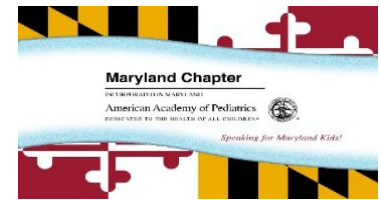
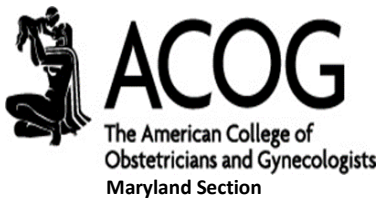


SB0511_FAV_MDACOG, MDAAP_Pub. Senior Higher Ed. In

Uploaded by: Christine Krone

Position: FAV



Senate Education, Energy, and the Environment Committee
February 19, 2025

Senate Bill 511 – *Public Senior Higher Education Institutions – Pregnant and Parenting Students – Plan Requirements (Pregnant and Parenting Student Support Act)*

POSITION: SUPPORT

On behalf of the Maryland Section of The American College of Obstetricians and Gynecologists and the Maryland Chapter of the American Academy of Pediatrics, we submit this letter of support for Senate Bill 511.

Senate Bill 511 seeks to address the issues that students who are pregnant, have recently given birth, or are non-birth parents face in attempting to advance their education, while addressing the demands associated with pregnancy and early parenthood demands. Senate Bill 511 requires higher education institutions to adopt policies related to pregnant and parenting students that is consistent with Title IX of the Education Amendments of 1972, which includes a prohibition of a requirement for pregnant students to take a leave of absence; allows pregnant students, students who have recently given birth, and non-birth parents to take a leave of absence and return in good academic standing; and requires the adoption of policies related to pregnancy discrimination awareness and other issues that impact pregnant students. The bill also requires the policy to include requirements for referrals to on-campus and off-campus services regarding the availability of or eligibility for government assistance programs, such as the Supplemental Nutrition Assistance Program, the Childcare Scholarship Program, Medicaid, and the Children's Health Insurance Program as well as referrals to on-campus and off-campus health care service providers.

Academic success is a key factor in enabling students to become productive, self-sufficient individuals who can advance professionally and personally. The added challenges of pregnancy and the initial months after delivery can negatively impact a student, despite a desire and commitment to complete their education and advance their professional development. Passage of Senate Bill 511 will help ensure that institutions of higher education have policies that support the success and advancement of their students who experience a pregnancy or birth of a child. It will enhance the likelihood of success for these students as well as their ability to support their families. A favorable report is requested.

For more information call:

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Maryland Catholic Conference_FAV_SB511.pdf

Uploaded by: Diane Arias

Position: FAV



MARYLAND
CATHOLIC
CONFERENCE

February 19, 2025

Senate Bill 511

**Public Senior Higher Education Institutions - Pregnant and Parenting Students -
Plan Requirements (Pregnant and Parenting Student Support Act)
Senate Education, Energy, and the environment Committee**

Position: Favorable

The Maryland Catholic Conference (MCC) is the public policy representative of the three (arch)dioceses serving Maryland, which together encompass over one million Marylanders. Statewide, their parishes, schools, hospitals, and numerous charities combine to form our state's second largest social service provider network, behind only our state government.

Senate Bill 511 requires certain public senior higher education institutions to adopt a plan regarding pregnant and parenting students to include referral to on-campus or off-campus services to assist regarding the availability of or eligibility for certain government assistance programs and any other programs, scholarships, or subsidies that may be available for pregnant and parenting students; and requiring each public senior higher education institution to post the plan on the institution's website on or before August 1, 2026.

