

Population & Societies

Recourse to abortion is decreasing, but repeat abortions are more frequent

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Forty years ago, on 17 January 1975, the Veil Law was passed, authorizing abortion in France. It was made permanent in 1979 and subsequent amendments have made access to abortion easier: reimbursement by the health insurance system in 1982, less restrictive conditions of access and a lengthening of the legal deadline for abortion in 2001. The notifications completed by physicians for each abortion provide a means to analyse changes in behaviour over time.

Starting in 1975, when abortion was legalized in France, [1] the number of abortions began to fall as contraception became more widespread, and later levelled out. Underlying trends over the years reflect changes in women's life trajectories.[2]

Average age at abortion 27.5 years in 2011

The number of abortions has mirrored that of births since 1995; total fertility rose from 1.9 children per woman in 1975 to roughly 2 in the early 2010s, with a dip in the mid-1990s (1.7 in 1995) (Figure 1). The total abortion rate moved similarly, albeit at a much lower level (one-quarter of the fertility rate in recent years): from 0.66 per woman on average in 1975 to 0.53 in the early 2010s, with a minimum of 0.43 in the mid-1990s. Births are occurring later, with average age at birth rising from 26.7 years in 1975 to 30.1 in 2010 (Figure 2). Average age at abortion, on the other hand, fell from 28.6 years in 1975 to 27.5 in 2003, where it has since levelled out.

Like births, abortions occur more often in the central fertile ages (Figure 3). Trends have been followed since 1981, the first year for which complete statistics are available (Box). From 1981 to 1996, the number of abortions decreased at all ages. From 1996 to 2011 they remained stable above age 25 but increased below that age.

Figure 1. Total abortion and fertility rates

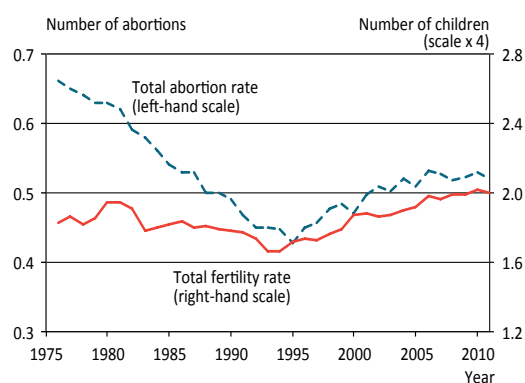
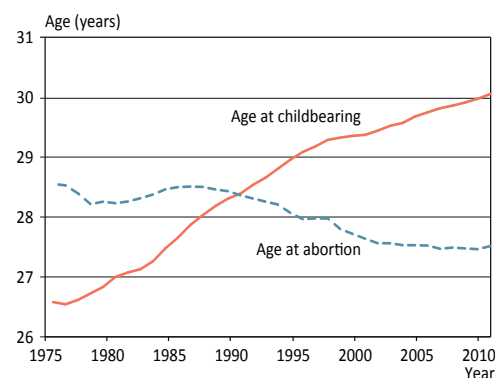


Figure 2. Mean age at childbearing and abortion



Coverage: Metropolitan France.

Source: DREES, INED, INSEE and authors' calculations.

The proportion of pregnancies terminated by an abortion continues to peak at the two ends of childbearing life, as in the past (Figure 4). It was highest among older women in 1981 and 1996, and is now (2011) highest among the youngest women.

The wide use of family planning by both women and men, the concentration of fertility between ages 25 and 35, and the rarity of births among the very young all provide evidence of young women’s greater freedom to terminate an unwanted pregnancy if they wish, and of the increasing marginalization of teenage pregnancies and “early” childbearing. Over the years, pregnancies among the very young have become less frequent and more often end in abortion. The increase in abortion rates among teenagers noted in the late 1990s and early 2000s, at a time when age at first sexual intercourse was decreasing and age at first birth was rising, may be interpreted not as a greater exposure of these women to risk, but rather as an increase in abortion-seeking for unwanted or poorly timed pregnancies [3].

The curve of the abortion rate by age has evolved, with an increasing concentration at certain ages (Figure 3). At ages 19-25, abortion rates exceeded 25 per 1,000 in 2011. There are almost as many abortions among young women now as in the early 1980s, whereas above age 25 the rate has fallen significantly.

