

Committees: Appropriations & Health and Government Operations

Testimony on: HB0477/SB0341 - Public Senior Higher Education Institutions - Reproductive Health Services Plans - Requirements

Position: Favorable

Hearing Date: February 14, 2023

We strongly support HB0477/SB0341, which would require public senior higher education institutions, in consultation with students, to develop and implement a reproductive health services plan at the institution or to refer students to comprehensive reproductive health services. Furthermore, this legislation would require the Maryland Department of Health to provide assistance to these institutions in developing the plan, if requested, as defined in the [text of the bill](#). As medical student leaders of the Johns Hopkins School of Medicine Gynecology/Obstetrics Interest Group and Medical Students for Choice, we firmly support the accessibility and provision of reproductive health services, as they have been shown to benefit individual health, public health, and societal well-being.

Overall, provision of preventive reproductive health care, such as contraception and STI screenings, in addition to abortion care, will allow for Maryland individuals to manage and take charge of their health early in life. It is crucial to ensure adequate provision of reproductive health services to adolescents and young adults. This population is disproportionately affected by STIs; 50% of new infections occur among those 15-24 years old (1). Young adults are also more likely to engage in risky behaviors including binge drinking, multiple sexual partners, unprotected sex, and unintended pregnancy. More than half of all patients who seek abortions in the US are in their 20s (2). Thus, readily available STI screening and contraception services are particularly important for this susceptible population. Through improving access, educational institutions can set reproductive health as a priority for young adults and establish a precedent for the rest of their lives.

The current state of Maryland reproductive health at higher education institutions:

Current offering of reproductive health services at Maryland public higher education institutions is not standardized, leading to inequitable access to care. Additionally, the rise of STI transmission rates, unintended teen pregnancy, and high-risk sexual behavior in Maryland college students indicate the need for greater access to quality reproductive and sexual health care and education (3). For example, the University of Maryland's zip code has the state's highest rate of contracted chlamydia (4).

Five of Maryland's public higher education institutions currently do not even have their own independent reproductive health center (5). Four out of these five also do not have a Planned Parenthood center less than 50 miles from their campus (6).

Furthermore, various anti-choice crisis pregnancy centers exist in close proximity to these institutions and deliberately provide students with misinformation (7). Implementation of a partnership with the Maryland Department of Health to create reproductive health plans will help address this issue of reproductive justice.

Benefits of increased reproductive health services:

The development and implementation of a reproductive health services plan at senior higher education institutions benefits both individual students and Maryland's communities as a whole.

For individual students, the medical benefits of a reproductive health services plan are numerous and indisputable. The provision of contraception methods facilitates prevention of unintended pregnancies, which have serious consequences for the pregnant person. Lack of access to contraception may also force many individuals who do not desire pregnancy to make the difficult decision of whether to undergo abortion, relinquish the child to adoption, or raise their child in suboptimal conditions, if they get pregnant. Individuals with unintended pregnancies are also more likely to experience malnutrition, lack of healthcare, disruption to education and career, and poverty (8).

Furthermore, abortion care services are critical for reducing unsafe abortion practices with high risks of morbidity and mortality for both the pregnant person and the fetus. Abortion also mitigates further emotional and socioeconomic challenges of child-rearing without sufficient financial, physical, and emotional support (9). Data show that women in their 20s account for the highest percentages of abortions and have the highest abortion rates in the US (10). Given that the demographics of senior higher education institutions include a significant number of women in this age group, provision of abortion care service at these institutions will have profound impact on students' health.

STIs also lead to many medical consequences for the infected individual, some of which are serious and long term, ranging from inflammation of the reproductive and urinary tracts to increased risk of cancers. These conditions commonly affect young adults, and several minority communities, such as men who have sex with men, are particularly vulnerable. Thus, the provision of prevention and treatment services for sexually transmitted infections at senior higher education institutions have the potential of significantly improving long-term reproductive health for many individuals, including those who might be hesitant to obtain healthcare at medical establishments due to stigma.

The provision of these services at higher education institutions may help increase accessibility for those who may not have the ability to seek out health services otherwise, due to financial or time-related constraints. Preventative care also results in cost savings to the larger health care system. In terms of societal benefit, preventing unintended pregnancies lessens the burden on the

foster care system and promotes educational achievement, as unplanned pregnancies often lead to dropping out of school. Having reproductive health services close at hand allows students to overcome barriers related to their race/ethnicity, sexual orientation, religion, and socioeconomic status, promoting reproductive justice.

The role of higher education in promoting reproductive health:

Higher education has the unique opportunity to improve reproductive health for young adults. A study of barriers to reproductive services among youth and young adults found that challenges included service access, service entry, quality of services, and social ramifications (11). It found that school-based settings and university clinics, along with primary care settings, were the locations at which young people were most likely to seek care for reproductive health issues (12). Therefore, increasing the available services through higher education institutions, in partnership with students, will better allow for their needs to be served. Schools are well-positioned to provide students with health care and education, which will help alleviate barriers to care and stigma around sexual health, by normalizing this topic and making services easily accessible.

A survey of 885 colleges in the US found that 73% offered STI diagnosis and treatment and contraceptive services, and 66.8% offered condoms (13). A third of these institutions did not receive support from their health department in terms of STI/HIV screening and testing, but over three quarters of institutions were interested in partnering with community health centers or federally qualified health centers (14).

HB0477/SB0341 would facilitate partnerships between Maryland's educational institutions and health department, allowing for sharing of resources and expertise, which would improve services such as preventative health, STI treatment, partner therapy, vaccinations, contraception availability, abortion services and community referrals. In 2019, California was the first state to require public universities to provide access to abortion pills on campus, through legislation that will take effect this year (15). Prior to this, students were referred to off-campus facilities, which was expensive and time-consuming, especially for those without cars. Legislation that ensures access to contraception and abortion care enables individuals to better implement their reproductive rights and autonomy.

Conclusion:

As members of the healthcare community, we strongly support and urge favorable action on HB0477/SB0341 which aims to improve the reproductive health of young adults through providing reproductive health services at higher education institutions in Maryland. This bill would protect the health and well-being of individuals, their community, and our society.

Respectfully submitted,

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References

1. <https://pubmed.ncbi.nlm.nih.gov/29405874/>
2. <https://www.guttmacher.org/report/characteristics-us-abortion-patients-2014>
3. https://www.washingtonpost.com/local/stds-such-as-syphilis-and-gonorrhea-rising-rapidly-in-maryland/2018/09/20/49540b16-bb69-11e8-bdc0-90f81cc58c5d_story.html
4. <https://dbknews.com/2016/11/10/umd-chlamydia-rates/>
5. <https://maryland.prochoiceamericaaffiliates.org/wp-content/uploads/sites/11/2018/06/Repro-Health-and-College-Campuses-.pdf>
6. <https://msa.maryland.gov/msa/mdmanual/01glance/html/edhigh.html>
7. <https://maryland.prochoiceamericaaffiliates.org/wp-content/uploads/sites/11/2018/06/Repro-Health-and-College-Campuses-.pdf>
8. <https://www.sciencedirect.com/science/article/pii/S0091218298000639>
9. <https://www.acog.org/advocacy/facts-are-important/abortion-is-healthcare>
10. <https://www.cdc.gov/mmwr/volumes/70/ss/ss7009a1.htm>
11. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5253087/>
12. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5253087/>
13. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6727964/>
14. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6727964/>
15. <https://www.latimes.com/california/story/2019-10-11/abortion-medication-california-college-health-centers-legislation>