

Slusky, David

**Article**

## The Cost of Restricting Abortion Access

Intereconomics

*Suggested Citation:* Slusky, David (2022) : The Cost of Restricting Abortion Access, Intereconomics, ISSN 1613-964X, Springer, Heidelberg, Vol. 57, Iss. 3, pp. 199-200, <https://doi.org/10.1007/s10272-022-1055-4>

This Version is available at:

<https://hdl.handle.net/10419/262963>

**Standard-Nutzungsbedingungen:**

Die Dokumente auf EconStor dürfen zu eigenen wissenschaftlichen Zwecken und zum Privatgebrauch gespeichert und kopiert werden.

Sie dürfen die Dokumente nicht für öffentliche oder kommerzielle Zwecke vervielfältigen, öffentlich ausstellen, öffentlich zugänglich machen, vertreiben oder anderweitig nutzen.

Sofern die Verfasser die Dokumente unter Open-Content-Lizenzen (insbesondere CC-Lizenzen) zur Verfügung gestellt haben sollten, gelten abweichend von diesen Nutzungsbedingungen die in der dort genannten Lizenz gewährten Nutzungsrechte.

**Terms of use:**

*Documents in EconStor may be saved and copied for your personal and scholarly purposes.*

*You are not to copy documents for public or commercial purposes, to exhibit the documents publicly, to make them publicly available on the internet, or to distribute or otherwise use the documents in public.*

*If the documents have been made available under an Open Content Licence (especially Creative Commons Licences), you may exercise further usage rights as specified in the indicated licence.*



<https://creativecommons.org/licenses/by/4.0/>

# The Cost of Restricting Abortion Access

On May 2, 2022, an unprecedented leaked draft U.S. Supreme Court opinion was published. If it ends up being the final decision, it would overturn the nearly 50-year old *Roe v. Wade* decision and the 30-year old *Planned Parenthood v. Casey* decision, which recognized a national constitutional right for a pregnant individual to have an abortion. Language from particular justices in both recent oral arguments and in the draft itself suggests a willful disregard of a plethora of scientific data.

First, a few salient facts about abortion in the United States. In 2011, 45% of pregnancies were unintended; 42% of these unintended pregnancies ended in abortion (Finer and Zolna, 2016). And 24% of American women will have had an abortion by age 45 (Jones and Jerman, 2017). Even before this potential leaked decision and the state-level policies in the past year that spurred it, abortion access had been decreasing in the U.S. for over a decade, including numerous clinic closures. An increase in travel distance from zero to 100 miles to the nearest abortion facility reduces the abortion rate by 21% and increases the birth rate by 2.4%, according to Myers (2021). Myers (2022) extrapolated from these results what will happen if the draft decision comes into effect: 100,000 women will seek abortions and be unable to reach a provider, and 75,000 of them will give birth.

As an economist, I worry about the broader costs of these missed abortions. The best evidence comes from the Turnaway Study (Dobkin et al., 2014), which collected data on nearly 1,000 women who visited 30 abortion facilities across the US from 2008 to 2010. Some of their pregnancies were before the gestational age cut off and so could receive an abortion, whereas others were “turned away” as their pregnancies were too far along. While there are many papers published as part of the Turnaway Study, the most salient economics paper matches those 1,000 women with their credit bureau files from Experian. From this data, we learn that before seeking an abortion the women who were turned away were ex ante similar to those who were not (validating this natural experiment), and that those turned away had worse household financial situations for years to come (Miller et al., 2020).

As a healthcare economist, I also worry about the non-reproductive consequences. Cecile Richards, then president of Planned Parenthood Federation of America (2014), often said, “For many Americans, our doctors and nurses are the only health care providers they see.” My own work has investigated the relationship between access to women’s health clinics and preventive care in: Texas, Wisconsin and Ohio. We found that a 100-mile increase in driving distance to the nearest clinic (which may be the case when a clinic closed) decreases the annual utilization rates of clinical breast exams by 11%, mammograms by 18% and Pap tests by 14%. These effects are larger for women of lower educational attainment and for ethnic minorities (Lu and Slusky, 2016).

An amicus brief filed by 154 economists summarized not just this broad literature but also the causal inference methods that recently won a Nobel Prize. Unexpectedly, the brief came up in the Supreme Court’s oral arguments (*Dobbs v. Jackson Women’s Health Organization*, 2021b):

Julie Rikelman (Lawyer from the Center for Reproductive Rights): In fact, the data has been very clear over the last 50 years that abortion has been critical to women’s equal participation in society. It’s been critical to their health, to their lives, their ability –

Chief Justice John Roberts: I’m sorry, what kind of data is that?

