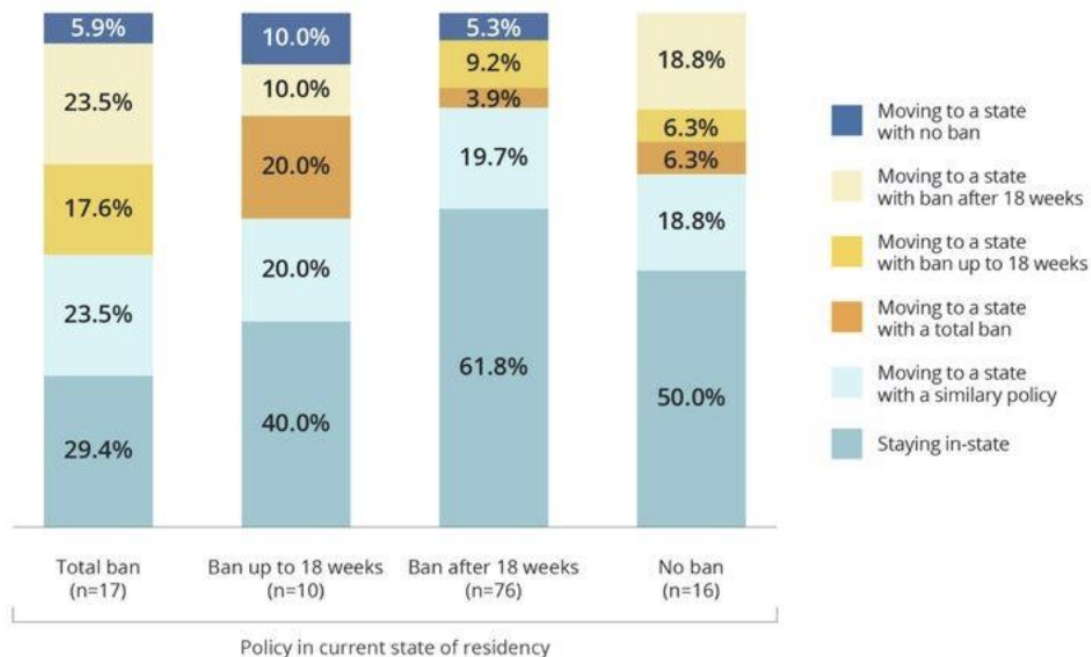


New Report



CRHLP has released a new report, [State Abortion Policies and OB-GYN Residents: How Abortion Policies Influence Career Choices, Relocation Decisions, and Perceived Protection While Providing Care](#).

The report examines how restrictive and protective state abortion policies influence where OB-GYN residents practice after residency. The report also explores how policies affect their level of concern, sense of legal protection, ability to provide all the care their patients need, and willingness to remain in certain policy environments. Finally, it provides research and policy recommendations to improve reproductive health care education, training, and state health policy.

Abortion policy matters to residents as they choose the location of their practice after residency. In a multi-state survey, researchers found that while a little over half of surveyed residents who knew where they were living post-residency were choosing to stay where they trained, state abortion policy mattered to their choice of location. 46% said it influenced their practice location, with 13% calling it the deciding factor. Most residents moving out of state (81.8%) chose states where abortion remains not totally banned.

“Based on our findings, we echo the calls for further research on the impacts of state abortion policies on the health workforce,” said study author Leslie Serrano Research Analyst at CRHLP. “Our findings show that most OB-GYN residents do not want to practice in states with abortion bans. States should enact or expand on protective state policies that make providers feel safer while providing sexual and reproductive health care.”

Events

STATE POLICY & THE FUTURE PHYSICIAN: IMPACTS ON EDUCATION, CARE, AND WELL-BEING

Join us for a moderated discussion that will bring together experts to examine how state policies are shaping medical education, care provision, well-being, and decision-making among medical students and residents.



