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**Freedom To Choose: The Economic Impact of Reduced Abortion Access on Women’s Labor Market Outcomes**

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Freedom To Choose: The Economic Impact of Reduced Abortion Access on Women’s Labor Market Outcomes

Senior Project Submitted to
The Division of Social Studies
of Bard College

by
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Introduction:

In January of 1973, The Supreme Court’s ruling on Roe v. Wade was released in which the constitutional right to abortion was legally recognized. Through the next 49 years, the decision was heavily debated in the public sphere and challenged in court many times. Then on June 24, 2022, the Supreme Court released its decision on Dobbs v. Jackson Women’s Health Organization\(^1\) in which they overturned the constitutional right to abortion that had been established in Roe v. Wade. The contentious battle for women’s health choices was instead put upon individual states instead of being protected under the Constitution and nationally recognized. This ruling came at a time in which many other countries around the world have been decriminalizing abortions and increasing access but the United States is not alone in this move. While many countries like Ireland, Chile, and Argentina have decriminalized or legalized abortion within the last ten years\(^2\) the United States has joined three other countries in rolling back abortion access since 1994\(^3\). The impacts of legalization and reduction of barriers in other countries have been studied but don’t always provide a study that can equally provide insight for the United States.

Abortion access is important in order to allow people who can get pregnant the ability to make decisions that concern their bodily autonomy and give them more agency in the outcomes of their lives. Women’s economic access is oftentimes defined by their reproductive capabilities


as seen in the economic history that will be outlined later in this project. When the Dobbs v. Jackson Women’s Health Organization case was decided, I was left wondering, what are the economic implications of this drastic shift in policy? How will this affect the way that people who can get pregnant’s labor market outcomes? What had started as an innocent, open-ended question evolved into my eventual senior project. Through it, I aim to look at the effect of restricting abortion access in the United States on women’s labor market outcomes.

This project primarily focuses on the effect of reducing abortion access on women’s labor market outcomes. This does not mean to say that women are the only people who can get pregnant or utilize abortions and contraceptives but the research that has been included in this project primarily focuses on the economic impact of women. It would do trans and nonbinary individuals a disservice to imply that their labor market outcomes would be the same and while there may be similarities it is important to distinguish between them.

To study the effects of restricting abortion access the first chapter will look at the history of abortion in the United States and some statistics that help contextualize the size of the issue. The history of abortion is uniquely interconnected with women’s economic history and to further contextualize the connection between abortion and women’s labor market outcomes I will provide a brief overview of women’s economic history. This will help both provide insight into who has been historically involved in the labor market and further inform the emergence of women into the labor market in the 1970s and 1980s.

The second chapter outlines the capabilities approach and further elaborates on the theoretical framework that is being used. The theoretical framework that shapes our understanding of the problem is primarily Amartya Sen and Martha Nussbaum’s capabilities
approach. The capabilities approach looks at development in terms of the individual and what they are capable of doing to achieve the life that they value instead of traditional measures of economic development like the GDP.

The third chapter provides a review of the existing literature on the economic impact of abortion access. The literature finds that access to abortion increases women’s educational attainment, allows them more career mobility, and could increase their income. We shift then to looking into Poland where abortion was banned in October of 2020, and Romania which experienced a period in which abortion was illegal. The project will end with some policy recommendations that include reinstating federal protection for abortion rights, repealing the Hyde Amendment, and expanding access to abortions to those who need them.

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Chapter 1: Abortion and Women

History of Abortion

To follow the impact of reduced abortion access throughout the country it is important to contextualize the history of the issue. In this chapter, I will outline the history of abortion in the United States, following the legal history, and attempt to summarize the public opinion on the issue. The chapter includes some brief statistics about abortion to situate the number of legal abortions that are carried out yearly and to provide historical context for the trends in the number of legal abortions that have been obtained in the 53 years between 1969 and 2022. A history of abortion is intrinsically intertwined with women’s economic history which is also broadly outlined in the chapter. Outlining women’s economic history is done to both contextualize the labor market involvement of women throughout history and to provide a richer understanding of the economic emergence into the paid labor sphere. This allows for the foundations of the preliminary analysis of literature regarding the economic impact of women’s abortion access.

Abortion has not always been as heavily debated a topic as it is today. Before the late 19th century abortion was legal before quickening which was when a woman could first feel the fetus’s movement\(^5\). Many of the first laws regarding abortion that date back to the early 19th century were often an attempt to control the drugs that provided an abortion as they were often toxic or poisonous to consume\(^6\). Through the 19th century doctors backed by the American Medical Association claimed that they had more information about embryos and therefore had


advanced medical knowledge needed to decide when life began\(^7\) this contributed to the criminalization of abortions and eventually states across the country banned abortions. This was an attempt to provide more legitimacy for doctors and claiming to come from a concern for women’s health the AMA’s campaign against abortion allowed for both a moral campaign in opposition to it and increased legitimacy for doctors. However, as Alesha Doan in “Opposition and Intimidation: The Abortion Wars and Strategies of Political Harassment,” points out “Casting abortion in this frame ignored the reality that women had been making reproductive choices and decisions, based on their life circumstances and individual sense of morality, for centuries and started to set the stage for medical intervention into women’s choices governing reproduction. This pattern marked a significant departure in reproductive decision-making and continues to be the norm in modern society\(^8\).” This shift in agency helps frame the modern debate but also demonstrates that our modern view of women’s agency in this decision is not necessarily based on history. The AMA’s campaign was successful with the passing of the Comstock Act in 1872 which banned the mailing and advertisement of abortion or contraceptives through the mail and the manufacture and sale in Washington DC and federal territories\(^9\).

After the initial passing of the Comstock Act, other laws were passed that limited abortion access throughout the country, and by 1910 most states had passed anti-abortion laws, and abortion faded from the public and political eye until the 50s\(^{10}\). The legacy of the Comstock

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\(^8\) Doan, Opposition & Intimidation, 50.
\(^{10}\) Doan, Opposition & Intimidation, 51.
Act can be found in the dissemination of birth control pills in the late 1960’s\textsuperscript{11}. However, in the 1960s, states like Hawaii and Washington had liberalized their abortion laws, and grassroots movements were started on the state level to work toward liberalizing access and increasing abortion and reproductive care\textsuperscript{12}.

The barrier of the law would rarely impact wealthy women who could afford to travel to states like New York or even out of the country to access an abortion if necessary. In an attempt to make illegal abortions safer, there were often underground networks that helped create referral services to find safer abortions, and some groups, like Jane, went as far as to create their own underground abortion services\textsuperscript{13}. Jane provided more than 11,000 abortions that were safe and inexpensive in the four years before Roe v. Wade was passed\textsuperscript{14}. Reproductive rights were also high on the list of priorities for the women’s liberation movement that began in the 1960s and encouraged people to make visible the number of people who were willing to break the law to allow for reproductive rights.

The history of reproductive rights in the United States has been notably defined by landmark Supreme Court decisions that seemingly confirmed these rights as protected under the Constitution. From the right to contraceptives that was decided in Griswold v. Connecticut to Roe v. Wade to Dobbs v. Jackson. These cases brought the debate on reproductive care to the highest court to decide the legality of reproductive rights instead of leaving them to individual states. The decisions in these cases changed the way that women’s reproductive health has


\textsuperscript{14} Kaplan, The Story of Jane.
functioned in the country by allowing for an expanded medical agency. Understanding the context for the political debate that follows the issue of legalized abortion is necessary to understand the impact of these court cases and subsequent laws that work against each other to ‘solve’ the issue. An example can be seen in the inclusion of the Hyde Amendment in 1976 in response to the decision in Roe v. Wade which limited the use of public funds on abortions\(^{15}\), which, at first glance, may seem outdated but the impacts can still felt by thousands of women in the country.

Key cases that can help outline the legalization are Griswold v. Connecticut, Roe v. Wade, and Casey v. Planned Parenthood. These three cases were decided by the supreme court in the 20th century and led to interpretations of the Constitution in favor of protecting reproductive healthcare. Griswold v. Connecticut (1965) extended the right to privacy that is outlined in the Bill of Rights under the different zones of privacy\(^{16}\). This case paved the way for Roe v. Wade in which the same legal logic was used to decide it and ultimately the decision was that of the fourteenth amendment. The decision in Roe v. Wade (1971) took away the need for abortion access to be a codified law passed by either state legislatures or on a federal level and instead declared that it was a right that was protected under the Constitution. Finally, in Planned Parenthood v Casey (1992), the Court changed the ruling while also upholding and reaffirming it that had been put in place with Roe while also implementing the undue burden clause. The effect of this was “in so holding, the Court created opportunities for opponents of abortion to enact restrictions on abortion that Roe itself never sanctioned, restrictions that were designed to


transform the public’s understanding of the morality and constitutionality of the practice”17 The ruling in this case essentially led to our understanding of the issue contemporarily.

These cases are integral in understanding the legal positioning of the issue but they are certainly not the beginning or end of it and help situate the changing legal positioning that women have to navigate throughout their lives.

