

Opposition Statement SB341/HB477

Public Senior Higher Education Institutions – Reproductive Health Services Plans – Requirements
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Maryland Right to Life supports any public policy that enables and empowers women to choose life for their preborn children. We are willing to assist any local k-12 school system or institute of higher education in the development of policies and programs supporting pregnant students. We work with a network of providers who promote life-affirming programs for pregnant students, including Students for Life and the attached "Pregnant on Campus Bill of Rights".

However, we strongly oppose this bill that would commit public tax dollars to promote the destruction of human life through abortion. This bill is an unfunded mandate on Maryland colleges and universities to actively participate in abortion practices and promotion. It would establish a legal framework to position the abortion industry to prey on vulnerable young women without offering students access to lifesaving alternatives, prenatal care, medically accurate information or informed consent.

The bill also does not contain a conscience clause to protect the rights of faculty or staff who do not want to participate in abortion coordination or practices.

State Government Obligation to Parents and Students

The State of Maryland has an obligation to provide a safe and healthy environment for all students attending institutes of higher education within this state. The state cannot reasonably entrust abortion providers and others who stand to gain financially from the sale of abortions, with the education and care of pregnant students.

Parents send their daughters to college for an education, not for an abortion. The bill undermines parental rights to make medical decisions for their children as many young adults remain on their parents' insurance policies until the age of twenty-six. By enacting this bill the state will violate the trust of parents and far exceed its limited authority to act in place of the parents on campus, particularly in the matter of student health.

Abortion Coercion

This bill would dramatically increase the risk of Abortion Coercion of pregnant students at the hands of financially motivated adults within the system. The *majority* of women who have had abortions (64%) report afterward that they were pressured into the decision. Coercion encompasses any situation in which a pregnant mother is made to feel - by any means - that she has *no choice* but an abortion. Coercion sends a mother into the belief that *either the baby dies or I will die or suffer great harm*, which may include losing a scholarship, being displaced from a team or even temporarily delaying education.

With the <u>documented severity</u> of physical and psychological repercussions of abortion, protection from abortion coercion becomes even more essential in ensuring that the best interests of students are protected. Under current Maryland law, there is no explicit measure prohibiting any individual from coercing a woman into abortion.

The abortion industry self-identifies as *pro-choice*, but in reality, choice has little to do with the abortion transaction. Far from enshrining protections against coercion, the abortion industry operates on omission: they omit important questions about coercion during pre-abortion "counseling", fail to provide information about the potential physical and psychological risks of abortion, and deny women the ability to view the ultrasound of their baby before abortion.

Abortion providers also have demonstrated an unwillingness to protect women and girls against sexual abuse and trafficking by refusing to report suspected abuse to law enforcement or other public authorities while agreeing to commit abortions on suspected victims.

MDRTL Opposes Public Funding for Abortion on Campus

Maryland taxpayers should not be forced to subsidize abortion indoctrination, promotion and abortion violence. A 2023 Marist poll showed that 60% of people polled oppose the use of tax dollars to pay for abortion and 81% favor laws that protect both the lives of women and unborn children. Public funds instead should be prioritized to fund legitimate health and family planning services which have the objective of saving the lives of both mother and children, including programs for improving maternal health and birth and delivery outcomes, well baby care, parenting classes, foster care reform and affordable adoption programs.

Pregnant women have better alternatives for maternal health. There are 14 federally qualifying health centers

and 4 pregnancy centers for each Planned Parenthood in Maryland. Planned Parenthood profits from abortion sales and is not a significant provider of prenatal care or adoption referrals.

While federal Title IX requires any institution that receives federal funds to provide equal accommodation for pregnancy or *termination* of pregnancy, including things like larger desks and excused absences, the state has no legal obligation to provide access, coordination or public funding for abortion including on college campuses.

Funding restrictions are constitutional

The Supreme Court of the United States, in *Dobbs v. Jackson Women's Health* (2022), overturned *Roe v. Wade* (1973) and held that there is no right to abortion found in the Constitution of the United States. As early as 1980 the Supreme Court affirmed in *Harris v. McRae*, that *Roe* had created a limitation on government, not a government funding entitlement. The Court ruled that the government may distinguish between abortion and other procedures in funding decisions -- noting that "no other procedure involves the purposeful termination of a potential life", and held that there is "no limitation on the authority of a State to make a value judgment favoring childbirth over abortion, and to implement that judgment by the allocation of public funds."