Pamela Merritt

Executive Director of
Medical Students for
Choice



Leslie Serrano

Research Data Analyst,
Center on
Reproductive Health,
Law, and Policy



Dr. Jody Steinauer

Director, UCSF Bixby Center for
Global Reproductive Health and
Director, Kenneth J. Ryan Residency
Training Program in Family Planning



Lara Stemple

Senior Scholar with the Center on
Reproductive Health, Law, and Policy and
Assistant Dean for Graduate Studies and
International Programs at UCLA Law



Date:

September 30, 2025



Time

12:00 - 1:00 PM PST



Register Now: <https://bit.ly/FuturePhysWebinar>

On September 30th at 12 pm PST, join CRHLP for State Policy & the Future Physician: Impacts on Education, Care, and Well-Being, a moderated discussion bringing together experts to examine how state policies are shaping medical education, care provision, well-being, and decision-making among medical students and residents.

Register here: https://ucla.zoom.us/webinar/register/WN_9ph6HhA_TT6HAnth0d2TIA#/registration

Policy News



Photo Credit: Mike Desisti

Mississippi [has declared](#) a public health emergency in response to its high infant mortality rate, now 9.7 deaths per 1,000 live births, which is nearly double the national average and the highest in the state in [more than a decade](#). The State Health Officer said the action reflects the urgency of a crisis that has claimed 3,527 babies since 2014, with Black infants dying at more than twice the rate of white infants. The Department of Health announced a multi-pronged strategy that includes establishing an obstetrics system of care, addressing maternity care deserts, expanding community health worker programs, and strengthening maternal support initiatives. However, healthcare providers [warn](#) that systemic inequities, limited Medicaid coverage, and the state's near-total abortion ban exacerbate the crisis by deterring providers, restricting care options, and worsening outcomes for pregnant people and infants.



Photo credit: Arlene Mejorado for Vox

The Trump administration [has directed](#) 40 states and several territories to strip LGBTQ+ content from federally funded sex education curricula or risk losing over \$81 million in grants from the Personal Responsibility Education Program. The mandates require compliance within 60 days, and California has [already lost](#) a \$12 million sex education grant for refusing to comply because, among other things, California law requires LGBTQ inclusive sex education. Officials in California and beyond warn that the funds are critical for teaching comprehensive sex education to vulnerable youth, including those who are homeless, in foster care, or LGBTQ+.

Legal News



Photo credit: Getty Images

Texas lawmakers [have approved](#) a first-of-its-kind bill allowing private citizens to sue abortion pill manufacturers, doctors, and anyone who mails the medication into the state, escalating its already sweeping abortion restrictions. The measure authorizes lawsuits of at least \$100,000 against providers and drugmakers, while limiting payouts for plaintiffs unrelated to the pregnant person to \$10,000. The governor of Texas is expected to sign the bill, which would take effect in December. However, states are simultaneously strengthening their shield laws to make it even harder for people to find evidence to sue under laws like this. For example, this week the California legislature [passed](#) a bill (AB 260) that would, among other things, allow abortion pill prescriptions to not list the prescribing clinician, the patient receiving the prescription, or indicate the pharmacy mailing it. The bill still needs to be signed by the Governor to become law.

In 2024, an estimated [3,400](#) Texans each month received abortion pills through telehealth providers shielded by laws in states such as New York and California. Nationally, about 1 in 4 abortions are now conducted via telehealth, with half going to patients in restrictive states. The new legislation is in line with Texas's recent [efforts](#) to counter the protection of shield states and access to abortion medication.

To learn more about efforts to protect or restrict access to mifepristone, use our [Mifepristone Litigation and Federal Action Tracker](#), and to learn more about shield laws, use our [Shield Law Guide](#).

Food for Thought



With so much going on in the world of reproductive health, law, and policy, every week we'll share articles, books, and media you might have missed.

[Want An IUD, But You're Afraid Of The Pain? Try An Abortion Provider.](#)

[The Right Is Waging A Quiet War On Contraception](#)

[Why Research On Pregnancy-safe Medications, Already Scarce, Could Soon Dwindle](#)

[Geofencing Laws: Protecting Reproductive Health Data](#)

[How Student Abortion Rights Activists Reshaped Illinois State Law](#)



Reimagining the future of reproductive health, law, and policy.

UCLA Center on Reproductive Health, Law, and Policy is a think tank and research center created to develop long-term, lasting solutions that advance all aspects of reproductive justice, and address the current national crisis of abortion access.

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