In Maryland, nearly 70,000 students, constituting one-fifth of undergraduates, are parents.¹ Student parents, often older, financially independent, highly motivated, and achieving better grades than their dependent peers, face significant challenges. However, a notable disparity exists, with just 8% of single-mother undergraduates earning an A.A. or B.A. within six years of college enrollment, compared to 49% of non-mothers.²

For student parents, particularly single mothers, a fundamental obstacle to education is the lack of awareness about their Title IX rights for campus accommodations. Among the state's 31 public colleges and universities, only a quarter provide information about Title IX rights for pregnant and parenting students on their websites. Moreover, 60% of public colleges do not list lactation spaces for breastfeeding mothers. The absence of this crucial information may lead to

¹ <https://www.generationhope.org/our-stories/maryland-advocacy-student-parent-data-collection#:~:text=Based%20on%20national%20data%2C%20we,%2C%20data%20analysts%2C%20and%20policymakers.>

² <https://iwpr.org/wp-content/uploads/2020/08/Maryland.pdf>

college dropout, discrimination, or a perception of unsupportiveness, hindering rather than facilitating college success. Notably, women of color are disproportionately affected, with 31% of Black women, 17% of mixed-race women, and 16% of Latinas in college being mothers, compared to 13% of White and 7% of Asian/Pacific Islander female students.³

Pregnancy support services play a vital role in assisting women throughout their pregnancies and the early stages of parenting. Parenting students seek higher education to obtain better paying careers and ensuring adequate campus support is essential to ensure parents obtain their degrees without sacrificing their parental responsibilities. If parents and their children are eligible for government subsidies, they should be able to obtain these services to continue to provide for themselves and their children. This legislation seeks to affirm life that is welcomed by parenting students and provide enhanced support services for parents to raise healthy families and maintain educational success.

For these reasons, the Maryland Catholic Conference asks for a favorable report on **SB 511**.

Thank you for your consideration.

³ https://iwpr.org/wp-content/uploads/2020/08/C481_Parents-in-College-By-the-Numbers-Aspen-Ascend-and-IWPR.pdf

2025 SB511 NAPNAP.pdf

Uploaded by: JD Murphy

Position: FAV



February 17th, 2025

Maryland Senate
Education, Energy, and the Environment Committee
2 West Miller Senate Office Building
Annapolis, Maryland 21401

Dear Honorable Chair, Vice-Chair and Members of the Committee:

On behalf of the pediatric nurse practitioners (PNPs) and fellow pediatric-focused advanced practice registered nurses (APRNs) of the National Association of Pediatric Nurse Practitioners (NAPNAP) Chesapeake Chapter, we are writing to express our **support of SB511 Public Senior Higher Education Institutions - Pregnant and Parenting Students - Plan Requirements (Pregnant and Parenting Student Support Act)**

As pediatric providers, we understand the influence of families, including strong parental support, to the growth and development of children. Pregnancy and parenthood present unique challenges for students, often leading to increased stress, financial strain, and the risk of academic failure. Teen parents are more likely to be incarcerated, achieve lower academic and employment opportunities, leading to lower socioeconomic status, which has been shown to lead to generations of children repeating this pattern. Support throughout the time is key to breaking this cycle. By requiring higher education institutions to adopt comprehensive plans that include referrals to on-campus and off-campus services, SB511 will provide essential resources and support systems for these students.

The provisions of SB511, which include access to government assistance programs, scholarships, and subsidies, are vital in helping pregnant and parenting students navigate their educational journey. These resources will not only alleviate some of the financial burdens but also promote a healthier and more stable environment for their children. Ensuring that these students have access to the necessary support will contribute to better health outcomes for both the parents and their children, all while empowering pregnant and parenting students to seek the help they need without fear of stigma or discrimination.

For these reasons the Maryland Chesapeake Chapter of NAPNAP extends their support to SB SB511 Public Senior Higher Education Institutions - Pregnant and Parenting Students - Plan Requirements (Pregnant and Parenting Student Support Act) and requests a favorable report. The pediatric advanced practice nurses of your state are grateful to you for your attention to these crucial issues. The Chesapeake Chapter of the National Association of Pediatric Nurse Practitioners membership includes over 200 primary and acute care pediatric nurse practitioners who are committed to improving the health and advocating for Maryland's pediatric patients. If we can be of any further assistance, or if you have any questions, please do not hesitate to contact the Chesapeake Chapter legislative committee or president, Yvette Laboy at mdchesnapnapleg@outlook.com.

