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Original Article

“Women's Lives Are on the Line, and Our Hands Are Tied”: How Television Is Reckoning With a Post-*Dobbs* America

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A B S T R A C T

Background: Since the 2022 *Dobbs v. Jackson Women's Health Organization* Supreme Court decision revoked federal protection for abortion rights, many states have restricted abortion. Although news media covers this shifting landscape through reporting, this article documents how entertainment content is responding to this new reality in its storytelling.

Methods: The sample is from a public database of abortion plotlines on American television (abortiononscreen.org). I separated the sample of 150 plotlines into two groups: plotlines that filmed and/or aired pre-*Dobbs* (January 2020–August 2022) and those that aired post-*Dobbs* (September 2022–December 2023). Coding occurred in Microsoft Excel. **Results:** Post-*Dobbs*, there was an increase in procedural abortion depictions compared with pre-*Dobbs*, but no change in the consistently low number of depictions of medication abortion. The post-*Dobbs* sample included a 10% increase in teen characters compared with pre-*Dobbs*. Pre-*Dobbs*, the vast majority of plotlines (77%) did not portray any barriers to abortion care. Post-*Dobbs*, 33% depicted barriers. The most common reason for abortion seeking in both samples was age (11%). Pre-*Dobbs*, the next most common was a mis-timed pregnancy (10%). Post-*Dobbs*, the next most common was health concerns (11%).

Conclusions: Since *Dobbs*, more television plotlines are portraying obstacles to abortion care, yet they continue to tell stories of white, non-parenting teenagers who make up a small percentage of real abortion patients. Plotlines over-represent procedural abortion over the more common medication abortion. Depictions of health-related reasons for abortion seeking obscure more commonly provided reasons for abortions, such as mistimed pregnancies, caregiving responsibilities, and financial concerns. Considering the low levels of abortion knowledge nationwide, understanding what (mis)information audiences encounter onscreen is increasingly important.

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We heard about clinics that were flooded with patients who had driven across state lines. We heard OBs question the future of their profession, and we heard doctors who feared that they were putting their careers at risk to provide critical procedures because state laws about protecting the life and health of the mother were so unclear. We were dismayed and enraged and we were determined to tell their stories.

([USC Annenberg, 2024](#))

These are not the remarks of a politician or advocate, but of *Grey's Anatomy* screenwriter Julie Wong in an acceptance speech for an award she received for writing a fall 2022 episode of the show, “When I Get to the Border,” that focused on devastating consequences of abortion restrictions. Wong's words are echoed in media interviews with other content creators about their desire to reflect the cruel ramifications of contemporary abortion restrictions in the United States ([Galuppo et al., 2022](#)). This article compares television portrayals of abortion immediately before and after the June 2022 Supreme Court case *Dobbs v. Jackson Women's Health Organization*, which broadly revoked federal protections for abortion, in an effort to understand if and how these portrayals reflect the shifting legal landscape of abortion access in the United States.

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Abortion Access Pre- and Post-Dobbs

The 2022 *Dobbs* decision drastically exacerbated but did not initiate the catastrophic crisis of abortion access in the United States. Indeed, in the decade prior to the *Dobbs* decision, abortion restrictions skyrocketed, with states adding 57 new restrictions per year between 2011 and 2015, the highest number, at the time, since the 1973 *Roe* decision that established federal protections for abortion rights. These new restrictions included legislation denying private insurance coverage for abortion, targeted regulation of abortion provider laws, and banning abortion at or after 20 weeks (Guttmacher Institute, 2016). Between 2015 and 2021, states enacted between 50 and 100 abortion restrictions per year (Nash, 2021). In 2021, which the Guttmacher Institute called “the worst year for abortion rights in almost half a century,” 19 states adopted 108 abortion restrictions (Nash, 2021, p. 1). These included additional constraints on the provision of medication abortion and banning abortion at 6, 8, or 15 weeks or based on the reason for seeking an abortion (Nash, 2021). Research documents the profound, compounding impact of these restrictions, necessitating increased patient travel to an available clinic and greater out-of-pocket expenses in an attempt to surmount the logistical and financial barriers to care (Jermain et al., 2017). Although it is beyond the scope of this article to provide a detailed and complete account of abortion restrictions and their effects, it is worth noting that these restrictions have a disproportionate impact on communities of color and low-income families, who must contend with dysfunctional health care and legal systems riddled with racism, classism, and sexism (Caraher, 2023).

