

The State of Abortion in the US *if* Roe v Wade is Overturned

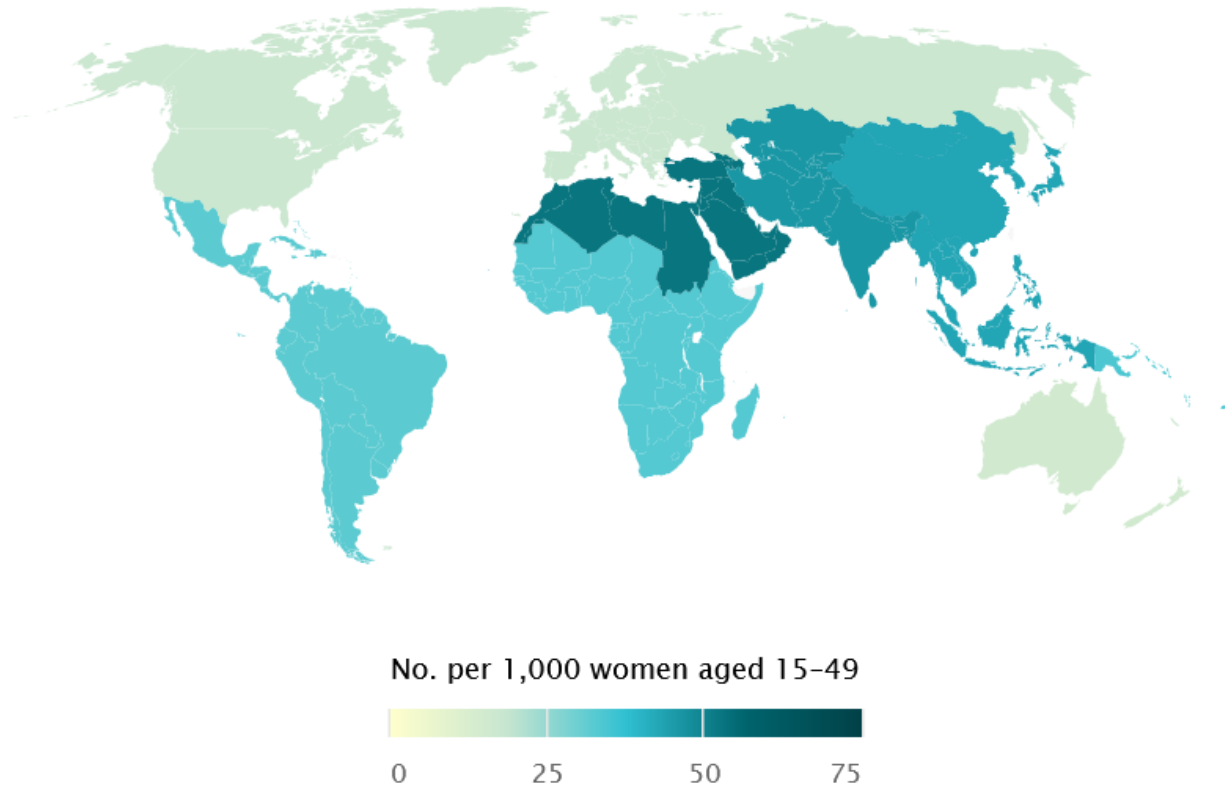
Katherine E. Simmonds, PhD, MPH, RN, WHNP-BC

