



An Opportunity for Texas to Lift Abortion Restrictions and Improve Access to Care

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Following the outbreak of COVID-19 in the U.S., Texas Governor Greg Abbott issued an executive order suspending many medical procedures for four weeks, including abortion. This measure, which caused the cancellation and delay of hundreds of appointments, added to the many difficulties Texans faced accessing abortion care before the pandemic because of the state's many other restrictions on abortion. **In the interest of public health, Texas should lift unnecessary restrictions on abortion rather than prevent people from obtaining time-sensitive reproductive healthcare.**

Telemedicine has been widely adopted during the coronavirus pandemic. However, Texas patients seeking abortion are unable to consult remotely with a provider because state laws require an additional in-person consultation visit 24 hours before their abortion. Furthermore, the state does not permit the use of telemedicine for medication abortion (also known as the abortion pill and offered up to 10 weeks of pregnancy) that would allow pills to be dispensed nearer to patients' homes. This is a safe and effective way to provide medication abortion, and patients report high satisfaction with this approach.

Eliminating the medically unnecessary consultation visit and ban on telemedicine would reduce costs and risks associated with travel, multiple clinic visits, and patient traffic in facilities. This also would make abortion care more accessible in a large state like Texas where nearly 50% of counties are 100 miles or more from the nearest facility providing abortion care. This would be particularly beneficial for those with fewer resources to travel and undocumented immigrants unable to pass through interior border checkpoints, people who otherwise may be forced to continue unwanted pregnancies.

Moreover, restrictions such as the 24-hour waiting period and disruptions in clinic services cause patients to delay abortion care. Our research has found that clinic closures following **restrictive laws** and the **recent executive order** likely lead to increases in second-trimester abortion. Second-trimester procedures are associated with a somewhat higher risk of complications, and delays disproportionately affect black and low-income patients, who are more likely to seek later abortion care.

The pandemic provides an opportunity to lift, rather than increase, abortion restrictions and reduce patients' and public health risks.