

Adolescent abortion-fund patients face more barriers than adults

August 8 2018, by Bert Gambini



Credit: University at Buffalo

Adolescents who received funding to help pay for an abortion experienced greater hardships that affected abortion access compared to adult abortion-fund patients, according to the results of a new study by a University at Buffalo social work researcher.

Using the National Network of Abortion Fund's (NNAF) Tiller Memorial Fund data from 2010 to 2015, Gretchen Ely, an associate professor in UB's School of Social Work found that adolescents (defined roughly as 12-17 years old) traveled an average of 257 miles for abortion

services compared to 113 miles for adults and also needed several hundred dollars more for their procedures.

"There is an undue burden represented in [adolescent](#) experiences that adult experiences do not reflect," says Ely, the paper's lead author with Kafuli Agbemenu, an assistant professor in UB's School of Nursing, Travis Hales, a UB Ph.D. graduate, Jenni Kotting of the NNAF and D. Lynn Jackson, an associate professor of [social work](#) at Texas Christian University.

"We see dire circumstances for adolescents in the overall data set and are advocating as a team to approach this as a legitimate health concern."

The results appear in the journal *Health and Social Care in the Community*.

Through the federal Title X program, adolescents have autonomy to seek [health care](#) for family planning and preventative health services, including access to contraceptives and treatment for sexually transmitted infections, but in many states, those same adolescents cannot seek an abortion in the same manner as an adult.

"I would argue that abortion is the same type of health service as others provided by Title X," says Ely.

Many states have provisions that require adolescents to obtain consent from a parent or legal guardian before having an abortion. Other states mandate that parents be notified when an adolescent child has an abortion and five states require both consent from and notification to a parent about an abortion.

"We have existing research that argues adolescents have the cognitive capacity to choose abortion," says Ely. "They're as competent as adults

when it comes to making that decision."

Health insurance plans that do not provide privacy for adolescents present obstacles as well. Even those with plans that ensure confidentiality can be betrayed by itemized medical billing procedures that divulge procedures or treatments.

"These policies are stressing and straining people, possibly psychologically, certainly financially, but they're not preventing abortions," says Ely. "They seem to be delaying attainment of an abortion because of the time it takes to gather the necessary resources."

The researchers examined the anonymous cases of 3,288 patients who received financial assistance between 2010 and 2015 from the Tiller Memorial Fund, a NNAF-maintained fund that provides financial assistance to patients who are unable to pay the entire cost of an abortion.

In addition to the disparities of cost and distance traveled to get an abortion, a greater percentage of the adolescent population were women of color. Adolescents were also more likely than adults to have reported rape and lack of contraceptive use.

As a social worker, Ely says she sees this health disparity as part of the chaos surrounding health care access. People often don't have insurance coverage; they lack money to pay for an abortion but aren't getting care for pregnancy prevention; they are traveling farther for abortion procedures and paying high out of pocket costs. .

"If we started to make all forms of health care available to people on an equitable basis we would see fewer adolescents seeking pregnancy termination in the first place," she says.

"There's a lot of desperation coming down the pike and the burden for adolescents will become greater if laws change at the federal level."

More information: Gretchen E. Ely et al. Access to choice: Examining differences between adolescent and adult abortion fund service recipients, *Health & Social Care in the Community* (2018). [DOI: 10.1111/hsc.12582](https://doi.org/10.1111/hsc.12582)

Provided by University at Buffalo

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