



SB 24: The College Student Right to Access Act

The College Student Right to Access Act, or SB 24, would ensure that all students at public California universities have access to medication abortion at their campus health center.

BACKGROUND AND NEED

Currently, none of the student health centers at California's public universities provide medication abortion services. The College Student Right to Access Act would require all on-campus student health centers at public universities to offer medication abortion for students by January 1, 2023.

[Recent research](#)¹ estimates that every month 1,038 students at the 34 University of California and California State University campuses seek abortions from off-site health care facilities, including many who return to campus to complete their medication abortion. Students must travel to an unknown provider, often without reliable means of transportation. Even within the same city, public transportation can take hours and, in many cases, students need to travel out of their city, county, or even geographic region to access services. This process can be cost prohibitive and time intensive and may require students to miss class or work obligations.

Delays and difficulties in accessing affordable, safe, and early abortion care disproportionately interfere with the academic success and well-being of female students and particularly impact students of color and low-income students for whom reliable transportation and a flexible work schedule is less accessible.

Between 322 and 519 students each month would be able to receive their care on campus if their health centers provided medication abortion.

[Polling shows](#) 60% of likely voters and 72% of women in California agree students should be able to access the abortion pill on campus¹. A 2018 study of student perspectives about on-campus abortion found that 64% of students feel campus health centers should provide abortion, and 24% (erroneously) believe the service is already offered.

IMPLEMENTATION

Medication abortion is safer and less complicated than much of the care already offered at university student health centers, including diabetes management, mental health care, or diagnosis/treatment of sexually transmitted infections.

The National Academy of Sciences, Engineering, and Medicine found that there is no special facility requirement needed to provide medication abortion, and that associated risks are ["both low and](#)

¹ UCSF, School of Medicine, Advancing New Standards in Reproductive Health. *Assessing barriers to medication abortion among California's public university students*. 2017



similar in magnitude to the reported risks of serious adverse effects of commonly used prescription and over-the-counter medications.²

A UCSF study³ found that all student health centers at public universities have the minimum requirements for medication abortion provision: a private exam room, ability to do pregnancy testing and counseling, and clinicians who are licensed in the state of California. In California, medication abortion can be provided by any licensed physician, nurse practitioner, physician assistant, or certified nurse midwife.

Providing medication abortion requires four steps:

- confirming that the pregnancy is not ectopic and no more than 10 weeks gestational age;
- affirming that abortion is the patient's decision for how to manage the pregnancy;
- providing a set of pills with instructions for use; and
- instructing the patient on what to expect and how to access care in the event of an emergency.

The patient can take the first pill in the company of the provider. The second set of pills are used by the patient 24-48 hours later where and when they choose. Most patients can return to normal activities within 1-2 days. A follow-up appointment with the provider is made for 1-2 weeks after the initial appointment to confirm successful termination of pregnancy.

According to medical experts, all clinical staff can be trained in managing post-abortion follow-up care. If a student were to need medical attention outside the hours of a student health center, they would most likely be directed to an emergency room or urgent care center, just as they currently are with any other medical need.

FUNDING

This bill will create a special fund, administered by the California Commission on the Status of Women and Girls, to provide grants of \$200,000 to each on-campus student health center for the training and equipment to prepare them to provide abortion by medication techniques. A consortium of funders has stepped forward to cover the full preparation costs for implementation on every public university campus in California. Estimated costs are \$10.3 million, which has already been raised. The funders are also prepared to increase the funds if a greater need exists. If requested by student health centers, the fund will also support training to improve or expand the health centers' contraceptive services.

This bill will require public university student health centers to participate in an extensive evaluation and participate in efforts to ensure their centers receive the third-party reimbursements already available for medication abortion.

Student Health Insurance and MediCal already pay for abortions in California.

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² The National Academies of Science, Engineering, and Medicine. *The Safety and Quality of Abortion Care in the United States*.

³ UCSF, School of Medicine, Advancing New Standards in Reproductive Health. *Evaluating University of California and California State University capacity to provide medication abortion*. 2017



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Maternal and Child Health Access
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Medical Students for Choice, National Office
Medical Students for Choice, Stanford University
Medical Students for Choice, Touro University
Medical Students for Choice, UC Davis School of Medicine
Medical Students for Choice, University of California San Francisco
Mixteco/Indigena Community Organizing Project
National Abortion Federation
National Association of Social Workers, CA Chapter
National Center for Lesbian Rights
National Center for Youth Law
National Council of Jewish Women, Long Beach Section



National Council of Jewish Women, California
National Health Law Program
National Network of Abortion Funds
National Partnership for Women and Families
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National Women's Law Center
Nevada County Citizens for Choice
Nurses for Sexual and Reproductive Health
Our Bodies Ourselves
Peggy and Jack Baskin Foundation
Pharmacists Planning Services, Inc.
Physicians for Reproductive Health
Physicians for Social Responsibility
Planned Parenthood Affiliates of California
Planned Parenthood California Central Coast
Planned Parenthood Mar Monte
Planned Parenthood Northern California Action Fund
Planned Parenthood of Orange and San Bernardino Counties
Positive Women's Network
Power to Decide, The Campaign to Prevent Unplanned Pregnancy
Public Health Justice Collective
Reproductive Health Access Project (RHAP)
Reproductive Health Education in Family Medicine (RHEDI)
SIECUS Sexuality Information and Education Council of the United States

Society of Family Planning
Stanford University School of Medicine, Obstetrics/Gynecology Student Interest Group
Stonewall Democratic Club
Studio M
Tara Health Foundation
TEACH (Training in Early Abortion for Comprehensive Healthcare)
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