

MEMORANDUM

TO: Fort Wayne Senate
FROM: Assem Nasr, Executive Committee Chair
Steve Carr, Voting Faculty
DATE: 27 October 2022
SUBJ: Support for WL Senate Document 22-08 Addressing the Negative Impact of
Indiana Senate Bill I

**Support for WL Senate Document 22-08 Addressing the Negative Impact of
Indiana Senate Bill I**

WHEREAS the West Lafayette Senate has introduced SD 22-08 Addressing the Negative Impact of Indiana Senate Bill I for discussion and an anticipated vote on 21 November 2022; and,

WHEREAS the Fort Wayne Senate already has voted to approve Fort Wayne SD 22-1 Endorsement of Revision to Rachel Barney's Anti-Authoritarian Code of Conduct and SD 22-4 Access to Reproductive Health Care for All Benefited Purdue Employees,

BE IT RESOLVED that the Fort Wayne Senate supports and endorses the attached West Lafayette SD 22-08 Addressing the Negative Impact of Indiana Senate Bill I and its supporting materials; and,

BE IT FURTHER RESOLVED that the Fort Wayne Senate recommends its passage at the 21 November meeting of the West Lafayette Senate.

To: The University Senate

From: Antonio Bobet, Civil Engineering
Min Chen, Mathematics
Daniel Frank, Philosophy
Katie Jarriel, Honors College
Cara Kinnally, Languages and Cultures
Richard Mattes, Public Health
Shannon McMullen, Interdisciplinary Studies
Alice Pawley, Engineering Education*
Alex Seto, President, Purdue Graduate Student Government
Susan South, Psychological Sciences
Anish Vanaik, Honors College
Steve Yaninek, Entomology

*Indicates Corresponding Senator

Subject: The negative impact of Indiana Senate Bill 1 on Purdue students, staff, and faculty.

Reference: Indiana Senate Bill 1:
<http://iga.in.gov/legislative/2022ss1/bills/senate/1>

Disposition: University Senate for Discussion and Adoption

Rationale: In special session in June/July 2022, the Indiana Legislature passed SB-1 [1], eliminating almost all abortion care provided in the State of Indiana, endangering the health, safety, and lives of Hoosier citizens who can gestate and give birth, their families, and communities. Indiana currently has the 10th highest maternal mortality rate in the nation [2], and research indicates that states with more abortion restrictions have increases in the total maternal mortality rate [3]. The World Health Organization has stated that being able to obtain a safe abortion is a crucial part of health care. [4]

Since the passage of SB1 and signing by the governor into law, it has become increasingly clear the threat the bill's passage brings to the state's economy and to the health and wellbeing of the citizens of Indiana, including the students, staff, and faculty at Purdue University-West Lafayette campus.

Experts predict a number of deleterious effects of this bill, some of which have already begun to occur.

Reducing access to abortion disproportionately affects university students more than the general population.

University students as a population experience significant barriers to healthcare, including inexperience navigating the healthcare system, dependence on distant healthcare networks (e.g. in their hometown), avoiding seeking healthcare due to cost concerns, and the unregulated and variable care offered by campuses [5-6]. University students are also at high risk of sexual violence and sexual assault [7], so have a higher need for access to emergency contraception and abortion care for those students who would choose it.

Over half of all abortion patients in the US are in their twenties, and one-fifth of all abortion patients are active students seeking post-high school degrees.

Students often seek abortions to ensure they can complete their schooling successfully. Students who have a child while at university are less likely to graduate than those who do not, and students report that having a child would disrupt their educational goals [8]. Patients denied an abortion are less likely to have aspirational life plans for the coming year [8]. Patients who receive an abortion are six times more likely to have positive one-year plans are more likely to achieve them, compared to those denied an abortion [8]. These references are not limited to students as patients, but indicate particularly grievous impacts on students.

Restricted access to abortion requiring students to travel out of state increases out-of-pocket expenses, causes delay in receiving care, causes students to miss class, and limits students' options in finding an appointment that works with their schedule.

Access to abortion care for vulnerable populations will decrease, and associated healthcare costs will increase.

The groups most affected by restricted access to abortions, including women, people with low income, people of color, and transgender, nonbinary, and gender-expansive (TGE) people are groups who are already minoritized at Purdue [9-10].

The negative impacts of abortion restrictions fall disproportionately on people with low income and communities of color [11]. These occur within a broad context of healthcare disparities experienced by these groups on a systemic level [12].