In this environment of constrained access to abortion, the *Dobbs* decision made an already precarious situation worse. Since June 2022, 14 states have banned abortion entirely and 7 have enacted new stringent restrictions on abortion, resulting in 18 million people capable of pregnancy no longer being able to access abortion care in their state (Forouzan & Guanieri, 2023). Legal “chaos and uncertainty” in these states and others has caused confusion amongst both patients and providers, who are unsure of the legal status of abortion and the potential consequences for breaking the law (John & Martin, 2024; Sabbath et al., 2024; Turkenheimer, 2024, p. 1). These restrictions have created an “uncertain and treacherous quagmire” for abortion access (Kulczycki, 2022, p. 1). Scholars contend that the combination of legal, political, and cultural ramifications will likely exacerbate health inequities, particularly the alarming maternal mortality and morbidity rates among communities of color (Treder et al., 2023). Having a broad understanding of this tumultuous political context provides the foundation from which we can analyze patterns in current entertainment television depictions of abortion and the degree to which they do or do not reflect this reality.

Abortion in Contemporary U.S. Television

Current entertainment television portrayals of abortion distort the reality of the U.S. abortion access landscape in a variety of ways, including underrepresenting contemporary political and logistical barriers to care (Herold & Sisson, 2020). Television depictions of abortion often omit the most common demographics of abortion patients; a typical character who has

an abortion is white, wealthy, and not parenting at the time of her abortion (Herold & Sisson, 2020), unlike most abortion patients, who are most often women of color, living at or below the federal poverty line, and raising children at the time of their abortions (Jones & Chiu, 2023). Television also misrepresents the most common reasons patients seek abortions, with the vast majority of characters having abortions for “self-focused” reasons, such as educational or career pursuits (Sisson & Kimport, 2016), a contrast with the “others-focused” reasons many real abortion patients cite as their motivation, such as financial and caretaking responsibilities (Biggs et al., 2013). Television often makes the abortion procedure itself invisible, and in the instances in which plotlines do depict the abortion, it is most often a procedural abortion (Herold & Sisson, 2019). This is another deviation from the modern abortion landscape in which the majority of abortions in the U.S. are medication abortions (Jones & Friedrich-Karnik, 2024).

Taken together, the over-representations of certain types of people who obtain abortions, the type of abortions they obtain, and the lack of challenges they face in accessing abortion care shape a largely inaccurate representation of abortion in U.S. entertainment media. Given that general abortion knowledge among the U.S. public is relatively low (Jozkowski et al., 2023) and that confusion about the legal status of abortion has proliferated since the *Dobbs* decision (Sparks et al., 2023), how television portrays abortion, and what audiences learn from these portrayals, is of increased importance.

Entertainment Education and Reproductive Health

Research suggests that exposure to health content on television can influence knowledge, attitudes, and behaviors significantly (Hoffman et al., 2023; Shen & Han 2018). This may be especially true of sexual and reproductive health content. Some research finds, for example, that viewers exposed to plotlines about accurate contraceptive use may have greater knowledge about contraception (Wang & Singhal, 2016; Brodie et al., 2001) and improved attitudes toward contraceptives (Saucier et al., 2022) compared with those not exposed to these plotlines. Another study found that exposure to television plotlines that depicted characters discussing sexual health topics resulted in real life discussions of these topics amongst viewers (Moyer-Gusé, Chung, et al., 2011a). Sexual and reproductive health-related plotlines may also influence behavioral intent negatively; one study found that exposure to comedic depictions of “unsafe” sexual behavior was associated with greater intention to engage in unprotected sex compared with serious depictions of sexual behavior (Moyer-Gusé, Mahood, et al., 2011b). Likewise, research finds that the more viewers are exposed to portrayals of childbirth as medically risky, the more fear they have about pregnancy and childbirth (Vitek & Ward, 2019).

