



Abortion Access Research Studies

Please reference the RISE materials packet for more information.

- [Sociodemographic and Service Use Characteristics of Abortion Fund Cases from Six States in the U.S. Southeast](#) - *International Journal of Environmental Research and Public Health* (Whitney S Rice, Katie Labgold, Quita Tinsley Peterson, Megan Higdon, Oriaku Njoku)
 - Abortion funds are key actors in mitigating barriers to abortion access, particularly in contexts where state-level abortion access restrictions are concentrated. Using 2017-2019 case management data from a regional abortion fund in the southeastern U.S., we described the sociodemographic and service use characteristics of cases overall (n = 9585) and stratified by state of residence (Alabama, Florida, Georgia, Mississippi, South Carolina, and Tennessee). Overall, cases represented people seeking abortion fund assistance who predominately identified as non-Hispanic Black (81%), 18-34 years of age (84%), publicly or uninsured (87%), having completed a high school degree or some college (70%), having one or more children (77%), and as Christian (58%). Most cases involved an in-state clinic (81%), clinic travel distance under 50 miles (63%), surgical abortion (66%), and pregnancy under 13 weeks' gestation (73%), with variation across states. The median abortion fund contribution pledge was \$75 (interquartile range (IQR): 60-100), supplementing median caller contributions of \$200 (IQR: 40-300). These data provide a unique snapshot of a population navigating disproportionate, intersecting barriers to abortion access, and abortion fund capacity for social care and science. Findings can inform abortion fund development, data quality improvement efforts, as well as reproductive health, rights and justice advocacy, policy, and research.
- [Evaluating the Impact of Gestational Age Policies on Reproductive Healthcare Systems in the Southeast](#) - *Emory University, Rollins School of Public Health* (Sophie Hartwig, Carrie Cwiak, Lisa Haddad, Kelli Stidham Hall, Eva Lathrop, Elizabeth Mosley, Sara Redd)

- This project evaluates the effects of Georgia House Bill 954, which bans abortions provided 22 weeks after a woman’s last menstrual period. The team is examining trends in abortion care delivery and outcomes following the bill’s passage. Through interviews with and surveys of reproductive healthcare providers, the team is also exploring how providers interpret HB 954 and how the bill affects medical practices and delivery of abortion and obstetric care. This study seeks to provide a comprehensive understanding of how HB 954 is implemented and how it may affect service delivery and health outcomes in Georgia.
- [The Impact of Legal Abortion on Maternal Health: Looking to the Past to Inform the Present](#) *Georgia State University* (Sherajum Monira Farin, Lauren Hoehn-Velasco, and Michael F. Pesko)
 - From 1959 to 1980, abortion-related mortality declined by 97%, and maternal mortality fell by 86%. In this study, we question whether the legalization of abortion over 1969-1973 explains a portion of this maternal mortality decline. Our results suggest that legal abortion reduced non-white maternal mortality by 30-40%, with little impact on overall or white maternal mortality. We also find that early state-level legalizations were crucial, and explain more of the observed mortality decline than the Roe v. Wade decision itself. Overall, our findings suggest that legal abortion substantially improved maternal health for disadvantaged groups.
- [Confidentiality and Parental Involvement Processes for Minors Seeking Reproductive Health Services](#) - *Emory University, Rollins School of Public Health* (Sophie Hartwig, Kelli Stidham Hall, Melissa Kottke, Rachel Rebouché, Kari White, Alexandra McBrayer, Subasri Narasimhan, Peyton Rogers, Jaaie Varshney)
 - This project evaluates policies that require parental involvement in a minor’s decision to have an abortion. It also explores the judicial bypass process, which is a legal procedure that allows a minor to make this decision without parental involvement. Across three Southeastern states, the team is conducting interviews with minors about their experiences seeking abortion care, involving a parent, and with the judicial bypass process. The team is also interviewing healthcare providers and legal representatives to better understand barriers and facilitators that minors face at different stages of this process. This study seeks to provide an in-depth understanding of parental involvement policies and their effects on young women and health service delivery and legal practices in the Southeast.
- [The Turnaway Study](#) - *University of California San Francisco, Advancing New Standards in Reproductive Health*
 - The Turnaway Study is ANSIRH’s prospective longitudinal study examining the effects of unwanted pregnancy on women’s lives. The major aim of the study is

to describe the mental health, physical health, and socioeconomic consequences of receiving an abortion compared to carrying an unwanted pregnancy to term. The main finding of The Turnaway Study is that receiving an abortion does not harm the health and wellbeing of women, but in fact, being denied an abortion [results in worse financial, health and family outcomes.](#)