

Repeat Abortions in Canada, 1975–1993

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In Canada, 20% of women who obtained an abortion between 1975 and 1993 had had at least one previous abortion. An analysis of data on 1.2 million abortions shows that the proportion of abortion patients undergoing repeat procedures increased from 9% to 29% over the 19-year period. The proportion was above average (22–28% for all years combined) among women who were in common-law marriages, those aged 25–39 and those who had previously had children. In 1993, 27 women per 1,000 who had ever had an abortion underwent another one, while 13 women per 1,000 who had never had an abortion obtained their first one; among teenagers, the repeat rate was four times the rate of first abortions (81 per 1,000 vs. 19 per 1,000). During the study period, the repeat rate rose sharply among women younger than 25 but fell among those aged 30 and older. In 1993, fewer than 2% of abortions were obtained by women who had had three or more previous procedures, suggesting that abortion is not widely used as a primary method of birth control.

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In Canada, restrictive criminal code provisions were liberalized in August 1969 to allow induced abortion if the continuation of a pregnancy would be likely to endanger the life or health of the woman. The law required that the procedure be performed in a hospital after being approved by a committee of at least three physicians. In January 1988, the Supreme Court of Canada struck down the liberalized law, and since then, no new abortion legislation has been enacted.

Both the number and the rate of abortions in Canada increased rapidly during the decade following the liberalization of the abortion law, declined until the mid-1980s and resumed an upward trend in recent years. In 1993, Canadian women obtained 104,403 abortions in Canada or in the United States; the resulting abortion rate was 15.3 procedures per 1,000 women aged 15–44. Of these procedures, 29% were obtained by women who had had a previous induced abortion.*¹

This experience fits a general pattern, in which the legalization of abortion results, at least initially, in increasing numbers of women terminating pregnancies, but in growing numbers doing so two or more times.² The growing number of repeat procedures causes concern because people fear women may be relying on abortion as their primary means of fertil-

ity control. Others fear that even minor adverse effects of abortion on women's health or on the outcome of later pregnancies might be cumulative with multiple abortions.

In this article, we describe the rate of and trends in repeat abortion in Canada from 1975 to 1993, and we relate these data to selected characteristics of Canadian women who obtained repeat abortions. Additionally, although the Canadian data have a level of completeness and detail not available in most other countries, we compare the Canadian experience with that of other industrialized countries.

Data

This study utilizes tabulations based on records of abortions kept by Statistics Canada.³ That organization began collecting statistics on induced abortions in 1969, in response to requests from the Departments of Justice and Health to monitor the impact of the liberalized law. Between 1969 and 1988, when the Supreme Court struck down the abortion law, hospitals were required to report data on "therapeutic abortions" (as defined by the ninth revision of the *International Classification of Diseases, Injuries and Causes of Death*⁴). After 1988, the provinces and territories continued, on a voluntary basis, to supply Statistics Canada with information on hospital abortions and some clinic procedures.

During the period 1970–1974, the focus of the data collection program was on sim-

ple counts of therapeutic abortions performed in Canadian hospitals and legal abortions obtained in the United States by Canadian women. A total of 194,947 abortions were reported for this period, of which 88% were performed in Canada and 12% in the United States.[†]

From 1975 through 1993, selected demographic and medical characteristics were reported for 1.2 million women who obtained hospital abortions throughout Canada. However, after 1988, characteristics data were not supplied for all hospital abortions. At the same time, the provision of abortion at nonhospital facilities became legal, and the number of procedures performed in clinics, many of which did not routinely report on women's demographic and medical characteristics, increased sharply.[‡]

In all, for 1975–1993, data on characteristics of women obtaining abortions were unavailable for 59,000 women who had abortions in hospitals, 156,000 who had clinic abortions and approximately 46,000 whose abortions took place in the United States. Additionally, some reports were incomplete. For example, the number of prior abortions was missing for 42,000 women for whom other demographic information was available. Thus, abortion experience was known for 79% of the women who had abortions during this period. We assume that most women who had had illegal abortions did not report these procedures to their physicians.