Many of these studies are grounded in entertainment education, which stipulates that health-related messages embedded in popular content, such as television or radio programs, can positively influence viewer attitudes and behaviors, regardless of whether the content creators intended the programs to do so (Moyer-Gusé, 2008). Although entertainment education has been critiqued for its small effects on attitudes and behavior (Green, 2021), its potential to reach broad audiences renders it a useful way to spread health messages at a large scale (Orozco-Olvera et al., 2019). The limited studies on the impact of exposure to abortion plotlines on viewers' knowledge, attitudes, and behavior generally mirror patterns in the evaluation of the

impact of other health issues; exposure to medically accurate plotlines about medication abortion increased awareness about medication abortion safety compared with non-exposure (Herold, Morris, et al., 2024). Exposure to one abortion plotline on *Grey's Anatomy* resulted in increased knowledge about abortion, but did not affect abortion attitudes (Sisson et al., 2021); exposure to at least one of three medically accurate abortion plotlines was associated with greater knowledge about abortion and greater willingness to support a friend seek an abortion compared with non-exposure (Herold, Morris, et al., 2024).

In this article, I compare depictions of abortion pre- and post-*Dobbs* to understand if and how they reflect the current landscape of abortion access. Although this article does not include any measures of audience knowledge, attitudes, or behavioral intent, I draw on entertainment education to hypothesize what audiences may be gleaned, and missing, from these representations.

Methods

Sample

The sample is from a publicly available database of abortion plotlines on American television (abortiononscreen.org). Details about how the database is maintained are available in previous articles (Herold & Sisson, 2020). For this analysis, I included unscripted television to understand if these reality shows, filmed in real time, included discussions of contemporary political events. Additionally, I conducted searches on Google with the string “abortion on television” and “abortion episode” over the study period to capture any missing plotlines. I monitored the Internet Movie Database, an entertainment industry-sourced website with information about television and films, for the keyword “abortion” to capture additional plotlines.

The sample included all scripted and unscripted English-language television available to U.S. audiences on any network, cable channel, or streaming service. I searched the database for television plotlines and compiled the television show names and episode titles for viewing. I limited the sample to plotlines airing from January 2020 through December 2023 that included a character considering an abortion, obtaining an abortion, disclosing a past abortion, or discussing abortion. I watched each plotline in its entirety; if the abortion plotline concluded in one episode, I watched that episode, and if it lasted for the entire season of a show, I watched the entire season. If a plotline mentioned restrictions at all related to abortion, such as legal limitations on the management of ectopic pregnancies, I included it as well. I restricted the sample to plotlines with settings in the United States to observe any depictions or discussions of the pre- and post-*Dobbs* landscape. I selected January 2020 as the start of the sample because a prior article analyzed the representations of abortion onscreen between January 2015 and December 2019 (Herold & Sisson, 2020).

Data Coding and Analysis

I viewed all plotlines in their entirety from the sample period to determine if they met the inclusion criteria and coded the sample using a previously developed codebook (Herold & Sisson, 2020) for variables such as type of abortion content (abortion, consideration, discussion), race of character seeking abortion, age of character seeking abortion, barriers to abortion, and main reason for abortion. To categorize demographic variables such as

race, age, and gender that were potentially ambiguous, I made educated guesses by relying on context from the plotline as well as with information about the actors derived from their Internet Movie Database profiles. These demographic plotline codes are descriptive of the abortion seekers. Some plotlines only discussed abortion as a political or cultural issue, not a personal experience. For those plotlines, I coded the demographic variables as “N/A.” Similarly, I coded an abortion as “safe” if the plotline did not depict any adverse medical complications, and “unsafe” if it depicted complications such as hemorrhaging, infertility, and death. I coded a plotline as “N/A” if abortion was considered or discussed but did not occur. Likewise, I coded a plotline as “N/A” for barriers depicted if the plotline did not include a character seeking an abortion, but instead was a discussion of abortion more broadly.

