to that, yes, that it's critically important for people to learn how to deal with patients who are dying. The problem is, when you legalize MAID, I bring in the issue of money. It's expensive to put patients on palliative care. It's much cheaper to offer them the option of quickly ending it. And I'm really worried about the financial incentive in places that will legalize MAID. The other thing is, I think that if made is legalized, it lowers the bar, it makes people more comfortable for accelerating death. Once it becomes legalized, for example, when you have patients who are having intolerable pain, there is sometimes a nuanced distinction between treating to ameliorate pain and hastening death. Ethically, you're supposed to give only enough morphine to ameliorate the pain and not more morphine to hasten death. My concern is that once you have legalized MAID, that distinction will begin to fade and ultimately disappear and will have an umbrella effect in many aspects of end-of-life treatment as well, when this whole issue of the sanctity of life weakens.

Lt. Gov. Patrick (<u>03:50:21</u>):

Ismail. I'm trying to stay on time and, and Eric just reminding you, were you going to have a closing comment today, or No? We had talked a little bit about that earlier.

Eric Metaxas (03:50:33):

Yeah, no, I'm happy to. I thought you wanted me to do that next time, but I'm happy.

Lt. Gov. Patrick (03:50:36):

We can do it next time. We'll do it next time.

Eric Metaxas (03:50:38):

I'm happy it's up to you. Happy to do it.

Lt. Gov. Patrick (03:50:41):

Okay. Let's listen to him. And you can let me know what you want to do. I'll let you make the choice.

Ismail Royer (03:50:50):

Yes, sir. Thank you. Well, Ryan Anderson wrote a very earth-shaking paper in our field of religious liberty. That essentially, and I don't want to put words in his mouth, but essentially, religious liberty cannot be the solution to everything, you know, and I think that what we're seeing here from all of this testimony is that when you have evil laws based on falsehoods, then conscience clauses and religious liberty you know, with respect to those laws only get you so far. I, you know, there's, there's this sort of myth or, you know, on, on the left, our friends on the left like to say that, oh, why is it all of a sudden that there's this sort of, there's Christian nationalist that, you know you know, move for everyone to try to you know opt out of things like our curriculum for, you know, LGBT curriculum for three-year-olds and, you know, third graders and so on.

Well, it's not that. It's that you guys have attempted to seize control of the culture and institute false premises and displaced traditional natural law ethics and morality and truth claims. And there's no reason why we should adopt that and throw away thousands, millennia old premises that have served humanity very well and have earned their reputation as truth. And so, our recommendation, we have, I have, we have several recommendations that we included in our brief that we submitted to the commission along with my testimony. But our recommendation is that we start to have a look at some of these laws and, and reorient medicine and reorient the law towards natural law that the declaration is grounded in.

Lt. Gov. Patrick (03:52:51):

Thank you, panel. You did a terrific job. Thank you very much. Cardinal Dolan had to leave a little bit early, so I'm going to ask a volunteer to pray after Eric speaks. Ryan, I'll let you close with the prayer day.

Eric Metaxas (03:53:09):

Do we have the full 45 minutes or?

Lt. Gov. Patrick (03:53:13):

They're waiting for lots of things out there, so if you, if you want to hold it to the next hearing, that's fine.

Eric Metaxas (03:53:18):

I'll say it briefly. Go ahead and I can go into more detail next time. But even listening to all of these, listening to everything we hear today I mentioned it earlier I'm seeing everything now through the lens of a 600-page book I've just written on the American Revolution titled Revolution. And when I went into writing the book, people kept saying, what's your angle on the Revolution? And I said, well, I have no angle. I just want to tell the story of the birth of what I know to be the greatest nation in the history of the world. I just want to tell that story. And in the course of doing the research, I was over and over and over astonished at the explicit and bold religious culture of the 13 colonies. It wasn't sort of, it wasn't some people, it was part of the warp and the wolf of the entire culture.

And it stood in dramatic contradistinction to the British elite culture. We were a tremendously religious nation, and our liberties came out of that. And there's no way around that. Most of us have been sold that it was the Enlightenment or something. It's like, no, no, no, it came out of our Christian faith. Looking back to the Sinai Covenant, it's just inescapable. And at the heart of that, and I just think it's important to say because of this commission, religious liberty is not moving away from faith toward secularism. On the contrary, and this is a conundrum, but it's precisely the opposite, the founding generation, especially in the 18th century, because of the secular challenge of the French Enlightenment, they were forced to sharpen their theology and to really think about what do we really, really believe? So, they moved away from the dogmatism of let's say the Massachusetts Bay Colony, which was, you know, punishing people if they dissented from the, because they were doing the exact same thing that folks had been doing in, in Europe, persecuting people who disagreed with them theologically.

And they came up with a deeper theology, which they would've argued was more Christian, which includes inescapably religious liberty. And one example of that is George Washington, when he, we thought we would get Canada, it's taken us 250 years. We'll get it soon, I know and Greenland, but the, the idea was that we can get Canada to join us. And at one point, Benedict Arnold, before he became a villain, was a great hero. And Washington charges him with this mission to go to Canada in 1775 and strictly enjoins him to be respectful of the Catholic faith of most of those in Canada. And this was not an abrogation, this was not that Washington was saying, well, it doesn't matter what people believe. In fact, in his note to, in his letter to Benedict Arnold, he actually says something like, you know, we don't, we don't need to correct them on their errors.

