POPULATION SOCIÉTÉS



Teenage pregnancies in France: what has changed in the last twenty years?

Twenty-five years after the Veil law legalizing abortion was passed on January 17, 1975, abortion is once again an important subject of debate in France. Several modifications to the law are presently under consideration, in particular a possible extension of the legal gestational age limit (from 10 to 12 weeks of pregnancy), and the softening of parental authorization requirements for minors. Has the incidence of pregnancies and abortions among under-age teenagers varied over the past twenty years? For what reasons?

A decline in the total number of teenage pregnancies

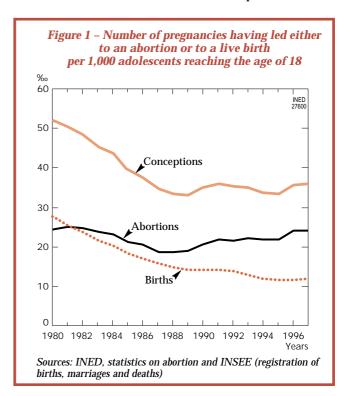
The number of teen pregnancies under age 18 has decreased by 36% in 17 years, from 20,710 in 1980 to 13,192 in 1997 (the figures are not adjusted to the underregistration of abortions, see box 1). Though this massive decline did result in a 60% drop in the number of subsequent live births (from 10,614 in 1980 to 4,170 in 1997, respectively 1.3% and 0.6% of all live births), the annual number of declared abortions among minors hovered somewhere between 8,000 and 10,600, in other words between 4.9% and 5.9% of the total number of abortions (see table 1). Seventeenyear olds are responsible for about half of all underage births and abortions.

A sharp drop, followed by stagnation, in the teenage pregnancy rate

Over this 20-year period, the number of teenagers likely to conceive varied according to past birthrate fluctuations. The baby-boom came to an end in the 60s and 70s, and the Neuwirth law on contraception was enacted at that time (the law was passed in 1967 and entered into force in 1971). Between 1980 and 1997, the number of girls aged 12 to 17 fell by about 10% — from 2,539,274 in 1980 to 2,301,618 in 1997. By comparing the number of pregnancies at each age to the total number of adolescents of that age, and by adding up these rates, it appears that in 1980, out of

1,000 young women reaching their 18th birthday, twenty-eight had already given birth to a child and 24 had already had an abortion. By 1997, the proportion of young women who had had a child by the time they reached 18 had dropped to 12 per 1,000, whereas the rate of those who had had an abortion remained stable at 24 per 1,000. Nineteen per 1,000 were pregnant; among those, 10 led their pregnancy to term and 9 had an abortion (see table 1 and figure 1).

Overall, the pregnancy pattern of girls aged 12 to 17 went through two main phases. During the first phase — throughout the 1980s —, the proportion of pregnant teenagers sharply decreased, down 5.4 % per year, with a resulting drop in live births and, to a lesser extent, in abortions. A turnaround occurred in the 1990s: since 1989, the rate of conceptions has sta-



bilized (35 conceptions per 1,000 adolescents aged 18), but the incidence of abortions has risen by 2.8 % per year. The birthrate, on the other hand, continues to decline.

Over the past few years, the median age of women at first intercourse has remained stable at 17-18 years [5], which means that this factor does not play a role in the changes observed. However, if the age at first intercourse has not changed, the use of contraception has steadily increased since the 1970s. Thus, 51% of the women whose sexual experience began in 1970 did not use contraception at first intercourse, as opposed to 30% in 1988 [6] and only 16% in 1993. The use of condoms at first intercourse rapidly climbed during the last decade, replacing oral contraception: in 1987, only 8% of women used condoms during their first

sexual experience, but this proportion grew to nearly 90% towards the end of the 90s. Thus, due to the growing popularity of condoms, recourse to oral contraception at first intercourse declined.

The increasing frequency of abortions...

Although the absolute number of teenage pregnancies and the proportion of adolescents who become pregnant have both plunged in the last twenty years, the absolute number of abortions among minors has remained stable, since abortion is more often resorted to in case of pregnancy (2/3 of conceptions in 1997 compared to 1/3 in 1980). Although the abortion ratio is higher as the adolescents are younger, it has increased among all teenage groups, with more or less intensity (figure 2).