Abortion access became a partisan issue after the ruling in Roe v. Wade was passed down where it had initially been supported by Southern Baptists. This shift came in 1976- the first presidential election year after Roe, where the Democrats supported the decision and the Republican Party, did not and began using it as a point to campaign on until then18. Regardless of the negative connotations from the 1940s and 1950’s the general sentiment of the larger population has historically been in favor of allowing women’s bodily autonomy as they are. Below is a graph that charts public opinion on the legality of abortions from 1976 through 2022 Gallup and shows that throughout the last 45 years, there is a higher percentage of the population that are in favor of abortions being legal in all circumstances and an even higher percentage of people that are in favor of abortion being legal in certain circumstances. While the poll doesn’t tell us what these extenuating circumstances necessarily are it is clear that the opinion of the general population is in favor of at the very least the maintained legalization of abortion in some circumstances.

While it is important to look at the overall opinion of Americans throughout time regardless of political affiliation abortion has increasingly become a partisan issue, especially

after the decision that was passed in Roe. Below is data from the Pew Research Center in which they provide a partisan breakdown of the issue by separating the results into Republicans and Democrats that were surveyed. The graph below shows the responses by Republicans and Democrats concerning their agreement with their party on certain issues. In looking at abortion we can see that 35% of Republicans do not agree with their party on their views of abortion while 29% of Democrats disagree with their party. Among those surveyed, the percentage who agree with neither party is around 22-23% while there is a similar split among the percentage of people who identify with but don’t agree with their views. Figure 3 doesn’t elaborate on what agreeing with the party means but the questions are mainly looking at the way that the respondents felt their views aligned with their parties opinions and values

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**Republicans are more divided than Democrats on their party’s abortion stance**

% of U.S. adults who say they agree or disagree with their party on ...

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<thead>
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<tbody>
<tr>
<td><strong>NET Agree with own party</strong></td>
<td><strong>NET Agree with own party</strong></td>
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<tr>
<td>Agree with Dems</td>
<td>Don’t agree with either party</td>
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<tr>
<td><strong>Abortion</strong></td>
<td>64%</td>
</tr>
<tr>
<td><strong>Health care</strong></td>
<td>67</td>
</tr>
<tr>
<td><strong>Illegal immigration</strong></td>
<td>77</td>
</tr>
<tr>
<td><strong>Economic policies</strong></td>
<td>79</td>
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*Note: Those who did not answer are not shown.*

PEW RESEARCH CENTER

Figure 3

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Women’s Economic History

Women’s economic history would be incomplete without looking at the differentiating impact of race on economic outcomes and labor force participation. The book *Race Gender and Work: A Multicultural History* by Teresa Amott and Julie Matthaei outlines the economic histories of different groups of marginalized women throughout American history through the twentieth century. The groups of women that are included are Indigenous, Black, Latina or Chicana, Asian, European, and Puerto Rican women.

Amott and Matthaei’s work shows that while for white women the separation of spheres in the household was the norm, for women of color it was not the reality. The implication that women as a whole entered the labor market in the late twentieth century is disingenuous to the reality- that women of color of all backgrounds were engaged in the labor market to varying extents.

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degrees for years before the widespread emergence of women in the 1970s and 1980s. They write that “The diversity of systems of labor meant that a woman’s work was generally more similar to that of men of her racial-ethnic group and class position, who were employed within the same system of labor than it was to that of women in other systems and classes” and throughout the book outline how marginalized women’s work have been interwoven with the work of men of the same ethnicity throughout history. One of the main arguments that is provided by the book is that women's economic histories are not equal, while there are many similarities in how they were able to advance their economic positions, without understanding the added nuance that race adds to the issue we would not be able to portray accurately the economic history of women. Wealth and the ideal of separate spheres go hand in hand in which the cult of domesticity was the ideal of the household for most ethnicities but not the lived reality as a result of racist policies in terms of who was legally allowed to migrate to the United States and once they had entered the country the jobs that they would be able to hold and the subsequent wages that they would be paid.

Racial identities were important in the way that women participated in the economy as they shaped the way that they viewed their family dynamics. Amott and Matthaei write “Among upper- and middle-class European Americans, the nineteenth-century cult of domesticity developed and formalized a division of labor in which husbands were property owners and professionals while wives were homemakers and mothers. The ideology of domesticity elevated the status of these women in the home as nurturers of children and civilizers of men… The lives of wealthy African American, Mexican American, and Asian American women appear to have

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followed a similar domestic ideal of womanhood. Through this, we can see the impact of the cult of domesticity in the labor market, while for wealthy women there was an expectation to be homemakers the reality for many women, especially women of color was that the systems in the palace didn’t allow for that. Throughout the twentieth century and by relying on the power of collective action within each community Amott and Matthaei make it clear that these groups of women worked together to ensure that they would be able to optimize their working conditions but rarely were able to band together across cultural lines to worker solidarity across ethnic groups. Many of the ethnic groups they write about created their own unions and fought for their rights but were also often the ones who would be the strikebreakers when people of other ethnicities were striking for better conditions for themselves.

In many communities motherhood and the ability to raise a family is radical in the struggle against racial oppression as women in these communities have been sterilized against their will (Indigenous and Latina women esp.) the crux of the matter lies in their choice to be able to have children.

Barbara Bergmann’s *The Economic Emergence of Women* follows the economic history of women and tries to provide an adequate explanation for the emergence of women into the paid labor sphere. Bergmann argues that the industrial revolution allowed for an increase in real wages and therefore the opportunity cost of not entering the paid labor force increased until it was higher than women would be comfortable paying. The working ages of women who were accepted into the labor market shifted throughout the course of the century, first allowing unmarried women who were then expected to leave the paid labor sphere once they got married.

24 Amott and Matthaei, *Race, Gender and Work*, 298.
A further shift in encouraging women’s labor force participation was married women being able to keep their job until they got pregnant and were then expected to exit the workforce. The final shift is in women who become mothers continuing to work in the paid labor force. Bergmann’s work also helps build a conceptual framework for understanding abortion and possible policy solutions and will continue to be drawn upon throughout the work.

While this method of analysis does explain the broader phenomenon of women entering the workforce its impact was greatest on white women who were able to enter the labor market throughout the late 1960s and 70s. Black women and immigrant women had always been to some degree involved within the labor market at a higher rate than white women but the labor force participation rate for both Black and white women began to increase at around the same rate from the 1970s on.

In discussing women’s economic emergence into the labor market it is important to include the idea of two separate spheres where “this new world of production became identified as a male sphere, while women’s place was defined as the home26”. The concept of the separate spheres is discussed in “Breadwinners and Other Workers” by Ellen Mutari, Deborah Figart, and Marily Power. The separate spheres model depends on the separation of paid labor as part of the male breadwinners' role in the household while the unpaid labor of the housewife allowed for the maintenance of the household. While this concept of separate spheres does hold for much of the economy it does not accurately portray the norm for Black women who instead embraced a ‘co-breadwinner’ model27.

26 Mutari and Figart. *Women and the Economy: A Reader*, 37
The emergence of the two spheres came about at around the time that land stopped being widely available and working the land was no longer feasible as a way of being able to make money the concept of paid labor stopped being something that women were spared to do and turned to the traditional spheres of male paid work being the work of the breadwinner while white women were “supposed” to stay in the home. The involvement of women in the labor market can be characterized by the labor force composition and the labor force participation rate in which women’s involvement has been steadily increasing since the 1940s. Throughout the 20th century, women’s labor force participation rate has gone from 18.8 percent to 60.2 percent while men have gone from 81.3 to 74.7. While white women’s labor market participation rate increased exponentially, Black women’s labor market participation rate doubled throughout the 20th century with the two increasing at around the same rate from the 1970s on.

Women entering the labor market through the quiet revolution should have effectively merged the two spheres to provide for some balance and while in some families that is true, it is not the reality for everyone as Teresa Amott and Julie Matthaei write “Although the relationship between productive and reproductive labor was changing in this way, the sexual division of labor between the two did not change- if anything it became more extreme.” Through this quote, we can see that women’s participation in the labor market has not led to a change in the division of labor within the home and women are instead expected to.

**Economics of Abortion: Texas and COVID-19**

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In studying the restriction of abortion there are two key approaches in attempting to reduce access to abortion can be seen with supply-side barriers and demand-side barriers. “Supply-side” barriers are those that limit access by targeting abortion providers and work to create conditions in which the providers are forced to take on increasing amounts of risk to be able to provide safe abortions to those who need them. Things like Targeted Regulation of Abortion Providers or TRAP laws are examples of this and aim to reduce access by affecting the abortion providers instead of those who are receiving an abortion. The alternative is “demand-side” barriers or barriers that target the individuals who are trying to get an abortion and access to care. These laws and regulations historically had been increasing the barriers to access for women who are looking to get an abortion by implementing mandatory counseling sessions or waiting periods.