Abortion restrictions also exacerbate structural barriers to abortion care faced by transgender, nonbinary, and gender-expansive (TGE) people. These existing barriers include policy

restrictions, healthcare refusals, discrimination, and misgendering [9].

Abortion denial compounds existing social and health inequities by creating economic hardship, e.g., increased household poverty, long-term loss of income, and increased debt. This insecurity lasts for years. [13]. Not being able to afford a child is one of the most common reasons for seeking an abortion [14].

The cost of healthcare for students who need to travel out of state for abortion care will increase [14]. When patients have to travel out of state to receive abortion care, a number of negative, compounding consequences occur: delays in care, negative mental health impacts as a result of the barriers to care, and considering self-induction. [15] In Indiana, patients who traveled out of state had abortions about three weeks later than those in-state [15], which further reduces access to abortions due to gestational age limits for care.

Candace Shaffer, Senior Director for Human Resources, confirmed to the University Senate on 9/12/22 that Purdue is not anticipating not changing any aspects of the existing healthcare plan in light of SB1 [16].

That abortion care is eliminated in Indiana has consequences for other aspects of health care.

Reports are already being published across the country how people who have health conditions whose treatment requires essential medication that can also be used to induce abortions are having difficulty accessing that medication. [17]

Treatment for miscarriage is clinically identical to abortion care. Restricting access to abortion creates a false distinction between abortion care and miscarriage care and can lead to healthcare providers being hesitant to provide time-sensitive care in circumstances where the line between miscarriage treatment and abortion is blurry. It also limits access to the medication mifepristone, which can be used in both abortion and miscarriage care. [18]

Students and faculty in healthcare-related areas at Purdue (such as in the School of Nursing and College of Pharmacy) need their academic freedoms affirmed and protected around topics relating to abortion.

Abortion training is, both, required for accreditation, and seen as one of the “best predictors of a physician’s providing the full range of miscarriage-management options.” [19-20]

Faculty at the University of Idaho are having their academic freedom of what to teach in the classrooms restricted by an abortion ban in Idaho. Instructors who express their own beliefs, informed by their expertise, about abortion in the classroom risk prosecution. In addition, the university is prevented from providing condoms for birth control purposes, and only for prevention of STDs. [21]

SB1 will cause Purdue to have more difficulty recruiting, retaining, and helping succeed more diverse groups of students, staff, and faculty.

Given the people who can get pregnant, and those groups who seek out abortions more frequently, that Indiana has eliminated abortion care statewide will have consequences for the recruitment of diverse students, staff, and faculty to Purdue, particularly from out of state. Without affordable options for contraception and abortion, students who might get pregnant will think twice about coming to Purdue. [22] Parents will think twice about sending their children to Purdue. Like employees at other businesses in Indiana [23-24], staff and faculty recruited from out of state, whether they themselves are capable of getting pregnant, or have partners who can, or have children who can, will think twice about coming to Purdue.

SB1 will limit Purdue’s in-state industry partners, reducing opportunities for students, staff, faculty, and advancement of such collaborations.

Eli Lilly and Co., one the largest employers in Indiana and a strategic research partner of Purdue, announced that it is looking to expand outside Indiana as a result of SB1 [23]. Indiana businesses have expressed that SB1 will impede their ability to attract and retain top talent [24].

Proposal: From the University Senate bylaws [25]: “...subject to the authority of the Board of Trustees and in consultation with the President, [the University Senate] has the power and responsibility to propose or to adopt policies, regulations, and procedures intended to achieve the educational objectives of Purdue University and the general welfare of those involved in these educational processes.”

The University Senate is the representative body of the Faculty at Purdue-West Lafayette, and speaks with the voice of this Faculty. Here, this document is offered in the spirit of commenting about the general welfare of those at Purdue involved in these educational processes.

The University Senate expresses its gravest concern about how SB1 will affect the recruitment, retention, and success of a diverse array of students, staff, and faculty. It makes the following requests:

1. The Senate requests the administration to find sustainable ways to improve access to affordable or free contraception for students, staff, and faculty, and increase benefits to cover anticipated increased costs for receiving reproductive healthcare out of state.
2. The Senate requests the Educational Policy Committee to revise Academic Regulation [26] on class attendance and parental leave (A.7) or on medical excused absences (A.8) to include travel needed for abortion care or time at home needed for a medication abortion. The Senate cautions that policy revisions should focus on the time needed for recovery, or on including the type of facilities that can provide said care, rather than the specific reasons for the need for care.
3. The Senate requests Human Resources and the Vice Provost for Student Life ensure that the Center for Healthy Living and PUSH provide a standard of care that ensures patients know up-to-date information about abortion services and providers, and they are part of the mix of services medical providers can prescribe.
4. The Senate requests for the administration to ensure a commitment for providing access to Plan B through PUSH, the Center for Healthy Living, and the forthcoming micro-hospital serviced by Ascension-St Vincent Hospital, a faith-based health-care provider, in the Discovery Park District. [27]
5. The Senate requests the administration make a public statement as part of its aggressive protection of academic freedom, asserting the right of healthcare faculty and students to teach and study the material judged worthy given their professional standing and by the standards of their field.
6. The Senate strongly requests the administration to assess the health risks for students, staff, and faculty at the Purdue-Northwest and Purdue-Fort Wayne campuses in terms of access to contraception and healthcare providers who will provide a

standard of care that ensures patients know up-to-date information about abortion services and providers, and they are part of the mix of services medical providers can prescribe.

The Senate acknowledges and appreciates the Purdue-Fort Wayne Senate's SD 22-1 [28] and urges faculty at Purdue-West Lafayette to become familiar with and adopt the principles referred therein.

While there is currently an injunction against SB1 [29] that has temporarily suspended its implementation, we do not trust that this ban will be overturned and not come back. We stand together, irrespective of how we personally feel about abortion, to push back on the increased healthcare costs that our community members face and that we all bear because of SB1, and to protect the academic freedom of our students, staff, and faculty.

Works cited

1. Indiana Senate Bill 1: <http://iga.in.gov/legislative/2022ss1/bills/senate/1>
2. Centers for Disease Control and Prevention, National Center for Health Statistics (NCHS), National Vital Statistics System, "Maternal deaths and mortality rates: Each state, the District of Columbia, United States, 2018-2020
3. Dovile Vilda, Maeve E. Wallace, Clare Daniel, Melissa Goldin Evans, Charles Stoecker, Katherine P. Theall, "State Abortion Policies and Maternal Death in the United States, 2015–2018", *American Journal of Public Health* 111, no. 9 (September 1, 2021): pp. 1696-1704. <https://doi.org/10.2105/AJPH.2021.306396>
4. Caron R Kim, Antonella Lavelanet, Bela Ganatra. Enabling access to quality abortion care: WHO's Abortion Care guideline. *The Lancet Global Health*, Volume 10, Issue 4, 2022, Pages e467-e468, [https://doi.org/10.1016/S2214-109X\(21\)00552-0](https://doi.org/10.1016/S2214-109X(21)00552-0).
5. "At college health centers, students battle misdiagnoses and inaccessible care" by Jenn Abelson, Nicole Dungca, Meryl Kornfield and Andrew Ba Tran. <https://www.washingtonpost.com/investigations/2020/07/13/college-health-centers-problems/>
6. Rape, Abuse & Incest National Network, "Campus Sexual Violence: Statistics". <https://www.rainn.org/statistics/campus-sexual-violence#:~:text=Among%20graduate%20and%20professional%20students,force%2C%20violence%2C%20or%20incapacitation.&text=Among%20undergraduat e%20students%2C%2026.4%25%20of,force%2C%20violence%2C%20or%20inca pacitation>.
7. Upadhyay, U.D., Alice F. Cartwright and Nicole E. Johns, "Access to Medication Abortion Among California's Public University Students", *Journal of Adolescent Health*, Volume 63, Issue 2, 2018, Pages 249-252.
8. Advancing New Standards in Reproductive Health, "Introduction to the Turnaway Study", <https://www.ansirh.org/sites/default/files/2022-07/turnawaystudyannotatedbibliography063022.pdf>

