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FAMILY PLANNING PRACTICES AND PREGNANCY INTENTION, 1997

SPECIAL REPORT SERIES FROM

PRAMS

PREGNANCY RISK ASSESSMENT MONITORING SYSTEM



U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Centers for Disease Control and Prevention
National Center for Chronic Disease Prevention and Health Promotion
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Preface

We are pleased to present the second Pregnancy Risk Assessment Monitoring System (PRAMS) Special Report, a compilation of results highlighting family planning practices and pregnancy intention for births occurring in 1997 in 13 states. Since 1987, PRAMS has served as a state-specific data source for maternal and child health issues. The dissemination of PRAMS data is an essential step in translating findings from PRAMS into public health action.

Unintended pregnancy is a persistent problem in the United States. Unintended pregnancy occurs among all population subgroups; however, the risk is higher for certain groups, e.g., teens, women with lower levels of education, women who aren't married, and women with low income. Access to contraceptives and contraceptive education also can vary widely across the United States and in particular population subgroups.

This report provides benchmarks for 11 family planning practice and pregnancy intention indicators that can be examined across participating states. For each state, subgroup analyses are presented by age, race, ethnicity, education, marital status, parity, Medicaid status, and source of prenatal care. Contraceptive methods and reasons for not using contraception are also examined in selected states.

PRAMS is a population-based survey of women delivering a live-born infant. This survey collects information on women's experiences and behaviors before, during, and shortly after pregnancy. Thus, states participating in PRAMS gain unique and invaluable information for public health administrators, policymakers, and researchers as they develop programs and policies to improve the health of women and children.

Focusing research efforts on the issue of unintended pregnancy is a top priority in the Division of Reproductive Health. We hope this report will be useful to researchers and public health practitioners across the United States. We welcome your comments about the merit, design, and content of this publication.

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About This Report

Since 1987, the Pregnancy Risk Assessment Monitoring System (PRAMS) has served as a data source for states addressing public health issues among their maternal and child health (MCH) populations. PRAMS is an ongoing, population-based surveillance system designed to identify and monitor selected self-reported maternal behaviors and experiences that occur before, during, and after pregnancy among women who deliver a live-born infant. The dissemination of PRAMS data is an essential step in translating findings from PRAMS into public health action.

This report is the second in the PRAMS Special Report Series. The first report in the series addressed unintended pregnancy in four PRAMS states in the Southeast.¹ This report addresses the issue of unintended pregnancy in greater depth and includes data from 13 PRAMS states. The focus of this report is contraceptive use and unintended pregnancy. We examine the prevalence of behaviors and practices associated with contraception and pregnancy intention (e.g., use of contraception at time of pregnancy and during the postpartum period, prenatal care counseling regarding postpartum use of contraception, use of contraception by pregnancy intention, method of contraception used, and reasons for nonuse of contraceptives). For each individual state, we examine these behaviors and practices by selected maternal and programmatic characteristics (e.g., mother's age, race, ethnicity, maternal education, marital status, parity, type of prenatal care provider, and payment source for prenatal care).

Highlighted in this report are data from births that occurred during 1997 in 13 participating PRAMS states (Alabama, Alaska, Arkansas, Colorado, Florida, Georgia, Maine, New York, North Carolina, Oklahoma, South Carolina, Washington, and West Virginia). The report includes results from both multistate and state-specific analyses. Prevalence estimates are presented by state and by selected maternal and programmatic characteristics. Also, for each state, sociodemographic data are presented for the PRAMS-eligible population (women delivering a live infant in their state of residence). Summary tables have been included which allow easy comparison of each of the family planning indicators across states by selected characteristics. To assist the reader in placing the findings from these analyses into context, a brief review of the literature has been included (see Background). In addition, a summary of key findings from this report is provided (see Highlights).

Program and policy makers can use these data to monitor progress toward national, state, and local pregnancy-related health objectives, including the reduction and prevention of high-risk pregnancies and adverse pregnancy outcomes. We hope that this report will serve as a valuable reference document for use in public health planning and policy development.

References

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Background: Unintended Pregnancy and Use of Contraception

Unintended Pregnancy

Unintended pregnancies, defined as pregnancies that are either mistimed or unwanted at the time of conception, are a problem in the United States.¹⁻³ Nearly one-half of all pregnancies in the United States are unintended (49% of all pregnancies and 31% of pregnancies resulting in live births^{1,4}). Henshaw found that, nationally, from 1987 to 1994 the rate of unintended pregnancy declined by 16% and the rate of unintended births declined by 21%.⁴ These declines may not be occurring in all states; PRAMS data indicate that only one of 11 states experienced a significant decline in unintended pregnancies resulting in a live birth from 1993 through 1995.⁵ The *Healthy People 2000* objective is substantially lower, calling for the reduction of unintended pregnancies to 30%.² The *Healthy People 2010* objective uses the same target of 30% unintended pregnancies, or 70% intended pregnancies.⁶

Unintended pregnancies are common among all population subgroups. However, the risk is higher for certain populations, such as teenagers, women 40 years of age and older, women with lower levels of education, women who aren't married, and women with low income.⁷⁻¹⁰ Unintended pregnancy resulting in a live birth is associated with delayed entry into prenatal care; this may be due to women with unintended pregnancies being less likely to realize they are pregnant in the first trimester than women with intended pregnancies.^{11,12} Other adverse behaviors associated with unintended pregnancy include poor maternal nutrition, smoking, and use of alcohol and other drugs.^{1,3} Unintended pregnancy may also be associated with adverse birth outcomes; however, the research findings are not consistent. The proportion of low birth weight infants has been shown to be higher among black women whose pregnancies were unwanted than among black women with wanted pregnancies.^{1,13} Kost et al. initially found that women with mistimed or unwanted births were more likely to have infants who were premature, low birth weight, or small for gestational age than women with intended births.¹² However, when they adjusted for maternal behavioral variables, (e.g., timing of prenatal care visits, weight gain, smoking, drinking), planning status became nonsignificant.¹² The consequences of an unintended pregnancy do not end at birth, as evidenced by the association between unintended births and child abuse and neglect.^{1,3} Children under 2 years of age that were reported as mistimed or unwanted during pregnancy were found to score lower on several measures indicating reduced cognitive, behavioral, and emotional development.¹⁴

Unintended Pregnancy and Use of Contraception

An unintended pregnancy can be the result of inconsistent or improper use of contraceptives, use of less effective methods, or the lack of use of contraceptives. Almost half of unintended pregnancies occur during a month in which women report using a reversible method of contraception (e.g., pill, condom, diaphragm).⁸ In a national telephone survey, 73% of women at risk for unplanned pregnancy reported using a contraceptive method every time they had sex; 12% reported that they never used a method.¹⁵ In a study of pregnant women in Tennessee, women

with unplanned pregnancies were more likely to report becoming pregnant while using contraception than women with planned pregnancies (23% unplanned vs. 3% planned); women with unplanned pregnancies were also more likely than women with planned pregnancies to use either no contraceptive method or withdrawal (31% unplanned vs. 13% planned).¹⁶

Adequate instruction in how to use a method, provision of a back-up method, and information on emergency contraception could reduce unintended pregnancy.¹⁷ The financial costs of an unintended pregnancy can be high: \$3,795 in a managed care setting and \$1,680 in a publicly funded program.¹⁸ Trussell and others examined the costs of various methods of contraception and compared them to using no method. They found that use of any method of contraception is very cost-effective when compared to use of no method.¹⁸ In addition, because unintended pregnancy is so costly, the highly effective methods which have high costs at the outset of use (e.g., sterilization, Norplant, IUD) actually save the most money and become more cost-effective over the time of use.¹⁷ Emergency contraception (e.g., pills, progestin-only pills, copper-T IUD) is effective as well as cost-saving. Results from 10 clinical trials indicate a 74% reduction in unintended pregnancy when emergency contraception was used.¹⁸ Providing emergency contraception to women in advance can result in annual cost savings from \$263 to \$498 in a managed care setting and \$99 to \$205 in a public payer setting.¹⁹

A typical woman in the United States spends about 36 years—almost half of her lifespan of 79 years—at potential biological risk of pregnancy, during the time from menarche (age 12.5 years) to natural menopause (age 48.4 years).²⁰ Most of these years are spent trying to avoid pregnancy.^{17,20} Among the 60.2 million women of reproductive age (15–44 years) in 1995, about 64% (38.6 million) were using some method of contraception according to findings from the National Survey of Family Growth (NSFG).⁷ Among the 36% not using a method, about 7.5% were at risk of pregnancy. The remaining women were not at risk because they were sterile, they were trying to become pregnant, were pregnant, or were immediately postpartum, or they were not having intercourse during the 3 months prior to the survey.⁷ Burnhill notes that women who were nonusers of contraception accounted for more than 50% of all unintended pregnancies and that if they were to use contraception, the overall rate of unintended pregnancy could be cut in half.²¹ The *Healthy People 2010* objective is to increase the proportion of females at risk of unintended pregnancy (and their partners) who use contraception to 100%.⁶

Poverty is an important aspect of non-use of contraception. Poor women are less likely to have the resources available to access family planning services and the most likely to be adversely affected by an unintended pregnancy.¹ It is estimated that half of all women who are at risk for an unintended pregnancy and need publicly subsidized family planning services are not getting those services.²² The Medicaid program supports family planning services; however, teens, women without children, women who are married, and working poor women are often not eligible for Medicaid benefits. About 40% of family planning services in the United States are provided by health departments, hospitals, community health centers, and other public and nonprofit organizations which receive funds from the Federal Title X Family Planning Program.^{6,23}

Partners, Contraceptive Use, and Pregnancy Intention

A woman's partner can be an important determinant in her intent to become pregnant or to continue a pregnancy and in her use of contraception. In a study looking at lifetime partnerships among a group of low-income women, 21% of women had not wished to conceive at least one of their pregnancies with the partner that impregnated them.²⁴ In 2 qualitative studies, women identified partner attitude toward contraceptive use and the wantedness of the pregnancy as key factors in their decision to use contraception and in their own perspective on the intention of the pregnancy.^{25,26} A number of studies indicate that husbands' desires and intentions influence couples' childbearing. Thomson, in a study of more than 1000 married couples, found that the majority of couples had similar childbearing intentions; 20% of couples disagreed on wanting another child. In a 5-year follow-up of these couples, 13% of the couples who did not agree on wanting another child had a child; 67% of the couples agreeing on wanting a child had a child. Disagreement tended to shift intentions to not having a child; the relative birth rate for disagreeing couples was closer to that of couples who agreed to no more children. Husbands and wives appeared to have nearly equal influence on birth outcomes.²⁷ In a review of couple studies in developed and developing countries, Becker found that (1) couples' statements about objective reproductive health events (e.g., number of children, current contraceptive use) agreed less than 90% of the time; (2) when couples were asked about fertility and family planning attitudes and intentions, couples agreed 60 to 70% of the time, and (3) using data on reproductive intentions from both partners leads to better predictions of behavior.²⁸ Further, Miller et al. note the influence of the male partner on contraceptive method choice, intention to change methods, and the regularity of use of a method.²⁹

Contraceptive Methods

Most people will use a variety of contraceptive methods throughout their lives. Different reproductive stages are associated with distinct fertility goals and sexual behaviors; thus, the choice of method varies by reproductive stage.²⁰ The choice of a contraceptive method also depends on several other major factors: efficacy, safety, cost, noncontraceptive benefits, and personal considerations. For example, female sterilization is most common among women who have completed their intended childbearing (i.e., between the last birth and menopause stage); in this stage efficacy for prevention of pregnancy is the most important feature of the contraceptive method. Oral contraceptives and male condoms are more often used during the earlier reproductive stages when postponement or spacing is of most interest. These methods are reversible, easy to use, and have high efficacy rates (especially the pill); the condom is also a barrier method which provides protection from HIV and sexually transmitted diseases.^{7,17} In general, contraception poses few serious health risks to users. The safety considerations of contraceptive methods are not as great as those of pregnancy-related complications. However, some contraceptive methods pose potential risks to the user (i.e., risk of the method itself and its association with surgery, side effects, infections, pain; risk of pregnancy; and risk of future fertility).¹⁷

Based on the 1995 NSFG, the most popular contraceptive methods are (1) female sterilization, (2) oral contraceptive pills, (3) male condoms, and (4) male sterilization.⁷ Abma et al. note changes in contraceptive method use between 1988 and 1995:

- (1) Male condom use increased from 13.2% to 21.6% among all women aged 15 to 44 years at risk of pregnancy. There was an increase in all age groups, but the greatest increase was among women aged 20 to 24 years and women aged 25 to 29 years.
- (2) Pill use among women aged 15 to 44 at risk of pregnancy declined from 27.7% to 24.9%. Pill use increased for women over 30 but decreased for women 30 and under. Declines in pill use for women aged 15 to 19 and 20 to 24 were compensated by use of two new methods—the implant and the injectable.
- (3) Diaphragm use among all women aged 15 to 44 years at risk of pregnancy declined from 5.2% to 1.7%.⁷