Washington clearly believed as a strong Protestant Christian that those are erroneous views, but his point was, but our job as Americans is to respect them. And so, this idea of religious liberty is at the very heart of everything we have believed we would not have a nation without our belief in religious liberty. It's at the center of the center of American liberty of the founding view. And I would argue of Christian faith at the very center. And as you move away from the originalist view, as you move away from that view of Christian faith, you get intolerance and everything begins to break apart. It's a happy thing for me to think that on this day, 250 years ago, as the British were leaving, had just left Boston, it was a great moment of triumph. If you know the history, if you don't know the history, I'm sure you'll read my book.

And if you don't want to read my book, that's fine with me, just, it wouldn't kill it by a few copies. But the history is actually so inspiring that on this very day, 250 years ago, just as the British had left Boston humiliated, George Washington declares that today, he says, “it becomes the indispensable duty of these hither two free and happy colonies with true penitence of heart and the most reverent devotion publicly to acknowledge the overruling providence of God to confess and deplore our offenses against him, and to supplicate his interposition for averting the threatened danger and prospering our strenuous efforts in the cause of freedom, virtue, and posterity.” And it goes on and on. It is dramatically, explicitly, proudly religious language from George Washington, whom we've all been lied to, is, oh, he's a deist. He, this is, if Deists talk like this, I'm a deist. It goes on and on. And he declares May 17th, which is coming up, that that will be a national day in, in, in this proclamation in made today, 250 years ago, that on May 17th, 1776, it will be a national day of prayer, fasting, and humiliation.

This was done publicly. No one dissented, no one said separation of church and state. What do you can, this, this was who we are. And at the heart of all of this is simultaneously a celebration of our faith as at the heart of our liberties and a celebration of religious liberty. And we have to hold that intention. And I will close by simply saying that this May 17th, on the 250th anniversary of this National Day of Prayer, fasting, and humiliation, president Trump has declared that we will together on the National Mall rededicate the nation to God. And I have to say that that is a staggering thing. And so, to have a president who actually appreciates these things and who understands the importance of religious liberty and with Lieutenant Governor Dan Patrick and others has said, we need to make this central that gives me hope for America.

The only way forward after we hear these horror stories month after month is to go back to this founding view at which Christian faith is, is central. It is utterly central. And I'll say it again, because of the explicit boldness of that faith, we have religious liberty and love of those who have different faiths or who have no faith. That is central. George Washington's visit to the Truro Synagogue. And, and other stories can tell you that, but there is literally nothing more important in America. And if we want to know how we can be free we all have to understand this. And finally, listening to this last panel, I thought to myself, my friend and my hero, Chuck Colson, 20 years ago, was talking about this. And he was exhorting people of faith, particularly pastors and ministers and priests, to sign something called the Manhattan Declaration, hearkening back to the Barman Declaration and Dietrich Bon Harford, and saying, we have to get ahead of this because we can feel the culture drifting away from these views toward forcing doctors to participate in abortions, toward forcing doctors to get involved in euthanasia and, and all of the things we have to get ahead of it.

And so, we need men and women of in prominent positions of faith to stand and sign this document. And many, many, many of them, I won't mention the names of the most prominent, but many of them did not. They weren't willing to sign because they had a broken view of these things. We need to rekindle our view, not just of religious liberty, but of where it comes from and reestablish these things. And I'm thrilled that on this day, 250 years ago, president George Washington dedicated a day of prayer on May 17th, and that we will together on the 250th anniversary, re-dedicate the nation to God. So, I'm extremely sanguine about the prospects of liberty of every kind in the United States of America. Thank you.

Lt. Gov. Patrick (<u>04:03:07</u>):

I know how long it takes to read a 600-page book. How long does it take to write it?

Eric Metaxas (04:03:12):
You know, I just had my staff knock it out. I don't know what it says.

Lt. Gov. Patrick (04:03:17):
Ryan, would you close us in prayer?

Ryan Shackelford (04:03:20):
Sure. I'd be happy to. Join me in prayer. Father God, we thank you for this commission. We thank you for the gift of life, for the gift of liberty, especially for religious liberty. We thank you for this country that seeks to protect religious liberty that would establish a commission on religious liberty. We are thankful for today's witnesses, especially those witnesses who have paid a price because of their religious liberty being violated. We asked you to bless them. We asked you that their cases would be victorious, that their lawyers would you would prosper the work of their hands in the courtroom. We ask you to bless the work of this commission, that the recommendations that we make to the President will be good recommendations, that they will have teeth and that they will be implemented. We ask you to call it a repentance. Those who violate religious liberty call them to conversion to stop their persecution of religious believers, stop their eradication of religion in the public square. And as we finish today's hearing, we ask you to be with us as we travel home. Protect us during today's storms and bring us back together next month for our final hearing safely. I may ask all these things in your name. Amen.

Lt. Gov. Patrick (04:04:36):
Thank you for being with us today. We appreciate you coming out. And our next hearing is April 13th. That will be our last hearing. And we will present our report to the President in May, almost one year from the day that he issued the executive order. You all have done great work, great work. And the witnesses who come, Ryan, you're right. They've made this committee what it is. Their courage. Just courage. Thank you all. We'll see you in April.