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**Contact:** Tara Sweeney, [sfp@conwaystrategic.com](mailto:sfp@conwaystrategic.com), 202-991-1123

**#WeCount Reports that Abortion Volume Continues to Increase**

*The increase in abortion volume is driven by telehealth abortion, which made up 20% of all abortion care in the first quarter of 2024*

Denver, CO—The Society of Family Planning released its seventh [#WeCount report](#) today, reporting abortion data from April 2022 through March 2024. Since the *Dobbs v. Jackson Women’s Health Organization* decision, the number of abortions in the United States increased, even as 14 states have banned abortion completely. This elevated volume of abortion demonstrates the continued and growing need for abortion care across the country, and has been driven by an expansion of telehealth abortion care.

“While the volume of abortions has increased, we know that this isn’t the full story,” said **Alison Norris, MD, PhD, #WeCount Co-Chair and professor at The Ohio State University’s College of Public Health and co-principal investigator of the Ohio Policy Evaluation Network**. “Even as we see the increase in abortion volume nationally, the burden on an individual living in a state with an abortion ban is enormous, especially if they need in-person abortion care.”

For the first time since #WeCount began, the national monthly total of abortions exceeded 100,000 in January of 2024. The #WeCount report found between 94,670 and 102,350 abortions monthly between January-March 2024, with a monthly average of 98,990.

Provision of abortion via telehealth continues to increase, with telehealth making up a larger proportion of the abortion care landscape than ever before. From January to March 2024, there were about 19,700 telehealth abortions per month, including those provided by brick-and-mortar clinics, virtual-only clinics, and under shield law protections to states with bans on abortion or telehealth. Telehealth abortions represent 20% of all abortions, nationally.

“Telehealth abortion is making a critical difference for people seeking abortion care in this increasingly restrictive environment,” said **Dr. Ushma Upadhyay, #WeCount Co-Chair and professor at the University of California, San Francisco’s Advancing New Standards in Reproductive Health (ANSIRH)**. “Telehealth also eases the surges and cuts down on wait times at abortion clinics providing in-person abortion care, which continues to be a critical route to abortion access, accounting for 80% of all abortions.”

Through March 2024, six states enacted shield laws that provide legal protections to clinicians who offer abortion care via telehealth to people in states that have abortion or telehealth bans. Telehealth abortions provided under shield laws averaged 9,200 per month from January to March 2024. In the nine months from July 2023 to March 2024, over 65,000 people in states with total or six-week bans and states with telehealth restrictions have accessed medication abortion provided under shield laws.

“Abortion care provided via telemedicine by providers, operating under shield law protections, are a lifeline for women, transgender men, and gender non-binary individuals in states with abortion bans, whose next best option may be to travel hundreds of miles to reach an abortion clinic,” said **Dr. Angel Foster, Co-Founder of The Massachusetts Abortion Access Project (The MAP)**. “By providing safe, effective, FDA-approved medications to patients in all 50 states, we’re doing what we can to mitigate the *Dobbs* decision’s tremendous damage to abortion seekers’ reproductive health and autonomy.”

The states with the largest average number of abortions per month during January-March 2024 included California, New York, Illinois, Florida, and New Jersey. The large number of abortions provided in Florida is noteworthy given the new law banning abortion after six weeks gestation, enacted May 1, 2024.

In the 14 states with abortion bans, abortions provided under shield laws and the efforts of those helping abortion patients travel to other states for care have permitted many to access abortion care. However, many others have been forced to carry a pregnancy to term. The states with the greatest cumulative declines in abortion volume over 21 months include Texas, Georgia, Tennessee, Louisiana, and Alabama.

“While some innovations are making medication abortion more accessible across the country, patients needing in-person abortion care still face tremendous barriers,” said **Dr. DeShawn Taylor, Founder and CEO of Desert Star Institute for Family Planning**. “The reality is that Arizona’s changing laws have caused chaos and confusion among patients, and constantly changing abortion restrictions make providing clinical care harder than ever before.”

The full [#WeCount report is available here](#). #WeCount will continue to track data about the number of abortions provided in each state throughout the year.

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*#WeCount is a time-limited study collecting monthly abortion volume data by state to better understand the impact of the Supreme Court’s decision in *Dobbs v. Jackson Women’s Health Organization* on abortion access. #WeCount data include clinician-provided abortions, defined as medication or procedural abortions completed by a licensed clinician in a clinic, private medical office, hospital, or virtual-only clinic in the US known to offer abortion care during the period of study. This report does not reflect any self-managed abortions, defined as any attempt to end a pregnancy outside the formal healthcare system.*

*The [Society of Family Planning](#) is a source for abortion and contraception science. The Society is a membership organization of over 1,700 scholars, clinicians, and others united around a vision of just and equitable abortion and contraception informed by science.*