Southpaw Insights

Community Access Scan

Massachusetts Abortion Study Findings

May 2024

Research for:





Background

Research Details



Objectives

The aim of this project is to inform Tides for Reproductive Freedom's (Tides) holistic practical support program and illuminate the current state of abortion access for important stakeholders. Tides partnered with Southpaw Insights to conduct a comprehensive, state-wide survey on abortion knowledge, perceptions, and experiences (including access and barriers to support) with their community members.



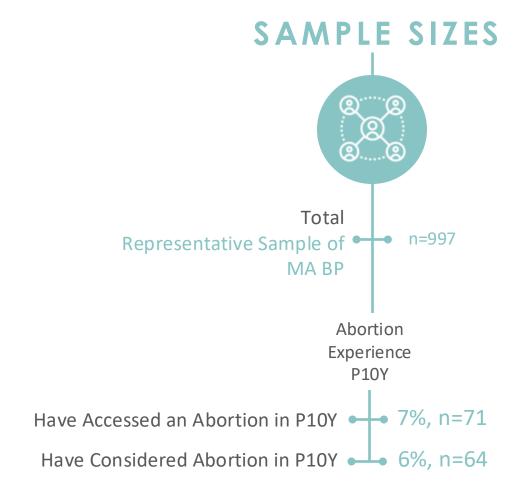
Methodology

Southpaw Insights conducted a 10-minute online survey with 997 birthing people (BP) ages 16-54 across the state of Massachusetts (MA) in Spring 2024.

Stratified sampling was employed to ensure the sample is representative of MA on age, race/ethnicity, region, education, and income.



Who we Spoke to



Acronyms Used in this Report

Household= HH

Birthing People= BP

Past 10 Years= P10Y

Healthcare Provider= HCP

Primary Care Provider= PCP

Obstetrics/Gynecologist= OB/GYN

Crisis Pregnancy Center= CPC

Statistical Testing

All statistical testing is performed at 95% confidence and is denoted in the following way:

Next to the number that has a significant difference, there is a letter of the group that it is statistically greater than.

As an example, for this report, BP who accessed/considered abortion in P10Y are compared to BP who have no abortion experience in P10Y.

In this example shown here, since this chart has an A in column C, MA BP who accessed abortion in P10Y are significantly more likely at 95% confidence to say that public funding should be available for abortion compared to those with no abortion experience in P10Y.

Agreement with Abortion Statements		(n=862)	(n=64)	Accessed Abortion in P10Y (n=71)
Somewhat/Strongly Agree NET	Total (n=997)	(A)	(B)	(C)
Public funding should be available to those seeking abortions in Massachusetts.	h4%	62%	73%	76% A



Demographics

Demographics See slide notes for questions asked	Total (n=997)	No Abortion Experience P10Y (n=862) (A)	Considered Abortion in P10Y (n=64) (B)	Accessed Abortion in P10Y (n=71) (C)
16-17	2%	3%	1%	0%
18-24	20%	19%	40% A C	15%
Age 25-34	28%	26%	33%	41% A
35-44	26%	26%	17%	37% B
45-54	24%	26% B C	9%	7%
Woman Gender Nonbinary/genderqueer		97% 2%	100% 0%	100%
Man (FTM)	1%	1%	0%	0%
Not of Hispanic or Latinx origin or descent Hispanic or Latinx origin or descent	15%	87% B C 13%	76% 24% A	77% 23% A
White or Caucasian		79%	74%	80%
Black or African Americar Asiar		12% 8%	14% 11%	11% 3%
Indigenous or Native American	i	1%	3% A	0%
Native Hawaiian or Pacific Islande		1%	3% A	0%
I prefer not to identify		3%	3%	1%
Two or more races		5%	6%	1%
Heterosexua	73%	73%	70%	73%
Sexuality LGBTQ+ (NET)	23%	23%	27%	24%
Prefer not to say	4%	4%	3%	3%

Demograp	phics, cont.	Total (n=997)	No Abortion Experience P10Y (n=862) (A)	Considered Abortion in P10Y (n=64) (B)	Accessed Abortion in P10Y (n=71) (C)
/	Boston Area	22%	21%	33% A	21%
State Regions	Western	14%	14%	17%	9%
Tate Regions	Central		12%	11%	14%
	Northeast	33%	34% B	22%	35%
\ \	Southeast	19%	19%	17%	21%
,	Urban	31%	31%	36%	32%
Urbanicity	Suburban		54%	52%	54%
 	Rural		15%	12%	14%
/ 	Independent	38%	38%	41%	31%
Political Affiliation	Democrat	36%	36%	42%	37%
I	Republican	10%	9%	11%	16%
i I	Not registered to vote	15%	16% B	6%	16%
; \	Another political party	1%	1%	0%	0%
<u> </u>	HAS INSURANCE [NET]	91%	96%	95%	90%
Insurance Status	Insurance through a current or former employer or union	35%	42%	36%	34%
	Medicaid	22%	24%	26%	22%
	Insurance through my spouse or partner	15%	13%	18%	15%
	Insurance through my parents	11%	3%	27% A C	10% A
	Insurance purchased directly from an insurance company or insurance exchange	4%	14%	12%	8%
	State health insurance/Mass Health	3%	8%	3%	2%
l I	Medicare		0%	0%	2%
l N	I don't know		3%	5%	7%
\	I do not have health insurance	3%	1%	0%	3% /

See slide notes for questions asked

Of those who are uninsured top reasons include: cannot afford the cost, signing up was too time-consuming /difficult/confusing, and waiting for an employer to pay for it

