

# The Boulder County 2009 Unintended Pregnancy Study



## **EXECUTIVE SUMMARY**

Unintended pregnancies account for the majority of all pregnancies in the United States, though the issue remains an ambiguous concept that is imperfectly measured. Generally, it refers to pregnancies that were not planned at the time of conception and includes pregnancies identified as either unwanted or mistimed at the time of conception. In support of the need for new research, the Temporary Assistance for Needy Families (TANF) program provided funds to Boulder County Public Health to contract with John Snow, Inc. (JSI) to explore general definitions and impressions of unintended pregnancy, factors associated with unintended pregnancy, and best practices for unintended pregnancy prevention.

## **Goal**

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This research project aims to advance the broader BCPH goal of reducing unintended pregnancy rates in Boulder County. Research is designed to spark systematic analytic thinking on the causes and consequences of un/intended pregnancy, to then identify effective use of prevention resources.

## **Objectives**

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This research project addresses three study objectives:

1. Obtain data on rates of unintended pregnancy/paternity among Boulder County residents aged 13-28 (focusing on 15-24). This was accomplished by developing an epi-profile of unintended pregnancy rates and other indicators of sexual risk-taking behaviors in Boulder County. The profile served as the first step in promoting data-driven decision-making.
2. Identify factors associated with unintended pregnancy/paternity among Boulder County residents aged 13-28 (focusing on 15-24). This was accomplished through focus groups, key informant interviews (KII), and a literature review. Focus group participant recruitment targeted men and women who have had an unintended pregnancy/paternity resulting in parenting.
3. Describe best practices in primary and secondary prevention of unintended pregnancy/paternity. This was accomplished through the literature review and KII.

## **Methods**

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Research activities will include quantitative and qualitative data collection among a diverse group of young men and women, as well as their immediate social network, health care and social service

providers, and key stakeholders. Key areas of interest to BCPH include: demographics, un/intentionality rates, disparities, perceptions of un/intended pregnancy, repercussions of un/intended pregnancy, obstacles to and resources for prevention. Research will access experiences of a diverse group, including geographic and racial/ethnic diversity, with sensitivity to age- and income-related strengths and challenges. BCPH Health Planning, in coordination with the Un/intended Pregnancy Research Project Steering Committee, will monitor and evaluate the research process, with the goal of ensuring quality completion of the scope of work, and recommending mid-course correction when necessary.

## **Results**

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The findings from this research have led us to multiple conclusions related to the current rate of unintended pregnancy in Boulder County, including some key considerations for future and future pregnancy prevention programming. These conclusions have important implications for prevention and support services as well as public policy.

### ***Focus Group Findings***

- **MOST DID NOT WORRY ABOUT GETTING PREGNANT**
- **SOCIAL CONSEQUENCES WERE FELT BY MANY**
  - Partner's involvement: opposite ends of spectrum
  - Strained family relationships became worse
  - Old friendships ended, but new ones began
- **PREGNANCY BROUGHT MOTIVATION**
  - Desire for a better life, success and being a 'different' parent
- **FATHERS OFFER A DIFFERENT PERSPECTIVE**
  - Condoms for protection not prevention
  - Girls get more help than they do

There are many reasons why fathers have not been the focus of research. Early studies on young fathers assumed that they were psychology unstable and offered little support. These shaped society's stereotypes of young fathers. However recently, there is growing attention to and evidence for the beneficial role that fathers can play in children's lives (Lamb, 2004).

### ***Recurring themes in the focus groups***

Across all the focus groups conducted, the following consistent themes arose (these are highlighted below):

- Before the pregnancy, there was not much thought or worry about whether pregnancy would occur.
- Pregnancy and parenting were harder than expected.
- There was an increased propensity to use birth control after the pregnancy.
- There was a desire/need for more knowledge around birth control options and their proper use.
- Barriers to preventing pregnancy were less about cost and availability and more about making it a topic of conversation with parents, peers, and partners.
- Parenting provided a strong motivation to improve their educational, emotional and financial circumstances.

