



**Bixby Center**  
for Global  
Reproductive  
Health

**UCSF**

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# Why have abortions decreased in the USA?

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Distinguished Professor

Obstetrics, Gynecology and  
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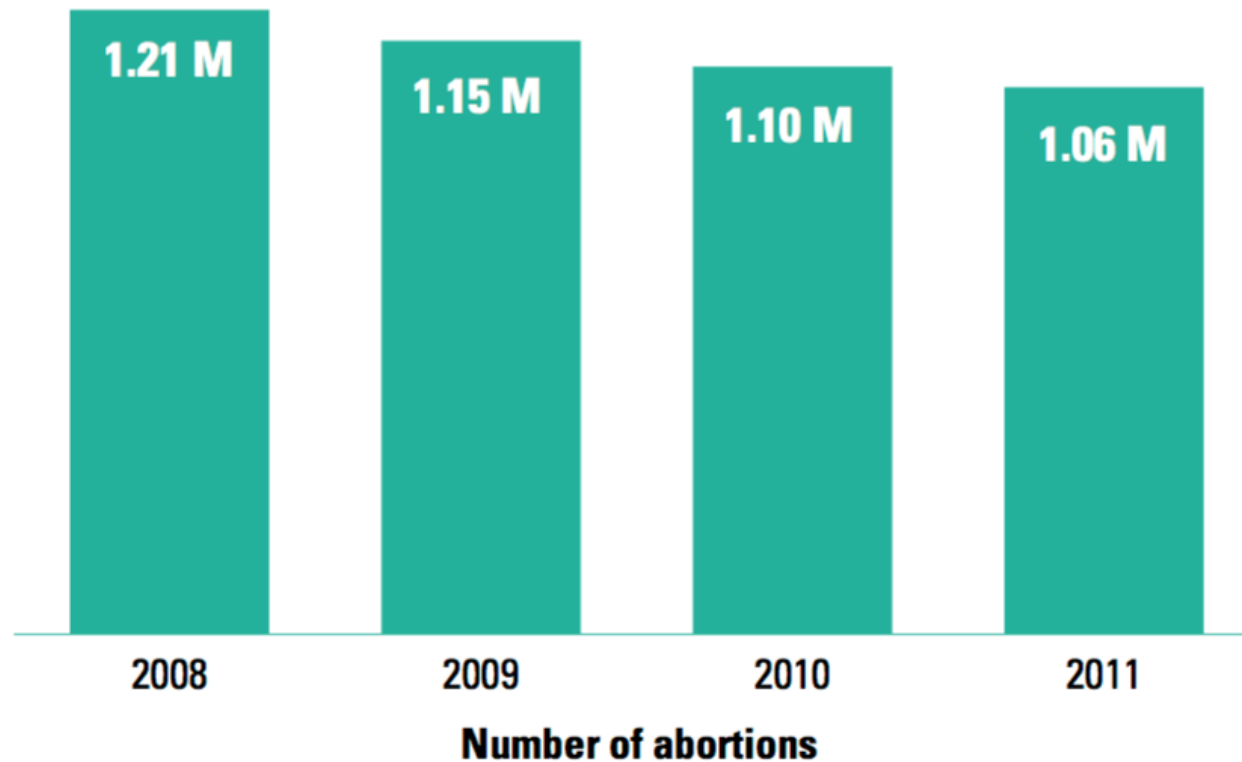
*FIAPAC, Lisbon, 15 October, 2016*

**Blair G. Darney, PhD, MPH**

Assistant Professor

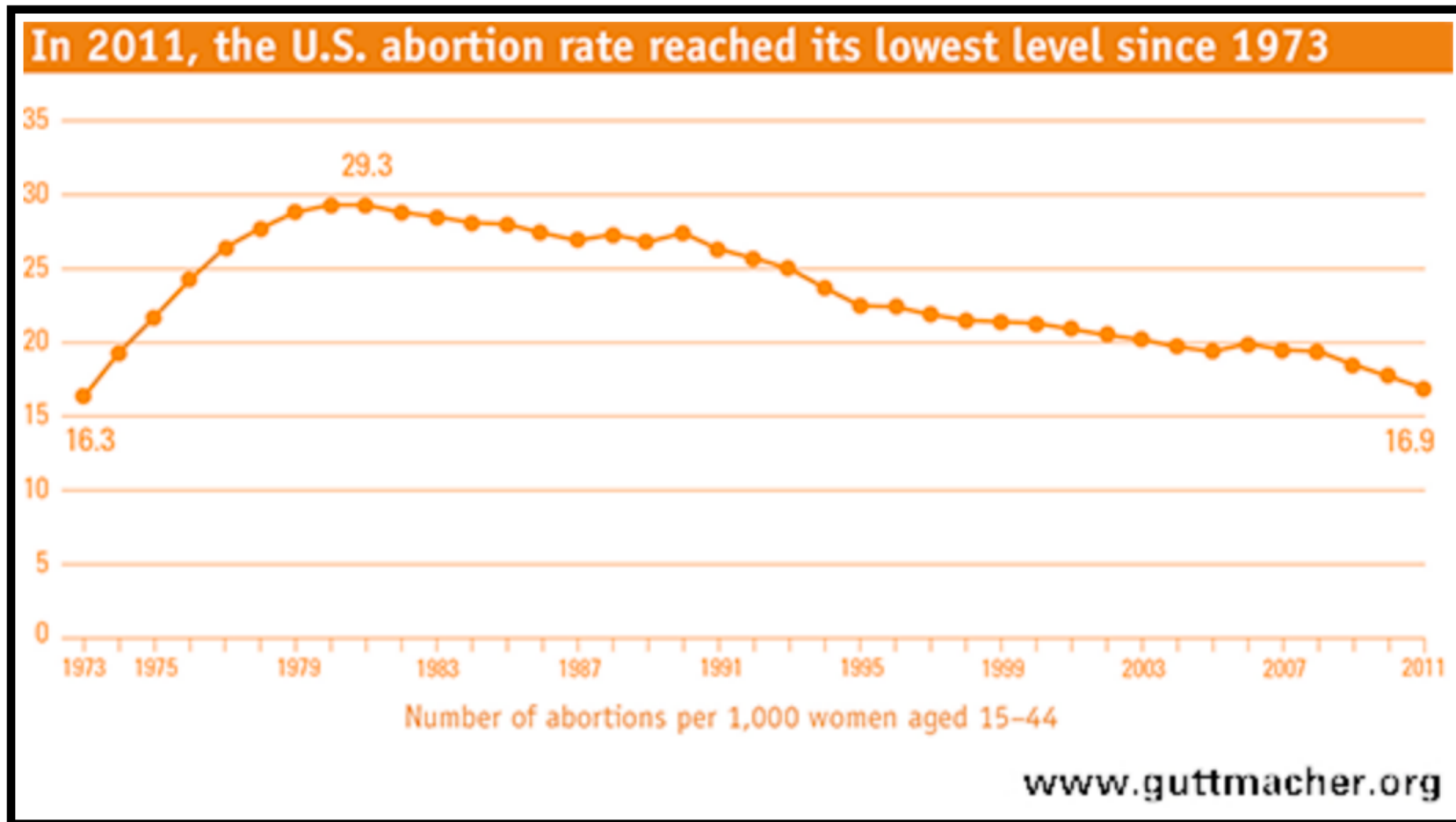
National Institute of Public  
Health, Mexico  
Oregon Health & Science  
University, USA

