



Senate Health Care Committee

SB 535

Wednesday, April 3, 2025

Lois Anderson, Oregon Right to Life

Chair Patterson, Vice Chair Hayden, and members of the committee,

I am writing on behalf of Oregon Right to Life to raise awareness and ethical concerns regarding the current practice of assisted reproductive technology (ART), particularly in vitro fertilization (IVF), and to ask for a no vote on Senate Bill 535.

Most of us know someone—a family member, a friend, a colleague—who has faced the heartbreaking reality of infertility, and we empathize with the deep longing they have to build a family. It is a painful journey, one that often involves grief, uncertainty, and difficult decisions.

We recognize the hope that assisted reproductive technologies, particularly in vitro fertilization (IVF), offer to individuals and couples who dream of having children, and as pro-life advocates, we celebrate the beauty of new life and the joy of parenthood. The issue at hand is not whether those struggling with infertility deserve support—*they absolutely do*. Our opposition is the intrinsic danger to nascent human life posed by IVF and the rapid and industrialized creation of human life, resulting in its commodification and ultimate destruction, indefinite freezing, or experimentation.

Oregonians, including organizations like Oregon Right to Life, who oppose this practice because of deeply held religious, moral, or ethical beliefs, should not be required to promote this practice through mandated funding of health insurance premiums.

Current IVF processes create an excess of embryos, and the burden is placed on the parents to decide what will happen to the unique human lives left unimplanted. There are presently only a few options for dealing with unimplanted embryos: thawing and disposal (destruction) of embryos (6%), continued storage (58%), donation to other couples (7%), and termination of these unborn human beings during the process of embryonic stem-cell research (21%), according to one cross-sectional survey.¹ In the same study, 7% of couples sought “compassionate disposal” of their embryos by implanting them, knowing the woman would likely not become pregnant, and another 7% wanted to be present at a small ceremony that could occur during the thawing and disposal process.

¹ <https://pmc.ncbi.nlm.nih.gov/articles/PMC2828821/>

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Some may see this advancement in medical technology as a breakthrough and a path forward, but it presents a troubling shift in how we as a culture understand the intrinsic value of human life. The process of embryo selection—often involving genetic screening—has led to the rejection and destruction of embryos with disabilities, raising serious concerns about eugenics.

Through the mass creation of human life, the fertility industry has developed an unethical business model in which embryos are bought, sold, and marketed for research purposes while profiting from families suffering from infertility.

The widespread use of IVF has resulted in the routine creation of far more embryos than will ever be born. Approximately 2.5 million IVF cycles are performed worldwide each year, yet only around 500,000 result in live births, meaning roughly 80% of embryos created through IVF do not survive to birth.² This staggering destruction and loss of life is something we cannot ignore. While the desire for children is deeply understandable, the reality of IVF in its current practice is that it often treats human embryos as disposable commodities rather than unique, unrepeatable lives.

Oregon Right to Life urges lawmakers to take these ethical concerns into account and, rather than mandate participation through health insurance premiums, seek opportunities to support families while upholding the dignity of every human life from fertilization. Thank you for your time and consideration.

² <https://www.rbmojournal.com/article/S1472-6483%2818%2930598-4/fulltext>