Abortion is a common experience: At current rates, about three in ten American women will have had an abortion by the time she reaches age 45. Moreover, a broad cross section of U.S. women have abortions. 58% of women having abortions are in their 20s; 61% have one or more children; 85% are unmarried; 69% are economically disadvantaged; and 73% report a religious affiliation. No racial or ethnic group makes up a majority: 36% of women obtaining abortions are white non-Hispanic, 30% are black non-Hispanic, 25% are Hispanic and 9% are of other racial backgrounds.

Contraceptive use is a key predictor of women's recourse to abortion. The very small group of American women who are at risk of experiencing an unintended pregnancy but are not using contraceptives account for more than half of all abortions. Many of these women did not think they would get pregnant or had concerns about contraceptive methods. The remainder of abortions occur among the much larger group of women who were using contraceptives in the month they became pregnant. Many of these women report difficulty using contraceptives consistently.

Abortion is one of the safest surgical procedures for women in the United States. Fewer than 0.5% of women obtaining abortions experience a complication, and the risk of death associated with abortion is about one-tenth that associated with childbirth.

In the 1973 Roe v. Wade decision, the U.S. Supreme Court ruled that a woman, in consultation with her physician, has a constitutionally protected right to choose abortion in the early stages of pregnancy—that is, before viability. In 1992, the Court upheld the basic right to abortion in Planned Parenthood v. Casey. However, it also expanded the ability of the states to enact all but the most extreme restrictions on women's access to abortion. The most common restrictions in effect are parental notification or consent requirements for minors, limitations on public funding, and unnecessary and overly burdensome regulations on abortion facilities.

Pregnancies and Their Outcomes

- In 2011, there were 6 million pregnancies to the 63 million women of reproductive age (15-44) in the United States. Sixty-seven percent of these pregnancies resulted in live births and 18% in abortions; the remaining 15% ended in miscarriage.

- In North Dakota, 12,800 of the 131,769 women of reproductive age became pregnant in 2011. 74% of these pregnancies resulted in live births and 10% in induced abortions.

- In 2011, 1.1 million American women obtained abortions, producing a rate of 16.9 abortions per 1,000 women of reproductive age. The rate is a decrease from 2008, when the abortion rate was 19.4 abortions per 1,000 women 15-44.

- In 2011, 1,250 women obtained abortions in North Dakota, producing a rate of 9.5 abortions per 1,000 women of reproductive age. Some of these women were from other states, and some North Dakota residents had abortions in other states, so this rate may not reflect the abortion rate of state residents. The rate decreased 14% since 2008, when it was 11 abortions per 1,000 women 15-44. Abortions in North Dakota represent 0.1% of all abortions in the United States.

Where Do Women Obtain Abortions?

- In 2011, there were 1,720 abortion providers in the United States. This is a slight (4%) decrease from 2008, when there were 1,787 abortion providers. Thirty-five percent of these providers were hospitals, 19% were abortion clinics (clinics where more than half of all patient visits were for abortion), 30% were clinics where fewer than half of all visits were for abortion, and 17% were private physicians’ offices. Sixty-three percent of all abortions were provided at abortion clinics, 31% at other clinics, 4% at hospitals and 1% at private physicians' offices.
• In 2011, there were 1 abortion providers in North Dakota; 1 of those were clinics. This represents no change in overall providers and a no change in clinics from 2008, when there were 1 abortion providers overall, of which 1 were abortion clinics.

• In 2011, 89% of U.S. counties had no abortion clinic. 38% of American women lived in these counties, which meant they would have to travel outside their county to obtain an abortion. Of women obtaining abortions in 2008, one-third traveled more than 25 miles.

• In 2011, 98% of North Dakota counties had no abortion clinic. 73% of North Dakota women lived in these counties.

Restrictions on Abortion

• Abortion would be banned if Roe v. Wade were to be overturned.

• A woman must receive state-directed counseling that includes information designed to discourage her from having an abortion and then wait 24 hours before the procedure is provided.

• Abortion is covered in private insurance policies only in cases of life endangerment, unless an optional rider is purchased at an additional cost.

• Health plans that will be offered in the state’s health exchange under the Affordable Care Act can only cover abortion when the woman’s life is endangered, unless an optional rider is purchased at an additional cost.

• Abortion is covered in insurance policies for public employees only in cases of life endangerment.

• Medication abortion must be provided using the FDA protocol, thereby preventing the use of a more common, simpler evidence-based regimen.

• The parents of a minor must consent before an abortion is provided.

• Public funding is available for abortion only in cases of life endangerment, rape or incest.

• An abortion may be performed at or after 20 weeks postfertilization (22 weeks after the woman’s last menstrual period) only if the woman’s life is endangered or if her physical health is severely compromised, based on the spurious assertion that a fetus can feel pain at that point.

Definitions and Data Sources

References for information contained in this fact sheet are available at http://www.guttmacher.org/pubs/sfaa/sfaa-sources.html