# Declines in the *number* of abortions



Jones & Jerman, 2011, Persp Sex Rep H

And the *rate* per 1,000 women 15-44



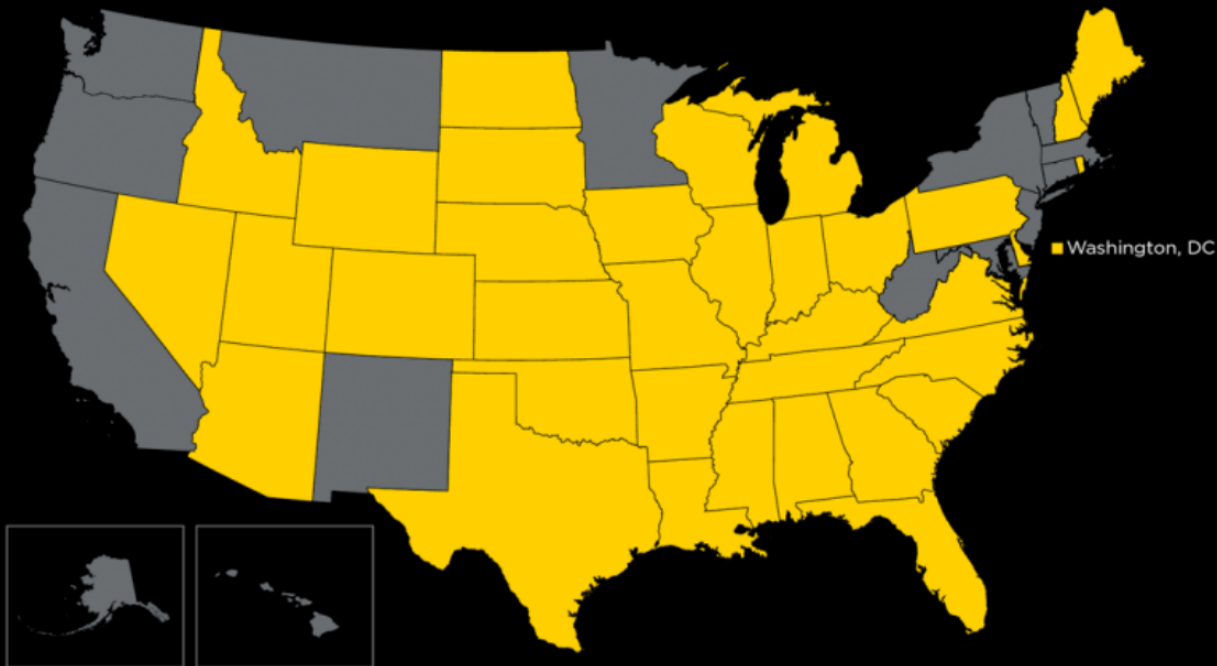
# What is driving the decline?

- Harder to **access** abortion services?
  - Goal of the right wing
- More and/or better use of **contraception**?
  - We'd like to think (?)
- Context of maternal morbidity/mortality in the US

# Access: Insurance & Regulation

GUTTMACHER INSTITUTE

**In 35 states and DC, women enrolled in Medicaid have coverage for abortion only in the most extreme circumstances.**



# Declines in abortion due to making services harder to access?

- We would anticipate a rise in the birthrate
  - Abortion ratio (# abortions/100 pregs) declined only slightly: 23 to 21
  - 2008- 2011
    - abortions declined by about 150,000
    - births by roughly twice as much (down about 300,000)
- Both abortions AND births are down

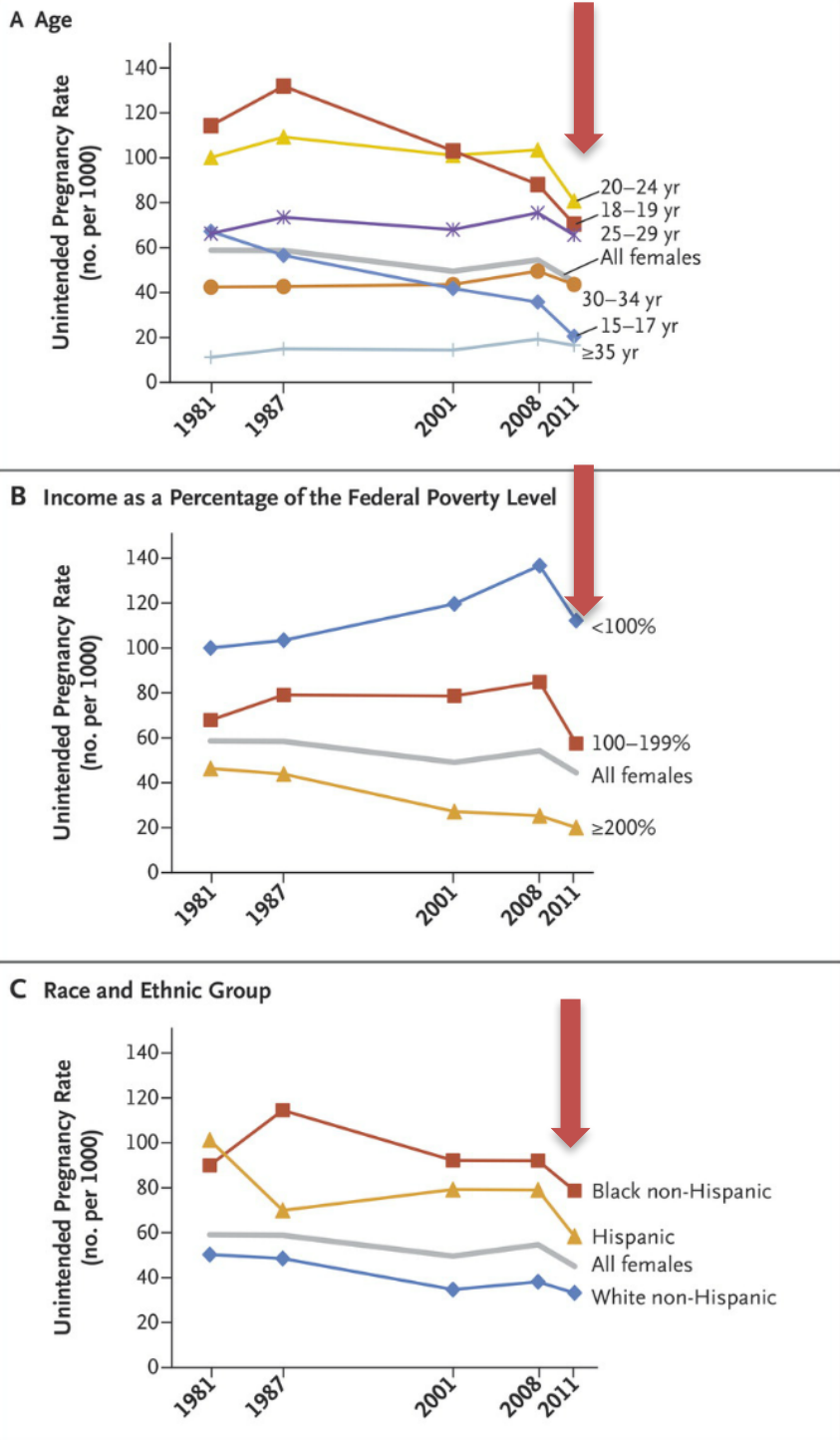
# Better use of contraception?