Sincerely,

Yvette Laboy

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SB511sponsor testimony final.pdf

Uploaded by: Linda Hanifin Bonner

Position: FAV

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Legislative District 30
Anne Arundel County

Judicial Proceedings Committee

Joint Committee on Children,
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THE SENATE OF MARYLAND
ANNAPOLIS, MARYLAND 21401

SPONSOR TESTIMONY

Senate Bill 511
Public Senior Higher Education Institutions
Pregnant and Parenting Students Plan requirements
(Cross filed with HB0840 - Delegate Althea McCaskill)

Chairman Feldman and Committee Members

Thank you for the opportunity to introduce and provide important details regarding SB 511- on Public Senior Higher Education Institutions – Requirements for a Plan for Pregnant and Parenting Students Plan.

Previously introduced in 2024 in the house, SB511 recognizes the challenges faced by a select group of students – especially women of color who are parenting and pregnant – by providing vital support services that enable them to complete their education. The bill will require that Maryland’s public education institutions have an adopted plan in place that states where the much-needed support services are available to help pregnant and parenting students while they are completing their own education process.

All public senior high schools and other higher education institutions will be required to follow the Title IX model, to produce and adopt a plan for pregnant and parenting students with referral information on referral as to the location of on and off-campus services – and to assist them in learning about the availability of or eligibility for specific government assistance programs, scholarships, or subsidies that may be available. Each public senior higher education institution will be required to post this plan on the institution's website on or before August 1, 2026. This revision or update to the existing legislation ensures that the implementation and reporting processes for the new provisions are consistent with the established framework of the bill.

The target student population, who are the main focus are "Pregnant and parenting students" - those who are expecting a child or already have dependent children. The targeted institutions are Maryland’s public senior high schools, universities community and 4-year colleagues – all of whom are the institutions subject to the existing law – "Public Senior Higher Education Institutions - Reproductive Health Services Plans -Requirements", except as exempted.

After hearing today’s testimony, I urge the Committee to give a favorable decision on this bill.

UNFAVORABLE.SB511.HB840.LauraBogley.MDRTL.pdf

Uploaded by: Laura Bogley

Position: UNF



UNFAVORABLE STATEMENT

SB511/HB840 Public Senior Higher Education Institutions – Pregnant and Parenting Students – Plan Requirements

Laura Bogley, JD

Executive Director, Maryland Right to Life, Inc.

We Strongly Oppose Abortion Promotion and Funding in Public Universities and Colleges

Maryland Right to Life (MDRTL) supports any public policy that enables and empowers young women and men to choose life for their preborn children. Maryland Right to Life offers to assist any legislator or institute of higher education in developing policies and programs to exclusively support healthy birth and delivery outcomes. We work with a network of providers who promote life-affirming programs and services for pregnant women and girls at no cost.

We respect the good intentions of the bill's House sponsor and applaud any effort to create an educational environment that supports students in their decisions to provide life to and/or to parent their children. Unfortunately, while this bill may be intended to ensure equity in providing equal access to lifesaving alternatives to abortion, it is not narrowly tailored to achieve that end.

There is no language in the bill that would exclude abortion or abortion providers, or prevent the state-sponsored abortion industry from exploiting the policy to deliver vulnerable pregnant students and their preborn children into the lethal hands of abortion providers.

For these reasons, we must oppose this bill and any mandate on public schools and universities that requires referral to, promotion or funding of abortion and abortion providers.

Federal Title IX Requires Abortion Accommodation

MDRTL has been consistent in our position that we cannot support any bill that would expand abortion access and coordination by codifying federal Title IX. Regulations attached to Title IX since 1975, corrupted the intent of the federal Higher Education Act of 1965 by requiring that any institution that receives federal funds, must provide equal accommodation for pregnancy **AND *termination of pregnancy*** by abortion. Because this bill seeks to codify Title IX in Maryland statute and administrative policy, the bill cannot be cured by amendment.

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

Bill Goes Further than Title IX

No Conscience Protections - This bill 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. Existing conscience protections in state law for medical providers are insufficient and would not automatically extend to college staff.

