

Georgia OBGYNs Say Georgia's Six-Week Abortion Ban Threatens to Worsen the State's Shortage of OBGYNs

Executive Summary

In a survey of Georgia OBGYNs conducted by the office of U.S. Senator Jon Ossoff, with assistance from the American College of Obstetricians and Gynecologists (ACOG), Georgia OBGYNs warned that they were considering leaving the State or changing medical specialties due to Georgia's six-week abortion ban — threatening to worsen the State's already severe shortage of doctors. Those doctors explained that the threat of prosecution and inability to provide full spectrum obstetric care made it difficult to practice in Georgia. Several respondents further reported that they personally knew OBGYNs who had stopped practicing in Georgia because of the ban or were having trouble recruiting OBGYNs to the State.

Background

Senator Ossoff's office, with the assistance of the American College of Obstetricians and Gynecologists (ACOG), conducted a survey of ACOG's Georgia membership seeking information about the impact of Georgia's six-week abortion ban on the OBGYN workforce and the ability of Georgia OBGYNs to offer full-spectrum medical care to their patients.

Survey Findings

Georgia OBGYNs warned that they are considering leaving the State or changing medical specialties due to the six-week abortion ban. Some respondents reported that they had already stopped practicing obstetric medicine in Georgia due to the ban or personally knew someone who had done so. OBGYN attrition threatens to exacerbate the existing OBGYN workforce shortage in Georgia, where even before the ban, half of counties had no OBGYN.¹

OBGYNs consider leaving the State.

Fourteen OBGYNs reported that they are considering leaving Georgia because of the State's abortion ban. Some OBGYNs have already left the State because of the ban, with eleven respondents stating that they personally knew a doctor who had done so.

Multiple doctors reported that they were considering leaving because "I am unable to provide the care patients need," and "we are jeopardizing the care of women."

Doctors also described particular difficulties associated with treating pregnant patients experiencing emergency complications while under the threat of prosecution.

One OBGYN reported considering leaving the State because "our hands are tied as we risk being forced to either potentially commit medical malpractice or be imprisoned for providing necessary care."

Another OBGYN who was staying in the State despite the ban reported having "added stress and worry about legal ramifications when trying to do the best for my patients" and having to "get judges and lawyers involved before being able to provide essential care."

¹ Georgia Public Policy Institute, Addressing Georgia's Healthcare Shortage, available at <https://www.georgiapolicy.org/news/addressing-georgias-healthcare-shortage/>

Another OBGYN reported considering leaving because of the threat that the ban posed to family members, saying, “I’m scared to raise a daughter here. I am already looking into moving to a state without such significant bans.” In a follow-up interview, one survey respondent, Dr. Jane Ellis, recalled that another Georgia OBGYN consulted a lawyer shortly after Georgia’s abortion ban came into effect to determine if she could get out of her employment contract because she was afraid of practicing OBGYN medicine and raising a daughter in a ban state.

OBGYNs changed medical specialties.

Five OBGYNs reported that they are considering transitioning their practices away from obstetric care due to the ban, five OBGYNs personally knew someone who had done so already, and two doctors revealed that they had transitioned away from obstetric care themselves. One doctor with over a decade of experience who practiced in a rural area stated, “I stopped OB” because of the ban. Another OBGYN reported only providing care in Georgia part-time due to the ban.

OBGYNs staying in the State have difficulty recruiting.

Georgia OBGYNs who reported that they intended to stay in the State despite the ban reported difficulties recruiting colleagues. One OBGYN who planned to stay in the State reported “struggling to recruit new [doctors] to practice” and that “my area is becoming short on OBGYNs,” and further said that a “family member finishing residency in OBGYN will no longer consider coming to work with us here in Georgia.”

In her follow-up interview, Dr. Ellis emphasized that the ban disproportionately depresses OBGYN recruitment in rural areas, where OBGYNs are likely to be practicing with less institutional and technical support and largely have to navigate patient care within the constraints of the ban on their own.

Another reported, “this ban affects the quality of resident applicants and medical students we attract to Georgia” and “affects our ability to train them in ALL aspects of women’s healthcare.” Twenty-nine OBGYNs reported that they were concerned that Georgia’s six-week ban would prevent residents or fellows from receiving necessary training to care for women in the State.