In regards to major additions to the literature on the economics of abortion, the Turnaway study by the University of California San Francisco looked at the effect of abortion on women’s lives. The study looks at the social determinants of health and finds that the consequences of being denied an abortion lead to worse financial, health, and family outcomes. The Turnaway study was able to function in the way that it did under the assumption that women who had been able to obtain an abortion and women who had not been in the same pregnancy period and who had come days apart were in similar socioeconomic situations. The barriers to abortion access that would have been true for a woman who was able to have an abortion and one who wasn’t


30Myers, Schlosser, Lindo, Cunningham. “How Far Is Too Far”.

were the same and these same initial causes would allow a baseline to test for the impacts of being granted one against not being granted one. The study found that, overall, while the need for resources increased they were less likely to receive increased support from family, partners, or the government which could be a contributing factor to the negative results in their credit.32

There is a fair amount of literature that covers the impacts of reduced access to abortion through the case study of Texas which would then be expanded throughout the rest of the nation. In ‘The Impacts of Reduced Access to Abortion and Family Planning Services on Abortion, Births, and Contraceptive Purchases’ Fischer, Royer, and White can study the impacts of three laws that were designed to cut abortion access. The unique situation that Texas provided allowed for a case study of the impact of reduced access that is laid out by Fischer et al in that these policies are similar to those which have been proposed at a nationwide scale and studying the impacts of them within a single state helps to bring more information about the possible impacts of it. The size of Texas makes crossing state lines to gain abortion access more unlikely. Texas’s family planning services are separate from their abortion services which allows researchers to separate the impacts of changes in policy on each sector, the state also maintains a data set by county and age which does not hold at a national level.33 They found that the legislation that was passed between 2011 and 2014 which cut the Department of State Health Services budget by 67 percent, the changes in the Women’s Health Program, and the implementation of House Bill 2.34

32 Foster. The Turnaway Study.37
34 Fischer, Royer, and White. “The Impacts of Reduced Access to Abortion and Family Planning Services on Abortion, Births, and Contraceptive Purchases.”
The study found that the impact of this combination of policies was a reduction in the number of abortions that Texas residents were able to have by 20.5%. By 2015 over half of the state’s abortion clinics closed and a quarter of publicly funded abortion clinics were also closed. Studies that also made use of this unique set of circumstances are Grossman et al in ‘Change in Distance to Nearest Facility and Abortion in Texas, 2012-2014’ which looked at the relationship between distance to an abortion clinic with the amount that was performed. They found that when the change in distance was 100 miles or more the number of abortions decreased by 50.3%. ‘The Impact of Women’s Health Clinic Closures on Preventative Care’ by Lu and Slusky also relies on data that was obtained from Texas during this period but also looks at Wisconsin. They found that there was a similar correlation between the distance between access to care and receiving of care where having 100 miles between a clinic and a patient led to the reduction of health services like mammograms or pap smears. ‘How Far Is Too Far? New Evidence on Abortion Clinic Closures, Access, and Abortions’ similarly looks at the impact of distance to clinics and notes that the impact of the combination of legislation impacted women to the point that Texan women would have had nearly 15,000 more abortions in 2014-2015 than actually observed. These cases show that there is clearly a burden to access that those who are seeking abortions must be able to overcome when seeking abortions in space, the ability to travel 100 or more miles negatively impacts the health services women have access to. These findings

38 Myers, Schlosser, Lindo, Cunningham. “How Far Is Too Far”.
indicates that increased travel distances have significant effects and is important to prove that these barriers are undue burdens on access.

In 2021 there was an amici curiae brief that was included in the Dobbs v. Jackson Women’s Health Organization case that was in support of the positive impact of maintaining abortion access. This brief both demonstrates support but cites economic literature that proves the ‘downstream impacts’ on women’s socioeconomic status following receiving an abortion. The brief also pays special attention to the impact that reducing access through a ruling in favor of Dobbs would have on marginalized groups\textsuperscript{39}.

In ‘Covid-19 Restrictions Reduced Abortion Clinic Visits, Even in Blue States’ by Martin Andersen et al. it was found that the COVID-19 pandemic negatively impacted the number of abortions that occurred in a given year as stay-at-home orders and bans on “elective” procedures like abortions deterred those who might have had one. The data that they use is based on the number of people who went to clinics throughout the pandemic while controlling for variables like staff and recurring patients against data that looked at the number of abortions that were to have happened in a given year\textsuperscript{40}. Given this data, they found that the number of abortions had significantly decreased between the two years as opposed to the trend that they had seen in previous years and the projected increase in growth did not hold through this period. The study found that states that banned elective surgical procedures had an 18.5% decrease in the number of visits, states that banned surgical abortions had an additional 10.6% decrease and the stay-at-home orders led to an additional 24.1% drop in the number of abortions that were


\textsuperscript{40} Martin Andersen, Sylvia Bryan, and David Slusky, “COVID-19 Restrictions Reduced Abortion Clinic Visits, Even in Blue States” (Cambridge, MA: National Bureau of Economic Research, November 2020), https://doi.org/10.3386/w28058.
performed. This study is important in being able to actualize the impact of banning abortion across the country as although these were limitations that were short-term to alleviate the impact of the pandemic it provides a case study for the impact of an actual ban.

The Economic Policy Institute released a report on the economics of abortion bans which situates the economic and political context of states that have passed restrictions on abortion rights since the Dobbs v. Jackson Women’s Health Clinic decision. They analyze abortion access status with indicators of economic security. Banerjee looks at the minimum wage, unionization, unemployment insurance, Medicaid expansion, and incarceration. Banerjee argues that “abortion access is fundamentally intertwined with economic progress and mobility” and therefore looks at these different indicators of economic success. Banerjee finds that the minimum wage in states that have abortion protections is, on average, $3.75 higher than in states that have restrictions on abortion access. In regards to union status and bargaining power, states with abortion protections are twice as likely to have union representation than states that have abortion restrictions with 14.8% of workers in states that have abortion protections belonging to a union while only 7.2% of workers are represented by a union in states that have abortion restrictions. The EPI provides evidence that more unemployed people can access unemployment insurance benefits in states with abortion protections as opposed to states that have abortion restrictions. EPI finds that every state with abortion protections has expanded Medicaid while 12 states that have abortion restrictions have not. Finally, they found that states that have abortion restrictions have higher levels of incarceration than states that have abortion protections. In looking at these indicators

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41 Andersen, Bryan, and Slusky. “Covid-19 Restrictions Reduced Abortion Clinic Visits, Even in Blue States,” 25
43 Ibid, 14
of economic security Banerjee draws a connection between policies that disempower workers and states that have abortion restrictions.

**Statistics**

The CDC provides abortion surveillance information about legal abortions in the majority of states in the United States from 1969 to the present. The most recently published report comes from 2020 which includes data from 47 reporting areas and found that 620,327 legal abortions were reported to the CDC in the year 2020\(^\text{44}\). The data that the CDC receives comes from 49 reporting areas which are comprised of 47 states, the District of Columbia, and New York City but do not include data from California, Maryland, or New Hampshire.

The report found that Black women received 39.2% of legal abortions in 2020 with White women having 32.7%. In 2020, women in their 20s accounted for more than half of abortions (57.2%) when compiling data from 30 reporting areas. The majority of people who had an abortion in 2020 were unmarried at 86.3% out of 40 reporting areas. 39.1% of abortions were had by people who had never had a child, 24.5% by people who had had 1 birth, and 20.3% by people who had had 2 births from 43 reporting areas. The majority of abortions were performed in the first 9 weeks of pregnancy\(^\text{45}\).

While the report can provide a comprehensive overview of abortions across the country, its limitations lie with the voluntary nature of the reporting and are sent by the central health agency of the area so it can not account for people who have had to cross state lines to receive an abortion. The last limitation of this data source is that the socioeconomic information from the data is limited to intake forms at the time of the appointment and doesn’t allow for other factors


\(^{45}\) Ibid.
like income or education to be studied through the collected data at a national level. The authors of the report identify the public health implications of the abortion surveillance report as helpful in evaluating programs that are aimed at equitable contraceptive care, accessing changes in clinical practices over time, and estimating the number of pregnancies in the United States.

Another source of national data on the number of abortions can be found in the Guttmacher Institute which is a research and policy institute that focuses on reproductive justice. It was founded in 1968 as the Center for Family Planning Program Development and was a part of Planned Parenthood but in 2007 they separated. The Guttmacher Institute also collects data on abortion incidence in the United States which is called the “The abortion incidence and service availability in the United States Study,” which estimates the total number given the initial data collection. “Data for this study come from the 19th iteration of the Guttmacher Institute's Abortion Provider Census, which collects data about abortion from all healthcare facilities known or suspected to provide abortion care.” and is the data set from 2019-2020. This study found that there were 930,160 abortions performed in 202046.

This study’s strengths lie in the amount of data that they have been able to collect as it supplements the CDC’s data as they are able to get information from states that do not report to the CDC’s abortion surveillance program. The data that is collected is not as detailed about the demographics of the people who received abortions but instead gives a breakdown by state of the number of abortions performed, abortion clinics, abortion facilities, type of abortion (medical or not), and changes that the abortion providers saw due to the COVID-19 pandemic. The study also found that following the ruling in Dobbs vs. Jackson Women’s Health Clinic lead to a drop

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in the number of clinics providing abortions. The data shows that in 17 states the percentage change in clinics providing abortion care was negative meaning that these clinics stopped providing abortion care.

This report also shows the percentage of counties without clinics that provide abortion care in each state with only Connecticut and the District of Columbia having clinics that provide care for every county out of the entire country. States like West Virginia or Mississippi had a handful of clinics at most and over 90% of women in these states live in counties that don’t have abortion access which would mean that in the case that any of these people needed an abortion they would have to either cross state or county lines to get one.