Methods

For our analysis of repeat abortions, we assumed that women for whom information was lacking were similar to those for whom data were available, including with regard to their abortion history. Partial data for Ontario and Alberta in 1994 suggest that women who had clinic abor-

*Abortions obtained by women whose abortion history was unknown are distributed proportionately.

†The number of Canadian women reported to have had abortions in the United States declined from about 4,000 in 1975 to about 500 in 1993.

‡Between 1978 and 1993, the number of clinic abortions increased from fewer than 3,000 (all in Quebec, where abortions were performed even before the procedure became legal) to 32,000, performed in seven provinces.

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tions, the largest group with missing data, were generally similar to women who had abortions in hospitals but may have had more prior abortions.* Thus, any error introduced by the lack of information about clinic abortions would probably have caused us to underestimate slightly the proportion and rate of repeat abortions.

Excluded from the analysis are about 232,000 women treated as hospital inpatients whose abortions were coded, according to the *International Classification of Diseases*, "unspecified" (i.e., as to whether they were induced or spontaneous) and 200 whose abortions were coded as illegally induced. Also, the reporting to Statistics Canada of abortions in Quebec clinics between 1978 and 1987 was incomplete.

We consider women's demographic characteristics as of the date of pregnancy termination. The gestation period is the interval (in weeks) between the first day of the last normal menses and the date of the abortion. When the date of the last normal menses is unknown, gestation is based on a clinical estimation by the attending physician.

Our main focus is on three abortion-related rates. The overall abortion rate indicates the number of abortions occurring per 1,000 women aged 15–44 in the population. The rate of repeat abortions is the number occurring per 1,000 women aged 15–44 who have had at least one previous abortion. The first-abortion rate refers to the number of abortions per 1,000 women aged 15–44 who have had no prior abortion.

To calculate the rates of first and repeat abortions for each year, we first had to estimate the number of women in each age-group who had ever had an abortion. The starting point was a special tabulation showing, for each year, the number of women having first and repeat abortions by single year of age. These numbers were adjusted upward to include women whose abortion history was unknown. For each age cohort, the cumulative number of women who had had a first abortion and therefore were at risk of having a repeat abortion was then calculated. For example, the number of 17-year-olds in 1993 at risk of having a repeat abortion was the sum of the number of women younger than 15

*The proportion of women who had had a prior abortion was 10 percentage points higher among clinic patients than among hospital patients in Ontario (41% vs. 31%) and one percentage point higher in Alberta (29% vs. 28%). The proportion who were teenagers or who were never-married differed little.

†We used one-half the number of 17-year-olds on the assumption that on average, half of those having abortions at age 17 would be at risk of having a repeat procedure for only one-half of the year.

who had a first abortion in 1990, the number of 15-year-olds who had a first abortion in 1991, the number of 16-year-olds who had a first abortion in 1992 and one-half the number of 17-year-olds who had a first abortion in 1993.† The result was subtracted from the estimated number of 17-year-old women in the population in 1993 to obtain the number of women of that age who had never had an abortion.

Our estimates do not take into account the mortality rate among women who have had a first abortion; nor do they adjust for the immigration into Canada of women who have had abortions. The resulting biases probably are small and partially offset each other. However, the number of women in the population with abortion experience is somewhat underestimated because some of the "unspecified" abortions reported by hospitals may have been induced, and some unreported clinic abortions are missing from the calculations. Among women undergoing abortions, the proportion with a prior legal abortion will be underestimated to the extent that women fail to report their abortion histories to their physicians, but it will be overestimated to the extent that they report prior illegal abortions.

