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No. 15, 2009

Teerawichitchainan, Bussarawan and **Sajeda Amin**. "The role of abortion in the last stage of fertility decline in Vietnam," *Poverty, Gender, and Youth Working Paper* no. 15. New York: Population Council. ([PDF](#))

ABSTRACT

Vietnam's rapid fertility decline from 5.7 births per woman in 1979 to 2.1 in 2005 can be explained by very high rates of contraceptive use and induced abortion. Despite the overall decline, fertility rates vary considerably across the country's 54 ethnic groups. While the majority Vietnamese (i.e., Kinh) and a few other ethnic minority groups have already completed the transition to replacement-level fertility, this is not the case for a substantial fraction of Vietnam's disproportionately poor ethnic minority populations. The last stage of fertility decline in Vietnam, therefore, has much to do with addressing the needs of ethnic minorities. To explore the prospects for further fertility decline through use of abortion among high-fertility minority populations, this study analyzes unique data from the Vietnam National Health Survey to examine ethnic differentials in prevalence and determinants of abortion and contraception, using a new classification system for ethnicity. We find that use of abortion is high in Vietnam but not as high as previously reported. Abortion is more common among older and better-educated women with more children and among married women from the more privileged ethnic minority groups. Our findings also suggest that abortion rates are higher among married women who practice traditional methods of contraception. Abortion is more closely correlated with volition rather than disempowerment. Providing improved abortion services by itself is unlikely to reduce fertility among high-fertility minority groups. Service provision needs to be offered along with policies and other steps that improve family planning programs and promote women's education and later-age childbearing.

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