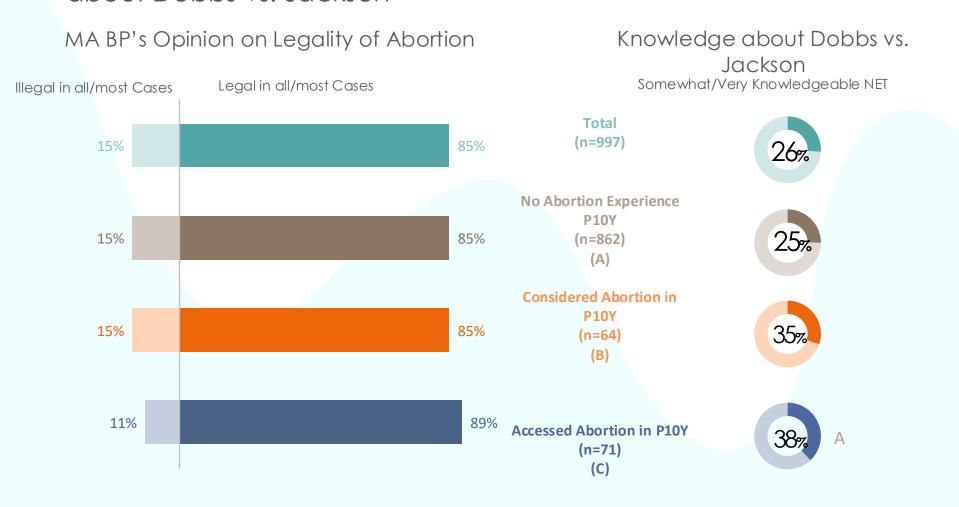
Demograph	ics, cont. See slide notes for questions asked	Total (n=997)	No Abortion Experience P10Y (n=862) (A)	Considered Abortion in P10Y (n=64) (B)	Accessed Abortion in P10Y (n=71) (C)
Place of Birth	In the US or US territory Outside the United States	89% 9%	89% 10%	91% 6%	94%
Employment Status	Work full-time (more than 30 hours per week) Work part-time (30 hours or less per week) Homemaker Full-time student Part-time student Unemployed	47% 16% 10% 11% 2% 10%	47% 16% 10% 11% 2% 10%	44% 15% 5% 20% A C 3% 11%	61% A 15% 8% 4% 0% 8%
Income	Less than \$35K \$35K or more Prefer not to answer		23% 69% 8% C	16% 81% A 3%	18% 82% A 0%
Education	Less than any college Some college or more Rather not answer	27% 72% 1%	28% B 71% 1%	16% 83% A 1%	27% 73% 0%
Household Size	Average Household Size	3.1	3.1	3.2	3.6 A
Marital Status	Married Single, never married Living with a partner		36% 32% C 16%	27% 42% C 17%	49% B C 11% 23%
Parental Status	Parent Non-Parent	36% 64%	35% 65%	34% 66%	46% 54%
# of Children in HH Of those with children under 1	, 0	0.46 0.36 0.87	0.43 0.33 0.94 B C	0.52 0.45 0.59	0.73 A 0.59 A 0.49



Detailed Findings



MA BP overwhelmingly support the legality of abortion regardless of experience with abortion; only one in four are knowledgeable about Dobbs vs. Jackson



A2: How knowledgeable would you say you are about Dobbs vs. Jackson?; A5: Do you think abortion should be...

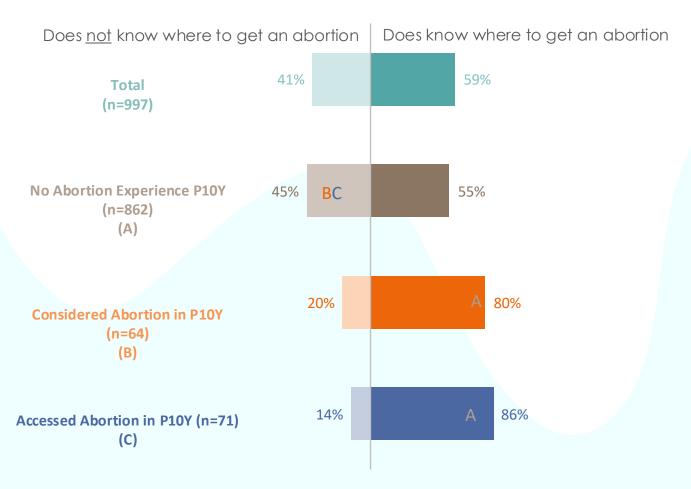
Access to abortion has major backing, while public funding is more divisive; support is significantly higher from BP who accessed abortion in P10Y

Agreement with Abortion Statements Somewhat/Strongly Agree NET		No Abortion Experience P10Y (n=862) (A)	Considered Abortion in P10Y (n=64) (B)	Accessed Abortion in P10Y (n=71) (C)
People in Massachusetts should be able to access an abortion if the life of the fetus or birthing person is in danger.	86%	85%	88%	87%
Despite my views on abortion, people in Massachusetts should be able to access abortions.	81%	80%	85%	88%
Public funding should be available to those seeking abortions in Massachusetts.	64%	62%	73%	76% A
Minors should need parental approval to access abortions in Massachusetts.	45%	45%	44%	47%
People in Massachusetts should be criminalized for accessing abortion.	6%	6%	8%	7%

A6: How much do you agree or disagree with each of the following statements?

Just over half of MA BP know where to access an abortion if they needed





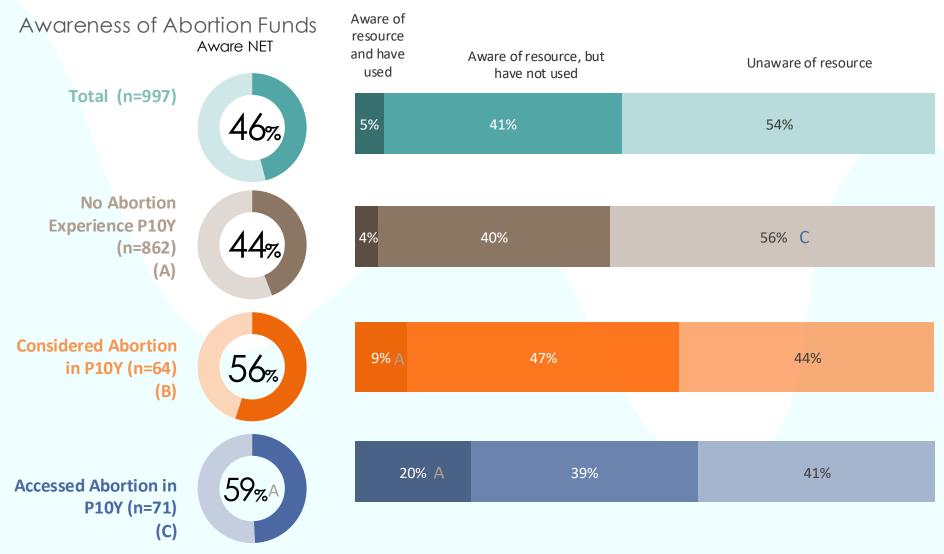
A7: Do you know where you could get an abortion if you needed to?

