

## Reasons given for having abortions in the United States

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**Summary:** This report reviews available statistics regarding reasons given for obtaining abortions in the United States, including surveys by the Alan Guttmacher Institute and data from seven state health/statistics agencies that report relevant statistics (Arizona, Florida, Louisiana, Minnesota, Nebraska, South Dakota, and Utah). The official data imply that AGI claims regarding "hard case" abortions are inflated by roughly a factor of three. Actual percentage of U.S. abortions in "hard cases" are estimated as follows: in cases of rape, 0.3%; in cases of incest, 0.03%; in cases of risk to maternal life, 0.1%; in cases of risk to maternal health, 0.8%; and in cases of fetal health issues, 0.5%. About 98.3% of abortions in the United States are elective, including socio-economic reasons or for birth control. This includes perhaps 30% for primarily economic reasons and possibly 0.1% each for sex selection and selective reduction of multifetal pregnancies.

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**Introduction:** The reasons given for having abortions are relevant to the policy debate on the abortion issue. In many countries, abortions are permissible only for limited reasons.[1] In the United States, abortion on demand and for any reason is the existing state of law (with a few limitations in some states[2]). As debate continues regarding this practice, advocates of unrestrained abortion often cite the "hard cases"--cases of rape, incest, life or health of the mother or baby--in defending access to abortion. It is widely acknowledged that such cases are rare; however, available data suggest that some commonly cited figures are exaggerated.

Further, the prevailing preferences of the American electorate are often cited in regard to U.S. abortion legislation. Some will claim, for example, that most Americans support legal abortion. While majority opinion is irrelevant to issues of constitutionally stipulated human rights (regardless of what position on abortion one thinks is the one consistent with human rights), the claim itself is a half-truth. Most Americans would oppose banning abortions for hard cases, but at the same time most Americans would support limits on elective abortions, e.g. abortions for convenience or for sex selection.

This article will review some available data that addresses the reasons cited for abortions in the United States. First, survey-based data from the Alan Guttmacher Institute is reviewed, as it represented the most frequently cited data. Two specific issues, abortions in cases of rape and abortions for sex selection, are examined. Next, data on reasons for abortions from state agencies and other official sources is presented; this data represents an often overlooked statistical resource on the issue. Although reasons for "partial-birth" abortion are fundamentally different than those for abortions in general, available data is examined as well. Finally, the available statistical data is used to quantify reasons for abortions in the United States.

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**AGI studies:** The Alan Guttmacher Institute (AGI) has published several studies examining reasons for abortions in the United States. Two studies conducted in 1987 and 2004 surveyed a total of 3,900 women obtaining abortions, of whom 2,981 provided information. A third survey conducted in 2000-2001 surveyed abortion seekers about contraceptive use; this study provided some limited data relating to reasons for abortions for 10,683 women. These studies are discussed in chronological order.

The 1987 AGI study (published in 1988)[3] surveyed 1,900 women who had abortions. The results of this survey are among the most commonly cited figures regarding reasons for abortions in the United States. The 1,773 women who responded gave an average of 3.7 reasons from the list, with the most important reasons cited by respondents tabulated below. It should be noted that only rounded percentages, not raw numbers, were provided; an AGI review article in 1998 [4] cited the 1988 study but gave slightly different figures, shown below in parenthesis (the parenthetical figure for rape and incest is a range of uncertainty derived from breakdowns in the 1988 report).

### REASONS GIVEN FOR ABORTIONS: AGI SURVEY, 1987 [3, 4]

reason	% of abortions	
rape or incest	1	(0.4-1.3)
mother has health problems	3	(2.8)
possible fetal health problems	3	(3.3)
unready for responsibility	21	
is too immature or young to have child	11	(12.2)
woman's parents want her to have abortion	<0.5	
has problems with relationship or wants to avoid single parenthood	12	(14.1)
husband or partner wants her to have abortion	1	
has all the children she wanted or all children are grown	8	(7.9)
can't afford baby now	21	(21.3)
concerned about how having baby would change her life	16	
doesn't want others to know she had relations or is pregnant	1	

other	3
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Another AGI study[5], conducted in 2000-2001, examined contraceptive use but provides some information relating to reasons for abortion. Some data from this survey of 10,683 women obtaining abortions is given below:

**REASONS GIVEN FOR ABORTIONS: AGI SURVEY, 2000-2001 [5]**

reason or situation	number	% of abortions
not using contraception	4,957	46.40
forced to have relations	~64	0.6
using contraception	5,726	53.60
contraceptive failed despite proper use	~1,808	16.9
total	10,683	100

In this survey, 0.6% reported being forced to have relations (although a figure as high as 0.8% is possible depending on data breakdown). It is also interesting to note that 17% of abortions were for pregnancies following "proper" use of contraception. This would tend to undermine the claims regarding the efficacy of contraception methods, something highly promoted by groups such as Planned Parenthood.

An AGI study published in 2005 [6] was modeled after the 1987 study, providing an update to that work. This survey was conducted from December 2003 to March 2004; of approximately 2,000 women obtaining abortions who were surveyed, 1,209 completed questionnaires. As with the 1987, only rounded percentages as opposed to raw numbers were reported. Again, respondents could give multiple reasons, and the median number of reasons given was four. The table below gives reported percentages for the most important reason and for all reasons cited.