Results

Prevalence of Repeat Abortions

Overall, 20% of women obtaining hospital abortions between 1975 and 1993 had had at least one previous abortion (Table 1). The

Table 1. Percentage distribution of women obtaining hospital abortions, by number of prior abortions, Canada, 1975–1993 and selected years

Year	N	0	1	2	≥3	Total
1975–1993	1,160,664	80.5	15.5	3.1	0.9	100.0
1975	47,820	91.1	7.8	0.8	0.3	100.0
1979	63,087	85.7	12.2	1.7	0.4	100.0
1984	60,223	79.9	16.1	3.1	0.9	100.0
1989	61,044	75.5	19.0	4.2	1.3	100.0
1991	61,457	72.0	21.3	5.0	1.7	100.0
1993	51,449	70.7	21.8	5.6	1.9	100.0

Note: Excludes women for whom demographic and medical characteristics were not reported and those whose abortion history was unknown.

proportion of abortion patients who were obtaining repeat procedures increased from 9% in 1975 to 29% in 1993; the proportion who had had two or more prior abortions increased from 1% to 8%. (Because of changes in the reporting systems of certain provinces, the proportion of abortion patients whose abortion history was unknown increased from 2–3% during 1975–1987 to 5–7% during the following six years.)

As Table 2 indicates, repeat abortion was most prevalent among women in common-law marriages (28%), those in the age-groups between 25 and 39 (24–27%) and women who had had one previous delivery (26%). In comparison, the proportion obtaining repeat procedures was particularly low among the never-married (19%), 15–19-year-olds (9%) and women with no prior deliveries (17%). Women undergoing repeat procedures terminated their pregnancies at slightly earlier gestations than those having first abortions (not shown). In 1993, for example, 91% of repeat abortions took place within the first 12 weeks of pregnancy, compared with 89% of first abortions.

Table 2. Percentage of abortion patients who had had a previous abortion, by selected characteristics, according to year

Characteristic	1975–1993	1975	1979	1984	1989	1991	1993
Marital status							
Never-married	19.2	8.3	13.2	19.0	23.4	27.5	28.7
Married	19.6	8.8	15.3	20.4	25.4	26.7	29.6
Separated/widowed/divorced	23.6	11.8	18.5	25.6	29.9	31.6	34.7
Common-law	27.6	12.8	17.7	24.8	29.8	32.7	33.9
Age							
15–19	9.0	4.7	7.0	8.7	11.5	14.0	13.7
20–24	20.8	10.7	16.3	20.5	24.7	28.3	29.9
25–29	26.1	11.8	20.1	26.8	30.6	33.9	36.4
30–34	26.7	12.3	18.9	27.4	30.7	34.5	35.4
35–39	24.2	8.5	15.9	23.5	30.7	32.0	35.1
≥40	19.6	6.4	12.0	18.5	25.8	28.9	32.9
No. of previous deliveries							
0	16.7	8.1	12.7	17.1	19.9	23.2	23.5
1	26.1	11.1	18.6	26.3	31.0	34.2	36.2
2	23.8	9.9	17.0	23.8	29.4	32.4	35.0
3	22.3	8.9	14.7	21.8	29.1	33.1	35.1
4	21.8	8.6	20.2	22.9	24.6	27.1	34.0

Note: Excludes those whose abortion history was unknown.

Table 3. Percentage of women who have ever had an abortion, abortion rate, and rates of first and repeat abortions, by age, according to year