Three out of four BP in MA are aware of accessing abortion through an OB/GYN, while abortion via telemedicine is less known

Awareness of Abortion Resources Aware NET	Total (n=997)	No Abortion Experience P10Y (n=862) (A)	Considered Abortion in P10Y (n=64) (B)	Accessed Abortion in P10Y (n=71) (C)
Obstetrician-Gynecologist providing abortion	75%	72%	89% A	90% A
Primary Care Provider (PCP) providing abortion	68%	67%	77%	76%
Options counseling	66%	64%	76%	79% A
Doulas (people who provide physical and emotional support to patients during their abortion)	55%	53%	61%	69% A
Telemedicine providing abortion	42%	39%	55% A	56% A

A9: What is your experience with the following abortion-related resources?

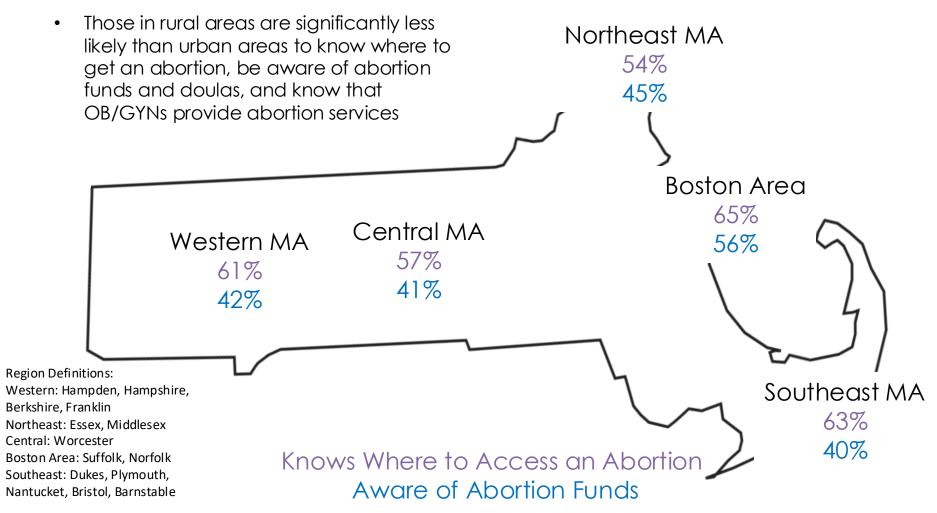
Nearly half of BP in MA know about abortion funds; one in five who have accessed abortion in the P10Y have used funds



A9: What is your experience with the following abortion-related resources?

16

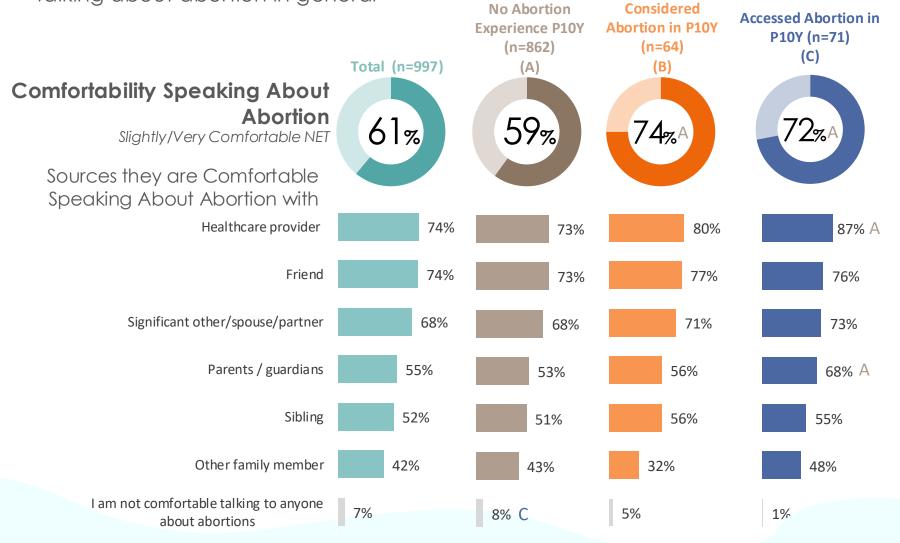
BP in the Boston area are directionally more prone to know where to access an abortion vs. other parts of the state; they are also significantly more likely to know about abortion funds



A7: Do you know where you could get an abortion if you needed to?; A9: What is your experience with the following abortion-related resources? Base: Total Respondents, Western MA n=137; Central MA n=123; Northeast MA n=329; Boston Area n=220; Southeast MA n=188

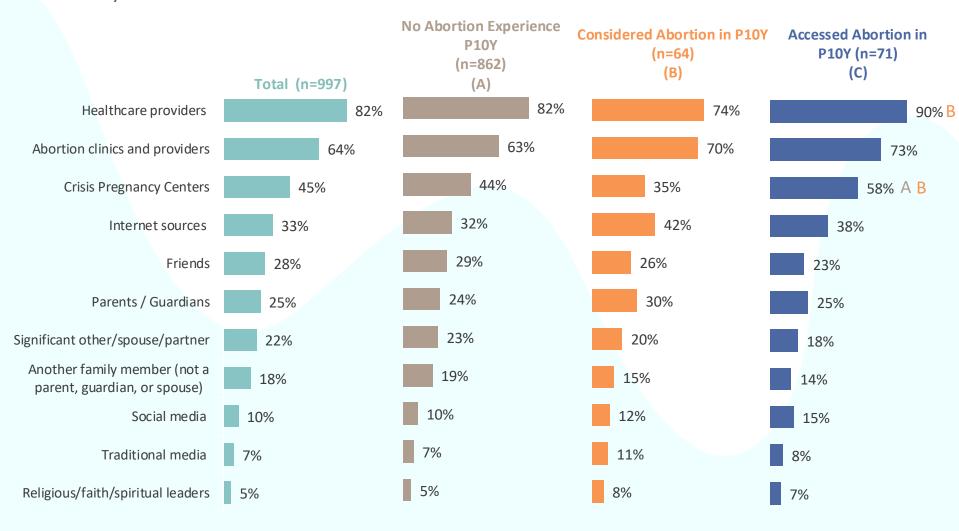


BP in MA are most comfortable speaking to HCPs and friends about abortions; BP who accessed abortion in P10Y are significantly more likely to be comfortable talking about abortion in general



A3: In general, how comfortable are you discussing the topic of abortion?; A4: Who would you feel comfortable talking about abortions with?

HCPs and abortion providers are top trusted sources for abortion information; those who have accessed an abortion in P10Y are more likely to trust CPCs



A8: What sources do you trust for information on abortion?