9. Moseson H, Fix L, Gerdtts C, et al. Abortion attempts without clinical supervision among transgender, nonbinary and gender-expansive people in the United States *BMJ Sexual & Reproductive Health* 2022;48:e22-e30.
10. Hodson K, Meads C, Bewley S. Lesbian and bisexual women's likelihood of becoming pregnant: a systematic review and meta-analysis. *BJOG*. 2017 Feb;124(3):393-402. doi: 10.1111/1471-0528.14449. Epub 2016 Dec 15. PMID: 27981741; PMCID: PMC5299536.
11. Christine Dehlendorf, Lisa H. Harris, and Tracy A. Weitz, (2013) “[Disparities in Abortion Rates: A Public Health Approach](https://doi.org/10.2105/AJPH.2013.301339)” *American Journal of Public Health* 103, 1772_1779, <https://doi.org/10.2105/AJPH.2013.301339>
12. Advancing New Standards in Reproductive Health (ANSIRH) (March 2020), “Factsheet: The harms of denying a woman a wanted abortion: findings from the Turnaway Study” University of California, San Francisco Medical Center, Bixby Center for Global Reproductive Health. https://www.ansirh.org/sites/default/files/publications/files/the_harms_of_denying_a_woman_a_wanted_abortion_4-16-2020.pdf
13. Advancing New Standards in Reproductive Health (ANSIRH) (March 2020) “Introduction to the Turnaway Study,” University of California, San Francisco Medical Center, Bixby Center for Global Reproductive Health. <https://www.ansirh.org/sites/default/files/2022-07/turnawaystudyannotatedbibliography063022.pdf>
14. Jerman, Frohwirth, Kavanaugh, Blades (2017) “Barriers to abortion care and their consequences for patients traveling for services: qualitative findings from two states.” *Perspectives on Sexual and Reproductive Health*, 49 (2), 95-102. DOI: <https://doi.org/10.1363/psrh.12024>
15. Hoosier Abortion Access Study, Key Insights, <https://bit.ly/Hoosiers-key-insights>
16. University Senate – Meeting minutes (draft) for September 12, 2022
17. “Republican abortion bans restrict women’s access to other essential medicine,” by Maya Yang, *Guardian*, Sept 26, 2022, <https://www.theguardian.com/world/2022/sep/26/us-abortion-bans-restrict-access-essential-medications>
18. Lynn M. Paltrow, Lisa H. Harris & Mary Faith Marshall (2022) Beyond Abortion: The Consequences of Overturning Roe, *The American Journal of Bioethics*, 22:8, 3-15, DOI: 10.1080/15265161.2022.2075965
19. Traub, A.M., K. Mermin-Bunnell, P.Pareek, S. Williams, N.B. Connell, J.F. Kawwass, et al. (2022) “The implications of overturning *Roe v. Wade* on medical education and future physicians”, *The Lancet Regional Health - Americas*, vol. 14: 100334. DOI: <https://doi.org/10.1016/j.lana.2022.100334>
20. Harris, L. H. (2022) “Navigating Loss of Abortion Services - A Large Academic Medical Center Prepares for the Overturn of *Roe v. Wade*” *N Engl J Med* 386:2061-2064. DOI: 10.1056/NEJMp2206246
21. Gluckman, Nell. (Sept 26, 2022) “It’s making us accomplices’: A university tells faculty to ‘remain neutral’ on abortion discussions in class.” *Chronicle of Higher Education*. <https://www.chronicle.com/article/its-making-us-accomplices-a-university-tells-faculty-to-remain-neutral-on-abortion-in-class>

22. Bryant, Jessica. (August 9, 2022) “64% of Current Students desire to work in a state with Legal Abortion Access”
<https://www.bestcolleges.com/research/students-desire-to-work-where-abortion-is-legal/>
23. Russell, John. (August 6, 2022) In wake of new abortion ban, Lilly says it will look outside Indiana for expansion projects. *Indianapolis Business Journal*.
<https://www.ibj.com/articles/in-wake-of-new-abortion-ban-lilly-will-look-outside-indiana-for-expansion-projects>
24. Kelley, Lora. (August 6, 2022) Major Indiana Employers Criticize State’s New Abortion Law. *The New York Times*.
<https://www.nytimes.com/2022/08/06/business/indiana-companies-abortion.html>
25. University Senate Bylaws <https://www.purdue.edu/senate/about/bylaws.php>
26. Academic Regulations on attendance,
<https://catalog.purdue.edu/content.php?catoid=15&navoid=18634#a-attendance>
27. “Ascension St. Vincent neighborhood hospital coming to Purdue University campus” *Purdue Today*, May 6, 2022.
<https://www.purdue.edu/newsroom/releases/2022/Q2/ascension-st.-vincent-neighborhood-hospital-coming-to-purdue-university-campus.html>
28. Purdue Fort-Wayne Senate Document SD 22-1
<https://drive.google.com/file/d/1XEJkTjFwBeKmyAv7IRshK3knX8idUonB/view?usp=sharing>
29. Rudavsky, Shari, and Kaitlin Lange (September 22, 2022) “Judge blocks Indiana’s new abortion law – for now.”
<https://www.indystar.com/story/news/health/2022/09/22/indiana-abortion-law-blocked-special-judge-in-aclu-planned-parenthood-lawsuit/69511130007/>

