

#WeCount Report April 2022 to December 2022 Released April 11, 2023

Note: This is the second in a series of reports. Please check back at www.SocietyFP.org/WeCount for past and future reports. Cite this report using the

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Introduction

#WeCount is a national abortion reporting effort that aims to capture the shifts in abortion access by state following the June 24, 2022 *Dobbs v Jackson's Women's Health Organization* Supreme Court decision. The *Dobbs* decision overturned *Roe v Wade*, removing the federal protection that *Roe* had provided since 1973, which permitted abortion in all US states until fetal viability. In the wake of the *Dobbs* decision, many states have implemented total abortion bans and/or other extreme restrictions on abortion care, with restrictions that carry civil and criminal penalties for those that facilitate abortion. In some states, new abortion restrictions have been litigated in court, resulting in week-by-week changes to the legal status of abortion, creating confusion and abortion care churn. Some states have passed protective legislation with the aim of increasing access and protecting providers. In still other states, the enforceability of pre-Roe abortion restrictions remains unclear, but abortion providers have suspended care due to fear of criminal persecution. Given the shifts in where people will obtain abortion care in the months following the decision, this national reporting study measures decreases and increases in abortion provision by clinicians in each state.

#WeCount previously reported on the number of abortions from April 2022 to August 2022 nationally, per month by state, restrictiveness level, and geographic region. We now have more complete data for the period of April through December 2022. The improved completeness of reporting means that numbers in some states for April through August have been revised from our previous report. This report documents the number of abortions from April 2022 to December 2022, by state and restrictiveness level. The data includes abortions provided by clinics, private medical offices, hospitals, and virtual-only clinics (ie, clinics that only provide telehealth abortions) in the US known to offer abortion care during the period of study. This report does not reflect any self-managed abortions, defined as any attempt to end a pregnancy outside the formal healthcare system, including using medications, herbs or something else, or obtaining pills from friends or online without clinical assistance. However, this report does include telehealth abortions provided by virtual-only clinics in states where it is permitted by law.

These data reflect the changing circumstances of abortion provision in the US and can be used by healthcare systems, public health practitioners, and policy makers so that their decisions can be informed by evidence.

National findings

To understand the effects of the *Dobbs* decision, we compared data from months before the decision, April-May, as our baseline, to data from the months after the decision, July through December 2022. Across the US, we found:

- Since the *Dobbs* decision, compared to the average monthly number of abortions observed in the pre-Dobbs period, there were 32,260 cumulative fewer abortions from July to December (Table 1).
- In the six months following the *Dobbs* decision, an average of 5,377 fewer abortions have been provided in the US each month.
- While the decrease in the number of abortions is not linear month-to-month, in every month from July to December there were fewer abortions than the number reported in April 2022 (Table 3).
- Compared to April, there were 4,130 fewer abortions in July, 1,670 fewer in August, 7,430 fewer in September, 7,210 fewer in October, 9,970 fewer in November, and 1,850 fewer in December (Table 3). The national abortion rate decreased from 13.2 per 1,000 women of reproductive age in the month April to 12.3 per 1,000 women for the monthly average of abortions in the six months following the *Dobbs* decision.
- Notably, while the overall number of abortions decreased, abortions provided by virtual clinic telehealth providers increased from 3,610 in April 2022 (4% of all abortions), before the decision, to 8,540 in December (11% of all abortions). This change represents an increase of 137% in the number of abortions provided from virtual-only services, comparing April and December 2022 (Table 4).
- Telehealth abortions provided by virtual clinics have increased every month since April 2022 and by December, represent 9% of all abortions across the post-Dobbs 6 months, indicating that a greater percentage of US abortions are taking place by way of virtual-only clinics than before the Dobbs decision.

State restrictiveness findings

The impact of *Dobbs* is different in states based on local abortion policies. Some of these differences are reported below and shown in the Tables.

Abortion bans were in place for most of the six-month period, July to December, in 13 states (Alabama, Arkansas, Idaho, Kentucky, Louisiana, Mississippi, Missouri, Oklahoma, South Dakota, Tennessee, Texas, West Virginia, and Wisconsin).

• The number of abortions provided in states with bans in place decreased to <10 in the six months following *Dobbs* (Table 2).