The presence of abortion stigma is widely recognized within MA communities, originating mainly from the media and religious leaders

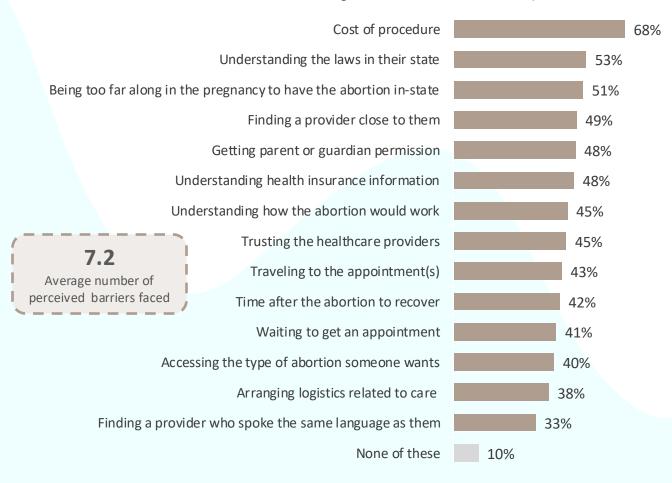
	Total (n=997)	No Abortion Experience P10Y (n=862) (A)	Considered Abortion in P10Y (n=64) (B)	Accessed Abortion in P10Y (n=71) (C)
Perceived Abortion Stigma Exima in their Community		72%	86% A	80%
Perceived Sources of Stigme Among Those who Think it Exis				
Media I	NET 74%	74%	81%	75%
Social n	nedia 59%	58%	63%	60%
Traditional r	nedia 48%	46%	54%	54%
Internet so	urces 39%	38%	47%	47%
Religious/faith/spiritual lea	ders 72%	73% C	68%	58%
Friends/Family I	NET 51%	49%	65% AC	49%
Parents/Guar	dians 33%	33%	40%	26%
Another family member (not a parent, guardio sp	on, or 30%	30%	40%	25%
Fr	iends 18%	18%	19%	19%
Significant other/spouse/pa	ırtner 16%	16%	25% C	7%
Crisis Pregnancy Cen	iters 13%	13%	16%	9%
H	ICPs 13%	12%	12%	19%
Abortion clinics and provi	ders 9%	9%	12%	12%
I don't k	now 4%	5%	2%	5%

A10: Stigma is negative, and often unfair beliefs that society has about a group of people. To what degree did you think people in your community experience abortion stigma? Base: Total Respondents, n=997; A11: Where do you think abortion stigma comes from? Base: Thinks People in Community Experience Abortion in P10Y n=57, Accessed Abortion in P10Y n=57

Nearly all MA BP with no abortion experience in P10Y hypothesize that there would be a multitude of barriers to access, primarily cost

Perceived Barriers to Abortion Access

Among those with no Abortion Experience in P10Y



A13: People sometimes experience barriers while accessing an abortion. Which, if any, of the following barriers do you think people face accessing abortion? When we say barrier, we mean an obstacle or complication that negatively affected someone's experience. Base: No Abortion Experience in P10Y, n=862

Among those with no abortion experience in the P10Y, Boston area residents are more likely to perceive various barriers to abortion access

Perceived Barriers to Abortion Access Among those with no Abortion Experience in P10Y	Total	Western MA (B)	Northeast (C)	Central (D)	Boston Area: Suffolk/Norfolk (E)	Southeast (F)
Cost of procedure	68%	66%	70%	61%	74% D F	64%
Understanding the laws in their state	53%	49%	56% F	46%	60% D F	44%
Being too far along in the pregnancy to have the abortion in-state	51%	44%	53%	53%	57% B F	45%
Finding a provider close to them	49%	44%	50% F	46%	58% B D F	40%
Getting parent or guardian permission	48%	45%	48%	48%	55% F	44%
Understanding health insurance information	48%	43%	51% F	49% F	56% B F	35%
Understanding how the abortion would work	45%	43%	49% F	46%	48%	38%
Trusting the healthcare providers	45%	51%	44%	43%	47%	40%
Traveling to the appointment(s)	43%	41%	44%	45%	48% F	36%
Time after the abortion to recover	42%	43%	42%	38%	47%	40%
Waiting to get an appointment	41%	42%	42%	36%	46% F	35%
Accessing the type of abortion someone wants	40%	38%	44% D F	31%	45% D	35%
Arranging logistics related to care	38%	29%	42% B	33%	44% B F	33%
Finding a provider who spoke the same language as them	33%	25%	35%	33%	40% B F	26%
None of these	10%	10%	11%	13% E	6%	10%

A13: People sometimes experience barriers while accessing an abortion. Which, if any, of the following barriers do you think people face accessing abortion? When we say barrier, we mean an obstacle or complication that negatively affected someone's experience. Base: No Abortion Experience in P10Y, Total n=862; Western MA n=120; Central MA n=106; Northeast MA n=290; Boston Area n=184; Southeast MA n=162

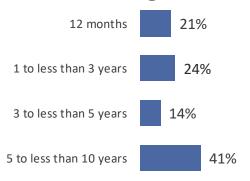


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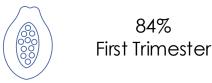


MA birthing people who accessed abortion most often did so in a medical setting during their first trimester between five and ten years ago

Time Since Accessing Abortion

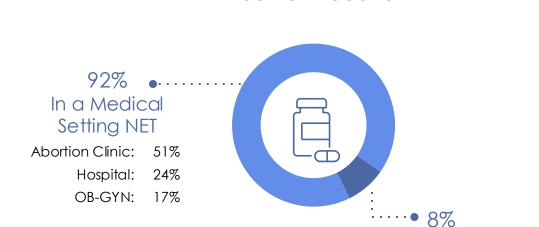


Gestation at Time of Abortion









Abortion Location

Outside a Medical Setting NET

Mifepristone and/or misoprostol through an

4% online provider:

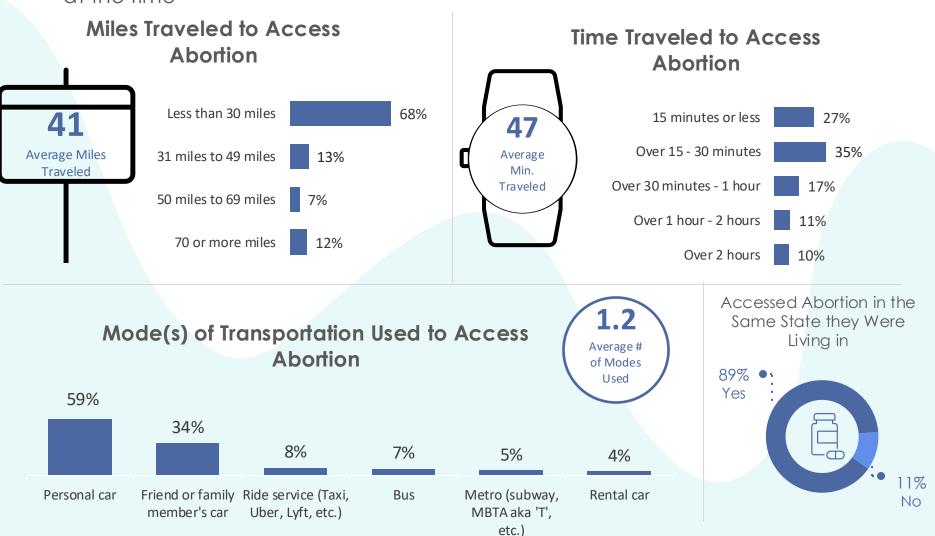
3% Physical injury:

1% Physical exercise:

A12:When did you have, or consider an abortion?; B6: Approximately how many weeks into the pregnancy were you when you had an abortion?; B1a/b: Where did you receive abortion care?; B1c: How did you end the pregnancy? Base: Accessed Abortion in P10Y n=71

26

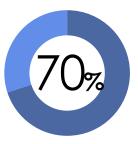
Travel time to access abortion is typically under 30 miles and 15-30 minutes using their personal car; the majority traveled within the same state they were living in at the time



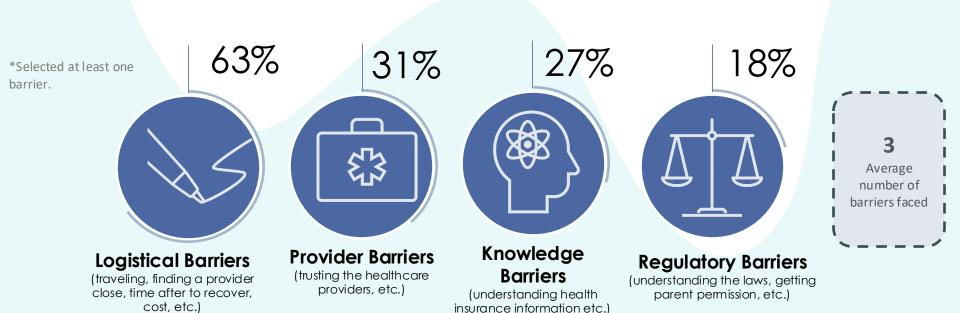
B3: How many miles did you travel to access an abortion?; B2: How long did you travel to access an abortion; B4: What type(s) of transportation did you use to travel to your abortion appointment(s)? B5: Did you receive an abortion in the same state that you were living in at the time? Base: Accessed Abortion in P10Y, n=71

Barriers to abortion care are common; nearly two-thirds report arranging logistics as a barrier to care

Experienced Barrier(s) to Care NET*



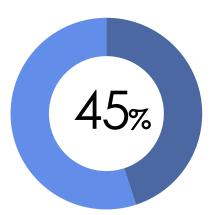
Top Barriers to Abortion Access



B12: People sometimes experience barriers while accessing an abortion. Which, if any, of the following were barriers to accessing your abortion? When we say barrier, we mean an obstacle or complication that negatively affected your experience. Base: Accessed Abortion in P10Y, n=71

Although nearly one in two MA BP received financial support for their abortion, the average total out-of-pocket costs for accessing care is close to a thousand dollars





Average Total Out-of-Pocket Costs for Accessing Abortion



Avorde	
Average Spend	

LOST	
Wage	S

Procedure

Childcare

Food

Lodging

Transport

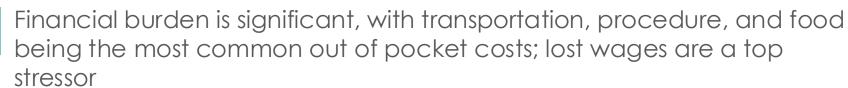
Pet care

\$146

\$221 \$113 \$137 \$118

\$92

B10: Did you receive financial support for your abortion? This can include insurance, cash from a friend, etc. Base: Accessed Abortion in P10Y, n=71



SORTED BY FINANCIAL STRESS

% Reported Cost

Somewhat/Very Stressful

as Stressful



53%







28%



26%





		Lost Wages	Procedure	Childcare	Food	Lodging	Transport	Pet care
Asso	cet with	53%	56%	32%	56%	38%	73%	28%

Other costs people mentioned: pain medication, pads, new underwear, companion, gifts for nurses, etc.

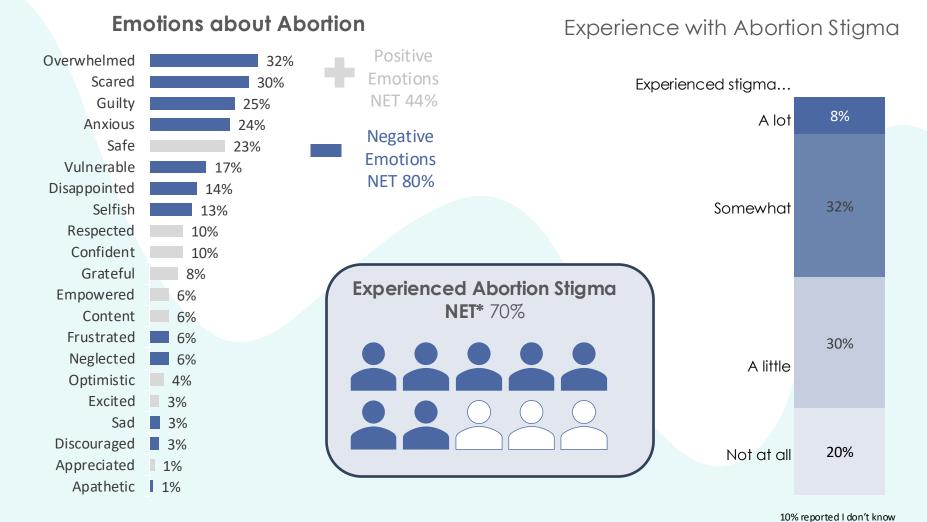
51%

B9: We would like to know how much you paid for the entire abortion experience. To the best of your knowledge, please tell us how much the following cost you, out of pocket. Base: Accessed Abortion in P10Y, n=71; B11: Sometimes people experience financial stress. How stressful, if at all, were the following? Base: Paid out-of-pocket for item, n varies per item=20-52