Associate Professor, School of Nursing

Brianna Owen, RN

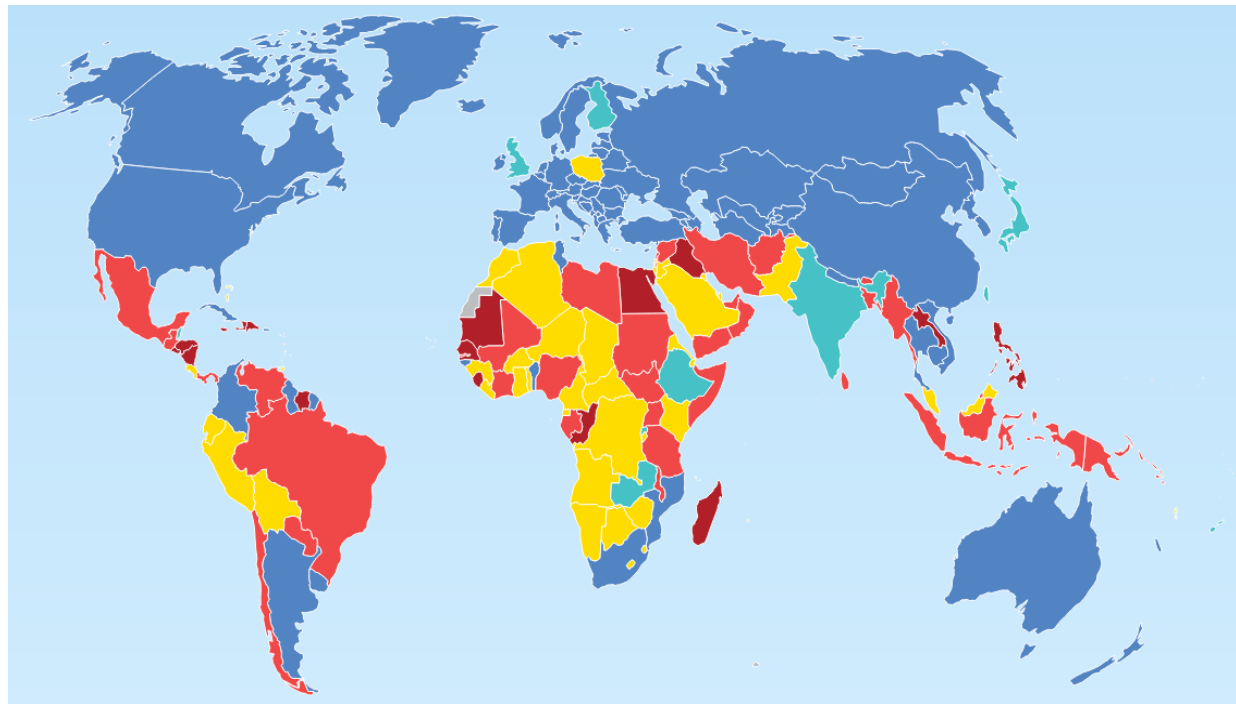
AGWHNP student, Master of Science in Nursing Program

Global Abortion Rates



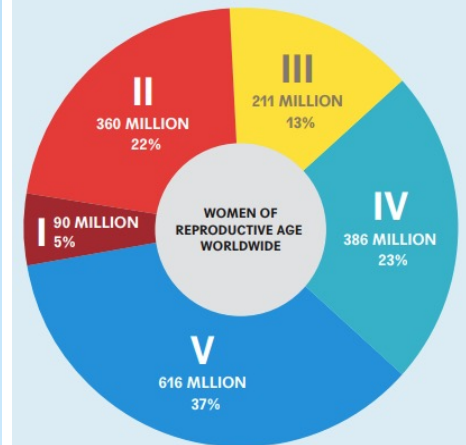
Note: All values are annual averages for 2015-2019.

Global Legal Landscape of Abortion



Prohibited Altogether I **To Save the Woman's Life** I **To Preserve Health** I **Broad Social or Economic Grounds** I **On Request (Gestational Limits Vary)** I **On Request** I

How many women of reproductive age live in countries under each category?



© Center for Reproductive Rights
 The Center for Reproductive Rights is a nonprofit legal advocacy organization dedicated to promoting and defending women's reproductive rights worldwide.
 199 Water St, Floor 22
 New York, NY 10038
reproductiverights.org

Current as of February 23, 2021

Map updated in real time at
worldabortionlaws.org

CENTER *for* REPRODUCTIVE RIGHTS

Abortion in the U.S.

- Half of pregnancies in the U.S. are unplanned
- 1 in 4 U.S. women will have an abortion by age 45



U.S. Abortion Patients

INCOME

75% poor or low income

RELIGION

62% religiously affiliated

FAMILY SIZE

59% already have a child

AGE

60% are in their 20s (only 12% are teens, of which 4% are minors)