These are the more contemporary datasets that measure abortion access in the United States but for a comprehensive review of how these statistics have changed in the last fifty years that abortion had been a constitutionally protected right, we can look to the past. The first abortion surveillance report was published in 1975 and is a summary of data from 1969 through 1973. The report found that in 1973 there were 615,831 legal abortions that were reported to the CDC and reflects the change in legal abortions from the year immediately following the establishment of Roe v. Wade by the Supreme Court\(^\text{47}\). The court decided on Roe v. Wade on January 22 1973 and therefore looking at the legal abortion statistics from that year does provide a comprehensive overview of the amount that had been performed within that period as the CDC went directly to abortion providers to get aggregate data. The data from 1973 says that 67.7% of women who received a legal abortion were white 25.7% were received by people of color, not further specifying as the more recent reports do. The data that was compiled from years before

1973 is incomplete as the report primarily focuses on legal abortions and includes some information about maternal mortality concerning illegal abortions. There were more than 22,000 abortions reported to the CDC in 1972 from 8 reporting states. The report also found that 25.2% of abortions were performed outside of the person’s state of residence, signifying that they had crossed state lines to receive reproductive care even after the ruling in Roe. Comparatively, according to the Guttmacher Institute, 9% of abortions in 2020 were obtained by people traveling out of the state that they live in.\(^{48}\)

The graph in Figure 6 shows a graph created by the Pew Research Center of the number of legal abortions from 1973 to 2020 using data from the Guttmacher Institute and the CDC. The graph is adjusted for the changes in the areas that have been reporting data which accounts for the breaks in the line graph as changes in the data that was being reported were marked as a break. Changes in the data came from states that stopped reporting their information to the CDC like California or Maryland. More detailed information about the states that stopped reporting data can be found under the graph in Figure 6 which outlines which states stopped reporting their data to the CDC and can account for the gap in information between them and the Guttmacher Institute, which can go directly to facilities that perform abortions to get national data. Figure 6 shows that the number of legal abortions in the United States peaked in 1990 from both reports and the number of abortions performed has generally been declining since then.

\(^{48}\)“Abortion Incidence and Service Availability in the United States, 2020 - Jones - 2022 - Perspectives on Sexual and Reproductive Health - Wiley Online Library.”
Figure 5

Chapter 2: Introduction to the Theoretical Approach

The theoretical framework of the project rests on the capabilities approach in relation to the increase in substantive freedom that is experienced by individuals as a measure of development. In looking at abortion through the capabilities approach we are able to look at individual women's access to abortion as a method of expressing their freedom. Using the capabilities approach begins with the loss of freedom in restricting bodily autonomy but goes further into the different freedoms that are and would be impacted by restricting abortion access.

The capabilities approach is a framework for development that centers on individual people and the expansion of their substantive freedoms. Freedom in the capabilities approach is an expansion of what an individual can reasonably do and views development as a means of letting individuals live the lives they have reason to value.\(^{50}\)

In the capabilities approach, Sen makes distinctions between freedoms and unfreedoms. This understanding of development is focused on the individual instead of creating a list of guidelines on what is allowing the most opportunity for an individual. For example, not being able to afford a trip to the emergency room would be an unfreedom in that they are not free to make the choices that they would want to survive.\(^{51}\) Martha Nussbaum expanded on this by providing ten basic freedoms that should be supported in development which she calls ‘central human capabilities’.

The capabilities approach was originally created to be used in terms of development but would be beneficial in looking at abortion rights because of the framework of substantive freedoms that it provides. By redefining development as increasing or decreasing individual

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\(^{51}\) Sen, *Development as Freedom*, 3
freedoms the capabilities approach allows us to look at the freedoms that accompany the right to reproductive healthcare.

Using the capabilities approach as a method of understanding issues of abortion access in the United States the argument would be that the limitation of abortion access is taking away a freedom that allows people to choose the lives that they value. There is economic literature that highlights how detrimental being forced to have children, both financially and emotionally, is. Taking away the right would be taking away substantive freedom. Using this approach will help guide the discussion while also maintaining that access to abortion is a developmental freedom. Amartya Sen’s *Development as Freedom* is the base of the capabilities approach. The book is based on a series of lectures that he gave at the World Bank that he has restructured and broken down into more manageable terms in the book. The basis of the capabilities approach is development as the process of expanding the real freedoms that people enjoy and the removal of sources of unfreedom.\(^5^2\)

Sen writes that “The view of freedom that is being taken here involves both the processes that allow freedom of actions and decisions, and the actual opportunities that people have, given their personal and social circumstance. Unfreedom can arise either through inadequate processes or through inadequate opportunities that some people have for achieving what they minimally would like to achieve.\(^5^3\)” Freedoms in this approach can otherwise be defined as expanding the opportunities that are available to individuals in the choices that they can reasonably make to improve their quality of life and allow them to lead the lives they want. This view of development focuses more on the individual and the choices that are available to them instead of

52 Sen, *Development as Freedom*, 3
53 Sen, *Development as Freedom*, 17
looking at development at a more aggregate level. Unfreedoms are essentially the factors that prevent people from achieving the goals that they would like to achieve. The core of the capabilities approach is “the expansion of the ‘capabilities’ of persons to lead the kind of lives they value and have reason to value.” This approach is important to the individual and provides for development to be more flexible to the needs of each society instead of standards that need to be met.

There are five freedoms that Sen lists that would help provide more capabilities for individuals. Political freedoms, economic facilities, social opportunities, transparency guarantees, and protective security. Political freedoms are the freedoms of people to be able to decide who is governing them, freedom of expression, and freedom of the news. Political freedoms are essentially the freedoms of people and citizens of any area to reasonably engage in government without repercussions. Economic facilities are the freedom of individuals to use economic resources or for individuals to engage with the economy in terms of trade and production amongst each other. Social opportunities refer to arrangements made by the government or other organizations to address substantive freedoms for individuals to live better lives. Examples of social opportunities can be seen in public education and healthcare or other public goods that would benefit society as a whole. Transparency guarantees are the freedoms that are needed to maintain and provide the openness that people should be able to expect from each other. The last type of freedom is protective security which deals with the need for a social safety net in a society and is split into institutional arrangements that can be made like unemployment benefits and ad hoc arrangements that can be made for emergencies. These

54 Sen, *Development as Freedom* 18
55 Sen, *Development as Freedom* 10
different freedoms are all interconnected and work in the advancement of providing more freedoms when addressed in any way and this is the way that Sen would define development.

“A person’s ‘capability’ refers to the alternative combinations of function that are feasible for her to achieve. Capability is thus a kind of freedom the substantive freedom to achieve alternative function combinations”. Sen writes about the function of different freedoms in allowing for people to achieve the varied lifestyles that are important to them. This as a method of analysis for development focuses on what an individual can do and how they can interact with society at large to be able to function how they wish.

Sen, also, writes about the agency of women and the intersection of women’s well-being and agency in encouraging development. He argues that women’s agency is important to the development of the whole family and acknowledges the skewed sexual division of labor within the household which is further expanded upon in Martha Nussbaum’s work. Martha Nussbaum expands on Sen’s capabilities approach by adding the ten central human functional capabilities, refining the capabilities approach into three distinct categories of these capabilities.

The central human functional capabilities that Nussbaum outlines in her paper are life, bodily health, bodily integrity, senses imagination and thought, emotions, practical reason, affiliation, other species, play and control over one’s environment. These capabilities are each separate components of the different capabilities that are instrumental in allowing individuals to be able to make choices regarding their lives but they do not work in a vacuum, improving the conditions that allow a person to choose in regards to one can impact the others and allow them

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56 Sen, Development as Freedom
57 Sen, Development as Freedom. 190.
to live overall better lives.

The capability of life is simply the ability to live the length of a normal human life without dying earlier or experiencing conditions that do not make life worth living. Bodily health is the ability to have good health, including reproductive health. Bodily integrity speaks to the ability to have agency over an individual’s body by being able to move freely, be secure against assault, have the opportunity for sexual satisfaction, and have a choice in regard to reproduction. Senses, imagination, and thought are the ability to use their senses to imagine, think, and reason through skills like literacy and basic scientific and mathematical training. The capability of emotions ensures that individuals can express their emotions without fear or anxiety affecting a person’s emotional development. Practical reason allows individuals to form a conception of one’s self and what they want to achieve within it. Affiliation is both the ability to live with others while remaining considerate of their skills and abilities while also having the social bases of self-respect and being treated as ‘a dignified being whose worth is equal to that of others’ by being protected against discrimination based on marginalized identities. Other species refers to the capability to live with regard for other beings in nature. Play is the capability for recreation. Control over one’s environment is both in the sense of political choice and action but in the more material way of being able to control the way that they interact with the world through the capability to have a home, to be able to seek a means of making money59. These central human functional capabilities are different components that are essential in the creation and maintenance of dignified human life.

Nussbaum further divides the capabilities into three different roles for analysis of the

59 Nussbaum,”Women and Equality: The Capabilities Approach,”
impact on individual's lives- basic capabilities, internal capabilities, and combined capabilities. Basic capabilities are those that are innate and natural to individuals and provide a solid foundation for individuals to leave long, healthy, and meaningful lives. Nussbaum then writes about internal capabilities that address the issues of the state of the individual and ensures that an individual has the preconditions to carry out certain functions. The last type of capability that Nussbaum focuses on is the combined capabilities which are essentially the combination of internal capabilities with the external conditions that would allow an individual to experience these capabilities. Nussbaum provides the example of citizens in non-democratic regimes in which individuals have the internal capabilities to be active political participants but lack the external conditions in which to exercise these rights sufficiently. This further depends on the understanding of the capabilities approach because while centering the impact of development on the individuals it combines the concerns for the internal rights and capabilities of people with their external ability in being able to functionally pursue these rights. Essentially this method of analysis ensures that people can develop internally in ways that would enrich their lives and ensure dignity for them as individuals while also looking at the external factors that may hinder them from doing so.

