Attempts to remove both federal funding (Congressional Record, 9/18/2015) and funding from individual state governments have been made over the past few years. On the federal level, the latest attempt to defund Planned Parenthood came following the release of doctored tapes of Planned Parenthood employees speaking about the donation of fetal tissue for research purposes. (Weekly E-newsletter, Sept. 2015)

While the federal attempt to remove funding from Planned Parenthood has currently not been achieved, the Texas state government has curtailed its funding and the data that has been collected about the consequences of this cut is astounding. In a study of the rates of continuation of conception care pre and post loss in funding, it was found that there was a decrease in the rate. They also found that there was a large increase in the birth rate for mothers that qualified for Medicaid in areas that were affected by the Planned Parenthood closures that resulted from the lack of funds. (Stevenson, Flores-Vazquez, Allgeyer, Schenkkan, & Potter, 2016) A study focusing on the continuity of use of contraceptives provided by Planned Parenthood before and after the removal of funds showed that women whose care was disrupted were likely to use a less effective means of contraceptive for at least eighteen months afterwards. (Woo, Alamgir, & Potter, 2016, p.301) They also reported instances of barriers raised for women attempting to find care at other clinics including," unnecessary physical exams, multiple visits and unauthorized copayments." (Woo et al., 2016, p.302) Another study, published by the American Journal of Public Health, found that there were numerous effects from the lack of funding including: reduced access to affordable services and contraceptive methods, reduced clinic hours and closures, and reduced numbers of women actually receiving care. (White et al., 2013, p.856-857) These results have "put clinicians and program administrators in the difficult position of deciding which low-income clients have the greatest need" (White et al., 2013, p.857)