- Overall decline in unintended pregnancies
- Adolescent pregnancy, birth, and abortion rates declined
  - Evidence that younger women are using contraception

Finer, & Zolna, 2016 N Engl J Med; 374:843-852

**Guttmacher Policy Review** | Spring 2014 | Volume 17, Number 2

# Declines in unintended pregnancy 2008-2011

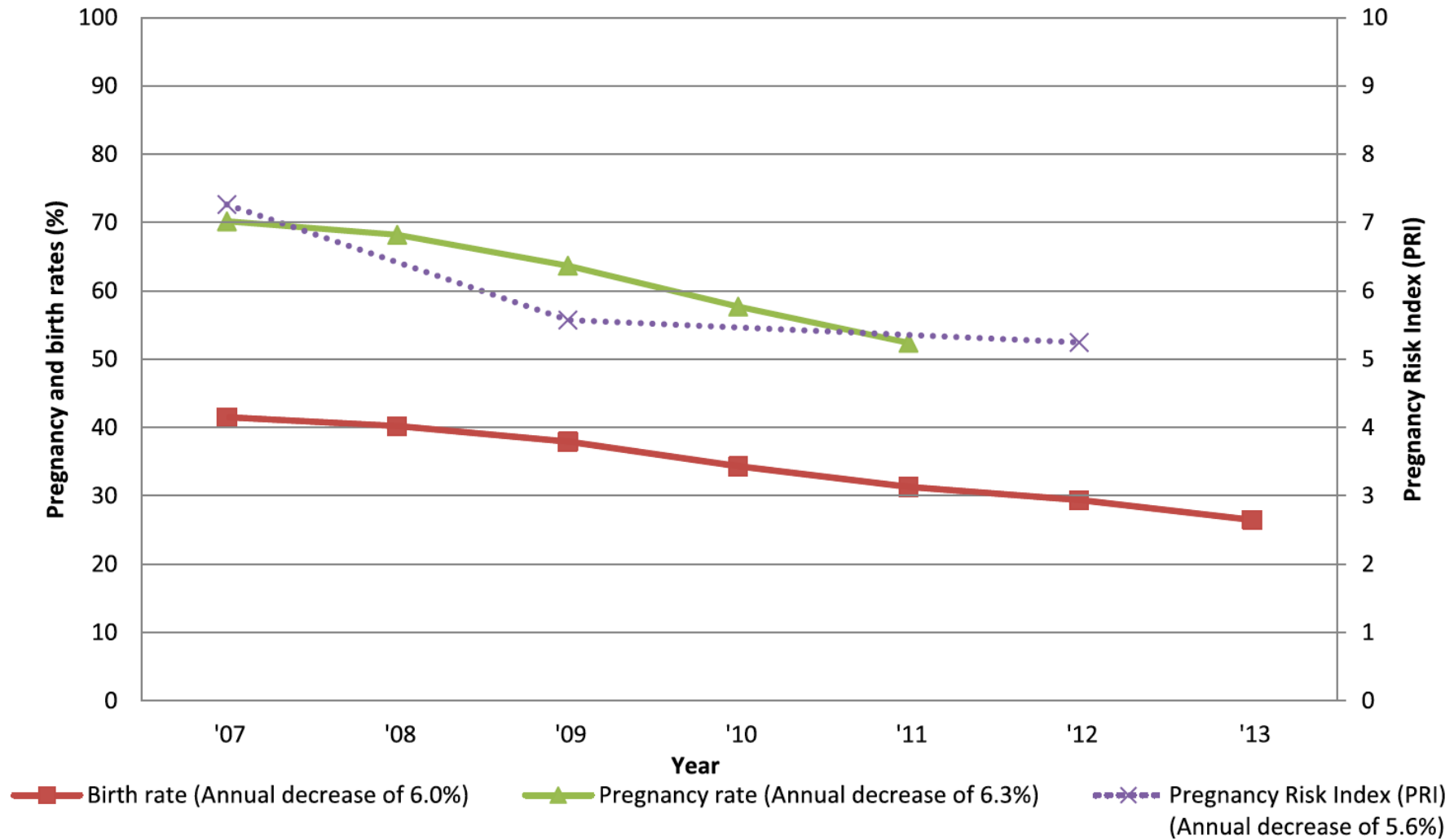


**Figure 3. Rates of Unintended Pregnancy According to Key Sociodemographic Characteristics, 1981–2011.**

Rates are reported as the number of unintended pregnancies per 1000 women and girls 15 to 44 years of age.



