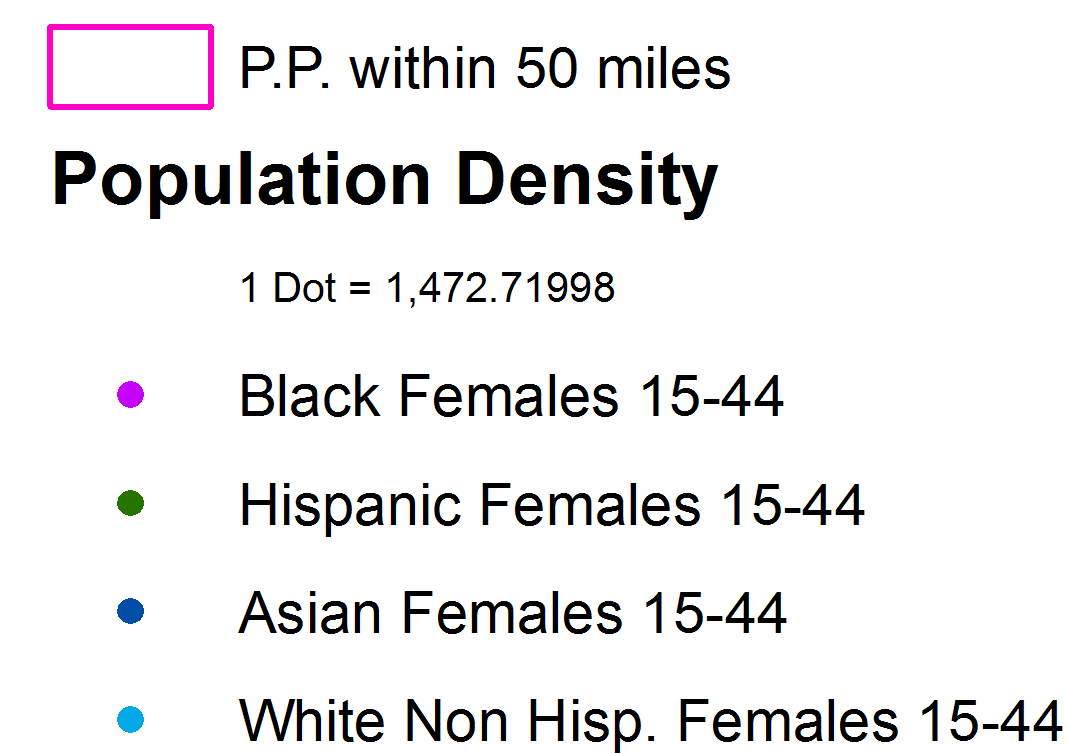


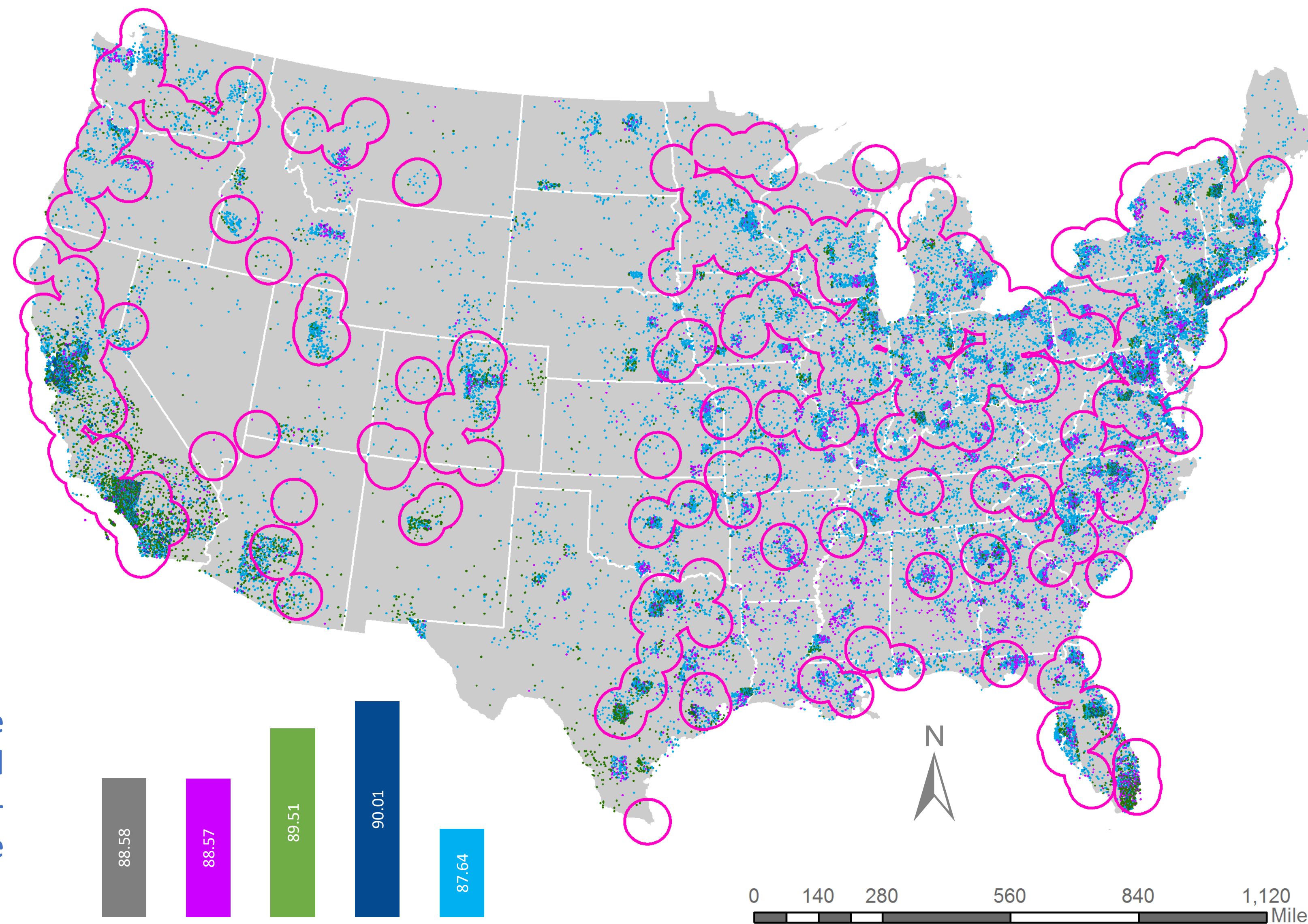
Abortion access by distance and race in the United States