For the analysis, I separated the sample into two groups: plotlines that filmed and/or aired pre-*Dobbs* (January 2020–August 2022) and plotlines that aired post-*Dobbs* (September 2022–December 2023). Although the *Dobbs* decision occurred in June 2022, I assumed that plotlines that aired in July and August 2022 were not in response to the decision, based on the time it takes for television plotlines to move from writing to production and airing. All coding and analysis occurred in Microsoft Excel to calculate descriptive statistics.

This study did not require institutional review board approval for this research because it included no human subjects.

I identified 150 plotlines that aired on U.S. television between January 1, 2020, and December 31, 2023, in which a character considers an abortion or obtains an abortion, or in which abortion is discussed. Of these plotlines, 87 are in the pre-*Dobbs* sample and 63 in the post-*Dobbs* sample. Table 1 compares these two samples, which are discussed in detail.

Type of Abortion Content and Abortion Safety

Pre-*Dobbs*, approximately 61% of abortion depictions included a character obtaining an abortion or disclosing a past abortion, and post-*Dobbs*, this decreased slightly to 59%. Pre-*Dobbs*, approximately 18% of plotlines included a discussion of abortion, whereas post-*Dobbs*, 25% of plotlines included a discussion. Pre-*Dobbs*, 21% of plotlines included a pregnant character considering an abortion, whereas post-*Dobbs*, only 16% of plotlines included a consideration.

The type of abortion content in these plotlines differed across several domains pre- and post-*Dobbs*. In both samples, approximately one-third of the plotlines consisted of disclosures of past abortions. However, pre-*Dobbs*, about 16% of plotlines included an in-clinic abortion, and post-*Dobbs*, this increased slightly to 19%. The number of medication abortion plotlines stayed the same between the two time periods (8%).

Pre-*Dobbs*, about 52% of abortion plotlines include a depiction of a safe abortion. Post-*Dobbs*, it increased to 57%. This coincided with a decrease in portrayals of unsafe abortions from 8% to 3%.

Patient Demographics

Patient demographics shifted slightly between the two samples. Pre-*Dobbs*, the majority of characters were white (66%), with small numbers of Black characters (13%) and Latina (7%) characters. Post-*Dobbs*, slightly more than one-half of the characters in the sample were white (59%), with an increase in Black characters (17%) and a decrease in Latina characters (5%). In terms of age, pre-*Dobbs*, slightly more than one-third of