**REASONS GIVEN FOR ABORTIONS: AGI SURVEY, 2004 [6]**

reason	% of abortions, most important reason	% of abortions, all reasons
rape	<0.5	(1)
incest		(<0.5)
mother has health problems	4	(12)
possible fetal health problems	3	(13)
unready	25	(32)
is too immature or young to have child	7	(22)
woman's parents want her to have abortion	<0.5	(6)
has problems with relationship or wants to avoid single parenthood	8	(48)
husband or partner wants her to have abortion	<0.5	(14)
has all the children she wanted or all children are grown	19	(38)
can't afford baby now	23	(73)
--unmarried		(42)
--student or planning to study		(34)
--can't afford baby and child care		(28)
--can't afford basic life needs		(23)
--unemployed		(22)
--can't leave job to care for baby		(21)
--would have to find new place to live		(19)
--not enough support from husband/partner		(14)
--husband/partner unemployed		(12)
--currently on welfare or public assistance		(8)
concerned about how having baby would change her life		(74)
--would interfere with education plans	4	(38)
--would interfere with career plans		(38)
--would interfere with care of children or dependents		(32)
doesn't want others to know she had relations or is pregnant	<0.5	(25)

other	6	
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Recent AGI literature has given figures of abortions following rape or incest. For example, an April 2005 information sheet [7] states that about 13,000 women have abortions following rape or incest. This is 1.0% of AGI-estimated annual abortions in 2000-2002. This figure appears to be derived from the 1987 survey percentage (or from preliminary results of the 2004 survey).

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**Issues with rape-related statistics:** The AGI-based figure of 1% of abortions for cases of rape or incest is widely cited. However, it is the product of a limited survey by an organization with a stated objective of advocating unlimited access to abortion services. It is thus desirable to seek an independent source of such figures, such as that provided by the state reported statistics reviewed below. Evaluating this claim also involves issues of reliability of rape-related statistics.

If the AGI figure for 1987 is correct, it would imply that 15,600 abortions in 1987 were for such cases.[8] Since the FBI only reported 91,111 forcible rapes in the U.S. in that year[9], this would imply that one out of six rapes resulted in pregnancy. This is a higher fraction than appears to be supported by medical research--although this ratio does not yet account for underreporting of rapes.

According to the FBI, reported annual numbers of forcible rapes in the United States rose from about 90,000 in the mid 1980s to a peak of 109,062 in 1992, then dropped to about 89,000-95,000 for the years 1998-2009 and to 84,767 in 2010 [9]. A 2012 Department of Justice report [10] estimated rates of crime underreporting for 1994-2010; the fraction of unreported rapes and sexual assaults for this period ranged from 44% to 77%, or an average of 64%. These figures are not strictly applicable to forcible rape but provide a useful estimate. Further, these figures carry a high degree of uncertainty, as they imply annual figures for rapes (reported plus unreported) ranging from 168,000 to 424,000 over this period, with large year-to-year variability. Nonetheless, these figures may be used to estimate average annual figures for 1994-2010 as 93,000 reported forcible rapes and 184,000 more unreported, or 277,000 total per year.

Some sources claim much larger unreported numbers. Stewart and Trussell [11] cite 333,000 rapes and sexual assaults reported in 1998, and additionally cite a National Women's Study which claimed 683,000 rapes in 1992. The latter figure would mean 5.3 unreported rapes for every reported rape. The wide range in estimates of unreported rapes is evidence of the problem of quantifying these figures.

Another issue is the frequency of rape-related pregnancy. Some sources claim very low frequencies, citing medical studies, and conclude that the total number of pregnancies resulting from rape each year is on the order of 200-500.[12] Others obtain somewhat higher frequencies. Holmes et al. [13] surveyed 4,008 women and found a rate of pregnancy following rape of 5%. Additionally, of 34 cases of pregnancy after rape, they found 17 (50%) had an abortion, 11 (32%) kept the baby, 2 (6%) gave the baby up for adoption, and 4 (12%) miscarried.

Taking the 2005-2010 average annual reported rapes of 90,000 per year and assuming 5% result in pregnancy and 50% of these are aborted, this implies 4,500 pregnancies per year following rape of which 2,250 are aborted. The most extreme claimed rates of underreporting are necessary to bring this in line with AGI's claim of 13,000 rape-related abortions per year. Even higher levels of rape-related pregnancies have been claimed: Stewart and Trussell [11] cite the previously mentioned National Women's Study claiming 32,000 per year in 1992, and this figure is repeated by Holmes et al. [13] and by an AGI article in 2002 [14]. Stewart and Trussell extrapolate this to 25,000 per year in 1998 merely by considering lower crime rates. These higher rates, while somewhat dubious, are required to support the AGI claim of 1% of abortions for rape.

However, adopting the DOJ underreporting figures, average implied annual figures for 2005-2010 are as follows:

- 90,300 reported rapes (FBI figures);
- 265,000 total rapes, reported and unreported (using DOJ figures);
- 6,600 abortions in cases of rape (using Holmes et al. figures);
- 1,218,000 abortions (AGI figures);
- 0.54% of abortions in cases of rape.

Note that these statistical approaches carry large uncertainties. Circumstances surrounding both rape and abortion prompt degrees of both underreporting and inaccurate reporting. Regardless of the actual rate of reporting, it is widely agreed that large numbers of rapes go unreported to authorities. Available information on reasons for abortion are generally self-reported by the abortion seeker and thus not verifiable. Some women seeking abortion might conceal rape as the actual reason. Alternately, some women might falsely claim rape as a reason, for example to obtain funding for an abortion (this appears to be an issue with federally funded abortions as discussed below). Thus, rape-related abortion data interpretation is hampered by the particularly traumatic circumstances of such cases. Nonetheless, it will be seen below that the larger sampling in states that report figures for rape-related abortions give consistent results, supporting the reasoning for lower figures than the AGI figures.

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**Abortions for sex selection:** While not a major issue in the United States, abortions for the purpose of selecting the sex of the child are quite common in Asia, where they are generally used to abort female fetuses. Several Asian countries, including the People's Republic of China, India, and South Korea, are beginning to show significant demographic impacts resulting from such practices. India and the PRC have both been compelled to legislate against sex-selection abortions despite their otherwise broad support of abortion practice.[15]

Regarding the United States, in 1998 *JAMA* published a study[16] reporting a 0.2% decrease in the ratio of male to female live births from 1970 to 1990. The authors of the 1998 study discuss a variety of health factors that could influence this ratio. Data from the CDC in 2002[17] suggested that the decrease in the male/female birth ratio was 0.3% from 1970 to 2000. In 2005 the CDC completed a more detailed analysis[18] of trends in the U.S. male/female birth ratio. The authors identified several up or down trends in the ratio between 1940 and 2002, including a 0.6% decline in the male/female birth ratio from 1970 to 2002. They analyzed possible factors (age of mother, birth order, ethnicity) and noted additional parental/environmental characteristics that naturally influence the birth ratio. They did note that family preference can affect the birth ratio (although they did not explicitly point out that this is via such means as sex selection abortions) and that this does affect it in some countries, but do not report any indication that it is a factor in the United States. The historical variation in U.S. male/female birth ratio is within the range observed in connection to biological influences (e.g. parental/environmental).

