

# Resources for Abortion Delivery — Ramp Up Fund Summary Report

October 2020  
—March 2023

The Resources for Abortion Delivery Ramp Up Fund Summary Report was published September 30, 2024. This report describes the funding that RAD made available to a select group of independent abortion providers, the clinic-led uses of these funds, and our understanding of fund outcomes and impacts based on data reported to RAD by fund awardees.

**RAD** RESOURCES  
FOR ABORTION  
DELIVERY

The Ramp Up Fund was launched in October 2020 in anticipation of the loss of critical legal protections for abortion, which posed serious threats to reproductive healthcare. The fund was created to address the possibility of increases in abortion demand at clinics in what would eventually be known as “surge states\*” across the country.

Facing this possibility, Resources for Abortion Delivery (RAD), partners, and funders made funding available to incentivize and support clinics in key states to expand their capacity to provide abortion care at much higher volumes. When the Dobbs ruling was made on June 24, 2022, these clinics were prepared to meet the surge.

This report describes the funding that RAD made available to a select group of independent abortion providers, the clinic-led uses of these funds, and our understanding of fund outcomes and impacts based on data reported to RAD by fund awardees.

**PURPOSE:** To expand clinic capacity to see more patients in the event of patient surges due to potential legal restrictions

**DURATION:** October 2020-March 2023

**FUNDS AVAILABLE TO:** Eligible independent abortion providers in the US

**ELIGIBILITY REQUIREMENTS:** Abortion facilities that currently provide medication and/or procedural abortion services AND reasonably anticipate seeing a significant increase in abortion patients from other states that may ban or severely restrict abortion services

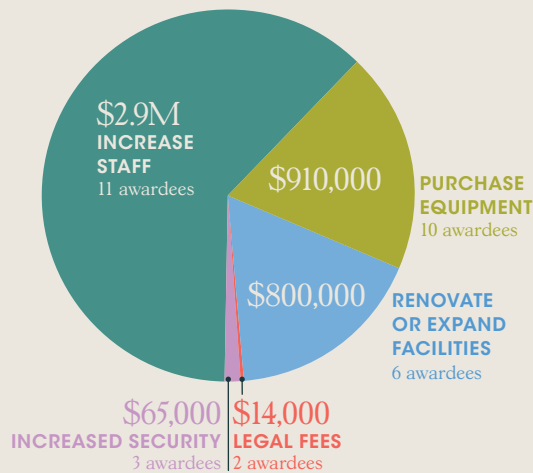
**TECHNICAL SUPPORT:** Technical support in developing budgets and thinking through needs, site visits, calls and check ins between awardees and RAD provided to awardees through duration of Fund

