

Babies Unprotected

An Analysis of Self-Managed Abortion Numbers in States with "Bans"

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TERMS

SELF-MANAGED ABORTION (SMA)

An abortion performed by a pregnant woman without assistance or oversight from the formal healthcare system of clinics and doctors. Typically this means a woman ordering abortion pills online and using them at home.

HOSPITAL or CLINIC-BASED ABORTION

An abortion performed under the oversight of the formal healthcare system. This includes hospital and in-clinic surgical abortions as well as medication abortions provided in these settings or via telehealth consultations with physicians.

Today abortion is supposedly banned in 14 states, yet self-managed abortions there are rapidly climbing in number.

ON JUNE 24, 2022, THE U.S. SUPREME COURT issued its ruling in *Dobbs* to overrule *Roe v. Wade*. Since then, abortion laws have dramatically shifted in Republican–controlled states.

Some had pre-Roe laws still on the books. Many had "trigger bills" that became effective. Some states passed new legislation restricting abortions. In some other states, courts blocked restrictions.

All of this has created a fast-changing landscape of abortion access across Republican-controlled states.

In the wake of these events, major media outlets report that abortion has now been banned in at least 14 states. Many Pro-Life sources go even further and make the claim that abortion in these states has dropped to zero or that these states are now "abortion-free."

What headlines like these do not account for is the fact that self-managed abortion (SMA) remains legal for women in all 50 states, including those that claim to have banned abortion.³

While hospital and clinic-based abortions (even telehealth and virtual-only provision of abortion medication inside the healthcare system) are reported to state or federal agencies, SMAs are not reported. As a result, data for SMAs is not included in numbers published by official sources like state health departments or the CDC.

While this makes it more difficult to estimate SMA numbers, data is available from other sources. The focus of this report is to review the available data on the number of self-managed abortions being performed inside states where abortion is supposedly banned.

Immediately After Dobbs: SMA in States with "Bans" (July - August 2022)

IMMEDIATELY OR QUICKLY FOLLOWING the *Dobbs* decision, 12 states announced they had complete or nearly complete legal bans on abortions within the healthcare system: Alabama, Arizona, Arkansas, Kentucky, Louisiana, Mississippi, Missouri, Oklahoma, South Dakota, Texas, West

Virginia, and Wisconsin.

Interest in SMA promptly skyrocketed.

A study published in November 2022 in the Journal of the American Medical Association reported on these rapidly increasing numbers by examining



FIGURE A

data provided by Aid Access, the single largest provider of SMA pills.⁴ Among other things, the study reported on the number of requests Aid Access received for SMA pills in July and August 2022, the two months immediately succeeding the June 24 *Dobbs* decision.

The study showed a sharp increase in requests for abortion pills in the two months immediately following the *Dobbs* decision.

Per 100,000 female residents aged 15–44, Aid Access reported requests per week were 14.9 for Louisiana, 7.8 for Mississippi, 7.1 for Arkansas, 6.2 for Alabama, 6.0 for Oklahoma, and approximately 4.7 for Arizona, 4.1 for Kentucky, 2.6 for Missouri, 3.1 for South Dakota, 5.5 for Texas, 3.9 for West Virginia, and 2.7 for Wisconsin.

Factoring in the population of female residents aged 15-44,⁵ this amounts to the following (rounded to the nearest whole number): Alabama (61/

wk), Arizona (67/wk), Arkansas (42/wk), Kentucky (35/wk), Louisiana (136/wk), Mississippi (45/wk), Missouri (31/wk), Oklahoma (48/wk), South Dakota (5/wk), Texas (346/wk), West Virginia (33/wk), and Wisconsin (30/wk). Therefore, in total during this period, Aid Access reported receiving over 880 requests per week from these 12 states where abortion was "banned."

Because these numbers only reflect requests, and because they are from only one SMA pill provider, they do not provide the full picture of the number of completed self-managed abortions.

In an interview with the New York Times, Professor Abigail Aiken, lead researcher for the study, explained that her research on SMA prior to *Dobbs* indicated that roughly 60 percent of initial requests to Aid Access ultimately resulted in shipment of pills. In a study published in February 2022, Aiken and others reported that 88 percent of women who received shipments of pills from Aid Access actually



took them to complete an abortion.⁷ Aiken has since stated that the percentage after *Dobbs* could be higher because women had fewer options, but the calculations in this paper rely on the more conservative finding of 88%.⁸

While Aid Access is the largest supplier of abortion pills for SMA in the U.S., they are not the only supplier. The New York Times estimated that, for

July through December 2022, Aid Access supplied 46 percent of the U.S. market for SMA pills, while Las Libres and a variety of online sellers provided the rest.⁹

Based on the foregoing numbers and rates, we can project the total number of self-managed abortions for these 12 states over a twelve month period that began in July 2022, as seen in Figure A.

One Year After Dobbs: SMA Numbers in States with "Bans" (July 2023)

THE NUMBERS IN Figure A are 12-month projections based on the assumption that, after the initial spike in numbers following the *Dobbs* decision, SMA rates remained constant. However, more recent data indicates that SMA numbers have likely increased significantly.

Around one year after the *Dobbs* decision, Aid Access issued a press release self-reporting a 270% increase since July-August 2022 in average daily pill requests across the U.S.. Included in that report was a statement that, in just the previous 26 days, Aid Access had shipped

abortion pills to over "3,500 people living in states where abortion is banned." 10

As of July 2023, 14 states had reportedly banned abortion: Alabama, Arkansas, Idaho, Indiana, Kentucky, Louisiana, Mississippi, Missouri, North Dakota, Oklahoma, South Dakota, Tennessee, Texas, and West Virginia.

While these numbers were self-reported by Aid Access and not evaluated by any professional researchers, if they are accurate, and if the market share of Aid Access was still 46%, this rate would

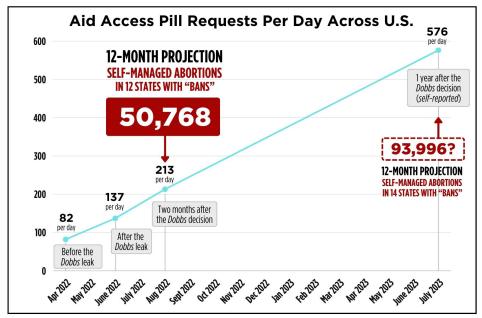


FIGURE B

add up to 93,996 self-managed abortions projected in those 14 states with "bans" over a 12-month period from June 18, 2023 through June 17, 2024.

While this more recent data is less certain, the trend is nonetheless clear. Self-managed abortion in states with "bans" is a growing problem, increasingly blunting any effect the "bans" may have had in curbing the supply of abortion in these states. These numbers confirm that, because no states' laws are considered to prohibit self-managed abortion, babies in all 50 states remain essentially unprotected from abortion.

ADVANCE PROVISION OF SMA

THE NUMBERS DISCUSSED IN THIS PAPER do not include requests made "for advance provision of medications before pregnancy occurred" (i.e. SMA pills to women who were not yet pregnant), which Aid Access offered.

According to research published on January 2, 2024 in the Journal of the American Medical Association, between September 2021 and April 2023 Aid Access received 48,404 requests for

advance provision of SMA pills, with the vast majority of those being after May 1, 2022. However, since the research does not indicate what percentage of these requests resulted in completed abortions, any abortions resulting from advance provision of SMA pills are not included in the numbers in this report. Accordingly, the numbers discussed in this report reflect only requests made by women who indicated that they were pregnant. ■

Endnotes

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