© The Author(s) 2022. Open Access: This article is distributed under the terms of the Creative Commons Attribution 4.0 International License (<https://creativecommons.org/licenses/by/4.0/>).

Open Access funding provided by ZBW – Leibniz Information Centre for Economics.

David Slusky, University of Kansas, Lawrence, USA.

Rikelman: I would refer the court to the brief of the economists in this case, your honor. It compiles data showing studies based on actually on causal inference, showing the legalization of abortion and have these benefits for women in society. Again, those benefits are clear for education, for the ability to pursue a profession, for the ability to –

Chief Justice Roberts: Putting the data aside...

This exchange to me really exemplifies my key points here. First, there is an enormous wealth of economic research that shows that access to abortion and reproductive health care has broad economic benefits. Second, many of those who sit on the United States Supreme Court seem intentionally unaware of this research. Justice Alito, author of the leaked draft, writes that:

When a concrete reliance interest is asserted, courts are equipped to evaluate the claim, but assessing the novel and intangible form of reliance endorsed by the Casey plurality is another matter. That form of reliance depends on an empirical question that is hard for anyone—and in particular, for a court—to assess, namely, the effect of the abortion right on society and in particular on the lives of women.

Professor Myers summarized this disregard of scientific data as follows: “I think we need the data. And we have it. And we gave it to them...And it just seems to not be reflected in that draft” (Kolhatkar, 2022).

Legislators, policymakers, judges and justices are free to say that economic data and conclusions are outweighed by other factors. But it is not intellectually honest to disregard these conclusions – to “put the data aside” or to claim that tangible, quantitative questions are “hard for anyone to assess”. It is not hard. Economists have done the work and presented the results. Intellectually honest and morally consistent individuals in positions of power have an obligation to own the consequences of policy they make or make other policy that mitigates those consequences. Willfully ignoring those consequences is reprehensible.

---

## References

- Dobbs v. Jackson Women’s Health Organization (2021a), Brief of Amici Curiae Economists in Support of Respondents.
- Dobbs v. Jackson Women’s Health Organization (2021b, 1 December), Oral Argument.
- Dobkin, L. M., H. Gould, R. E. Barar, M. Ferrari, E. I. Weiss and D. Greene Foster (2014), Implementing a Prospective Study of Women Seeking Abortion in the United States: Understanding and Overcoming Barriers to Recruitment, *Women’s Health Issues*, 24(1), e115-e123.
- Ellison, J., K. Griffith, M. Thursby, D. J. G. Slusky, J. Bor (2021), The Impact of Driving Time to Family Planning Facilities on Preventive Service Use in Ohio, *American Journal of Preventive Medicine*, 60(4), 542-545.
- Finer, L. B. and M. R. Zolna (2016), Declines in Unintended Pregnancy in the United States, 2008-2011, *New England Journal of Medicine*, 374, 843-852.
- Jones, R. K. and J. Jerman (2017), Population Group Abortion Rates and Lifetime Incidence of Abortion: United States, 2008–2014, *American Journal of Public Health*, 107(12), 1904-1909.
- Kolhatkar, S. (2022, 11 May), The Devastating Economic Impacts of an Abortion Ban, *The New Yorker*.
- Lu, Y. and D. J. G. Slusky (2016), The Impact of Women’s Health Clinic Closures on Preventive Care, *American Economic Journal: Applied Economics*, 8(3), 100-124.
- Miller, S., L. R. Wherry and D. Greene Foster(2022), The Economic Consequences of Being Denied an Abortion, *American Economic Journal: Economic Policy*, (Forthcoming).
- Myers, C. (2021), Measuring the Burden: The Effect of Travel Distance on Abortions and Births, *IZA Discussion Paper Series*, 14556.
- Myers, C. (2022), @Caitlin\_K\_Myers, Tweets (Twitter profile), [https://twitter.com/Caitlin\\_K\\_Myers/status/1522540905881903104](https://twitter.com/Caitlin_K_Myers/status/1522540905881903104) (18 May 2022).
- Planned Parenthood Federation of America (2014, 30 January), Statement by Cecile Richards, President of Planned Parenthood Federation of America, on Passage of Pence Bill to Eliminate Federal Funding for Planned Parenthood, Press release.
- Slusky, D. J. G. (2017), Defunding women’s health clinics exacerbates Hispanic disparity in preventive care, *Economics Letters*, 156, 61-64.