

Facts on Induced Abortion In the United States

INCIDENCE OF ABORTION

- Half of pregnancies among American women are unintended, and four in 10 of these are terminated by abortion.
- Twenty-one percent of all pregnancies (excluding miscarriages) end in abortion.
- In 2011, 1.06 million abortions were performed, down 13% from 1.21 million in 2008. From 1973 through 2011, nearly 53 million legal abortions occurred.
- Each year, 1.7% of women aged 15–44 have an abortion. Half have had at least one previous abortion.
- At least half of American women will experience an unintended pregnancy by age 45, and at 2008 abortion rates, one in 10 women will have an abortion by age 20, one in four by age 30 and three in 10 by age 45.

WHO HAS ABORTIONS?

- Eighteen percent of U.S. women obtaining abortions are teenagers; those aged 15–17 obtain 6% of all abortions,

18–19-year-olds obtain 11%, and teens younger than 15 obtain 0.4%.

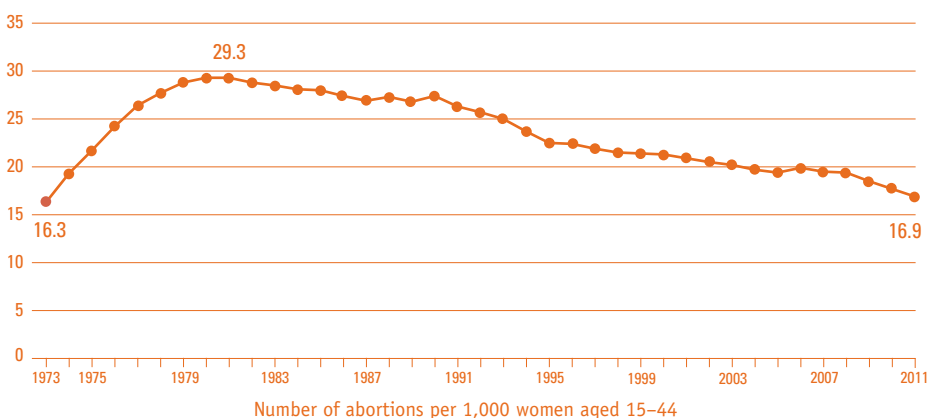
- Women in their 20s account for more than half of all abortions: Women aged 20–24 obtain 33% of all abortions, and women aged 25–29 obtain 24%.
- Non-Hispanic white women account for 36% of abortions, non-Hispanic black women for 30%, Hispanic women for 25% and women of other races for 9%.
- Thirty-seven percent of women obtaining abortions identify as Protestant and 28% identify as Catholic.
- Women who have never married and are not cohabiting account for 45% of all abortions.
- About 61% of abortions are obtained by women who have one or more children.
- Forty-two percent of women obtaining abortions have incomes below 100% of the federal poverty level (\$10,830 for a single woman with no children).

- Twenty-seven percent of women obtaining abortions have incomes between 100–199% of the federal poverty level.*
- The reasons women give for having an abortion underscore their understanding of the responsibilities of parenthood and family life. Three-fourths of women cite concern for or responsibility to other individuals; three-fourths say they cannot afford a child; three-fourths say that having a baby would interfere with work, school or the ability to care for dependents; and half say they do not want to be a single parent or are having problems with their husband or partner.
- Fifty-one percent of women who have abortions had used a contraceptive method in the month they got pregnant, most commonly condoms (27%) or a hormonal method (17%).

PROVIDERS AND SERVICES

- The number of U.S. abortion providers declined 4% between 2008 (1,793) and 2011 (1,720). The number of clinics providing abortion services declined 1%, from 851 to 839. Eighty-nine percent of all U.S. counties lacked an abortion clinic in 2011; 38% of women live in those counties.
- Forty-six percent of abortion providers offer very early abortions (before the first missed period) and 95% offer abortion at eight weeks from the last menstrual period. Sixty-one percent offer at least

In 2011, the U.S. abortion rate reached its lowest level since 1973



*Poverty guidelines are updated periodically in the Federal Register by the U.S. Department of Health and Human Services under the authority of 42 USC 9902(2).

some second-trimester abortion services (13 weeks or later), and 34% offer abortion at 20 weeks. Only 16% of all abortion providers offer abortions at 24 weeks.

- In 2011–2012, the average amount paid for a nonhospital abortion with local anesthesia at 10 weeks' gestation was \$480. The average amount paid for an early medication abortion before 10 weeks was \$504.