- Since the *Dobbs* decision, states with bans in place have witnessed a cumulative total of 43,410 fewer people who had abortions (Table 1).
- The 13 states with abortion bans in place had a monthly average of 7,235 fewer abortions after the *Dobbs* decision as compared to pre-*Dobbs* (Table 1).
- While the telehealth services expanded in states where abortion was permitted, that number dropped to <10 by December in states with abortion bans (Table 4).

In the states without abortion bans, the picture of abortion legality varies widely. Some states had severe restrictions, such as 6-week bans, while other states passed laws to protect abortion access. We summarize the findings for these states taken together as a group where abortion was permitted.

- Since the *Dobbs* decision, in states where abortion was permitted, there was a cumulative total of 11,150 more people who had abortions (Table 1).
- States where abortion was permitted offered a monthly average of 1,858 more abortions after the *Dobbs* decision (Table 1).
- Virtual clinics provided 3,590 telehealth abortions in states where abortion was permitted, and this increased to 8,540 by December (Table 4).

Notable state-level findings

The impact of *Dobbs* is different by state. Some of these changes are reported below and all state-level data are shown in Tables 1-4.

States with the largest increases in the total number of abortions provided by a clinician during the six-month period after the Dobbs decision compared to baseline include Florida (7,190 more abortions), Illinois (6,840 more abortions), North Carolina (4,730 more abortions), Colorado (2,580 more abortions), Michigan (2,490 more abortions). Some states that had restrictions in place but were closer in distance to states that banned abortion also experienced surges in number of abortions provided by a clinician; examples include Minnesota (1,820 more abortions) and Kansas (1,240 more abortions). The majority of states where abortion remains legal with few restrictions, especially on the West Coast and in the Northeast, did not experience surges in abortions. While the structure of our data is unable to confirm this, the data suggests that many abortion seekers living in restrictive states may have traveled to other nearby states for care.

States with the largest declines in the number of abortions during the six-month period after the Dobbs decision compared to baseline include Texas (15,540 fewer abortions), Georgia (10,930 fewer abortions), Tennessee (6,560 fewer abortions), Ohio (4,920 fewer abortions), Arizona (4,650 fewer abortions), and Louisiana (4,250 fewer abortions). However, not all of these states had abortion bans. For example, Georgia, Ohio, and Arizona, which had severe restrictions in place during at least some of the six months and did not have total abortion bans, saw major declines in the number of abortions provided. In other words, states that lack bans but that do impose a variety of

restrictions on abortions witnessed far fewer abortions in the months after the *Dobbs* decision compared to prior months.

Since our initial landscape report in October 2022, several states added new bans, which were followed by a major decrease in the number of abortions (Table 2).

- In West Virginia, we observed 90 abortions provided in April 2022. A total abortion ban with only a few exceptions went into effect in September, and by December the monthly estimated number of abortions declined to <10.
- In Tennessee, we observed 1,180 abortions provided in April 2022. A total abortion ban went into effect in August, and by December the monthly estimated number of abortions declined to <10.

In some states, abortion bans, including both total abortion bans and those limiting abortion to six-weeks gestation, were first imposed and then lifted in response to court challenges, contributing to significant volatility in provided abortion over the period. Several states had bans or restrictions on the books that were challenged in courts and ultimately never went in effect (or for only one week in the case of Indiana). These laws and legal battles may have contributed to confusion about the legality of abortion, losses of providers, and/or declines in the number of abortions.

- Indiana had 940 abortions in April before Dobbs, and by December, this number had dropped to 550.
- Arizona provided an average of 1,410 abortions in April. After the Dobbs decision, the number of abortions dropped to 230 in July. By December the number increased to 870, only about half the number of abortions provided pre-Dobbs.

Methods

We developed a database of all clinics, private medical offices, hospitals, and virtual clinic providers in the US known to offer abortion care in early 2022, adding new providers as we became aware. We started with the Abortion Facility Database from Advancing New Standards in Reproductive Health at University of California, San Francisco. We then identified providers who were known to be participating in the Ryan Training program and the Complex Family Planning Fellowship, as well as others identified through outreach from Abortion Finder, the Society of Family Planning, and the Society for Maternal-Fetal Medicine. We then contacted all identified providers, inviting them to report the monthly number of abortions, starting in April 2022, and concluding in July 2023. The Society of Family Planning compensated all providers for their time entering the data. Ultimately, 83% of all providers known to #WeCount agreed to participate in this effort. Facilities known to #WeCount that did not participate in this effort provided an estimated 17% of all abortions in the US.

