

The Texas Policy Evaluation Project

Impact of Abortion Restrictions in Texas

Research Brief

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THE STUDY

Women's access to comprehensive reproductive health care in Texas has been significantly affected by new laws that limit funding for contraception and restrict services for abortion. These laws have had the greatest impact on low-income women and women in rural counties. The Texas Policy Evaluation Project, led by researchers at the University of Texas at Austin, Ibis Reproductive Health, and the University of Alabama at Birmingham, is a three-year study aimed at evaluating the impact of the family planning budget cuts and abortion restrictions implemented by the Texas Legislature in 2011. This brief highlights some of the findings from our research aimed at understanding the effects of HB15 on abortion providers and women seeking abortion care.

Data for this part of the project were collected through surveys with clinics (sent to all registered abortion providers in the state), surveys with women seeking abortion (conducted in clinic waiting rooms in six cities), and in-depth interviews with clinic directors, physicians and women.

ABORTION CLIENTS

What were the perceptions of women regarding the mandatory consultation visit at least 24 hours before the abortion and ultrasound viewing?

<u>Survey</u>: 318 women seeking abortion care, after completing the required consultation visit. Women were recruited from abortion clinic waiting rooms in Dallas, Houston, Austin, El Paso, McAllen, and San Antonio from August - December 2012.

<u>Interviews</u>: 20 of these women completed a phone interview 1-2 months following their abortion.

The mean age of survey participants was 26 years old and 50% of the women were under 24 years. 44% identified as Hispanic, 26% as white/non-Hispanic, 20% as black/non-Hispanic and 8% as other or more than one race. 58% had at least one child.

FINDINGS

- Almost one third (31%) of women reported that *the waiting period had a negative effect on their emotional well-being.* Negative emotional effects were reported significantly more often for white women, women who were college graduates and women with insurance.
- 72% of the women chose to look at the ultrasound some or all of the time during the consultation. Before the consultation visit, 92% of women reported that they were sure of their decision or that abortion was a better choice for them. Following the consultation visit and ultrasound, the proportion reporting was unchanged (92%).
- The mean distance women traveled to get to the clinic was 42 miles (median 20 miles), with some traveling as far as 400 miles. 23% of women found it *hard to get to the clinic for the consultation visit*. Low-income women and those who lived more than 20 miles from the clinic were significantly more likely to report that it was hard to get to the clinic for this mandatory visit.
- 46% of women reported *some out-of-pocket expenditure for the consultation visit*, and on average they spent \$141 (median=\$100).

"It's a guilt trip into making women keep children they don't want, and, basically limiting access to abortion, making it really difficult for women to get abortions and have their choice."

-Abortion Client, Age 23

• In the three months prior to their pregnancy, 45% of *women were unable to access the birth control that they wanted to use*. 23% of women reported at least one structural barrier such as cost, lack of insurance coverage, and inability to find a clinic or get a prescription that prevented them from accessing their preferred contraceptive method.

ABORTION CLINICS

How have the laws affected service provision at abortion facilities?

<u>Surveys</u>: 27 abortion clinics with data before and after the laws were enacted.

<u>Interviews</u>: 10 in-depth interviews including 1 clinic director, 3 clinic managers, 2 physicians, 1 funding director, 4 abortion funds.

FINDINGS

- Preliminary data from several large clinics indicate a decline of 5-10% in the number of abortion clients the first year after the law went into effect. Clinics indicated the decline occurred in the number of women scheduling the initial consultation visit. The vast majority of women who had the consultation visit and were eligible to have an abortion continued to have the procedure.
- One quarter of the clinics reported a decrease in number of physicians after the restrictions. The change was due to difficulty in scheduling due to the laws and reduced clinic volume.
- Physician hours increased at most clinics, with an average increase of 8 hours/week.

"People can be pushed out of [abortion at our clinic] being an option because of the waiting period. We've seen that. We can give referrals to Albuquerque."

-Clinic Director

- Before the law, 89% of the clinics offered clients the option to view the ultrasound and the majority (74%) reported that women chose to view the ultrasound most of the time.
- Requests for financial assistance from local funds that provide support to women seeking abortion have increased due to higher clinic costs, more travel costs, and increased need in Travis County as a result of removal of public funds for abortion care.

"It has been my experience, that a woman, who is going to have an abortion, whether she is going to see the sonogram or not, she is still going to have the abortion."

-Abortion Fund Director

CONCLUSIONS

Our preliminary findings indicate that there has been a decline in the number of women who obtain abortions in Texas since the implementation of HB15. However, this decline seems to be more related to the logistical obstacles of having to schedule two clinic visits rather than the impact of the 24-hour waiting period or ultrasound viewing on women's decisionmaking. The extra visit is burdensome for some women and adds additional cost to the procedure, but it does not change women's minds about having the abortion. Most—but not all—women want to view the ultrasound, and most clinics were already offering ultrasound viewing before HB15.



A team of researchers at the Population Research Center, the University of Texas at Austin, in collaboration with researchers at the University of Alabama at Birmingham and Ibis Reproductive Health, is studying the

impact of Texas state's legislation on women's reproductive health services, enacted during the 2011 legislative session. More details about the study can be found on the project website: <u>www.utexas.edu/cola/orgs/txpep/</u> The project app: <u>www.prc.utexas.edu/txpep/</u>