The Ghanaian abortion law was amended in 1985 to ensure more availability and accessibility of safe abortion services as permitted by law. Contrary to the legal provision for abortion in Ghana, anecdotal evidence suggest the use of abortion as a family planning option in Ghana hence this exploratory study. Using a crosssectional and descriptive design, data was obtained from 50 health facilities comprising private (42) and Non-Governmental Organizations (NGO) (8). Ten indepth interviews were also held with midwife providers (6) and medical officers (4) between January 2010 and December 2017 in Accra and Kumasi Metropolises. Findings show that patronage of abortion services in health facilities within Accra and Kumasi Metropolises increase steadily each year. Abortion services in NGO facilities were however reported as target driven and providers' performances/ bonuses were tied to meeting set targets thereby encouraging abortion on demand. Whereas NGO facilities provide both abortion and full contraception method mix, majority (38 out of 42) of private facilities provide only abortion services. Those providing contraception focus mainly on short term methods (pills and injections) due to lack of interest and/or trained providers. There is more midwife lead abortion providing facilities in Accra (40) than in Kumasi (10). Where midwives provided abortion services, contraceptives were readily available and clients encouraged to take a method following abortion. This practice was very common in NGO facilities as post abortion contraception was reported to be a mandatory package. Increasing numbers of abortions in the study area coupled with reported target setting for abortion services suggest abortion on demand and its being used as a family planning option. A nationwide facility based assessment of abortion and contraception service delivery is recommended to inform policy.