For this report, providers were asked to share nine months of data. We received all months of data from all abortion providers known to #WeCount in 27 states such that no imputation for missingness was needed. There were some months of unavailable data for 37 participating providers who had previously reported. For these we calculated average percent change in abortion volume among other non-virtual only clinics in the state, and imputed values for clinics with missing months. These 37 clinics were in 6 states.

In 18 states, for abortion counts among providers that did not contribute any months of data, we estimated the number of missing abortions by state using several information sources including the Guttmacher Institute, state health departments, news articles, contacts known to the missing clinics, and knowledge of the abortion volumes by state.

The magnitude of state-level missingness we imputed is provided in the data tables. In this report, we have some updated some totals for April through August since our first report, reflecting both revised data submitted by some clinics, and newly reported data, previously imputed, from providers that have since joined #WeCount.

Monthly state totals are rounded to the nearest 10. If the number of abortions for a given state was zero to nine for a single month, it is either rounded up to 10, or represented as <10 in the table. Thus, any cell <10 could represent zero abortions provided. Telehealth abortions provided by virtual-only clinics were counted as part of the abortion total for the state in which they were prescribed.

We estimated numbers of abortions by state restrictiveness level using two categories (states that banned abortion and states that permitted abortion).² These categories were based on restrictiveness level in the state for the majority (at least four months) of the six-month period, as reported by the New York Times.

To provide an indicator of abortion access nationally, we calculated the number of abortions per 1,000 women of reproductive age. While people of all genders have abortions and not all people who have abortions identify as women, this measure of abortion rate uses the term "women" because it reflects US Census numbers, which designate everyone assigned female at birth as "women."

This research was deemed exempt by Advarra IRB. All major decisions were guided by a Research Steering Committee <u>listed here</u>. This research was sponsored by the Society of Family Planning.

Implications

Trends in the six months after Dobbs

Overall, compared to before the *Dobbs* decision, the monthly number of abortions was lower every month between July and December 2022. Nationally, on average there

were 77,073 abortions per month in the post-*Dobbs* months, as compared to the months before the decision, which had an average of 82,270 (Table 1). This drop signals that many thousands of pregnant people living in states where abortion is banned and restricted were unable to obtain abortion care. The number of abortions in May were similar to those in April. In June, after the leaked draft opinion by Justice Alito, we saw an increase in numbers of abortions in many states, perhaps representing clinics scaling up in anticipation of changes with the *Dobbs* decision. In July, the first full month after the *Dobbs* decision, we saw severe declines in states with bans, meaningful declines in states with restrictions, and small increases in states with few legal restrictions. The national number of abortions decreased again in September and October, and reached the lowest point of the six-month period in November, when we observed 9,970 fewer abortions as compared to April (Table 3).

In April, before *Dobbs*, the total estimated number of abortions (82,450) was higher than previous years. The Guttmacher Institute's abortion provider census reported a monthly average of 77,521 in 2020.³ The increase we saw in April 2022 is consistent with an ongoing upward trend in abortion incidence since 2017.³ Additionally, the increase is supported by research in the US that suggests increasing desire to avoid pregnancy and documents reduced birth rates; an increase in abortion incidence may be explained by economic forces and the COVID-19 pandemic.^{4,5} Thus, the net overall declines in abortion incidence in the US after *Dobbs* are even more striking given that there were trends of increasing abortion rates just before *Dobbs*. While one study found that summer months and December usually have declines in abortion rates,⁶ our data showed a greater number of abortions in August and December than in other months.

In the six months after *Dobbs*, in states that had bans, an estimated 43,410 fewer people obtained abortions. This translates to an average per month, in the six months following the *Dobbs* decision, of 7,235 fewer people who were able to obtain abortions in states with bans, as compared to April. People in states with abortion bans were forced to travel to another state, to delay their abortion, to self-manage their abortion, or to continue a pregnancy they did not want.

In states where abortion was already severely restricted before the *Dobbs* decision, such as Missouri, post-*Dobbs* declines appear to be small changes, because few abortions were occurring in those states before the decision. Similarly, the *post-Dobbs* declines in Texas do not account for the fact that the state already had a six-week ban in place in April, resulting in an underestimate of the true declines seen in that state. Nevertheless, even six months after the Court's decision, the increases in numbers of abortions in states where abortion was permitted did not compensate for the reductions seen in states where abortion was banned.

