

## Counseling and Waiting Periods for Abortion

**BACKGROUND:** Every state requires that a patient consent before undergoing medical treatment and that the consent be “informed.” Three interrelated elements underlie the long-standing tradition of informed consent: Patients must possess the capacity to make decisions about their care; their participation in these decisions must be voluntary; and they must be provided adequate and appropriate information. However, abortion counseling requirements sometimes run afoul of these principles by requiring information that is irrelevant or misleading.

In addition to abortion counseling requirements, many states require that at least 24 hours elapse between the counseling and the abortion. In states in which the counseling must be obtained in person (rather than via mail, fax, Internet or phone) and the woman must then wait a specified time period, most often 24 hours, between the counseling and the procedure, the woman is effectively required to make two trips to the health care provider in order to obtain an abortion, a requirement that could constitute a hardship for some women.

### HIGHLIGHTS:

- 34 states require that women receive counseling before an abortion is performed: 24 of these states detail the information a woman must be given; 10 states have abortion-specific requirements generally following the established principles of informed consent.
  - 25 of these states also require women to wait a specified amount of time—most often 24 hours—between the counseling and the abortion procedure.
  - 7 states require that all counseling be provided in person and that the counseling take place before the waiting period begins, thereby necessitating two separate trips to the facility.
- 24 states direct the state health agency to develop written materials: 8 require that the materials be given to a woman seeking an abortion, 16 require that the materials be offered to her.
- 9 states require that the woman be informed that she cannot be coerced into obtaining an abortion.
- Nearly all the states that require counseling require information about the abortion procedure and fetal development.
  - 32 states require that the woman be given information about the specific procedure, while 19 require information about all common abortion procedures.
  - 32 states require that the woman be told the gestational age of the fetus.
  - 23 states include information on fetal development throughout pregnancy.
- 10 states include information on the ability of a fetus to feel pain.
- 9 states provide information on accessing ultrasound services. (See also [Requirements for Ultrasound.](#))
- 22 states include information about the risks of abortion.
  - 18 states include accurate information on the potential effect of abortion on future fertility; in 2 states, the written materials inaccurately portray this risk.
  - 5 of the 7 states that include information on breast cancer inaccurately assert a link between abortion and an increased risk of breast cancer.
  - 7 of the 20 states that include information on possible psychological responses to abortion describe only negative emotional responses.
- 28 states include information on the health risks of continuing pregnancy.



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# ABORTION COUNSELING & WAITING PERIODS

STATE	Length of Waiting Period (in hours)	In-Person Counseling Necessitates Two Trips to Clinic	Written Materials Given or Offered	Woman Informed that Abortion Cannot Be Coerced	Description of Procedure:		Fetal Development:		Ability of a Fetus to Feel Pain*	Accessing Ultrasound Services
					Specific	All Common	Gestational Age of Fetus	Throughout Pregnancy		
<b>States with Detailed Abortion-Specific Informed Consent Requirements (24 states)</b>										
Alabama	24		Given	V,W	V	W	V	W		
Alaska			Offered		V	W	V	W	W <sup>†</sup>	
Arkansas	Prior day		Offered	V,W	V	W	V	W	V, <sup>‡</sup> W	
Georgia	24		Offered		V	W	V	W	V,W	V
Idaho	24		Given		V	W		W		
Kansas	24		Given	W	V	W	V	W		W
Kentucky	24		Offered		V		V	W		
Louisiana	24	X	Given	W	V	W	V	W	V <sup>Ω</sup>	
Massachusetts	▼									
Michigan	24		Given		V,W		V,W			W <sup>†</sup>
Minnesota	24		Offered		V	W	V	W	V, <sup>‡</sup> W	
Mississippi	24	X	Offered		V		V	W		
Missouri	24	X	Given		V	W	V	W	W <sup>‡</sup>	W
Montana	▼									
Nebraska	24		Offered		V	W	V	W		V,W
North Dakota	24		Offered		V		V	W		
Ohio	24	X	Given		V		V	W		
Oklahoma	24		Offered		V	W	V	W	V, <sup>‡</sup> W	V,W
Pennsylvania	24		Offered	W	V	W	V	W		
South Carolina	1		Offered		V	W	V	W		
South Dakota	24		Offered		V	W <sup>†</sup>	V	W	W <sup>†</sup>	
Texas	24		Offered		V	W <sup>†</sup>	V	W	W <sup>†</sup>	
Utah	24	X	Given	W	V	W	V	W	V	V
Virginia	24		Offered		V	W	V	W		
West Virginia	24		Offered	W <sup>†</sup>	V	W	V	W		
Wisconsin	24	X	Offered	W	V	W	V	W		V,W
<b>States with Customary Informed Consent Provisions (10 states)</b>										
Arizona	24	§		V			V			
California					V					
Connecticut					V		V			
Delaware	▼				V		V			
Florida					V		V			
Indiana	18	X			V		V			V
Maine					V		V			
Nevada					V		V			
Rhode Island					V		V			
Tennessee <sup>Ψ</sup>	▼						V			
<b>TOTAL</b>	<b>25</b>	<b>7</b>	<b>24</b>	<b>9</b>	<b>32</b>	<b>19</b>	<b>32</b>	<b>23</b>	<b>10</b>	<b>9</b>

All states waive mandatory waiting period requirements in a medical emergency or when the woman's life or health is threatened. In Utah, the waiting period requirement is waived if the pregnancy is the result of rape or incest, the fetus has grave defects or the patient is younger than 15. The counseling requirement is waived in cases of ectopic pregnancy or severe fetal abnormality (Alabama) and in cases of a medical emergency (Georgia and Rhode Island).

