

Online abortion medication demand highest in states with restrictive abortion policies

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Demand for abortion medication through online telemedicine varies in the United States, according to new peer-reviewed research from the LBJ School of Public Affairs at The University of Texas at Austin published in the *American Journal of Public Health*.

During a 10-month period, 6,022 people living in the United States requested abortion medications from an online service. Requests came from all 50 states, but states with restrictive abortion policy environments tended to have higher volumes of requests than states with supportive abortion policy environments.

Overall, 76% of requests came from people living in states with restrictive abortion policy climates. The highest rate of requests came from Mississippi (24.9 per 100,000 women of reproductive age), followed by Louisiana, Alabama, Tennessee and Texas. Twenty-four percent of requests came from women living in states considered to have supportive abortion policy climates, with the lowest rate of requests coming from New Hampshire.

The authors analyzed the consultation forms of U.S. residents requesting abortion medications from online abortion telemedicine service Women on Web (WoW) between Oct. 15, 2017, and Aug. 15, 2018. WoW is a nonprofit organization that provides abortion medications to people living in countries where safe abortion is unavailable. The service does not send abortion medications to the U.S., but nonetheless receives requests from U.S. residents. The consultation forms included



information about demographic characteristics, medical history and motivations for seeking abortion medications online.

The authors found that U.S. residents making requests to WoW cited difficulty accessing <u>clinical care</u> and personal preferences as reasons for seeking abortion medications online.

"In both states that have passed many abortion restrictions and states that have passed fewer, people are motivated by a combination of barriers to clinic access and a preference for at-home care," said Abigail Aiken, lead author on the study and assistant professor of public affairs at the LBJ School.

However, the specific types of barriers experienced differ according to state policy environment. In states with more restrictions, legal barriers to clinic access, such as waiting periods, and the cost of in-clinic abortion care are more commonly experienced than in supportive states.

"These results suggest that state policies restricting access to abortion have made it harder for some people to access care in the clinic setting, and so they look online for alternatives," Aiken said.

In terms of preferences, privacy was the most important factor in both types of state policy environments.

Although little is known about the experiences of those who use online pharmacy sites, online telemedicine abortion services have demonstrated high levels of safety and effectiveness.

According to the authors, the main study limitation is the inability to capture all demand for <u>abortion</u> medications from other types of online sources, such as online pharmacies, and from other pathways, such as pharmacies in Mexico.



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