Abortions occur before end of seventh week on average

The 2001 Law raised the maximum gestational age for abortion from 10 to 12 weeks, or from 12 to 14 weeks of amenorrhea (WA). Mean gestational age at abortion, whatever technique is used, held steady from 1990 to 2000, then rose slightly in the year after the new law came into force, before falling slightly in recent years (8.4 WA in 2011, down from 8.8 WA in 1990 and 9.1 WA in 2002, i.e. 6.4 weeks of pregnancy compared with 6.8 and 7.1). This fall in gestational age at abortion is mainly due to the wider use of medical abortion procedures. The decree of 1 July 2004 allowed women to seek a medical abortion from a primary care practitioner up to 7 WA, or 5 weeks of pregnancy. The circular of 6 October 2009 extended the list of professionals authorized to practise medical abortions to include family planning and education centres (*centres de planification et d’éducation familiale*, CPEF) and health centres.

Medical techniques, authorized in hospitals since 1988, have been more widely used since 1990, and by 2008 they were used for a majority of abortions: 16% in 1990, 36% in 2002 and 55% in 2008.[4]

For medical abortions, the mean gestational age is lower than for surgical ones: just over 7 WA (7.2 in

Figure 3. Abortion rate per 1,000 women by age

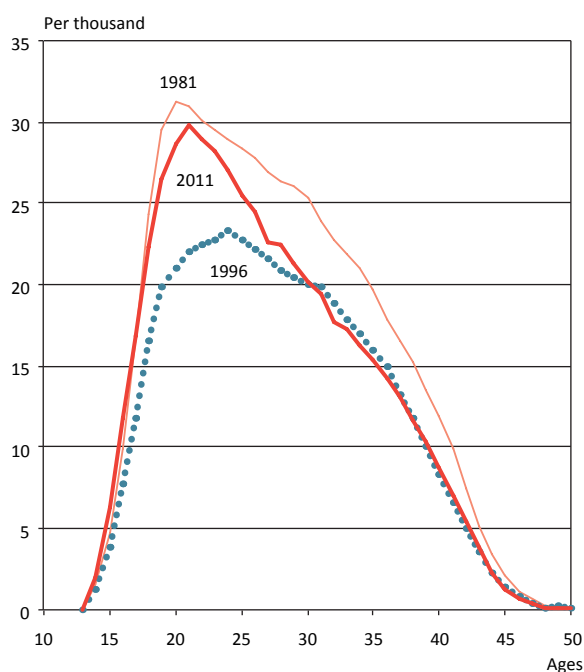
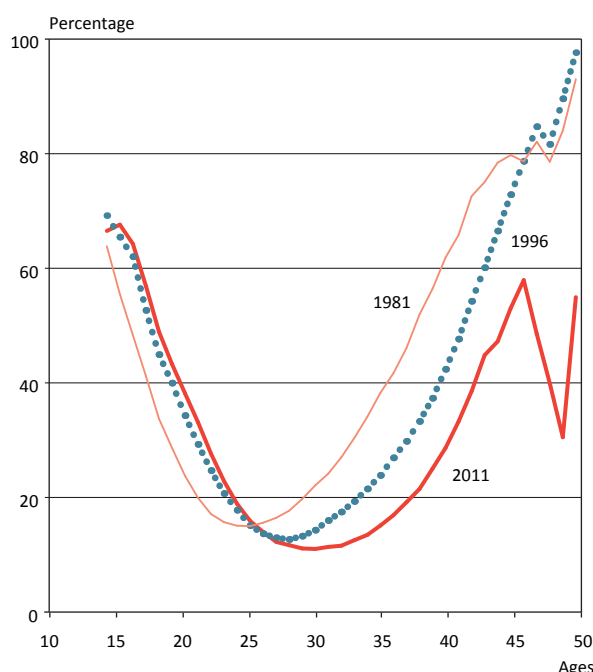


Figure 4. Abortions per 100 pregnancies



Coverage: Metropolitan France.

Source: DREES, INED, INSEE and authors’ calculations.

Note: Age in completed years. Each curve represents one calendar year. Births have been shifted left by 32 weeks to an equivalent gestational age at abortion. Miscarriages and stillbirths are not included.

