MCDB 150 Global Problems of Population Growth Lecture 21 Notes

The topic of today's lecture is abortion.

The abortion issue has hit the US in a way that is unique in the world.

Abortion has taken over as the central issue in the American debate on values.

I think the power of the issue is that it encapsulates diametrically opposed views of our roles in everyday life.

sex roles, work roles, husband and wife roles, motherhood and fatherhood roles.

abortion relates to absolutely fundamental matters

and the two sides see them in a completely opposite manner:

both sides agree that the issue is about murder:

a pro-lifer sees images of a three month fetus, which, even though only about the size of your finger, in the blown up photographs, which everyone has seen, already looks quite babylike and thinks of it being dismembered and murdered.

a pro-choicer sees a young woman, maybe herself, in a back alley abortion being butchered and possibly murdered.

Almost every one of the older generation of pro-choice women has had a back-alley abortion, or knows a friend who died, or almost died in an illegal, back alley abortion.

both sides agree that the issue is about babies and motherhood:

a pro-life mother thinks babies are so precious that, whenever they come, they will be loved and wanted.

a pro-choice mother thinks babies are so precious that they should only be had when the woman really wants the baby and is in a situation in life where she has the resources to care for the baby.

both sides agree that the issue is about sex:

a pro-life woman thinks sex is so special that it should be guarded by strong religious and social controls so that it always has an almost sacred character.

a pro-choice woman thinks sex is so special that it should be freed of worry about pregnancy and disease, so that it can be enjoyed as a unique sharing of intimacy.

both sides agree that the issue is about the status of women:

pro-life women think that women are so important that their special life-role of motherhood must be protected.

pro-choice women think that women are so important that they should have every bit as much control over their life roles as men have.

One of the interesting things about watching this violent debate is that the two sides do not differ at all on their fundamental human values.

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This is not a philosophy course and so is not set up to debate the pros and cons of abortion.

I think what I can do is give you some of the basic facts and history that will let you reexamine your own opinions on the issue.

1. INDUCED ABORTION IS COMMON.

The most recently available GLOBAL statistics

As of 2003, published in 2007 The Lancet <u>370</u>:1338-1345 (2007)

1 abortion for every 3.2 live births

205 million pregnancies, 135 Meg births --> 42 Meg abortions. The Lancet <u>370</u>:1343 (2007)

Each year, about 3% of women of childbearing age have an abortion.

In a 30 year reproductive life span, that adds up to a 90% chance that a woman will have an abortion in her lifetime.

Hence, on average, for each woman on earth has ~one abortion during her reproductive lifetime.

Obviously, some Individuals have more than 1 and some have none.

There are 3 standard ways of expressing the frequency of abortion:

The NUMBER of abortions, by latest estimate (2003), is 42 million per year.

The Lancet 370:1338-1345 (2007)

World (2003) 135 Meg births --> 42 Meg abortions.

The number has stayed in the 40 to 50 million range for at least the last 2 decades

Int'l Fam Plann Perspects 25:S32 (1999)

The abortion RATE is defined as abortions per 1,000 women aged 15-44 / year.

For the world it is 29/1,000			The Lancet <u>370</u> :1341 (2007)
Both the highest and the lowest rates in the world are found in Europe			
Western Europe has		12 abortions/1,000	The Lancet <u>370</u> :1342 (2007)
Eastern Europe has 4X as many: 44/K/yr			The Lancet <u>370</u> :1342 (2007)
The abortion RATIO is defined as abortions per 100 livebirths.			
For the world it is 31/100			The Lancet <u>370</u> :1342 (2007)
This ranges from 12 in Middle Africa			The Lancet <u>370</u> :1342 (2007)
То	105 in Eastern Euro	pe. (2003)	The Lancet <u>370</u> :1342 (2007)

105 means that In Eastern Europe there are more abortions than live births.

The abortion rate is about the same whether a woman lives in a developed (26/1,000) or developing country (29/1,000). The Lancet <u>370</u>:1341 (2007)

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China has \sim 20% of the world's population and \sim 20% of the world's abortions.