Nonetheless, of reported trends in male/female birth ratio by ethnic group, the 2005 CDC study finds the greatest increase from 1970 to 2002 among children of Chinese and Japanese ethnicity: a trend of an increase of 0.022 for Chinese and 0.013 Japanese children, respectively. The result is that births of Chinese ethnicity have the highest average male/female ratio in 1998-2002, 1.076 versus the national average of 1.048.[18]

The overall change in the male/female birth ratio from 1970 to 2002 represents about 13,000 fewer annual male births by 2002, which would correspond to about 1% of abortions.[19] Still, this is too small a change in sex ratio to be distinguished among other potential causes for the population at large. Some observers suggest that this is an issue in some ethnic groups[15]. Were the change in birth ratio among Asian Americans to be attributed to abortions, it would represent on the order of 1,000-2,000 abortions per year, or about 0.1% of abortions. This may be considered an upper limit.

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**Abortions for ART selective reduction:** In connection with the increased use of assisted reproductive technologies (ART) is increased use of abortion to selectively reduce the number of fetuses in multifetal pregnancies. ART births represented 1.65% of US live births in 2012 [38]. Evans et al. [39] discuss relative changes in the number of twin and higher-multiple pregnancies from 1989 to 2011. Much of these changes are attributed to increased use of ART and changes in plurality of ART births, both due to selection reduction abortions and to changes in numbers of ART-implanted embryos [40]. The post-2003 reductions in multiple births reported by [39] correspond to differences of 3,500-7,000 fetuses per year, which is partly attributable to selective reductions. These figures then suggest upper limits of 0.3-0.7% on selective reduction abortions among all abortions. Stone et al. [41] report on 1,000 selective reduction abortions at a single center from 1999-2006, about 120/year, relative to 2,000 annual in-vitro fertilization cycles at the same center [42]. Such figures scaled to the annual number of ART pregnancies implies selective reduction abortions are about 0.4% of all abortions.

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**State statistics:** In the United States, limited official statistics are available. Abortion reporting varies significantly from state to state. Seven states report data on the reasons given for obtaining abortions (with varying definitions and levels of detail). These figures are self-reported by women obtaining abortions, as in the case of the AGI studies discussed above. However, they are independent data and involve a larger sample. Below are results for these states--Arizona, Florida, Louisiana, Minnesota, Nebraska, South Dakota, and Utah:

**REASONS GIVEN FOR ABORTIONS: ARIZONA, 1985-2013 [20]**

reason	1980	1981	1982	1983	1984	1985	1986	1987	1988	1989	1990	1991	1992	1993	1994	1995	1996	1997
medical	18	33	15	14	23	16	7	11	11	7	10	3	6	11	9	17	10	6
elective	8,961	10,193	10,511	13,328	14,611	15,274	14,300	15,228	14,068	11,078	13,075	13,504	12,709	11,739	11,891	10,588	10,768	11,012
unknown	299	347	2,013	322	240	314	148	376	271	490	805	375	178	102	360	1,133	90	3
total	9,278	10,573	12,539	13,664	14,874	15,604	14,455	15,615	14,350	11,575	13,890	13,882	12,893	11,852	12,260	11,738	10,868	11,021

reason	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2012	2013	total 1980-2013	% of abortions	% of abortions, known reasons
medical	15	10	21	43	207	78	8	2	4	19	119	217	983	0.26	0.29
elective	9,614	8,210	9,910	9,602	10,770	9,987	10,436	10,482	10,377	10,017	0	0	337,816	89.80	99.71
unknown	2	6	466	449	1,324	381	62	14	15	9	13,221	13,184	10,992	9.94	N/A
total	9,631	8,226	10,397	10,094	12,301	10,446	10,506	10,486	10,396	10,045	13,340	13,401	376,184	100.00	100.00

**REASONS GIVEN FOR ABORTIONS: FLORIDA, 1998-2008 [21]**

reason	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	Jan-Jun 2008	total Jan 1998-Jun 2008	% of abortions	% of abortions, known reason
physical condition	401	346	453	350	439	514	460	514	649	527	147	4,800	0.51	0.51
mental condition	159	150	143	109	72	80	19	54	144	86	9	1,025	0.11	0.11
abnormal fetus	470	474	430	454	482	457	501	606	676	463	240	5,253	0.56	0.56
personal choice	80,889	82,589	87,199	84,343	86,445	88,409	90,315	90,866	93,541	90,322	46,283	921,201	98.30	98.30
other	416	412	330	314	521	535	411	473	574	556	303	4,845	0.52	0.52
unknown	0	0	8	19	5	0	4	0	2	0	0	38	0.00	N/A
total	82,335	83,971	88,563	85,589	87,964	89,995	91,710	92,513	95,586	91,954	46,982	937,162	100.00	100.00

**REASONS GIVEN FOR ABORTIONS: FLORIDA, 2008-2009 [22]**

reason	Jul-Dec 2008	2009	total Jun 2008-Dec 2009	% of abortions
rape	1,407	866	2,273	1.85
incest	45	0	45	0.04
life of mother	21	58	79	0.06
physical health of mother	60	139	199	0.16
emotional/psychological health of mother	41	131	172	0.14
serious fetal defect/deformity/abnormality	271	517	788	0.64
socio-economic reasons	3,320	6,580	9,900	8.08
elective	35,373	73,747	109,120	89.02
total	40,538	82,038	122,576	100.00

