Abortion Access is at Stake for Nearly Half of U.S. Women and People Who Can Become Pregnant

With the fate of Roe v. Wade in the hands of the U.S. Supreme Court, more than 36 million women of reproductive age live in states where abortion access is at risk.

With the U.S. Supreme Court poised to hear a case this term that could render the constitutional right to an abortion meaningless, new research from Planned Parenthood Federation of America and In Our Own Voice: National Black Women’s Reproductive Justice Agenda shows that nearly half of the women in the United States of reproductive age (18-49) – more than 36 million women, and even more people who can become pregnant – could lose abortion access if the Supreme Court overturns Roe v. Wade.

When this report was last released in 2018, 20 states were primed to ban access to safe, legal abortion should Roe fall, totaling 25 million women of reproductive age. Just three years later, 26 states are now poised to ban abortion – putting at least 11 million more women, trans men, and nonbinary and gender-nonconforming people at risk of losing access to abortion.

According to a Planned Parenthood Federation of America analysis, the states most likely to quickly move to ban abortion after a Supreme Court decision overturning Roe are:

1. Alabama
2. Arkansas*
3. Arizona
4. Florida†
5. Georgia
6. Idaho*
7. Indiana
8. Iowa†
9. Kentucky*
10. Louisiana*
11. Michigan
12. Mississippi*
13. Missouri*
14. Montana†
15. Nebraska
16. North Dakota*
17. Ohio
18. Oklahoma*
19. South Carolina
20. South Dakota*
21. Tennessee*
22. Texas*
23. Utah*
24. West Virginia
25. Wisconsin
26. Wyoming

* Trigger ban
† State Constitutional protections exist, but risk remains

Some of these states have existing abortion bans that could quickly be implemented after, or even immediately triggered by such a decision. Others have hostile political climates that leave abortion rights at risk, even with the state’s existing constitutional protections.
We are at a crisis moment for abortion access. This is the culmination of anti-abortion politicians and protesters’ decades-long plan to outlaw abortion. Steadily, they’ve pushed harsher abortion restrictions, defunded essential community health centers and programs, and stacked the federal courts to ensure these policies stay in place.

In many of the 26 states poised to move to ban abortion if Roe is overturned, abortion is already a right in name only. For far too many people, abortion is nearly inaccessible due to an onslaught of draconian and medically unnecessary state restrictions and a shortage of abortion providers.

- **12 states have trigger laws** that state governments could use to ban abortion immediately after a Supreme Court decision overruling or undermining Roe: Arkansas, Idaho, Kentucky, Louisiana, Mississippi, Missouri, North Dakota, Oklahoma, South Dakota, Tennessee, Texas, and Utah.

- **Nine states have pre-Roe abortion bans** that could be enforced if Roe falls: Alabama, Arkansas, Arizona, Michigan, Mississippi, Oklahoma, Texas, Wisconsin, and West Virginia. Post-Roe abortion bans that have been blocked by the courts – including those in Iowa, Georgia, Ohio, and South Carolina – could swiftly be allowed to take effect as well.

- **Even in states with constitutional protections** (Florida, Iowa, and Montana) or supportive governors (Michigan and Wisconsin), abortion access is still at risk due to historically hostile legislatures, pre-Roe abortion bans, and shifting judicial make-ups.

- **Many of these states already impose** restrictions for the purpose of making abortion harder to access – including medically unnecessary waiting periods, forced ultrasounds, biased counseling, and bans on safe abortion methods.

In the coming months, the Supreme Court could allow states to ban abortion altogether. During the term that begins on Monday, October 4, the Supreme Court will rule on a pivotal abortion case, *Dobbs v. Jackson Women’s Health Organization*.

The case, a petition to uphold Mississippi’s cruel 15-week abortion ban, could hollow out Roe and upend nearly 50 years of precedent. In fact, the state of Mississippi is now asking the court to overturn both *Roe v. Wade* and *Planned Parenthood v. Casey*.

We’ve already gotten a preview of what a post-Roe world could look like, in the wake of the Supreme Court’s decision to allow Texas’s S.B. 8, a radical bill banning abortion at approximately six weeks, to take effect on September 1. This stunning ruling has left more than 7 million women of reproductive age – 10% of U.S. women of reproductive age – living in what is effectively a post-Roe state, where abortion is virtually inaccessible.

