

NAF 2026 Annual Meeting Abstract

Relationships between economic scarcity and abortion consideration and use among prenatal clients



Jane W Seymour PhD, MPH, Madison Lands MSW, MPH, Elizabeth Albert MA, Mfonobong Ufot, Shimin Zhao MA, Jenny A Higgins PhD, MPH

Introduction



Many pre-*Dobbs* studies of abortion consideration and seeking recruited from abortion clinics, which may have induced a selection bias, as these studies excluded considerers who never made it to a clinic. Previous work indicates that prenatal clinics may be an effective alternative recruitment mechanism. Knowing that financial considerations were a well-documented barrier to abortion pre-*Dobbs*, we sought to understand the experiences of abortion considerers in a restrictive state post-*Dobbs*, with a focus on how economic scarcity relates to abortion consideration and seeking. We aimed to recruit a sample of considerers who may never make it to an abortion clinic.

Methods



From July 2023 to April 2025, we recruited prenatal care patients early in pregnancy from Madison, Wisconsin clinics for a longitudinal study. At baseline, participants self-reported whether they considered abortion and socioeconomic information. Abortion considerers were invited to complete a four-month follow-up survey about their abortion consideration and seeking.

Results



Of 487 baseline respondents, 22% ($n=105$) considered abortion. Abortion consideration was more prevalent among those living with economic scarcity. Among all respondents, 45% of those with public insurance or uninsured considered abortion compared with 15% of those privately insured. Similarly, consideration was higher among those unemployed or unable to work (41%) versus others (20%), and among those who reported insufficient funds to meet their basic needs (48%) compared with those always able to do so (18%). Eighty-seven considerers completed the four-month survey. Only one had obtained an abortion, a person who at baseline had private insurance, was employed, and had sufficient funds to always meet their basic needs.

Conclusions



Prenatal care settings remain a feasible recruitment venue for abortion considerers who never make it to an abortion clinic, including those who lack economic resources. We documented substantial disparities in consideration based on economic scarcity. Reproductive justice demands not just abortion access, but economic justice so that scarcity cannot force abortion consideration, prohibit abortion access, or impact the lives of those who chose to parent and their children.