RACE

39% White

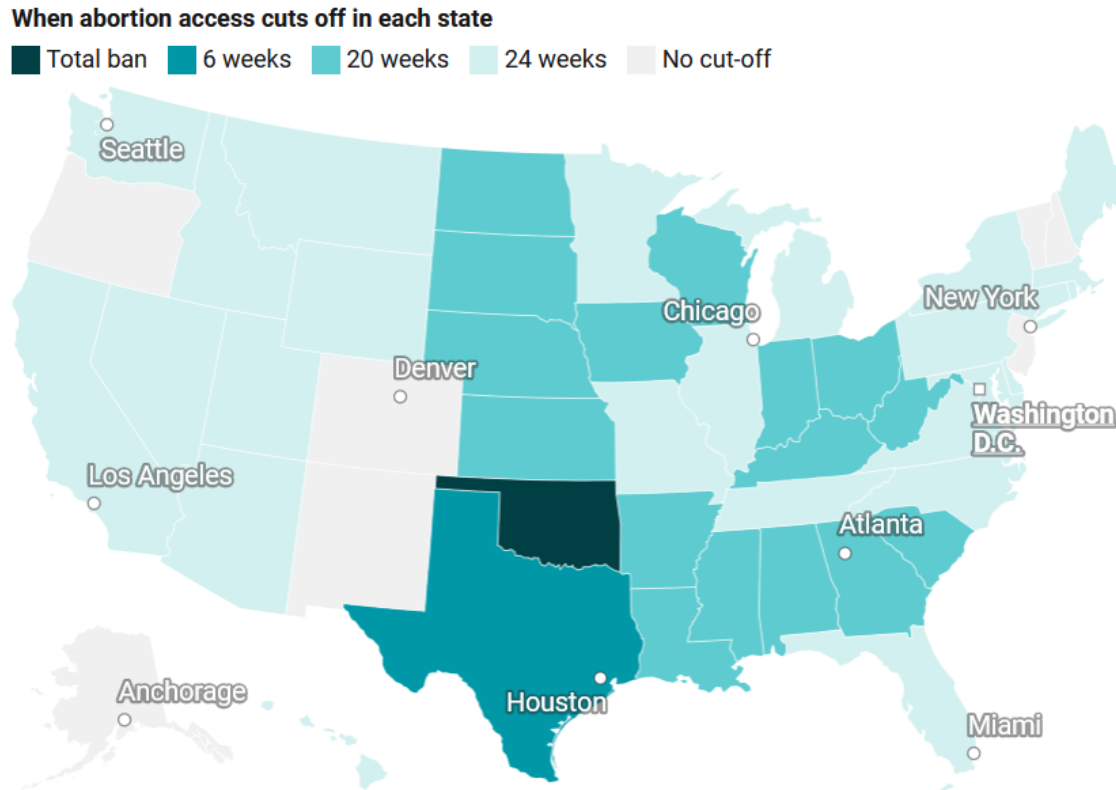
28% Black

25% Hispanic

6% Asian/Pacific
Islander

3% Other

U.S. Legal Landscape of Abortion



Consequences of Inaccessible/Unsafe Abortion

- Physical health risks of unsafe abortion
 - A leading cause of maternal deaths and morbidity
 - Long-term physical and mental health complications
- Distress and stigma
- Financial burdens
- Limits education and economic opportunity

“I got my abortion during the Covid-19 Pandemic. I was finishing my final semester remotely and knew that my best option was an abortion. The person who got me pregnant was manipulating me constantly and I knew that I could not have a baby with this person. At the time, I was living in Southern Maryland. I could not do a medication abortion because I was living at home with my chaotic family. The closest clinic was an hour and 15 minutes away but I could not drive myself due to the sedation medication. I spent weeks arguing back and forth with my ex about funding and transportation. I called the abortion fund for Maryland and was told that I could only use their funding for clinics that are not Planned Parenthood. The earliest appointment to have it done prior to Christmas was Planned Parenthood so I hung up on the fund and cried myself to sleep. I felt like I had no where to turn, no one to talk to, and I was stuck navigating this with an emotionally abusive ex. I was so desperate that I used my parents insurance which was a last resort option to fund my abortion. At the time, it was so stressful and I was not grateful because I just wanted it to be done. Almost a year later and I am so grateful that I had access to get my abortion which freed me from my ex, I finished my degree, and my abortion allowed me to move across the country to work in reproductive rights. I would make this choice again and again. I am so grateful for abortion.”