The Lancet 370:1342 (2007) The TOTAL ABORTION RATE is calculated like a Total Fertility Rate. The # of abortions a women would have in her lifetime. For the World it is 0.9 (close to 1). The Lancet 370:1341 (2007) It ranges from a low of 0.2 in several countries to a high of 1.7 in Cuba. IFPP 33:108 (2007) For special situation of Cuba see below and: Studies in FP March 2009 40:13-26. The number of abortions has decreased a bit since the last compilation for 1995 From 46 million abortions to 42 million. The Lancet 370:1338 (2007) Eastern Europe accounts for ³/₄ of that drop. (6.2 Meg to 3.1 Meg = 3.1 meg)Calculated from Table 1, The Lancet 370:1341 (2007) The Eastern European rate fell by half from 1995 to 2003. In 1995 it was 1 for every 11 women every year. http://www.guttmacher.org/pubs/fb IAW.html 10/08 Its decline correlates with a large increase in contraceptive use. Same as prev ref p1 2. PER BIRTH, THE US LOOKS PRETTY MUCH LIKE THE REST OF THE WORLD. 1 abortion for every 3.2 live births US (2003) Int'l Fam Plann Perspects 33:108 (2007) 1996 #s: US: 1.4 Meg abortion 4.2 Meg births IFPP 33:108 THE SAME AS THE WORLD AVERAGE Int'l Fam Plann Perspects 33:108 (2007) US: 1.3 Meg abortions in 2003 AGI http://www.agi-usa.org/pubs/journals/3500603.pdf 2000: 24.5 abortions for 75.5 live births: NHR 1/20/03 from AGI US: 21.3 abortions/1,000 women (aged 15-44) in yr 2000 NHR 1/20/03 from AGI PER WOMAN, THE US HAS A SOMEWHAT LOWER RATE The Total Abortion Rate is 0.64 abortions/woman lifetime World is 0.9 Int'l Fam Plann Perspects 33:108 (2007) Because of fairly high use of contraception.

But US rate is not as low as the 0.2 of Belgium, Germany and Switzerland.

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A cohort of 1,000 US women going through their reproductive lives will have 639 abortions. On average there will be 2 abortions for every 3 women.

3. ABORTION CAN BE A MAJOR METHOD OF FERTILITY CONTROL WHEN A COUNTRY GOES THROUGH ITS FERTILITY TRANSITION.

The sharpest decline in the crude birth rate for a large population during the modern era, and perhaps throughout human history, appears to be the halving of the birth rate in Japan between 1947 and 1957 from 34 to 17, a level at which it has remained ever since (at least to 1979).

Abortion was legalized in Japan in 1948

JAPAN SLIDE #2

It immediately became THE main method of achieving lower birth rates.

The total # of pregnancies (/1,00 women) stayed the same (last column)

But the number of abortions rose from 100 thousand to a million in 4 years.

The ratio of births to abortions went from 26.4 to ~1.5

4. IN MANY PLACES ABORTION IS THE METHOD OF BIRTH CONTROL

Soviet Union 5-6 abortions lifetime/woman.

Ukraine 10-12

Emigrants 20 or 30.

Japan: not legalize pill until 1997- so abortion is very high

IN SOME SPECIAL CIRCUMSTANCES, ABORTION RATES ARE SKY HIGH.

In 1966, in Romania, there were 408 abortions for every 100 live births.

That is 4X as many abortions as live births!

Population Studies <u>33</u>:209 (1979)

5. LEGAL, MEDICALLY PERFORMED ABORTION IS ONE OF THE SAFEST METHODS OF BIRTH CONTROL KNOWN US: SLIDE 3

This shows the graph that was required for many years by the FDA to be included in the informational inserts provided with packages of oral contraceptives.

This shows death rate vs. method of contraception or non-use.

The white bars are non-users.

The elevated levels are from deaths due to the complications of pregnancy.

Women who don't contracept have a higher death rate than any other category. (except for smokers)

The risk of non use of contraception greatly outweighs the risk of use.

"the life threatening risk associated with modern steroidal contraception is less than that from having a baby or driving a car." Essential Reproduction, Johnson & Everitt, 4th ed 1995.

Diaphragm or Condom backed by abortion (called traditional methods) is the safest.

Other forms of modern contraception are also safe

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The only dangerous category is smokers over 40 who use the pill.

The data for that graph was from early studies.

Fam Plann Perspectives <u>9</u>:74-76 (1977).