Efficacy of Contraceptive Methods

In a review of research on the efficacy of various contraceptive methods, Hatcher et al. summarize estimates of the probabilities of pregnancy during the first year of typical use and perfect use of each contraceptive method.¹⁷ Pregnancy rates during typical use reflect how effective methods are for the average person who does not always use methods correctly or consistently. The percentages of women experiencing an unintended pregnancy within the first year of typical use ranges from 0.05% (Norplant), 0.1% (pill), 3.0% (male condom), to 40% (cervical cap) among parous women. It is estimated that 85% of women would become pregnant within 1 year if using no method.¹⁷ The Year 2000 objective is to reduce the percentage of users of any contraceptive method who become pregnant in a year to 8%.²

Researchers have found that many people in the United States and other countries have misperceptions about the effectiveness of contraceptive methods and their risks and benefits. For example, in a study of women attending a U.S. university, 90% of respondents correctly estimated the effectiveness of oral contraceptives but 32% to 60% underestimated the effectiveness of implants, Depo-Provera, and the IUD.³⁰ In a study of men and women in the United States, Canada, and the Netherlands, Americans were more skeptical about the safety of contraceptive methods and their effectiveness. For example, 17% of Americans think the pill is “very safe,” compared with 21% of Canadians and 40% of the Dutch.³¹

Discontinuation of and Noncompliance With a Contraceptive Method

It is estimated that 13% of reproductive-age women experienced pregnancy despite using a reversible contraceptive method.⁶ The rate of contraceptive failure has been highest among young women, poor women, and members of racial or ethnic minorities.^{32,33} Adolescents experience higher oral contraceptive failure rates than do adult women. This may be due to their lack of experience with contraception, higher frequency of intercourse, higher intrinsic fertility, and a pattern of frequent stopping and switching methods. Adolescents are also more likely to forget to take the pills or to voluntarily discontinue usage due to side effects.³⁴ In a study of teen mothers in the first 6 months following delivery, Berenson et al. identified 7 factors associated with reliable contraceptive use: school enrollment, not having failed a grade in school, adequate support, belief that pregnancy is likely without birth control, attendance at postpartum

visit, prior abortion, and the adolescent's desire to wait at least 2 years before having another child.³⁵

Discontinuation of a contraceptive method can lead to an unintended pregnancy. In 1995, more than 10 million women (27% of women practicing contraception) were currently using oral contraceptives.⁷ However, many women discontinue using the pill or do not use the pill consistently. Unintended pregnancy following pill discontinuation or compliance difficulties are estimated to account for 20% of the 3.5 million annual unintended pregnancies in the United States with associated costs of \$2.6 billion.³⁶ Only 50% to 75% of women who start taking pills and do not want to become pregnant still are using them after one year; this continuation rate is lower than for other methods with similar contraceptive efficacy.¹⁷

In a clinic-based study of 1,167 pill users, 58% of women reported that they did not take their pills every day;³⁷ in a 5-country study, 19% of women reported that they missed at least one pill per cycle.³⁸ Rosenberg et al. report that, in a nationwide sample of women initiating or resuming pill use, 47% of users missed one or more pills per cycle and 22% missed 2 or more. Factors significantly related to missing 2 or more pills per cycle were lack of established pill-taking routine, inability to read and understand all of the informational material in the pill package, or experience of spotting or heavy bleeding.³⁹ Using the 1995 NSFG, Peterson et al. found that Hispanic and black women had a significantly increased likelihood of inconsistent use (OR=2.5, 2.1) as did those women who recently began using the pill (OR=2.7) and those who had an unintended pregnancy (OR=1.6).³² Consistency of pill-taking has been found to also be associated with education level, age, pregnancy intention, contraceptive knowledge, type of employment, marital status, parity, and adequacy of information received from providers.^{32,38,40} Low reading level has been found to be associated with contraceptive method in use; women with low reading levels were found to be significantly more likely to have incorrect knowledge about when they were most likely to get pregnant.⁴¹

From the 1988 NSFG, it was estimated that more than 9 million women used condoms for contraception or STD prevention.⁴² Factors associated with continuation and consistency of condom use have been studied in several populations. In a convenience sample of Latino women in Los Angeles, California, Unger et al. used a multivariate model controlling for confounders and found that condom use was associated with no desire for additional sons, social support, self efficacy, and low acculturation.⁴³ From a study of college women, Murphy reported that women who felt more confident in their ability to negotiate for condom use reported greater condom use. Increased condom use was reported by women who had higher levels of knowledge of HIV transmission, more open communication with parents, described themselves as being more dominant and more able to communicate openly, and described their partner as less dominant or aggressive and more close and communicative.⁴⁴ In a study of black women in Baltimore, Maryland, several factors were identified with the likelihood of consistent condom use: having a regular partner who supported condom use, friends' support of condom use, condom use among friends, having 2 or more partners and having one or more HIV risk factors.⁴⁵

Compliance or continuance of a contraceptive method can be influenced by many factors. In a review of the literature on compliance, Branden describes 7 components of compliance: contra-

ceptive effectiveness, contraceptive safety, contraceptive side effects, patient comprehension and health literacy, patient's personal characteristics and considerations, noncontraceptive benefits of contraception, and health care provider preference for specific methods or brands. These components form the basis for ways to improve compliance. Branden recommends that health care providers should educate a woman to critically evaluate which contraceptive method is best for her; address method side effects; evaluate domestic violence as a possible factor in noncompliance; evaluate the woman's understanding of the information about the contraceptive method; use culturally sensitive materials; provide clear, relevant, easy to understand written materials; provide a telephone number to call with questions; make sure a patient has a follow-up appointment scheduled; and reinforce positive behaviors.⁴⁶ Recommendations to health care providers to carefully counsel women about contraceptive choices and to educate women to make their own informed decisions as to what contraceptive method is best given each woman's set of personal circumstances were reported widely.^{32,35,40-41,47-49} In addition, recommendations were made to include the male partner in the counseling.^{16,27-29,41}

Postpartum Contraceptive Use and Discussion by Health Care Providers About Contraceptive Use

Little information is available on the proportion of women who reported discussion of postpartum contraceptive use with their health care provider before, during, or after pregnancy. The American College of Obstetricians and Gynecologists (ACOG) recommends that all new mothers, before being discharged from the hospital after delivery, receive counseling regarding the resumption of coitus and methods of contraception.⁵⁰ For women who have just had a baby, prompt resumption of a contraceptive method is critical to prevent pregnancy with another child and short interpregnancy interval, a potential risk factor for a healthy pregnancy and birth outcome.⁵¹ The method may depend on whether the woman is planning to breast-feed; the timing of beginning use of a contraceptive method may depend on the type of contraceptive method chosen, e.g., a diaphragm or an intrauterine device is not typically inserted or fitted until 4 to 6 weeks postpartum, but oral contraceptives can be initiated shortly after delivery. The ACOG further recommends that each woman visit her physician 4 to 6 weeks after delivery for a postpartum review and examination. This visit may include preconception counseling, counseling for risk assessment for planning, spacing, and timing the next pregnancy, and procedures to initiate a method of contraception if one has not already been chosen.⁵⁰

Delbanco et al. reporting on a survey of men and women in 3 countries (United States, Canada, and the Netherlands) regarding counseling about contraceptive methods, found that health care providers were cited as the primary source of contraceptive information; however, only 51% to 63% of adults had ever discussed contraception with a health provider.³¹ There is a Year 2000 Objective which calls for an increase to 60% in the proportion of primary care providers who provide age-appropriate preconception care and counseling.² The *Healthy People 2010* objective focuses on increasing the proportion of young adults (both females and males under 18 years of age) who have received formal instruction on reproductive health issues, including contraceptive methods.⁶

Glazier et al. describes a study in the United Kingdom in which women were asked what advice they received about postpartum contraception. Only 4% of women recalled discussing contraception with a health professional before the baby was born. Between 56% and 84% of women remembered a discussion about contraception with a midwife on the postnatal ward; only 6% to 8% recalled getting advice from a doctor while at the hospital. About one-half of the women left the hospital with a contraceptive method. At their initial postpartum visit about 6 weeks after delivery, the majority of women recalled a discussion with their doctor about contraception. Two percent to 29% of women did not make a postpartum visit, and 1% of women were already pregnant at the postpartum visit. About one-half of the women reported dissatisfaction with the contraceptive advice they received (either at the hospital or at the postpartum visit). The discussions at the hospital were characterized by many women as a part of a necessary routine, or part of a checklist, and “unhelpful.” Women reported that, at the postpartum visit, they had difficulty understanding what was said, that only 2 methods of contraception were discussed (oral contraceptives and condoms), and no written information was offered.⁴⁹

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Overview of PRAMS

Background

The Pregnancy Risk Assessment Monitoring System (PRAMS) is a population-based surveillance system of maternal behaviors and experiences before and during a woman's pregnancy and during the early infancy of her child. PRAMS was developed in 1987 in response to several distressing statistics. The U.S. infant mortality rate was no longer declining as rapidly as it had in past years. The prevalence of low birth weight infants showed little change. At the same time, maternal behaviors such as smoking, drug use, and limited use of prenatal and pediatric care services were recognized as contributors to these slow rates of decline.

Purpose

PRAMS supplements data from vital records for planning and assessing perinatal health programs on a state level. Because PRAMS data are population-based, findings from data analyses can be generalized to an entire state's population of women having live births. PRAMS is designed not only to generate state-specific data but also to allow comparisons among states through the use of standardized data collection methods. Findings from analysis of PRAMS data have been used to enhance states' understanding of maternal behaviors and experiences and their relationship with adverse pregnancy outcomes. Thus, these data can be used to develop and assess programs and policies designed to reduce adverse pregnancy outcomes.

History

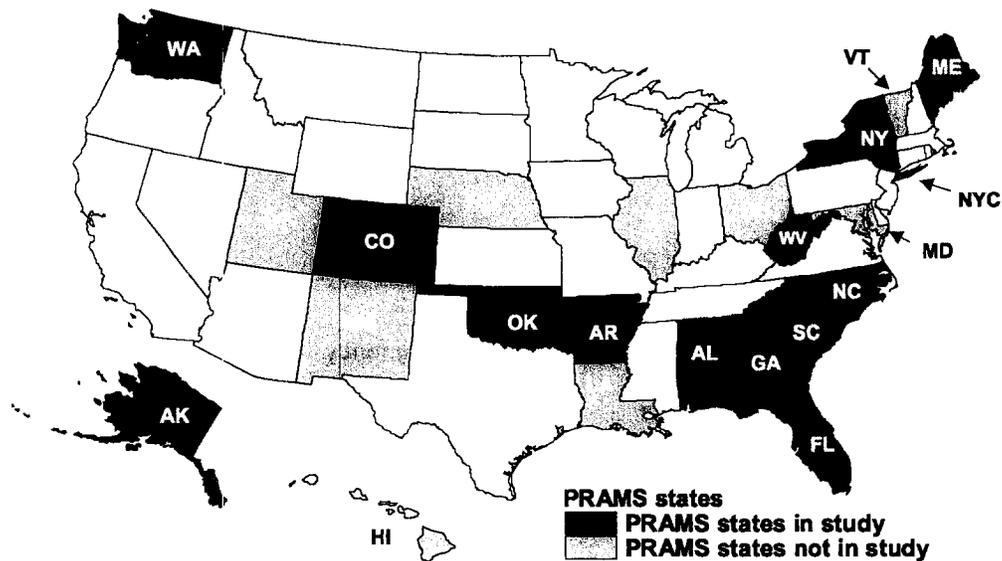
PRAMS is administered by the Division of Reproductive Health, National Center for Chronic Disease Prevention and Health Promotion, Centers for Disease Control and Prevention. PRAMS operates primarily through a cooperative agreement between CDC and states that have been awarded grants on a competitive basis (Figure 1). In 1987, the first year of PRAMS, 5 states and the District of Columbia participated. In 1991, 8 states were added; in 1996–1997, 6 more states joined the PRAMS team and began collecting data during 1997. Also, 4 states no longer participated 1999, and 7 additional states were added. Current PRAMS participants include Alabama, Alaska, Arkansas, Colorado, Florida, Georgia, Hawaii, Illinois, Louisiana, Maine, Maryland, Nebraska, New Mexico, New York, New York City, North Carolina, Ohio, Oklahoma, South Carolina, Utah, Vermont, Washington, and West Virginia. Within state health departments, PRAMS program structures cross several existing organizational units, including maternal and child health and vital statistics. PRAMS surveillance currently covers over 40% of all births in the United States.