Nussbaum stresses the importance of understanding capabilities concerning the combined capabilities or the actual outcomes that individuals can experience in relation to what they can expect to experience combined with the reality of the environment around them. As Nussbaum says “Capability is thus a demanding notion. In its focus on the environment of choice, it is highly attentive to the goal of functioning and instructs governments to keep it always in view. On the other hand, it does not push people into functioning: once the stage is fully set, the choice
is theirs." This quote summarizes the capabilities approach very simply and without many of the nuances of what the choices are but at the end of the day the approach is working to increase the capabilities of individuals through policy initiatives but by centering the people who would be impacted and working to ensure that if they would like to choose to expand what they want they can do so.

In “Abortion, Dignity, and Choice,” Martha Nussbaum and Rosalind Dixon argue that the capabilities approach is the ideal framework to understand the issue of abortion under. They argue that “Access to abortion should be understood in terms that refer both to barriers against state interference and to affirmative duties on the part of the state to provide support” or that abortion access is both the responsibility of the state to maintain affirmative duties for and to have fewer barriers against. They argue that the connection between health-based reasons for abortion access is linked to bodily autonomy and the autonomy that people who can get pregnant exercise when they get an abortion. Dixon and Nussbaum wrote about the connection between human dignity and human equality that is oftentimes constitutionally mandated and should be expanded upon and protected by the government and the capabilities approach allows for a framework in which to do that. Their final reason that the capabilities approach is the correct framework for advocating for and analyzing abortion is that “The CA [Capabilities Approach] reminds us that the protection of human dignity requires the protection of spheres of choice and bodily and mental health in all context, not just a situation in which interference is equal for all.” Abortion access being protected under the basic rights that individuals are entitled to in the

62 Dixon and Nussbaum, “Abortion, Dignity and a Capabilities Approach,” 14
capabilities approach is not bound under one of the capabilities but is instead covered under multiple and the infringement of these rights limit what people who can get abortions are capable of even when they do not use them.

Martha Nussbaum and Rosalind Dixon wrote about the capabilities approach as it is related to abortion in “Abortion, Dignity and the Capabilities Approach,” in which they link human dignity with abortion rights. They argue that while through the capabilities approach a fetus has a potential for human dignity, that should not supersede the dignity of actual, independent human beings. Nussbaum and Dixon grant that while under the capabilities approach a fetus does have a claim to human dignity and should be allowed moral status by the capabilities approach, “its dependent and merely potential status means that its type of dignity is distinctive, and not directly commensurable with that of independent human beings.” In other words, while a fetus does have a claim to the rights that are outlined in the capabilities approach, it is a potential human dignity and the infringement of rights against it is not equal to the infringement of rights of independent human beings. They continue to say that regardless of a fetus’s potential standing there should be a base level of legality regarding abortion that can be controlled due to context by saying “But, even if this is so, the recognition of the fetus as having potential standing under a CA does not undermine the case a CA makes for recognizing some form of legal floor regarding access to abortion—or, depending on the context, for states giving constitutional or quasi-constitutional status to abortion rights at least within certain “central ranges”, common to the constitutional systems of most countries that permit legal access to abortion.”

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63 Dixon and Nussbaum, “Abortion, Dignity and a Capabilities Approach,” 6
64 Dixon and Nussbaum, “Abortion, Dignity and a Capabilities Approach,” 6
Furthermore, Dixon and Nussbaum highlight that requiring pregnant people to remain pregnant is an infringement on their individual autonomy by giving them a duty to provide support through the use of their bodies. They argue that essentially a woman or person who is pregnant’s autonomy and right to human dignity overpower that of a fetus before they are viable.

“Capabilities, Reproductive Health and Well-being” by Jocelyn DeJong writes about reproductive health in relation to the capabilities approach in developing countries but provides an improvement on the questions we ask in relation to abortion, capabilities, and the United States. They draw on three methodological questions to apply the capabilities approach to abortion and reproductive health. The first is “whether to address functioning or capability.” DeJong distinguished between capabilities and functionings by implementing the agency of the individual, two actions can be explained through different means while being functionally the same but one explanation might not allow for the capability to do something else. Functionality is the more physical element of the action while capability is the choice that is made. In looking at reproductive care it is important to focus on who would be functionally able to choose to get an abortion in ensuring that the capability is extended to all people who can get pregnant. DeJong’s other two methodological questions look to which functionings matter, and how can capabilities be aggregated. These three questions frame the issue and allow for a broader set of implications. While this paper was originally written in regard to all reproductive health and primarily to be analyzing developing countries I will narrow the focus to abortion care in the

67 Dejong, “Capabilities, Reproductive Health and Well-Being,” 21
United States.

*The Economic Emergence of Women* by Barbara Bergmann outlines the economic history of women entering the labor market. She argues that the industrial revolution leads to an increase in technology that has subsequently increased real wages. As real wages have gone up and societal expectations of different lifestyles have changed the opportunity cost that women incurred by continuing to stay at home and out of the labor market increased until it was no longer feasible to not emerge. Bergmann writes “The key to women’s economic emergence is that their time has risen in price until it has become too valuable to be spent entirely in the home.” The reason for the increase in the real wage is due to an increase in technology, capital goods, and education. “A culture of consumerism the social context in which economic decisions were made” The culture of consumerism as Bergmann viewed it, encouraged women to enter the labor market as the separate sphere model of men in the paid labor force and women in the household did not allow for households to make enough money for their ‘needs’ that went beyond subsistence. Bergmann also writes that the increase in women’s educational attainment lead to them entering the labor force in higher numbers as that level of career investment would yield better results in the paid labor sphere. Bergmann does not attribute the increase in education to anything in particular but does look at the impact of it on labor market outcomes.

Claudia Goldin and Lawrence Katz’s “Power of the Pill” provides a convincing argument that the dissemination of the birth control pill to unmarried women’s impact had an initial direct

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69 Bergmann, *The Economic Emergence of Women*, 16.
71 Bergmann, *The Economic Emergence of Women*, 18.
impact of allowing women to be able to make more of an investment in their careers by being able to continue their educations without getting married. The pill had an indirect impact through the social multiplier effect by encouraging women to delay getting married until after school and find a more appropriate partner. The direct impact of the pill on women’s labor market involvement can be seen in the rate it was taken by women at the time, by 1976, 73% of single women between the age of 18 and 19 had used the birth control pill. The changes in the law that allowed for this to happen came quickly with the dropping of the ‘age of majority’ to 18 with the passing of the 26th Amendment. This provided opposition to the century-old Comstock laws that were touched on earlier and had made the social norms on contraceptives murky. The 1967 amendment to social security that allowed poor women to obtain family planning without notice of age or marital status was a signal to doctors around the country that the social climate was changing and the discussion around contraceptives shifted front that of legality to the age of majority. Between 1969 and 1974 the shift was further set where “the legality both before and after 1972 hinged on whether the minor was ‘emancipated’ by marriage, parental status, parental consent or statute.”

Goldin and Katz’s “Power of the Pill” also fills in a gap in Bergmann’s *The Economic Emergence of Women* by addressing the increase in women’s career investment by going to college and continuing into the labor force. They find that “Throughout the 1960s the ratio of women to men was around 0.1 in medicine, 0.04 in law, 0.01 in dentistry, and 0.03 in business administration. By 1980 it was 0.42 in medicine, 0.57 in law, 0.24 in dentistry, and 0.39 in

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business\textsuperscript{74},” which illustrates the investment in careers that these people were allowed to make given access to birth control. There is a significant increase in the ratio of men to women in comparison from the 1960s to the 1980s as more women were able to dedicate their time to these higher levels of career investment due to their ability to control whether they would become pregnant. This added control in bodily autonomy allowed for their commitment to these professional degrees and ability to compete in the workforce for these jobs. The added benefits of the dissemination of the birth control pill throughout the time allow for an explanation of why the opportunity cost for women not entering the workforce was increasing and why women were being encouraged to become more educated and therefore become more competitive applicants in the labor market. As women had more access to reproductive care through access to the birth control pill and abortion their bodily autonomy shifted to allow them to make high levels of career investment which would increase the opportunity cost of not entering the labor market and maintaining the separate sphere model that white women had largely been adhering to throughout the early twentieth century.

This demonstrates that access to safe and effective family planning for unmarried and married women has a positive impact on women’s labor market participation rate as they can invest more into their education and ensure that they are making the right choice for them at the time they need it. This same logic can and should be applied to other family planning methods like abortion as their economic impact would have a similar effect. The introduction of the birth control pill was instrumental in allowing women to enter the labor market and make more informed choices about their health and futures.

Bergmann’s *Economic Emergence of Women* and Claudia Goldin and Lawrence Katz’s “Power of The Pill: Oral Contraceptives and Women’s Career and Marriage Decisions,” are included in the chapter on the theoretical framework as they are both used for the analysis of the impact of reduced abortion access on women’s labor market outcome. Goldin and Katz’s contributions in linking contraceptive access with women’s career investment through educational attainment are important in linking the educational attainment of women with their labor market outcomes more contemporarily. Bergmann allows for an understanding of the significance of wage differentials that women face in the paid labor sphere by studying the reasons that women entered the labor market. Linking the past and the present is key in being able to comprehensively chart potential future outcomes.
Chapter 3: The Impact of Reduced Abortion Access on Women’s Labor Market Outcomes

Overwhelmingly, the literature points to the relationship between access to contraceptives and women’s labor market outcomes. Throughout this section, I am going to outline the potential and actual impacts of reduced abortion access on women’s labor market outcomes. To do this I will outline other economic outcomes that are correlated with states that have reduced abortion access and further try to outline the economic impacts of not being able to get an abortion. Then I will bring in the theoretical lens that has been outlined in Chapter 2, with the capabilities approach and the Economic Emergence of women before highlighting policy recommendations that would not only restore abortion access but would make it more equitable and accessible.