Advocates for Youth: Abortion Stories – Alyssa

www.mghihp.edu



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Advocates for Youth: Abortion Stories - Jeana



Consequences of unwanted pregnancy: The Turnaway Study

- Women denied abortion are:
 - More likely to experience serious pregnancy complications, as well poor physical health for years following pregnancy
 - More likely to stay with abusive partners
 - More likely to live below the Federal Poverty Level
 - More likely to be limited in their life plans and education
- Children born of unwanted pregnancies are
 - Less likely to experience economic security
 - More likely to have poor maternal bonding

For more information about the Turnaway study see:

<https://www.ansirh.org/research/ongoing/turnaway-study>

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Types of Abortion

- Medication
- Aspiration
- Labor Induction
- Surgery (hysterectomy/hysterotomy)

Medication abortion

- Typical Office-based protocol
- Day 1:
 - Counseling and informed consent
 - Medical and social history
 - Labs: +/- hCG, H&H, Rh factor
 - +/- tests for infection or dysplasia P
 - Confirmation of IUP/EGA, +/- clinical exam
 - Mifepristone (200mg) administered on site



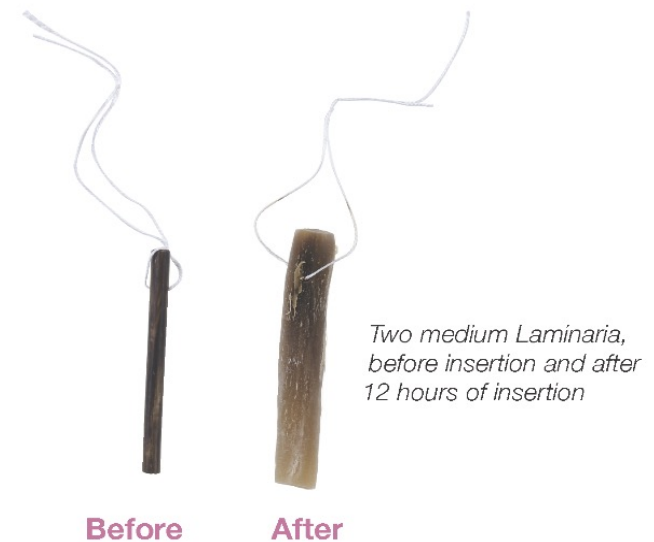
Medication Abortion (continued)

- Day 1-3:
 - Administration of misoprostol (800 mcg) at home, 6-72 hours after mifepristone
 - Bleeding/cramps begin 2-4 hours after admin of misoprostol
 - Most intense during passage of POC
 - ~80% pass pregnancy within 24 hours
 - Bleeding may continue for 2-4 weeks
 - Follow up 1–2 weeks later
 - confirm passage of pregnancy

Aspiration abortion and D & E

Vacuum aspiration+:

- Cervical dilation
 - Usually osmotic (v. mechanical) dilators
- Additional instrumentation (i.e. forceps)
- Takes longer; more involved procedure
 - 10-30 mins
- Requires more advanced provider training



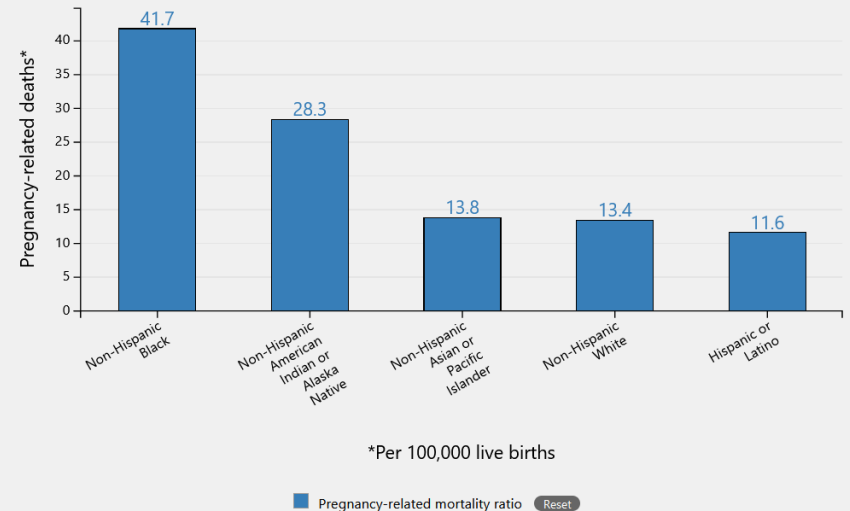
Abortion through labor induction

- Labor-Induction Techniques:
 - Prostaglandins +/- mifepristone >>
IV oxytocin, intra-amniotic instillation of saline
 - Usually pregnancies of >20 weeks gestation
 - Less common than in past
 - Less favorable psychological effects
 - More common when provider trained in procedural abortion is not available

Reproductive Justice: The right to...