Referrals to Abortion Providers - This bill requires that pregnant students be referred to state programs that fund abortions including the Maryland Medical Assistance Program and the Maryland Children's Health Insurance Program. In 2023, the state reported that 12,727 abortions were committed and abortionists were reimbursed \$7.9 million in taxpayer funds under the Medical Assistance Program. Less than 11 of those taxpayer-funded abortions were for reasons of rape, incest or to save the physical life of the mother.

State referral practices are extremely problematic, as the Maryland Department of Health and the Maryland Department of Education routinely refer pregnant women to Planned Parenthood despite the fact that only 14% of their facilities provide even minimal prenatal care, and their advertised adoption counseling services have been proven to be negligible but intended instead to serve as a feeder system for abortion sales.

Coordination of Abortion Services - This bill requires that colleges and universities coordinate services through an undefined "referral network of health care providers". But Section 15-136 of the Education Article of the Maryland Code, already require that colleges and universities develop and implement reproductive health services plans to provide or refer students to a "comprehensive" range of reproductive health services, expressly including abortion (See additional details below.)

Because of the state of Maryland's abortion bias, the state systemically discriminates against pro-life organizations and providers and excludes them from participation in any state programs claiming they do not provide "comprehensive" care because they will not commit or refer for abortions. Conversely the state routinely entrusts the profit-minded abortion industry and their network to define and implement state programs to target pregnant women and students, despite the fact that after 46 years of taxpayer subsidization, they have failed to eliminate unplanned pregnancies.

State is in Violation of Title IX

It is MDRTL's position that the State of Maryland is in direct violation of Title IX by refusing to provide pregnant students in public universities and colleges equal accommodation or access to pro-life providers and lifesaving alternatives to abortion. In 2023, the members of the Maryland General Assembly enacted Chapters 250 and 251 - *Public Senior Higher Education Institutions – Reproductive Health Services Plans – Requirements*, now Section 15-136 of the Education Article of the Maryland Code. The Assembly codified your clear intention to mandate abortion on campuses, by requiring the coordination of abortion services while rejecting amendments to provide students resources or referrals for healthy birth and delivery outcomes.

State is Engaging in Abortion Coercion

As a result of the state's blatant abortion bias and systemic discrimination against pro-life speech and providers, the state is depriving women real choice and engaging in constructive abortion coercion. Under current Maryland law, there is no explicit measure prohibiting any individual from coercing a woman into abortion.

The *majority* of women who have had abortions (64%) report afterward that they were pressured into the decision. With the documented severity 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. But this bill will require colleges and universities to refer pregnant students to providers who may coerce them into using abortion drugs or procedures for their own financial gain.

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.

The abortion industry self-identifies as *pro-choice*, but in reality, choice has little to do with the abortion transaction. Far from enshrining protections from coercion, the abortion industry operates on omission: they omit important questions about coercion during pre-abortion "counseling" and fail to provide information about the effects of a coerced abortion.

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

State Government Obligation to Parents and Students

Parents send their daughters to college for an education, not for an abortion. 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.

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. However, parents who do not have the right to consent to abortion procedures for their children, will be financially responsible for any medical or psychological health interventions necessary as a result of abortion injuries or death. 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.

MDRTL Opposes Public Funding for Abortion on Campus

It is MDRTL's position that the state of Maryland is failing in its fiduciary responsibility to state taxpayers and failing to provide for the legitimate healthcare needs of pregnant women and girls in Maryland.

Planned Parenthood and their network of organizations are financially invested in unplanned pregnancies that increase abortion profits. This is an obvious conflict of interest that makes it unreasonable for the state to entrust Planned Parenthood with the instruction of children and young adults in human reproduction and sexuality. The abortion industry has failed to reduce pregnancies, but has 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.

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.

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 and students 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.

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. To the detriment of women's reproductive health, 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 at least 63% 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.

Disparate Impact Statement: 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 issue an unfavorable report on this bill and encourage the sponsor to introduce a bill that is narrowly tailored to ensure that pregnant students are provided access to lifesaving alternatives to abortion without fear of abortion coercion on campus.

