The Impact of the Texas’ Abortion Clinic Shutdown Law on Latinas

The 2.5 million Latinas of reproductive age in Texas are disproportionately impacted by the Texas clinic shutdown law, which is currently under review by the U.S. Supreme Court in the case Whole Woman’s Health v. Hellerstedt.

Latinas Already Face Significant Barriers to Accessing Reproductive Health Care

- Many Texas Latinas already face significant barriers to accessing health services, including poverty, unreliability of transportation, inability to take time off from work, immigration status and lack of child care.

- The shortage of health care providers in predominantly Latino communities across Texas, coupled with the fact that Latinos are more than twice as likely as whites to be uninsured, makes finding and affording health care services extremely difficult.

- With high unemployment and poverty rates among Latinas, those with jobs may be unable or reluctant to jeopardize their employment by requesting time off to travel to a doctor’s appointment. Even if a woman is able to get time off, she may be unable to afford the costs associated with travel, including childcare.

- Before enacting its clinic shutdown law, HB2, Texas gutted the public family planning program that many Latinas depended on for contraception and other preventive reproductive health services. As a result, Latinas have far fewer options for controlling their reproductive lives. In fact, Latinas are two times more likely to have an unintended pregnancy than white women.

Latinas Are Disproportionately Impacted by Texas’ Anti-Abortion Laws

- By closing more than half of the clinics in Texas, HB2 requires Latinas, especially those in rural areas, to travel long distances to access abortion care – in some cases exceeding 200 miles to the nearest clinic. This places a significant burden on women, especially those who may not have a vehicle or a driver’s license, cannot afford the added expenses of travel, or live in one of the many communities that do not have public transportation.

- Clinic closures and stress on remaining clinics have increased wait times for women trying to obtain an abortion. As of September 2015, clinics in Dallas, Austin and Fort Worth reported wait times of at least 20 days for an initial appointment, cutting off access to safe and legal abortion care for many Latinas.

- Women who are unable to access professional abortion care are more likely to take matters into their own hands and attempt to terminate a pregnancy on their own. Research shows that self-induction attempts are more common among Latinas, particularly in communities along the border where clinics are scarcest.

Leading organizations representing Latinas filed a brief with the Supreme Court, explaining the impact of HB2 on Latinas. Brief signers included: National Latinas Institute for Reproductive Health (NIRH); Alianza Americans; California Latinas for Reproductive Justice; Casa de Esperanza; Colorado Organization for Latina Opportunity and Reproductive Rights (COLOR); Hispanic Federation; Labor Council for Latin American Advancement; Latino Justice PRLDEF; League of United Latin American Citizens; and the Mexican American Legal Defense and Educational Fund, Inc. (MALDEF).