43%



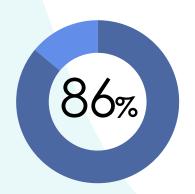
Seven in ten MA BP with abortion experience report abortion stigma; they felt overwhelmed, scared, and guilty



B14: What words would you use to describe how you felt about your abortion experience?; B13A: Stigma is negative, and often unfair beliefs that society has about a group of people. To what degree do you experience abortion stigma? Base: Accessed Abortion in P10Y, n=71

Nearly nine out of ten people who experience abortion stigma report a negative effect, mostly notably a fear of judgment

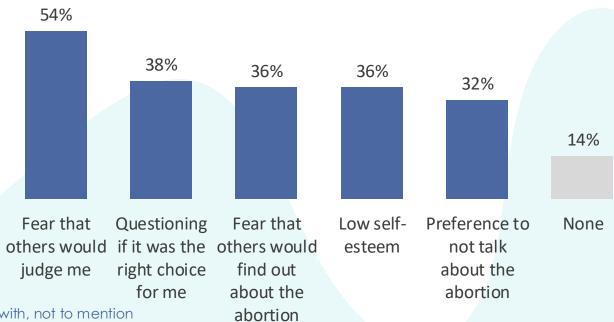




*Selected at least one lasting effect.

Effects of Abortion Stigma

Among Those Who Experienced Stigma Accessing Abortion



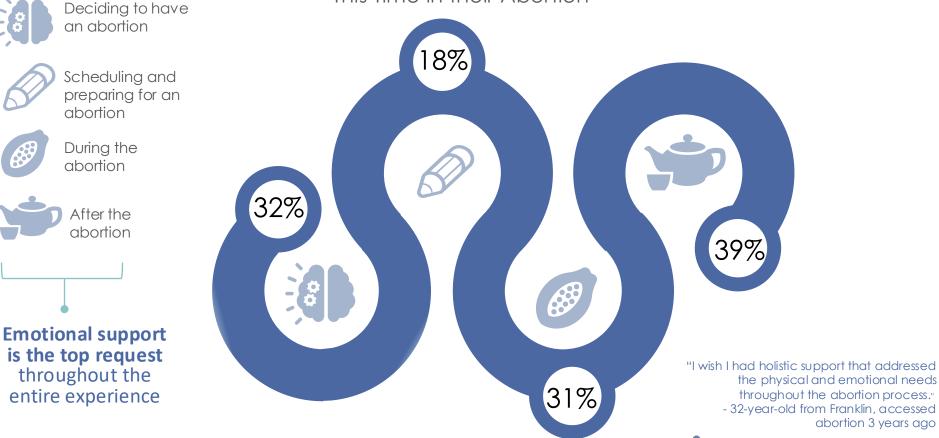
[&]quot;It's just really scary to be pregnant to begin with, not to mention what choice you're going to make without anyone else judging you."

B13B: What, if any, effect(s) does abortion stigma have on you? Base: Experienced abortion stigma, n=50
B15: Is there anything else you would like to share about your experience of having an abortion? Please feel free to share what was supportive to you, or what support you wish you had. Base: Accessed Abortion in P10Y, n=71

^{- 40-}year-old from Chicopee, accessed abortion 8 years ago

A gap emerges in emotional support, particularly during the initial decision-making process and after the procedure

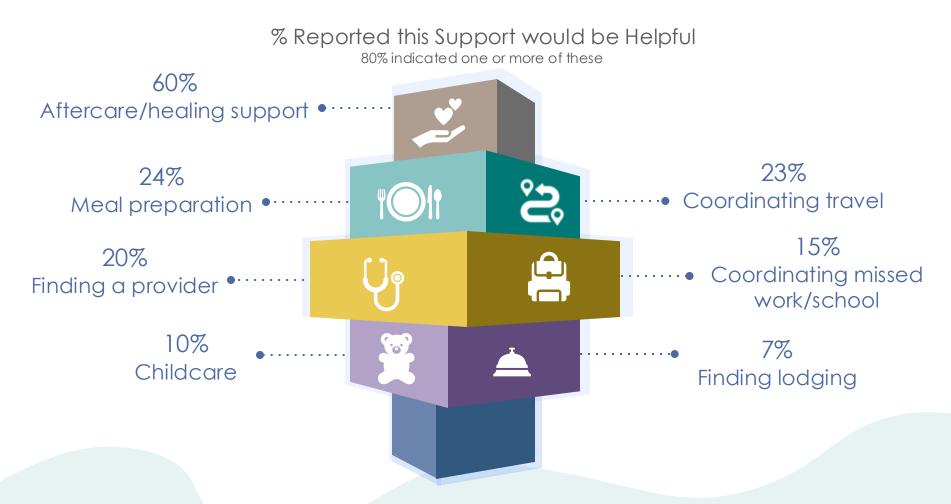
% Reported they Wanted More Support (of any kind) at This Time in their Abortion



B7: Overall, how would you describe the level of support you received? When we say support, we mean medical, social, emotiond, spiritual, or financial support. Base: Accessed Abortion in P10Y, n=71; B8_1: You indicated you wanted more support [timeframe.] Which of the following types of support would have been helpful for you? Base: Wanted more support, n ranges=13-28
B15: Is there anything else you would like to share about your experience of having an abortion? Please feel free to share what was supportive to you, or what support you wish you had. Base: Accessed Abortion in P10Y. n=71

Aftercare and healing support resonate as services that would be most helpful to those accessing abortions