# Declines in adolescent fertility



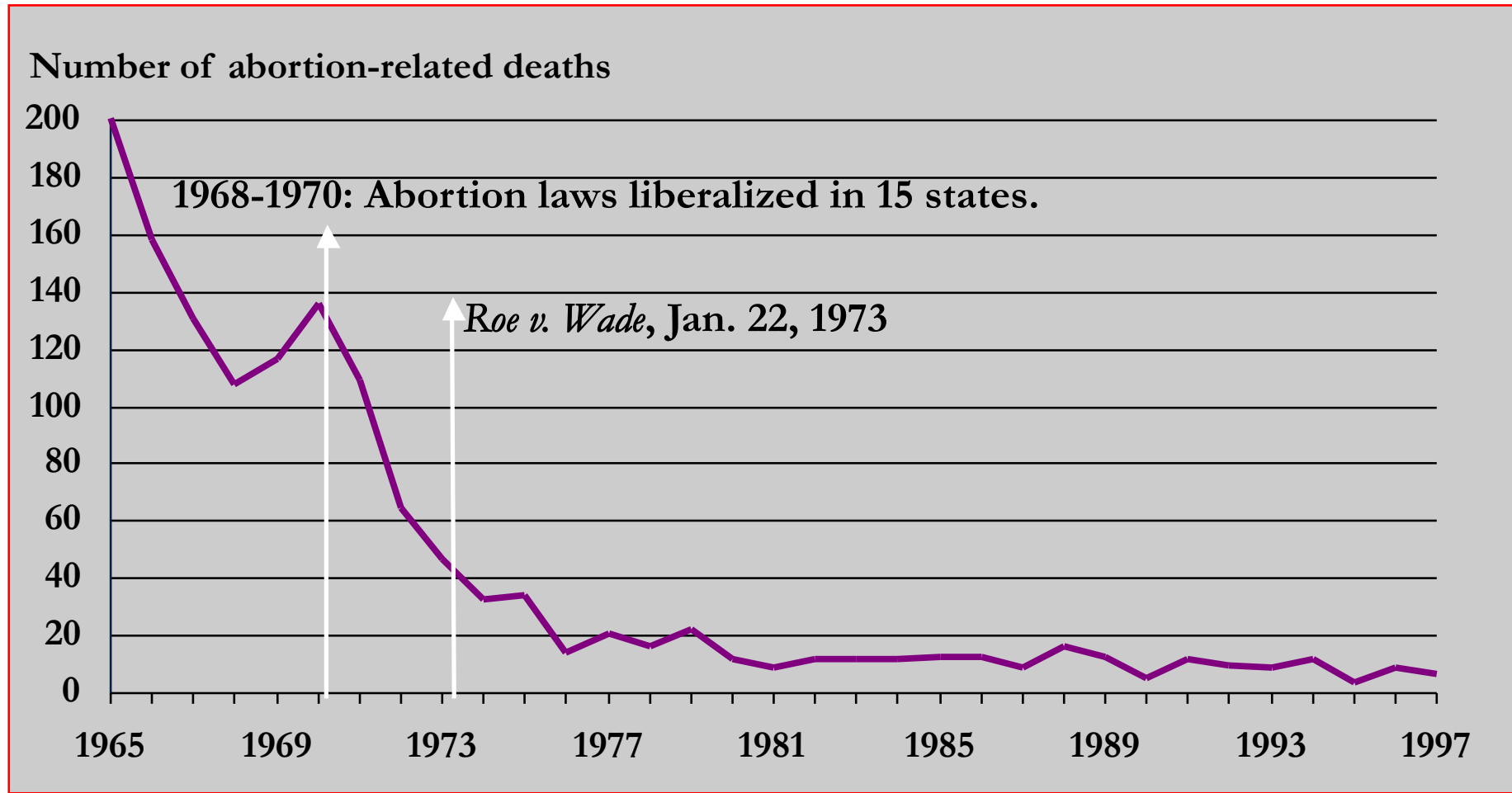
**Figure 1.** Birth rate, pregnancy rate, and pregnancy risk among women aged 15–19 years, 2007–2013.

# Other secular trends tied to declines in pregnancy, abortion and births?

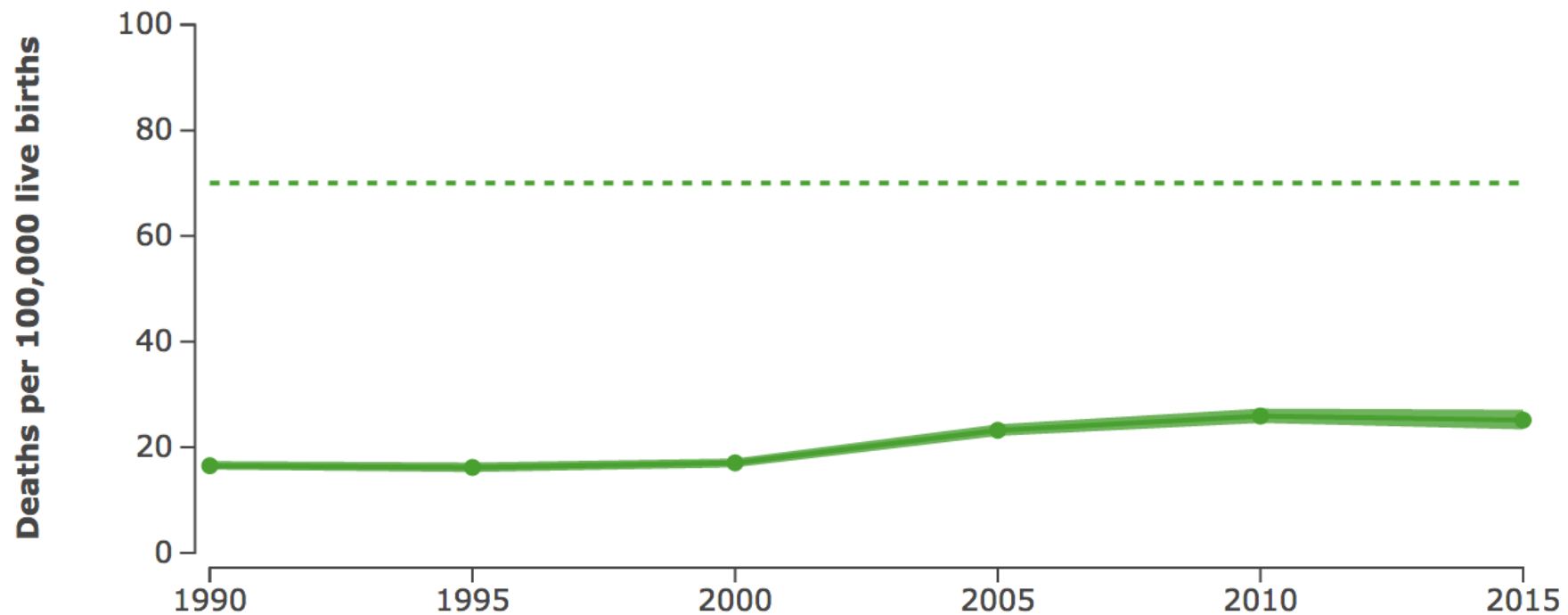
- Changing social norms?
- More women in the workforce?
- More young women going to university?

