

Girls Inc. is committed to advancing the rights and opportunities of girls, young women, and all youth, with a particular focus on the needs of girls from underserved communities, girls of color, and LGBTQ+ youth. Informed by the voices of the girls we serve, and working alongside them, we advocate for policies and practices that combat systemic racism, sexism, and other social and economic barriers to girls' success.

Girls Inc. believes everyone has the fundamental right to choose if, when, and under what circumstances to become pregnant and carry a pregnancy to term. As part of our mission to advance girls' rights and opportunities, we support access to comprehensive sex education and safe, high-quality reproductive health care, including contraception and abortion care services.¹

GLOSSARY

The following glossary is provided to ensure that readers understand what is meant by the issue-specific terminology and phrases used throughout this fact sheet.

Abortion a procedure to end a pregnancy done by a licensed healthcare professional. It can be administered in two different ways:

- **Medication abortion** uses medicines to end the pregnancy. It is sometimes called a "medical abortion" or "abortion with pills."
- **Procedural abortion** is a procedure to remove the pregnancy from the uterus.²

Contraception birth control, also known as contraception, is the use of medicines, devices, or surgery to prevent pregnancy. There are many different types. Some are reversible, while others are permanent. Some types can also help prevent sexually transmitted diseases (STDs).³

Gestation the period of time between conception and birth. During this time, the baby grows and develops inside the womb. Gestational age is the common term used during pregnancy to describe how far along the pregnancy is.⁴

Girls Inc. recognizes that policies and statistics around abortion and reproductive rights are rapidly changing. The information presented on this fact sheet was accurate at the time of publication on 02/01/2023.

The state of abortion access in the United States

In June 2022, the Supreme Court (SCOTUS) issued its decision in *Dobbs v. Jackson Women's Health Organization*, a case challenging the constitutionality of a Mississippi state law that prohibits abortions after 15 weeks. **This ruling overturned *Roe v. Wade*, the almost 50 year old law ensuring a constitutional right to abortion and limited a state's right to interfere with abortion access.** Without these protections, access to abortion care is based on where you live. Today, young women will come of age with fewer rights than their mothers and grandmothers.⁵

The rise in state-level abortion restrictions has disproportionate impacts on marginalized youth, decreasing access to high-quality, confidential, and nondiscriminatory sexual and reproductive health care services. States enacting abortion bans are likely to have higher than average poverty levels, further limiting access to care. Many of the states with abortion bans have also chosen not to expand their Medicaid programs, leaving people without affordable health insurance options and therefore making contraception difficult or impossible to access.⁶ **People of color, immigrants, and LGBTQ+ people (especially those for whom these identities intersect) are disproportionately restricted from the kind of reproductive health care that would give them the autonomy and options they need to lead healthy lives.**

How access to abortion care impacts youth

Young people face multiple barriers to reproductive health services including cost, lack of access to medically accurate information, and lack of access to contraception and abortion care services.⁷ Teens are more likely to be affected by state-level restrictions on abortion based on gestation because the average gestational age at which a teen finds out they are pregnant (7.4 weeks) is higher than for pregnant people overall (5.7 weeks).⁸ **Teens commonly have irregular menstrual cycles, which means they may be less likely to identify a missed period than an older person.** Over half of all abortions are performed among people in their twenties,⁹ while ten percent of all abortions are performed among people aged 15-19.¹⁰ Access to abortion care *must* be protected for young people. Research has shown that "people who are denied abortions are more likely to experience higher levels of anxiety, lower life satisfaction, and lower self-esteem compared with those who are able to obtain abortions." Conversely, there is no research to indicate that abortion is a cause for subsequent mental health diagnoses, as some anti-choice groups suggest.¹¹

1. Girls Inc. (2021, November 16). Girls Inc., National Organization Statement on challenges to abortion rights. Retrieved from <https://girlsinc.org/national-statement-supporting-abortion-rights/>

2. U.S. National Library of Medicine. (n.d.). Medical abortion. MedlinePlus. Retrieved from <https://medlineplus.gov/abortion.html>

3. U.S. National Library of Medicine. (n.d.). Birth control. MedlinePlus. Retrieved from <https://medlineplus.gov/birthcontrol.html>

4. U.S. National Library of Medicine. (n.d.). Gestational age. MedlinePlus. Retrieved from <https://medlineplus.gov/ency/article/002367.htm#:~:text=Gestation%20is%20the%20period%20of%20far%20along%20the%20pregnancy%20is>

5. Girls Inc. (2021, November 16). Girls Inc., National Organization Statement on challenges to abortion rights. Retrieved from <https://girlsinc.org/national-statement-supporting-abortion-rights/>

6. Totenberg, N., & McCammon, S. (2022, June 24). Supreme Court overrules *Roe v. Wade*, ending right to abortion upheld for decades. NPR. Retrieved from <https://www.npr.org/2022/06/24/1102305878/supreme-court-abortion-roe-v-wade-decision-overturn-623-...text%3DThe%2520said%2520that%2520the%2520court%2520no%2520rights%2520to%2520speak%2520of&sa=D&source=docs&pusht=1675077962905113&usq=AOvVaw3ADD2B3lgJR00-Q5qe-Qo8>

