Abortion restrictions put women’s health, safety and well-being at risk

Abortion in the United States is an extremely safe procedure. Restrictions imposed in some states are not based on medical evidence and will do nothing to improve women’s health and safety. In fact, these requirements put women at risk by standing in the way of safe reproductive care.

In 2016, the US Supreme Court will review a Texas law that imposes multiple abortion restrictions. The main provisions of the law require abortion providers to obtain hospital admitting privileges and meet building specifications to become an ambulatory surgical center (ASC)—essentially a mini-hospital.

Decades of research show that abortion is a common and safe medical procedure that one in three US women obtain. Evidence proves that laws restricting access to abortion care do not improve its safety and actually put women’s health at risk.

Abortion is a safe medical procedure

The safety of abortion in the US is extensively documented. The most comprehensive study found that abortion is very safe:

- Major complications are rare, occurring in less than ¼ of one percent of procedures,¹ which is safer than having wisdom teeth removed.
- Abortions performed in a variety of clinical settings—including doctors’ offices, clinics and hospitals—are safe.

Given this safety record, there is no medical evidence to support the need for admitting privileges or ASC standards.² ³ In fact, many medical procedures riskier than abortion are offered outside of ASCs by providers without admitting privileges.⁴

Compromising women’s health & well-being

After Texas enacted some parts of its law in 2013, the number of facilities providing abortion care decreased by almost half.⁵ Research shows that women now report multiple barriers to obtaining safe abortion care, including increased travel time, longer waits for an appointment and greater costs.⁶
Delaying or effectively blocking abortion care puts women’s health at risk. When a woman has no option but to obtain an abortion later in pregnancy, major complications are more likely and costs are higher. Additionally, research shows that carrying an unwanted pregnancy to term is more dangerous to a woman’s health than abortion.

Research also shows that abortion does not negatively impact a woman’s well-being. Contrary to some claims, abortion does not place women at risk for post-traumatic stress disorder, depression, low self-esteem or anxiety, nor does it increase drug, tobacco or alcohol use. Over 95% of women report that abortion was the right decision for them. One year later, women who obtained abortion care were more likely to have a positive outlook on life than women denied this care.

Abortion restrictions may put a woman’s physical and emotional safety at risk. Limited abortion access may result in more women being unable to terminate unwanted pregnancies, keeping them in contact with violent partners. This puts both women and their children at increased risk of violence.

A significant burden on women
Unnecessary abortion restrictions place a burden on women and result in unequal access. A study in Louisiana found the state’s admitting privileges law would result in widespread clinic closures, more than tripling the average distance traveled for abortion care—from 58 to 208 miles. The expense of abortion care is already very high for some women; these types of restrictions may unfairly make it accessible to only the wealthy.

Limited access to abortion makes it likely that self-induction will become more common. Misoprostol is a medically safe way to self-induce abortion, but it is not readily available in the United States. Women are turning to less effective and more dangerous methods—including taking herbs and inflicting abdominal trauma.

Conclusion
Extensive medical, epidemiological, psychological and sociological evidence proves that abortion is safe for women. Research shows that current laws claiming to improve the safety of this common medical procedure are more likely to harm women.