Table 1
Abortion on Television Before *Dobbs* and After *Dobbs*

Variables	Pre- <i>Dobbs</i> Sample (N = 87)		Post- <i>Dobbs</i> Sample (N = 63)	
	No.	%	No.	%
Type of abortion content				
Abortion	53	61	37	59
Discussion	16	18	16	25
Consideration	18	21	10	16
Type of abortion depiction				
Past abortion	30	34	20	32
Procedural abortion	14	16	12	19
Medication abortion	7	8	5	8
Herbal	2	2	3	5
Self-induced	1	1	1	2
N/A	33	38	22	35
Safety				
Safe	45	52	36	57
Unsafe	7	8	2	3
N/A	35	40	25	40
Race of abortion seeker				
Alien	1	1	0	0
Arab	1	1	0	0
Asian	0	0	2	3
Biracial	1	1	1	2
Black	11	13	11	17
Latina	6	7	3	5
White	57	66	37	59
N/A	10	11	9	14
Age				
Teen	14	16	17	27
20s	34	39	21	33
30s	14	16	11	17
40s	10	11	5	8
50s	1	1	0	0
N/A	14	16	9	14
Parenting status				
Yes	10	11	6	10
No	64	74	43	68
N/A	13	15	14	22
Barriers depicted				
Yes	13	15	21	33
No	67	77	32	51
N/A	7	8	10	16
What barriers				
Crisis pregnancy center	1	1	1	2
Coercion	1	1	0	0
Discussion of barriers	1	1	3	5
Discussion of <i>Dobbs</i>	0	0	6	10
Gestational limit	1	1	1	2
Illegality - contemporary	1	1	2	3
Illegality - historical	3	3	4	6
Multiple	2	2	5	8
Money	1	1	0	0
Travel	2	2	0	0
Violence	0	0	2	3
Waiting period	1	1	0	0
N/A	73	84	39	62
Reasons for abortion				
Age	10	11	7	11
Mistimed	9	10	2	3
Career	5	6	4	6
Health	4	5	7	11
Doesn't want to parent	3	3	0	0
Financial concerns	2	2	1	2
Coercion	1	1	1	2
Rape	1	1	1	2
Education	1	1	0	0
Family complete	1	1	0	0
N/A	50	57	40	63

Notes on table terminology: Abortion safety was determined by patient outcome. An abortion was coded as “safe” if the patient did not incur any physical complications as a result and was coded as “unsafe” if the abortion resulted in complications such as hemorrhage, infertility, bodily harm, or death. “Alien” race refers to a character who is an extraterrestrial. “Illegality – historical” refers to a plotline that takes place in the pre-*Roe* United States. “N/A” indicates that the content did not occur onscreen and is thus unavailable for coding.

characters in the sample were in their 20s (39%), and post-*Dobbs*, approximately one-third were in their 20s (33%). Pre-*Dobbs*, approximately 16% were teens, and post-*Dobbs*, which increased to 27%. Both pre-*Dobbs* and post-*Dobbs* plotlines included few depictions of characters parenting at the time of their abortions; pre-*Dobbs*, only 11% of characters were raising children when they had abortions, and post-*Dobbs*, only 10%. Only two plotlines, both pre-*Dobbs*, included queer characters, and no plotlines in either sample period included trans, non-binary, or gender-expansive characters.

Depictions of Barriers

Pre-*Dobbs*, the vast majority of plotlines (77%) in our sample did not portray any political, financial, or logistical barriers to abortion access. Post-*Dobbs*, this changed dramatically, with 51% not depicting barriers and 33% depicting barriers. Pre-*Dobbs*, the most common barrier depicted was historical illegality (3%), defined as plotlines set pre-*Roe*, followed by depictions of multiple barriers (2%) and travel (2%). Post-*Dobbs*, the most frequent barrier discussed was the *Dobbs* decision itself (10%), followed by multiple barriers (8%), historical illegality (6%), a discussion of barriers to abortion care generally (5%), and contemporary illegality (3%).

Specific examples from these two time periods illustrate these thematic shifts. Pre-*Dobbs*, plotlines on television shows such as *Good Trouble* (2020) and *Mrs. America* (2020) depict characters contending with abortion access pre-*Roe*, asking friends and coworkers to help them find a safe, illegal abortion provider and pay for the abortion. In both plotlines, the characters are able to overcome the barriers posed by illegality and obtain safe illegal abortions. Plotlines on shows such as *Filthy Rich* (2020) and *This Is Us* (2021) depict contemporary barriers, including out-of-state travel and a mandatory waiting period, respectively, and again, the characters overcome these barriers easily. Post-*Dobbs* portrayals of barriers to abortion present a much grimmer reality in which characters face compounding obstacles in pursuit of abortion care. In the post-*Dobbs* sample, both *FBI: Most Wanted* (2022) and *Law & Order* (2022) plotlines include characters who not only travel across state lines in pursuit of abortions, but contend with contemporary abortion restrictions, abortion denial, and abortion funds, and both plotlines result in the death or serious injury of the character seeking an abortion. On *Grey's Anatomy* (2022) and *New Amsterdam* (2022) plotlines, doctors grapple with a post-*Dobbs* reality and take action to expand their practices to provide abortion care for patients coming in from states with restricted abortion access. A particularly poignant scene from the 2022 *Grey's Anatomy* episode “When I Get to the Border” depicts Drs. Miranda Bailey and Addison Montgomery transporting a pregnant mother across state lines, because she was denied treatment for her ectopic pregnancy in her home state because of new abortion restrictions. After the patient dies from complications of the ectopic pregnancy while they are stuck in traffic, a bereft Dr. Montgomery yells into the street: “I am infuriated! Women's lives are on the line, and our hands that are trained to help them... are tied!” Although the majority of plotlines in both study time periods did not portray barriers to abortion access, the post-*Dobbs* depictions of these barriers were materially different from their pre-*Dobbs* counterparts.