Methodology

PRAMS generates statewide estimates of important perinatal health indicators among women delivering a live infant. Each participating state uses a standardized data collection method developed by CDC.¹ PRAMS staff in each state collect data through statewide mailings and follow-up with nonrespondents by telephone. Every month, a stratified sample of 100 to 250 new mothers is selected from a frame of eligible birth certificates. Each sampled mother is first mailed an explanatory letter that introduces the survey, then the 14-page questionnaire at 2 to 6 months after delivery. A second questionnaire package, and in most states a third, is mailed to

those who do not respond. PRAMS staff telephone those mothers who do not respond to the mailed survey.

Figure 1. Geographic Distribution of PRAMS States



The PRAMS questionnaire addresses a myriad of topics, including barriers to prenatal care and content of prenatal care, obstetric history, maternal use of alcohol and cigarettes, nutrition, economic status, maternal stress, and early infant development and health status. The questionnaire consists of a core component and a state-specific component. The core portion is used by each of the participating PRAMS states. For the state-specific component, states may develop their own questions or select from a series of questions previously developed and pretested by CDC, known as the standard questions. Since its inception, the PRAMS questionnaire has undergone several revisions, referred to as "phases." Revisions to the questionnaire have occurred primarily to capture data on recent guidelines or emerging issues concerning maternal and child health, and to improve respondents' comprehension of questions. The current phase, Phase 3, is based on revisions made to the questionnaire in 1995 and put in the field in late 1995 and early 1996. The indicators included in this document are from the core component or from the standard questions from the Phase 3 questionnaire.

Additional information on PRAMS can be found in the appendices. Appendix A describes the PRAMS data collection methodology and questionnaire revision. Appendix B contains a table of 1997 sample sizes, response rates, and stratification variables for each state. Appendix C identifies the corresponding PRAMS question number from the PRAMS Phase 3 Questionnaire for each indicator in this report, defines each indicator, and specifies which indicators have associated Year 2000 Objectives or Title V Maternal Child Health Services Block Grant Performance Measures. Appendix D provides a PRAMS Phase 3 Core Questionnaire. Details of the PRAMS methodology have been reported elsewhere.^{2,3}

Technical Notes

This report includes data from Alabama, Alaska, Arkansas, Colorado, Florida, Georgia, Maine, New York, North Carolina, Oklahoma, South Carolina, Washington, and West Virginia for 1997. North Carolina 1997 data represent only a partial year. These states had fully implemented PRAMS data collection procedures and achieved response rates of approximately 70% or higher. The questionnaire variables that address the topics of family planning methods and unintended pregnancy are found in the core and the state-specific portions of the PRAMS questionnaire. The variables from the state-specific portion are not available for all states. The following table shows the family planning and unintended pregnancy variables that are included for each state in their 1997 questionnaires and thus are available for this analysis.

<u>Question</u>	<u>Availability</u>
Contraceptive Use at the Time of Pregnancy	All states
Unintended Pregnancy	All states
Mother's Perception of Partner's Pregnancy Intention	All states
Reasons for Not Using Contraception at the Time of Pregnancy	All states
Contraceptive Use at Postpartum	Excludes Colorado, Oklahoma
Discussion of Postpartum Contraceptive Use With Prenatal Care Provider	All states
Method of Contraception Used at Postpartum	Excludes Alaska, Colorado, Maine, New York, Oklahoma, Washington
Reasons For Not Using Contraception at Postpartum	Excludes Colorado, Georgia, North Carolina, Oklahoma, South Carolina, Washington

The multistate tables in this report present prevalence estimates for each of the 8 topics by state with associated confidence intervals and also present state ranges for 1997 data; graphs accompany the tables. The demographic variables—maternal age, education, race, ethnicity, marital status, parity—were obtained from state birth certificate data provided to CDC. (An exception is Oklahoma, for which all demographic variables were estimated from the PRAMS sampling frame.) For each state, a table is presented that depicts the PRAMS-eligible population (women having a live birth in 1997 in their state of residence). The PRAMS-eligible population for each state does not include births occurring in the state to nonresidents or births to residents occurring out-of-state, except for Alaska.

All other tables in the report were produced using weighted PRAMS data. Percentages and standard errors were calculated for the characteristic of interest using PROC CROSSTAB in SUDAAN.⁴ For the tables that display prevalences by selected characteristics, differences are defined as significant when the 95% confidence intervals do not overlap. The estimated population, reported as a range in each table, represents the total estimated number of women, recently having a live birth in the state during the calendar year, that exhibited the behavior or experience being shown; the range shown denotes the 95% confidence interval around the population estimate.

All missing (blank, refused, and "don't know") observations were excluded except for race; women with unknown race were included in Other. Unknown race represented 0.5% of the total population. Because estimates based on small samples are imprecise and may be biased, weighted estimates where the underlying number of respondents was fewer than 30 are not reported. Women who did not receive prenatal care were excluded when discussion of postpartum contraceptive use with prenatal care provider was examined; this exclusion represented 1.2% of all respondents. Source of payment for prenatal care was defined as *Medicaid* if a woman reported her prenatal care was paid for by Medicaid; all other sources of payment were referred to as *non-Medicaid*. Source of prenatal care was defined as *public* if a woman reported her prenatal care provider was at a hospital, health department, military facility, community or rural health clinic, an Indian Health Service clinic, or a clinic for Alaskan Natives; all other sources were referred to as *private* and included physician or midwife, health maintenance organization (HMO), and birthing center.

In PRAMS, intendedness of the pregnancy among live births is based on the mother's postpartum response to the question "Thinking back to just before you were pregnant, how did you feel about becoming pregnant?" The possible responses on the questionnaire are (1) I wanted to be pregnant sooner, (2) I wanted to be pregnant later, (3) I wanted to be pregnant then, (4) I didn't want to be pregnant then or any time in the future, or (5) I don't know. Responses of "don't know" are not included in this analysis; they represented 6.7% of respondents. The remaining 4 response categories were collapsed to create a 2-level indicator of intendedness of pregnancy. A pregnancy was considered *intended* if the mother responded that the pregnancy was either wanted sooner or then. A pregnancy was considered *unintended* if the mother responded that the pregnancy was either wanted later or was not wanted then or any time in the future. Women were also asked about the pregnancy intention of their husband or partner. Specifically, each woman was asked if her husband or partner said he did not want her to be pregnant during the 12 months before delivery. Mother's perception of partner's intention was defined as *unwanted* if women reported that their husband or partner did not want the pregnancy; all other observations were defined as *wanted*.

Information regarding use of contraception was collected from women for 2 time periods. Women were asked if she or her husband or partner was using any kind of birth control when she got pregnant; in this report, this was referred to as contraceptive use at the time of pregnancy. Women were also asked if she or her husband or partner was using any kind of birth control at the time she completed the survey. For this report, this was referred to as contraceptive use at postpartum. The postpartum period was defined from delivery through 4 months after delivery. Women who completed the survey when their infant was more than 4 months old (26.6% of respondents) were excluded from tables that depict findings from the postpartum period.

If a mother reported that she or her partner was not using any type of contraception at either of these time periods, then she was asked the reasons why. In addition to 6 response options, women could write in additional reasons in the Other option. In a preliminary examination of these write-in comments, the responses fell into 2 categories: (1) could be classified into existing response options, and (2) additional reasons. For those that referenced existing response options, write-in comments most frequently addressed 3 existing response options: "didn't think

I could get pregnant” (e.g., “doctor told me I couldn’t have kids,” “partner told me he couldn’t have kids”), “wanted to be pregnant” (e.g., “taking fertility drugs,” “wanted a baby”), and “didn’t think I was going to have sex” (e.g., “one night stand,” “husband travels,” “husband in military”). The remaining write-in comments generally addressed 3 additional reasons: fear of side effects (e.g., “pills cause cancer,” “pills make you gain weight”), lapse in use of method (e.g., “shot wore off,” “forgot to renew prescription”), and problems paying (“Medicaid won’t pay for shot,” “don’t have insurance or Medicaid”).

Women were also asked what type of method of contraception they were using at the time of the survey. For this report, this indicator was referred to as method of contraception used at postpartum. Only women who completed the survey when their infant was less than 4 months old were included.

Contraceptive use was examined by the presence or absence of discussion of postpartum contraceptive use with prenatal care provider. *Discussed* refers to women who reported that their prenatal health care provider discussed postpartum contraceptive use; *not discussed* refers to women who did not report discussion of postpartum contraceptive use with their prenatal health care provider. Each of the family planning indicators was examined by selected maternal characteristics.

Note that PRAMS data are representative of women whose pregnancies resulted in a live birth and are not generalizable to all pregnant women. For one reporting area, data are not representative of the entire state: New York data are for upstate New York only and exclude New York City (which has an autonomous vital records agency).

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Data Highlights: PRAMS 1997 Surveillance of Family Planning Practices and Pregnancy Intention

Contraceptive Use at the Time of Pregnancy

Women were asked if they or their husbands or partners were using any contraceptive method when they got pregnant.

- **Prevalence (all states).** The prevalence of contraceptive use at the time of pregnancy ranged from 21.7% to 27.9% in 1997 among women having a live birth. The prevalence was highest in South Carolina (27.9%), representing more than 11,500 women, and lowest in Colorado (21.7%), representing over 10,400 women.
- **Significant Associations in Most States.** Increased contraceptive use at the time of pregnancy was associated with younger maternal age, being unmarried, and having prenatal care paid for by Medicaid.
 - ▲ **Younger maternal age.** In 7 of the 13 states, the prevalence of contraceptive use at the time of pregnancy was significantly lower among women aged 30 years and older than among younger women. Contraceptive use among teens (<20 years) was significantly higher than among older women in 5 states and ranged from 26.4% (Oklahoma) to 40.2% (South Carolina).
 - ▲ **Being unmarried.** In 9 states, contraceptive use at the time of pregnancy was significantly higher among women who were not married than among married women.
 - ▲ **Prenatal care paid by Medicaid.** In 7 of the 13 states, the prevalence of contraceptive use at the time of pregnancy was significantly higher among women whose prenatal care was paid for by Medicaid than by other payers.

See Multistate Exhibits pages 27–30.

Unintended Pregnancy

Women who had a live birth were asked how they felt about becoming pregnant just before they were pregnant. “Intended” pregnancies are those for which a woman reported that she wanted to be pregnant then or sooner, whereas, “unintended” pregnancies refer to pregnancies for which the woman either wanted to be pregnant later or did not want to be pregnant at any time.

- **Prevalence (all states).** The prevalence of unintended pregnancy among women delivering a live birth ranged from 33.9% to 50.0% across the 13 states for 1997. The prevalence was highest in Oklahoma (50.0%, representing more than 19,500 women) and South Carolina (50.0%, representing more than 21,200 women) and lowest in Maine (33.9%, representing more than 3,650 women).
- **Significant Associations in Most States.** Unintended pregnancy among women having a live birth was associated with younger maternal age, black race, having prenatal care paid by Medicaid, and having a public source of prenatal care.
 - ▲ **Younger maternal age.** In all states, unintended pregnancy was significantly more prevalent among younger women (<20 years of age). In most states, unintended pregnancy resulting in live births decreased with increasing maternal age.
 - ▲ **Being an ethnic minority.** In 9 of the 10 states with sizable black populations, the prevalence of unintended pregnancy among women having a live birth was significantly higher

among black women than among white women. Hispanic women in Oklahoma were significantly less likely to report an unintended pregnancy resulting in a live birth than non-Hispanic women.

- ▲ **Prenatal care paid by Medicaid.** In all states, women whose prenatal care was paid for by Medicaid were significantly more likely to report an unintended pregnancy resulting in a live birth than women not receiving Medicaid.
- ▲ **Public source of prenatal care.** In 10 of 13 states, the prevalence of unintended pregnancy was significantly higher among women with a public source of prenatal care than women with a private source of care.

See Multistate Exhibits pages 31–34.

Contraceptive Use at the Time of Pregnancy and Pregnancy Intention

- **Prevalence (all states).** In all states, the prevalence of contraceptive use at the time of pregnancy for women with unintended pregnancies was significantly higher than for women with intended pregnancies.
 - ▲ **Unintended pregnancy.** Among the women reporting an unintended pregnancy, the prevalence of contraceptive use at the time of pregnancy ranged from 37.0% in Arkansas, referring to more than 4,860 women, to 48.3% in Maine, representing more than 1,650 women.
 - ▲ **Intended pregnancy.** The prevalence of contraceptive use at the time of pregnancy among women with an intended pregnancy ranged from 7.5% in Colorado, representing more than 1,660 women, to 11.4% in West Virginia, referring to at least 830 women.
- **Significant Differences Between Groups in Most States.** The prevalence of contraceptive use at the time of pregnancy varied significantly by selected maternal characteristics between women reporting an intended pregnancy and those reporting an unintended pregnancy.
 - ▲ In most states, the prevalence of contraceptive use at the time of pregnancy was significantly higher among women reporting an unintended pregnancy than for those reporting an intended pregnancy for women of all ages, for each race group and ethnicity, for each level of education, for married and unmarried women, for first-time and multiparous women, for women whose prenatal care was paid for by Medicaid or non-Medicaid sources, and for women with public or private prenatal care.