# Context of maternal mortality in the US

## US deaths from abortion after legalization



## Maternal mortality ratio, United States



**Indicator 3.1.1: Maternal mortality ratio (maternal deaths among women aged 15-49 years per 100,000 live births)**

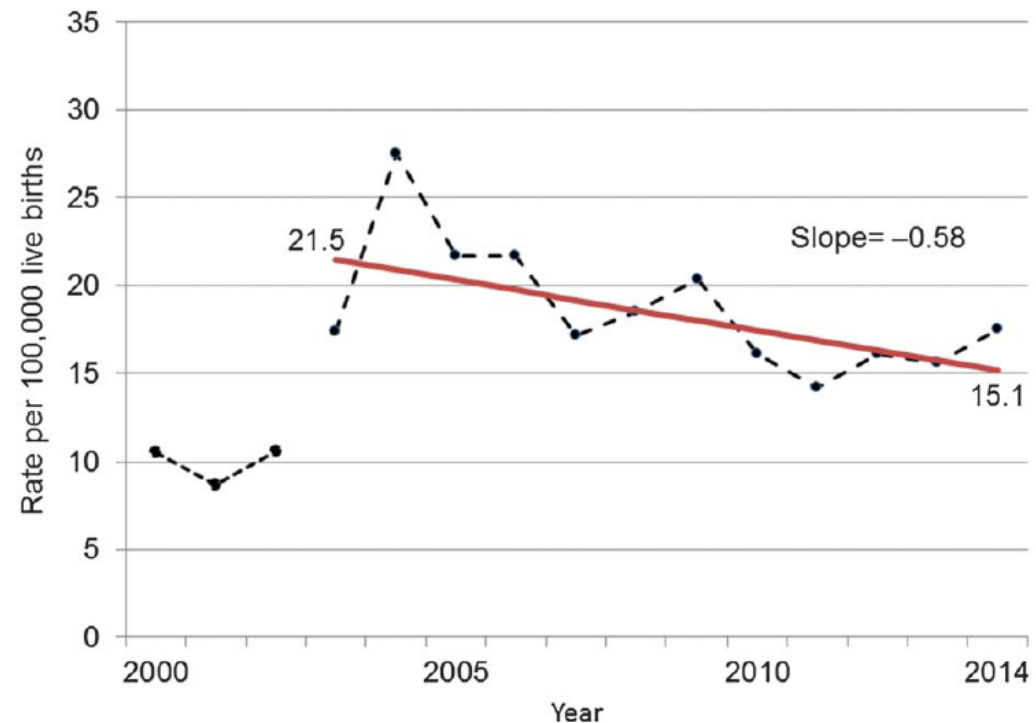
**Target 3.1:** By 2030, reduce the global maternal mortality ratio to less than 70 per 100,000 live births.

**Goal 3:** Ensure healthy lives and promote well-being for all at all ages.

IHME: <http://vizhub.healthdata.org/sdg/>

[http://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(16\)31470-2/fulltext](http://www.thelancet.com/journals/lancet/article/PIIS0140-6736(16)31470-2/fulltext)

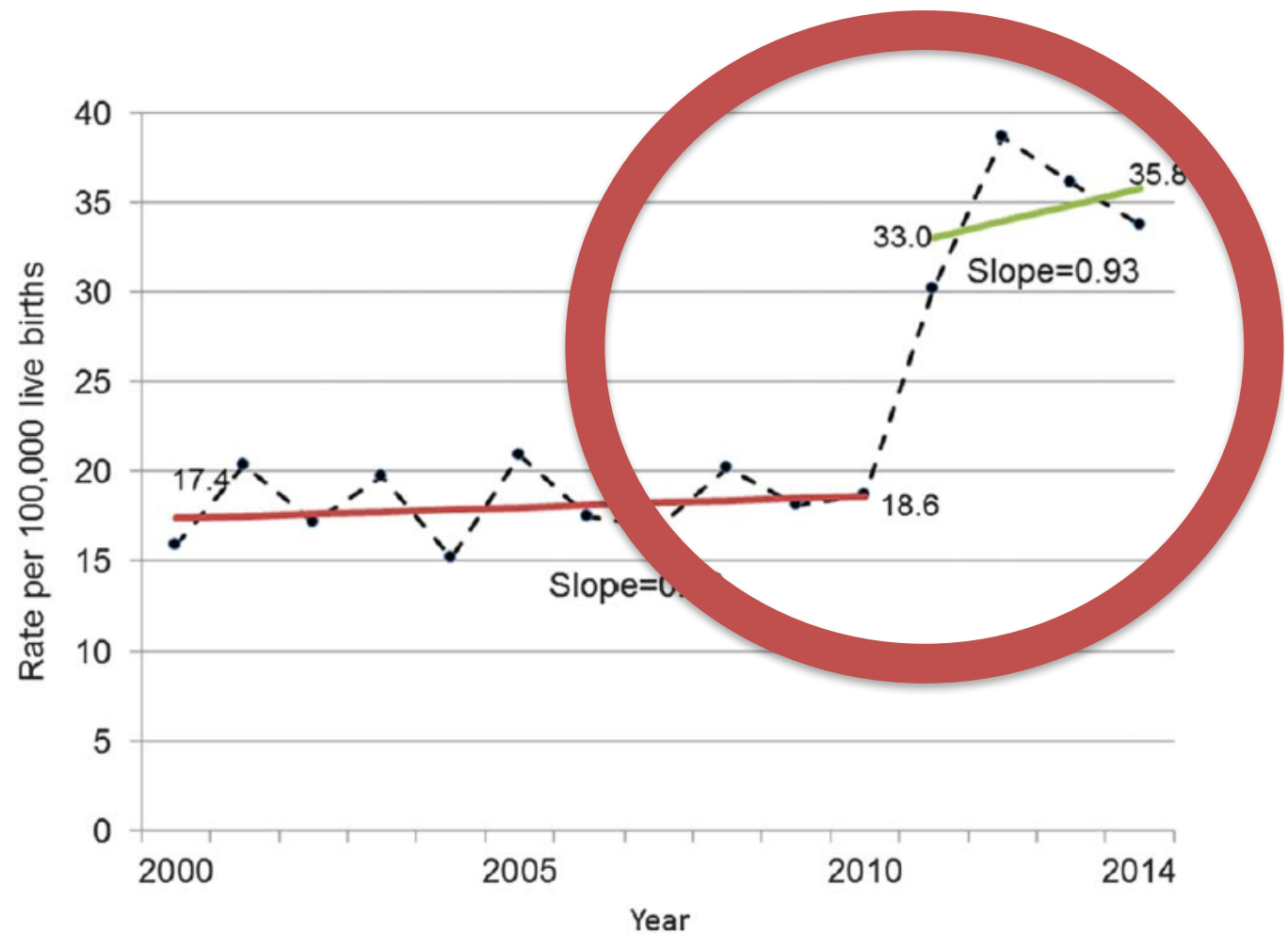
# California



**Fig. 5.** Unadjusted combined maternal and late maternal mortality rates, California, 2000–2014. Includes pregnancy-related deaths occurring within 1 year of pregnancy. California revised their death certificate in 2003 to a non-standard question that asks about deaths within 1 year of pregnancy. Before 2003, California did not have a pregnancy question on their death certificate.

*MacDorman. U.S. Maternal Mortality Trends. Obstet Gynecol 2016.*

# Texas



**Fig. 4.** Adjusted maternal mortality rates, Texas, 2000–2014. Texas revised to the U.S. standard pregnancy question in 2006. The unrevised question asked about pregnancies within the past 12 months.

