National Background and Context

Each year, a broad cross section of people in the United States obtain abortions. In 2017, 862,320 abortions were provided in clinical settings in the United States.

The U.S. Supreme Court recognized the constitutional right to abortion in the 1973 *Roe v. Wade* decision and has reaffirmed that right in subsequent decisions.

However, since 2010, the U.S. abortion landscape has grown increasingly restrictive as more states adopt laws hostile to abortion rights. Between January 1, 2011 and July 1, 2019, states enacted 483 new abortion restrictions, and these account for nearly 40% of all abortion restrictions enacted by states in the decades since *Roe v. Wade*. Some of the most common state-level abortion restrictions are parental notification or consent requirements for minors, limitations on public funding, mandated counseling designed to dissuade individuals from obtaining an abortion, mandated waiting periods before an abortion, and unnecessary and overly burdensome regulations on abortion facilities.

Abortion Incidence

- Approximately 862,320 abortions occurred in the United States in 2017. The resulting abortion rate of 13.5 abortions per 1,000 women of reproductive age (15-44) represents an 8% decrease from the 2014 rate of 14.6.

- In 2017, 2,990 abortions were provided in Utah, though not all abortions that occurred in Utah were provided to state residents: Some patients may have traveled from other states, and some Utah residents may have traveled to another state for an abortion. There was a 4% decline in the abortion rate in Utah between 2014 and 2017, from 4.6 to 4.4 abortions per 1,000 women of reproductive age. Abortions in Utah represent 0.3% of all abortions in the United States.

Where Patients Obtain Abortions

- In 2017, there were 1,587 facilities providing abortion in the United States, representing a 5% decrease from the 1,671 facilities in 2014. Sixteen percent of facilities in 2017 were abortion clinics (i.e., clinics where more than half of all patient visits were for abortion), 35% were nonspecialized clinics, 33% were hospitals and 16% were private physicians’ offices. Sixty percent of all abortions were provided at abortion clinics, 35% at nonspecialized clinics, 3% at hospitals and 1% at physicians’ offices.

- There were 12 facilities providing abortion in Utah in 2017, and 3 of those were clinics. These numbers represent a 50% increase in clinics from 2014, when there were six abortion-providing facilities overall, of which two were clinics.

- In 2017, 89% of U.S. counties had no clinics providing abortions. Some 38% of reproductive-age women lived in those counties and would have had to travel elsewhere to obtain an abortion. Of patients who had an abortion in 2014, one-third had to travel more than 25 miles one way to reach a facility.

- In 2017, some 97% of Utah counties had no clinics that provided abortions, and 63% of Utah women lived in those counties.

Restrictions on Abortion

- Abortion would be banned if *Roe v. Wade* were overturned.

- A patient must receive state-directed counseling that includes information designed to discourage the patient from having an abortion, and then wait 72 hours before the procedure is provided. Counseling must be provided in person and must take place at any medical facility before the waiting period begins, thereby necessitating two trips to the facility.

- Private insurance policies cover abortion only in cases of life endangerment, rape, incest, or if the woman's health is severely compromised or in cases of fetal impairment.

- Health plans offered in the state’s health exchange under the
Affordable Care Act can only cover abortion in cases of life endangerment or severely compromised physical health, or in cases of fetal impairment, rape or incest.

- Abortion is covered in insurance policies for public employees only in cases of life endangerment or severely compromised health, fetal impairment, rape or incest.

- The parent of a minor must consent and be notified before an abortion is provided.

- Public funding is available for abortion only in cases of life endangerment, rape, incest or when the procedure is necessary to prevent long-lasting damage to the patient's physical health.

- An abortion may be performed at or after viability only in cases of life endangerment, severely compromised health, rape, incest or lethal fetal anomaly.

- The state requires abortion clinics to meet unnecessary and burdensome standards related to their physical plant, equipment and staffing.

References for information contained in this fact sheet are available at https://www.guttmacher.org/fact-sheet/state-facts-about-abortion-utah