1990 and 2005, and 7.1 in 2011), or 5 weeks of pregnancy, compared with nearly 10 WA (8 weeks of pregnancy) since 2002 for surgical abortions. For the latter, mean gestational age rose nearly one week between 1997 and 2002, from 9.1 to 9.9 WA (7.1 to 7.9 weeks of pregnancy), and then levelled out, because medical abortions replaced some of the surgical ones in the earlier weeks.

The distribution of abortions by gestational age changed between the 1990s and 2011 (Figure 5). Initially, the curves for 1990 and 2002 are similar, peaking at 8 WA (6 weeks of pregnancy). In 2002, the 2001 Law had a slight effect on the curve, which flattens out towards higher gestational ages (11 or more WA, at the expense of abortions at 7, 8 and 9 WA). The rise in the legal limit appears to have enabled practitioners to spread abortions over time but not necessarily to have better handled late requests from women previously over the legal limit. [5] From 2002 to 2011, the curves peak earlier, reflecting the increased diffusion of medical procedures. The modal gestational age decreases (24% of abortions at 6 WA in 2011) and then the curve falls regularly up to 14 WA.

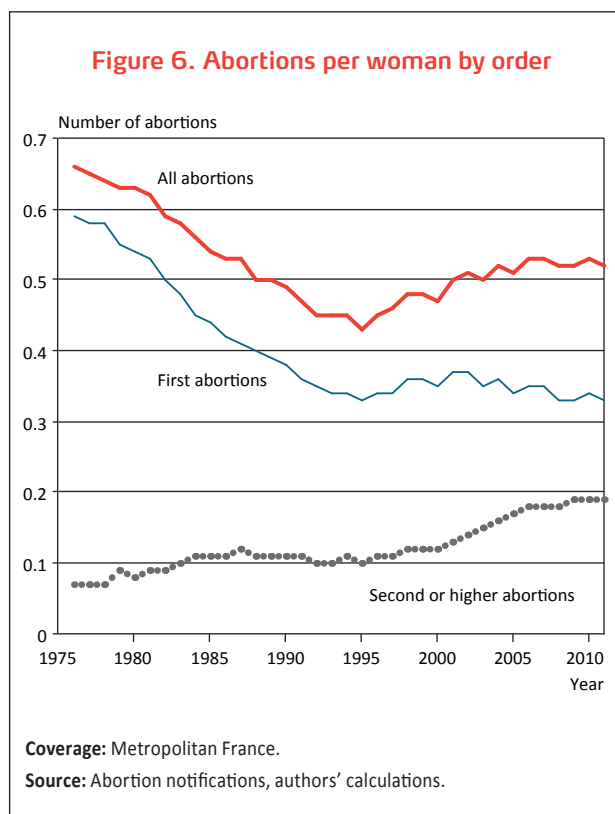
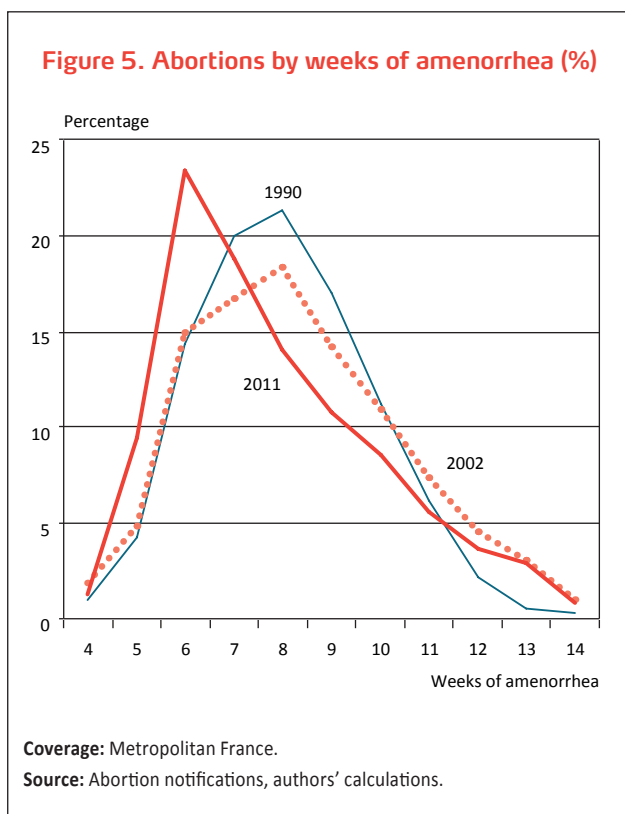
Fewer women are having abortions, but repeat abortions are more frequent