Reasons for Seeking Abortion

In both samples, most plotlines did not include a discussion of a character's reason for pursuing an abortion. When they did, the most common reason in both time periods was age (11%). Pre-*Dobbs*, the next most common reasons were a mistimed pregnancy (10%), career pursuits (6%), and health concerns (5%), whereas post-*Dobbs*, the most common reasons were health concerns (11%), career pursuits (6%), and mistimed pregnancies (3%). Given the relatively large percentage of teenagers depicted in these plotlines, it is not surprising that, when characters discuss their decision-making motivations, age is the most common reason for obtaining an abortion across both time periods. Of the 11% of plotlines that depicted health concerns post-*Dobbs*, one-half of those were depictions of ectopic pregnancies.

Discussion

When comparing pre- and post-*Dobbs* depictions of abortion on U.S. television, I document several meaningful changes across domains, particularly related to type of abortion content, the portrayal of barriers to abortion, and reasons for seeking abortion care. These patterns suggest a shifting landscape of abortion depictions that, in some instances, are closer to reflecting the reality of the U.S. abortion experience, whereas others, particularly related to demographic representation, continue to hew closely to past documented misrepresentations of abortion on screen. The literature on entertainment education can help to elucidate why the accuracy of these representations is important; research finds that health messages in television plotlines are more effective at influencing knowledge, attitudes, and behaviors related to health issues than traditional public service campaigns (Brown & Walsh-Childers, 2002; Oschatz & Marker, 2020). The content of television plotlines is correlated with these changes; research finds that negative portrayals, particularly of stigmatized issues or individuals, can reinforce negative attitudes and beliefs (Zerebecki et al., 2021). Given the subjective nature of what a “negative” portrayal might encompass, understanding the shape of abortion plotlines, and their relationship to the reality of the U.S. abortion experience, is a foundational component of future research to identify any potential influence of these plotlines on viewers.

The differing types of abortion content observed between our two sample periods suggests a potential broadening of the pool of abortion plotlines. Post-*Dobbs*, more plotlines included discussions of abortion than pre-*Dobbs*, suggesting that perhaps characters need not have abortions or disclose past abortions to engage meaningfully with this issue. Plotlines in our sample discussed abortion access as a matter of workplace policy (*American Auto*), the importance of protecting abortion rights for future generations (*Teen Mom: Next Generation*), and male partners' reproductive responsibilities in the wake of the *Dobbs* decision (*Act Your Age*). This indicates perhaps a new expansiveness in abortion plotlines—characters engage with abortion policy and politics even if not considering an abortion for themselves.

When characters did obtain or disclose past abortions, slight differences emerged between sample periods, notably a small increase in depiction of in-clinic procedural abortions yet no increase in the depiction of medication abortions. It is possible that this relative increase in the portrayal of procedural abortion is related to screenwriters' documented interest in destigmatizing the abortion procedure itself (Herold & Sisson, 2023). The lack of increase in medication abortion depictions, however,

continues a documented lack of medication abortions onscreen (Herold & Sisson, 2019) and is especially notable given that medication abortions represent the majority of real life abortions in the United States (Jones & Friedrich-Karnik, 2024).

