

119TH CONGRESS
2^D SESSION

S. CON. RES. _____

Expressing support for the recognition of March 10, 2026, as “Abortion Provider Appreciation Day”.

IN THE SENATE OF THE UNITED STATES

Ms. HIRONO submitted the following concurrent resolution; which was referred to the Committee on _____

CONCURRENT RESOLUTION

Expressing support for the recognition of March 10, 2026, as “Abortion Provider Appreciation Day”.

Whereas March 10 has been established as a day to show appreciation for the essential, high-quality care that abortion providers and all staff provide to their communities and those traveling to their communities, and to celebrate their courage, compassion, and dedication to their work;

Whereas March 10 was selected for “Abortion Provider Appreciation Day” in honor of Dr. David Gunn, who was killed on March 10, 1993, outside his abortion clinic in Pensacola, Florida, by a White supremacist and anti-abortion extremist in the first known murder of an abortion provider;

Whereas abortions are provided in-person and through telehealth independent clinics, Planned Parenthood health

care centers, hospitals, and private offices of doctors, and all of the staff working at those facilities are essential to ensuring patients receive needed care;

Whereas, on June 24, 2022, the Supreme Court of the United States erroneously overturned *Roe v. Wade*, 410 U.S. 113 (1973), in *Dobbs v. Jackson Women’s Health Organization*, 597 U.S. 215 (2022) (referred to in this preamble as “the Dobbs decision”), reversing decades of legal precedent affirming the right to an abortion and unleashing devastation on an already precarious abortion access landscape;

Whereas States across the United States have moved to restrict access to abortion care, and 20 States have banned some or all access to an abortion as of March 2026;

Whereas, because of State abortion bans and restrictions and Federal attacks on sexual reproductive health, scores of clinics and health care centers in already underserved areas and maternal health deserts have closed;

Whereas health care center closures force abortion providers and staff out of the health care workforce;

Whereas, in 2025, 51 Planned Parenthood health centers closed, leaving patients with fewer options and higher travel costs;

Whereas these closures force more patients to remain pregnant against their will or travel out-of-state for abortion care, find childcare or lodging, and raise money to cover the ever-increasing costs of an abortion and wraparound support, as well as increase wait times and strain already thin resources;

Whereas providers and health care center staff work to ensure access to abortion is accessible despite being strained beyond capacity;

Whereas abortion providers and all staff play a critical role in a world where it has become increasingly difficult for individuals to receive essential and time-sensitive care once those individuals have made decisions that are right for their bodies, lives, and futures;

Whereas abortion providers and all staff help to ensure that all individuals who can become pregnant can make their own decisions about their bodies and their pregnancies, and support their decisions by treating them with dignity, empathy, compassion, and respect, despite numerous challenges due to abortion bans and restrictions;

Whereas abortion providers and all staff play an essential role within the reproductive justice framework, which was created by 12 Black women in 1994, who formulated a human rights framework that demands every person has the human right to bodily autonomy, which includes the right to choose if, when, and how to have children and the right to parent children in safe and sustainable communities;

Whereas restrictions on abortion care have far-reaching consequences that deepen existing inequities and worsen health outcomes for pregnant people, people giving birth, and their families;

Whereas people who are denied abortion care are more likely to experience high blood pressure and other serious medical conditions during the end of pregnancy, remain in relationships where interpersonal violence is present, and experience poverty;

Whereas research shows that States that have more abortion restrictions are also States that have poorer maternal health outcomes;

Whereas nearly 27,000,000 women of reproductive age, plus more trans and nonbinary people, do not have access to abortion where they live;

Whereas more than half of all Black women of reproductive age do not have access to abortion where they live;

Whereas restricting and banning access to abortion care—

(1) limits the ability of current and future providers to obtain necessary education and training in abortion care;

(2) exposes the remaining abortion providers and all staff to increased levels of harassment, violence, and politically motivated restrictions; and

(3) creates and increases the out-of-pocket costs and logistical burdens that patients face to get care to a level that is sometimes insurmountable, forcing patients to remain pregnant;

Whereas the 2024 Violence and Disruption Report of the National Abortion Federation found that since 1977, there have been 11 murders, 26 attempted murders, 42 bombings, 203 arsons, 570 assaults, 505 clinic invasions, and thousands of other criminal incidents targeting abortion patient providers and abortion volunteers;

Whereas the 2024 Violence and Disruption Report also found that in 2023 and 2024, there were sustained and consistent harassment and violence, even as many clinics have closed and abortion keeps getting harder to access in some regions of this country;

Where, in 2023 and 2024, providers reported 3 arsons, 28 cases of assault or battery, 777 cases of obstruction, 621 cases of trespassing, and 296 death threats;

Whereas these numbers are likely an undercount due to provider fatigue, staff turnover, and some clinics not having the staff or capacity to monitor or report protestors or other anti-abortion activity, especially as they manage surges in patients;

Whereas these incidents continued to occur under an administration that vigorously enforced the Freedom of Access to Clinic Entrances Act (Public Law 103–259; 108 Stat. 694), in stark contrast to the current administration that has pardoned antiabortion criminals and explicitly stated it will not enforce the Freedom of Access to Clinic Entrances Act except in the most extreme cases;

Whereas Black, indigenous, and other providers and patients of color face heightened levels of threats, harassment, and violence as compared to their White counterparts;

Whereas the current administration has emboldened individuals and groups to continue to harass and threaten the ability of abortion providers and all staff to serve their patients;

Whereas the Dobbs decision emboldened antiabortion individuals and groups to continue to harass providers and the patients they care for;

Whereas abortion bans and restrictions threaten the ability of abortion providers and all staff to serve their patients; and

Whereas, in the face of multifaceted attacks on their work, abortion providers remain an essential and valued part of their communities, providing high-quality, compassionate,

and necessary health care, and courageously delivering that care despite pressures, restrictions, political interference, and violent threats to their personal safety: Now, therefore, be it

1 *Resolved by the Senate (the House of Representatives*
2 *concurring), That Congress—*

3 (1) recognizes “Abortion Provider Appreciation
4 Day” on March 10, 2026, to celebrate the courage,
5 compassion, and high-quality care that abortion pro-
6 viders and staff offer to patients and their families
7 across the United States;

8 (2) lauds communities across the United States
9 who are proud to be home to abortion providers and
10 staff;

11 (3) affirms the commitment of Congress to en-
12 suring the safety of abortion providers, the ability of
13 abortion providers to continue providing the essen-
14 tial care their patients need, and the right of pa-
15 tients to access abortion care no matter where they
16 live, free from fear of violence, criminalization, or
17 stigma;

18 (4) condemns the decisions of the Supreme
19 Court of the United States, as well as the actions of
20 the current administration and antiabortion extrem-
21 ists, to limit and stigmatize abortion care, which has
22 had a devastating impact on abortion providers and

1 the communities they care for, threatening the work
2 and livelihoods of providers and staff, and worsening
3 the strain on providers who work in States where
4 abortion is still available; and

5 (5) declares a vision for a future free from all
6 abortion restrictions and bans, where everyone has
7 full access to the care they need without fear of pen-
8 alty or stigma, and affirms the commitment of Con-
9 gress to working toward that goal in partnership
10 with providers, patients, advocates, and their com-
11 munities.