From 1976 to 1995, the total abortion rate fell from 0.66 per woman over her lifetime to 0.43, and then rose to 0.53 in 2011 (Figure 1). An average of 0.5 abortions per

woman may correspond to very different situations. If there were no repeat abortions, then it would mean that half of all women have one abortion during their lives. Alternatively, if those who seek abortion have an average of two during their lives, then an overall average of 0.5 would mean that one-quarter of women have two. The current situation falls between these two extremes: according to the 2011 data, one-third of women have an abortion during their lives, and this group has an average of 1.5.

Since 1975, the proportion of repeat abortions has risen continuously (Figure 6). In the 1970s, they represented less than one in ten of the total, but may have been preceded by one or more illegal abortions before 1975, not reported in the notifications. After 1980, the proportion of repeat abortions continued to rise, and third and subsequent abortions also became more frequent. On the basis of the distribution of abortions by order at each age and in each year, it is possible to break down the total indicator into average numbers of first and repeat abortions per woman (Figure 6). According to this estimate, the number of first abortions per woman was 0.33, meaning that 33% of women have an abortion at least once in their lives.

The proportion of women in France who have more than one abortion is still low: 9.5% of women have two abortions, and 4.1% three or more during their lifetime. [2] Since the 1970s, greater use of effective contraception has reduced the frequency of unwanted pregnancies, but when they do occur, they are more often terminated, so the total number of abortions has not fallen. The rise



in the legal limit in 2001 neither sustainably raised the mean gestational age at abortion nor increased the number of abortions. The proportion of first abortions continues to fall, but after a first abortion, the probability of having another is increasing. This is probably due to a growing diversity in women's childbearing, conjugal, affective and sexual trajectories, and for some, more specifically, the use of contraceptive methods inappropriate to their life situations,[6] despite the wide availability of contraception.[7] The choice of whether or not to end a pregnancy has become a right rather than a last resort.

Sources of data

Abortion notifications

Since the 1975 Law, every abortion entails the completion of an abortion notification (*bulletin d'interruption de grossesse*) by the physicians involved, guaranteeing patient anonymity. This provides details of age, stage of pregnancy, type of procedure (data also available in health statistics), the sociodemographic status of the women having an abortion, their number of previous abortions, and the date of the last one. [2]

Programme médicalisé des systèmes d'information (PMSI)

Data from the PMSI medical statistics database have been supplemented annually for abortions by statistics from the national wage employees' health insurance fund, CNATMS, since 2005 and from other funds since 2010. The PMSI data cover age at date of abortion, method used, type of medical facility, locality and, since 2012, gestational age. [4]

Abortion surveys

The most recent specific survey of women who had had abortions was carried out in 2007 on a sample of 13,000 women. This type of survey collects information about the situation and background of women who have terminated a pregnancy. Other general population surveys also collect abortion data, especially surveys of sexuality or contraception. The latest contraception survey, "Fécondité, contraception et dysfonctions sexuelles (FECOND)", was carried out in 2010; abortions are substantially under-reported in this type of survey, however. [7]

References

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- 4] Vilain A., Mouquet M.-C., 2014, "Les interruptions de grossesse en 2012", Drees, *Études et Résultats*, 884, 6 p.
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- 6] Bajos N., Prioux F., Moreau C., 2013, "L'augmentation du recours répété à l'IVG en France : des enjeux contraceptifs au report de l'âge à la maternité", *Revue d'épidémiologie et de santé publique*, 61(4), pp. 291-298.
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Websites

General information and legal provisions:

www.sante.gouv.fr/ivg

Statistics published by INED since 1976 :

www.ined.fr/en/everything_about_population/data/france/abortion-contraception/abortions/

Abstract

In 2011, there were nearly 210,000 abortions in France, corresponding to 0.53 per woman during her lifetime. After falling between 1975 and 1995, numbers of abortions rose again slightly and have levelled out since around 2010. Average age at abortion remains stable, at 27.5 years. The proportion of repeat abortions is increasing steadily. One-third of women have at least one abortion during their lives, of whom 10% have two and 4% three or more. As the proportion of medical abortions rises, average gestational age at abortion is falling. It stood at 6.4 weeks in 2011, down from 7.1 in 2002.