Abortion is not healthcare

Abortion is not healthcare. It is violence and brutality that ends the lives of unborn children through suction, dismemberment or chemical poisoning. The fact that 85% of OB-GYNs in a representative national survey do not perform abortions on their patients is glaring evidence that abortion is not an essential part of women's healthcare.

Recent acts of abortion activists occupying the Maryland General Assembly have completely removed abortion from the spectrum of healthcare. As a result of the Abortion Care Access Act of 2022, sponsored by Delegate Ariana Kelly (D-Montgomery), a former NARAL employee, poor women will be deprived access to care through a licensed physician. The state is now allowing any "certified provider of abortion care" to perform or provide both surgical and chemical abortion through birth.

Combine this with the fact that 54% of abortions are now "Do-It-Yourself" abortions where women are remotely prescribed dangerous abortion pills without a physician's examination and are left to hemorrhage alone until their bodies forcefully expel their babies' bodies, and the argument that abortion is healthcare is completed discredited.

Abortion is a Failed Policy

Nearly fifty years of federal abortion mandates on the state have failed to cure the underlying socioeconomic challenges women face in raising their families. The abortion industry has failed to reduce pregnancies, but only reduced the number of *live births*. In fact, the number of abortions has increased proportionately with the increase in public funding for abortion businesses.

Planned Parenthood and their network of organizations are financially invested in unplanned pregnancies that increase abortion profits. They cannot be trusted to instruct children and young adults in human reproduction and sexuality or to promote their abortion business under the guise of student "health".

The fact that the number of abortions is highest among college-aged students, demonstrates that decades of public funding to abortion activists in Maryland k-12 public education, has failed to prepare our youth with sound family planning practices. Throwing additional public funding toward the multi-billion dollar abortion industry's failed practices, is not sound fiscal policy and harms those most in need of quality maternal health care options.

State-sponsored abortion is having a genocidal impact on Black Marylanders

Abortion has a disproportionate impact on Black Americans who have long been targeted by the abortion industry for eugenics purposes. Even today 78% of abortion clinics are located in minority communities. As a result abortion violence has become the leading killer of Black lives, more than gun violence and all other causes combined. More than half of all pregnancies to Black women in Baltimore City end through abortion violence. The state fails to measure or report the correlation between the increased use of abortion with increased risk to maternal mortality, infertility, miscarriage, pre-term births for Black mothers. This makes any argument that abortion is healthcare a morally repugnant call for state-sponsored genocide of Black children in Maryland.

For these reasons we respectfully urge you to put Maryland students and the integrity of our higher education system before abortion politics and profit, by issuing an unfavorable report on this bill.

Sincerely, **Laura Bogley, J.D.**Executive Director

Maryland Right to Life

Pregnant on Campus Bill of Rights In the interest of presenting young women with ALL of their options, especially those guaranteed to her by law, and to ensure that pregnant and parenting students are never discriminated against, schools need to understand and communicate the following:

- Pregnant students cannot be barred from activities enjoyed by fellow students, including but not limited to: club memberships, academic programs, and intramural activities.
- II. Pregnant students should not be barred from utilizing campus housing and, upon birth of her child, should be permitted to make her own decision about off-campus housing.
- III. Pregnant students cannot have their academic or athletic scholarships revoked due to pregnancy or be subject to penalty regarding any other type of financial aid.
- IV. Professors and other staff may not punish pregnant students as a result of a medically necessary absence. Concessions must be made to re-take tests and complete other assignments if necessary.

- Instructors cannot penalize a student because of his or her parenting status.
- VI. Recipients of scholarships, athletic or otherwise, are to be fully informed of their Title IX rights. Coaches or other school officials who fail to fully inform students are to be deemed negligent.
- VII. Athletic directors or coaches may not bully students into abortions by threatening loss of future or present opportunity.
- VIII. Campus Title IX offices are responsible for ensuring this law is followed. Too often, Title IX coordinators are either complacent or complicit in violations.
 - IX. Student problems and concerns must be addressed in a timely manner to ensure an uninterrupted education.
 - X. Failure to provide these protections to students must be reported.