Several more years of data, and medical progress, indicated a lower the risk of childbirth and a higher risk for pill users who smoke.

However, childbirth (non use of any method of birth control) remained the most dangerous category except for (pill + smoking) for women over the age of 35.

Fam Plann Perspectives <u>15</u>:57-63 (1983)

Mortality from condom use backed by abortion fell below measurable levels.

A large fraction of the (low) risk of contraception comes from method failure – the woman gets pregnant and is then subject to the higher risks of childbirth. For instance, 40% of the risk for a teenage non-smoker on the pill is the risk associated with childbirth.

The figures for pill use refer to the old high dose pills.

Research found that low doses of the hormones are just as effective.

So the current generation of pills have much lower hormone levels and have many fewer complications.

More recently, statistical work has focused on effectiveness, negative side effects and beneficial side effects.

When you go to the DEVELOPING WORLD, pregnancy itself gets much more dangerous, so these white bars for non-users shoot way up.

NOT ONLY IS IMMEDIATE MORTALITY LOWER,

ABORTION HAS NO LONG-TERM CLINICAL EFFECTS

- either psychiatric or medical.

Fam Plan Perspect 7-8/97 pp193

Whether women perceive having an abortion as an emotionally distressing experience or not depends on the social norms of the community and their own personal codes.

6. RELIGIOUS PROSCRIPTION IS NOT THE DETERMINING FACTOR IN ABORTION RATES

Among Catholic countries, Belgium has one of the lowest rates in the world,

6.8 /1,000 and Hungary has one of the highest (34.7). (Int FPP 1/99)

Among Muslim countries, BanglaDesh has one of the lowest rates, (3.8) while Turkey has 6 or 7 times that rate (25). (Int FPP 1/99)

The US has about the same rate as Turkey.

In the U.S., the abortion rate for Protestants (17 per 1,000) is lower than for Catholics (24 per 1,000).

Characteristics of Women Who Obtain Induced Abortion: A Worldwide Review Int'l FP Perspects 25#2, 6/99

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However, this is most likely not a religious issue, but more likely reflects the economic and educational status of the large population of Hispanic immigrants who happen to be Catholic.

7. LEGAL PROSCRIPTION IS NOT THE DETERMINING FACTOR IN ABORTION RATES

About half of of abortions worldwide are illegal.

26 Meg legal, 20 Meg illegal INT FamPlan Persp 1/99 Suppl & Pop Today 4/99 p8

Legal restrictions on abortion do not affect its incidence:

See Summary & Table 1 pS32: INT FamPlan Persp 1/99 Suppl

2006: http://en.wikipedia.org/wiki/Abortion law

In the 2003 data, the abortion rate was 28 in Europe where abortion is generally legal.

And 29 in Africa where it is mostly illegal

The lowest rates in the world are in Western & Northern Europe where abortion is accessible w/ few restrictions. <u>http://www.guttmacher.org/pubs/fb_IAW.html</u> 10/08

RATES IN LEGAL AND NOT COUNTRIES #5

Up to 2007, abortion was banned in Mexico. Nevertheless, the # of abortions in Mexico rose by 50% between 1990 and 2006.

Mexico's 2006 abortion rate was 40% higher than the US rate

(33/K women vs 19.4/K women) http://www.gyttmacher.org/media/nr/2009/02/02/index.html

Comparisons like these are not very meaningful.

Countries w/ legal abortion have lower rates than countries where it is illegal.

But, there are many socioeconomic factors are different between countries that have or don't have legal abortion.

In this slide the illegal countries are all in Latin America and the legal countries are all developed.

8. IN MOST COUNTRIES, ABORTION IS LEGAL FOR AT LEAST SOME REASONS

Int Fam Plan Persp 24:56 6/98

61% of world's people live in countries where abortion is permitted w/o restriction or for a wide range of reasons.

Only 25% live where abortion is largely illegal. These are largely - Latin America, Muslim countries and Sub-Saharan African countries.

ABORTION IS BECOMING LEGAL IN MORE PLACES

From 1985 to 1998, 19 nations significantly liberalized their abortion laws.

Only Poland has delegalized abortion.

From 1998 to 2007, 16 nations liberalized their abortion laws.

2 territories and 1 state in Australia also liberalized.

