

New estimates of U.S. unintended pregnancy: Taking timing into account

Lawrence B. Finer, Laura Lindberg and Cecily Stokes-Prindle

Abstract

One common criticism of the traditional measure of pregnancy intention is that it provides only general information about relative timing — whether or not the pregnancy occurred too soon — without distinguishing the specific amount of mistiming. A pregnancy that is too soon by a few months may not be unintended in the same way as a pregnancy that occurred five years too soon. We draw on previous work arguing that the most important dividing line is two years. We create a revised four-category measure of pregnancy intendedness: intended, mistimed by less than two years, mistimed by two or more years, and unwanted. In this paper, we use a range of government and specialized data sources to estimate unintended pregnancy rates in these four categories for 2001. We stratify our estimates by age and union status, allowing us to consider the role of the life course factors in determining pregnancy intentions.

Introduction

Unintended pregnancy is a significant public health concern. It has been linked to a variety of poor outcomes for mothers and children, and it places a high cost on an already overburdened health care system. In the United States, for the past decade, about half of all pregnancies have been unintended.

While there is general agreement that unintended pregnancy is a social and health issue deserving of attention, a debate has arisen about the definition and validity of the concept of pregnancy intendedness itself. Early fertility intent surveys in the United States were focused on family size goals and administered only to married couples. Today's surveys include young and unmarried women, but intent measures have not moved far enough past their roots to reflect the new broader context of intendedness and the reality of pregnancy in the lives of American women. We used data from the 2002 National Survey of Family Growth

The most commonly used data set to measure pregnancy intentions in the U.S. is the National Survey of Family Growth (NSFG). Since its creation in 1973, the NSFG has classified

pregnancies as wanted, unwanted or mistimed. Survey participants are asked whether, right before they became pregnant, they wanted a(nother) baby at any point in their future. If they indicate that they wanted no more children at any point, the pregnancy is classified as unwanted. If they indicate that they wanted a(nother) baby at some point in the future, the pregnancy is considered wanted. Participants with wanted pregnancies are then asked whether the pregnancy came sooner than they would like, at about the right time, or later than they would like. Pregnancies that came sooner than preferred are considered mistimed. Unintended pregnancies are considered to be the sum of unwanted and mistimed pregnancies; intended pregnancies are those that occurred too soon or at the right time.

One common criticism of the traditional measure of pregnancy intention is that it provides only general information about relative timing — whether or not the pregnancy occurred too soon — without distinguishing the specific amount of mistiming. A pregnancy that is too soon by a few months may not be unintended in the same way as is a pregnancy that occurred five years too soon. Compressing all mistimed pregnancies into one group, regardless of degree, creates an overly broad category and likely results in a significant loss of information.

In prior work, we engaged in detailed analysis of how to better incorporate aspects of pregnancy timing into the measurement of unintended pregnancy. We used data from the 2002 National Survey of Family Growth (NSFG) collected from women on the extent of pregnancy mistiming; women who reported that their pregnancy occurred “too soon” were asked in follow-up about the extent of this mistiming (in months and years). We determined that the most important and meaningful distinction is that of pregnancies occurring less than two years too soon and pregnancies occurring two or more years too soon. We created a revised measure of pregnancy intentions that divides mistimed pregnancies into these two groups. Combined with the traditional classification of pregnancy intention, this creates a four category measure of pregnancy intendedness: intended, mistimed by less than two years, mistimed by two or more years, and unwanted.

In this new paper, we now apply this new four-part measure of pregnancy intendedness to the 2002 NSFG to estimate rates of unintended pregnancy for 2001. We stratify our estimates by

age and union status, allowing us to consider the role of the life course factors in determining pregnancy intentions.

DATA AND METHODS

Intendedness of Pregnancies

Methods of calculating unintended pregnancy rates have been detailed previously (Finer and Henshaw, 2006). A brief description follows. The primary source of information on intendedness of pregnancies in the United States is the National Survey of Family Growth (NSFG), conducted by the National Center for Health Statistics (NCHS). Since 1982, NCHS has periodically surveyed a nationally representative sample of women aged 15–44 in their homes. The most recent survey, conducted in 2002, collected responses from 7,643 women. Our analysis is limited to the 3,483 pregnancies ending since January 1999 because some key measures were only available for this more recent subset of pregnancies. Although the reduction in number of cases may place some constraints on power, the shorter recall period should reduce problems commonly associated with retrospective reporting.

For each pregnancy they had experienced, respondents were asked a series of questions to determine whether the pregnancy was intended (i.e., whether the respondent had wanted to have a baby at the time the pregnancy occurred), mistimed (i.e., the woman wanted to become pregnant at some point in the future, but not yet), or unwanted (the woman did not want to become pregnant now or in the future).⁹ Mistimed pregnancies were further determined to have occurred less than 2 years too soon, or 2 or more years too soon. This results in a four part categorization: intended, mistimed by < 2 years, mistimed by 2+ years, unwanted.

Pregnancies were tabulated by intendedness for the entire population of women 15–44 and for subgroups of women by age, relationship status, education, and race and ethnicity.

Birth data are tabulated by NCHS from birth certificates; we supplemented this information with NSFG data to get specific population distributions. Because abortions were underreported in the NSFG, we obtained population-level abortion data from sources that are considered more complete. We obtained the total number of abortions for 2001 by adjusting the total number of

abortions reported in a 2000 census of abortion providers for changes in comparable state-by-state abortion reports between 2000 and 2001. The proportions of abortions that were intended, mistimed and unwanted (as reported in the NSFG) were applied to these national numbers. This approach is a departure from past research when we assumed that all abortions were unintended. To estimate the number of abortions in 2001 by subgroup, we used 2001 state health department reports by the Centers for Disease Control and Prevention (for age), published tabulations of abortions by women's characteristics from a 2000 nationally representative survey of abortion patients (for income, education, and race and ethnicity), and unpublished tabulations of data from the same survey (for relationship status).

Published unintended pregnancy rates for 1994 excluded miscarriages and other fetal losses. To provide a complete estimate of the number of unintended pregnancies in the United States and to assess trends since 1994, we have included fetal losses in our estimates. We used the fetal losses reported in the NSFG data, adjusted for the ratio of fetal losses to births in each subgroup.

We obtained population denominators by subgroup from three sources: census estimates, data from the Current Population Survey and its March Demographic Supplement, and the NSFG (to distribute unmarried women by cohabitation status).

Results

Results of the analyses, which are not yet available, will detail unintended pregnancy rates and the proportion of pregnancies that are unintended for the population as a whole and by age, marital status, cohabitation status, education race and ethnicity, and income at the time of interview. If data permit, we will also make estimates by parity and urban/rural residence. In addition, we may produce estimates for key combinations of these subgroups (for example, unmarried women in their 20s).