V= verbal counseling; W= written materials

▼ Enforcement permanently enjoined by court order; policy not in effect.

§ Enforcement temporarily enjoined by court order; policy is not in effect, pending the outcome of litigation.

\* Illinois does not have a counseling and waiting period law, but it requires that a woman receiving an abortion after viability be given the option of having anesthesia provided to the fetus.

† Included in written counseling materials although not specifically mandated by state law.

‡ Information given only to women who are at 20 weeks' gestation or more; in Missouri the law applies at 22 weeks gestation.

Ω The law also requires the information to be included in the written materials; however, the materials have not yet been updated.

Ψ Enforcement of a provision of the Tennessee law requiring that a woman be told that an abortion constitutes major surgery is enjoined.

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# ABORTION COUNSELING & WAITING PERIODS

STATE	COUNSELING ON HEALTH RISKS OF ABORTION						COUNSELING ON HEALTH RISKS OF PREGNANCY
	Future Fertility		Breast Cancer		Mental Health		
	Accurately Portrays Risk	Inaccurately Portrays Risk	Correctly Reports No Link	Inaccurately Asserts Possible Link	Correctly Reports Range of Emotional Responses	Describes Negative Emotional Responses	
<b>States with Detailed Abortion-Specific Informed Consent Requirements (24 states)</b>							
Alabama					W <sup>†</sup>		W
Alaska	W <sup>†</sup>			W <sup>†</sup>	W		W
Arkansas	W <sup>†</sup>				W		V, W
Georgia	W <sup>†</sup>				W		V, W
Idaho	V				W <sup>†</sup>		V, W <sup>†</sup>
Kansas	W <sup>†</sup>		W <sup>†</sup>		W <sup>†</sup>		V, W
Kentucky							V
Louisiana	W <sup>†</sup>				W <sup>†</sup>		V, W
Massachusetts							
Michigan						W	W
Minnesota	V, W <sup>†</sup>		V, W <sup>†</sup>		W		V, W
Mississippi	V, W <sup>†</sup>		V	W <sup>†</sup>			V, W <sup>†</sup>
Missouri	V				V		
Montana							
Nebraska	V, W <sup>†</sup>					W	V, W
North Dakota	V						V
Ohio							V
Oklahoma	W <sup>†</sup>			W <sup>†</sup>	W		V, W
Pennsylvania	W <sup>†</sup>				W		V, W
South Carolina	W <sup>†</sup>					W <sup>†</sup>	W
South Dakota	V	W <sup>†</sup>				W <sup>†</sup>	V, W <sup>†</sup>
Texas	V	W	V	W		W <sup>†</sup>	V, W
Utah						W	V, W
Virginia					W		W
West Virginia	V			W <sup>†</sup>		W	V, W
Wisconsin	V, W				V, W		V, W
<b>States with Customary Informed Consent Provisions (10 states)</b>							
Arizona							V
California							
Connecticut							
Delaware							
Florida							V
Indiana							V
Maine							V
Nevada					Φ		
Rhode Island							
Tennessee							V
<b>TOTAL</b>	<b>18</b>	<b>2</b>	<b>4</b>	<b>5</b>	<b>13</b>	<b>7</b>	<b>28</b>

V= verbal counseling; W= written materials

† Included in written counseling materials although not specified by state law.

Φ Law requires discussion of emotional impact of abortion.

**CONTINUED**

## FOR MORE INFORMATION:

For information on state legislative and policy activity, click on Guttmacher's [Monthly State Update](#) and for state level information and data on reproductive health issues, click on Guttmacher's [State Center](#). To see state specific abortion information click on [State Facts About Abortion](#).

Joyce TJ et al., [The Impact of State Mandatory Counseling and Waiting Period Laws on Abortion: A Literature Review](#), New York: Guttmacher Institute, 2009.

Boonstra H, [Comprehensive Medical Review Concludes Abortion Does Not Harm Women's Mental Health](#), *Guttmacher Policy Review*, 2008, 11(4):20.

Gold RB and Nash E, [State abortion counseling policies and the fundamental principles of informed consent](#), *Guttmacher Policy Review*, 2007, 10(4):6–13.

Richardson CT and Nash E, [Misinformed consent: the medical accuracy of state abortion counseling materials](#), *Guttmacher Policy Review*, 2006, 9(4):6–11.

Boonstra H et al., [Abortion in Women's Lives](#), New York: Guttmacher Institute, 2006.

Cohen SA, [Abortion and mental health: myths and realities](#), *Guttmacher Policy Review*, 2006, 9(3):8–11 & 16.

Joyce T and Kaestner R, [The impact of Mississippi's mandatory delay law on the timing of abortion](#), *Family Planning Perspectives*, 2000, 32(1):4–13.

Henshaw SK, [Factors hindering access to abortion services](#), *Family Planning Perspectives*, 1995, 27(2):54–59 & 87.