Data limitations

We are unable to estimate the number of abortions that occurred outside the formal healthcare system, such as via Aid Access or volunteer accompaniment networks in Mexico. Separate research estimates the number of requests to Aid Access for abortion

medications were about 6,500 per month.⁸ However, it is unknown how many of these requests were fulfilled, how many were received, or how many were actually taken. Thus, we are unable to estimate how many pregnant people self-managed their abortions versus carried to term. Notably, totals of pills requested, while a critical signal of interest in abortion, are not the same as the number of abortions that occurred and should not be combined with the total number of abortions reported via #WeCount.

Second, our findings are all reported at the level of the state, so we cannot describe how individual clinics experienced increases or decreases within a single state. Observing the raw data, it is clear that the trends we report at the state level are not universally experienced by each clinic; put plainly, within a state, one clinic may be experiencing decreases in abortions while a neighboring clinic may be experiencing large increases. Similarly, we imputed, or estimated, 30% or more of the abortions in five states and DC, and four of these states (Florida, New Jersey, New York, Virginia) provided 2,000 or more abortions per month. In eight states we imputed 10-29% of abortions. Our abortion counts for states where we imputed abortion numbers for some facilities are likely less precise than those for states for which we have complete data. Finally, we did not account for seasonality-related changes in abortion volume, which usually means a decline in summer months and in December.⁶ Thus, it is imperative to reflect on month-to-month shifts and continue to collect and report on this data throughout 2023.

Public health implications

The greatest declines in the numbers of abortion occurred in the same states with the greatest structural and social inequities in terms of maternal morbidity and mortality and poverty. Thus, the impact of the *Dobbs* decision is not equally distributed. People of color and people working to make ends meet have been impacted the most. This inequity is corroborated by other studies, including one finding that after *Dobbs*, Black, Indigenous, and other people of color experienced the greatest increases in travel time to abortion facilities.⁹

Those unable to overcome travel barriers are likely those with the fewest socioeconomic resources; even small declines in the abortion rate still translate into enormous life impacts for those affected. Highly vulnerable groups who are often unable to travel include: young people, incarcerated people, people on parole with travel limitations, and immigrants. Additionally, people who care for small children or the elderly and those who cannot take time off of work may find it impossible to travel out of state for abortion care. The COVID-19 pandemic and the current economy put people in an even more precarious financial situation further limiting the number of people who have the money to pay for a substantial unexpected healthcare expense.

Substantial research has documented grave consequences of not being able to obtain a wanted abortion that persist for years. Compared to people who receive desired abortions, those who seek but are unable to obtain a desired abortion experience a variety of negative outcomes, including increased economic insecurity, 10,11 poorer physical health, 12,13 and continued exposure to violence from the man involved in the

pregnancy.¹⁴ Thus, we must resolve to keep our attention on the impacts of *Dobbs* on the thousands of people who were unable to obtain abortions in the first six months after the decision, as well as those who will certainly be impacted in the future.

Table 1. Summary of Pre-Post *Dobbs* changes

	Pre-Dobbs monthly average number of abortions, April and May	Post-Dobbs monthly average number of abortions, July through Dec	Cumulative sum of differences, all post- Dobbs months compared to April	Average monthly difference in post-Dobbs months compared to April
All US state totals	82,270	77,073	-32,260	-5,377
Alabama	635	<10	-3,900	-650
Alaska	115	133	140	23
Arizona*	1,490	635	-4,650	-775
Arkansas	315	<10	-1,740	-290
California*	13,100	13,082	-170	-28
Colorado*	1,610	2,000	2,580	430
Connecticut	905	903	80	13
Delaware	195	255	390	65
District of Columbia***	895	857	-320	-53
Florida****	6,150	7,348	7,190	1,198
Georgia*	4,235	2,558	-10,930	-1,822
Hawaii	225	267	160	27
Idaho	170	50	-720	-120
Illinois**	5,565	6,730	6,840	1,140
Indiana**	910	775	-990	-165
Iowa	375	332	-290	-48
Kansas	960	1,177	1,240	207
Kentucky	345	47	-1,580	-263
Louisiana	785	52	-4,250	-708
Maine	210	210	60	10
Maryland**	2,720	2,872	1,030	172