### ***Key Informant Interview Findings***

#### **INFORMATION GATHERED FROM WIDE SPECTRUM OF STAKEHOLDERS**

Steering Committee members	Prevention programs
Health services	Statisticians
Social services	Public health and policy
Parenting programs	

#### **INTERVIEWS FOCUSED ON SUCCESSES AND CHALLENGES**

Defining unintended pregnancy	Coordination and integration of services
Measuring unintended pregnancy	Prevention strategies
Access and barriers to services	

#### **KEY INFORMANTS PROVIDED SUGGESTIONS FOR PROGRAMMING**

Start small	Money always helps
Increase collaboration	Be more “dad” friendly
Improve communication	Increase school-based resources
Get parents involved	Develop social marketing campaign

### ***Recurring themes in the interviews***

Across the interviews, some consistent themes emerged, including:

- It is challenging to define *unintended pregnancy* among a teen and young adult population.
- Despite the wide range of reproductive health services available in Boulder County, prevention efforts are hindered by the fact that many young people are not worried about pregnancy or simply do not think it will happen to them.
- While there is a great deal of collaboration among programs and agencies in Boulder, there is always room for improvement in this regard.

### ***Conclusions of Focus Group and Key Informant Interview Findings***

- Primary research among 15-24 year olds in Boulder County who have experienced an unintended pregnancy revealed attitudes of ambivalence and of “not thinking” about the issue and reinforce the idea that more be done to communicate the realities of unintended pregnancy and parenting. Schools and parents are the two most commonly suggested resources to involve in the discussions on sex and birth control in order to decrease unintended pregnancy.
- Future research among 15-24 year olds in Boulder County who have not experienced an unintended pregnancy would help identify factors associated with successful pregnancy prevention efforts and possibly suggest strategies to include in future prevention programming.
- A more active approach to focus group recruitment may have produced monolingual Spanish-speaking participants, which could yield additional valuable information about cultural factors related to unintended pregnancy.
- Increasing the availability and reliability of pregnancy and fertility measures, such as abortion, fetal death, and pregnancy interval data would provide a better estimate of the true burden of unintended pregnancy in the county.

## **Recommendations and Strategies**

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The 1995 Institute of Medicine report recommends a new social norm where all pregnancies are consciously and clearly desired at conception (IOM, 1995). Achieving this goal requires long-term efforts to educate the public on the benefits of family planning and of spacing pregnancies (Green-Raleigh, Lawrence, Chen, Devine, & Prue, 2005). The following represents best and promising practices from the literature in helping to reduce unintended pregnancy rates:

- Improving access to family planning.
- Improving access to emergency contraception.
- Parental involvement.
- Male involvement.
- Youth development.
- Social marketing campaign.
- Integration of services.
- Improving general health care for women.

***Evidence-based practices conclusion.*** Prevention strategies and programs must address a variety of risk and protective factors through different levels of the socio-ecological framework:

- Individual knowledge, attitudes, and behaviors
- Peer/Family knowledge, attitudes, and behavior
- Schools/organizations
- Community
- Society

Unintended pregnancy prevention strategies must address sexual and non-sexual antecedents through a combination of new or revised policies, programs, and practices (Kirby, Lepore, Ryan 2005).

The research team focused on obtaining the appropriate breadth and depth of information and effectively analysis and synthesis of ideas in the literature to support the study objectives, selection of method and believe that the findings of this study will contribute to a new understanding of the impact of unintended pregnancy on Boulder County residents.

## **Suggested Next Steps**

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The development of a consortium of social service, health care, and other public health providers that can address the following:

- An assessment of local programs, activities, research findings, best practices, and data to review, update, confirm/enhance public health strategies to prevent teen pregnancy and sexually transmitted infection in Boulder County.
- An assessment of data systems across the County to develop the capacity to implement specialized data collection efforts so that unintended pregnancy rates can be monitored at a local level in a timely manner.

Further research with males to better understand their unintended paternity issues as well as with couples to develop a better estimate of intention rates with couples.

## **More Information**

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Download the complete report at [www.bouldercounty.org/help/family/pages/genesservices.aspx](http://www.bouldercounty.org/help/family/pages/genesservices.aspx).

Direct questions, observations, and recommendations to:

Namino Glantz, Health Planner	(w) 303-441-1167
Boulder County Public Health	(f) 303-441-1452
3450 Broadway, Boulder, CO 80304	nglantz@bouldercounty.org