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El Salvador & Nicaragua changed their already restrictive laws to prohibit abortion entirely.

http://www.guttmacher.org/pubs/fb_IAW.html 10/08

Legalization is often hidden for religious/political reasons. Hence in BanglaDesh, abortion is illegal, but menstrual regulation is legal. The two procedures are the same, but a pregnancy test is not required for menstrual regulation. All participants know that a Menstrual Regulation is an abortion by another name. The practice is widespread: The government has trained 14,000 physicians and paramedics to do the procedure in 5,000 health facilities.

Approximately 1/3 of births are unwanted in Bangla Desh. There are 100,000 officially reported menstrual regulations annually in B-D. Researchers suggest that this is only a small fraction of the real rate. B-D health surveys indicate that 20% of women have had a pregnancy termination (abortion or MR) at some time in their life. P 113-114 in Ubaidur Rob, et al.,

Fertility Transition in Bangladesh, UNFPA 2004 HB1050.6 .A3 F47X 2004

9. ILLEGAL ABORTION IS DANGEROUS

There are \sim 68,000 abortion related deaths a year.

One every 7–8 minutes.

This is 100s of times higher than for safe legal abortion in developed nations. p3 in Unsafe abortion: the preventable pandemic, World Health Organization preprint and Lancet <u>368</u> 1908-1919 (2006)

This leaves ~220,00 children w/o their mothers every year.

Almost all of these are in countries where abortion is illegal.

LEGAL PROSCRIPTION IS THE MAIN DETERMINANT

OF THE MATERNAL DEATH RATE FROM ABORTION.

THE MAJOR DIFFERENCE IS IN THE MATERNAL DEATH RATE.

SAME SLIDE 6

Most maternal deaths in developing countries are from botched, illegal abortions.

So, while this slide is all deaths, most of them are from abortion.

ROMANIAN Pronatalist campaign.

Prohibition of abortion can raise birth rate dramatically. Romania's 1966 Anti-Abortion decree. Pop Studies <u>33</u>:209-220 (1979) reprinted in Ch 5 In: Berelson on Population HB 883.5 B47 1988 (LC)

Romania Story

Before 1965 contraceptives were unavailable:

so abortion was THE method of birth control.

80% of all pregnancies ended in abortion.

In 1966 Ceaucescu made abortion illegal:

Women between the ages of 18 and 45 were rounded up at their workplace

and subjected to gynecological examination.

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If they were not pregnant, they were compelled to explain why they were not pregnant.

Immediately an underground illegal abortion network sprang up so the very next year the abortion rate was again almost 70%.

In the next few years the rate kept creeping up until it returned exactly to the same rate as when it was legal.

Maternal death rate rose to over 200/100,000 live births

86% due to abortion Compared to 9/100,000 for England

The infant mortality rate rose to about ~83 deaths per 1,000 infants

about 1 baby in 12 died.

Infant death rate: Japan 4.6 US 8.9; New Haven 18.5; NHR 4/22/92 p7

probably 80 to 90% of these child deaths were infanticide.

When abortion was re-legalized

The maternal death rate dropped by more than a factor of 3:

Recent info on Romanian Abortion: Stud Fam Plann: 38:23-34 (2007)

Infant death rate is 10X lower in Sweden and France and 5X lower in Czechoslovakia.

More recently, in South Africa, when the abortion law was liberalized, the incidence of infection dropped by 52%. <u>http://www.guttmacher.org/pubs/fb_IAW.html</u> 10/08

10. THE FUNDAMENTAL CAUSE OF ABORTION IS UNINTENDED PREGNANCY.

We discussed unintended pregnancy in an earlier lecture.

You may remember the data from Bolivia where 71% of the women don't want to get pregnant again. SLIDE 7

Worldwide, in every developing country people were having more children than they wanted. SLIDE 14

In the world there are an estimated 108 million women with an unmet need for contraception.

The Lancet 370:1344 (2007)

This results in 51 million unintended pregnancies

The Lancet <u>370</u>:1344 (2007)

Another 25 million happen as a result of incorrect or inconsistent use of contraception or method failure. The Lancet <u>370</u>:1344 (2007)

Worldwide: 210 Meg pregnancies/yr. IFPP 1/99

38% unplanned. 22% of unplanned pregnancies end in abortion. PopBull 4/99 p8

Global numbers vary somewhat depending on year and survey.