1. Maintain personal bodily autonomy
 2. Have or not to have children
 3. Parent our children in safe and sustainable communities
- Highlights inequities that affect access to reproductive health services
 - Considers maternal mortality

Pregnancy-Related Mortality Ratio by Race/Ethnicity:
2014-2017





YOU DESERVE
TO PARENT YOUR CHILD
WITHOUT FEAR
THAT HE OR SHE WILL BE
HURT OR KILLED.

FREEDOM FROM
VIOLENCE IS
REPRODUCTIVE
JUSTICE.

REPEAL HIDE ART PROJECT

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History of Roe v. Wade

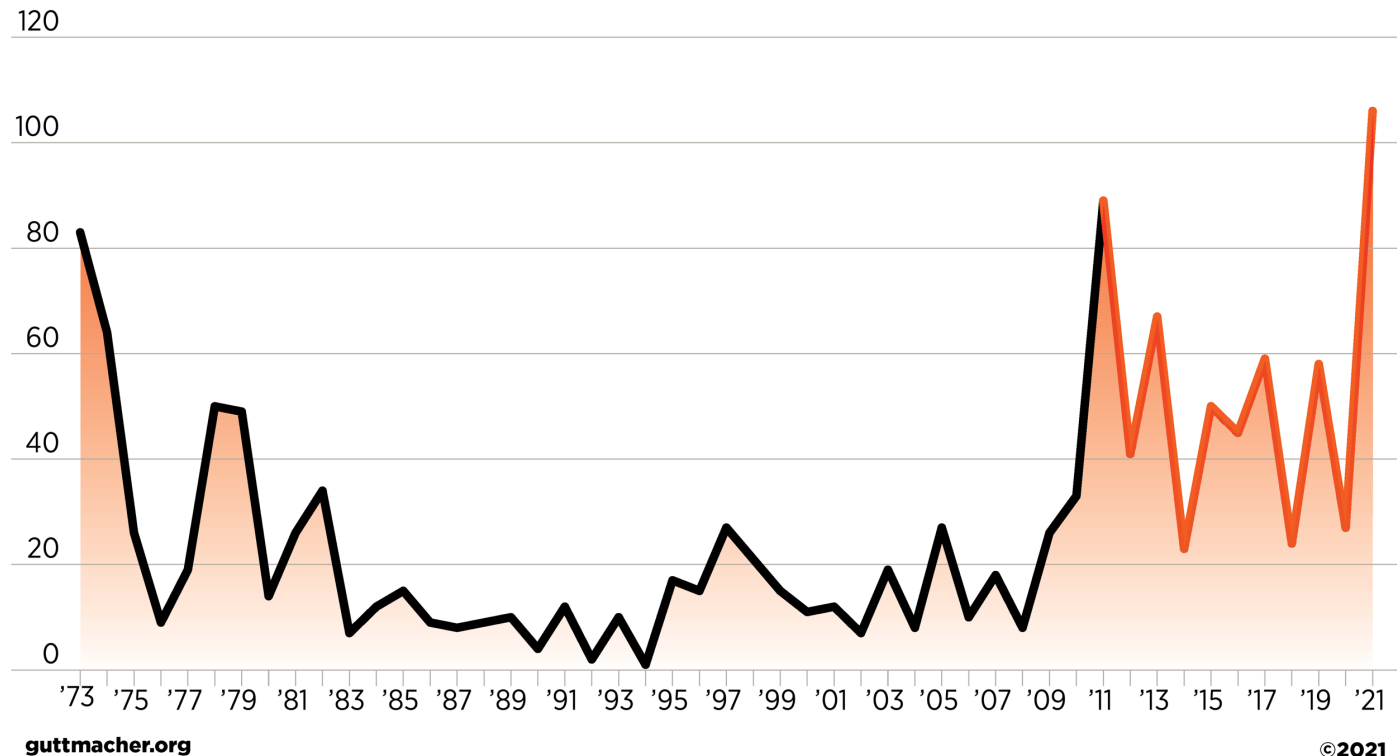
- Landmark U.S. Supreme Court case (1973)
 - Established constitutional right to abortion prior to “viability”
 - Viability = Current ~23-24 w GA
- Steady chipping away of this right since 1973
 - [Guttmacher video on AB restrictions](#)

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U.S. states have enacted 1,336 abortion restrictions since *Roe v. Wade* was decided in 1973