*MacDorman. U.S. Maternal Mortality Trends. Obstet Gynecol 2016.*

THANK YOU, [philip.darney@ucsf.edu](mailto:philip.darney@ucsf.edu)



***Bixby Center for Global Reproductive Health***

By 2014, 10 US states had each enacted greater than 10 types of abortion restrictions: AR, AL, AZ, FL, IN, LA, MS, MO, OK, TX.

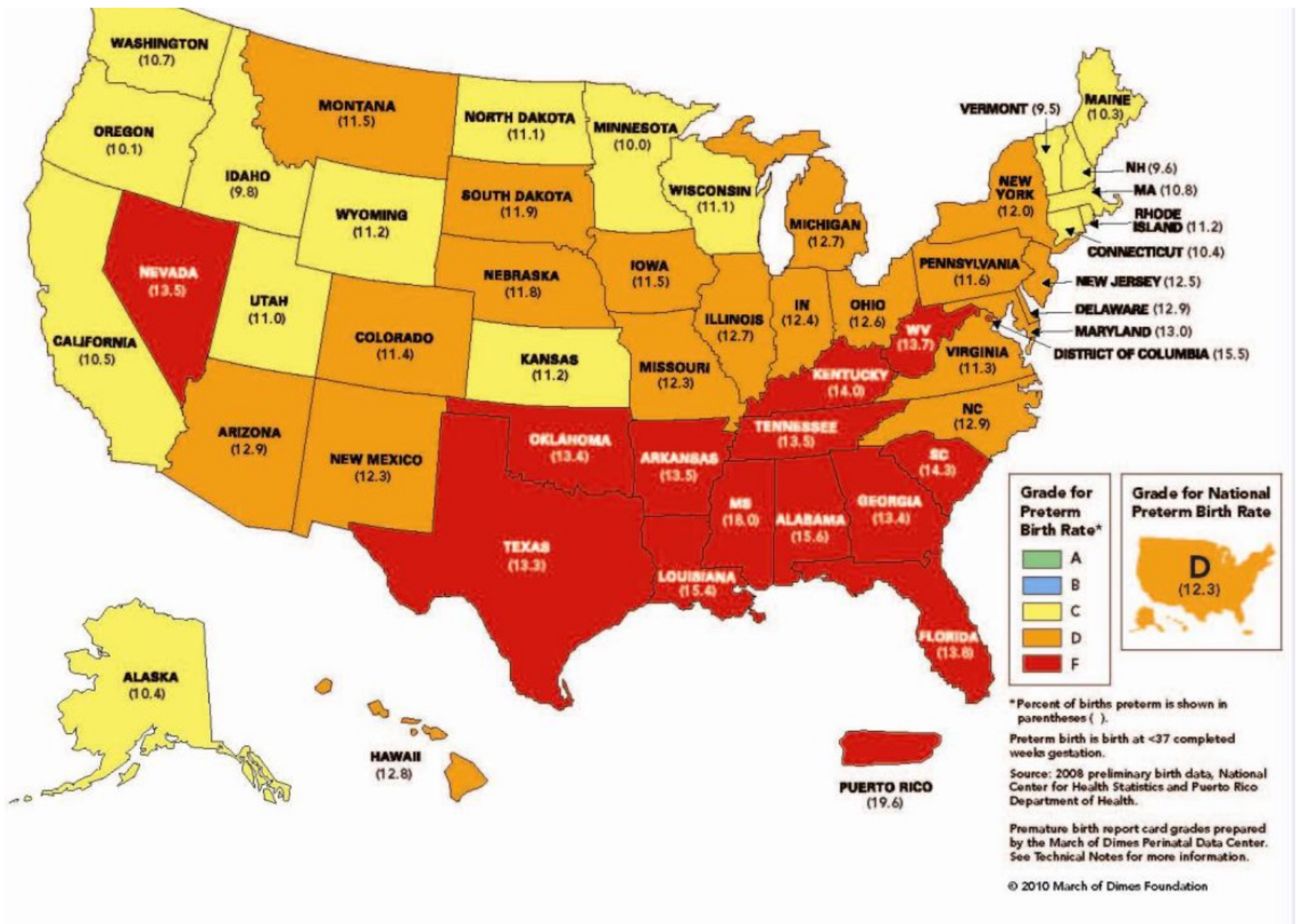
**These states had the worst child and maternal health indices in USA**

Center for Reproductive Rights, Ibis, 2014



The more contraception and abortion are restricted, the worse women's and children's health status

