

## **WRITTEN TESTIMONY IN SUPPORT OF HOUSE BILL 588**

*Maryland General Assembly — 2026 Session*

*Missing and Murdered American Indian and Alaskan Native Women and Girls — Day of Awareness and Reporting Requirement*

**Submitted To:** House Committee on Government, Labor, and Elections

**Position:** SUPPORT

**Date:** March 2026

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### **Executive Summary**

House Bill 588 establishes May 5 as *Missing and Murdered American Indian and Alaskan Native (MMIW) Women and Girls Awareness Day* and directs the Department of State Police to assess gaps in data collection and public awareness regarding violence against this population. This bill is a low-cost, high-impact measure that gives visibility to a long-overlooked public health and human rights crisis.

The American College of Obstetricians and Gynecologists (ACOG) has a decades-long commitment to the health and safety of Native American women, including the development of culturally responsive clinical guidelines, advocacy for trauma-informed care, and collaboration with tribal and federal health organizations. HB 588 aligns directly with these principles by formally recognizing the crisis, promoting evidence-based data collection, and sending a clear message to Indigenous women and girls in Maryland: your lives are seen, valued, and protected.

This bill is not merely symbolic; it is an essential step toward health equity, justice, and systemic accountability. Maryland has an opportunity to lead in addressing the disproportionate violence faced by AIAN women and girls, and I strongly urge a favorable report.

### **I. Introduction**

Honorable Chair and Distinguished Members of the House Committee on Government, Labor, and Elections:

My name is Doctor Carol Ritter, and I am a board-certified Obstetrician and Gynecologist practicing in Maryland. I submit this testimony in strong support of House Bill 588, which would establish May 5 as *Missing and Murdered American Indian and Alaskan Native (MMIW) Women and Girls Awareness Day* and require the Department of State Police to report on gaps in data collection affecting this population.

The American College of Obstetricians and Gynecologists (ACOG) has long championed the health, safety, and reproductive rights of Native American women. For decades, ACOG has advanced initiatives that promote equitable access to healthcare for American Indian and Alaskan Native (AIAN) populations, including:

1. Development of culturally responsive clinical guidelines for reproductive and maternal health in Indigenous communities
2. Advocacy for policy solutions to reduce maternal mortality and improve trauma-informed care among AIAN women
3. Education and outreach programs targeting disparities in sexual and reproductive health, mental health, and chronic disease management in Indigenous populations
4. Collaboration with tribal health organizations and federal agencies to improve healthcare access and equity for AIAN women

HB 588 aligns directly with this mission: it recognizes the invisible crises affecting Indigenous women and girls and takes concrete steps to address them.

As a physician whose work centers on women's health and wellbeing, I can attest that systemic neglect, invisibility in data, and institutional indifference toward AIAN women translate directly into preventable harm and death. The crisis of missing and murdered Indigenous women and girls is a public health and human rights emergency that intersects deeply with my clinical practice.

## **II. The Clinical and Public Health Imperative**

The disproportionate violence experienced by AIAN women is well-documented, yet chronically undercounted. National data consistently shows that AIAN women face homicide rates up to ten times the national average in certain regions. They are also disproportionately affected by sexual violence, intimate partner violence, and trafficking. In my practice as an OB/GYN, I witness the downstream consequences of this violence:

1. Trauma-related complications during pregnancy and delivery, including preterm labor and placental abruption resulting from physical abuse
2. Higher rates of sexually transmitted infections, including HIV, among women who have experienced sexual violence
3. Barriers to prenatal care and reproductive health services among Indigenous women who have been historically marginalized or mistrustful of healthcare systems
4. Mental health sequelae — PTSD, depression, and anxiety — that compromise maternal and infant health outcomes
5. Disruption of generational family structures when women go missing or are killed, with profound impacts on children and communities

These patterns are not hypothetical; they are the realities faced by the women I serve. HB 588's reporting requirement directly addresses the gaps in data that impede our ability as healthcare providers to advocate for and care for this vulnerable population.

### **III. Why Data Collection Reform Is Essential**

HB 588 mandates that the Department of State Police assess whether state and local law enforcement agencies are adequately collecting data on violence against AIAN individuals. This is a modest but profound step.

In medicine, we rely on accurate data to guide treatment. In public policy, the same principle applies: you cannot solve a problem you cannot measure. Misclassification, delayed reporting, and incomplete entry of cases into national databases like the National Crime Information Center (NCIC) create a data vacuum that harms families, law enforcement, healthcare systems, and policymakers alike:

1. Families cannot access necessary resources or advocate effectively for missing loved ones
2. Law enforcement cannot identify patterns, serial offenders, or systemic vulnerabilities
3. Healthcare systems cannot target trauma-informed services appropriately
4. Policymakers lack evidence to implement interventions that could save lives

Maryland has an opportunity to lead by addressing these gaps — a fiscally neutral action with meaningful, long-term impact.

### **IV. The Significance of Awareness and Commemoration**

Designating May 5 as MMIW Awareness Day is far more than symbolic. Naming the crisis, giving it visibility, and creating a day of formal recognition is critical to breaking the silence and shame that surround it. In women's health, awareness campaigns for issues like maternal mortality, cervical cancer, and domestic violence have measurably improved care-seeking, screening, and public funding.

For AIAN communities, this state-sanctioned recognition communicates a powerful message: Maryland sees you. Maryland counts your daughters, mothers, sisters, and grandmothers. Maryland will not look away. ACOG's ongoing advocacy reinforces this principle. When institutions formally acknowledge the specific risks faced by Indigenous women, it builds trust, encourages engagement with healthcare and law enforcement systems, and can save lives. HB 588 represents an extension of that mission at the state level.

### **V. Addressing the Intersection of Health Equity and Justice**

The crisis of missing and murdered Indigenous women exists within broader structural inequities: poverty, lack of access to quality healthcare, environmental hazards, barriers

to legal recourse, and cultural erasure. AIAN women experience some of the worst maternal health outcomes in the nation, including higher rates of pregnancy complications and inadequate prenatal care. HB 588 is not just symbolic; it is an essential step in a broader health equity and justice framework. By holding the state accountable for assessing and addressing violence against AIAN women, Maryland can contribute meaningfully to the wellbeing of its most vulnerable citizens.

## **VI. Conclusion**

House Bill 588 is a low-cost, high-impact measure. It requires no new state funding, directs an existing agency to conduct a focused assessment, and establishes a day of recognition that communities across the nation already observe with grief, resilience, and hope. Most importantly, it sends a clear message to Indigenous women and girls: your lives are visible, valued, and worth protecting.

As an OB/GYN committed to the health and safety of all women, and in alignment with ACOG's decades-long advocacy for Native American women, I strongly urge this committee to give HB 588 a favorable report. Our Indigenous sisters deserve no less.

### **Respectfully submitted,**

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