Table 1, continued. Summary of Pre-Post *Dobbs* changes

	Pre-Dobbs monthly average number of abortions, April and May	Post-Dobbs monthly average number of abortions, July through Dec	Cumulative sum of differences, all post- Dobbs months compared to April	Average monthly difference in post-Dobbs months compared to April
Massachusetts	1,510	1,607	220	37
Michigan**	2,610	3,045	2,490	415
Minnesota	870	1,183	1,820	303
Mississippi	350	<10	-2,100	-350
Missouri	10	<10	-50	-8
Montana	175	185	90	15
Nebraska	195	213	80	13
Nevada**	1,085	1,400	1,620	270
New Hampshire	185	182	-110	-18
New Jersey***	4,015	4,118	470	78
New Mexico**	1,180	1,422	1,390	232
New York***	8,995	8,997	1,240	207
North Carolina**	3,215	3,978	4,730	788
North Dakota	100	17	-440	-73
Ohio	2,000	1,200	-4,920	-820
Oklahoma	310	<10	-2,880	-480
Oregon	820	972	790	132
Pennsylvania	2,770	2,938	230	38
Rhode Island	300	265	-270	-45
South Carolina***	610	380	-1,800	-300
South Dakota	30	<10	-120	-20
Tennessee	1,195	87	-6,560	-1,093
Texas	2,720	10	-15,540	-2,590

Table 1, continued. Summary of Pre-Post Dobbs changes

	Pre-Dobbs monthly average number of abortions, April and May	Post-Dobbs monthly average number of abortions, July through Dec	Cumulative sum of differences, all post- Dobbs months compared to April	Average monthly difference in post-Dobbs months compared to April
Utah	360	307	-80	-13
Vermont	105	110	60	10
Virginia***	2,165	2,210	300	50
Washington	1,735	1,898	830	138
West Virginia	100	18	-430	-72
Wisconsin**	605	<10	-3,540	-590
Wyoming	40	48	50	8
Restrictiveness level				
Banned	7,570	265	-43,410	-7,235
Permitted	74,700	76,808	11,150	1,858

Numbers have been corrected as needed for missingness with imputation. For states marked * there is less than 10% imputation, ** 10-29% imputation, *** 30-49%, **** 50-69% imputation. States with no notation by their name have no imputation for missingness.

States that banned abortion: Alabama, Arkansas, Idaho, Kentucky, Louisiana, Mississippi, Missouri, Oklahoma, South Dakota, Tennessee, Texas, West Virginia, Wisconsin

Table 2. Estimated number of abortions by state and month, April-December 2022

	April	May	June	July	Aug	Sept	Oct	Nov	Dec
All US state totals	82,450	82,090	85,130	78,320	80,780	75,020	75,240	72,480	80,600
Alabama	650	620	520	<10	<10	<10	<10	<10	<10
Alaska	110	120	130	100	140	150	130	130	150
Arizona*	1,410	1,570	1,250	230	770	650	450	840	870
Arkansas	290	340	260	<10	<10	<10	<10	<10	<10
California*	13,110	13,090	13,710	13,360	13,860	12,160	12,180	12,390	14,540
Colorado*	1,570	1,650	1,770	1,930	2,170	1,960	1,920	1,930	2,090
Connecticut	890	920	940	960	920	850	850	880	960
Delaware	190	200	230	200	230	250	260	290	300
District of Columbia***	910	880	860	860	930	830	890	810	820
Florida****	6,150	6,150	6,700	6,700	7,470	6,940	7,660	7,060	8,260
Georgia*	4,380	4,090	4,430	4,180	1,880	2,130	2,250	2,560	2,350
Hawaii	240	210	250	210	300	280	260	280	270
Idaho	170	170	190	150	150	<10	<10	<10	<10
Illinois**	5,590	5,540	6,160	6,770	7,230	6,610	6,580	6,290	6,900
Indiana**	940	880	880	1,110	1,080	730	490	690	550
Iowa	380	370	390	360	280	320	310	350	370
Kansas	970	950	930	930	1,280	1,150	1,260	1,130	1,310
Kentucky	310	380	300	280	<10	<10	<10	<10	<10
Louisiana	760	810	540	310	<10	<10	<10	<10	<10
Maine	200	220	230	230	240	210	200	190	190
Maryland**	2,700	2,740	2,730	2,730	2,760	2,830	2,860	2,850	3,200
Massachusetts	1,570	1,450	1,550	1,580	1,580	1,540	1,510	1,770	1,660
Michigan**	2,630	2,590	2,920	3,030	3,210	3,010	3,080	2,910	3,030
Minnesota	880	860	950	1,090	1,160	1,180	1,220	1,250	1,200
Mississippi	350	350	470	<10	<10	<10	<10	<10	<10