## REASONS GIVEN FOR ABORTIONS: LOUISIANA, 1996-2012 [23]

reason	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	total 1996- 2012	% aboi
rape or incest	4	4	3	1	1	1	0	0	1	1	0	0	0	0	2	14	23	55	0.03
physical health	8	17	19	16	14	8	3	1	9	15	3	1	0	1	9	98	192	414	0.25
mental health	392	415	164	77	140	52	37	27	1	31	6	7	4	7	59	58	89	1,566	0.95
risk of fetal deformity	9	21	7	9	13	10	7	0	2	5	2	1	0	2	1	53	54	196	0.12
other	114	421	250	258	192	143	18	10	182	157	0	0	0	31	695	4,096	8,867	15,434	9.32
unknown	11,357	10,861	10,908	11,647	11,024	10,718	10,386	10,604	11,029	8,351	6,193	6,824	6,813	8,126	8,104	4,636	0	147,581	89.1
total	11,884	11,739	11,351	12,008	11,384	10,932	10,451	10,642	11,224	8,860	6,204	6,833	6,817	8,167	8,870	8,955	9,225	165,546	100.

## REASONS GIVEN FOR ABORTIONS: MINNESOTA, 1998-2014 [24]

reason*	Oct- Dec 1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	1 Oc De
rape	30	113	124	98	81	75	69	71	90	91	76	58	65	51	69	62	74	1,2
incest	2	3	6	7	14	9	6	6	12	7	12	17	8	11	18	18	13	16
emotional health	270	653	793	859	844	1,001	1,019	1,206	699	828	848	615	748	873	776	737	747	13,
physical health	149	510	584	636	622	844	778	808	588	651	647	487	492	486	564	542	595	9,9
pregnancy will impair major bodily function	22	49	44	34	30	27	31	20	30	21	34	42	29	46	43	41	37	580
fetal anomalies	86	177	210	158	113	147	133	129	162	155	150	160	182	204	171	193	188	2,7
economic reasons	734	1,601	2,379	2,512	2,546	2,499	2,647	4,091	5,020	5,148	4,254	3,886	3,727	3,796	2,924	2,725	2,712	53,
does not want children now	1,215	4,449	5,618	6,482	6,080	5,655	5,576	8,281	9,598	10,190	9,368	7,881	7,284	7,431	7,191	6,852	6,998	110
other elective*	779	2,854	3,315	3,227	2,239	2,479	2,510	3,536	3,145	3,334	2,891	2,720	2,374	2,374	788	554	582	39,
--single parent		749	788	724	359	802	752	793	791	1,024	941	841	825	650	103	2	4	10,
--to pursue educational goals		551	754	872	419	500	270	838	616	886	691	609	358	501	83	15	15	7,9
--already have enough children		362	406	369	368	351	230	434	485	341	346	383	567	333	79	40	38	5,1
--relationship issues		307	490	498	356	335	182	417	318	364	270	234	180	250	66	49	49	4,3
--other		885	1,604	1,294	1,009	1,109	1,242	1,558	1,413	1,519	1,529	2,264	1,026	1,052	671	458	478	19,
unknown	1,371	6,674	4,767	4,618	5,054	5,460	5,443	2,310	1,681	1,280	1,440	2,161	2,144	1,440	1,818	1,472	1,594	50,
total	3,508	14,342	14,477	14,833	14,186	14,174	13,791	13,362	14,065	13,843	12,948	12,388	11,505	11,071	10,701	9,903	10,123	209

Note: The Minnesota questionnaire allows respondents to indicate more than one reason. The category identified as "other elective" includes other reasons (some listed) from which respondents may select more than one.

## REASONS GIVEN FOR ABORTIONS: NEBRASKA, 2000-2014 [25]

reason*	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	total 2000-2014	% of abortions	% of abortions, known reason
rape	35	18	11	10	18	10	6	5	8	11	20	5	8	10	4	179	0.40	0.40
incest	0	0	1	1	1	0	0	0	0	0	0	2	0	0	0	5	0.01	0.01
maternal life endangered	2	6	1	6	8	3	1	2	1	3	14	3	8	16	7	81	0.18	0.18
maternal physical health	33	48	45	160	85	67	45	2	8	33	67	17	20	44	30	704	1.56	1.58
mental health	654	691	667	733	316	14	1	1	0	7	28	5	10	14	16	3,157	7.01	7.07
fetal anomaly	16	25	17	35	11	8	25	24	8	26	30	11	19	19	16	290	0.64	0.65
socio-economic	2,878	2,550	2,567	3,096	3,240	2,853	2,854	2,447	2,389	1,523	1,284	869	933	719	756	30,958	68.74	69.33
contraceptive failure	664	750	687	766	1,047	734	619	623	566	389	351	446	353	352	325	8,672	19.26	19.42
no contraception used	808	850	766	1,185	850	831	852	1,113	1,573	1,343	1,109	1,232	954	1,187	811	15,464	34.34	34.63
unknown	0	0	0	0	0	0	0	0	0	0	0	0	0	15	368	383	0.85	N/A
total	4,178	3,982	3,775	3,990	3,584	3,173	2,927	2,481	2,813	2,551	2,464	2,372	2,299	2,177	2,270	45,036	100.00	100.00

Note: The Nebraska questionnaire allows respondents to indicate multiple reasons, so numbers add to more than total abortions.