In US: 49% of pregnancies were unintended and 54% of these ended in abortion.

Fam Plan Persp: <u>30</u>:24 Jan '98

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Contraceptive failure in 1st 2 years of use. Fam Plan Perspect Jan '01 p19ff

Also has earlier references.

MOST UNINTENDED PREGNANCIES IN DEVELOPED COUNTRIES OCCUR IN WOMEN WHO ARE USING CONTRACEPTIVES, BUT THE CONTRACEPTION FAILS.

A woman is fertile for \sim 30 years; 15 –45. If she has a 28 day cycle, she has 391 menstrual cycles. There may be several acts of intercourse in each month. In order to prevent a pregnancy, the contraceptive must be very effective and the use must be very faithful.

11. THE MOST IMPORTANT DETERMINANT OF THE ABORTION RATE IS THE AVAILABILITY AND ACCEPTANCE OF CONTRACEPTION.

Korea: When a country starts its demographic transition, families start limiting their fertility. In Korea, they used abortion and contraception about equally. In fact they preferred abortion - because it was a traditional method they were comfortable with. KOREA SLIDE #17

Relationship between Contraception & Abortion: A Review of the Evidence Marston & Cleland. Int Fam Plan Persp 29(1):6-11 2003

Matlab SLIDE 20

Shanghai SLIDE #25

If widespread abortion precedes contraception, then when the transition starts and people want fewer children, abortion will be the mechanism and rates will be very high. In Korea, the abortion rate got quite serious:

the average woman had 3 abortions.

Conversely, if contraception is previously available, it becomes the preferred method. Tietze & Bongaarts: Demographic Effect of Induced Abortion. Obstetrical and Gynecological Survey <u>31</u>#10 699-709 (1976). Quoted in Fert Trans in LatAm p179.

When people start wanting fewer children, both rates rise simultaneously.

As contraception becomes widespread, the women learn to trust it, to plan ahead and they then start choosing it in preference to abortion.

The abortion rate drops while the contraceptive prevalence rate keeps rising.

Contraception replaces abortion. Review of topic in Int FP Perspects, 3/03 29#1 2003

Latin America shows the same pattern: Tomas Frejka & Lucille Atkin: The Role of Induced Abortion. In Guzman : "The Fertility Transition in Latin America". SML HB940.5 A3 F47X 1996.

In Latin America abortion has been practiced for centuries.

In 1551 the Bishop of Venezuela reported to the King of Spain that the natives did not want their children to become slaves, so they aborted them.

p201: In Chile, the medical statistics are very good.

At the beginning of Chile's fertility transition, in the 1960s,

23% of Chilean women voluntarily admitted having an induced abortion.

Most of these women (the 23%) had between 1 and 3 abortions.

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8.4% of them had more than 7 abortions.

Ten years later in the 1970s, the average # of abortions/woman had risen to the high end of the previous range: women had an average of almost 3 abortions during their reproductive years. Tomas Frejka & Lucille Atkin: The Role of Induced Abortion. In Guzman : "The Fertility Transition in Latin America". SML HB940.5 A3 F47X 1996.

These were the openly admitted numbers.

The real numbers must have been much higher.

Almost all were married, middle class women who had already had 4 to 6 pregnancies.

Middle class women had more abortions than working class women.

Married women had a greater abortion rate than those living in temporary unions. Abortion was, and is, completely illegal in Chile. Tomas Frejka & Lucille Atkin: The Role of Induced Abortion. In Guzman : "The Fertility Transition in Latin America". SML HB940.5 A3 F47X 1996.

p201: In Lima, Peru, abortion was increasing rapidly in the 70s.

the yearly increase was 24%.

In any given year 1/4 to 1/3 of reproductive age women would have abortions.

In contemporary Latin America abortion is widespread.

Even though it is universally Catholic and abortion was very illegal everywhere,

Latin Americas has a very high ratio of abortion to live births,

about 1 abortion for every 2 live births.

(p182). Tomas Frejka & Lucille Atkin: The Role of Induced Abortion. In Guzman : "The Fertility Transition in Latin America". SML HB940.5 A3 F47X 1996.

p201, Guzman: Finally, younger women started adopting contraception and the abortion rate started falling.