Emma Illick-Frank • SOC 1340 • December 2017

Population Density of Women of Reproductive Age by Race/Ethnicity

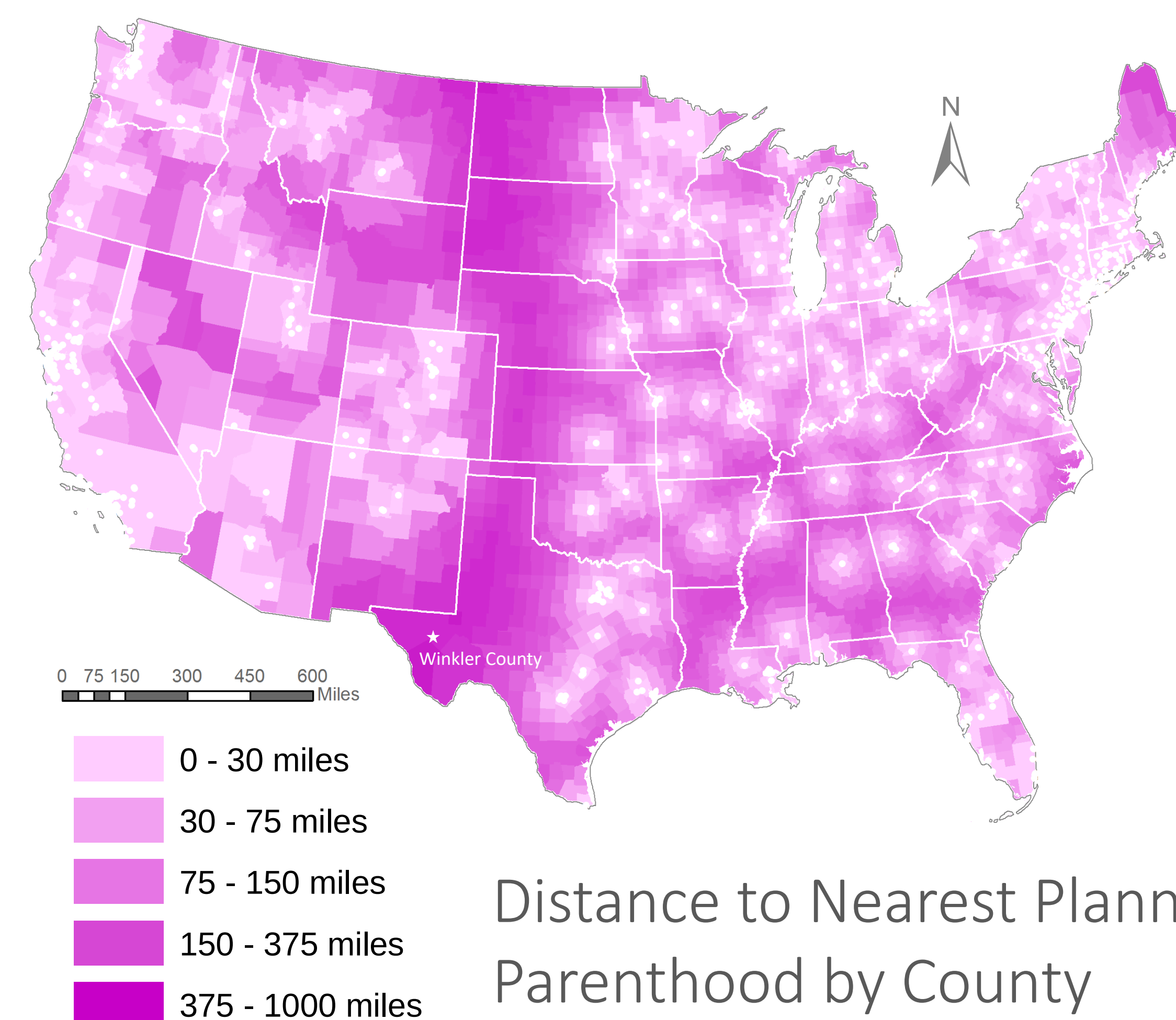


88.6% of women in America live within 50 miles of Planned Parenthood. On average, non-Hispanic white women have the least access.