7. See footnote 4

8. Planned Parenthood. (n.d.). Health Care Equity. Planned Parenthood Action Fund. Retrieved from <https://www.plannedparenthoodaction.org/issues/health-care-equity>

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12. American Psychological Association. (2022, May 3). Restricting access to abortion likely to lead to mental health harms, APA asserts. American Psychological Association. Retrieved from <https://www.apa.org/news/press/releases/2022/05/restricting-abortion-mental-health-harms>

Parental Involvement (Authorization, notification, consent)

For minors, many states have laws requiring parental involvement in the form of authorization, notification, and/or consent. Not every young person is in a position to involve their parents in their decision to use contraception or to access abortion care. Laws, which vary state-to-state, requiring teens to utilize the court system to waive these requirements impose a barrier for teens who cannot turn to their parents for help, leaving them to navigate the judicial system alone. This process is unrealistic for many teens due to financial barriers, time constraints, and privacy concerns.

Since *Roe v. Wade* was overturned, young people across the country are more civically engaged on this issue than ever. College students are more likely to report using birth control, and some have planned to leave the state to access abortion care if they become pregnant.¹² They are increasingly taking public stances, with increased activism by both opponents and supporters of abortion rights.

Economic Barriers to Access

The cost of abortion care varies widely—by insurance status, state, and provider. As of January 2023, the average medication abortion can cost up to around \$800 but could cost as low as \$580 at a Planned Parenthood clinic.¹³ Since these numbers are based on national averages, specific information about costs is best found through the website of a local clinician who provides abortion care.¹⁴

Current law—the Hyde Amendment—prohibits federal funding for abortions. The Hyde Amendment precludes federal health insurance programs such as Medicaid, from covering abortion-related health care costs.¹⁵ Advocates continue working to change this policy to allow public insurance coverage of abortion.¹⁶

Disproportionate Impact on People of Color

Research clearly shows Black and Brown women have less access to health care, compared to white women, generally due to economic factors and inequitable standards of care in the healthcare system. Without the ability to travel out of state for abortion care, legal limitations impact people of color much harder than their white counterparts.¹⁷ Hardening laws around reproductive health will also disproportionately impact Black, Indigenous, and people of color (BIPOC) in the law enforcement and justice systems given the legal system's deep history of systemic racism.

Criminalization of Abortion and Data Privacy

According to the National Advocates for Pregnant Women, since 2007 there has been a shocking spike in arrests and prosecutions for crimes related to stillbirths, miscarriages, and alleged drug and alcohol use during pregnancy.¹⁸

For states banning abortion in post-Roe America, there are additional consequences related to information privacy. Should someone be investigated or prosecuted for obtaining an abortion, the Fourth Amendment provides only limited protection from prosecution, and courts may access personal medical, financial, and other information. This could include location data, text messages and emails, search histories, and seemingly innocuous period and ovulation-tracking apps.¹⁹

This lack of digital privacy protections has created significant implications as it relates to the criminalization of abortion.

Some individuals have chosen to encrypt their data, turn off location services, or leave devices at home when seeking certain reproductive health services, especially in restrictive environments.



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What Policymakers Can Do

The Supreme Court's decision to overturn *Roe v. Wade* is a result of a decades-long effort by abortion opponents, many of whom have indicated a desire to ban abortion, and possibly contraception, nationally. While conservative states continue restricting or banning access to abortion care, broader rights are threatened at the Federal level.

Congress must pass federal legislation that protects access to abortion care throughout the United States by establishing a statutory right for healthcare professionals to provide – and their patients to receive – abortion care free from medically unnecessary restrictions, limitations, and bans that delay and even obstruct access to abortion.

DID YOU KNOW?

As of January 2023, 12 states– Alabama, Arkansas, Kentucky, Louisiana, Mississippi, Missouri, Oklahoma, South Dakota, Tennessee, Texas, West Virginia, and Wisconsin have total abortion bans with no exceptions for rape or incest.²⁰

WHAT YOU CAN DO

We must combat and actively work to dismantle the stigma around abortion.

- Use this [interactive map](#) to see a breakdown of abortion laws by state..
- Share that the [National Abortion Fund](#) provides financial and logistical support for an abortion.
- Call the free [National Abortion Hotline](#) for unbiased, medically accurate information about abortion.
- Share that the [Repro Legal Helpline](#) provides legal information or advice about self-managed abortion, young people's access to abortion, and referrals to local resources.
- The [Repro Legal Defense Fund](#) covers bail and funds strong defenses for people who are unjustly targeted by police or prosecutors.
- Share [this directory](#) of verified abortion service providers and assistance resources in the United States.

Girls Inc. continues to advocate for the rights and dignity of girls, young women, and all youth, and push back on policies and practices that seek to limit their control of their own lives.²¹



20. Tracking the states where abortion is now banned. The New York Times. (2022, May 24). Retrieved from <https://www.nytimes.com/interactive/2022/us/abortion-laws-roe-v-wade.html>

21. See footnote 2