44% of those restrictions were enacted in the last decade alone

No. of restrictions enacted per year, as of Sept. 17, 2021



Barriers to Care Imposed by Legal Restrictions

- Gestational Bans
- Telemedicine Bans
- Targeted Regulation of Abortion Providers (TRAP) Laws
- Insurance Restrictions
- Waiting Periods
- Mandatory Counseling

- Limited options
- Financial burdens
- Limited Access
- Spread of misinformation and stigma

Disproportionate effect on already marginalized populations

Current state of AB access in US

- **Abortion *still* legal**
 - Roe v. Wade *still* law of the land
- OK Governor signed total AB ban (25 May)
 - From time of fertilization
 - Includes civilian (“bounty hunter”) enforcement mechanism
 - Violates Roe

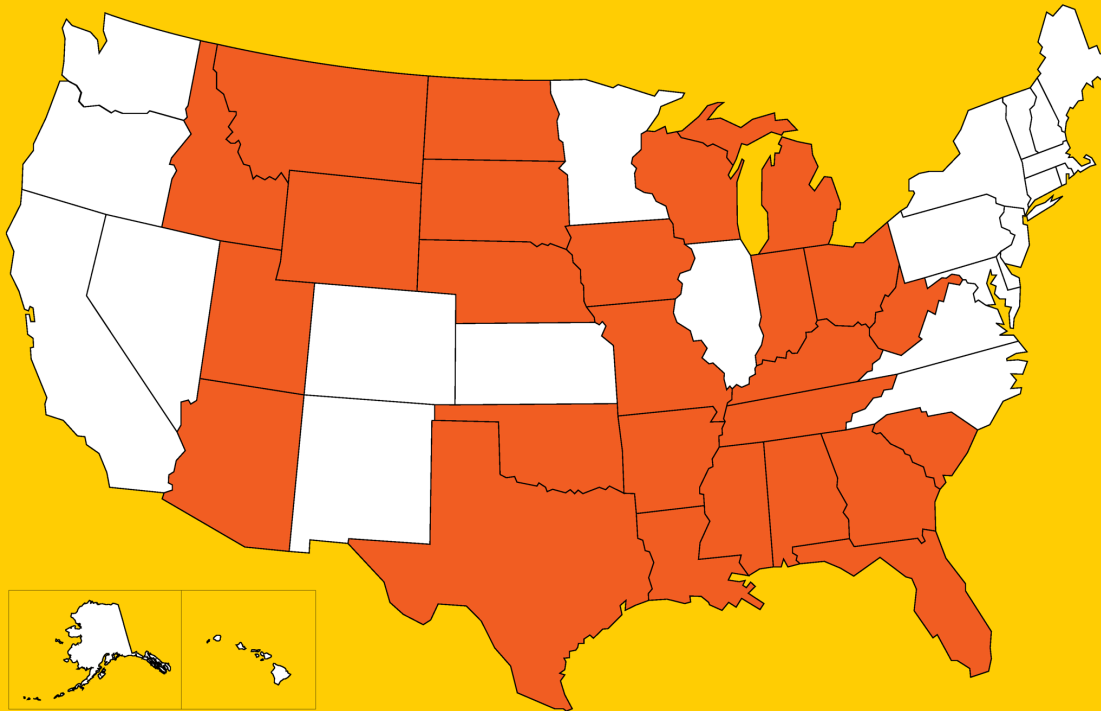
Current bans

19 states have enacted bans, including:

- **15-week bans** (AZ, FL, KY)
- **“Texas-style” bans** (ID, OK)
 - Civilian (“bounty hunter”) mechanism
 - Total ban, 6 w, 15 w
- **Total bans** (OK)
- **Trigger bans** (OK, WY)
 - 24 additional states projected
- **Med AB** (KY, SD, TN, GA, LA, MO)
 - Total ban, restriction on mailing meds, limit to MD providers, gestational limits