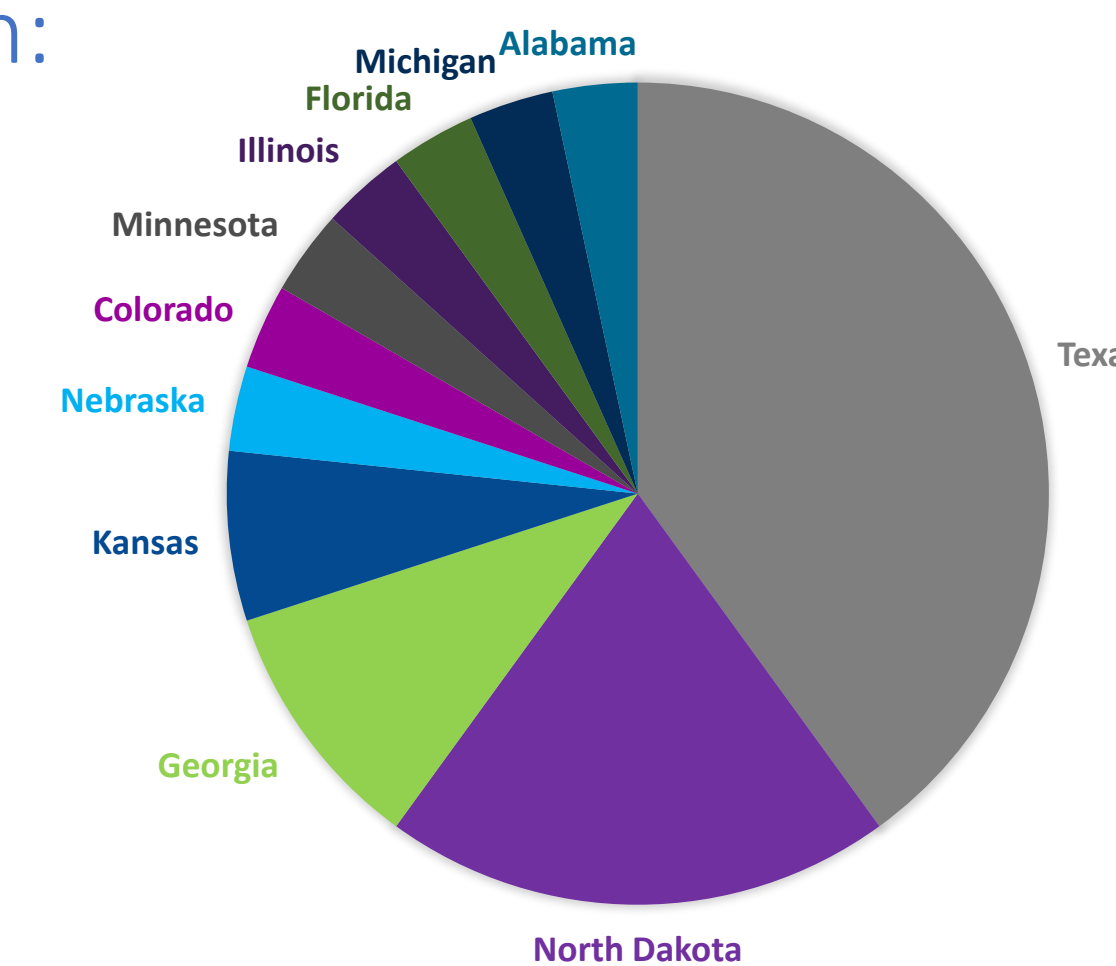
Results

Average distance to Planned Parenthood: 46 miles
Maximum distance (in the contiguous 48 states): 297 miles
Furthest county from any location: Winkler County, Texas
Total number of women living more than 50 miles from Planned Parenthood: **6,296,193**



Distance to Nearest Planned Parenthood by County

The 30 Counties furthest from Planned Parenthood are in:



Overall, the majority of women are within reasonable distance to obtaining an abortion. Asian women are the most proximate to Planned Parenthoods, and white, non-Hispanic women are the least proximate. Black women's access is the same as the national average, and Hispanic women have slightly higher access.

Notably, abortion access is geographically least accessible to white women in the Midwest, in a swath of land that spans from the Dakotas to the southwestern areas of Texas. It is a rare occurrence in our society that women of color have better physical access to a public resource than white women. Another pattern of inaccessibility occurs across Louisiana, Mississippi, Alabama, and Georgia, in which black women are the most affected.

Conclusions

Many of these observable trends are a result of minorities living in more urban areas, which are also the places Planned Parenthood tends to have clinics. Rural areas tend to be more white, and the women there are further from city-centered health clinics. The Thiessen polygons show us that in some cases the nearest Planned Parenthood is several states away—this is the case for women living in South Dakota who must travel to Colorado.

This research would be improved by incorporating income level, access to public transportation, and by using demographic data from block group, instead of county level. The distribution of Planned Parenthoods is always changing, making this an important and ever-relevant issue to continue studying, especially in this time of political upheaval; the repeat-offender states in the pie chart are not coincidental. Access to abortion is threatened now more than ever, and there are few better indicators of women's autonomy and empowerment.

Introduction

Since the early 1980s, the percentage of pregnancies that have ended in abortion has been steadily decreasing in the United States. The reasons behind this trend are neither fully understood nor agreed upon. Pro-life advocates claim that restrictions on abortion access have resulted in fewer procedures, and advocates of pro-choice, while acknowledging such limitations may be contributing to falling rates, attribute the majority of change to increased knowledge and use of contraception.

Though both arguments are true to some degree, their implications for different groups of people vary widely. Women of certain socio-demographic identities suffer the consequences of fewer abortion clinics more than rich white women, first because poor people are unable to invest as much time in getting abortions, and second because women of color have a) a significantly higher probability of pregnancy and b) lower use of contraceptives. Access to abortion is a right in this country, but what does "access" look like geographically?

This is a spatial analysis of who lives closest to Planned Parenthood Health Clinics, performed with census population data from the county level. The goal was to find the average distance a woman must travel to reach a Planned Parenthood, and the racial/ethnic breakdown of who is geographically proximate and who is not.