See Multistate Exhibits pages 35–40.

Mother's Perception of Partner's Pregnancy Intention

Women were asked about the pregnancy intention of their husband or partner. Specifically, each woman was asked if her husband or partner said he did not want her to be pregnant during the 12 months before delivery. Husband's or partner's pregnancy intention was defined as "unwanted" if a woman reported that her husband or partner did not want the pregnancy; all other observations were defined as "wanted."

- **Prevalence (all states).** Women reported that 10.4% to 14.1% of their husbands or partners did not want them to be pregnant. The prevalence was highest in Florida (14.1%, representing more than 21,980 women) and lowest in Alabama (10.4%, referring to more than 4,920 women) and West Virginia (10.4%, referring to more than 1,540 women).

- **Significant Associations in Most States.** Mother's perception of partner's pregnancy intention as unwanted was associated with younger maternal age, 12 or fewer years of education, being unmarried, and having prenatal care paid for by Medicaid.
 - ▲ **Younger maternal age.** In 7 of 13 states, the prevalence of mother's perception that her partner did not want the pregnancy was significantly lower among women at least 30 years old than among younger women.
 - ▲ **Fewer years of education.** In 7 of 13 states, women with more than 12 years of education were significantly less likely than women with 12 or fewer years of education to report that their husband or partner did not want the pregnancy.
 - ▲ **Being unmarried.** Married women in all 13 states were significantly less likely than unmarried women to report that their husband or partner did not want the pregnancy.
 - ▲ **Prenatal care paid by Medicaid.** In 10 of 13 states, women whose prenatal care was paid for by Medicaid were significantly more likely than women whose prenatal care was paid for by another source to report that their husband or partner did not want the pregnancy.

See Multistate Exhibits pages 41–44.

Contraceptive Use at the Time of Pregnancy and Mother's Perception of Partner's Pregnancy Intention

- **Prevalence (all states).** The prevalence of contraceptive use at the time of pregnancy was significantly higher in 10 states when women reported that their husband or partner did not want the pregnancy.
 - ▲ **Unwanted.** Among women who reported that their husband or partner did not want the pregnancy, the prevalence of contraceptive use at the time of pregnancy ranged from 22.2% to 45.7%. The prevalence was highest in Georgia (45.7%, representing more than 3,120 women) and lowest in North Carolina (22.2%, referring to at least 750 women).
 - ▲ **Wanted.** The prevalence of contraceptive use at the time of pregnancy for women who did not report that their husband or partner did not want the pregnancy ranged from 18.7% to 26.2%.
- **Significant Differences Between Groups in Most States.** The prevalence of contraceptive use at the time of pregnancy varied significantly by selected maternal characteristics between women who reported that their husband or partner did not want the pregnancy and those women who did not perceive their partner's pregnancy intention as unwanted.
 - ▲ In most states, the prevalence of contraceptive use at the time of pregnancy was significantly higher among women reporting that their husband or partner did not want the pregnancy than among those who did not report their husband's or partner's pregnancy intention as unwanted for women who were of white race, non-Hispanic, had more years of education (>12 years), were married, multiparous, and had a private source of prenatal care.

See Multistate Exhibits pages 45–50.

Contraceptive Use at Postpartum

Women were asked if they or their husbands or partners were using any contraceptive method at the time they completed the survey. The postpartum period was defined from delivery through

4 months after delivery. Women who completed the survey when their infant was more than 4 months old were excluded.

- **Prevalence (all states).** During the postpartum period, 75.8% to 88.1% of women reported using a method of contraception. The prevalence was highest in South Carolina (88.1%); this represented over 19,000 women. The prevalence was lowest in Florida (75.8%), but represented more than 93,000 women.
- **Significant Associations in Most States.** Use of contraception during the postpartum period care was not associated with any of the maternal characteristics examined in 7 or more states.

See Multistate Exhibits pages 51–54.

Discussion of Postpartum Contraceptive Use With Prenatal Care Provider

Women were asked if their prenatal health care provider discussed postpartum contraceptive use during any prenatal care visits. “Discussed” refers to women who reported that their prenatal health care provider discussed postpartum contraceptive use; “not discussed” refers to women who did not report discussion of postpartum contraceptive use with their prenatal health care provider.

- **Prevalence (all states).** In 1997, 78.1% to 87.5% of women who received prenatal care reported that a doctor or nurse talked with them about using contraception after the birth of their baby. The prevalence was highest in South Carolina (87.5%) and lowest in New York (78.1%) and Florida (78.2%).
- **Significant Associations in Most States.** Discussion of postpartum contraceptive use during prenatal care was not associated with any of the maternal characteristics examined in 7 or more states.

See Multistate Exhibits pages 55–58.

Contraceptive Use at Postpartum and Discussion of Postpartum Contraceptive Use With Prenatal Care Provider

- **Prevalence (all states).** In Alabama, Alaska, and North Carolina, the prevalence of postpartum contraceptive use was significantly lower among women who did not report discussion than among the women who did report discussion.
 - ▲ **Discussion.** Among women who reported discussion of postpartum contraceptive use with their prenatal care provider, the prevalence of contraceptive use during the postpartum period ranged from 78.0% in Florida to 89.3% in Alabama.
 - ▲ **No discussion.** Among women reporting no discussion of postpartum contraceptive use during prenatal care, the prevalence of postpartum contraceptive use ranged from 66.5% in Alaska to 86.1% in South Carolina.
- **Significant Differences Between Groups in Most States.** Significant differences in the prevalence of contraceptive use during the postpartum period for women receiving prenatal discussion of postpartum contraceptive use and those who did not receive counseling for selected maternal characteristics did not occur in 7 or more states.

See Multistate Exhibits pages 59–64.

Multistate Exhibits

PRAMS 1997 Special Report

Pregnancy Risk Assessment Monitoring System, 1997

Contraceptive Use at the Time of Pregnancy

State	Estimated Population	Percent	95% CI**
Alabama	12,738 - 15,754	24.5	21.9 - 27.1
Alaska	1,918 - 2,419	22.1	19.6 - 24.7
Arkansas	7,111 - 9,134	24.4	21.3 - 27.4
Colorado	10,427 - 13,496	21.7	19.0 - 24.5
Florida	41,801 - 51,383	25.2	22.6 - 27.7
Georgia	26,012 - 35,094	27.0	23.1 - 30.8
Maine	2,589 - 3,311	22.7	19.9 - 25.4
New York†	23,988 - 32,173	22.3	19.2 - 25.5
North Carolina†	10,088 - 14,431	22.9	19.0 - 26.9
Oklahoma	9,140 - 12,069	23.6	20.4 - 26.8
South Carolina	11,563 - 15,297	27.9	24.1 - 31.7
Washington	14,323 - 18,464	22.0	19.2 - 24.7
West Virginia	4,032 - 5,073	24.9	22.0 - 27.7

* Contraceptive use at the time of pregnancy is defined as women who were using a method of contraception when they got pregnant.

‡ Data do not include New York City.

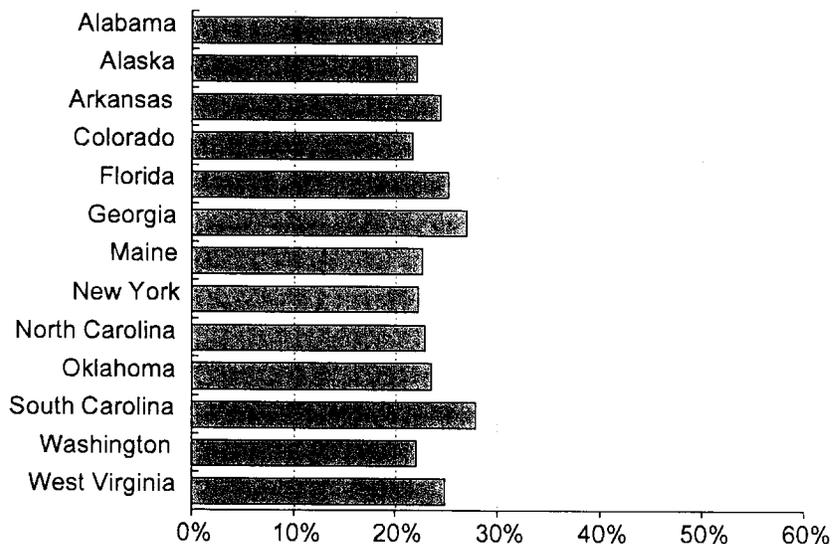
† Data represent July through December only.

** Confidence interval

Notes:

1) Range among states is 21.7% to 27.9%

Contraceptive Use at the Time of Pregnancy



Pregnancy Risk Assessment Monitoring System, 1997

Contraceptive Use at Time of Pregnancy by Selected Maternal Characteristics

Characteristic	Alabama		Alaska		Arkansas		Colorado		Florida		Georgia		Maine	
	Pct	95% CI**	Pct	95% CI**	Pct	95% CI**	Pct	95% CI**	Pct	95% CI**	Pct	95% CI**	Pct	95% CI**
Maternal age														
< 20 years	29.0	23.0 - 35.0	27.6	19.2 - 35.9	36.2	28.1 - 44.2	36.7	26.3 - 47.1	34.5	27.5 - 41.5	32.7	23.1 - 42.3	36.8	25.7 - 47.9
20-29 years	26.6	23.0 - 30.2	21.0	17.6 - 24.4	22.4	18.5 - 26.3	24.1	20.0 - 28.2	24.4	20.8 - 28.0	30.6	25.1 - 36.1	24.3	20.5 - 28.1
≥ 30 years	16.0	11.4 - 20.6	21.9	17.7 - 26.1	20.6	15.0 - 26.3	14.8	11.4 - 18.3	22.6	18.3 - 26.9	18.5	12.0 - 25.0	16.8	12.9 - 20.7
Maternal race														
White	22.2	19.2 - 25.3	22.2	18.7 - 25.6	21.8	18.4 - 25.1	21.9	19.0 - 24.7	22.2	19.0 - 25.3	21.9	16.7 - 27.0	22.3	19.6 - 25.1
Black	30.0	25.0 - 35.0	23.2	9.1 - 37.4	32.6	25.8 - 39.5	15.6	4.1 - 27.2	36.0	32.0 - 40.0	36.8	31.2 - 42.4	*	*
Other	*	*	22.0	18.6 - 25.4	*	*	23.8	7.2 - 40.5	17.6	2.1 - 33.1	*	*	*	*
Hispanic ethnicity														
No	24.4	21.8 - 27.0	22.1	19.5 - 24.7	24.6	21.5 - 27.7	18.9	16.1 - 21.7	24.6	21.8 - 27.4	26.2	22.3 - 30.1	22.8	20.0 - 25.6
Yes	*	*	23.0	11.5 - 34.6	15.2	0.0 - 34.9	32.0	24.6 - 39.5	27.2	21.1 - 33.3	35.4	14.0 - 56.7	*	*
Maternal education														
< 12 years	29.0	23.4 - 34.7	26.8	19.4 - 34.2	24.4	17.3 - 31.4	31.2	22.4 - 40.0	25.4	19.9 - 30.9	32.1	23.1 - 41.1	28.0	18.0 - 37.9
12 years	22.7	18.5 - 26.9	20.7	16.9 - 24.5	26.1	21.3 - 30.9	24.3	19.2 - 29.5	23.1	19.3 - 27.0	29.9	23.1 - 36.8	27.0	22.1 - 31.9
> 12 years	23.7	19.7 - 27.7	22.0	18.2 - 25.8	22.1	17.4 - 26.8	17.3	14.2 - 20.4	26.8	22.7 - 31.0	22.9	17.3 - 28.4	19.0	15.6 - 22.3
Marital status														
Married	20.5	17.4 - 23.5	19.5	16.6 - 22.3	23.1	19.4 - 26.7	17.1	14.3 - 19.8	21.3	18.1 - 24.5	19.7	15.2 - 24.3	18.1	15.2 - 21.0
Not married	32.3	27.6 - 37.0	28.9	23.9 - 33.9	27.0	21.6 - 32.4	36.8	29.6 - 43.9	32.0	27.7 - 36.3	41.7	35.0 - 48.4	33.7	27.7 - 39.7
Parity														
Primipara	22.8	19.1 - 26.4	21.6	17.4 - 25.9	23.3	18.8 - 27.9	19.1	15.2 - 22.9	25.9	21.9 - 29.9	23.2	17.8 - 28.6	21.4	17.4 - 25.4
Multipara	26.0	22.4 - 29.7	22.5	19.3 - 25.6	25.1	21.0 - 29.2	24.0	20.1 - 27.8	24.7	21.3 - 28.0	30.3	24.8 - 35.8	23.7	19.9 - 27.4
Prenatal care paid by														
Medicaid	29.9	26.1 - 33.6	25.7	21.6 - 29.8	28.1	23.7 - 32.5	30.4	24.8 - 36.0	28.6	24.8 - 32.5	36.3	30.5 - 42.1	34.4	29.0 - 39.8
Non-Medicaid	19.2	15.6 - 22.7	19.7	16.5 - 22.9	20.9	16.7 - 25.1	17.6	14.6 - 20.6	22.3	18.9 - 25.7	16.8	12.0 - 21.7	16.2	13.3 - 19.1
Source of prenatal care														
Private	22.9	19.8 - 26.0	22.0	17.8 - 26.1	23.0	19.5 - 26.5	18.5	15.5 - 21.5	24.2	21.2 - 27.3	26.6	22.4 - 30.8	20.9	17.9 - 23.8
Public	26.7	21.8 - 31.7	22.2	18.7 - 25.6	26.9	20.6 - 33.3	26.2	20.0 - 32.5	27.7	22.6 - 32.8	26.4	16.6 - 36.3	36.5	27.7 - 45.3

* Sample size is less than 30.