... does not call into question the effectiveness of contraception

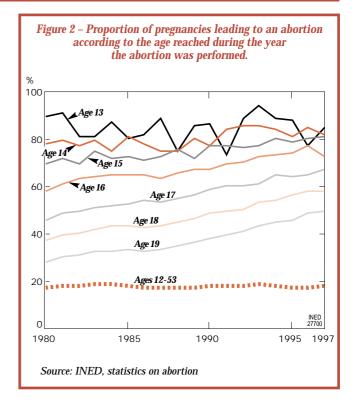
The increasing frequency of abortions does not call into question the effectiveness of contraception. The trend corresponds to changes in the choices of pregnant teenagers, and reflects an ever clearer wish to postpone unplanned and premature motherhood. Along with the increase in the average age at child-birth and in the time devoted by girls to their studies, the rise in the tendency to have an abortion in case of pregnancy reflects deep societal change, since women have gained a great deal of ground in terms of professional qualifications and importance. Now that modern means of contraception have become wide-spread, women are less and less willing to accept unplanned events in their childbearing schedule [3]. Although the effectiveness of contraception methods

Table 1 – Conceptions among minors and their outcome in metropolitan France, from 1980 to 1997

	1980	1990	1997
Number of abortions performed on minors			
as of declaration date* (a)	10 096	8 317	9 022
as of conception date*	12 476	9 790	10 579
as of conception date (adjusted for underregistration)	17 622	12 734	13 694
Live births among minors			
as of delivery date (b)	10 614	5 357	4 170
as of conception date	16 939	8 520	6 356
Number of conceptions of minors (a)+(b)	20 710	13 674	13 192
For 1,000 adolescents reaching 18:			
number of conceptions leading to an abortion*	24	21	24
number of conceptions leading to a live birth	28	14	12
number of pregnancies under way:	35	20	19
leading to an abortion*	9	8	9
leading to a live birth.	26	12	10

^{*} figures not adjusted for the underregistration of induced abortions (forms not turned in, undeclared abortions, etc.). The actual extent of underregistration has not been determined, it may reach somewhere near 20% or 30%, but it does not seem to have changed since 1980.

Sources: INED, statistics on abortion and INSEE (registration of births, marriages and deaths)



may also have an incidence on abortion rates, the latter can also vary according to the decisions made by the pregnant teenagers themselves; as a result, it is very difficult to determine the relative importance of each of these two factors. Teenagers and older women usually request an abortion at a later gestational stage than average, a fact which reflects the often unexpected nature of pregnancy at these ages (1); therefore the extension of the legal deadline will benefit pregnant women at either end of the fertility range.

Box 1

Assessing abortions

In France, abortions are counted mainly on the basis of the anonymous forms turned in by each patient after an abortion. In compliance with the 1975 law on abortion, INED, in collaboration with INSERM, is in charge of performing the statistical analysis of the data. However, not all abortions are registered, as shown by the discrepancies between the figures provided by the annual statistics of health care institutions (190,248 in metropolitan France for 1997) and the number of forms returned (163,985 the same year, or 14% fewer) [1]. In addition, some abortions are declared under different names – as a miscarriage for instance –, or performed abroad, and for these reasons they do not appear in national statistics [2]. In the *Report to Parliament on the Demographic Situation in France* drawn up by INED [3], the published figures take into account a statistical estimation of underregistration. In the French *Abortion Statistics* published each year since 1976 by INED [4], the figures are not adjusted for underregistration. Even so, this data represents an extremely valuable resource for detailed analyses of trends since 1980, when the data collection process became more systematic.

Births and abortions can be counted in two ways: either at the time of the event, or at the time of conception. The law refers to criteria drawn from the first method. If the number of births and abortions among minors were to be assessed as of the time of conception, the figures would be higher (see table 1).

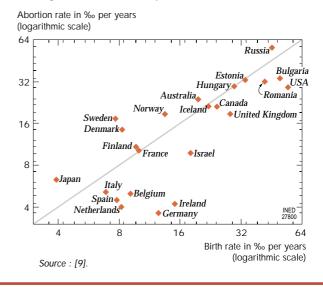
The number of conceptions or pregnancies is thus defined as the total sum of live births and declared induced abortions in one year; this figure does not take into account spontaneous abortions (about 130,000 per year for women of all ages) and stillbirths (about 3,500 per year).

Box 2

France, compared to other developed countries

Figure 3 illustrates a recent international survey [9] on birth and abortion rates among adolescents aged 15 to 19, in countries where such statistics are available. The countries with high birth and abortion rates are on the top right hand side of the graph - these include former countries of the Eastern bloc, but also the United States. At the other end, southern European countries such as Italy or Spain have both low birth and low abortion rates. However, the fertility rates of the latter countries are also among the world's lowest at all ages. Anglo-Saxon countries have higher rates than northern European countries. In the Netherlands, the overall fertility rate is close to the generation replacement threshold, but the teenage conception rate is low, and the abortion rate even lower, probably due to a more widespread use of the morning-after pill. In this graph, France holds an intermediary position between the South and the North, with pregnancy rates about twice as high as those of the Netherlands. This observation remains true even if one accounts for the underregistration of induced abortions.

Figure 3 – Birth and abortion rates among adolescents aged 15 to 19 in developed countries, around 1995.



Why aren't teenage pregnancies declining more?