SD 22-08

***NEGATIVE IMPACT OF INDIANA SB-1 ON
PURDUE STUDENTS, STAFF, AND FACULTY***

FOR DISCUSSION – 10/17/22

Antonio Bobet, Civil Engineering
Min Chen, Mathematics
Daniel Frank, Philosophy
Katie Jarriel, Honors College
Cara Kinnally, Languages and Cultures
Richard Mattes, Public Health
Shannon McMullen, Interdisciplinary Studies

Alice Pawley, Engineering Education*
Alex Seto, President, Purdue Graduate Student
Government
Susan South, Psychological Sciences
Anish Vanaik, Honors College
Steve Yaninek, Entomology



Indiana Senate Bill 1

SB1 makes almost all forms of abortion in Indiana illegal

- Passed Indiana Senate July 30, 2022
- Passed Indiana House, August 5, 2022
- Signed by Governor Holcomb August 5, 2022
- Came into effect Sept 15, 2022
- Preliminary judicial injunction blocking enforcement imposed Sept 22, 2022
- Second preliminary injunction argued Oct 14, 2022

SB1 will have a detrimental effect on the Purdue community

We cite peer-reviewed research to support the argument that:

1. Reducing access to abortion disproportionately affects university students more than the general population.
2. Access to abortion care for vulnerable populations will decrease, and associated healthcare costs will increase.
3. That abortion care is eliminated in Indiana has consequences for other aspects of healthcare.
4. Students and faculty in healthcare-related areas at Purdue (such as in the School of Nursing and College of Pharmacy) need their academic freedoms affirmed and protected around topics relating to abortion.
5. SB1 will cause Purdue to have more difficulty recruiting, retaining, and helping succeed more diverse groups of students, staff, and faculty.
6. SB1 will limit Purdue's in-state industry partners, reducing opportunities for students, staff, faculty, and advancement of such collaborations.

What can the University Senate do?

From the University Senate bylaws:

“..subject to the authority of the Board of Trustees and in consultation with the President, [the University Senate] has the power and responsibility to propose or to adopt policies, regulations, and procedures intended to achieve the educational objectives of Purdue University and the general welfare of those involved in these educational processes.”

1. Make statements that express the will of the faculty;
2. Change the text of policies that we are in charge of (like the Academic Regulations).

What can the University Senate do?

From the University Senate bylaws:

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1. **Make statements that express the will of the faculty;**
2. Change the text of policies that we are in charge of (like the Academic Regulations).

Proposal

6 actions

1. Administration should increase access to free or affordable contraception on campus, and increase benefits to cover the increased cost of receiving healthcare out of state.
2. EPC should revise Academic Regulation on class attendance to be inclusive of students needing to receive reproductive care out of state, but without needing to divulge the need for such care (as records are not protected sufficiently).
3. HR and Student Life should ensure that CFHL and PUSH providers can comprehensively educate patients on reproductive care, and refer patients for abortion care out of state.

Proposal

6 actions

4. Administration should ensure Plan B (which is emergency contraception not related to abortion) is accessible at CFHL, PUSH, and Ascension-St Vincent micro-hospital when built.
5. Administration should publicly reassert its aggressive protection of academic freedom around topics related to reproductive healthcare.
6. Administration should review similar health risks for students, staff, and faculty at Purdue-Northwest and Purdue-Fort Wayne.

If this were to pass, what would happen?

This would only represent the voice of the faculty.

Relevant Senate committees would then have specific standing from the Faculty to take up specific points with the administration to bring them about.

1. Affordable contraception and improved benefits
3. Comprehensive reproductive care and prescriptions at PUSH and CFHL
4. Access to Plan B at all healthcare facilities on/near campus, including religious ones
 - Faculty Compensation and Benefits (FAC), working with MAPSAC Compensation and Benefits subcommittee, and CSSAC Executive Subcommittee, to talk with HR
 - Student Affairs Committee, PSG, PGSG working with Student Life
2. Academic Regulations Absence Policy – Educational Policy Committee
5. Public declaration of academic freedom on matters relating to reproductive healthcare – Faculty Affairs Committee
6. Review of policies at PNW and PFW – Intercampus Faculty Council

Please send questions, revisions by Nov 3 to

apawley@purdue.edu

Vote anticipated Nov 21