



### **Opposition Statement HB1057**

Correctional Services - Inmates - Labor, Job Training and Educational Courses  
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Maryland Right to Life

#### **We Oppose HB1057**

On behalf of our 200,000 followers across the state, we respectfully object to HB1057. While providing job training and educational courses is a positive in general, we oppose the program being used to recruit program participants into the abortion industry workforce. We oppose any funds for this bill being used to fund the training of participants for the abortion industry. Maryland Right to Life strongly recommends an amendment added with language that would exclude abortion funding and exclude recruitment of participants for the abortion workforce.

In addition to the taxpayer funding of participants for the abortion industry, Maryland Right to Life opposes the further erosion of medical care for the women and girls of Maryland. This program would allow recruitment of participants with minimal education and a criminal history. Surgical and medical abortions carry a risk of injury up to and including death. Surgical abortions are invasive and the woman or girl risks injuries including a punctured uterus, incomplete abortion, lacerations to the vagina and cervix, sepsis, and death. The risks for a woman or girl taking the abortion pill include hemorrhage, sepsis, incomplete abortion, menstrual abnormalities and death. The women and girls of Maryland deserve the care of trained, licensed physicians. The Abortion Care Access Act of 2022 removed the physician requirement for women and girls seeking abortion. This bill further reduces the quality of medical care that women and girls receive in Maryland. Please do not expose the women and girls of Maryland to further degradation of their health and well-being.

**“D-I-Y” Abortions Endanger Women.** Public policy has failed to keep pace with the abortion industry’s rapid deployment of chemical abortion pills. The Assembly removed the final safeguard in law for women seeking abortion when they enacted the Abortion Care Access Act of 2022 and removed the physician only requirement. In doing so, the Assembly removed abortion from the spectrum of healthcare.

85% of obstetricians and gynecologists refuse to commit abortion, demonstrating that abortion is not an essential part of women’s health care. In response to this provider scarcity, the abortion industry is commercializing “Do-It-Yourself” abortion pills. The abortion industry’s radical agenda to indiscriminately sell “D-I-Y” abortions is normalizing “back alley abortions” where women self administer and hemorrhage without medical supervision or assistance.

Chemical abortion is four times more likely to result in complications than surgical abortion. To date more than 6,000 complications have been reported and 26 women have been killed through chemical abortion since its

approval by the Food and Drug Administration (FDA). Because half of all women experiencing complications from chemical abortions receive emergency intervention through hospitals, the rate of abortion complications is dramatically underreported.

**Put patients before abortion politics and profits.** Maryland policymakers have put abortion politics before patients. In 2020, Maryland Attorney General Brian Frosh, joined twenty state Attorneys General in pressuring the FDA to permanently remove safeguards against the remote prescription of abortion pills. Maryland already has been circumventing the FDA restrictions on the remote distribution of chemical abortion pills since 2016, by allowing Planned Parenthood to practice telaboration as part of a “research” pilot program directed by Gynuity/Carefem. While program participants are loosely tracked, Maryland generally fails to protect women as one of three states that do not require abortion providers to report the number of abortions they commit, resulting in increased threat to maternal health, complications or deaths.

**Telehealth v. Teledeath.** The Assembly enacted several bills into law as supposed Covid measures. These laws expanded telaboration through potential remote distribution chains including pharmacies, schools health centers, prisons and even vending machines and expanded public funding for telaboration through Medicaid and Family Planning Program dollars. There are many potential negative consequences to these policies which ultimately demonstrate the state’s disregard for the health of women. For example, underestimation of gestational age may result in higher likelihood of failed abortion. Undetected ectopic pregnancies may rupture leading to life-threatening hemorrhages. Rh negative women may not receive preventative treatment resulting in the body’s rejection of future pregnancies. Catastrophic complications can occur through telaboration, and emergency care may not be readily available in remote or underserved areas.

**Abuse of Abortion Drugs.** The state also is neglecting the fact that as much as 65% of abortions are not by choice, but by coercion. Potential for misuse and coercion is high when there is no way to verify who is consuming the medication and whether they are doing so willingly. Sex traffickers, incestuous abusers and coercive boyfriends will all welcome more easily available chemical abortion.

**Maryland is one of only 4 states that forces taxpayer funding of abortion.** Maryland taxpayers should not be forced to subsidize the recruitment and training of workers for the abortion industry, especially workers that put the health of women and girls in jeopardy.

**Americans oppose taxpayer funding of abortion.** The 2023 Marist poll shows that 60% of Americans, pro-life and pro-choice, oppose taxpayer funding of abortion. 81% of Americans favor public funds being prioritized for health and family planning services that save the lives of mothers and their children including programs for improving maternal health and birth and delivery outcomes, well baby care and parenting classes.

Do not allow this bill to be used to fund training for the abortion industry and recruit staff for the abortion industry. Do not allow inmates to be exploited in this way. Without an amendment excluding abortion, this bill will further degrade the medical care that the women and girls of Maryland receive. For these reasons, we ask for an unfavorable report on **HB1057**.