South Asia is next in ratio of abortion to live births, but, because women get pregnant so often, it has the highest number of abortions per woman. Tomas Frejka & Lucille Atkin: The Role of Induced Abortion. Table 9.2 In Guzman: "The Fertility Transition in Latin America". SML HB940.5 A3 F47X 1996.

Among the world regions, the area with the lowest rate is Western Europe.

It has the highest contraceptive availability.

The Worlds highest rate is in Eastern Europe. Under the Soviet system, there was almost no availability of decent contraception.

The difference is huge. Western Europe has a rate of \sim 1/100, (11/1,000) Eastern Europe's rate is almost 10X as high - almost 1 in 10. (90/1,000)

That means that each year 1 in every 10 reproductive age women (15-44) has an abortion. See Table 1 pS32: INT F

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IFPP 9/05 140-149. In the Philippines, when Fidel Ramos was President, he supported FP programs and ¼ of Philippine women were using a modern method. Since then, an increasing %age of women want to limit their fertility. More than half now attempt some form of birth control. But the Presidency has changed: Gloria Macapagal-Arroyo (dependent on support of Catholic Church for political legitimacy and hence opposed to contraception). So the gov't now supports traditional FP methods on the grounds that they support family values. Abortion is strictly illegal. Hence there is little access to modern FP services. The increase in contraceptive use is mostly by use of traditional, church approved methods of rhythm and withdrawal. From 1993 to 1998 in Metro Manila, use of traditional methods increased by 50% while use of modern methods hardly budged.

The traditional methods are ineffective, especially in a poor and undereducated populace, so more than half of all pregnancies in the Philippines are unintended.

Number of abortions INCREASED FROM ~400,000 TO ~ 475,000 (1994-2000) (increase of 19%; total # of pregnancies went up only 4%). Of course all the abortions are illegal and most of the increase was from abortions performed by non-Medical providers. Abortion rate is about 1 per 37 repro age women/yr. Given a 30 yr reproductive life, that means that on average, each Philippine woman has one abortion in her lifetime.

12. IN MANY COUNTRIES ABORTION IS NOT A SOURCE OF CONTROVERSY.

After women's health class, I was having a very animated conversation with two of the students. - Prof from Russia comes up he's looking for an Electrical Engineering seminar. No, we're discussing abortion. Why would anyone be interested in that?

Romania: abortion is good. Gets rid of evil humors.

Story about using right to life films in Ukraine.

SOME COUNTRIES HAVE A 'CULTURE OF ABORTION'

For '10 this should be in reading. Substitute some from Abortion 2

CUBA Studies in Family Planning <u>40</u>:13-26 (2009).

Contraception is widely, but inconsistently, used.

Nevertheless, it has one of the highest abortion rates in the world 78/K women/year

Canada has 15 1/2

Almost 60% of known pregnancies are terminated by abortion.

Before 1938, all forms of induced abortion were legal.

In 1938 abortion was allowed in cases of rape, threat to mother's life, genetic or infection caused fetal defects.

Despite these restrictions, abortion was widely available and commonly practiced in both rural and urban settings. It was the method used by poor people. It was the principle means of fertility regulation in the country.

Contraception however, contraception tended to be available only to the most privileged groups in Cuban society. The medical school curriculum did not include detailed contraceptive education.

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Although illegal, abortion is widely available.

The Cuban Revolution with Fidel Castro as its leader succeeds in 1959.

Government starts stringent enforcement of the strict 1938 anti-abortion laws.

In 1962, the US places an embargo on trade with Cuba – including medical supplies. Cuba loses its source of contraceptives.

Illegal abortion became more entrenched. Maternal mortality (death) & morbidity (sickness) went very high.

In response, to reduce mortality & morbidity, Cuba legalizes abortion (1965).

The embargo causes the economy to near collapse. Professionals, including doctors, can't earn a decent living, so they migrate to the US. Castro nationalizes the health care system: more physicians emigrate. A further drop in expertise on contraceptives. Physicians who remain are afraid to go against the stringent enforcement of the anti-abortion laws.