Although there are more characters of color post-*Dobbs* (27%) than pre-*Dobbs* (22%), they are still vastly under-represented compared with the majority of real-life abortion patients, who are people of color (61.4%) (Jones & Chiu, 2023). Characters raising children at the time of their abortion were also low in both samples (11% pre-*Dobbs* and 10% post-*Dobbs*), a drastic underrepresentation of the 56% of patients parenting children at the time of their abortions (Jones & Chiu, 2023). In this article, I also find that depictions of teenagers as abortion patients increased by more than 10% post-*Dobbs*, a reversal from past trends in which most characters seeking or disclosing abortions were in their 20s (Herold & Sisson, 2020). The near-total lack of representation of queer or gender expansive characters in this sample period makes invisible the experience of abortion patients who are not heterosexual and not cisgender (Jones & Chiu, 2023; Moseson et al., 2021). Taken together, these discrepancies contribute to a largely inaccurate representation of U.S. abortion patients, particularly related to age, race, and parenting status. In interviews with entertainment content creators about their own abortion plotlines, some suggested that they purposefully crafted “sympathetic” characters—often conceived of as young, white, and wealthy—as the protagonists in abortion plotlines in hopes that their (white) audiences might identify with these characters more than other, perhaps more diverse characters and thus have more positive attitudes toward abortion generally (Herold & Sisson, 2023). This correlation does not bear out in the limited research on the associations between abortion plotlines and viewer attitudes; one study on a *13 Reasons Why* abortion plotline, for example, found that no matter the context of the character's abortion, study participants had negative or neutral attitudes toward the character (Brooks et al., 2022). It is unclear if a shift toward more accurate demographic representation might have a significant effect on audiences. Indeed, some feminist media scholars have argued that yearning for a “feminist makeover” of popular culture assumes an imagined consensus of what “feminist media” is, and creates a false binary between media creators, many of whom may be feminists themselves, and media consumers (Hollows & Mosley, 2006). More research is needed to understand what, if any, relationship exists between the demographics of characters seeking abortions and audience knowledge, attitudes, and behaviors related to abortion.

The depiction of barriers represents a significant shift in the television landscape; previous research found that abortion restrictions rarely appeared onscreen, and that when they did, the most common restriction portrayed was historical, pre-*Roe* illegal abortion (Herold & Sisson 2020; Sisson & Kimport 2017). Although historical illegality continues to be one of the more commonly depicted obstacles to onscreen abortion care, today's depictions specifically name *Dobbs* as a source of barriers to care and include characters coping with considerable contemporary restrictions. This pronounced change still does not represent the breadth and depth of the abortion access crisis in the United States fully. The *Dobbs* decision did not only lead to state-wide abortion bans in many states, but also resulted in the rapid closure of dozens of abortion clinics (Kirstein et al., 2022) and family planning clinics (Zhao et al., 2024), a significant increase in distance traveled to available abortion clinics (Rader et al., 2022), an increase in criminal prosecution for suspected miscarriages and abortions (Human Rights & Gender Justice Clinic,

2023), and the denial of wanted abortions for thousands of people (Society of Family Planning, 2022). Abortion seekers who live in states that restrict abortion are more likely than those living in states without these restrictions to be Black, more likely to be paying for their procedure themselves instead of with insurance, and to report that the costs of the abortion, and all of the associated travel, childcare, and lodging, pose a significant challenge for them (Jones & Chiu, 2023). To reflect the tumultuous political, personal, and cultural reality of abortion access today more clearly, television content creators might engage with the way the U.S. health care experience, including abortion, is both segregated and shaped by race- and class-based health disparities.