Measure	1975	1979	1984	1989	1991	1993
% ever had an abortion	4.1	7.3	11.0	14.0	15.3	16.5
15-19	3.0	3.4	3.4	3.4	3.4	3.6
20-24	6.7	10.4	11.9	11.9	12.6	13.3
25-29	4.8	10.9	16.2	17.6	18.1	18.5
30-34	3.5	7.6	14.8	19.7	20.6	21.5
35-39	3.0	5.5	10.1	17.0	19.8	21.5
≥40	2.1	4.1	6.8	11.3	13.6	16.7
Abortion rate	10.1	12.0	11.1	13.3	14.1	15.3
15-19	14.0	17.1	15.5	19.3	19.5	21.5
20-24	14.3	18.6	18.7	25.1	27.6	30.9
25-29	10.6	12.5	12.3	16.0	17.6	19.5
30-34	7.3	8.2	8.1	10.3	11.5	12.6
35-39	5.3	5.0	5.0	6.4	7.1	7.3
≥40*	2.6	2.2	1.8	2.1	2.2	2.5
First-abortion rate	9.6	11.1	9.9	11.7	12.0	12.9
15-19	13.7	16.5	14.7	17.7	17.3	19.3
20-24	13.7	17.3	16.9	21.5	22.7	25.0
25-29	9.8	11.2	10.7	13.4	14.2	15.2
30-34	6.6	7.2	6.9	8.9	9.5	10.3
35-39	5.0	4.5	4.2	5.3	6.0	6.1
≥40*	2.5	2.1	1.6	1.8	1.9	2.0
Repeat rate	22.1	23.7	20.2	23.4	25.8	27.2
15-19	21.8	34.9	39.7	65.6	79.9	80.9
20-24	22.7	29.1	32.2	51.9	61.8	69.2
25-29	25.8	23.1	20.3	27.7	32.9	38.2
30-34	25.5	20.6	15.0	16.1	19.2	20.7
35-39	15.3	14.6	11.5	11.5	11.4	12.0
≥40*	7.7	6.5	5.0	4.8	4.8	4.9

*Denominator is women aged 40-44.

The prevalence of repeat abortions increased with age up to 30-34 and then decreased. Among abortion patients in their 30s, the proportion having a repeat procedure ranged from 35% of never-married women and 31% of those in common-law relationships to 27% of those who were separated, divorced or widowed and 21% of the currently married (not shown).

In general, the proportion of abortions that were repeat procedures increased among all age-groups for all years shown; the one exception is that the proportion among women aged 15-19 fell slightly between 1991 and 1993. The repeat proportion in 1993 was roughly three times that in 1975 for women younger than 35, four times the 1975 proportion for women aged 35-39 and five times the 1975 proportion for those 40 and older. Similarly, for each characteristic shown in Table 2, the proportion of abortions represented by repeat procedures increased for all time periods.

Rates of First and Repeat Abortions

The proportion of women in the population who have ever had an abortion has increased each year since abortion was legalized, from 4% in 1975 to 11% in 1984 and 17% in 1993 (Table 3). Most of the change resulted from the fact that each year, women had more years of exposure to the possibility of having a legal abortion. In recent years, however, some of the increase

has reflected an increase in the overall abortion rate. For example, the abortion rate among women 20-24 increased from 25.1 per 1,000 in 1989 to 30.9 per 1,000 in 1993, while the proportion who had ever had an abortion rose from 12% to 13%. In 1993, the likelihood that a woman had ever had an abortion increased with women's age up to age 35. Among older women, however, the likelihood fell, no doubt because when these women were teenagers, legal abortion had been impossible or difficult to obtain.

Table 3 also indicates that a woman who has had one or more abortions is more likely to have another one in a given year than a woman who has never had an abortion is to have a first. In 1993, when the overall abortion rate was 15.3 per 1,000 women of reproductive age, the rate was 27.2 per 1,000 women who had had a previous abortion and 12.9 per 1,000 women who had had no prior abortions. This pattern is evident at all ages, but the difference is especially great among teenagers: The 1993 repeat rate among women aged 15-19 was more than four times the first-abortion rate for this age-group (80.9 per 1,000 vs. 19.3 per 1,000). Among women in other age-groups, the repeat rate was 2-3 times the first-abortion rate. The repeat rate was highest for teenagers and then dropped sharply with age, while the first-abortion rate peaked among women aged 20-24.

All three rates rose between 1975 and 1979, fell slightly until 1984, then resumed their rise. Between 1975 and 1993, the increase was greater for the overall abortion rate (51%) than for the first-abortion rate (34%) or the repeat rate (23%). The trends among the age-specific overall and first-abortion rates were similar, with the largest increase among women 20-24; among women 40 and older, the 1993 rates were somewhat lower than those for 1975. Changes over time were much greater in the age-specific rates of repeat abortion. The repeat rate more than tripled among women 15-19 and 20-24, while it fell substantially among women aged 30 and older.

