

Methodology

To answer basic questions about abortion in the United States, we reviewed reports from two organizations that have been compiling relevant data for more than half a century: the U.S. Centers for Disease Control and Prevention (CDC) and the Guttmacher Institute.

The organizations compile data in different ways.

CDC data

The CDC data highlighted in this analysis comes from the agency’s “abortion surveillance” reports, which have been published annually since 1974 (and which have included data from as far back as 1969). Its figures from 1973 through 1996 include data from all 50 states, the District of Columbia and New York City – 52 “reporting areas” in all.

Since 1997, the CDC’s totals have lacked data from some states (most notably California) for certain years. The four reporting areas that did not submit data to the CDC in 2022 – California, Maryland, New Hampshire and New Jersey – accounted for approximately 25% of all legal induced abortions in the U.S. in 2020, according to Guttmacher’s data. Most states, though, *do* have data in the reports. The figures for the vast majority of states came from each state’s central health agency, while for some, the figures came from hospitals and other medical facilities.

[Read the methodology for the CDC’s latest abortion surveillance report](#), which includes data from 2022, for more details. Previous reports can be found at stacks.cdc.gov by entering “abortion surveillance” into the search box.

Guttmacher data

Guttmacher data in this post comes from national surveys of abortion providers, which Guttmacher has conducted 19 times since 1973. Guttmacher compiles its figures after contacting every known provider of abortions in the country, including clinics, hospitals and physicians’ offices. It uses questionnaires and health department data, and it provides estimates for abortion providers that don’t respond to its inquiries. (In 2020, the last year for which it has released annual data on the number of abortions in the U.S., it used estimates for 12% of abortions.) For most of the 2000s, Guttmacher has conducted these national surveys every three years, each time getting abortion data for the prior two years. For each interim year, Guttmacher has calculated estimates based on trends from its own figures and from other data.

The latest full summary of Guttmacher data is in the institute’s report titled [“Abortion Incidence and Service Availability in the United States, 2020.”](#) It includes figures for 2020 and 2019 and estimates for 2018. The report includes a methods section.

Since the 2022 decision by the U.S. Supreme Court that overturned *Roe v. Wade*, Guttmacher has stopped collecting data as it did previously. It now publishes [monthly figures based on a sample of abortion providers](#). These samples are not directly comparable to the annual, national tallies of abortions that are discussed in this post.

This analysis also uses data from [Guttmacher’s February 2026 report on the number of abortion providers](#), which does not include figures for hospitals and physicians’ offices that conduct fewer than 400 abortions per year.

Other sources of data

For the numbers of deaths caused by induced abortions in 1963 and 1965, this analysis looks at reports by the then-U.S. Department of Health, Education and Welfare, a precursor to the Department of Health and Human Services. In computing those figures, we excluded abortions listed in the report under the categories “spontaneous or unspecified” or as “other.” (“Spontaneous abortion” is another way of referring to miscarriages.)

In addition, this post uses data from StatPearls, an online healthcare resource, on complications from abortion.