Although characters' reasons for abortion are most often not explored in this sample, I find some notable differences between the samples that may reflect changing understandings of abortion decision-making. First, across both sample periods, characters' stated reasons for seeking abortions are strikingly different from the reasons most commonly given by real abortion seekers (Biggs et al., 2013). This study builds on past research that finds that the most common reasons for abortion seeking among real abortion patients, particularly those related to economic and parenting responsibilities, are still often absent in popular culture (Sisson & Kimport, 2016). Notable, though, in the post-*Dobbs* period is the emergence of more frequent depictions of health-related reasons for seeking abortion care, especially ectopic pregnancies. Since the *Dobbs* decision, the news media has reported frequently on the stories of patients and providers contending with legal and medical confusion as they navigate abortion seeking for health-related reasons, including lethal fetal anomalies (Donley, 2023), sepsis and hemorrhaging (Winter, 2022), and ectopic pregnancies (Andrews, 2022; Sellers & Nirappil, 2022). Recent research found that some Hollywood writers, showrunners, and producers create abortion plotlines to highlight the current landscape of abortion access (Herold & Sisson, 2023), and they may have envisioned depictions of these health-related reasons for abortion seeking as one response to the current political landscape. The negative health consequences of the *Dobbs* decision, particularly on maternal health, cannot be overstated (Bellware & Guskin, 2023), yet the continued overrepresentation of health-related reasons for abortion seeking obscures the more common reality for abortion seekers today, in which seeking an abortion is often not only about health, but also about their financial and family obligations as well.

These findings have several limitations. Although multiple authors are not required to advance rigorous research, a clear limitation of this study is that the author was the only person viewing the plotlines, developing the codebook, coding, and then analyzing the data for themes. It is possible that other scholars may have interpreted these themes and trends differently, and I hope future research might explore more possibilities in this large dataset. Because this study is a content analysis and not an evaluation of viewer responses to these plotlines, it is not possible to state the impact of audience exposure to these plotlines. These plotlines were likely not created with the explicit or only intention of educating viewers, and thus likely may not conform to broader standards of entertainment education. Future research might examine whether widely viewed abortion plotlines function as entertainment education interventions.

Implications for Policy and/or Practice

This study chronicles the subtle demographic and descriptive shifts in abortion television plotlines pre- and post-*Dobbs*, finding that these plotlines are still broadly shaped by inaccuracies related to demographics, type of abortion, and reasons for seeking an abortion. Health care providers, especially those who refer for and provide abortions, can benefit from understanding what misinformation patients glean from their television watching to dispel these myths. Even with increases in portrayals of barriers to abortion care, for example, these representations still do not reflect the barrage of contemporary obstacles to abortion care faced by U.S. abortion patients. This absence combined with the generally low level of knowledge most people have about abortion laws (Swartz et al., 2020) may result in patients being unprepared to cope with the legal and logistical obstacles to abortion care. Similarly, the few depictions of medication abortion may contribute to already low levels of awareness about this type of abortion (Kaller et al., 2023). Given evidence suggesting that exposure to some abortion plotlines may increase knowledge about abortion in general (Herold, Becker, et al., 2024; Sisson et al., 2021) and awareness about medication abortion in particular (Herold, Morris, et al., 2024), clinicians and health educators might use these cultural products as entryways into conversations with patients about abortion access.

Taken more broadly in the context of entertainment education, abortion plotlines deliver embedded yet distinct messages about abortion—who has them, what contemporary access looks like, and why someone might pursue an abortion. Although few audiences expect entertainment television to be a precise and accurate portrayal of reality, the content nonetheless can shape our understanding of real-world issues, particularly issues like abortion, which are often clouded in cultural stigma and misinformation. Given the broad reach of television, especially in the current context of confusion about abortion legality, it behooves clinicians and advocates alike to understand what audiences are learning about abortion from entertainment television.

CRedit authorship contribution statement

Stephanie Herold: Writing – review & editing, Writing – original draft, Methodology, Investigation, Data curation, Conceptualization.

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