#### REASONS GIVEN FOR ABORTIONS: SOUTH DAKOTA, 1999-2014 [26]

reason*	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	total 1999-2014	% of abortions	% of abortion known reason
rape or incest	12	16	14	20	21	23	9	3	12	10	8	6	12	16	7	4	193	1.61	1.63
substantial/irreversible bodily impairment	7	9	19	16	16	29	22	11	12	20	24	14	20	14	20	34	287	2.40	2.43
emotional health	28	51	84	94	104	119	58	16	37	52	60	48	37	57	53	64	962	8.04	8.15
fetal abnormality*					6	16	14	16		14	12	7	7	3	3	10	108	0.90	0.91
can't afford child	176	233	353	384	366	397	205	160	237	361	386	329	299	317	290	263	4,756	39.74	40.27
doesn't want child	459	503	547	536	525	576	640	633	588	546	492	487	363	401	393	345	8,034	67.12	68.03
other	110	139	144	103	124	127	103	48	54	79	77	57	63	74	117	115	1,534	12.82	12.99
unknown	15	41	34	27	33	5	2	0	0	0	1	0	0	0	1	0	159	1.33	N/A
total	740	878	895	826	819	814	805	748	707	848	769	737	597	634	601	551	11,969	100.00	100.00

Note: The South Dakota questionnaire allows respondents to indicate multiple reasons, so numbers add to more than total abortions. Number of abortions for reason of fetal abnormality is not reported, but number of abortions where a fetal abnormality was reported present (regardless of the reason for the abortion) is provided.

#### REASONS GIVEN FOR ABORTIONS: UTAH, 1996-2014 [27]

reason	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	total 1996-2014
rape	38	39	28	40	44	30	11	3	4	2	1	1	3	2	3					249
incest	2	3	1	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0		7
maternal life endangered	19	10	5	6	8	6	11	10	12	22	18	22	30	25	16	20	14	8	13	275
fetal malformation	21	17	5	8	7	20	8	8	11	13	32	20	33	34	49	42	27	27	35	417
HIV positive	0	0	0	0	0	0	0	1	0	1	0	0	1	0	0	0	0	0	0	3
therapeutic	3,154	3,054	3,184	3,092	3,206	3,289	3,251	3,304	3,327	3,220	3,207	3,201	2,970	2,630	2,761	2,465	2,596	2,831	2,372	57,114
elective	3	2	0	0	4	25	13	4	17	19	181	268	473	575	617	546	378	14	333	3,472
other	39	2	1	2	0	0	0	0	0	1	4	4	0	2	0					55

## Reasons given for having abortions in the United States

unknown	17	13	13	11	10	2	6	8	8	1	1	0	0	2	0	9	3	13	14	131
total	3,293	3,140	3,237	3,160	3,279	3,372	3,300	3,338	3,379	3,279	3,444	3,516	3,510	3,270	3,446	3,081	3,018	2,893	2,767	61,722

Together, the available statistics from these seven states represent 1,929,415 abortions from 1980 to 2014, of which reasons were provided in 1,692,999 cases (this is a sample 124 times larger than the total for the three AGI studies cited above). The definitions and reporting of reasons vary from state to state, and the completeness and accuracy of the reporting has varied over time. Further, it should be noted that these states are not necessarily representative of the nation as a whole; some implications of this are analyzed below.

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**Federally-funded abortions:** Federal Medicaid funds may currently be used to pay for abortions in cases of rape, incest, or threat to the mother's life. This has been the case since 1977, when the Hyde Amendment took effect: federal Medicaid-funded abortions went from about 300,000 per year prior to 1976 to 182,000 in FY 1977, to 232 in FY 1986, and has remained in the hundreds per year through FY 2008 [28]. Some state-level data on these abortions by reason emerged in 2008 in an inquiry from Congress to the Secretary of Health and Human Services regarding a significant increase in such payments in one state. [29] Specifically, claims from Illinois for abortions in cases of rape increased by a factor of 18 from FY 2005 to FY 2007. Data are shown below:

#### FEDERALLY-FUNDED ABORTIONS IN THE CASE OF RAPE [29]

state	FY 2005	FY 2006	FY 2007
Alabama	0	0	0
Alaska	0	0	0
Arizona	0	0	1
Delaware	0	0	0
Georgia	0	1	0
Idaho	0	0	0
Iowa	0	1	0
Illinois	20	84	363
Kentucky	0	0	0
Maine	0	0	0
Michigan	0	0	0
Minnesota	7	8	3
New Hampshire	0	0	0
North Carolina	4	0	0
North Dakota	0	0	0
Ohio	2	1	0
South Carolina	0	1	1
South Dakota	0	0	0
Texas	0	0	0
Virginia	0	0	0
Wyoming	0	0	0
(unknown)	13	0	0
TOTAL	46	96	368

#### FEDERALLY-FUNDED ABORTIONS IN THE CASE OF INCEST [29]

state	FY 2005	FY 2006	FY 2007
Alabama	0	0	0
Alaska	0	0	0
Arizona	0	0	1
Delaware	0	0	0
Georgia	0	0	0
Idaho	0	0	0
Iowa	0	0	0
Illinois	0	0	5

## Reasons given for having abortions in the United States

Kentucky	0	0	0
Maine	0	0	0
Michigan	0	0	0
Minnesota	3	5	3
New Hampshire	0	0	0
North Carolina	0	0	0
North Dakota	0	0	0
Ohio	0	0	0
South Carolina	0	0	0
South Dakota	0	0	0
Texas	0	0	0
Virginia	0	0	0
Wyoming	0	0	0
TOTAL	3	5	9

## FEDERALLY-FUNDED ABORTIONS IN THE CASE OF RISK TO MOTHER'S LIFE [29]

state	FY 2005	FY 2006	FY 2007
Alabama	6	2	10
Alaska	0	1	0
Arizona	0	0	1
Delaware	0	2	6
Georgia	1	6	1
Idaho	5	0	0
Iowa	1	3	0
Illinois	5	5	13
Kentucky	1	0	0
Maine	1	8	11
Michigan	0	0	3
Minnesota	1	0	2
New Hampshire	1	1	1
North Carolina	7	3	4
North Dakota	1	0	0
Ohio	14	18	10
South Carolina	17	11	6
South Dakota	1	0	0
Texas	17	4	4
Virginia	20	31	9
Wyoming	2	0	0
TOTAL	101	95	81

In the next table, the figures for abortions in the case of rape in Illinois are adjusted in the same manner as previously applied to state statistics, using an annual figure of 50,000 based on AGI estimates. Assuming that all abortions in cases of rape in Illinois were paid for by federal Medicaid, the FY 2007 figures are compatible with rates of rape-related abortions claimed by AGI, but they are 2-3 times higher than rates supported by analysis of data from other states. More importantly, the dramatic increase from FY 2005 to FY 2007 casts doubt on the reliability of the Illinois figures, suggesting that rape is falsely being claimed as a reason for many of these abortions in order to obtain Medicaid funding (the point raised in the congressional inquiry).