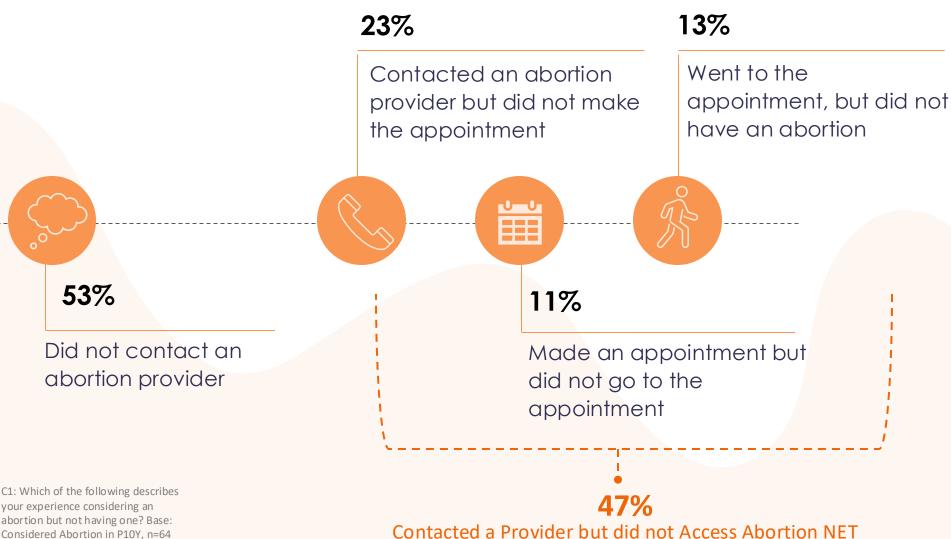
Holistic Care Opportunities



B8B: Which, if any, of the following types of support would have been helpful for you? Base: Accessed Abortion in P10Y, n=71



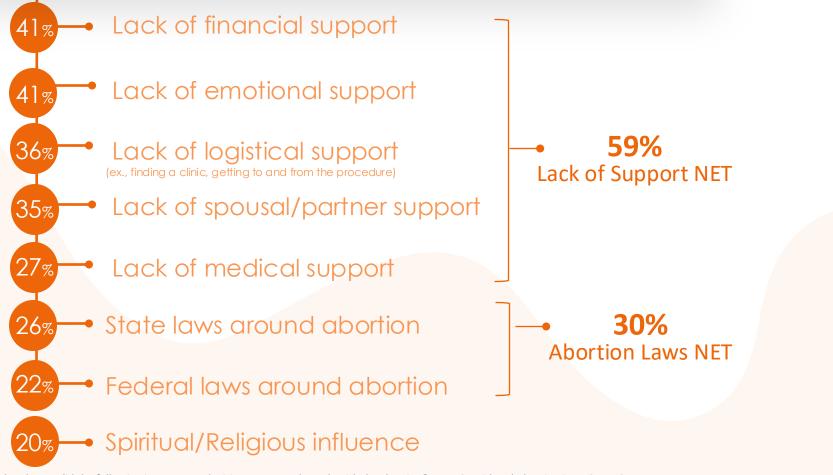
Nearly one in two MA BP who considered abortion started the process by contacting an abortion provider but ended up not having the procedure



Lack of financial and emotional support are the biggest influences in not having the procedure; one in three say state or federal laws influenced them as well

Influences on the Decision Not to Have an Abortion

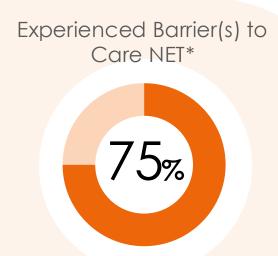
Had a lot of impact/Had some impact NET

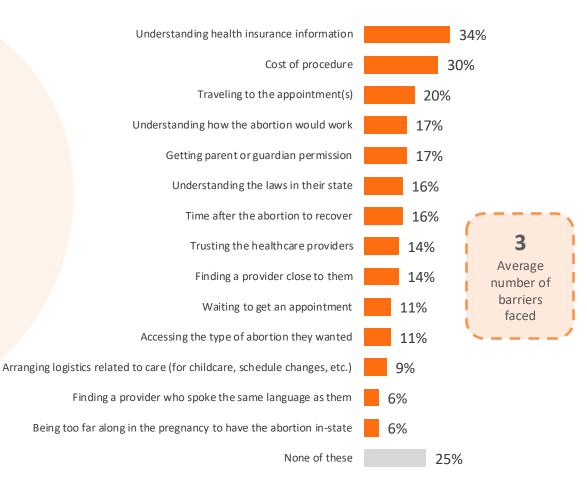


C2: To what degree did the following impact your decision to not go through with the abortion? Base: Considered Abortion in P10Y, n=64

Understanding health insurance information and the cost of the procedure are primary barriers for those who considered abortion



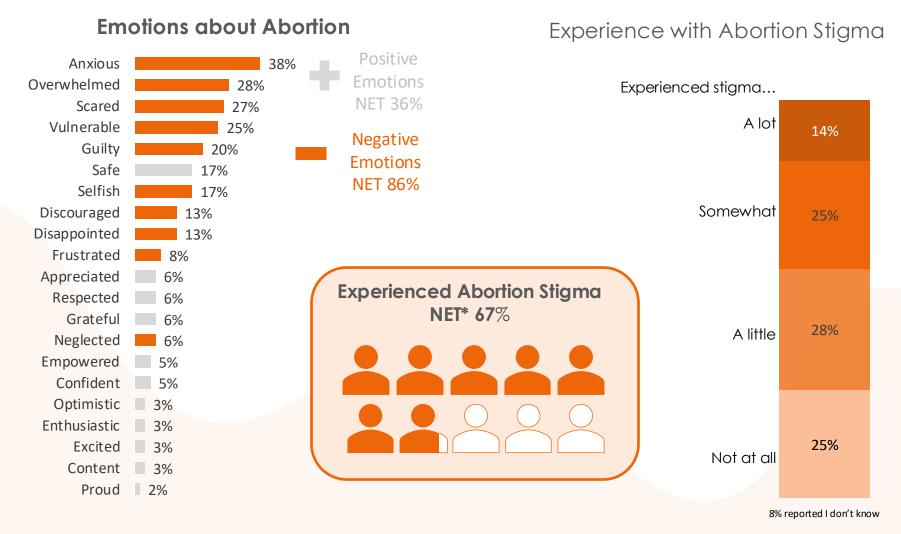




*Selected at least one barrier.