It was the first order issued by the Supreme Court related to abortion since Justice Amy Coney Barrett, the third justice nominated by then-President Donald Trump, was appointed to the bench.
Abortion restrictions already harm Black, Latino, and Indigenous people most, and these communities stand to lose the most if Roe is overturned. This is the direct result of historic racism, ongoing white supremacy, and coercive reproductive policies in our country. Systemic racism in the U.S. health care system creates substantial barriers to accessing care.

For instance, women of color are more likely than white women to live in poverty and have limited access to health care, due to the expense, as well as discriminatory public policy. For many communities of color, abortion is already out of reach, or nearly so.

- The 36 million women, and more trans men, and nonbinary and gender-nonconforming people who would lose access to abortion if Roe is overturned include 5.3 million Black people, 5.7 million Hispanic or Latino people, 1.1 million Asian people, and nearly 340,000 American Indian or Alaska Native people of reproductive age (American Community Survey 2019).

- Those who receive abortions are 28% Black, 25% Hispanic, and 6% AAPI.

- In 2019, nearly one in nine women across the country lived in poverty – and those were disproportionately Black, Latina, or Indigenous women, who experience poverty at twice the rate of non-Hispanic white women.

- Because of economic disparities rooted in racist policies, communities of color are more likely to rely upon federally-funded insurance programs like Medicaid. These insurance programs may not use federal funds to cover abortion because of the Hyde Amendment, a discriminatory restriction in effect for nearly 40 years.

  The majority of abortion patients are forced to pay out-of-pocket for the procedure, which averages around $500 – a significant and unexpected expense for people with low incomes.

- The vast majority of abortion patients, 75%, are people with low incomes, and 49% earn below the federal poverty level (a family of two earning an annual income of $15,730 or less).

- Access to abortion hinges not just on navigating the financial cost of the procedure, but on managing the logistical barriers – child care, time off work, and travel costs – posed by medically unnecessary restrictions like mandatory waiting periods and telemedicine bans.

Right now, we are seeing what a post-Roe world could look like in Texas, where the overwhelming majority of abortion patients are more than six weeks pregnant and must travel out of state for care or carry a pregnancy to term against their will.

- Texas’s abortion ban, S.B. 8, prohibits abortion after approximately six weeks of pregnancy, before many people know they’re pregnant. Six weeks of pregnancy is just two weeks after a person’s missed period – leaving almost no time for patients to secure funding, find a provider, book an appointment, and go through the state’s mandatory counseling, ultrasound, and waiting period.
• **The financial barriers** to getting an abortion will be insurmountable for many Texans. As is the case throughout the United States, decades of racist economic policies have led to a disproportionately high poverty rate for Black and Latino Texans: 19% for Black individuals, and 20% for Latino individuals. Thirty-seven percent of female-headed Texan households live in poverty.

• **In a country where Black women** are three times more likely than white women to die from largely preventable pregnancy-related complications due to racism and discrimination in care, pregnant people will now be forced to carry to term against their will and risk their lives in the process. Texas has one of the worst maternal mortality rates in the United States, which has the worst maternal mortality rate of all high-income countries.

• **S.B. 8’s vigilante enforcement** scheme is rooted in racism and white supremacy and will lead to further targeting of Black and Latino communities – preventing many from seeking care for fear of harassment, violence, and deportation for undocumented people.

• **Even without S.B. 8**, Texans must navigate the state’s numerous restrictions, including bans on public and private insurance coverage of abortion, as well as bans on medication abortion and on the standard method for abortion after approximately 15 weeks of pregnancy.

THE BOTTOM LINE: THE THREAT TO THE CONSTITUTIONAL RIGHT TO AN ABORTION HAS NEVER BEEN GREATER.

It is abundantly clear that we cannot rely on the courts to achieve reproductive justice. Reproductive justice demands that all women, femmes, girls, trans people, nonbinary people, and gender nonconforming people have the right to control their sexuality, gender, work, and reproduction.

That right can only be achieved when they have the complete economic and social power and resources to make healthy decisions about their bodies, families, and communities in all areas of their lives. It is time to support abortion access in all communities, and to support policies that increase access to abortion, rather than decimating people’s most basic rights city by city and state by state.

Methodology note:

All population estimates are based on the U.S. Census Bureau 2019 American Community Survey, which collects data for “male” and “female” participants. These categories are imperfect reflections of the population affected by abortion bans, which is broader than “female” only.