Six reasons why CSIU opposes legislative efforts to restrict abortion access in Indiana*.

#1: Abortion is a safe, effective, and essential component of healthcare

Abortion has been a widely established, safe and legal medical procedure across the United States for half a century. The available scientific evidence demonstrates conclusively that abortion is a safe medical procedure, with extremely low complication rates and is effective in reducing risk to maternal and child health.

#2: The proposed ban will worsen health outcomes for women in Indiana

The proposed abortion ban puts women's lives at risk by limiting their ability to obtain essential health care. When the option of abortion is unavailable or inaccessible, women who resort to unsafe, illegal abortion can die or suffer lifelong disability. Women who are forced to carry an unwanted pregnancy to term are subjected to a risk of death from childbirth that is approximately 14 times higher than any risk of death from an abortion. Evidence from states and countries that enacted abortion restrictions shows that restrictions led to major increases in maternal mortality rates.

#3: The proposed ban will produce negative consequences on the health and well-being of Hoosier families

Women who are denied abortion are both more likely to experience physical or psychological violence and more likely to live in poverty than those who receive abortions. Unwanted pregnancies are far more likely to result in low birth weight and preterm birth, which can have lifelong health consequences to the child, as well as increasing the risk that a child will experience neglect and psychological or physical aggression. Indiana is already among the highest rates of foster home placements in the region. Additional restrictions on abortion will likely result in increased strain on an already overtaxed foster care system.

#4: The proposed ban will have an inequitable impact on the poor, ethnic and racial minorities, and rural Hoosiers

The proposed abortion ban is likely to disproportionality impact ethnic and racial minorities, those living in rural areas, and those with limited economic resources. The rate of pregnancy-related deaths in the U.S. has nearly tripled compared to 30 years ago, with Black women nearly three times as likely to die from pregnancy and childbirth than whites. Abortion bans will disproportionately harm minorities and other marginalized groups. Conversely, legalization of abortion has helped women's education, labor force participation, and earnings, with the strongest impact for Black women. The proposed ban on abortion in Indiana thus carries significant potential to exacerbate inequities in women's health and health care, negatively affecting the most vulnerable Hoosiers.

#5: The ban undermines the physician-patient relationship.

Indiana's proposed abortion ban violates long-established principles of medical ethics and intrudes upon the foundational principles of the physician-patient relationship. Indiana's proposed ban would require medical professionals to violate the age-old Hippocratic principles. Legislation that substitutes lawmakers' views for a physician's expert medical judgment interferes with the patient-physician relationship and poses grave dangers to patient well-being. Legal intrusions into this relationship are likely to cause long-term damage to patient care in Indiana.

#6: The proposed legislation will have severe consequences for our ability to attract topquality scientists to work and study in our state

Abortion restrictions such as those proposed for Indiana are having a **chilling effect on** recruitment and retention of **female and minority scientists**—as well as their spouses, partners, and families. Many of the fields most critical to Indiana's economic development—engineering, agriculture, physical sciences—are those facing major inequities in female representation, and those facing the greatest challenges in attracting talent to Indiana. Many scientists predict a "brain drain" from states that ban abortion.

^{*}See full Concerned Scientists @ IU statement for full documentation and references.