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If the U.S. Supreme Court overturns or guts *Roe v. Wade*, 26 states are certain or likely to ban abortion



guttmacher.org

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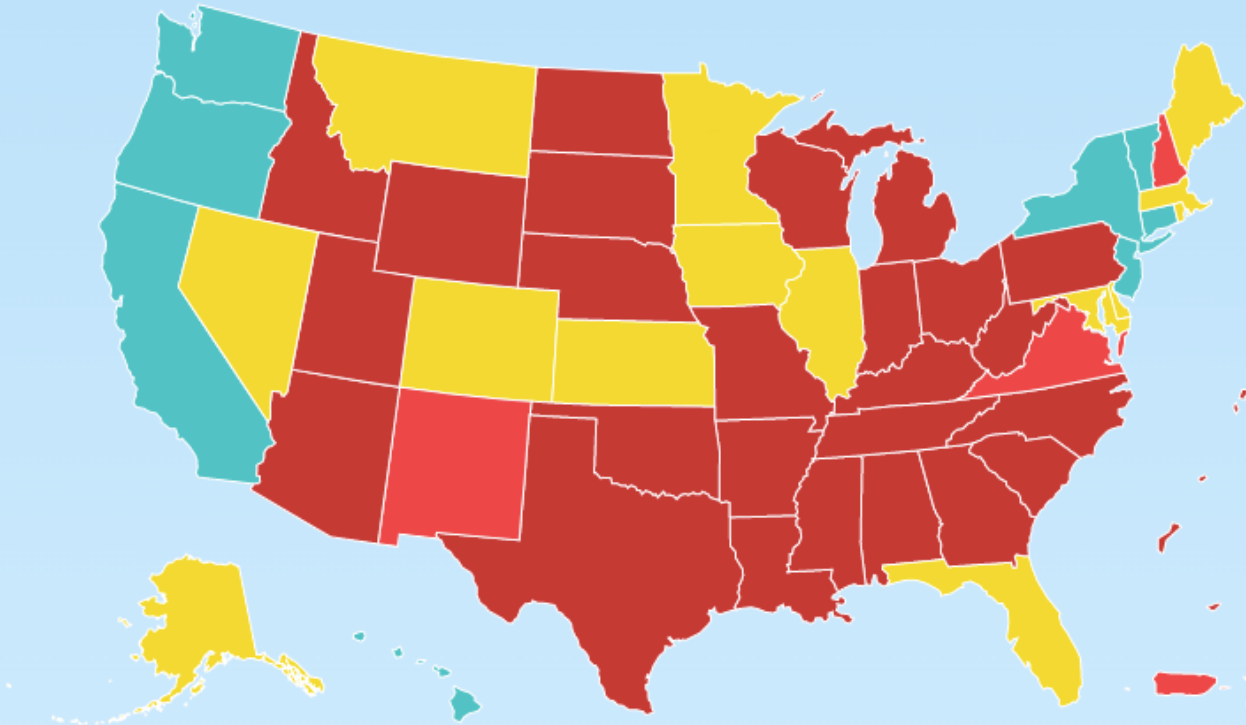
CENTER *for*
REPRODUCTIVE
RIGHTS