The total first-abortion rate, shown below for 1975-1993, reflects the number of women per 1,000 who would have an abortion by age 45 if the rates prevalent in each year continued throughout their reproductive lifetimes.

Year	Rate
1975	245
1979	272
1984	246
1989	301
1991	311
1993	336

Thus, if the 1993 rate prevails, 34% of all women will have an abortion at some point in their lives. (By comparison, the proportion for U.S. women was estimated to be 43% in 1992.⁵)

International Context

The increased prevalence of repeat abortions in Canada after liberalization of the abortion law was similar to the experience in other countries where abortion laws were liberalized at around the same time. For example, in England and Wales, the proportion of abortions represented by repeat procedures increased from 7% in 1975 to 18% in 1987; in the United States, it rose from 18% in 1975 to 42% in 1987 (see Table 4).

These changes are explained in part by the fact that as the number of women in the population who have had an abortion increases, the number at risk of having a repeat procedure rises. For the first 30 years after liberalization of an abortion law, the number of women of reproductive age with abortion experience can be expected to grow each year. Then, when all women of childbearing age have had access to legal abortion services throughout their reproductive lives, the number should stabilize (assuming that the overall abortion rate is stable). In Hungary, for example, where abortion on request be-

came available in 1956, the proportion of women who had undergone an abortion stabilized and the proportion obtaining repeat abortions leveled off and began to fall in the 1970s and 1980s.⁶

In addition, the proportion of abortions that are repeat procedures is affected by the abortion rate because the higher the rate, the more likely it is that a woman in the population will have had an abortion. It is therefore inevitable that among the countries listed in Table 4, the proportion of abortions that are repeat procedures will be higher in Czechoslovakia, Denmark, Hungary, Norway, Sweden and the United States than in Canada, England and Wales, the Netherlands and New Zealand.⁷

Discussion

The Canadian data set has limitations. Data are absent on the characteristics of 29% of women known to have had legal induced abortions; we assumed that these women were similar to the women for whom data were available. We might have underestimated the rate of repeat abortions if a large number of women failed to report a previous abortion. On the other hand, we may have overestimated the rate if our estimate of the number of women in the population who have had abortions is low because some of the abortions that were coded "unspecified" were induced or other induced abortions were unreported. Nevertheless, the observed rates are of a magnitude that they would be unlikely to be changed substantially by errors in the data.

Women who have undergone an abortion are more likely to have another than women who have never had an abortion are to have a first. In Canada in 1993, the rate of repeat abortions was more than twice the first-abortion rate (27.2 per 1,000 vs. 12.9 per 1,000). In the United States in 1982, the repeat rate is estimated at 60 per 1,000 and the first-abortion rate was 22 per 1,000.⁸ The higher repeat rate occurs in spite of evidence that contraceptive use improves after an abortion.⁹

Several factors place women who have had an abortion at increased risk of having another: They are sexually active; they have a higher frequency of intercourse and higher fecundity than other sexually active women; they have access to abortion services; they are willing to end some or all unintended pregnancies by abortion; they tend to have difficulty using contraceptives effectively; and they are concentrated in population subgroups with high rates of unintended pregnancy and abortion, such as low-income minority groups.¹⁰

Between 1975 and 1993, the rate of repeat abortions among women 15–19 in Canada increased by 271%, with much of the increase occurring between 1984 and 1989; by contrast, the first-abortion rate for this age-group increased by only 41% during this period. The high level and striking rise in the repeat rate indicates that a subgroup of the teenage population is increasingly relying on abortion to avoid undesired childbearing. This subgroup may include women from socially disadvantaged subgroups. A similar increase, though less extreme, is evident among women aged 20–24. These results suggest that more intensive contraceptive counseling and services should be provided to first-time abortion patients who are young or belong to other high-risk groups.

