

Background

- Measuring pregnancy intention is complex and predominantly retrospective even though this introduces response bias.
- Determining intention after a birth is complicated because respondents who may not have intended to get pregnant may be happy with the result post birth and may not report the pregnancy as unintended.
- The Pregnancy Risk Assessment Monitoring System (PRAMS) is a surveillance system that collects state level population data on maternal attitudes and experiences and is administered after a live birth.
- PRAMS and other sources of data on pregnancy such as the Guttmacher Institute report unintended pregnancy rates.
- We chose to look at the variation in prevalence of intended pregnancy by state, overall and by maternal age.

Methods

Using data from PRAMS 2015, national and state level prevalence estimates and 95% confidence intervals of intended pregnancy were calculated using the PGINTENT variable:

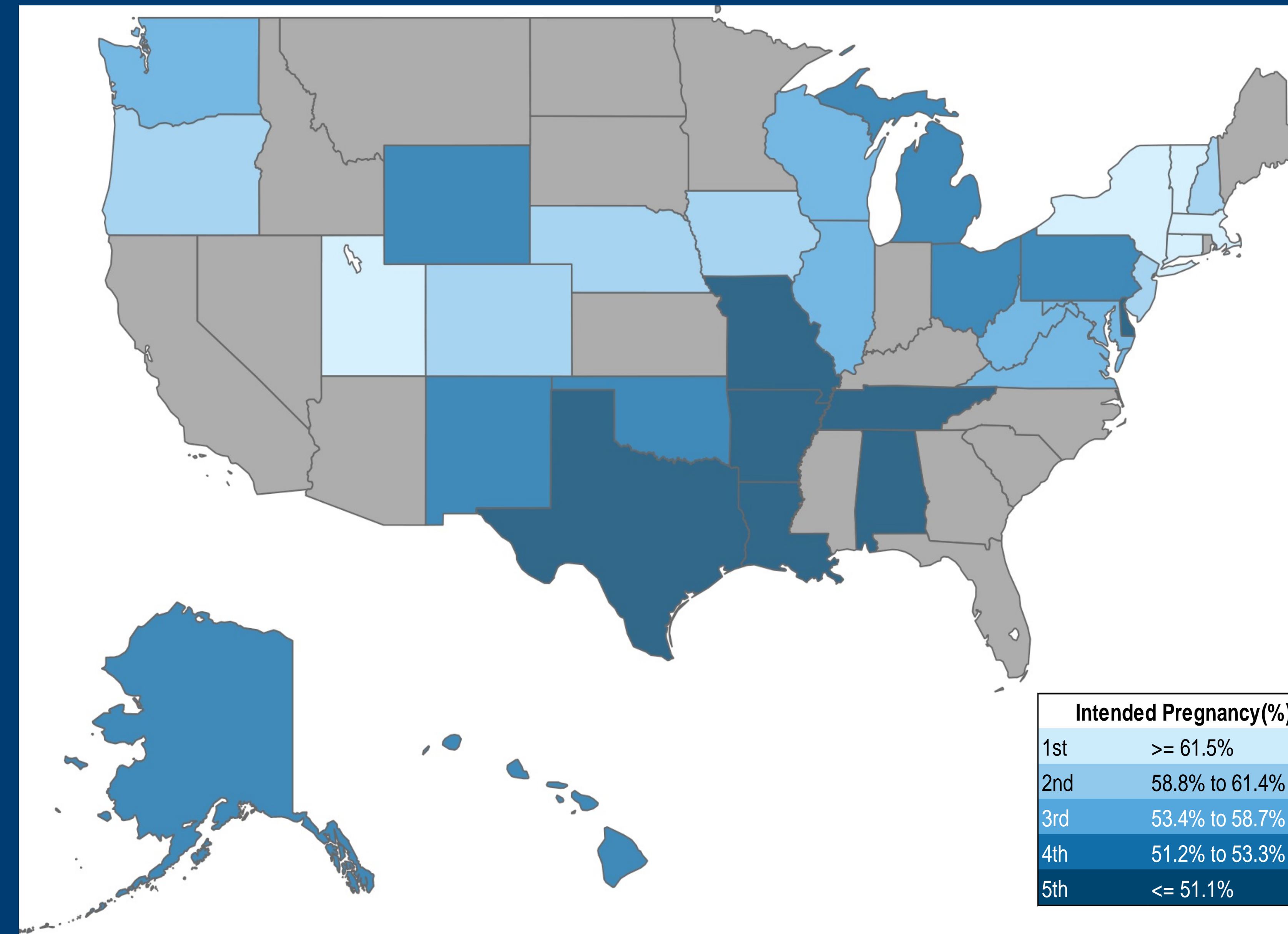
- “Thinking back to *just* before you got pregnant with your new baby, how did you feel about becoming pregnant? Check ONE answer.
 - I wanted to be pregnant sooner
 - I wanted to be pregnant later
 - I wanted to be pregnant then
 - I didn’t want to be pregnant then or at any time in the future
 - I wasn’t sure what I wanted

Pregnancy intention was defined as a pregnancy that was wanted at the time or sooner than one occurred. Estimates suppressed where RSE>30% or denominator<30.