** Confidence interval

Pregnancy Risk Assessment Monitoring System, 1997

Contraceptive Use at Time of Pregnancy by Selected Maternal Characteristics

Characteristic	New York [†]		North Carolina [†]		Oklahoma		South Carolina		Washington		West Virginia	
	Pct	95% CI**	Pct	95% CI**	Pct	95% CI**	Pct	95% CI**	Pct	95% CI**	Pct	95% CI**
Maternal age												
< 20 years	34.9	21.1 - 48.6	27.8	16.9 - 38.6	26.4	17.5 - 35.4	40.2	30.2 - 50.3	30.5	20.8 - 40.1	33.3	28.9 - 37.8
20-29 years	23.9	18.9 - 28.8	26.7	20.9 - 32.5	25.0	20.9 - 29.1	28.6	23.3 - 33.9	24.4	20.3 - 28.5	22.0	18.2 - 25.8
≥ 30 years	18.8	14.7 - 23.0	13.7	8.4 - 19.0	17.9	12.1 - 23.7	19.2	13.3 - 25.0	16.7	12.9 - 20.5	26.2	19.9 - 32.5
Maternal race												
White	22.0	18.7 - 25.4	21.1	16.5 - 25.7	22.0	18.6 - 25.5	23.3	18.8 - 27.7	21.5	18.3 - 24.6	24.6	21.8 - 27.5
Black	24.7	13.7 - 35.6	27.4	19.4 - 35.5	30.9	19.4 - 42.3	35.6	28.8 - 42.5	31.0	26.2 - 35.7	28.7	14.0 - 43.5
Other	23.2	5.9 - 40.6	*	*	27.4	17.7 - 37.1	*	*	22.8	17.7 - 27.8	*	*
Hispanic ethnicity												
No	21.9	18.3 - 25.6	23.0	19.0 - 27.0	23.9	20.6 - 27.3	27.6	23.8 - 31.5	21.0	17.9 - 24.1	24.9	22.1 - 27.8
Yes	41.4	27.3 - 55.4	*	*	20.6	10.0 - 31.1	*	*	28.7	24.5 - 32.9	*	*
Maternal education												
< 12 years	34.8	24.9 - 44.7	27.0	17.2 - 36.8	26.1	18.2 - 33.9	31.7	22.9 - 40.6	30.0	22.7 - 37.3	23.3	17.6 - 29.0
12 years	23.8	17.6 - 29.9	21.3	14.4 - 28.2	24.3	19.2 - 29.4	29.7	23.0 - 36.5	23.5	18.2 - 28.7	25.7	21.3 - 30.0
> 12 years	18.2	14.4 - 21.9	22.2	16.8 - 27.6	19.5	15.0 - 24.0	24.3	18.9 - 29.6	18.4	14.5 - 22.3	25.1	20.2 - 30.1
Marital status												
Married	16.9	13.7 - 20.0	19.3	14.9 - 23.7	18.1	14.8 - 21.5	22.0	17.7 - 26.2	20.3	17.2 - 23.5	23.0	19.5 - 26.4
Not married	36.2	28.7 - 43.6	30.0	22.3 - 37.8	33.5	26.9 - 40.0	37.2	30.4 - 44.1	26.8	21.2 - 32.4	28.9	23.9 - 34.0
Parity												
Primipara	20.2	15.5 - 25.0	20.4	14.8 - 26.1	19.8	14.9 - 24.6	25.2	19.8 - 30.7	20.7	16.3 - 25.1	23.0	19.3 - 26.6
Multipara	23.8	19.6 - 28.0	25.0	19.5 - 30.5	25.2	20.9 - 29.6	29.7	24.5 - 34.9	22.6	19.0 - 26.3	26.4	22.2 - 30.5
Prenatal care paid by												
Medicaid	33.6	26.6 - 40.6	28.6	22.1 - 35.1	28.6	22.9 - 34.4	33.8	28.1 - 39.4	32.1	26.9 - 37.3	27.4	23.5 - 31.2
Non-Medicaid	17.6	14.3 - 20.9	17.9	13.3 - 22.6	20.6	16.9 - 24.4	21.5	16.7 - 26.3	17.3	14.1 - 20.4	21.4	17.2 - 25.5
Source of prenatal care												
Private	19.6	16.1 - 23.0	19.5	15.1 - 23.9	21.1	17.2 - 25.0	27.1	22.7 - 31.4	20.3	16.7 - 23.9	24.1	20.8 - 27.5
Public	29.5	21.5 - 37.5	31.7	22.9 - 40.5	29.1	22.8 - 35.5	30.2	21.5 - 38.9	25.8	21.1 - 30.6	24.4	17.9 - 30.9

* Sample size is less than 30.

** Confidence interval

† Data represent July through December only.

‡ Data do not include New York City.

Pregnancy Risk Assessment Monitoring System, 1997

Unintended Pregnancy Among Women Delivering a Live-Born Infant

State	Estimated Population	Percent	95% CI**
Alabama	24,902 - 28,336	49.2	46.2 - 52.2
Alaska	3,224 - 3,818	40.5	37.4 - 43.7
Arkansas	14,264 - 16,824	49.9	46.1 - 53.6
Colorado	17,664 - 21,387	38.0	34.6 - 41.3
Florida	78,346 - 89,580	47.6	44.6 - 50.6
Georgia	43,269 - 54,099	45.0	40.5 - 49.5
Maine	3,642 - 4,459	33.9	30.7 - 37.1
New York†	40,025 - 49,807	38.4	34.6 - 42.2
North Carolina‡	21,542 - 26,975	47.6	42.9 - 52.4
Oklahoma	19,488 - 22,993	50.0	46.2 - 53.8
South Carolina	21,187 - 25,445	50.0	45.7 - 54.2
Washington	23,078 - 27,911	36.6	33.2 - 39.9
West Virginia	6,417 - 7,609	41.7	38.4 - 45.1

* Unintended pregnancy is defined as a pregnancy for which the woman either wanted to be pregnant later or did not want to be pregnant at any time.

‡ Data do not include New York City.

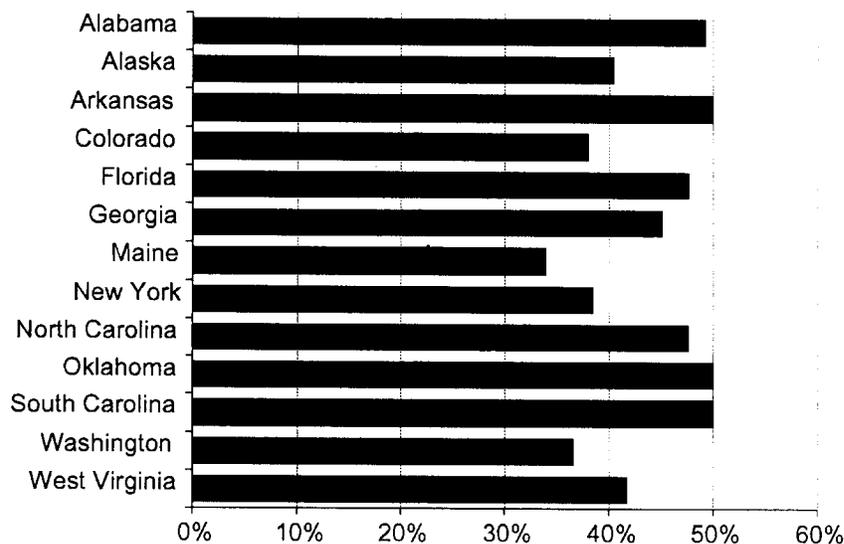
† Data represent July through December only.

** Confidence interval

Notes:

1) Range among states is 33.9% to 50.0%

Unintended Pregnancy Among Women Delivering a Live-Born Infant



Pregnancy Risk Assessment Monitoring System, 1997

Unintended Pregnancy Among Women Delivering a Live-Born Infant, by Selected Maternal Characteristics

Characteristic	Alabama		Alaska		Arkansas		Colorado		Florida		Georgia		Maine	
	Pct	95% CI**	Pct	95% CI**	Pct	95% CI**	Pct	95% CI**	Pct	95% CI**	Pct	95% CI**	Pct	95% CI**
Maternal age														
< 20 years	74.4	68.2 - 80.6	78.9	70.3 - 87.6	73.5	66.0 - 81.0	69.3	58.0 - 80.6	71.4	64.2 - 78.6	71.5	61.6 - 81.4	77.7	67.9 - 87.6
20-29 years	49.5	45.4 - 53.6	39.6	35.3 - 43.9	49.8	44.9 - 54.8	43.6	38.7 - 48.6	49.8	45.5 - 54.1	47.0	40.9 - 53.1	38.5	34.0 - 42.9
≥ 30 years	29.4	23.6 - 35.3	29.9	25.0 - 34.8	34.8	27.5 - 42.1	23.0	18.7 - 27.3	35.3	30.3 - 40.2	31.0	23.0 - 39.0	17.1	13.1 - 21.2
Maternal race														
White	41.7	38.1 - 45.4	38.2	34.0 - 42.4	45.2	40.9 - 49.6	36.8	33.4 - 40.2	40.4	36.7 - 44.2	35.8	29.6 - 42.0	33.4	30.2 - 36.7
Black	66.0	60.5 - 71.5	55.2	37.0 - 73.4	64.7	57.3 - 72.1	56.7	35.6 - 77.8	72.8	69.0 - 76.6	63.4	57.6 - 69.1	*	*
Other	*	*	43.9	39.5 - 48.4	*	*	58.3	38.9 - 77.7	38.6	18.6 - 58.6	*	*	*	*
Hispanic ethnicity														
No	49.5	46.5 - 52.5	40.7	37.5 - 44.0	49.8	46.0 - 53.6	35.6	32.1 - 39.2	49.4	46.1 - 52.8	45.7	41.2 - 50.3	33.1	29.8 - 36.3
Yes	*	*	37.5	22.7 - 52.3	*	*	46.6	38.4 - 54.8	41.5	34.7 - 48.3	36.1	14.7 - 57.5	*	*
Maternal education														
< 12 years	67.5	61.3 - 73.8	60.2	51.7 - 68.7	61.3	52.5 - 70.0	54.3	44.1 - 64.5	60.6	53.7 - 67.4	57.9	47.1 - 68.7	64.9	53.2 - 76.6
12 years	50.6	45.4 - 55.8	45.7	40.7 - 50.7	54.9	49.2 - 60.7	46.5	40.3 - 52.7	48.9	44.0 - 53.8	57.5	49.6 - 65.4	40.9	35.2 - 46.5
> 12 years	38.7	34.1 - 43.4	29.5	25.1 - 33.9	39.0	33.2 - 44.8	28.4	24.6 - 32.3	40.4	35.7 - 45.0	31.0	25.2 - 36.7	24.9	21.1 - 28.7
Marital status														
Married	35.8	32.2 - 39.5	31.8	28.2 - 35.4	39.2	34.7 - 43.7	28.7	25.4 - 32.1	35.2	31.5 - 38.9	31.7	26.1 - 37.3	22.3	19.1 - 25.5
Not married	76.9	72.4 - 81.5	65.2	59.7 - 70.6	71.7	65.7 - 77.8	70.2	63.0 - 77.4	70.8	66.2 - 75.5	72.7	66.3 - 79.2	65.6	59.0 - 72.1
Parity														
Primipara	50.9	46.4 - 55.3	42.7	37.3 - 48.1	52.2	46.6 - 57.9	39.1	34.1 - 44.1	45.5	40.7 - 50.2	38.6	32.2 - 44.9	34.4	29.6 - 39.2
Multipara	47.8	43.5 - 52.0	39.3	35.4 - 43.2	48.2	43.2 - 53.2	37.0	32.6 - 41.5	49.1	45.2 - 53.1	50.9	44.6 - 57.1	33.6	29.3 - 38.0
Prenatal care paid by														
Medicaid	66.0	61.8 - 70.1	55.5	50.5 - 60.5	63.6	58.5 - 68.7	56.6	50.3 - 62.9	62.1	57.8 - 66.5	63.5	57.3 - 69.7	55.7	49.7 - 61.8
Non-Medicaid	33.3	29.0 - 37.6	31.4	27.5 - 35.3	36.9	31.9 - 41.9	29.6	25.8 - 33.4	35.8	31.8 - 39.8	25.6	20.1 - 31.1	23.2	19.7 - 26.6
Source of prenatal care														
Private	41.8	38.1 - 45.5	33.2	28.3 - 38.2	44.6	40.1 - 49.0	32.4	28.6 - 36.1	45.0	41.3 - 48.6	44.1	39.0 - 49.1	31.1	27.6 - 34.6
Public	65.3	59.7 - 70.9	45.3	40.8 - 49.8	61.4	54.0 - 68.9	51.4	44.2 - 58.6	56.3	50.3 - 62.3	45.1	33.3 - 57.0	45.8	36.2 - 55.5

* Sample size is less than 30.

