

Reproductive Health Access Project (RHAP)

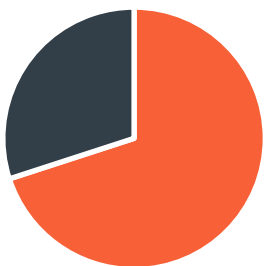
After the overturning of *Roe v. Wade*, we asked, “*How does restricting access to reproductive health care impact economic self-sufficiency?*” Our immediate goal is to inform and educate the public. Our long-term vision is to ensure women can fully participate, prosper and reach their full potential. It is our responsibility to focus on the issues that impact women – especially when those issues affect women’s economic mobility.

We measure the economic impact of restricting abortion access under Senate Bill 23, commonly known as the “Heartbeat Protection Act.” This bill has already been signed into law in Ohio, but is currently blocked while litigation continues.

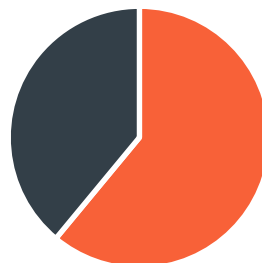
We partnered with researchers at the University of Cincinnati in conducting the statistical analysis for this project. We also collaborated with researchers from the Ohio Policy Evaluation Network and sought feedback on our work from several research and community review groups.

Key Takeaways

- All women experience negative economic outcomes because of restrictions to reproductive health care, regardless of the situation
- For most women – especially those who are low-income – **restrictions to abortion care make it even more difficult to achieve self-sufficiency**
- Whether they travel out of state to receive abortion care or their pregnancy results in birth, women experience lost earnings
- Our analysis finds a greater loss of lifetime earnings for white women (parenting births), but that Black women incur more direct expenses to receive abortion care out-of-state
- Restrictions to abortion access will likely lead to **additional public costs of \$36.1 million per year, but could cost over \$186 million per year**
- Average **additional costs to an individual** who parents in lieu of receiving a wanted abortion is **\$21,994 - \$28,950**



Over 70% of women seeking abortion care have incomes less than 200% FPL, which is less than the income needed for self-sufficiency.



61% of women receiving abortion care have at least one child already.

Costs Considered in Our Analysis

Public Costs:

- Maternity medical costs
- Infant medical costs
- Child medical costs from ages 1-4 years
- Public assistance benefits
- SNAP benefits

Individual Costs for Abortion

Seekers Out of State:

- Lost wages
- Transportation costs
- Child care costs
- Travel costs

Individual Costs for Parenting Births:

- Lifetime earnings loss
- Early care and education

Not yet considered:

- Medical costs of abortion care
- Medical and education costs past age 5
- Cost of raising a child
- Costs of adoption births

Select Findings



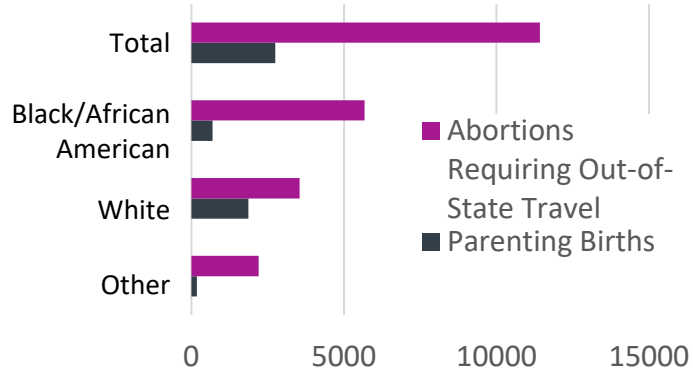
Individuals traveling out-of-state to receive abortion care are estimated to pay an *additional \$184-\$223* if SB 23 is in effect. This does not include the medical costs of abortion care, which can cost between *\$550-\$5,386*.



For each year of births, total costs for individuals and the public are estimated at *\$98.7 – \$118.3 million dollars*.

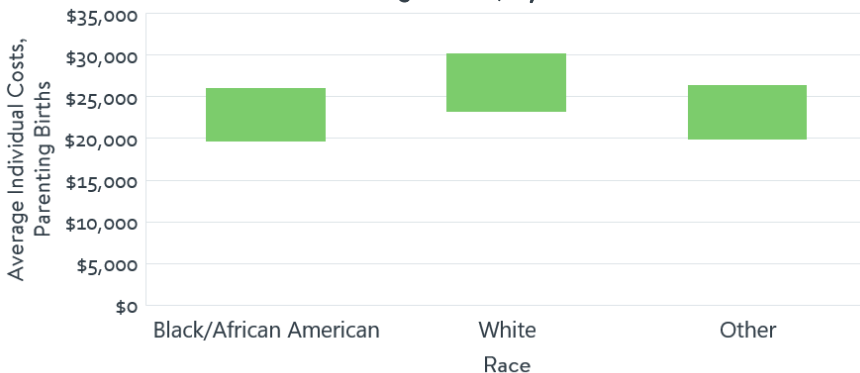


For women already struggling to make ends meet, *restricting abortion access makes attaining self-sufficiency harder*.



More Black women are estimated to travel out-of-state to receive abortion care compared to other races and incur more individual costs themselves.

Average Addition Individual Costs for Parenting Births, by Race



Parenting births cost white women more, on average, compared to women of color. This is primarily because of higher lifetime earnings lost for white women. This is due to the *racial wage gap* where Black women earn less for their work across job industries.

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