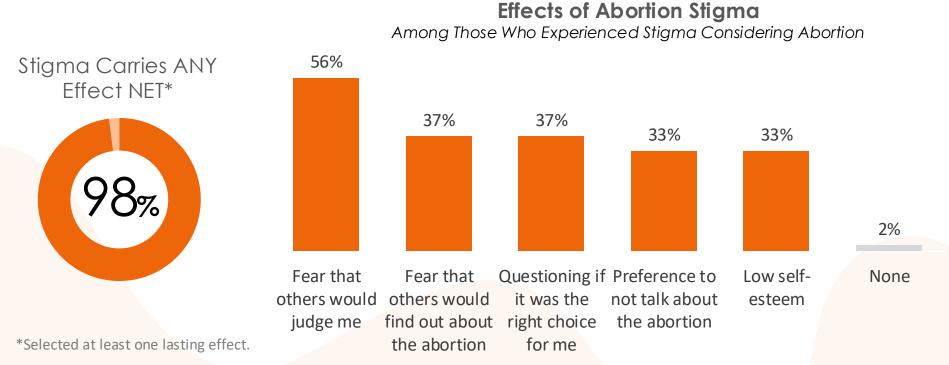
C3: People sometimes experience barriers while accessing an abortion. Which, if any, of the following were barriers to accessing your abortion? When we say barrier, we mean an obstacle or complication that negatively affected your experience. Base: Considered Abortion in P10Y, n=64

Over two-thirds of those considering abortion experienced stigma; emotions of anxiety, being overwhelmed, scared, and vulnerable prevail



C5: What words would you use to describe how you felt about considering an abortion C4: Stigma is negative, and often unfair beliefs that society has about a group of people. To what degree do you experience abortion stigma? Base: Considered Abortion in P10Y, n=64

The effects of stigma on those considering abortion are stark; nearly all report negative impacts



[&]quot;People are way too judgmental and do not understand people who want or need an abortion. I'm lucky to have supportive people around me but that is not the same for everyone."

C4B: What, if any, effect(s) does abortion stigma have on you? Base: Experienced abortion stigma, n=43

C6: Is there anything else you would like to share about your experience considering an abortion? Please feel free to share what was supportive to you, or what support you wish you had. Base: Considered Abortion in P10Y, n=64

^{- 20-}year-old from Plymouth, considered abortion 3 years ago



Executive Summary

Key Findings

1

Views on Abortion

Public support for the legality and access to abortion is high, seen especially in the low agreement that abortion should be criminalized.

Nearly two-thirds agree public funding should be available. Parental approval for minors is more divisive.

2

Abortion Information

With over half of MA BP knowing where to access an abortion if needed, obstetrics/gynecologists (OB/GYNs) and primary care providers (PCPs) are well-known providers; Telemedicine less so.

Healthcare providers (HCPs) and abortion clinics are top sources of trusted information. Crisis pregnancy centers (CPCs) are trusted by over half of those who accessed abortion in the past 10 years (P10Y).

One in five MA BP who have accessed abortion in the P10Y have used an abortion fund. Awareness of funding is higher in the Boston area and urban areas.

Key Findings, cont.

3

Barriers to Abortion Access

Perceived barriers to abortion access differ from actual reported barriers. For example, while waiting for an appointment ranks 11th as a perceived barrier, in actuality, it is the top barrier that people accessing abortion face (nearly 1 in 3 experience this barrier).

Time after the abortion to recover ranks 10th as a perceived barrier, but is actually the second most common barrier while accessing abortion (1 in 4 face this barrier).

Cost of procedure, the top perceived barrier, falls to #6 for those accessing abortion, but is #2 for those considering an abortion. Two in five who considered abortion in P10Y indicate a lack of financial support as having some/a lot of impact on their decision to stop the abortion process.

Understanding health insurance information is understated- it ranks 6th in perceived barriers but is the #1 barrier that people considering abortion face.

4

Abortion Stigma

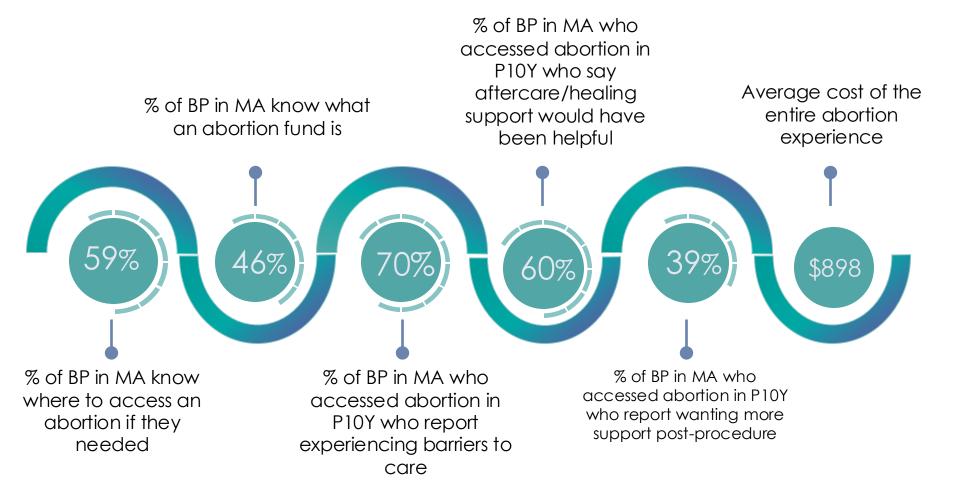
Nearly three in four MA BP recognize abortion stigma exists in their community. The majority of those who accessed or considered abortion have experienced abortion stigma.

The negative effects of the stigma are much greater among those who considered than those who accessed; almost all who considered abortion report negative effects, mainly a fear of judgment. Those who considered but did not access an abortion in the P10Y are more prone to indicate friends and family (specifically, significant others) as origins of abortion stigma.

Furthermore, almost half of those considering abortion contacted a provider but did not follow through. Over two in five say a lack of emotional support affected their decision to not follow through with the process.

This data could suggest that abortion stigma, in conjunction with a lack of support, is a key reason for withdrawing from the process.

Key Community Statistics



Key Recommendations

1

Consider building out **logistical and emotional program structures, such** as abortion doulas.

Arranging logistics for the procedure is strikingly stressful for MA BP. One in three report wanting more logistical support before the procedure. One in five of those considering abortions say a lack of **logistical support** had a lot of impact on their decision not to have an abortion. Furthermore, three in five MA BP who accessed abortion in P10Y indicated **aftercare/healing support** would have been helpful for them.

3

Leverage Tides' community reach to disseminate evidencebased and non-stigmatizing information about what it's like to access abortion.

Increased knowledge, particularly around understanding how the procedure will work (reported as a barrier by nearly 1 in 5), might relieve anxiety (emotion reported by nearly 1 in 4).

2

Consider **childcare and/or wage reimbursement** support for patients. For about half of MA BP accessing abortions, the out-of-pocket costs are reported as highly stressful.

4

Increase outreach in rural communities, particularly in Western, Central, and Southeast MA, who have less awareness of where to access an abortion if they need to.

Consider communicating the availability of telemedicine and remote emotional/logistical support.

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