Several factors explain why the incidence of pregnancies among teenagers has ceased to decline. In the first place, there are teenagers who do wish to have a child, in some cases for the sake of creating a stable relationship with a man and gaining social status [7]. Secondly, condoms, which are now commonly used owing to the aids epidemic, usually represent a temporary solution in the early stages of a person's sex life or of a relationship. If the relationship becomes stable, condoms are often no longer used and are replaced by the pill. Paradoxically, although the very first sexual encounters are well protected, switching to another form of contraception may sometimes be problematic [8]. Oral contraception is not necessarily taken for granted by the younger generations, since the emphasis on Aids prevention somewhat left the contraception issue on the sidelines. The transition from condoms to oral contraception can be a problem for some teenagers, for instance in cases where parent-child relationships are difficult.

Thanks to a long-term effort to launch new information campaigns on oral contraception, and by making the morning-after pill more easily available, France should be able to match the Dutch and reduce its abortion rate by half (see box 2).

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⁽¹⁾ Between the ages of 40 and 45, 70% of women request abortions before the end of the 7th week of pregnancy (9th week of amenorrhea), whereas the proportion falls to 62% for women over 50 and down to 52% for minors. For the latter, the mean gestational age at the time of the abortion is higher by about a week than for other women.

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- [5] M. Bozon "L'entrée dans la sexualité adulte : le premier rapport et ses suites", *Population*, 1993/5, p. 1317-1352.

Were more babies born

in 2000?

The figures quoted in the issue no. 352

of Population et sociétés, provided by

the "Caisse nationale d'assurance

maladie" (French National Health

Insurance) on current pregnancies

gave us no reason to expect a sudden peak in the birthrate around January

1st, 2000 [1]. Indeed, currently avai-

lable data from the French National

Statistics Institute (INSEE) shows that

the number of births did not signifi-

cantly increase around New Year's

day. On January 1st and 2nd, the number of births (a little over 1,600

births on each of these days) was

slightly lower than the daily average

for January 1999 and 1998 (1,900

births). January 1st was a holiday and

January 2nd was a Sunday. It appears

that the Sunday and holiday birthrate is 25% lower than that of ordinary

weekdays, because those births which

can be planned in advance are often

scheduled by doctors on weekdays.

Though still not final, the daily figures

for that period do not show any speci-

fic peak around January 1st, 2000 (see figure 1). Fewer babies are usually

born during the last two (holiday)

birthrate rose considerably during the period January to March: up 6% com-

pared to the first three months of 1999 and 1998 (figure 2) [2]. In January

2000, there were 63,700 births, 4,100

more than in January 1999. Similarly, the number of births in February rose

sharply (+ 4,800), an increase which is

only partly due to the fact that 2000

was a leap year (a little over 2,000 babies were born on February 29th,

The increase reported in the first

quarter could be due to the fact that

some prospective parents postponed

births which would normally have

occurred at the end of 1999, so that

their child might be born on January 1st, 2000 or during the year 2000. In fact, few people actually did so, since more births were registered during the last quarter of 1999 than during

On the other hand, the monthly

weeks of December.

2000).

- [6] L. Toulemon and H. Leridon "Vingt années de contraception en France: 1968-1988", *Population*, 1991/4, p. 777-812; "Twenty years of contraception in France 1968-1988", Population: An English Selection, 1992, no. 4, pp. 1-34.
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- [8] H. Lagrange and B. Lhomond L'entrée dans la sexualité. Le comportement des jeunes dans le contexte du sida, La Découverte, 1997.
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What's new

births may continue throughout the year. Indeed, more births were registered for the second quarter of 2000 than for the same period of the previous year (up 4%), and the same is true for July. The increase of the first seven months of the year 2000 may thus be the sign of an overall rise in the birthrate for the entire year.

These estimations are still temporary and must be viewed accordingly. The bilan démographique 2000 (demographic report for 2000), whose publication is scheduled for February 2001, should provide additional data

concerning a possible "Y2K effect" on the birthrate, on the basis of seasonally and daily adjusted figures. We will have to wait till 2001 to find out whether the 2000 increase was only a cyclical peak or whether it is the sign of a more long-term trend.

Lionel Doisneau (INSEE)

- [1] A. Chastand and L. de Martini "Y aura-t-il un baby-boom au début de l'an 2000?", *Population et sociétés*, n° 352, décembre 1999.
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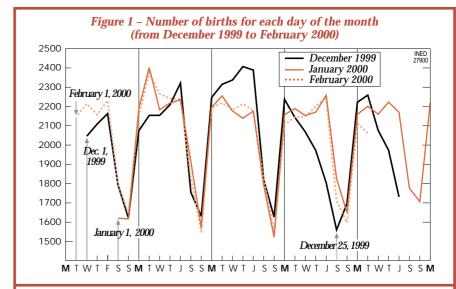


Figure 2 – Mean number of births per day, for each month (August 1997 to July 2000)

2300
2250
2200
2150
2100
2050
2000
1950
1998-1999
1998-1999
1998-1999

Sources of figures 1 and 2: INSEE, registration of births, marriages, deaths.

The increase in the number of

the last quarter of 1998.