Expanded Access

Protected

Not Protected

Hostile

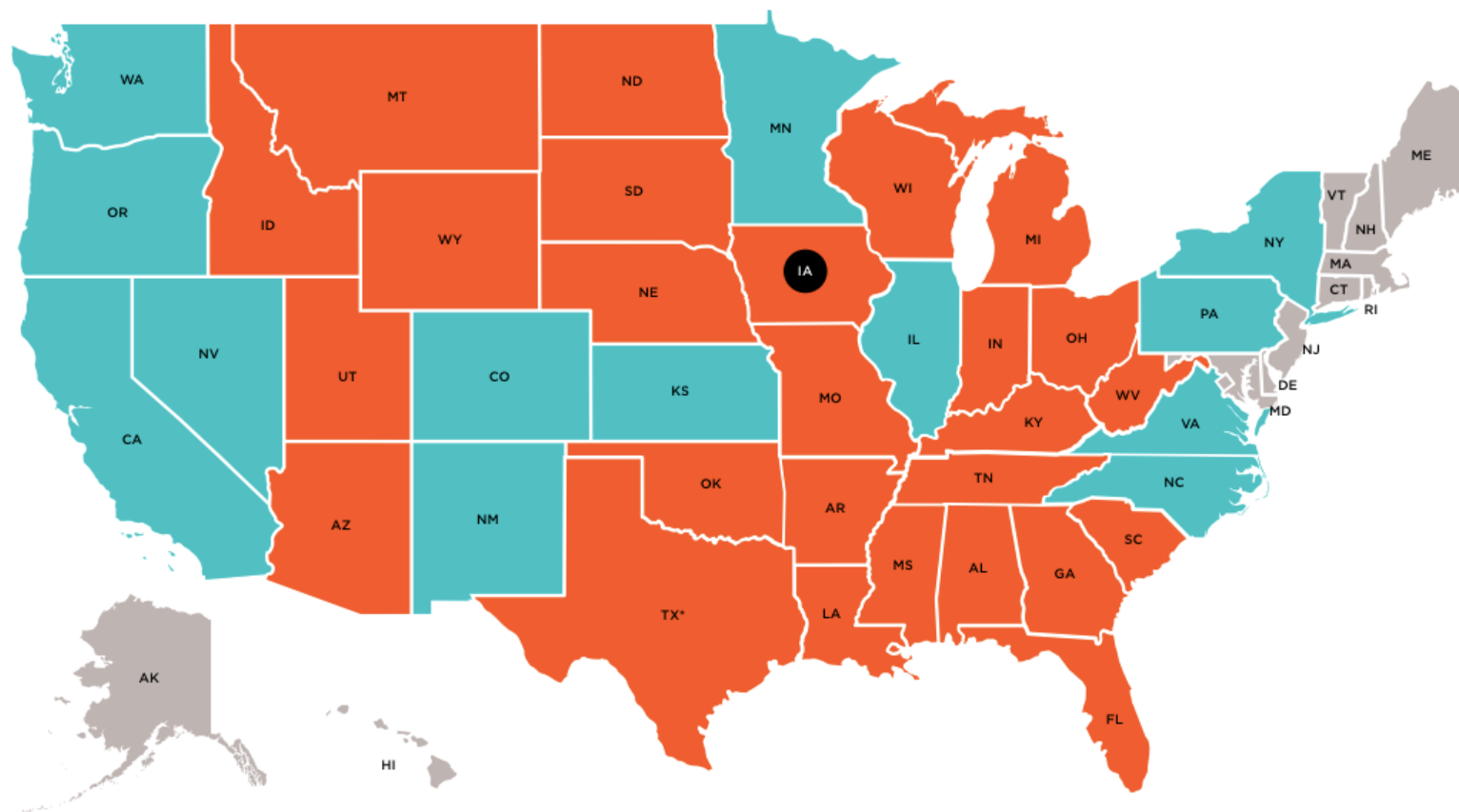


<https://reproductiverights.org/maps/what-if-roe-fell/>



Travel distances to AB clinic if Roe overturned

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BAN STATES



NEAREST CLINIC STATES



OTHER STATES

<https://states.guttmacher.org>

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If Roe is overturned...

- Regulation of abortion will go back to states
- Even in states where remains “legal” limited access d/t:
 - Parental consent
 - Limits on types of providers
 - Medicaid/health insurance policies
 - Gestational age limits
 - Workforce limitations

(Stevenson & Coleman-Minehan, 2022)



Global Implications of Overturning Roe

- Roe v. Wade has been important tool for people working to liberalize AB laws in countries where restricted/banned
- Funding from West supports reproductive health, including safe AB initiatives

Impact of Abortion Restrictions

- 90 million women of reproductive age live in countries where abortion is illegal under any circumstances
- Abortion restrictions do not prevent abortions
- An estimated 25 million unsafe abortions occur worldwide each year
- Around 45% of all abortions are unsafe
 - 97% of all unsafe abortions occur in developing countries where abortion is severely restricted

Your role as a nurse in Abortion Care

- **Advocacy**
 - **11 states have enacted protective measures**
 - E.g. establishing/expanding right to access, types of providers, insurance coverage
- **Provide** in states where legal
 - Moral courage
- **Refer and facilitate** access
- **Others?**

Resources to learn more and facilitate access to abortion

- [Aid Access](https://aidaccess.org/en/) (https://aidaccess.org/en/)
- [Guttmacher Institute](https://www.guttmacher.org/) (https://www.guttmacher.org/)
- [Center for Reproductive Rights](https://reproductiverights.org/) (https://reproductiverights.org/)
- [National Abortion Federation](https://prochoice.org/) (https://prochoice.org/)
- [National Network of Abortion Funds](https://abortionfunds.org/) (https://abortionfunds.org/)
- [Nurses for Sexual and Reproductive Health](https://nsrh.org) (nsrh.org)
- [Liberate Abortion!](https://www.liberateabortion.org/) (https://www.liberateabortion.org/)

Resources

- Centers for Disease Control and Prevention. (2021, November 24). *Abortion surveillance - United States, 2019*. Centers for Disease Control and Prevention. Retrieved June 9, 2022, from <https://www.cdc.gov/mmwr/volumes/70/ss/ss7009a1.htm>
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