Table 2, continued. Estimated number of abortions by state and month, April-December 2022

	April	May	June	July	Aug	Sept	Oct	Nov	Dec
Missouri	10	10	10	<10	10	<10	<10	<10	<10
Montana	170	180	170	160	220	170	200	190	170
Nebraska	200	190	210	210	260	230	240	200	140
Nevada**	1,130	1,040	1,290	1,170	1,510	1,340	1,440	1,370	1,570
New Hampshire	200	170	200	190	210	180	160	160	190
New Jersey***	4,040	3,990	4,070	4,110	4,430	3,840	3,890	4,130	4,310
New Mexico**	1,190	1,170	1,420	1,420	1,440	1,430	1,370	1,420	1,450
New York***	8,790	9,200	9,800	9,330	10,160	9,300	9,080	7,330	8,780
North Carolina**	3,190	3,240	3,210	3,890	4,360	4,060	3,840	3,680	4,040
North Dakota	90	110	130	100	<10	<10	<10	<10	<10
Ohio	2,020	1,980	1,810	800	770	1,010	1,420	1,410	1,790
Oklahoma	480	140	<10	<10	<10	<10	<10	<10	<10
Oregon	840	800	910	870	1,070	960	960	960	1,010
Pennsylvania	2,900	2,640	2,900	3,300	3,080	3,000	2,690	2,490	3,070
Rhode Island	310	290	260	280	290	280	310	200	230
South Carolina***	680	540	420	140	300	650	490	230	470
South Dakota	20	40	30	<10	<10	<10	<10	<10	<10
Tennessee	1,180	1,210	1,030	270	250	<10	<10	<10	<10
Texas	2,600	2,840	2,500	50	10	<10	<10	<10	<10
Utah	320	400	360	270	310	320	280	320	340
Vermont	100	110	110	110	120	110	100	110	110
Virginia***	2,160	2,170	2,380	2,540	2,280	2,310	2,380	1,820	1,930
Washington	1,760	1,710	1,940	1,730	1,940	1,990	1,980	1,820	1,930
West Virginia	90	110	110	30	80	<10	<10	<10	<10
Wisconsin**	590	620	520	<10	<10	<10	<10	<10	<10
Wyoming	40	40	50	50	40	60	50	40	50

Table 2, continued. Estimated number of abortions by state and month, April-December 2022

	April	May	June	July	Aug	Sept	Oct	Nov	Dec
Restrictiveness level									
Banned	7,500	7,640	6,480	1,090	500	<10	<10	<10	<10
Permitted	74,950	74,450	78,650	77,230	80,280	75,020	75,240	72,480	80,600

All numbers in Table 2 have been rounded the nearest 10. Numbers 0-9 have been rounded up to 10 or are represented by <10. Numbers have been corrected as needed for missingness with imputation. For states marked * there is less than 10% imputation, ** 10-29% imputation, ** 30-49%, **** 50-69% imputation. States with no notation by their name have no imputation for missingness.

States that banned abortion: Alabama, Arkansas, Idaho, Kentucky, Louisiana, Mississippi, Missouri, Oklahoma, South Dakota, Tennessee, Texas, West Virginia, Wisconsin

Table 3. Estimated change in the number of abortions per month post-Dobbs compared to April 2022, by state