Results

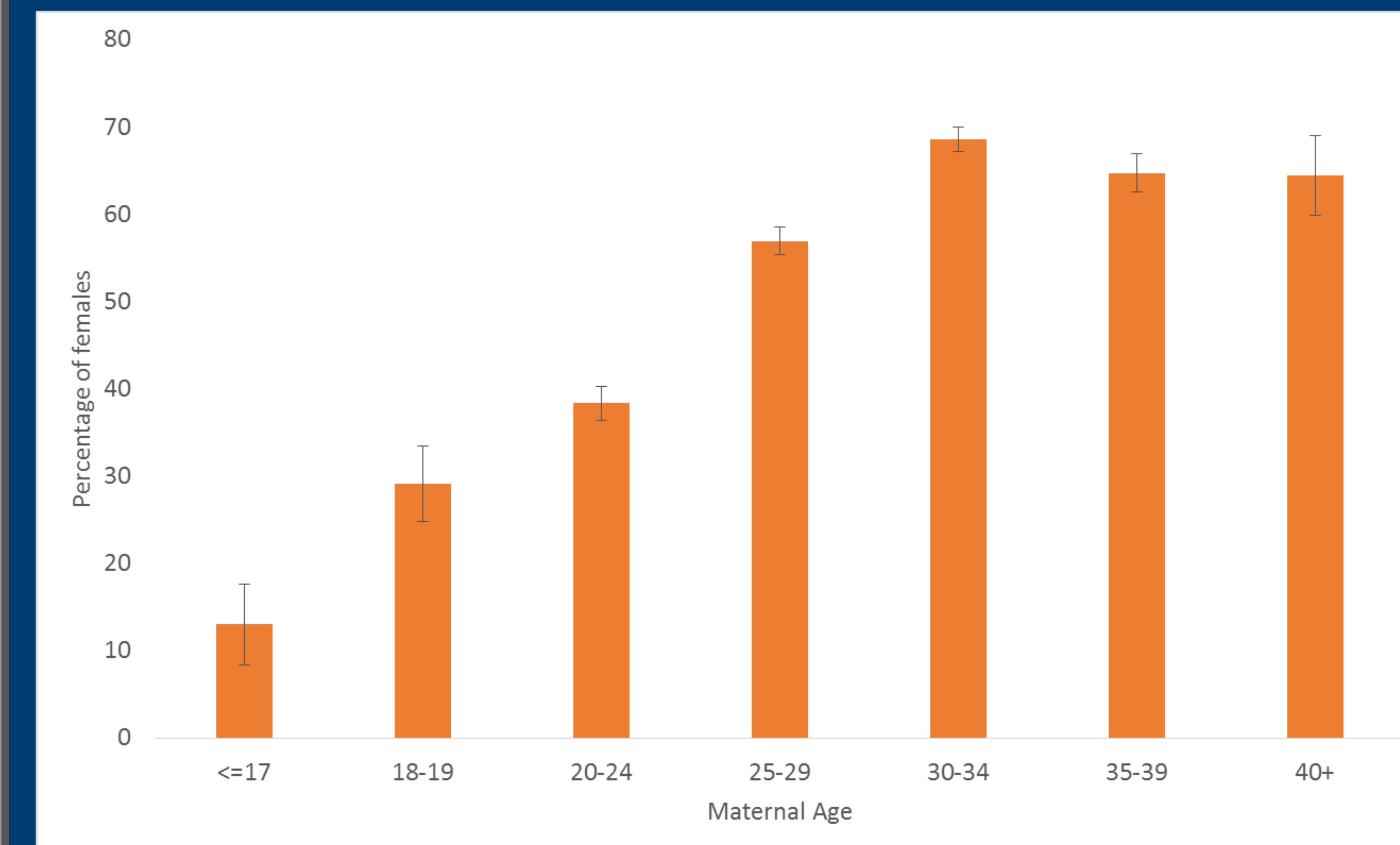
- Data from 32 states was available from PRAMS.
- Prevalence of intended pregnancy is almost two times higher in the state with the highest prevalence, Massachusetts, at 67.3% compared with 45.2% in Arkansas, the state with the lowest prevalence (Figure 1).
- From the available data, the national average is 55.6%.

Figure 1. Quintile map of the percentage of females with a recent live birth who intended to get pregnant at the time they became pregnant or sooner.



- When examining intended pregnancy prevalence by maternal age groups, a much larger proportion of women aged 25 or above report intended pregnancies compared to women with a maternal age less than 25 (Figure 2).
- The highest prevalence of intended pregnancy is again in Massachusetts among women with maternal age 35-39 at 78.9%, and the lowest prevalence is in Virginia among women with maternal age of 20-24 at 26.6%.
- In all states, women who have children in their teens or twenties report a significantly lower prevalence of intended pregnancy.

Figure 2. Prevalence of intended pregnancies by maternal age group, average of 32 states.



Conclusions

- The prevalence of intended pregnancy varies two-fold between the highest and lowest states, and generally increases with maternal age.
- Additional methodology research needs to be done on the concept of pregnancy intention.

Public Health Implications

- Measuring intended pregnancy rather than unintended pregnancy may reduce the negative stigma surrounding unplanned pregnancy questions.
- This may allow for positive public health messaging and interventions.
- However, this method does not help to ascertain the intention of those who respond “I wasn’t sure what I wanted.”

Acknowledgments

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Disclosure

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