- Eighty-four percent of clinics experienced at least one form of antiabortion harassment in 2011. Picketing is the most common form of harassment clinics are exposed to (80%) followed by phone calls (47%). Fifty-three percent of clinics were picked 20 times or more.

- Eighty-eight percent of abortions occur in the first 12 weeks of pregnancy, 2006.

EARLY MEDICATION ABORTION

- In September 2000, the U.S. Food and Drug Administration approved mifepristone to be marketed in the United States as an alternative to surgical abortion.

- In 2011, 59% of abortion providers, or 1,023 facilities, provided one or more early medication abortions. At least 17% of providers offer only early medication abortion services.

- Medication abortion accounted for 23% of all nonhospital abortions and 36% of abortions before nine weeks' gestation, in 2011.

- Early medication abortions have increased from 6% of all abortions in 2001 to 23% in 2011, even while the overall number of abortions continued to decline. Data from the CDC show abortions shifting earlier within the first trimester, likely due, in part, to the availability of medication abortion services.

SAFETY OF ABORTION

- A first-trimester abortion is one of the safest medical procedures, with minimal risk—less than 0.05%—of major complications that might need hospital care.

- Abortions performed in the first trimester pose virtually no long-term risk of such problems as infertility, ectopic pregnancy, spontaneous abortion (miscarriage) or birth defect, and little or no risk of preterm or low-birth-weight deliveries.

- Exhaustive reviews by panels convened by the U.S. and British governments have concluded that there is no association between abortion and breast cancer. There is also no indication that abortion is a risk factor for other cancers.

- Leading experts have concluded that, among women who have an unplanned pregnancy, the risk of mental health problems is no greater if they have a single first-trimester abortion than if they carry the pregnancy to term.

- The risk of death associated with abortion increases with the length of pregnancy, from one death for every one million abortions at or before eight weeks to one per 29,000 at 16–20 weeks—and one per 11,000 at 21 weeks or later.

- Fifty-eight percent of abortion patients say they would have liked to have had their abortion earlier. Nearly 60% of women who experienced a delay in obtaining an abortion cite the time it took to make arrangements and raise money.

- Teens are more likely than older women to delay having an abortion until after 15 weeks of pregnancy, when the medical risks associated with abortion are significantly higher.

LAW AND POLICY

- In the 1973 *Roe v. Wade* decision, the Supreme Court ruled that women, in consultation with their physician, have a constitutionally protected right to have an abortion in the early stages of pregnancy—that is, before viability—free from government interference.

- In 1992, the Court reaffirmed the right to abortion in *Planned Parenthood v. Casey*. However, the ruling significantly weakened the legal protections previously afforded women and physicians by giving states the right to enact restrictions that do not create an “undue burden” for women seeking abortion.

- Congress has barred the use of federal Medicaid funds to pay for abortions, except when the woman's life would be endangered or in cases of rape or incest.

- As of January 1, 2014, at least half of the states have imposed excessive and unnecessary regulations on abortion clinics, mandated counseling designed to dissuade a woman from obtaining an abortion, required a waiting period before an abortion, required parental involvement before a minor obtains an abortion, or prohibited the use of state Medicaid funds to pay for medically necessary abortions.

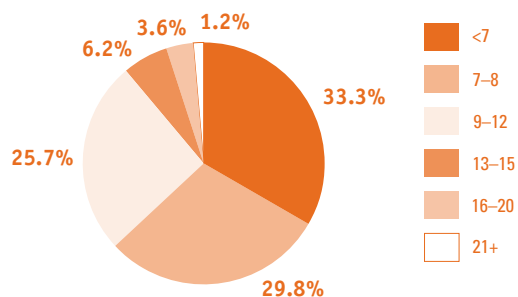
- In 2000, 13 states had at least four types of major abortion restrictions and so were considered hostile to abortion rights; 27 states fell into this category by 2013. The proportion of women living in restrictive states went from 31% to 56% during this time period.

- In contrast, the number of states supportive of abortion rights fell from 17 to 13. The proportion of women of reproductive age living in supportive states fell from 40% to 31% between 2000 and 2013.

These data are the most current available. References are available in the HTML version: http://www.guttmacher.org/pubs/fb_induced_abortion.html.

When women have abortions*

One-third of abortions occur at six weeks of pregnancy or earlier; 89% occur in the first twelve weeks, 2010



*In weeks from the last menstrual period.



125 Maiden Lane
New York, NY 10038 USA
Tel: 212.248.1111
info@guttmacher.org

www.guttmacher.org