While abortion is legal in Cuba, the government wants to reduce it. In 1998 Castro gave a 7 hour speech condemning abortion as a birth control method. He said that it was his duty as a public figure and revolutionary leader to oppose widespread abortion.

An official 2006 Cuban government position paper restated the government's desire to wean its people off abortion and encourage contraception.

Not only the government, but the medical establishment, tries to discourage abortion.

Interviewer: What have you heard about abortion from doctors and health-care professionals?

Respondent: Well, that it's dangerous, that you can die from it, but just imagine if you had to give birth every time you got pregnant. I got pregnant and had an abortion when I was 15, even though I was on the pill. I also got pregnant earlier when I was using an IUD. [Female, aged 30; fourth abortion]

While the government tries hard to push contraception instead of abortion.

The people aren't buying it.

It is a common and unremarkable subject for discussion:

R: "I was about ten years old, I heard about [abortion] from people on the street, also in my house my mom talked about it with her friends in front of me." [Male, aged 49]

R: "Around the streets, [abortion is] a common thing that people talk about;

it's an everyday thing." [Male, aged 23]

I: Do you know anybody in your family or among your friends who has had an abortion?

R: Yes, an aunt of mine.

I: What did she tell you?

R: That you don't feel anything, that they give you the anesthetic and stuff; everything goes fine. [Female, aged 18, first abortion]

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*R*2: Yes, friends of mine; they told me that they had it done and that you don't feel anything. [Female, aged 15, first abortion]

R3: My cousin had an abortion. She told me that nothing out of the ordinary happened, that everything went well. [Female, aged 21, second abortion]

R4: When I was in school, a friend of mine had an abortion.

She was fairly young, around 13 years old, because we were in eighth grade.

I: What did she tell you? How did it go?

R4: She told me it went well and said the anesthetic was fine.

Girls talk about that kind of stuff. [Female, aged 31; fourth abortion]

I: Have you heard much talk about abortion?

R: Yes, among girls at school. They don't use anything [contraceptives], and when they get pregnant, they go get an abortion. They talk about it like it's nothing, it's like drinking a glass of water. Some people have problems when they get an abortion, but most people don't. Almost always, the procedure goes fine. [Female, aged 17, first abortion

Meanwhile, the women have almost all used, and are using, contraception:

92% of women (15-49) have used a contraceptive at some point in their lives.

Among adolescent girls, 84% have used contraception

But they often don't like it.

R: I don't like the pill because it is extra hormones in the woman's body.

[Male, aged 19]

R: No, I don't use any [IUD] because my body can't support it; it falls out of place.

I: So you have used an IUD in the past?

R: Yes, I had an IUD two different times, and both times it fell out of place.

I have problems with IUDs.

[Female, aged 37; second abortion]

Another common comment was that the IUD caused pain or damage.

R: After my first [pregnancy], I had an IUD inserted, but I had to have it removed because it was causing pain. I started having problems with my period and a lot of inflammation, and when I had sex it was painful, so I had the IUD removed. [Female, aged 35; first abortion]

I had [an IUD] before; I had it for two years, but I had it removed because I had abnormal [menstrual] bleeding. [Female, 42; 4th abortion]

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Sometimes we used protection, but the condom broke.

You explain these things to the doctors, and they say that this doesn't happen, but I'm telling you it is not a lie. Sometimes condoms are bad and they break. [Female, aged 19; third abortion]

88% reported practicing contraception at the time of the survey

Among adolescent girls, 68% were using at the time of the survey.

What is happening, is that the women are using both methods.

Since they don't see any problems with abortion, they're not very careful with their contraception.

Their use of contraception is 'inconsistent and discontinuous.

they go on and off the contraceptive method fairly randomly.

Periods of temporary or permanent contraceptive nonuse do not correspond consistently to patterns of sexual activity or to a desire to become pregnant.

Indeed, periods of contraceptive nonuse commonly occurred while participants were sexually active and explicitly did not wish to become pregnant.

In short, the women have extensive experience with contraception and abortion and many of them prefer abortion. Government and Medical opposition seem to make little difference.

13. ABORTION MAKES A HUGE DIFFERENCE IN THE GLOBAL RATE OF POPULATION GROWTH

75 million increase as it is now.

w/o abortion = 120 million. Increase is +60%

probably no possibility of population stabilization without abortion.