** Confidence interval

Pregnancy Risk Assessment Monitoring System, 1997

Unintended Pregnancy Among Women Delivering a Live-Born Infant, by Selected Maternal Characteristics

Characteristic	New York [‡]		North Carolina [†]		Oklahoma		South Carolina		Washington		West Virginia	
	Pct	95% CI**	Pct	95% CI**	Pct	95% CI**	Pct	95% CI**	Pct	95% CI**	Pct	95% CI**
Maternal age												
< 20 years	85.4	75.0 - 95.8	83.1	74.2 - 92.0	75.5	66.5 - 84.6	81.5	73.6 - 89.3	60.7	50.1 - 71.4	66.5	61.9 - 71.2
20-29 years	42.8	37.0 - 48.7	51.6	45.1 - 58.2	48.6	43.9 - 53.4	47.3	41.5 - 53.2	41.2	36.4 - 46.1	39.0	34.3 - 43.7
≥ 30 years	27.4	22.6 - 32.2	19.2	12.9 - 25.5	36.1	28.7 - 43.5	35.4	28.1 - 42.7	24.9	20.2 - 29.5	31.2	24.4 - 38.0
Maternal race												
White	36.0	32.1 - 39.9	37.4	31.8 - 42.9	44.7	40.5 - 48.9	41.5	36.3 - 46.7	34.7	30.9 - 38.5	40.5	37.1 - 43.9
Black	69.4	56.4 - 82.4	69.7	61.2 - 78.1	75.3	64.3 - 86.4	66.3	59.4 - 73.2	60.9	55.7 - 66.0	61.2	43.8 - 78.6
Other	10.7	0.0 - 24.0	*	*	62.6	52.0 - 73.3	*	*	42.2	36.0 - 48.5	*	*
Hispanic ethnicity												
No	38.7	34.3 - 43.1	47.6	42.8 - 52.4	51.5	47.5 - 55.4	49.8	45.5 - 54.1	36.0	32.2 - 39.8	41.6	38.3 - 45.0
Yes	43.8	29.0 - 58.7	*	*	34.3	21.2 - 47.3	*	*	41.6	37.0 - 46.3	*	*
Maternal education												
< 12 years	62.5	52.0 - 73.0	72.8	62.6 - 83.0	64.0	55.1 - 72.8	66.6	57.5 - 75.8	49.4	41.3 - 57.6	54.1	46.9 - 61.4
12 years	42.7	35.3 - 50.0	53.1	44.7 - 61.5	55.6	49.5 - 61.7	52.6	45.2 - 60.0	42.6	36.2 - 49.1	43.0	37.8 - 48.2
> 12 years	28.9	24.5 - 33.4	32.1	26.0 - 38.2	37.8	32.3 - 43.4	39.5	33.3 - 45.7	29.1	24.5 - 33.8	32.9	27.3 - 38.4
Marital status												
Married	26.7	22.9 - 30.5	29.4	24.2 - 34.5	39.0	34.7 - 43.3	33.3	28.4 - 38.3	27.2	23.7 - 30.7	32.6	28.7 - 36.6
Not married	69.2	61.8 - 76.5	84.5	78.5 - 90.6	73.3	66.8 - 79.8	76.6	70.5 - 82.8	65.8	59.5 - 72.1	63.1	57.1 - 69.0
Parity												
Primipara	34.8	29.1 - 40.5	48.5	41.5 - 55.5	48.1	41.8 - 54.4	52.8	46.5 - 59.2	34.7	29.4 - 40.0	41.5	36.9 - 46.0
Multipara	41.0	36.0 - 46.0	47.0	40.5 - 53.4	52.1	47.1 - 57.1	48.0	42.3 - 53.7	37.6	33.2 - 42.0	41.8	37.0 - 46.7
Prenatal care paid by												
Medicaid	63.2	55.9 - 70.6	71.2	64.6 - 77.8	63.3	57.0 - 69.6	66.9	61.3 - 72.6	53.4	47.7 - 59.1	50.5	46.0 - 55.0
Non-Medicaid	28.3	24.3 - 32.3	27.8	22.3 - 33.4	42.7	38.1 - 47.3	31.5	25.9 - 37.0	29.1	25.2 - 33.0	30.0	25.2 - 34.8
Source of prenatal care												
Private	30.2	26.1 - 34.2	37.5	32.0 - 43.0	44.3	39.5 - 49.1	45.0	40.1 - 49.9	32.9	28.5 - 37.3	39.0	35.1 - 43.0
Public	61.3	52.5 - 70.1	69.4	60.8 - 78.1	60.2	53.3 - 67.1	62.2	53.1 - 71.4	42.3	36.8 - 47.8	47.6	39.6 - 55.6

* Sample size is less than 30.

** Confidence interval

† Data represent July through December only.

‡ Data do not include New York City.

Pregnancy Risk Assessment Monitoring System, 1997

Contraceptive Use at Time of Pregnancy and Pregnancy Intention

State	Intended			Unintended		
	Estimated Population	Pct	95% CI**	Estimated Population	Pct	95% CI**
Alabama [‡]	1,733 - 3,157	8.9	6.4 - 11.5	9306 - 12000	40.0	35.7 - 44.4
Alaska [‡]	362 - 602	9.4	7.1 - 11.6	1127 - 1552	38.1	33.1 - 43.2
Arkansas [§]	1,179 - 2,244	11.0	7.6 - 14.3	4851 - 6525	37.0	32.1 - 42.0
Colorado [‡]	1,656 - 3,117	7.5	5.3 - 9.8	7001 - 9624	42.7	37.2 - 48.3
Florida [‡]	7,479 - 12,585	11.1	8.4 - 13.9	28914 - 37228	40.0	35.7 - 44.2
Georgia [‡]	3,572 - 8,019	9.9	6.2 - 13.5	17815 - 25665	45.3	38.7 - 52.0
Maine [§]	452 - 804	8.0	5.8 - 10.2	1647 - 2263	48.3	42.3 - 54.2
New York ^{‡§}	3,682 - 7,423	7.7	5.2 - 10.3	16052 - 23224	44.0	37.6 - 50.5
North Carolina [‡]	1,307 - 3,293	8.6	5.0 - 12.3	7270 - 11204	38.9	31.8 - 45.9
Oklahoma [‡]	1,173 - 2,428	8.6	5.6 - 11.5	6817 - 9499	38.7	33.3 - 44.1
South Carolina [‡]	1,634 - 3,404	10.9	7.2 - 14.7	8426 - 11817	43.9	37.8 - 50.1
Washington [†]	2,913 - 5,015	9.0	6.7 - 11.3	9131 - 12672	43.4	37.7 - 49.1
West Virginia [‡]	825 - 1,399	11.4	8.6 - 14.3	2534 - 3413	42.9	37.7 - 48.2

* Pregnancy intention is defined as *intended* if the woman reported that she wanted to be pregnant then or sooner and as *unintended* if the woman either wanted to be pregnant later (mistimed) or did not want to be pregnant at any time (unwanted).

‡ Data do not include New York City.

† Data represent July through December only.

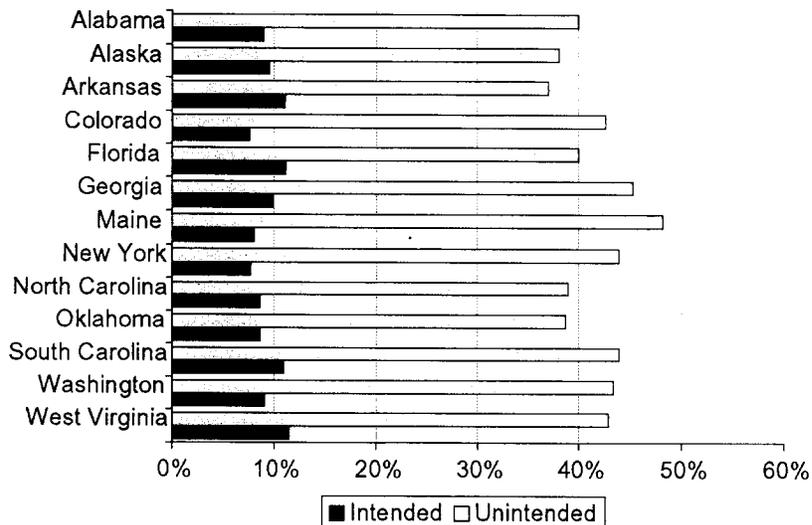
§ Groups are significantly different.

** Confidence interval

Notes:

1) Range among states is 7.5% to 11.4% for women whose pregnancy was intended and 37.0% to 48.3% for women whose pregnancy was unintended.

Contraceptive Use at Time of Pregnancy and Pregnancy Intention



Pregnancy Risk Assessment Monitoring System, 1997

Contraceptive Use at Time of Pregnancy and Pregnancy Intention, by Selected Maternal Characteristics

Characteristic	Alabama				Alaska				Arkansas			
	Unintended		Intended		Unintended		Intended		Unintended		Intended	
	Pct	95% CI**	Pct	95% CI**	Pct	95% CI**	Pct	95% CI**	Pct	95% CI**	Pct	95% CI**
Maternal age												
< 20 years	33.6	26.0 - 41.3	15.8	5.6 - 26.0	35.6	24.2 - 47.0	*	*	35.1	26.2 - 44.1	26.4	11.6 - 41.2
20-29 years	43.0	37.1 - 48.8	9.1	5.7 - 12.6	34.2	27.5 - 40.8	10.9	7.4 - 14.3	36.0	29.3 - 42.7	9.2	5.3 - 13.1
≥ 30 years	40.7	29.1 - 52.3	6.7	2.9 - 10.6	48.0	38.2 - 57.8	7.6	4.6 - 10.7	42.7	30.5 - 55.0	9.8	3.9 - 15.7
Maternal race												
White	41.6	35.9 - 47.4	7.9	5.2 - 10.6	42.1	35.1 - 49.1	7.4	4.6 - 10.1	33.6	27.8 - 39.5	10.6	7.1 - 14.2
Black	38.5	31.6 - 45.3	13.3	6.4 - 20.2	*	*	*	*	43.1	34.1 - 52.2	13.9	4.3 - 23.6
Other	*	*	*	*	29.5	23.4 - 35.5	15.4	11.0 - 19.9	*	*	*	*
Hispanic ethnicity												
No	39.7	35.3 - 44.0	8.8	6.3 - 11.4	38.6	33.5 - 43.8	9.3	7.0 - 11.6	37.1	32.1 - 42.1	11.2	7.8 - 14.5
Yes	*	*	*	*	*	*	10.4	0.0 - 21.4	*	*	*	*
Maternal education												
< 12 years	37.3	29.4 - 45.2	13.4	5.2 - 21.7	39.9	28.1 - 51.7	14.7	6.0 - 23.3	26.0	17.3 - 34.7	15.2	6.7 - 23.6
12 years	37.0	30.0 - 44.0	7.3	3.5 - 11.1	29.7	22.8 - 36.5	9.4	5.7 - 13.0	40.3	32.8 - 47.7	9.8	4.5 - 15.2
> 12 years	46.0	38.2 - 53.7	8.8	5.3 - 12.4	49.6	40.7 - 58.6	8.4	5.3 - 11.5	40.1	31.0 - 49.1	10.4	5.5 - 15.3
Marital status												
Married	42.3	35.9 - 48.7	8.3	5.6 - 11.0	40.3	33.6 - 47.0	8.4	6.0 - 10.9	41.7	34.6 - 48.9	11.2	7.3 - 15.0
Not married	37.8	31.9 - 43.7	12.4	5.4 - 19.5	35.2	27.6 - 42.7	14.4	8.3 - 20.6	31.7	25.0 - 38.5	10.0	4.5 - 15.4
Parity												
Primipara	34.0	28.1 - 40.0	9.8	5.9 - 13.6	36.9	28.7 - 45.1	9.4	5.2 - 13.5	32.7	25.8 - 39.6	9.8	5.5 - 14.2
Multipara	45.5	39.3 - 51.7	8.3	4.9 - 11.6	38.9	32.6 - 45.3	9.4	6.6 - 12.1	40.2	33.3 - 47.1	11.7	7.0 - 16.3
Prenatal care paid by												
Medicaid	38.7	33.5 - 43.9	12.6	7.9 - 17.3	35.6	28.8 - 42.4	14.8	10.0 - 19.6	35.7	29.4 - 41.9	14.8	9.0 - 20.6
Non-Medicaid	42.5	34.7 - 50.4	7.2	4.2 - 10.1	40.9	33.5 - 48.4	7.2	4.6 - 9.7	39.2	31.2 - 47.3	8.9	4.8 - 12.9
Source of prenatal care												
Private	43.6	37.7 - 49.4	7.9	5.2 - 10.7	47.0	37.7 - 56.3	6.4	3.4 - 9.5	37.7	31.4 - 43.9	11.5	7.6 - 15.4
Public	33.9	27.0 - 40.8	13.2	6.2 - 20.1	33.1	26.6 - 39.5	12.7	9.0 - 16.4	35.8	27.0 - 44.7	9.7	3.1 - 16.2

* Sample size is less than 30.