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Uploaded by: Andy Clark

Position: INFO



SENATE EDUCATION, ENERGY, AND THE ENVIRONMENT COMMITTEE

Senate Bill 511

**Institutions of Higher Education - Pregnant and Parenting Students – Policy
Requirements (Pregnant and Parenting Support Act)**

February 19, 2025

Letter of Information

Chair Feldman, Vice Chair Kagan and committee members, thank you for the opportunity to provide comment on Senate Bill 511. The bill requires public institutions of higher education to develop plans regarding the availability of (or eligibility for) programs, scholarships, or subsidies that may be available for pregnant and parenting students. The bill also calls for priority class registration and other additional supports and service.

The University System of Maryland (USM) is comprised of twelve distinguished institutions, and three regional centers. We award eight out of every ten bachelor's degrees in the State. Each of USM's 12 institutions has a distinct and unique approach to the mission of educating students and promoting the economic, intellectual, and cultural growth of its surrounding community. These institutions are located throughout the state, from Western Maryland to the Eastern Shore, with the flagship campus in the Washington suburbs. The USM includes three Historically Black Institutions, comprehensive institutions and research universities, and the country's largest public online institution.

Equal treatment and support for pregnant and parenting students is critical to ensuring that all female students have equal access to educational opportunities. The campuses that comprise the USM have consistently implemented timely policies to keep these students in school, ensure their children's health — and in the end get their diploma. While Senate Bill 511 supports this goal, we believe these resources should be posted online rather than in a policy because this information frequently changes. Additionally, we would prefer flexibility with providing institutional accommodations and resources regarding adoption services.

Academic accommodation is generally made on a case-by-case basis as it pertains to the physical circumstances of pregnancy and any related medical conditions. This is a distinct time period that may include: the duration of the student's pregnancy, physical recovery and/or post pregnancy medical or psychological conditions that would be considered a disability under the Americans with Disabilities Act (ADA).

The U.S. Department of Education's Office for Civil Rights (OCR) enforces, among other statutes, Title IX of the Education Amendments of 1972. Title IX protects people from discrimination based on sex in education programs or activities that receive federal financial assistance. One of the less well-known aspects of Title IX is that it protects the rights of pregnant and parenting students to stay in school and confer a status of "...pregnancy, childbirth, false pregnancy, termination of pregnancy, or recovery therefrom."

Generally speaking, this means that USM institutions must give all students who might be, are, or have been pregnant (whether currently parenting or not) equal access to school programs and extracurricular activities. Schools must treat pregnant and parenting students in the same way that they treat other students who are similarly able or unable to participate in school activities. And Title IX requires schools to prevent and address sex-based harassment, which includes harassment based on pregnancy. Pregnant and/or parenting students may not be prevented from attending class on the basis of pregnancy. Separate programs or schools for pregnant and parenting students must be completely voluntary and must offer opportunities equal to those offered for non-pregnant students.

USM institutions develop plans for pregnant and parenting students, including specialized class registration and flexible scheduling options on a case-by-case basis. We offer “reasonable accommodations,” but that does not mean that we can always provide “flexible scheduling options.” Flexibility is limited by the type of course and institution; there may only be one time a course or curriculum can be offered in a given semester.

Priority registration could also be problematic as students may have challenges beyond the physical, geographic, or financial demands of an academic course of study. Priority scheduling arrangements exist in the most exigent of situations such as international students who must have in-person classes for USM institutions to be federally compliant; or students who must enter certain courses to graduate on time. Advisors work with students who are pregnant or parenting to help schedule, but requiring additional intensive services could grow demand without additional support.

Lastly, as you know, the USM’s proposed budget reduction for FY26 equates to \$111 million. This is in addition to last year’s cut and another mid-year cut to the FY25 budget leaves the USM down \$180 million cumulatively in FY25 and FY26. Adding additional policies at this time creates additional challenges for our campuses at an already difficult time managing budget reductions as well as the uncertainty of new policies and executive orders being imposed by the federal government.

The institutions that comprise the USM, their leadership and staff, understand the rights of pregnant and parenting students under Title IX. It is in the highest, best interest of the USM and the State of Maryland to increase graduation rates and provide support for motivated students facing the challenges of parenthood. Institutions pay attention to what's working, what's not working, and what kind of barriers students may still experience throughout a semester.



UNIVERSITY SYSTEM
of MARYLAND