example, preterm birth (PTB) rates in USA

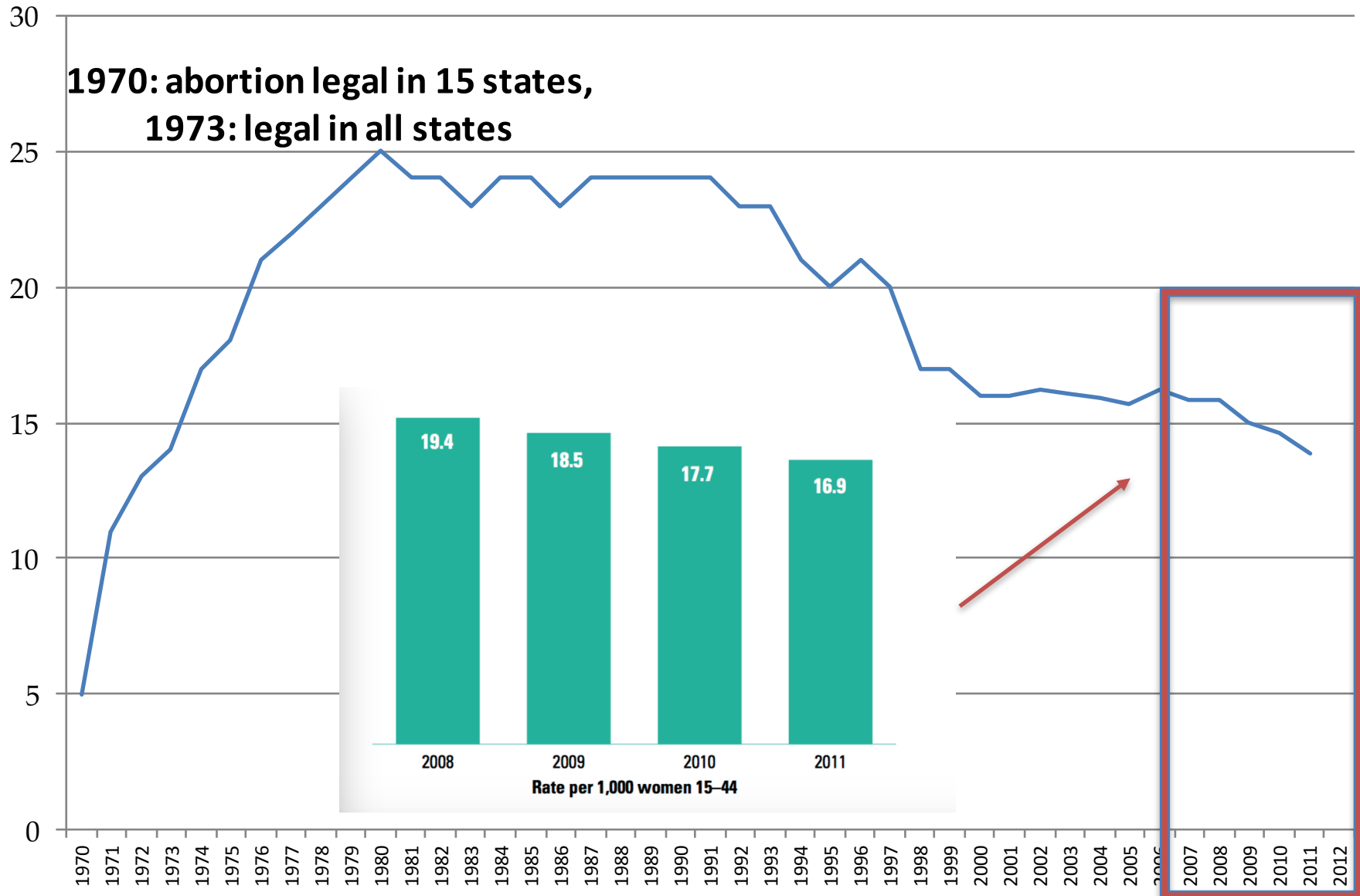


And the *rate* per 1,000 women 15-44



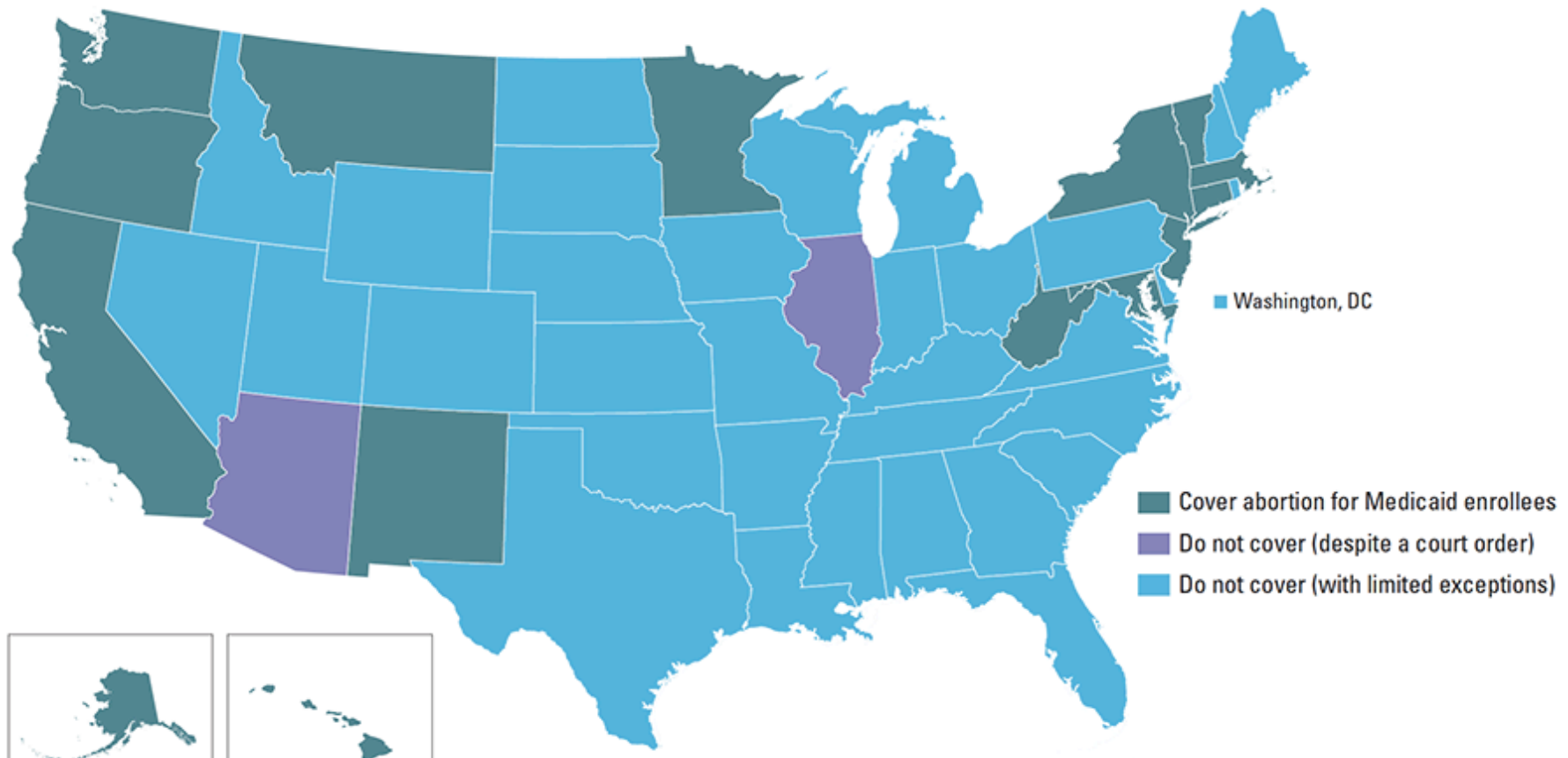
Jones & Jerman, 2011, Persp Sex Rep H

# And the rate

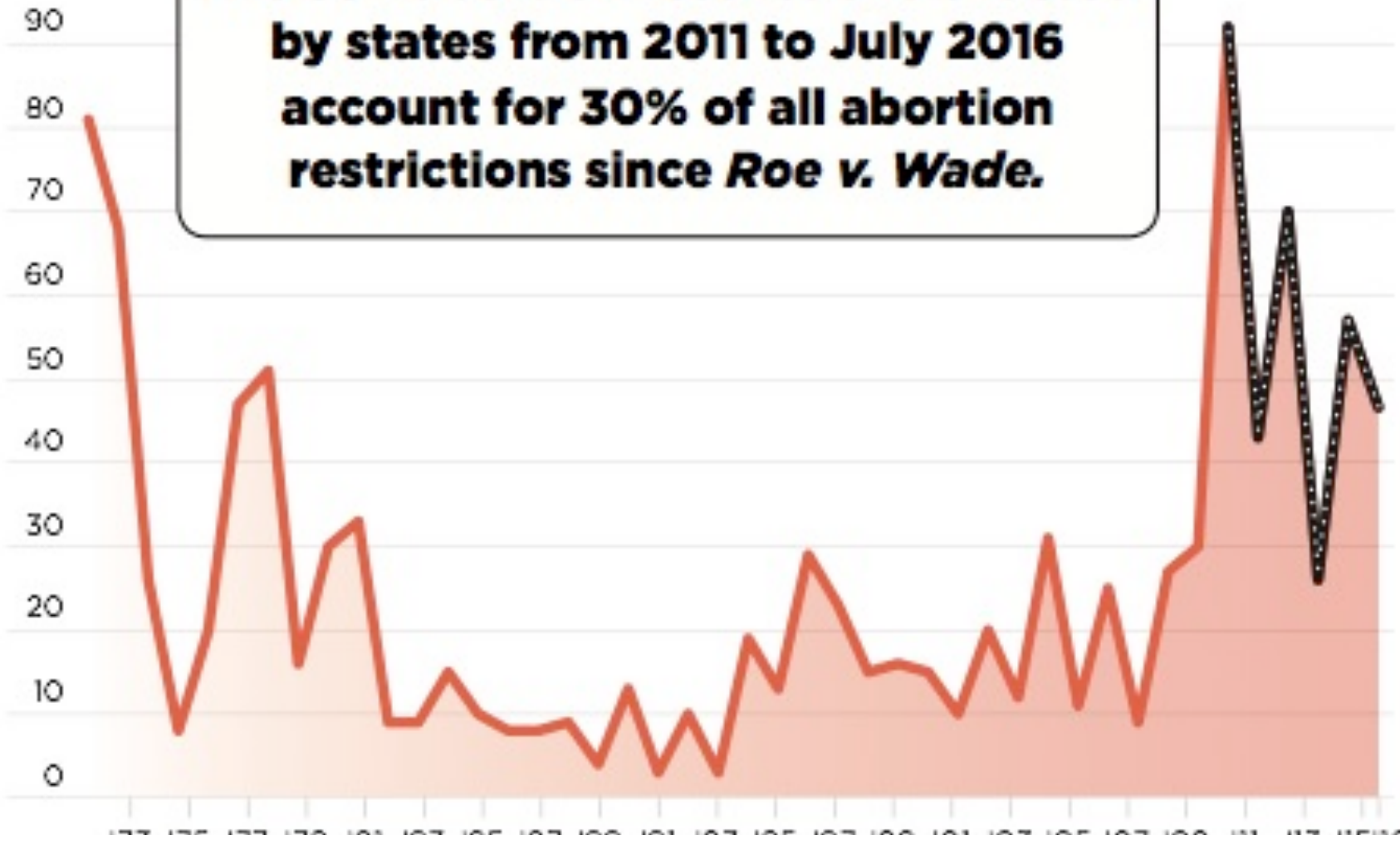


# States paying for abortion, USA, 2016

enrolled in Medicaid; however, 15 states have a policy to cover abortion with state funds and appear to be doing so in practice.



**The 334 abortion restrictions enacted by states from 2011 to July 2016 account for 30% of all abortion restrictions since *Roe v. Wade*.**



# Preterm birth, neonatal and childhood mortality, and unintended births.

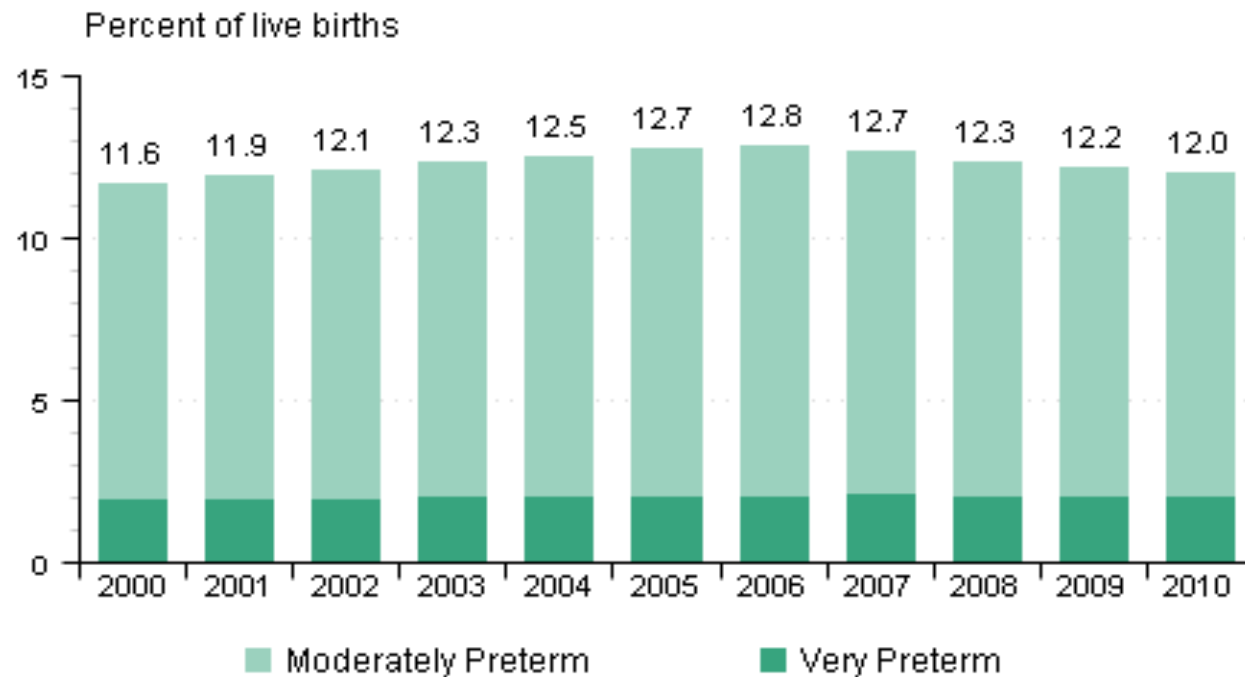
- Single most important cause of perinatal mortality (28 weeks gestation through 6 days of life) in the U.S. (accounts for approx 75% of these losses)
- Leading cause of childhood mortality worldwide (Lancet, 2014)
- Second leading cause of infant mortality in U.S.
- Leading cause of black infant mortality in U.S.
- Major determinant of neonatal and infant illness and NICU costs.
- Major contributor of short and long term morbidity, disability, and costs.
- **40-60% of US preterm births resulted from unintended pregnancies.**

Source: National Center for Health Statistics, period linked birth/infant death data

Prepared by March of Dimes Perinatal Data Center, 2006



# Preterm births, USA, 2000-2010



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Preterm is less than 37 completed weeks gestation. Very preterm is less than 32 completed weeks gestation. Moderately preterm is 32-36 completed weeks of gestation.  
Source: National Center for Health Statistics, final natality data. Retrieved July 11, 2013, from [www.marchofdimes.com/peristats](http://www.marchofdimes.com/peristats).