## ILLINOIS CLAIMED FIGURES FOR ABORTIONS IN THE CASE OF RAPE

region	year(s)	abortions where rape is cited		forcible rapes during sample period [9]	abortions in cases of rape as a percentage of reported rapes	implied U.S. number of abortions in cases of rape in 2005	% of 2005 abortions [30]
		%	number				



Illinois	FY 2005	0.04	20	4,280	0.47	440	0.04
Illinois	FY 2006	0.17	84	4,130	2.03	1,910	0.16
Illinois	FY 2007	0.73	363	4,100	8.86	8,320	0.69

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**Adjusted figures:** Use of these figures to estimate nationwide percentages is affected by differences from state to state. By adjusting the state level percentages for variations in rates of occurrence of rape or variations in the fraction of pregnancies that end in abortion, corresponding nationwide estimates may be derived. The following tables provide estimates of the fraction of abortions in cases of rape, threat to mother's life or health, or fetal health issues, for 2008 (the latest year for which nation-wide abortion figures are available). Estimates are derived from each state-level data set and each AGI survey by applying the derived abortion rates per reported rape or health issue related abortion rates per known pregnancy.

For the case of abortions in cases of rape, adjustment for state-to-state and year-to-year variation in occurrence of rape is necessary. The respective state or survey data set is used to derive the rate at which abortions occur in connection to reported rapes, with these rates then applied to nationwide data to derive corresponding percentage estimates for 2004 and 2011.

**ADJUSTED FIGURES FOR ABORTIONS IN THE CASE OF RAPE**

region	year(s)	abortions where rape is cited		forcible rapes during sample period [9]	abortions in cases of rape as a percentage of reported rapes	implied U.S. number of abortions in cases of rape in 2004	% of 2004 abortions [30]	implied U.S. number of abortions in cases of rape in 2011	% of 2011 abortions [30]
		%	number						
Florida	Jul 2008-Dec 2009	1.85	2,273	8,487	26.78	25,470	2.08	22,540	2.13
Louisiana	1996-2012	0.03	55	24,954	0.22	210	0.02	190	0.02
Minnesota	Oct 1998-Dec 2014	0.62	1,297	32,379	4.01	3,810	0.31	3,370	0.32
Nebraska	2000-2014	0.40	179	9,093	1.97	1,870	0.15	1,660	0.16
South Dakota	1999-2014	1.61	193	6,521	2.96	2,810	0.23	2,490	0.24
Utah	1996-2010	0.50	249	13,548	1.84	1,750	0.14	1,550	0.15
USA (AGI survey)	1987	1	15,600	91,111	17.11	16,300	1.33	14,400	1.36
USA (AGI survey)	2000-2001	0.6	6,100	181,041	8.63	8,200	0.67	7,300	0.69
USA (AGI survey)	2004	0.5 1	6,100 12,200	95,089	6.43 12.85	6,100 12,200	0.50 1.00	5,400 10,800	0.51 1.02

Estimates based on data reported for these six states generally give results significantly below figures based on AGI studies. The sole exception is Florida, which like Illinois as discussed above likely represents inflated reporting of rape as a reason for abortion. For the states of Minnesota, Nebraska, South Dakota, and Utah, the derived national estimates (0.15-0.32%) are consistent despite the larger range in state-level percentages (i.e. factor of 2 range in national estimates versus factor of 4 range in state-level percentages). These estimates are also consistent with the previously derived estimate of 0.54% based on FBI and DOJ figures and the Holmes et al. study. Thus it is reasonable to conclude that, contrary to AGI figures, the fraction of abortions nationwide in cases of rape is closer to 0.3%.

Similarly, if it is assumed that abortions in cases where there are maternal or fetal health problems are a consistent fraction of known pregnancies, the implied nationwide percentages in such cases would be as given below. Note that "known pregnancies" for states includes only pregnancies ending in live births or reported abortions; this excludes miscarriages (small numbers in comparison) and stillbirths (for which little data is available). State-level abortion figures are generally based on state agency reported figures by state of occurrence, while U.S. figures for abortions and pregnancies use AGI abortion figures.[31] Since some states and the AGI surveys do not separate abortions in cases of threat to the mother's life from abortions in cases of threat to the mother's health, these are both included in the maternal health figures below. Figures for threat to the mother's life are then provided separately as available.

**ADJUSTED FIGURES FOR ABORTIONS IN THE CASE OF MATERNAL PHYSICAL HEALTH PROBLEMS**

region	year(s)	abortions where mother's health is cited		total known pregnancies [31]	cited abortions as a percentage of known pregnancies	implied U.S. number of abortions in such cases in 2004	% of 2004 abortions [30]	implied U.S. number of abortions in such cases in 2011	% of 2011 abortions [30]
		%	number						
Arizona	1980-2009	0.19	647	2,598,843	0.025	1,330	0.11	1,250	0.12
Arizona	2012-2013	1.26	336	199,635	0.168	8,980	0.73	8,440	0.80
Florida	Jan 1998-Jun 2008	0.51	4,800	3,190,470	0.150	8,030	0.66	7,540	0.71
Florida	Jul 2008-Dec 2009	0.22	278	462,150	0.060	3,210	0.26	3,010	0.28
Louisiana	1996-2012	0.25	414	1,265,039	0.033	1,750	0.14	1,640	0.15
Minnesota	Oct 1998-Dec 2014	5.05	10,563	1,340,568	0.788	42,030	3.44	39,490	3.73
Nebraska	2000-2014	1.74	785	436,403	0.180	9,600	0.79	9,020	0.85
South Dakota	1999-2014	2.40	287	196,506	0.146	7,790	0.64	7,320	0.69