** Confidence interval

Pregnancy Risk Assessment Monitoring System, 1997

Contraceptive Use at Time of Pregnancy and Pregnancy Intention, by Selected Maternal Characteristics

Characteristic	Colorado				Florida				Georgia			
	Unintended		Intended		Unintended		Intended		Unintended		Intended	
	Pct	95% CI**	Pct	95% CI**	Pct	95% CI**	Pct	95% CI**	Pct	95% CI**	Pct	95% CI**
Maternal age												
< 20 years	42.4	29.8 - 55.0	17.9	1.6 - 34.3	41.9	33.2 - 50.6	13.1	3.9 - 22.3	37.0	24.6 - 49.3	9.4	0.0 - 22.9
20-29 years	45.0	37.4 - 52.6	7.3	4.3 - 10.2	37.3	31.5 - 43.1	12.1	8.0 - 16.2	47.1	38.5 - 55.7	14.3	8.1 - 20.6
≥ 30 years	37.9	27.8 - 48.1	6.6	3.5 - 9.8	43.8	35.0 - 52.6	9.7	5.7 - 13.7	48.7	32.8 - 64.6	4.5	1.1 - 7.8
Maternal race												
White	44.0	38.2 - 49.8	7.6	5.2 - 9.9	39.3	33.3 - 45.3	9.6	6.6 - 12.6	46.9	36.1 - 57.8	6.8	2.7 - 10.8
Black	*	*	*	*	41.2	36.2 - 46.3	22.6	15.6 - 29.5	42.9	35.6 - 50.3	21.1	12.6 - 29.6
Other	*	*	*	*	*	*	9.3	0.0 - 25.1	*	*	*	*
Hispanic ethnicity												
No	40.4	34.3 - 46.5	5.4	3.5 - 7.2	40.8	36.1 - 45.4	8.1	5.6 - 10.6	44.9	38.2 - 51.5	8.0	4.7 - 11.3
Yes	49.4	37.1 - 61.6	17.1	8.3 - 25.8	36.7	26.5 - 46.8	20.6	12.8 - 28.3	*	*	*	*
Maternal education												
< 12 years	42.6	29.4 - 55.7	15.8	5.0 - 26.6	35.2	27.4 - 43.0	11.3	4.0 - 18.6	39.1	26.2 - 51.9	16.6	5.2 - 28.0
12 years	40.4	31.6 - 49.2	8.9	4.1 - 13.7	33.5	27.3 - 39.8	10.0	5.8 - 14.2	43.3	32.5 - 54.0	8.4	3.2 - 13.7
> 12 years	45.0	37.0 - 53.0	5.3	3.3 - 7.4	50.3	42.8 - 57.9	11.9	7.8 - 16.0	53.0	42.3 - 63.7	8.6	3.7 - 13.5
Marital status												
Married	42.5	35.8 - 49.3	6.6	4.4 - 8.9	41.8	35.4 - 48.3	9.5	6.6 - 12.5	43.6	33.0 - 54.1	7.3	3.8 - 10.9
Not married	43.0	33.7 - 52.3	15.0	5.4 - 24.6	38.2	32.7 - 43.8	17.8	10.6 - 25.0	46.9	38.7 - 55.1	23.3	10.5 - 36.1
Parity												
Primipara	36.6	28.7 - 44.6	5.4	3.1 - 7.7	41.4	34.6 - 48.1	12.5	8.1 - 16.9	42.1	32.3 - 51.9	10.7	4.9 - 16.5
Multipara	48.1	40.6 - 55.6	9.3	5.7 - 12.9	39.1	33.6 - 44.5	10.1	6.6 - 13.6	47.3	38.3 - 56.3	8.9	4.7 - 13.1
Prenatal care paid by												
Medicaid	42.0	33.9 - 50.1	13.9	7.3 - 20.5	36.1	30.9 - 41.4	15.4	10.0 - 20.9	44.8	37.0 - 52.7	19.3	10.8 - 27.8
Non-Medicaid	43.4	35.8 - 50.9	5.8	3.6 - 8.0	45.4	38.4 - 52.3	9.1	6.0 - 12.2	46.6	34.3 - 58.9	5.1	1.8 - 8.4
Source of prenatal care												
Private	41.8	35.0 - 48.7	5.2	3.2 - 7.1	41.7	36.3 - 47.1	9.6	6.7 - 12.5	47.4	39.8 - 55.0	8.8	5.0 - 12.6
Public	40.7	30.4 - 51.1	13.6	6.0 - 21.2	35.9	28.8 - 43.1	15.4	8.3 - 22.4	32.1	18.8 - 45.3	14.6	1.1 - 28.2

* Sample size is less than 30.

** Confidence interval

Pregnancy Risk Assessment Monitoring System, 1997

Contraceptive Use at Time of Pregnancy and Pregnancy Intention, by Selected Maternal Characteristics

Characteristic	Maine				New York†				North Carolina‡			
	Unintended		Intended		Unintended		Intended		Unintended		Intended	
	Pct	95% CI**	Pct	95% CI**	Pct	95% CI**	Pct	95% CI**	Pct	95% CI**	Pct	95% CI**
Maternal age												
< 20 years	43.7	29.5 - 58.0	*	*	45.4	28.5 - 62.3	*	*	32.6	19.8 - 45.5	*	*
20-29 years	49.7	42.1 - 57.2	7.1	4.2 - 10.0	44.7	35.3 - 54.1	8.6	4.4 - 12.7	40.1	30.8 - 49.5	14.5	7.8 - 21.2
≥ 30 years	48.2	35.1 - 61.3	8.5	5.2 - 11.9	42.5	32.1 - 52.9	7.3	4.0 - 10.6	48.3	30.2 - 66.4	3.3	0.3 - 6.3
Maternal race												
White	48.5	42.4 - 54.6	7.5	5.4 - 9.7	47.2	40.2 - 54.3	7.4	4.7 - 10.0	43.0	33.3 - 52.7	8.4	4.4 - 12.3
Black	*	*	*	*	30.2	14.7 - 45.6	6.9	0.0 - 17.4	34.6	23.9 - 45.4	10.5	0.9 - 20.1
Other	*	*	*	*	*	*	*	*	*	*	*	*
Hispanic ethnicity												
No	49.2	43.0 - 55.4	8.1	5.8 - 10.3	44.4	36.9 - 51.9	6.2	3.6 - 8.9	38.7	31.6 - 45.8	8.7	5.1 - 12.4
Yes	*	*	*	*	59.5	36.8 - 82.1	28.9	11.0 - 46.9	*	*	*	*
Maternal education												
< 12 years	35.8	20.6 - 51.1	9.2	0.0 - 19.5	43.6	29.6 - 57.7	22.1	8.2 - 36.1	34.9	22.0 - 47.8	7.7	0.0 - 19.0
12 years	49.8	40.6 - 59.0	10.8	6.2 - 15.3	41.8	30.3 - 53.4	7.6	2.5 - 12.8	34.0	22.3 - 45.6	7.3	1.3 - 13.4
> 12 years	52.0	43.1 - 60.8	6.5	4.1 - 9.0	47.9	38.6 - 57.3	5.7	3.1 - 8.3	48.5	36.8 - 60.1	9.4	4.6 - 14.3
Marital status												
Married	50.9	42.7 - 59.0	7.3	5.1 - 9.5	44.5	36.1 - 53.0	5.9	3.5 - 8.2	44.1	33.5 - 54.7	9.0	5.1 - 12.9
Not married	45.9	37.3 - 54.5	12.0	4.5 - 19.6	43.5	33.7 - 53.4	19.4	8.5 - 30.3	35.4	26.1 - 44.7	5.2	0.0 - 12.4
Parity												
Primipara	48.4	39.6 - 57.2	6.8	3.9 - 9.7	45.8	35.2 - 56.3	7.2	3.6 - 10.9	33.6	23.5 - 43.7	9.8	4.0 - 15.6
Multipara	48.2	40.1 - 56.3	8.8	5.7 - 12.0	43.0	34.8 - 51.2	8.1	4.6 - 11.7	43.3	33.6 - 52.9	7.7	3.1 - 12.3
Prenatal care paid by												
Medicaid	48.0	39.7 - 56.3	16.1	9.5 - 22.6	47.2	37.2 - 57.2	17.4	8.1 - 26.8	36.0	27.3 - 44.7	10.0	1.8 - 18.2
Non-Medicaid	48.6	40.1 - 57.1	5.7	3.6 - 7.7	41.2	32.8 - 49.5	5.7	3.4 - 8.0	44.8	33.1 - 56.6	8.2	4.2 - 12.1
Source of prenatal care												
Private	46.4	39.6 - 53.2	7.5	5.2 - 9.8	47.7	39.4 - 56.0	6.2	3.7 - 8.7	39.6	30.3 - 48.9	7.7	4.0 - 11.4
Public	63.6	49.7 - 77.4	14.5	5.8 - 23.2	40.6	28.9 - 52.4	14.4	4.6 - 24.1	38.6	27.0 - 50.3	14.8	2.6 - 27.0

* Sample size is less than 30.

** Confidence interval

† Data represent July through December only.

‡ Data do not include New York City.

Pregnancy Risk Assessment Monitoring System, 1997

Contraceptive Use at Time of Pregnancy and Pregnancy Intention, by Selected Maternal Characteristics

Characteristic	Oklahoma				South Carolina				Washington			
	Unintended		Intended		Unintended		Intended		Unintended		Intended	
	Pct	95% CI**	Pct	95% CI**	Pct	95% CI**	Pct	95% CI**	Pct	95% CI**	Pct	95% CI**
Maternal age												
< 20 years	33.1	21.6 - 44.6	8.4	0.0 - 18.5	43.2	31.7 - 54.6	30.9	8.8 - 53.1	37.8	23.9 - 51.7	10.9	2.2 - 19.5
20-29 years	42.4	35.4 - 49.4	9.0	5.2 - 12.7	45.8	37.2 - 54.5	11.5	6.4 - 16.6	44.6	37.1 - 52.2	10.9	7.0 - 14.7
≥ 30 years	32.5	20.3 - 44.7	7.8	2.6 - 13.0	40.1	27.2 - 53.0	6.5	2.1 - 10.9	44.2	33.5 - 54.9	6.9	3.9 - 9.9
Maternal race												
White	42.0	35.6 - 48.5	6.8	4.1 - 9.6	43.6	35.2 - 51.9	8.5	4.7 - 12.2	44.7	37.9 - 51.6	8.3	5.7 - 10.9
Black	34.6	20.8 - 48.5	9.5	0.0 - 24.8	44.3	35.3 - 53.3	17.0	7.4 - 26.5	40.7	33.8 - 47.6	18.1	11.8 - 24.5
Other	27.0	14.2 - 39.8	25.7	10.0 - 41.4	*	*	*	*	36.7	27.3 - 46.2	12.7	6.7 - 18.8
Hispanic ethnicity												
No	38.9	33.3 - 44.5	8.2	5.1 - 11.2	43.1	36.9 - 49.3	11.2	7.4 - 15.0	43.3	36.8 - 49.9	7.8	5.3 - 10.4
Yes	35.5	12.5 - 58.5	11.9	2.3 - 21.6	*	*	*	*	43.2	35.9 - 50.5	17.4	12.6 - 22.1
Maternal education												
< 12 years	39.7	28.2 - 51.2	7.3	0.1 - 14.5	43.3	31.4 - 55.3	11.2	1.6 - 20.7	43.1	31.2 - 54.9	17.1	8.4 - 25.8
12 years	37.6	29.3 - 45.8	7.2	2.6 - 11.7	43.9	33.5 - 54.2	14.1	6.3 - 21.9	40.7	31.0 - 50.4	9.6	4.8 - 14.4
> 12 years	36.4	27.4 - 45.5	8.7	4.5 - 12.9	43.8	33.7 - 53.9	9.8	5.0 - 14.6	50.0	40.4 - 59.6	6.3	3.5 - 9.0
Marital status												
Married	35.2	28.3 - 42.1	7.4	4.5 - 10.3	45.8	36.6 - 54.9	9.5	5.8 - 13.2	51.3	43.7 - 58.9	8.8	6.2 - 11.4
Not married	42.3	33.8 - 50.8	14.5	4.8 - 24.2	42.7	34.5 - 50.8	18.0	6.2 - 29.8	33.4	25.4 - 41.3	10.4	5.7 - 15.2
Parity												
Primipara	30.2	21.9 - 38.6	12.2	6.3 - 18.1	39.4	30.7 - 48.0	10.1	4.6 - 15.5	38.3	29.2 - 47.5	9.6	5.7 - 13.5
Multipara	41.5	34.4 - 48.7	6.6	3.2 - 10.0	47.4	39.0 - 55.9	11.5	6.5 - 16.5	46.0	38.6 - 53.4	8.9	5.8 - 11.9
Prenatal care paid by												
Medicaid	40.7	32.3 - 49.1	9.7	3.9 - 15.5	43.1	35.7 - 50.5	14.2	6.8 - 21.6	46.6	38.4 - 54.8	16.7	11.0 - 22.5
Non-Medicaid	37.0	30.0 - 44.1	8.2	4.8 - 11.5	45.9	35.2 - 56.7	9.3	5.2 - 13.4	40.8	33.0 - 48.6	6.8	4.3 - 9.3
Source of prenatal care												
Private	38.8	31.5 - 46.1	6.5	3.5 - 9.5	46.4	38.9 - 53.9	10.1	6.2 - 14.1	43.8	35.8 - 51.8	7.1	4.3 - 9.9
Public	41.3	32.0 - 50.6	11.3	4.4 - 18.3	39.5	27.6 - 51.4	13.8	3.0 - 24.5	43.1	34.5 - 51.6	13.4	8.6 - 18.3

* Sample size is less than 30.