**AWARD RANGE:** \$100,000-\$1,100,000

12 abortion providers in 9 states leveraged Ramp Up Funds

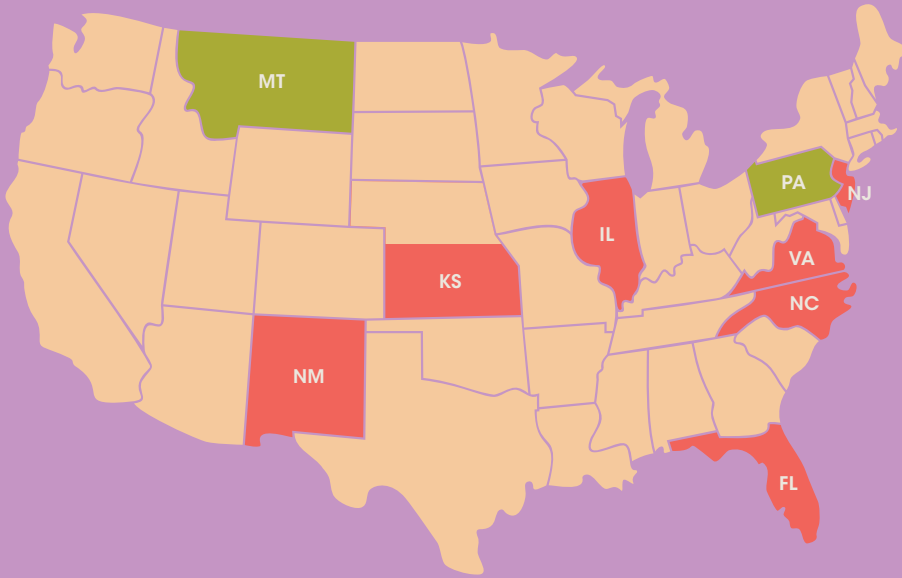
\$4.6+M total Funds awarded

HOW FUNDS WERE LEVERAGED



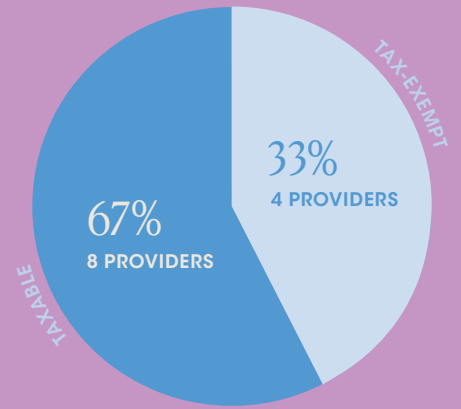
\*RAD considers a state to be a surge state when, for the specific time period as compared to pre-Dobbs, it: (1) Has a positive cumulative sum of difference (in monthly abortion volume) that is greater than the average cumulative sum of difference across all states that saw any increase and (2) Of the states identified in (1), is among the 10 states with the greatest % change in monthly average patient volume from pre- to post-Dobbs, at any period for which data were collected and reported by WeCount. Per this method, as of Apr '24 using WeCount data reported Feb'24, these states are: Colorado, Florida, Illinois, Kansas, Maryland, Michigan, Nevada, New Jersey, New Mexico, New York, North Carolina, Virginia.

**GEOGRAPHY**



- States with awardees
- Surge states with awardees

**TAX STATUS**



83% of Ramp Up Fund awardee clinics are in post-Dobbs “surge states”

**ANNUAL PATIENT VOLUME**

	PRE RAMP UP FUND (2019)	POST RAMP UP FUND (2022)
0-499	3	1
500-999	1	2
1,000-1,999	2	2
2,000-2,999	4	2
3,000+	2	5

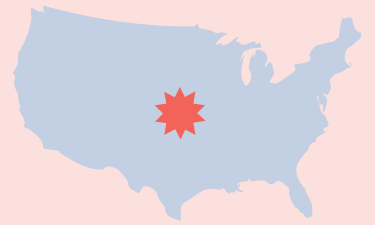
**MAX. GESTATIONAL AGE IN WEEKS**

	PRE RAMP UP FUND (2019)	POST RAMP UP FUND (2022)
<b>PROCEDURE ABORTIONS (PAB) MEDIAN</b>	<b>20.3</b>	<b>20.3</b>
<b>RANGE</b>	13.6-24.6	11.6*-28.0
<b>MEDICATION ABORTIONS (MAB) MEDIAN</b>	<b>10.0</b>	<b>11.0</b>
<b>RANGE</b>	8.6-10.0	10.0-12.0

\*A clinic reduced its GA limit from 13.6w to 11.6w in order to comply with state law.

**SERVICE DAYS**

	PRE RAMP UP FUND (2019)	POST RAMP UP FUND (2022)
<b>AVERAGE</b>	<b>3.5</b>	<b>4.3</b>
<b>RANGE</b>	1-5	1-6



# Trust Wichita, Kansas Women

Trust Women, in Wichita, Kansas, is one of the few Midwestern clinics that, pre-Dobbs, was located in a state with a constitutional right to abortion. The clinic, which was serving roughly 2,000 patients annually, anticipated being a significant access point for abortion seekers traveling from Missouri, Arkansas, Louisiana, Texas, and from Oklahoma, which was home to a sister clinic (Trust Women Oklahoma City) that itself saw over 2,000 abortion patients a year.

Trust Women was awarded over \$1.1 million in Ramp Up funding—the largest single investment of Ramp Up funds—to more than double their capacity to see patients. As a condition of their sizable award, they also leveraged regular RAD technical assistance to help them accomplish their project goals.

Clinic staff confronted a number of challenges during the award period (the Covid-19 pandemic; the implementation of SB 8 in neighboring Texas; disruptive protesters; and an abrupt leadership transition) to create new

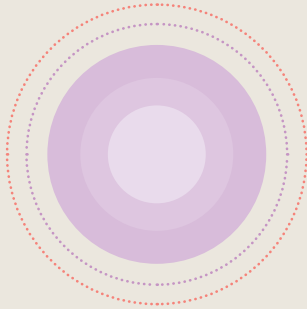
recovery, waiting, and clinical areas; purchase new equipment and supplies; upgrade facility security; and add clinical and patient support staff.

Trust Women is now a critical access point in one of the hardest hit regions of the country. At the end of 2023, Trust Women was seeing abortion patients 4 days a week (vs. 2 days a week in 2020), saw over 5,000 patients that year, and, in addition to providing 25-28% of abortions in the state, absorbed approximately 35% of the patient increase in Kansas post-SB 8 and Dobbs.

“Our operations changed so much, so rapidly, and the situation was evolving around us. Knowing that RAD would listen—that we could trust you all when we explained our very complex, head-splitting challenges, all in the midst of unprecedented crises—was critical.”