Utah	1996-2014	0.45	275	1,009,624	0.027	1,450	0.12	1,370	0.13
USA (AGI survey)	1987	3			0.867	46,250	3.78	43,450	4.10
USA (AGI survey)	2004	4			0.973	51,900	4.25	48,770	4.61

**ADJUSTED FIGURES FOR ABORTIONS IN THE CASE OF THREAT TO MATERNAL LIFE**

region	year(s)	abortions where risk to mother's life is cited		total known pregnancies [31]	cited abortions as a percentage of known pregnancies	implied U.S. number of abortions in such cases in 2004	% of 2004 abortions [30]	implied U.S. number of abortions in such cases in 2011	% of 2011 abortions [30]
		%	number						
Florida	Jul 2008-Dec 2009	0.06	79	462,150	0.017	910	0.07	860	0.08
Nebraska	2000-2014	0.18	81	436,403	0.019	990	0.08	930	0.09
Utah	1996-2014	0.45	275	1,009,624	0.027	1,450	0.12	1,370	0.13

**ADJUSTED FIGURES FOR ABORTIONS IN THE CASE OF FETAL HEALTH PROBLEMS**

region	year(s)	% of abortions where fetal health is cited		total known pregnancies [31]	cited abortions as a percentage of known pregnancies	implied U.S. number of abortions in such cases in 2004	% of 2004 abortions [30]	implied U.S. number of abortions in such cases in 2011	% of 2011 abortions [30]
		%	number						
Arizona	2012-2013	0.85	226	199,635	0.113	6,040	0.49	5,670	0.54
Florida	Jan 1998-Jun 2008	0.56	5,253	3,190,470	0.165	8,780	0.72	8,250	0.78
Florida	Jul 2008-Dec 2009	0.64	788	462,150	0.171	9,100	0.74	8,550	0.81
Louisiana	1996-2012	0.12	196	1,265,039	0.015	830	0.07	780	0.07
Minnesota	Oct 1998-Dec 2014	1.30	2,718	1,340,568	0.203	10,810	0.88	10,160	0.96
Nebraska	2000-2014	0.64	290	436,403	0.066	3,540	0.29	3,330	0.31
South Dakota*	2003-2014	0.90	108	196,506	0.055	2,930	0.24	2,750	0.26
Utah	1996-2014	0.68	417	1,009,624	0.041	2,200	0.18	2,070	0.20
USA (AGI survey)	1987	3			0.867	46,250	3.78	43,450	4.10
USA (AGI survey)	2004	3			0.730	38,940	3.19	36,590	3.46

\* In the case of South Dakota, data by reason for abortion is not available; figures are for abortions where fetal abnormalities were reported, regardless of the indicated reason for the abortion.

Again, the resulting estimates are generally lower than those reported based on the AGI surveys. For cases of risk to the mother's physical health, the state-based estimates vary significantly but are all lower than the AGI-based estimates, and in all but the case of Minnesota are lower by at least a factor of 4. For cases of threat to the mother's life, despite the factor of 7 range in state-level percentages among the three states, the derived national estimates are quite consistent, in the range 0.08-0.13%. For abortions in cases of fetal health issues, the derived national estimates from state data are all lower than the AGI-based estimates by at least a factor of 4.

The following table combines derived estimates of percentages of abortions in cases of threat to the mother's life from the federally funded abortion data and from the state agency data. The federally funded abortion cases are incomplete representations for some states (as this treatment assumes that all abortions in these cases were paid for by federal Medicaid, but likely not all states, and they tend to confirm the low percentages derived from the state agency data-based estimates.

**ADJUSTED FIGURES FOR ABORTIONS IN THE CASE OF THREAT TO MATERNAL LIFE**

state	time period	data type	abortions where risk to mother's life is cited		total abortions [31]	total known pregnancies [31]	cited abortions as a percentage of known pregnancies	implied U.S. number of abortions in such cases in 2008	% of 2008 abortions [30]
			%	number					
Alabama	Oct 2004 - Sep 2007	federal	18	0.05	34,160	221,470	0.008	440	0.04
Alaska	Oct 2004 - Sep 2007	federal	1	0.02	5,640	37,910	0.003	140	0.01
Arizona	Oct 2004 - Sep 2007	federal	1	0.00	32,860	331,850	0.000	20	0.00
Delaware	Oct 2004 - Sep 2007	federal	8	0.06	13,810	48,930	0.016	890	0.07
Florida	Jul 2008 - Dec 2009	state	79	0.06	122,576	462,150	0.017	930	0.08
Georgia	Oct 2004 - Sep 2007	federal	8	0.01	93,740	528,230	0.002	80	0.01
Idaho	Oct 2004 - Sep 2007	federal	5	0.14	3,670	75,340	0.007	360	0.03
Iowa	Oct 2004 - Sep 2007	federal	4	0.00	134,730	675,400	0.001	30	0.00
Illinois	Oct 2004 - Sep 2007	federal	23	0.12	19,100	138,950	0.017	900	0.07