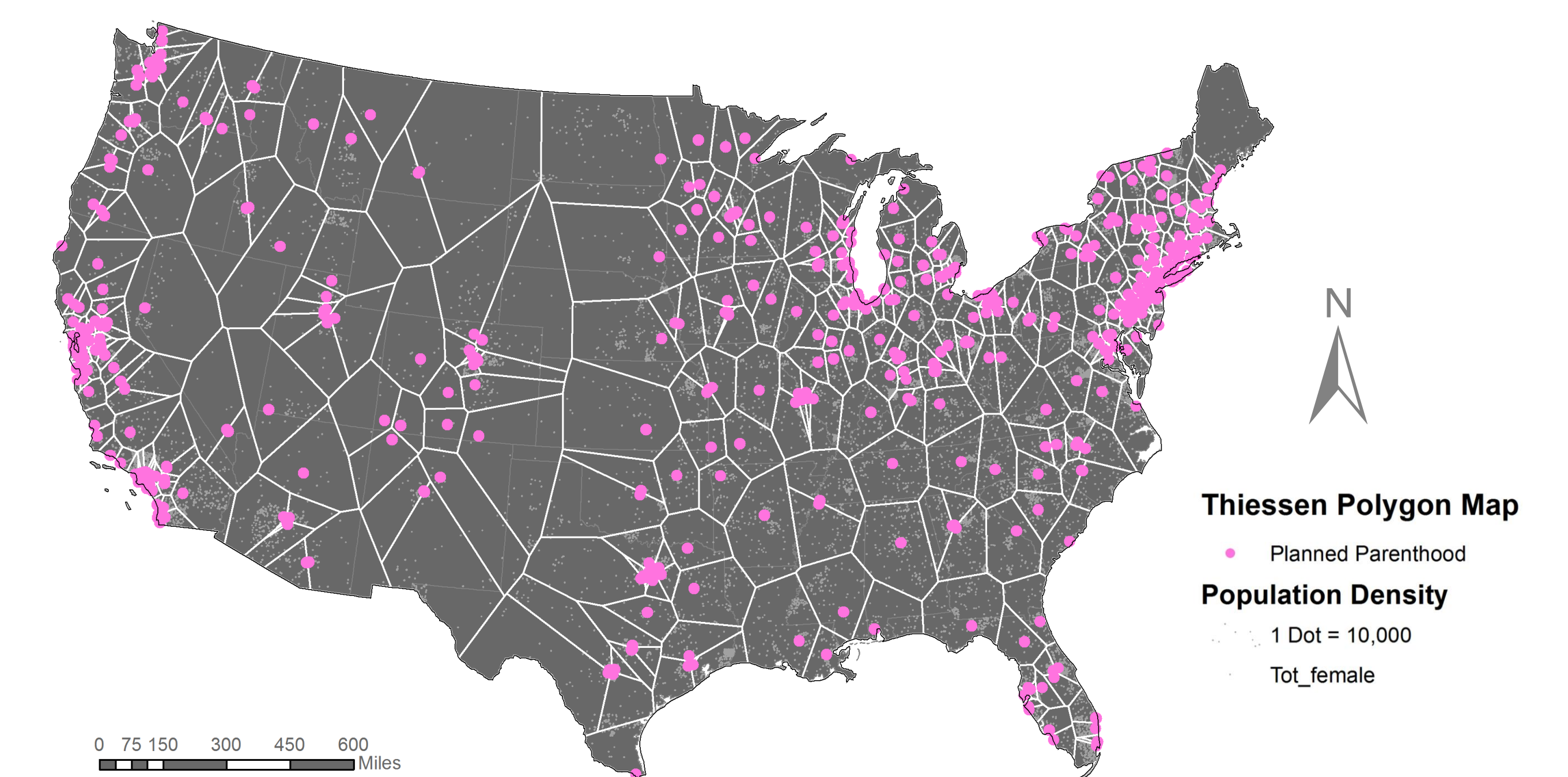
Methods

Planned Parenthood was selected for this research because it is the most ubiquitous health clinic that provides abortions to patients of any income level. Additionally, it receives federal funding (though this money is not allocated to abortions) and is thus highly politicized. Perhaps for this reason a comprehensive list of Planned Parenthood locations was difficult to find, so the address data were manually selected from A to Z Databases. 572 locations were identified for this project, but the complete list includes between six and seven hundred clinics.

The demographic data on women is from NHGIS, parsed down to only female populations of reproductive age—15 to 44. This range was identified from primary literature, as was the 50 mile buffer chosen to analyze proximity to Planned Parenthood. This project used Euclidean distance, not network analysis, to determine travel distances for women.

In reality, distance to an abortion provider is likely increased due to the indirectness of available routes. In addition to distance, there are other factors that may inhibit a woman's ability to get an abortion that were not accounted for in this research, including social stigma, religious affiliation, presence of institutions that protest/counsel against abortions, and income level. Another significant variable is access to transportation. For women who don't have cars, a 50 mile distance may be prohibitive.

Thiessen Polygon Map of Nearest Planned Parenthood



Acknowledgements & Sources

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