It might be useful to make young women obtaining abortions aware of their high probability of having another abortion within a few years. If the 1993 repeat rate among women aged 15–19 were to prevail, 8% of Canadian teenagers who had a first abortion would have another abortion within one year; over four years, 32% would have a repeat procedure. However, the repeat rate decreases with age and some teenagers have two or more repeat abortions, so the proportion would actually be slightly lower: Probably about one-fourth have a repeat abortion within four years. In a population with a high abortion rate, such as the United States, the proportion would be even higher.

Even though abortions are increasingly occurring among women in high-risk groups, it appears that few if any women are long-term users of abortion as a primary method of birth control. A fecund, sexually active woman relying only on abortion would need to have 35 abortions during her lifetime if she wanted no children.¹¹ Such women would account for a large proportion of abortions. In Canada, however, fewer than 2% of abortion patients in 1993 had had three or more previous abortions.

Among women 30 and older, the rate of repeat abortions first fell and then rose again during the period under study, but in 1993, it remained well below the 1975 level. The high rate in the first years after legalization reflects the disproportionate number of women having a first abortion who were at very high risk of having another one. Over time, the pool of women with abortion experience acquired greater numbers of low-risk women; since these women were unlikely to have a second abortion, the repeat rate fell. After 1984, the repeat rate for women 25–34 rose again be-

Table 4. Abortion rate per 1,000 women aged 15–44 and percentage of abortion patients obtaining repeat procedures, selected countries and years

Country and year	Abortion rate	% repeat abortions
Canada*		
1975	10.1	8.9
1987	10.8	22.0
Czechoslovakia		
1975	25.9	u
1987	46.7	42.2
Denmark		
1986	17.7	36.5
1987	18.3	38.0
England and Wales†		
1975	11.2	6.5
1987	14.2	17.7
France‡		
1979	14.1	11.0
1986	13.3	19.0
Hungary		
1975	41.9	54.4
1987	38.2	48.9
Netherlands†		
1981	5.2	17.0
1986	5.3	21.6
New Zealand		
1976	7.1	6.7
1987	11.4	17.4
Norway		
1979	19.7	21.1
1987	16.8	26.8
Sweden		
1975	20.2	18.8
1987	19.8	34.7
United States		
1975	21.7	18.1
1987	28.0	42.2

*Data shown only through 1987 for comparability with other countries. †Residents only. ‡Reporting incomplete. Note: u=unavailable. Sources: all countries except Canada and United States, 1987—S.K. Henshaw and E. Morrow, 1990 (see reference 2); United States, 1987—S.K. Henshaw and J. Van Vort, *Abortion Factbook, 1992 Edition: Readings, Trends, and State and Local Data to 1988*, Alan Guttmacher Institute, New York, 1992, pp. 172–181.

cause of an increase in the overall abortion rate and possibly because of increased recourse to abortion in certain subgroups, as among younger women. During the period under study, the repeat rate for women older than 40 fell by 36%, probably for the same reasons as the early drop among younger women, and also because of increased use of contraceptive sterilization.

A number of researchers in Canada, the United States, Europe and Asia have studied repeat abortion to identify characteristics that distinguish women having a repeat procedure from those undergoing a first abortion. The most consistent correlates have been factors directly related to exposure to risk, including age, frequency of sexual intercourse and age at first intercourse.¹² Similarly, women in socioeconomic groups

that have high rates of unintended pregnancy and abortion will have high rates of repeat abortion. One study found that women of low socioeconomic status were significantly more likely to have repeat abortions than were women of higher socioeconomic status.¹³ In the Canadian data, previously married women and women in common-law relationships had an above-average proportion of repeat abortions. U.S. data also show relatively high abortion rates among cohabitating women,¹⁴ who may lack marital stability and the social and economic supports needed for raising children.

Thus, the study of repeat abortion results in two striking conclusions. First, a small population of women are at especially high risk of unintended pregnancy and abortion, and account for many repeat abortions. At the same time, a still substantial level of risk extends to a much larger part of the population, such that at current rates, more than 30% of all Canadian women will have at least one abortion some time in their lives.

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