	Difference between April and July	Difference between April and August	Difference between April and I September	Difference between April and October	Difference between April and k November	Difference between April and December
	N	N	N	N	N	N
All US state totals	-4,130	-1,670	-7,430	-7,210	-9,970	-1,850
Alabama	-650	-650	-650	-650	-650	-650
Alaska	-10	30	40	20	20	40
Arizona*	-1,180	-640	-760	-960	-570	-540
Arkansas	-290	-290	-290	-290	-290	-290
California*	250	750	-950	-930	-720	1,430
Colorado*	360	600	390	350	360	520
Connecticut	70	30	-40	-40	-10	70
Delaware	10	40	60	70	100	110
District of Columbia***	-50	20	-80	-20	-100	-90
Florida****	550	1,320	790	1,510	910	2,110
Georgia*	-200	-2,500	-2,250	-2,130	-1,820	-2,030
Hawaii	-30	60	40	20	40	30
Idaho	-20	-20	-170	-170	-170	-170
Illinois**	1,180	1,640	1,020	990	700	1,310
Indiana**	170	140	-210	-450	-250	-390
Iowa	-20	-100	-60	-70	-30	-10
Kansas	-40	310	180	290	160	340
Kentucky	-30	-310	-310	-310	-310	-310
Louisiana	-450	-760	-760	-760	-760	-760
Maine	30	40	10	0	-10	-10
Maryland**	30	60	130	160	150	500
Massachusetts	10	10	-30	-60	200	90

Table 3, continued. Estimated change in the number of abortions per month post-Dobbs compared to April 2022, by state

	Difference between April and	Difference between April and	Difference between April and I	Difference between April and	Difference between April and	Difference between April and
	July	August	September	October	November	December
-	N	N	N	N	N	N
Michigan**	400	580	380	450	280	400
Minnesota	210	280	300	340	370	320
Mississippi	-350	-350	-350	-350	-350	-350
Missouri	-10	0	-10	-10	-10	-10
Montana	-10	50	0	30	20	0
Nebraska	10	60	30	40	0	-60
Nevada**	40	380	210	310	240	440
New Hampshire	-10	10	-20	-40	-40	-10
New Jersey***	70	390	-200	-150	90	270
New Mexico**	230	250	240	180	230	260
New York***	540	1,370	510	290	-1,460	-10
North Carolina**	700	1,170	870	650	490	850
North Dakota	10	-90	-90	-90	-90	-90
Ohio	-1,220	-1,250	-1,010	-600	-610	-230
Oklahoma	-480	-480	-480	-480	-480	-480
Oregon	30	230	120	120	120	170
Pennsylvania	400	180	100	-210	-410	170
Rhode Island	-30	-20	-30	0	-110	-80
South Carolina***	-540	-380	-30	-190	-450	-210
South Dakota	-20	-20	-20	-20	-20	-20
Tennessee	-910	-930	-1,180	-1,180	-1,180	-1,180
Texas	-2,550	-2,590	-2,600	-2,600	-2,600	-2,600
Utah	-50	-10	0	-40	0	20
Vermont	10	20	10	0	10	10
Virginia***	380	120	150	220	-340	-230

Table 3, continued. Estimated change in the number of abortions per month post-Dobbs compared to April 2022, by state

	Difference between April and be July	Difference etween April and b August	Difference between April and b September	Difference etween April and b October	Difference etween April and b November	Difference etween April and December
	N	N	N	N	N	N
Washington	-30	180	230	220	60	170
West Virginia	-60	-10	-90	-90	-90	-90
Wisconsin**	-590	-590	-590	-590	-590	-590
Wyoming	10	0	20	10	0	10
Restrictiveness level						
Banned	-6,410	-7,000	-7,500	-7,500	-7,500	-7,500
Permitted	2,280	5,330	70	290	-2,470	5,650

All numbers in Table 3 have been rounded the nearest 10. Numbers 0-9 have been rounded up to 10 or are represented by <10. Numbers have been corrected as needed for missingness with imputation. For states marked * there is less than 10% imputation, ** 10-29% imputation, *** 30-49%, **** 50-69% imputation. States with no notation by their name have no imputation for missingness.

States that banned abortion: Alabama, Arkansas, Idaho, Kentucky, Louisiana, Mississippi, Missouri, Oklahoma, South Dakota, Tennessee, Texas, West Virginia, Wisconsin

Table 4. Estimated monthly number of abortions provided by virtual-only clinics by state and state restrictiveness level, April-December 2022

