Current trends

During 2012, 9,016 induced terminations of pregnancy occurred in Oregon. This total represented a 5.8% decrease from 2011 and a decrease of 42.7% from the record high of 15,735 abortions reported in 1980 (see Figure 3-1).

This chapter reports occurrence data for all abortions occurring in Oregon whether obtained by Oregon residents or residents of another state. The percentage of out-of-state residents terminating pregnancies in Oregon has been between 9.8% and 12.6% from 1992 to the present. In 2012, 880 patients (9.8 %) were out-of-state residents (see Table 3-6). Oregonians who obtained out-of-state abortions are not included in these data. Because rate calculations use Oregon population numbers, these calculations substitute out-of-state residents for the unknown number of Oregonians who obtained an abortion in another state (see Appendix B, Technical notes section for a more extensive discussion of the completeness of abortion data).

Behavioral changes are revealed more by shifts in rates, which account for population change, than changes in the number of events. The U.S. abortion rate has been declining since 1980 from approximately 25 per 1,000 women aged 15–44 to 14.6 per 1,000 in 2010, the most recent data available.¹
In 2012, the Oregon rate decreased to 11.7 per 1,000 women aged 15–44, a 6.4% decrease from 2011, and a 53.4% decrease from the record high seen in 1980 (25.1 per 1,000). During the past 20 years, Oregon’s abortion rate for women aged 15–44 has generally declined — from a high of 21.4 in 1991 to a low in 2012 of 11.7 per 1,000 women.

Pregnancy outcomes

Figure 3-2 shows the ratio of abortions to births occurring in Oregon, indicating the prevalence of unwanted pregnancies that occurred in the state. Both the highest abortion rate (number of abortions per 1,000 female population) and the highest ratio of abortions (number of abortions per 1,000 births) occurred in 1980. In 1984, the level of reporting increased due to new legislation that required providers to report all abortions performed. Although there have been periodic spikes in the overall abortion ratio (Figure 3-2), it has been gradually declining since 1980.

In 2012, there were 197.9 abortions per 1,000 occurrence births. This represents a 6.7% decrease from 2011 and a 44.4% decrease from 1980 when this ratio was 355.8 per 1,000 births (see Table 3-2).

Oregon’s abortion ratio was about one-fifth higher than that of the United States in 1973, when the U.S. Supreme Court’s decision in Roe v. Wade legalized abortion. In the
mid-1980s, this trend changed as Oregonians terminated fewer pregnancies with induced abortions compared to the United States as a whole. This trend reversed itself beginning in the late 1990s, as Oregon’s abortion ratio climbed past that of the United States, reaching a maximum divergence of +25% in 2001. Since the mid-2000s, however, Oregon’s abortion ratio has fluctuated near the U.S. ratio (see sidebar Table 3-A).

**Abortion patients**

Similar to birth rates, abortion rates differ by age group, race, ethnicity, marital status and prior pregnancy. More than two-thirds of abortion patients had never been married (see Table 3-3), and more than half had previously given birth (see Table 3-5).

**Age**

There is wide variation in abortion rates among age groups (see sidebar Table 3-B): The highest rate in 2012 occurred among women aged 20–24 (23.3 per 1,000). The lowest rates were among women under age 15 (0.2 per 1,000) and women 45–49 (0.3 per 1,000) (see Figure 3-3).

The 2012 abortion rate among teens aged 10–17 was 84.7% lower than the rate in 1980, when the statewide abortion rate was highest; the rate for 18- to 19-year-olds was 74.4% lower (see Figure 3-4). The absence

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</tr>
</tbody>
</table>

¹ Occurrence data include all abortions reported by providers located in Oregon, regardless of the patient’s residence. Because rate calculations employ Oregon population figures, these calculations, in effect, substitute out-of-state residents for Oregonians who may have obtained an abortion in another state.

² Per 1,000 females in age group.
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of a corresponding increase in the birth rates among teens suggests success in avoiding unwanted pregnancy, rather than an increase in decisions to carry unwanted pregnancies to term. In contrast, among women age 35 and older, both abortion rates and birth rates were markedly higher in 2012 than in 1980.

**Race and ethnicity**

Beginning in 2008, collection of race and ethnicity data on Oregon birth certificates changed to obtain more precise information about an individual’s race and Hispanic ethnicity. In prior years, only one race category could be selected. Now multiple race and ethnicity categories may be chosen. For this reason, pregnancy data (births and abortions) by race/ethnicity since 2008 are not directly comparable to years before 2008.

The frequency with which abortion procedures were used to terminate pregnancies varied among ethnic and racial groups. African American and American Indian women had the highest percentages of terminated pregnancies in 2012 with 35.8% and 24.4%, respectively. Because Oregon’s demographic composition is predominantly White, White women obtained the majority of abortions by count in 2012, but had the third highest percentage of terminations overall, 52.0% lower than African American women. The lowest percentage of terminated pregnancies was women of
Hispanic ethnicity who terminated 10.6% of pregnancies in 2012 (see Figure 3-5).

Figure 3-5.

Percentage of Pregnancies Terminated by Induced Abortion by Race/Ethnicity, Oregon Occurrence, 2012

Contraceptive use

In the majority of abortions that occur in Oregon, the pregnancy is not a result of contraceptive failure. In 2012, based upon data obtained from abortion reports, 30.2% of women used some method of contraception to avoid pregnancy. Of the 69.8% of abortion patients who did not report using contraceptives, 41.6% had previously obtained an abortion (see Table 3-5).

Medical procedures

For abortions with known gestation periods, 87.3% were performed prior to the 13th week of pregnancy. About one in 20 (5.2%) induced terminations where gestation was known were performed after 16 weeks. Suction curettage was the procedure used in 50.2% of terminations prior to the 13th week where method was reported. Dilation and evacuation was the procedure in 85.5% of terminations occurring after 16 weeks gestation. Women less than 20 obtained 20.0% more abortions after 16 weeks gestation than women aged 20 and older (see Table 3-4). The percentage of abortions occurring after 16 weeks gestation
increased slightly for women aged 20–24, but decreased for all other age groups (see Figure 3-6).

Complications at the time of the induced termination procedure were reported for 228 terminations (2.5% of abortion patients). Retained products (92 patients) and failure of first method (23 patients) were the most common complications. In Oregon, data shows that no woman has ever died as the result of a legally induced termination.

**Geographic distribution**

Abortion rates varied widely within Oregon with 35 of 36 counties reporting at least one resident who obtained an abortion in 2012. Service providers, conversely, were geographically concentrated. In 2012, abortions were reported in nine counties. The concentration was evident in the fact that 95.1% of all abortions were obtained in the five counties of highest occurrence: Jackson, Lane, Marion, Multnomah and Washington (see Table 3-7). Although abortions often may be sought outside a patient’s community to help ensure anonymity, this degree of concentration suggests that access to abortion services may be limited for some Oregon women.
Endnote