The relative rate ratios for minors aged 17 years and 10 months and 17 years and 11 months indicate a 4% reduction in the rate per 1,000 population, and a 8% reduction in the rate per 1,000 pregnancies, when the outcomes of 18-year-olds serve as the counterfactual. Neither of these results is statistically significant, however (p=.70 and p=.50, respectively). Because the prelaw to postlaw decline was somewhat smaller among 18-year-olds than among minors aged 17 years and 10–11 months, the relative rate ratios for younger teenagers are slightly altered. For example, the decline in the second-trimester abortion rate among minors aged 17 years and 6–7 months becomes larger (21% vs. 18%), and the rise in the same outcome among minors aged 17 years and 8–9 months is smaller (16% vs. 21%). However, these differences are not statistically significant.

DISCUSSION

Our findings suggest that minors aged 17 years and 8–9 months are the group most likely to delay an abortion until age 18 in response to Texas's parental notification statute. The evidence further suggests that such delay in the timing of abortion leads to an increase in the number of second-trimester abortions among these teenagers. We found no evidence of an increase in the exposure to the risk of second-trimester abortion among younger 17-year-olds, for whom postponing the abortion until age 18 is not feasible.

Study Strengths

Our research design has several strengths. First, we narrow the age difference between those who are subject to the law and those who are not in order to improve the internal validity of the study design. Second, we determine which teenagers are subject to the law using their age at conception instead of their age at the time of pregnancy resolution. Third, we focus on the behavior of 17-year-olds, who account for the largest proportion of pregnancies among minors and therefore are an important group from a policy standpoint. Finally, Texas is a populous state with a large number of pregnancies, which gives us the statistical power necessary for this type of analysis.

We limit all analyses to abortions occurring among Texas residents in Texas. We are confident that cross-state travel by minors who want to avoid parental involvement in Texas does not pose a problem for our analysis. Abortion statistics collected by the health departments of neighboring states indicate that very few minors from Texas obtained abortions outside Texas in response to the parental notification law—for example, in 2000, only five in Oklahoma, 13 in New Mexico and five in Arkansas. Data on abortions that Texas residents obtained in Louisiana are not available; however, Louisiana has had a parental consent law in effect since 1978 that is more restrictive than the Texas law, so it is an unlikely destination for minors seeking to avoid parental involvement in Texas.

Abortion was illegal in Mexico during our study period (it still largely is). However, if it is easier for minors to obtain an illegal abortion in Mexico than it is for them to circumvent the parental notification requirement in Texas, then minors may have sought abortions there after 2000. Abortion data from Mexico are not available. However, we are reasonably confident that travel to Mexico for an illegal abortion among minors is not prevalent, and therefore we have an accurate count of second-trimester abortions to Texas minors. The group we identified as the one responding to the law by delaying the abortion until age 18 is minors who conceive at ages 17 years and 8–9 months. If these teenagers obtain an abortion after the 12th week of gestation, they have already turned 18, and are not subject to Texas's law. At that point, they can get a legal abortion in Texas without parental involvement, and therefore have no incentive to go to Mexico for an abortion. On the other hand, if minors who conceive at 17 years and 8–9 months seek an abortion in Mexico before they turn 18, this behavior would affect our estimates of the late-term abortion rate as measured per 1,000 pregnancies, since we would not count these minors’ pregnancies. Undercounting the pregnancies in the postlaw period would bias our estimates of the effect.