Texas State Abortion Rate Decreases 13 Percent Since Implementation of Restrictive Law

Number of abortion clinics falls from 41 to 22 over same period

AUSTIN, Texas (July 23, 2014) — A new paper from The Texas Policy Evaluation Project demonstrates a 13% decline in the abortion rate in Texas and a sharp reduction in medical abortion since House Bill 2 (HB2) went into effect in November 2013. The law includes provisions restricting medical abortion, banning most procedures after 20 weeks post-fertilization and requiring physicians to have admitting privileges at nearby hospitals. By September 2014, abortion facilities must meet the requirements of ambulatory surgical centers (ASCs). The number of facilities providing abortion in Texas dropped from 41 in April 2013 to 22 by April 2014; there are currently only six ASCs providing abortion care. The manuscript has been accepted for publication in the journal *Contraception* and is available online.

The 13% decline in the state abortion rate over the past year, which corresponds to 9,200 fewer abortions annually, is steeper than recent declines in both Texas and the nation. The authors hypothesize that part of this reduction is due to the closure of clinics throughout the state, generally because of doctors’ inability to obtain hospital admitting privileges. Between April 2013 and April 2014, 46% of facilities providing abortion closed, leaving large areas of the state without a clinic. All of the clinics south of San Antonio have closed, and all but one have closed in West Texas.

The research found that the number of women living far from the nearest clinic in Texas has risen as these clinics closed. For example, the number of women of reproductive age in Texas living in a county more than 200 miles from a clinic providing abortion in Texas increased from 10,000 in April 2013 to 290,000 by April 2014. When the ASC requirement goes into effect this will increase to 752,000.

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The restrictions on medical abortion, or the abortion pill, meant that fewer women were eligible for the method, and it also became more expensive and complicated to provide. The number of medical abortions provided declined by 70% and several clinics stopped offering medical abortion. The lead author of the study, Dr. Daniel Grossman, an obstetrician-gynecologist and Vice President for Research at Ibis Reproductive Health, said, “Some women have a strong preference for medical abortion, but the law has made it much more difficult to obtain. There is no evidence that any of the provisions in this law has improved the safety of abortion in the state—they have just made it harder for women to access the services they want and need.”

The authors note that they were somewhat surprised that the decline in the abortion rate was not larger. They suggest this was due to several factors. First, the clinic closures affected smaller cities more than the major metropolitan areas where most abortions are performed. Second, there has been a concerted effort among activists to provide funding and logistical support to help women seeking abortion. Finally, there are indications that unintended pregnancy may be rising in the state due to barriers accessing contraceptive services. Joseph Potter, a professor at the University of Texas at Austin and an author of the study, said, “The cuts in family planning funding imposed in 2011 by the state legislature have closed clinics and made it difficult for women to get contraceptive services—especially the most effective birth control methods. This, coupled with the barriers to abortion, will most likely result in more unintended births.”

The study found that only 22% of all abortions were performed in ASCs, and this has not increased since 2012. “It does not appear that the existing ASCs could meet the demand for abortion services for the entire state when the final provision of HB2 goes into effect,” said Grossman. A new ASC in Dallas and another in San Antonio have been announced by Planned Parenthood, but it is unclear if they will be operational by September.

**About The Texas Policy Evaluation Project**

The Texas Policy Evaluation Project is a five-year, comprehensive effort to document and analyze the impact of the measures affecting reproductive health passed by the 82nd and 83rd Texas Legislatures. The project team includes researchers from the University of Texas at Austin’s Population Research Center, Ibis Reproductive Health, and the University of Alabama-Birmingham.

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If you would like to receive a copy of the article or schedule an interview with Dr. Grossman, please contact Britt Wahlin at (617) 549-2852.