“Intersections of Women’s Economic and Reproductive Empowerment” by Sarah Gammage, Shareen Joshi, and Yana Rodgers looks at the connection between reproductive health, quality of work, and care responsibilities of women and argues that the intersection is endogenous or that the relationship between reproductive health and economic empowerment is continually perpetrated through women’s experiences within the labor market. Gammage et. al argues that “Gender inequality limits women’s expressions of agency in terms of their ability to make reproductive choices, exercise control over resources, and have mobility outside of the house.” The relationship between reproductive health and economic empowerment is inextricable. Through the article Gammage et. al address that “fertility is a function of women’s work status, and women’s work status is a function of their fertility.” They also present

76 Gammage, Joshi and van der Meulen Rodgers, “The Intersections of Women’s Economic and Reproductive Empowerment,” 12
77 Gammage, Joshi and van der Meulen Rodgers, “The Intersections of Women’s Economic and Reproductive Empowerment,” 12
research that shows that being able to control the timing at which they have children allows them to have increased educational attainment, higher rates of labor force participation and increased lifetime earnings. Women’s ability to choose if/when they are pregnant allows them to make choices about their labor market outcomes in regard to education. These findings are in line with Goldin and Katz’s “Power of the Pill” and once again highlight the relationship between the highest level of educational attainment with the ability to control the timing of pregnancy.

An analysis of the impact of TRAP laws or Targeted Regulation of Abortion Providers can be found in “Do US TRAP Laws Trap Women into Bad Jobs” by Kate Bahn, Melissa Mahooney, Adriana Kugler, and Annie McGrew looks at the impact of access to reproductive care on labor market outcomes. They find that TRAP laws effectively ‘trap’ women into jobs that reduce their mobility across occupations and into higher-paying occupations. They do this by looking into states that have TRAP laws and the labor market outcomes of women who live in those areas. They found that “TRAP laws ‘trap’ women into jobs and reduce their mobility across occupations. Moreover, we find that TRAP laws reduce the likelihood that women will move toward higher-paying jobs.” Bahn et. al finds that women are effectively ‘trapped’ by TRAP laws as they are subject to ‘job lock’ in which people stay in a job to maintain the health benefits that they receive from their job. Job lock is exacerbated in states that have TRAP laws as the Hyde Amendment blocks federal funds from being used for elective abortions. The paper argues that “public funding for abortions and insurance coverage likely make it easier for women to access employment and move across occupations,” to address the issue of job lock. Bahn et. 

al acknowledges that job lock assumes that an individual’s current occupation is not necessarily the occupation that would be the most fulfilling and offer up a solution in publicly funding abortion and legally mandating that insurance companies cover contraceptives. Bahn et. al found that there was a statistically significant reduction between 5-7 percent of women who move toward higher paying jobs in states that have TRAP laws. They also find that requiring insurance companies to cover contraceptives increases the number of women who transition into employment by 34%.

Further evidence of the efficacy of TRAP laws can be seen in “How Far is Too Far? New Evidence on Abortion Clinic Closures, Access, and Abortions,” which looks at the impact of a TRAP law that was passed in Texas in 2013. They found that an increase in the distance that people who want abortions are forced to travel puts forth a significant barrier to access. They found that “if access to abortion clinics had remained at pre-HB2 levels, Texas women would have had nearly 15,000 more abortions in 2014-2014 than were observed”81. These findings imply that reduced abortion access through TRAP laws is indicative of the legal and cultural landscape that women in these states are immersed in and highlight the relationship between access to contraceptives and economic outcomes. The capabilities approach centers on the individual but highlight the relationship between capabilities in that none of the capabilities stand on their own and are intertwined with each other.

The article “At a Crossroads: The Impact of Abortion Access on Future Economic Outcomes,” by Kelly Jones looks at the economic impact of abortion on women’s future careers and finds that abortion increases educational attainment, career outcomes, and earnings and

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reduces poverty and reliance on public assistance. Jones analyzes the impact of abortion access on early births and the impact on women’s economic outcomes. They find that access to abortion from the ages of 15-23 increases the years of education by 6%, the probability of going to college increases by 41%, and the probability of getting a college degree increases by 72%. They also find that the impact of abortion access in this age period is stronger for black women as their educational attainment increases by 20%, 70% increase in the probability of going to college and the probability of getting a college degree increases from .3-.5. Jones finds that abortion access through the ages of 15-19 increases the probability of entering the paid labor force by 38% and increases the probability of working in a management position by 150%. For black women, access to abortion under the age of 20 and 24 affects the probability of future work status by 59%. In regards to income, the study finds that abortion access before the age of 20 increases a woman’s lifetime earnings by 37% and family income by 10%. When looking at the impact of early abortion access for black women Jones found that abortion access from the ages of 15-23 increases individual earnings by 75-100% and more than 100% of family earnings. Jones analysis is done through looking at variations between states in legal access to abortion during the 1960s and 1970s to estimate a causal impact of abortion access on outcomes.

Jones draws from Diego Amador’s “The Consequence of Abortion and Contraception Policies on Young Women’s Reproductive Choices, Schooling and Labor Supply” in which he creates a counterfactual model of abortion and theorizes what the impact of an abortion ban would look like in the US using data. He found that a theoretical abortion ban would “decrease

84 Jones, “At a Crossroads: The Impact of Abortion Access on Future Economic Outcomes,”
accumulated schooling by 9.5% and lifetime earnings by 3.3% among women who would have ever had an abortion.\textsuperscript{86} Furthermore, he found that the ban would decrease lifetime labor market experience would decrease by 2.2% for women who would have had an abortion\textsuperscript{87}. Amador’s theoretical model shows more tangibly the theorized economic consequence of an abortion ban or the impact of severely restricting abortion access on labor market outcomes.

One of the landmark studies on the economic impact of abortion and specifically, reduced abortion access is the Turnaway study. The study, carried out by ANSIRH at the University of California San Francisco, is a longitudinal study that looks at the effects of unwanted pregnancy on women’s lives. The data that was collected by the Turnaway study have further been used in other research works as the data is available to researchers. The study compares the economic results of women who were able to get an abortion and women who were denied an abortion due to gestational limits.

The data from the Turnaway study was used in three papers that look at the socioeconomic status of people who were denied an abortion by being over the gestational limit and those who were just under the limit. They found that “evidence from surveys indicates that women who were denied versus received wanted abortions experienced worse health, higher poverty rates, and higher levels of public assistance receipt over the next five years\textsuperscript{88},” through self-reported surveys over the course of five years. They found that the differences in


\textsuperscript{87} Amador, “The Consequences of Abortion and Contraception Policies on Young Women’s Reproductive Choices, Schooling and Labor Supply,”

socioeconomic status were gradually covered over the course of 5 years. Through data that they collected through the Turnaway study, Miller et. al found that self-reported income remained similar in the Turnaway group when compared to the Near Limit group but poverty rates increased in the Turnaway-Birth group due to their larger households.

They also linked the data that they collected to credit scores to stand as a proxy for women’s economic situation. They found that “women who were denied an abortion were significantly less likely to have a prime credit score in the two years following the birth.” While they found that credit scores had decreased, they did not find evidence that access to credit had decreased. Through the study, they are able to compare the outcomes of women who were denied an abortion and women who were able to get them under the assumption that the group of women who were able to get an abortion right before the cut were impacted by the same barriers to access as women who were turned away.

By restricting abortion access or banning it altogether, women’s labor market outcomes are impacted yet again through the motherhood penalty or the wage penalty that women experience when they have children. Budig and England write about the wage penalty for motherhood in relation to the gender wage gap, as it functions to further decrease women’s incomes as women who have children are more commonly seen as unreliable and a decrease in their wages can be seen because of this. They find that there is no similar fatherhood penalty that is experienced by men who become fathers and places a further burden on women who are not

90 Miller, Wherry, and Foster, “What Happens after an Abortion Denial? A review of Results from teh Turnaway Study.”
able to get an abortion due to a reduction in access\textsuperscript{92}. The motherhood penalty does not impact all women in the same way, Budig and Hodges found that the wage penalty is largest for the lowest-paid workers\textsuperscript{93}. The Turnaway study found that of the number of women who were denied an abortion in the Turnaway group, 91\% chose to parent over adoption\textsuperscript{94}, so low income women would be burdened both by abortion restrictions that pose as a barrier for them to have an abortion but would also face a larger burden with the addition of the motherhood penalty.

A comprehensive review of the economic impact of abortion access and the subsequent study of the reduction of access would be incomplete without the addition of the intersectionality. The complicating factor of race changes the conversation away from the impact on all women and instead grounds it in the impact of reductions in access on certain groups as many of the most important contributions to the literature could be, and often are, obscured by aggregating women into a singular group. Not looking at intersectionality diminishes the importance of marginalized groups and within the context of abortion does not allow for the disproportionate impact of reduction of access on marginalized women.