—TRUST WOMEN

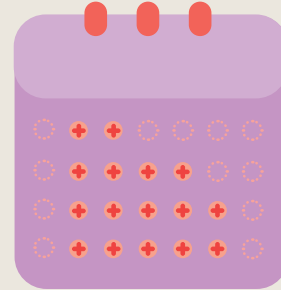
# Ramp Up Fund helped providers:



## Expand gestational limits

**100%** of awardees expanded MAB

**42%** of awardees expanded PAB by an average of 3 weeks of gestational age



## Increase days per week abortion is offered

**67%** of awardees increased MAB

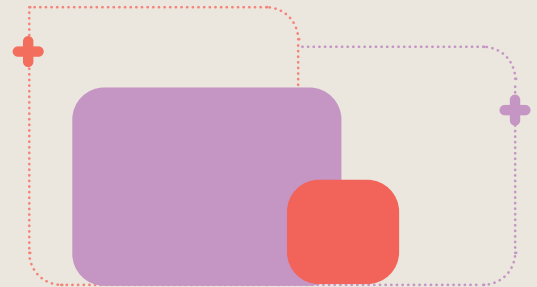
**50%** of awardees increased PAB

average increase 1 day per week



## Increase staff members to support clinical services & patient navigation

**92%** of awardees



## Increase facility space available for abortion care

**50%** of awardees

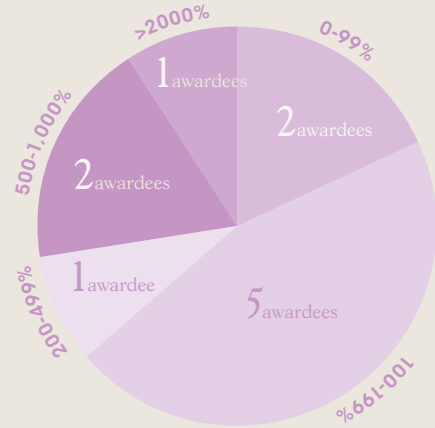
EXPANDING REACH:  
OUT-OF-STATE PATIENTS

All awardees reached more out-of-state patients.

100% of awardees saw substantial increases in out-of-state patients (varying from 40-2,000% increase)

On average, awardees saw over 5x the number of out-of-state patients. That's a 432% average increase of out-of-state patients.

DISTRIBUTION OF AWARDEES' OUT-OF-STATE PATIENT INCREASES



EXPANDING CAPACITY: ABORTION VOLUME & CARE

83% of awardees experienced an increase in total abortion volume varying from 2-219% increase

55% average increase in total abortion volume

Two clinics saw their volume more than double.

Four clinics saw their volume increase significantly before Dobbs, due to SB 8 in Texas.

The biggest increases in abortion volume (by number) were at awardees in Kansas, Southern IL, and Pennsylvania.

Awardees saw greater percent increases in 2nd trimester care (15 weeks and later) than they did in earlier gestations. Average increase in MAB was 34% and in PAB (14.6 was 46%; but change in PAB 15-19.6w was 181% and in 20+w was 139%.

As of March 2024, the vast majority of awardees are able to schedule appointments in under 2 weeks. Appointment wait times fluctuated throughout time post-Dobbs.

50% of awardees increased their capacity to serve low-income patients (moderately or significantly). 8-44% increase in patients using Medicaid or fund support.

Founded in 2016, RAD connects independent abortion providers across the country with the funding and other vital resources they need to adapt and evolve in a complex and rapidly changing environment.

As a funding intermediary, RAD acts as a grantmaker for charitable donors, leveraging sector knowledge and grantmaking capacity to fuel and deploy funder investments in abortion service delivery through practical and timely responses to pressing challenges facing the field. RAD provides expertise and guidance not only to funders but also to grantees, sharing information, research, and customized technical assistance as needed. Since its inception, RAD has played an important role bridging independent abortion delivery and funders; this has brought over \$71.2M in support to the sector to expand patient access.

We are a small, dedicated staff of 14, with teams specializing in funding and technical assistance, legal support, and data & operations.

RAD is a fiscally-sponsored project of Hopewell Fund, a 501(c)(3) non-profit organization. RAD's Advisory Board is made up of individuals from foundations in this field that have provided funding or other forms of support to RAD. The Advisory Board provides non-binding recommendations to Hopewell Fund to enable RAD to achieve our desired impact.



Providers— for access to funding opportunities, resources, and RAD technical support, become a part of the RAD Community: [radprogram.org/join](https://radprogram.org/join)



Funders— learn more about our funder services: [radprogram.org/funder-services](https://radprogram.org/funder-services)



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