	April	May	June	July	August	September	October	November	December
All US state totals	3,610	4,380	5,180	5,600	7,160	6,690	6,800	7,470	8,540
Alabama	<10	<10	<10	<10	<10	<10	<10	<10	<10
Alaska	10	10	20	20	40	40	30	40	40
Arizona	<10	<10	<10	<10	<10	<10	<10	<10	<10
Arkansas	<10	<10	<10	<10	<10	<10	<10	<10	<10
California	690	850	1,010	1,110	1,450	1,330	1,340	1,430	1,670
Colorado	220	300	350	490	600	550	570	560	590
Connecticut	50	60	60	60	110	110	100	130	160
Delaware	20	40	40	40	70	60	60	60	60
District of Columbia	30	30	40	60	70	50	30	30	40
Florida	<10	<10	<10	<10	<10	<10	<10	<10	<10
Georgia	550	520	490	320	<10	<10	<10	<10	<10
Hawaii	10	10	20	20	60	40	30	30	50
Idaho	20	30	40	50	80	<10	<10	<10	<10
Illinois	330	420	520	520	680	620	570	670	760
Indiana	<10	<10	<10	<10	<10	<10	<10	<10	<10
Iowa	20	10	10	20	20	20	30	40	40
Kansas	<10	<10	<10	<10	<10	<10	<10	<10	10
Kentucky	<10	<10	<10	<10	<10	<10	<10	<10	<10
Louisiana	<10	<10	<10	<10	<10	<10	<10	<10	<10
Maine	10	10	20	20	30	30	30	50	40

Table 4, continued. Estimated monthly number of abortions provided by virtual clinics by state and state restrictiveness level, April-December 2022

	April	May	June	July	August	September	October	November	December
Maryland	120	120	150	150	250	240	250	310	370
Massachusetts	70	100	120	130	180	150	200	280	260
Michigan	<10	120	190	200	410	410	430	460	560
Minnesota	170	190	180	220	210	240	260	240	250
Mississippi	<10	<10	<10	<10	<10	<10	<10	<10	<10
Missouri	<10	<10	<10	<10	<10	<10	<10	<10	<10
Montana	40	30	40	40	40	40	40	30	30
Nebraska	<10	<10	<10	<10	<10	<10	<10	<10	<10
Nevada	120	150	180	190	290	320	320	320	370
New Hampshire	<10	<10	<10	10	30	20	30	40	40
New Jersey	140	180	160	230	380	360	380	440	530
New Mexico	200	230	350	430	400	380	370	370	380
New York	370	460	510	510	790	680	700	780	1,000
North Carolina	<10	<10	<10	<10	<10	<10	<10	<10	<10
North Dakota	<10	<10	<10	<10	<10	<10	<10	<10	<10
Ohio	<10	<10	<10	<10	<10	<10	<10	<10	<10
Oklahoma	<10	<10	<10	<10	<10	<10	<10	<10	<10
Oregon	30	60	80	80	130	130	120	150	160
Pennsylvania	<10	<10	10	40	50	50	60	60	70
Rhode Island	20	20	30	30	20	20	30	30	30
South Carolina	<10	<10	<10	<10	<10	<10	<10	<10	<10
South Dakota	<10	<10	<10	<10	<10	<10	<10	<10	<10
Tennessee	<10	<10	<10	<10	<10	<10	<10	<10	<10
Texas	<10	<10	<10	<10	<10	<10	<10	<10	<10
Utah	<10	<10	<10	<10	<10	<10	<10	<10	<10

Table 4, continued. Estimated monthly number of abortions provided by virtual clinics by state and state restrictiveness level, April-December 2022

	April	May	June	July	August	September	October	November	December
Vermont	20	10	20	20	20	20	20	20	30
Virginia	170	190	220	300	410	450	470	550	580
Washington	140	190	280	250	310	280	290	320	380
West Virginia	<10	<10	<10	<10	<10	<10	<10	<10	<10
Wisconsin	<10	<10	<10	<10	<10	<10	<10	<10	<10
Wyoming	40	40	40	40	30	50	40	30	40
Restrictiveness level									
Banned	20	30	40	50	80	<10	<10	<10	<10
Permitted	3,590	4,350	5,140	5,550	7,080	6,690	6,800	7,470	8,540

Abortions provided by virtual-only clinics are counted as having occurred in the state where the medications were prescribed.

All numbers in Table 4 have been rounded the nearest 10. Numbers 0-9 have been rounded up to 10 or are represented by <10.

States that banned abortion: Alabama, Arkansas, Idaho, Kentucky, Louisiana, Mississippi, Missouri, Oklahoma, South Dakota, Tennessee, Texas, West Virginia, Wisconsin

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