Access to reproductive care is not equal for all women, through “Reproductive Rights Denied: The Hyde Amendment and Access to Abortion to Native American Women using Indian Health Service Facilities,” it is clear that access to abortion for indigenous women is severely limited by the Hyde amendment. The Hyde Amendment was passed in 1976 and bans the use of federal funds for abortion with a few exceptions in the case of rape, incest, or threat to the life of


the mother. Many indigenous women primarily use Indian Health Service facilities as their primary source of reproductive care as the Snyder Act provides free health services to indigenous tribes through federal funds. Through the combination of these two acts, access to abortion care by indigenous women is heavily limited by the Hyde Amendment’s restriction on federal funds being used to fund abortion services. Arnold found that between 1981 through 2001 the Indian Health Services only performed 25 abortions and that many of the IHS facilities did not have abortion services available on site.

A more generalized study is “Different and Not Equal: The Uneven Association of Race, Poverty and Abortion Laws on Abortion Timing” which looks at who is most affected by laws that set gestational limits for abortion. Solazzo finds that “laws requiring second-trimester abortions be performed in a hospital and both in-person counseling and waiting periods have different associations with abortion timing based on race and income-to-poverty,” highlighting that access to abortion is not the same across the board. Solazzo focuses on abortion timing as timing is important in determining the cost, accessibility, and safety of an abortion. She found that a higher proportion of poor women had abortions in states that required multiple appointments to have an abortion through in-person counseling and waiting periods. They write that their research “suggests that if state legislatures continue to enact laws that limit the number of abortion providers, black and Hispanic women’s abortion timing and access will be disproportionately impacted.

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96 Arnold, “Reproductive Rights Denied.”
98 Solazzo, “Different and Not Equal,” 539
Kelly Jones found that education, career, and income were all impacted by access to abortion. She found that access to abortion between the ages of 15-24 increased black women’s income by $23,000-28,000 annually and family income by $48,000 to $52,000.\(^9\) When compared to Jones's finding for all women at increasing individual income between $11,000 and $15,000 annually and increasing family income by $6,000 to $10,000 annually, differentiating between the impact by race provides a more clear picture.

“Returns in the Labor Market: A Nuanced View of Penalties at the Intersection of Race and Gender in the US” finds that there is no single wage penalty based on race or gender but instead that identities can not be disregarded when doing economic analysis. The paper uses intersectionality theory to explain the income differentials that are experienced by women of color whose multiple marginal identities are reflected in their average earnings. They found that in 2017 the average hourly wage for Black women was 63% of the average hourly wage for white men and for Hispanic women the percentage drops to 55% of the hourly wage that is on average found for white men.

In being able to carry out this analysis Paul, Zaw, and Darity estimate the wage penalty that can be caused by each identity and then are compared to find the differentiating factors of race and gender. They find that for white workers there is a gender pay gap of .2019 log points\(^10\) while for Black workers the gender gap is .0903 log points or around half of the gender gap in relation to white workers\(^11\), this is because the wage differential is being attributed more to race than gender. However, when comparing white men and Black women the wage differential is

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.4043 log points of which 55% is unexplained through variables that are taken into account in the model. The paper finds that “Black women experience wage penalties associated with their race and gender well beyond the additive component of measured race and gender penalties in isolation,” confirming an intersectional penalty in earnings that go beyond the summative penalties of either identity.

Their work draws on “Race and Gender Differences in the Earnings of Black Workers” by Marlene Kim where she finds that Black women face not only racial and gender penalties but an additional penalty for being Black women which hadn’t previously been observed as other studies had been looking at Black women in relation to the average of all women. By holding occupation as constant, Black women earn 2% less than women with the same levels of human capital.

Paul Zaw and Darity also use the same model in explaining the gap in hourly earnings which allows us to look at the unexplained gap which can further be attributed to discrimination in the labor market. The unexplained gap can be seen as further discrimination as controlling for occupation implies that Black women are able to freely choose their jobs and employers and does not take into account that because of discrimination it is more difficult for them to enter certain industries and occupation. In controlling for occupation and industry the regression analysis that is often done does not take into account the statistical discrimination that Black women experience in the labor market. Kim finds that Black women suffer from three different earning penalties, race, gender, and the intersection of being Black women and an additional penalty that is associated with the jobs in which Black women work.

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In “The relationship between abortion rates and economic fluctuations’ Fidel Gonzalez and Troy Quast look at the relationship between abortion and economic fluctuations from 1995 to 2016. They did not find a statistically significant association between the abortion rate and the unemployment rate but found that there was a procyclical relationship between abortion and a procyclical relationship between birth rates and macroeconomic fluctuations. The results of the study are not conclusive with the existing literature in which there is some debate about the existence of a relationship between abortion and economic fluctuations but seem unsurprising as the implication would be that more people would want to have children in better economic times. This also leads the way to policy implications that would allow for a larger child tax credit or stipend that would be associated with children as one significant barrier to having children would be the cost.

Some more tangible examples of what a reduction in abortion access would mean for women and their labor market outcomes can be seen in looking at Romania and Poland. In 1966, Romania banned abortion where it had otherwise been widely accessible. Many of the studies that look at the impact of that ban look at the children’s labor market outcomes and find that children born after the ban had worse labor market and educational outcomes than those born before the ban. A study held on women’s labor force participation rate after the ban found that “increasing fertility reduces the probability of employment and labor force participation for

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105 Gonzalez and Quast, “The Relationship between Abortion Rates and Economic Fluctuations,”
mothers\textsuperscript{107}. Romania’s abortion ban was lifted in 1990\textsuperscript{108} when contraceptives and abortion were legalized again.

More recently, in 2021, Poland’s Constitutional Tribunal banned abortion in almost all circumstances\textsuperscript{109}. Agata Chelstowska’s “Stigmatisation and Commercialization of abortion services in Poland: Turning Sin into Gold,” look at the economic consequences of the lack of access to abortion in Poland. The article was published in 2011 and focused on the impact of the social inequality that Polish culture had upheld in effectively taking abortion out of the public sphere and putting it in the private. They found that the cost of a surgical abortion was more than the average monthly income of a citizen and that through the effective refusal by doctors to perform abortions, the market in the private sector became very profitable with Chelstowska estimating that the private or illegal abortion sector making around 300 million zloty annually\textsuperscript{110}. As abortion access is limited only to the wealthy the law and the practice of it stands to bar poor women from accessing care when they want and is a cause of social inequity within the country.

Capabilities are capable of standing on their own as unique and separate from each other but they work together to ensure that individuals have a holistic and robust set of capabilities that are interwoven through society and policy to allow them to make the choices that they want so that they are functionally able to live the lives that they want. Abortion access impacts, at the lowest level, a person’s bodily health and bodily integrity which Nussbaum had distinguished

\textsuperscript{107}Pop-Eleches, “The Impact of an Abortion Ban on Socioeconomic Outcomes of Children.”
between the ability to have good health and the ability to exercise agency over an individual’s own body. In the same vein is the capability of affiliation. Nussbaum writes that affiliation is the ability to live with others while being treated as a dignified being whose worth is equal to that of others. The debate around abortion access is often demeaning with an implicit understanding that the people who are seeking abortions do not know what is best for their circumstances and restrict their freedoms of choice of their body and autonomy. These restrictions are oftentimes done without scientific merit in an attempt to exert power over a person’s bodily autonomy and capability. Theorizing about abortion and the impact of the law is not complete without an understanding that the right of affiliation is centered on individuals being treated with dignity.

Women’s economic and reproductive empowerment is inhibited by abortion restrictions by impacting their access to care through restrictive laws that disproportionately impact low-income or marginalized people. The literature overwhelming finds a link between women’s educational attainment and their access to contraceptives and abortion care, reinforcing Goldin and Katz’s finding that the ability to choose when to have children impacts an individual's schooling. Abortion access and the ability to choose when to have children at its core promotes bodily health and bodily integrity as Nussbaum outlines it. However, the link between educational attainment and abortion care allows Nussbaum’s capability of senses, imagination, and thought to be directly impacted by a restriction in care. While initially this capability is a specialized subsect of Sen’s social opportunities and speaks to the basic ability to reason through literacy, basic scientific education, and arithmetic skills\(^{111}\) in practice the limiting of educational attainment through abortion restrictions directly violates this right. Educational attainment can

also be seen as a career investment, an increase in career investment should increase an individual's labor market outcomes through their income and their position.

Nussbaum’s capability of practical reason names the importance of a conception of self and an individual’s goal of success. For many people, the labor market is not just a place to earn a subsistence wage but is where people can self-determine what they value and want to work toward. While labor market outcomes and careers found within it are not accessible in the same way to everyone, the ability to choose whether an individual wants to have a child through having access to abortion would increase their capability in choosing it.

Bahn et. al’s work on the economic impact of TRAP laws finds that people who live in states with TRAP laws are more likely to experience job lock in favor of being able to access health benefits like reproductive care through insurance-covered contraceptives or abortion. One of the main assumptions within the work is that “it is bad to be locked into one’s current occupation since it limits matching into productive and fulfilling jobs.” When seen through the lens of the capability for practical reason it is clear that a person's right to find fulfilling work and values is hindered by outside forces like access to health insurance and adequate coverage for the services that they view as integral to their lives and careers. The findings from articles that look into the economic impact of TRAP laws also find that when abortion access is limited, a person's capability to have control over one’s environment is also affected.