Reasons given for having abortions in the United States

Kentucky	Oct 2004 - Sep 2007	federal	1	0.01	11,870	184,610	0.001	30	0.00
Maine	Oct 2004 - Sep 2007	federal	20	0.25	7,990	50,370	0.040	2,170	0.18
Michigan	Oct 2004 - Sep 2007	federal	3	0.00	75,920	456,100	0.001	40	0.00
Minnesota	Oct 2004 - Sep 2007	federal	3	0.01	41,260	258,590	0.001	60	0.00
Nebraska	Jan 2000 - Dec 2011	state	50	0.13	38,290	346,504	0.014	790	0.07
New Hampshire	Oct 2004 - Sep 2007	federal	3	0.03	9,360	52,600	0.006	310	0.03
North Carolina	Oct 2004 - Sep 2007	federal	14	0.01	100,840	479,890	0.003	160	0.01
North Dakota	Oct 2004 - Sep 2007	federal	1	0.03	3,790	29,420	0.003	190	0.02
Ohio	Oct 2004 - Sep 2007	federal	42	0.04	98,770	547,460	0.008	420	0.03
South Carolina	Oct 2004 - Sep 2007	federal	34	0.09	37,300	218,570	0.016	850	0.07
South Dakota	Oct 2004 - Sep 2007	federal	1	0.04	2,290	37,760	0.003	140	0.01
Texas	Oct 2004 - Sep 2007	federal	25	0.01	239,000	1,423,880	0.002	100	0.01
Utah	Jan 1996 - Dec 2010	state	220	0.44	49,963	794,030	0.028	1,510	0.12
Virginia	Oct 2004 - Sep 2007	federal	60	0.07	81,170	401,740	0.015	820	0.07
Wyoming	Oct 2004 - Sep 2007	federal	2	0.10	2,020	24,520	0.008	450	0.04
TOTAL	Oct 2004 - Sep 2007	federal	277	0.02	1,260,119	7,826,274	0.004	190	0.02

Some states report maternal mental health issues as a reason for abortion. This is a far more subjective determination than the previously reviewed cases, a subjectivity partly illustrated by the case of Utah where 92.5% of abortions from 1996-2014 are reported as "therapeutic". The percentages of abortions reported in cases of maternal mental health issues are: 0.11% in Florida (1998-2008 data), 0.14% in Florida (2008-2009 data), 0.95% in Louisiana (1996-2012 data), 6.46% in Minnesota (1998-2014 data), 7.01% in Nebraska (2000-2014 data), and 8.04% in South Dakota (1999-2014 data).

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**"Partial-birth abortions" and other late-term abortions:** Because of the particularly controversial nature of late-term and "partial-birth abortions" (PBAs), some statistics regarding these abortions has emerged. Partial-birth abortion roughly corresponding to what the medical community describes as intact dilation and extraction. Available data indicates that PBAs are mostly performed for reasons other than for the life or physical health of the mother, reasons including either fetal defects (minor or major) or purely elective reasons.

Kansas requires physicians to report reasons for performing PBAs. Of the 240 PBAs reported in Kansas in 1998 and 1999, there were none where the mother's life was at risk; in every case the attending physician certified "that continuing the pregnancy will constitute a substantial and irreversible impairment of the patient's mental function" and that there was not a substantial physical risk to the mother from the pregnancy.[32] No PBAs have been reported since 1999 in Kansas, but other abortions performed at 22 weeks gestation or later must similarly be reported. For these as well, few if any are cited as involving risk to the mother's life; typically, risk to the mother of "substantial and irreversible impairment of a major bodily function" is cited.[32]

Physicians who perform large numbers of PBAs have stated that many are performed for elective reasons. In an interview with American Medical News, M. Haskell stated that about 80% of the PBAs he performed were purely elective, with the remainder performed for genetic reasons.[33, 34, 35, 36] In testimony to Congress, J. McMahon reported that for about 2,000-2,100 PBAs he had performed, 1,183 (56%) were for fetal "flaws" or "indicators", 175 (9%) were for maternal "indicators", and the remainder (about 700, or 35%) were elective.[34, 35, 37] McMahon further indicated that elective abortions comprised 20% of those he performed after 21 weeks gestation, and none of those he performed after 26 weeks.[35]

McMahon's 1995 testimony to the House Judiciary Committee gave more detailed statistics, which have been analyzed by physicians P. Smith and K. Dowling. Among maternal indicators, the single most frequent was maternal depression (39, or 1.9% of total), with 28 attributed to maternal health conditions "consistent with the birth of a normal child (e.g. sickle cell trait, prolapsed uterus, small pelvis)" (1.3% of total) and the remainder (5% of total) for other maternal factors ranging from maternal health risk to "spousal drug exposure" and "substance abuse". Those performed for fetal indicators included some for lesser conditions such as 9 (0.4% of total) for cleft lip-palate, 24 (1.1% of total) for cystic hydroma, and other for conditions either surgically correctable or involving lesser degrees of neurologic/mental impairment.[35, 36]

Estimates of the annual numbers of PBAs in the United States range from 2,200 to 5,000, with documented annual numbers between 1996 and 2005 ranging from 76 to 1,642.[37]

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**Summary and conclusions:** Based on the preceding analyses, the following composite estimated percentages are suggested (with parenthetical values giving the ranges of values from the above studies and analyses):

**REASONS FOR ABORTIONS: COMPILED ESTIMATES**

rape	0.3 % (0.1-0.6 %)
incest	0.03 % (0.01-0.1 %)
physical life of mother	0.1 % (0.01-0.2 %)
physical health of mother	0.8 % (0.1-3 %)
fetal health	0.5 % (0.1-1.0 %)
mental health of mother	?? (0.1-8 %)
elective	98.3% (87-99 %)
--too young/immature/not ready for responsibility	--? (32 %)

--economic	--30% (25-40 %)
--to avoid adjusting life	--? (16 %)
--mother single or in poor relationship	--? (12-13 %)
--enough children already	--? (4-8 %)
--sex selection	--0.1% (<0.1-? %)
--selective reduction	--0.1% (<0.1-0.4 %)

Note that quantifying cases involving the "mental health" of the mother is difficult due to the highly subjective use of this term (as demonstrated by the wide range in percentage of abortions reported for this reason). It is likely that the number of cases involving clinical mental illness falls towards the low end of the range given above.

These official state statistics suggest that the commonly cited AGI figures for the "hard cases" are high, perhaps by factors of three to five. In any case, it is clear that the hard cases--rape, incest, life/health of mother or baby--are a very small fraction of cases. They are arguably a poor premise for formulating general public policy regarding abortion. At the other extreme, AGI's surveys of 1987 and 2004 (as well as the detailed statistics from Minnesota) suggest that a significant fraction of abortions are obtained by mothers who have the means to care for a child but do not want their lives inconvenienced. Even sex selective abortions may be more common than those for some of the hard cases. This illustrates the consequences of the current extreme policy in the United States regarding abortion.

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