In identifying control over one’s environment as a unique capability Nussbaum writes about control over the political environment an individual lives in through political action but in the material way of being able to have control of the way that they are able to earn a living and

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seek a means of making money. Bahn et. al’s finding on job lock due to a reduction in abortion access link abortion care with this right concretely. In “At a Crossroads: The Impact of Abortion Access on Future Economic Outcomes,” it is clear that access to abortion affects work status and family income and finds that having access to abortion increases a woman’s probability of working by 38% and increases the probability of working in a management position by 150%. They also find that abortion access increases a woman’s earnings by 37% and increases family income by around 10% on average. These findings highlight the concrete increase in income that abortion access allows people who want them and link the capability of having control over one’s environment with access to abortion.

The capabilities approach as a method of understanding the labor market implication of reduced abortion access for women is key in allowing multiple dimensions of analysis. The nuances of each unique capability as outlined by Nussbaum highlight that abortion access does not begin and end with bodily autonomy. While control over one’s self should be enough to complete the argument, the additional dimensions and layers of impact that the capabilities approach allow us to study a holistic review of the many different impacts and ways in which an individual’s freedoms would be restricted without abortion access.

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113 Nussbaum, Women and Human Development.
114 Jones, “At a Crossroads.”
Chapter 4: Policy

Through this chapter I have related the issue of abortion access to the capabilities approach, expanding upon the literature to connect the ways in which losing access to abortion would impact women’s labor market outcomes. Martha Nussbaum wrote that “Capability is thus a demanding notion. In its focus on the environment of choice, it is highly attentive to the goal of functioning and instructs governments to keep it always in view. On the other hand, it does not push people into functioning: once the stage is fully set, the choice is theirs"\(^{115}\). In using the capabilities approach as a method of analyzing the potential impacts of reduced abortion access it would be a disservice to the approach to not include potential policy solutions. Aside from the most basic solution of federally protecting abortion, the studies that are included have looked at the failures in policy for marginalized women.

Congress should pass the Equal Access to Abortion Coverage in Health Insurance Act which would repeal the Hyde Amendment\(^{116}\) and would allow for an increase in access for everyone who depends on Medicaid for health insurance. It would also allow for an increase in accessibility for Indigenous people who depend on the federal government for healthcare and otherwise do not have access to care as seen in Shaye Arnold’s research into access to abortion for Indigenous people. Increasing access to care by repealing the Hyde Amendment would allow people not to be reliant on employer healthcare to ensure that their health insurance would cover abortion if necessary and could decrease job lock that was outlined in “Do US Trap Laws Trap


Women into Bad Jobs.” Banning TRAP laws would also increase abortion access as it takes away the burden of care from the individual practitioners in clinics as a way of reducing abortion access. Another way to address the impact of TRAP laws would be passing the Women’s Health Protection Act which would “establish(es) a statutory right for health care professionals to provide abortion care and the right for their patients to receive care, free from bans and medically unnecessary restrictions that single out abortion care”. Bahn et. al found that having contraceptives covered by insurance would also be effective in mitigating some of the effects of TRAP laws in states with restrictions on abortion.

Increasing the number of clinics that are willing and able to perform abortions and setting a low price for them could increase access and address some of the issues that low-income people face in being able to get an abortion. “Different and Not Equal: The Uneven Association of Race, Poverty,” finds that traveling even 25 miles to obtain an abortion delays achieving an abortion, especially for minority women. By increasing the number of clinics and distributing them across the country, people who are unable to get an abortion due to difficulties with transportation would instead be more able to do so.

The literature also finds that price has a negative impact on abortion demand, setting an artificially low price or making it free and covered by the federal government would remove the price as a barrier to access. The study “An Economic Approach to Abortion Demand,” takes an econometric approach to abortion demand. Rothstein finds that price has a negative impact on

118 Bahn et. al “Do US TRAP Laws Trap Women Into Bad Jobs,”
abortion demand and writes that “There is a reason to believe that the supply of abortions is elastic, in other words, an increase in abortion demand does not affect the price level, and the supply of abortions can be expanded relatively easily so that this demand is met". Rothstein provides an economic explanation for an increase in federally funded abortions remaining the same cost regardless of location or other factors if subsidized by the federal government. The issue of cost was mentioned in Bahn et. al’s study on TRAP laws, another way to reduce job lock that is found in states with restrictive abortion laws is through free or reduced-cost abortions that would be accessible to everyone.

Given the penalty for motherhood that is experienced by women when they have children and the Turnaway study’s finding that 91% of women who were turned away from receiving an abortion chose to parent, federally funded childcare could help alleviate some of the burdens that women would face. The wage penalty for motherhood is highest for low-income women and they face a double burden in barriers from access impacted them strongly and the additional wage penalty after having children. In The Economic Emergence of Women, Barbara Bergmann advocates for publicly funded, high-quality child care in an effort to increase its affordability of it. She outlined a system in which families that are below the poverty line should not have to pay for childcare and provide subsidies for families that are above the poverty income level. Federally funded childcare would ensure that mothers are able to participate in the labor market without the additional burden of childcare on their wages. Women’s labor force participation is often dependent on their children and their ability to find child care for them, encouraging

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121 Bergmann, The Economic Emergence of Women 216
women’s labor force participation requires maintaining pre-market conditions that allow them to do so.

In continuing to provide pre-market conditions that allow women to succeed in entering and maintaining their labor force participation, Congress should pass legislation to guarantee paid family leave to parents. There is no current federal law that provides that right but, according to the Center for American Progress, eleven states have passed paid family leave laws. Standardizing paid parental leave throughout the country would help reduce job lock and could address some of the burdens that women face when having children.

Through Chapter 3, we have seen the economic impacts of restricting access to abortion through policies that have been enacted on both the state and federal levels. The literature reveals that people’s economic capabilities are restricted when access to abortion is limited. We find that educational attainment decreases, average income decreases and women are often tied to their careers by external forces. By viewing these results through the capabilities approach as outlined by Sen and Nussbaum we can see that many of the capabilities that they theorize for development are directly and indirectly impacted by access to abortion. The goal of the capabilities approach is to disaggregate development and focus on the functionality of the individual and what they can achieve within their lives given their values and desires. By highlighting the limitations that abortion restrictions engender we are able to create policy recommendations that go beyond reinstating abortion as a federal right in the United States but can tackle head-on the inequities that have been present in the system and have historically impacted people of color and low-income people the hardest.
Conclusion

This project aims to provide a holistic review of the economics of abortion and what the impacts of a reduction in access would mean for women’s labor market outcomes. In order to do this I have looked at the history of both abortion and women’s involvement in the labor market to see the rates at which women have traditionally participated in the labor market and try to explain the increase of women who entered the labor market in the 1970s and 1980s. In doing this we are able to trace the level of prior involvement in the labor market for women, and the impact of abortion, and allows for a look into the relationship between access to contraceptives and reproductive choices with education and labor market participation.

We then shifted into the theoretical framework that shapes the understanding of abortion and freedom, with Sen and Nussbaum’s capabilities approach and Barbara Bergmann’s *Economic Emergence of Women* to provide context for the theoretical approach to the issue. Restricting abortion access is, on its basest level, about controlling what a woman chooses to do with her body. By using the capabilities approach as a theoretical lens for the issue of abortion access, we can look at abortion access in terms of what an individual is capable of and return agency to them while maintaining the responsibility of the government in ensuring access. Nussbaum and Dixon provide a lens through which to study abortion and the capabilities approach but instead, we look to see how the different individual capabilities that are outlined by Nussbaum are altered without abortion access.

Through the lens of the capabilities approach we can look at research that concerns women’s access to abortion and find that without access to abortion, women’s educational attainment decreases, allows for increased job mobility, and increases in their income.
We then looked at the different economic consequences of a reduction in abortion access. The literature found that women’s educational attainment would be reduced by a reduction in access to abortion. Specifically in regards to women’s labor market outcomes is an increase in job lock, where women are trapped in jobs to maintain access to health insurance that would cover their reproductive care. Women’s lifetime earnings would also decrease without access to abortion. Through the capabilities approach of centering an individual, we can find and suggest policy solutions that would not only guarantee abortion as a federally protected right but increase access to abortion that was already impacted by the legal structure that had existed prior. The goal is not to simply turn back the clock to what was already available before but to provide a more equitable future and find the policies that would allow that to happen and remove the barriers to access that barred people from being able to get an abortion if they wanted.

This project has primarily studied the impacts of reduced abortion access and applied the capabilities approach of development to the issue in relation to women’s labor market outcomes. Further research could further narrow the scope of the issue by researching trans or nonbinary individuals who don’t identify as women but can get pregnant.

Since June 2022, reproductive rights have continued to be on the chopping block throughout the United States, especially in more conservative states. A federal judge ruled that the FDA’s approval of mifepristone, a drug commonly used for medical abortions, was improperly approved\textsuperscript{122}. The Justice Department then appealed the ruling and the US Appeals

Court ruled that the drug could be used up to seven weeks of pregnancy\textsuperscript{123}. This is just one of many examples of the changing political and legal atmosphere surrounding abortion. Through this project, I wanted to look both at the impact of policies that are aimed to reduce access and the impact of abortion on women’s labor market outcomes. I wanted to see how women’s income, labor force participation, and education, would be impacted by laws that take the freedom to choose out of individual’s hands and have found that overall, the inability to make this choice and found that they would all be decreased. I firmly believe that the freedom to choose and have individual bodily autonomy is an incredibly important right that should be protected and maintained by the government. The government should work instead to create a more equitable and just labor market in which everyone, regardless of gender or race can exercise their capabilities.

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