** Confidence interval

Pregnancy Risk Assessment Monitoring System, 1997

Contraceptive Use at Time of Pregnancy and Pregnancy Intention, by Selected Maternal Characteristics

Characteristic	West Virginia			
	Unintended		Intended	
	Pct	95% CI**	Pct	95% CI**
Maternal age				
< 20 years	41.1	35.0 - 47.2	16.2	10.2 - 22.3
20-29 years	42.8	35.0 - 50.6	9.0	5.6 - 12.5
≥ 30 years	45.8	32.8 - 58.9	15.1	8.7 - 21.5
Maternal race				
White	43.4	37.9 - 48.8	11.8	8.8 - 14.7
Black	37.5	16.5 - 58.5	*	*
Other	*	*	*	*
Hispanic ethnicity				
No	43.1	37.9 - 48.4	11.5	8.6 - 14.4
Yes	*	*	*	*
Maternal education				
< 12 years	33.4	24.4 - 42.4	9.0	2.8 - 15.2
12 years	45.1	37.2 - 53.0	11.2	6.9 - 15.5
> 12 years	48.9	38.6 - 59.2	12.7	7.9 - 17.6
Marital status				
Married	48.5	41.2 - 55.9	10.4	7.2 - 13.5
Not married	35.9	28.8 - 43.0	16.0	8.9 - 23.1
Parity				
Primipara	44.0	37.0 - 50.9	7.6	4.4 - 10.8
Multipara	42.2	34.6 - 49.8	14.6	10.1 - 19.1
Prenatal care paid by				
Medicaid	41.5	35.2 - 47.8	11.6	7.5 - 15.7
Non-Medicaid	46.1	36.6 - 55.6	11.3	7.2 - 15.3
Source of prenatal care				
Private	43.1	36.7 - 49.5	12.3	8.8 - 15.8
Public	38.3	27.2 - 49.4	6.8	1.1 - 12.5

* Sample size is less than 30.

** Confidence interval

Pregnancy Risk Assessment Monitoring System, 1997

Mother's Perception of Partner's Pregnancy Intention as Unwanted

State	Estimated Population	Percent	95% CI**
Alabama	4,916 - 7,067	10.4	8.5 - 12.2
Alaska	934 - 1,318	11.7	9.7 - 13.7
Arkansas	2,997 - 4,446	11.2	9.0 - 13.4
Colorado	5,698 - 8,390	12.8	10.4 - 15.2
Florida	21,978 - 29,811	14.1	12.0 - 16.1
Georgia	9,188 - 14,585	10.5	8.1 - 12.9
Maine	1,268 - 1,839	12.0	9.8 - 14.1
New York†	10,375 - 16,588	10.8	8.3 - 13.2
North Carolina	5,491 - 9,173	13.7	10.3 - 17.0
Oklahoma	4,414 - 6,640	12.3	9.9 - 14.8
South Carolina	5,146 - 8,020	13.7	10.7 - 16.6
Washington	6,694 - 9,958	11.2	9.0 - 13.3
West Virginia	1,532 - 2,262	10.4	8.4 - 12.4

* Mother's Perception of Partner's Intention as unwanted is defined on the basis of report by the woman that her husband or partner did not want the pregnancy during the 12 months prior to delivery.

‡ Data do not include New York City.

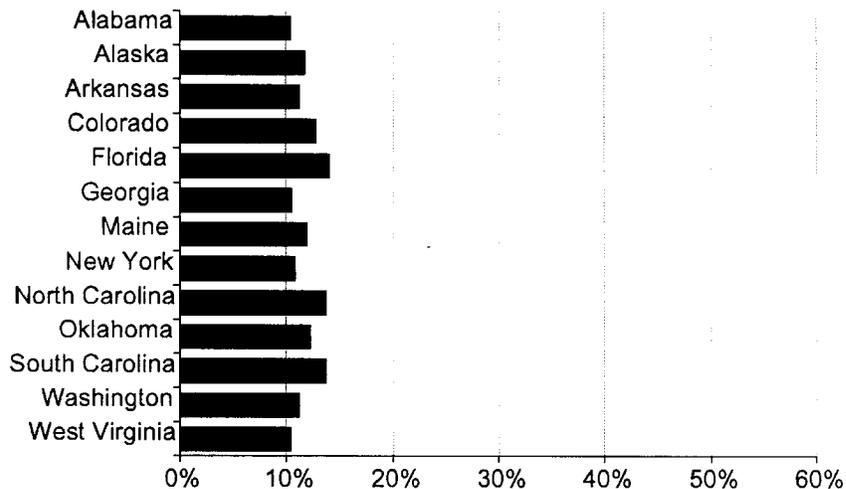
† Data represent July through December only.

** Confidence interval

Notes:

1) Range among states is 10.4% to 14.1%.

Mother's Perception of Partner's Pregnancy Intention as Unwanted



Pregnancy Risk Assessment Monitoring System, 1997

Mothers' Perception of Their Pregnancy Intention as Unwanted, by Selected Maternal Characteristics

Characteristic	Alabama		Alaska		Arkansas		Colorado		Florida		Georgia		Maine	
	Pct	95% CI**	Pct	95% CI**	Pct	95% CI**	Pct	95% CI**	Pct	95% CI**	Pct	95% CI**	Pct	95% CI**
Maternal age														
< 20 years	10.3	6.3 - 14.3	24.7	16.2 - 33.2	15.8	10.2 - 21.4	21.3	12.0 - 30.5	22.1	15.5 - 28.7	15.9	8.4 - 23.4	19.7	10.7 - 28.7
20-29 years	11.9	9.2 - 14.6	11.2	8.6 - 13.8	9.6	7.0 - 12.2	14.6	10.9 - 18.3	13.6	10.7 - 16.5	11.9	8.5 - 15.3	13.6	10.4 - 16.7
≥ 30 years	6.8	3.8 - 9.9	7.9	5.3 - 10.5	11.5	6.7 - 16.4	8.4	5.6 - 11.2	11.6	8.4 - 14.9	5.8	2.4 - 9.3	7.5	4.7 - 10.3
Maternal race														
White	8.4	6.4 - 10.4	11.1	8.4 - 13.7	10.7	8.2 - 13.2	12.8	10.3 - 15.2	12.7	10.1 - 15.2	6.7	3.9 - 9.5	11.8	9.6 - 14.0
Black	14.4	10.5 - 18.3	12.3	1.2 - 23.4	13.5	8.7 - 18.4	16.1	0.4 - 31.7	18.3	15.1 - 21.6	17.7	13.3 - 22.0	*	*
Other	*	*	12.9	10.3 - 15.6	*	*	8.6	0.0 - 19.7	17.2	1.8 - 32.6	*	*	*	*
Hispanic ethnicity														
No	10.3	8.4 - 12.1	12.2	10.1 - 14.2	11.4	9.2 - 13.6	11.7	9.3 - 14.1	14.3	11.9 - 16.7	10.5	8.0 - 13.0	12.0	9.8 - 14.2
Yes	*	*	3.5	0.0 - 8.1	*	*	16.8	10.1 - 23.6	13.2	8.7 - 17.7	11.2	0.9 - 21.4	*	*
Maternal education														
< 12 years	12.8	8.6 - 17.0	19.3	12.6 - 25.9	10.2	5.7 - 14.7	19.0	10.9 - 27.0	18.7	13.4 - 24.0	11.1	5.9 - 16.3	22.3	13.3 - 31.4
12 years	8.9	6.0 - 11.8	12.8	9.7 - 15.9	14.2	10.6 - 17.8	13.2	9.1 - 17.3	15.8	12.2 - 19.4	11.1	6.6 - 15.6	15.6	11.5 - 19.8
> 12 years	10.4	7.5 - 13.3	8.0	5.5 - 10.5	8.7	5.3 - 12.2	10.7	7.9 - 13.4	10.4	7.6 - 13.2	10.0	6.6 - 13.4	7.5	5.3 - 9.8
Marital status														
Married	6.0	4.2 - 7.8	7.5	5.6 - 9.5	7.9	5.7 - 10.1	7.6	5.7 - 9.5	8.3	6.2 - 10.3	6.1	3.5 - 8.7	7.4	5.4 - 9.3
Not married	19.0	14.9 - 23.1	22.2	17.6 - 26.9	17.8	13.1 - 22.6	29.6	22.4 - 36.8	24.3	20.1 - 28.6	19.3	14.4 - 24.2	23.1	17.6 - 28.5
Parity														
Primipara	9.2	6.6 - 11.7	15.5	11.6 - 19.3	9.8	6.8 - 12.7	13.8	10.0 - 17.7	13.5	10.4 - 16.7	9.0	5.9 - 12.0	9.8	6.9 - 12.7
Multipara	11.4	8.8 - 14.1	9.5	7.3 - 11.6	12.3	9.2 - 15.4	11.9	9.0 - 14.8	14.4	11.6 - 17.2	11.9	8.2 - 15.5	13.6	10.5 - 16.7
Prenatal care paid by														
Medicaid	13.9	11.0 - 16.8	17.3	13.6 - 21.0	13.6	10.3 - 16.9	18.7	14.0 - 23.4	18.7	15.2 - 22.2	13.6	10.1 - 17.1	23.2	18.3 - 28.1
Non-Medicaid	7.0	4.7 - 9.3	8.0	5.9 - 10.1	9.0	6.1 - 11.9	10.0	7.3 - 12.7	10.3	7.9 - 12.8	7.1	3.8 - 10.4	5.8	3.9 - 7.6
Source of prenatal care														
Private	9.5	7.3 - 11.7	9.6	6.6 - 12.6	10.0	7.5 - 12.6	11.0	8.4 - 13.6	13.5	10.9 - 16.0	10.0	7.3 - 12.7	10.8	8.5 - 13.2
Public	13.1	9.3 - 17.0	13.1	10.1 - 16.0	13.7	8.9 - 18.4	15.2	9.8 - 20.5	15.4	11.4 - 19.4	15.1	7.9 - 22.3	17.2	10.1 - 24.2

* Sample size is less than 30.

** Confidence interval

Pregnancy Risk Assessment Monitoring System, 1997

Mothers' Perception of Their Pregnancy Intention as Unwanted, by Selected Maternal Characteristics

Characteristic	New York [‡]		North Carolina [†]		Oklahoma		South Carolina		Washington		West Virginia	
	Pct	95% CI**	Pct	95% CI**	Pct	95% CI**	Pct	95% CI**	Pct	95% CI**	Pct	95% CI**
Maternal age												
< 20 years	23.0	10.1 - 36.0	26.2	15.1 - 37.3	19.0	11.3 - 26.7	19.2	11.1 - 27.4	20.8	11.6 - 30.1	16.0	12.5 - 19.4
20-29 years	11.7	7.8 - 15.6	12.4	8.1 - 16.7	11.8	8.8 - 14.9	13.8	9.7 - 17.9	12.4	9.2 - 15.7	9.7	6.9 - 12.5
≥ 30 years	7.9	5.1 - 10.7	8.7	4.1 - 13.3	8.6	4.3 - 13.0	10.0	5.5 - 14.4	7.1	4.5 - 9.7	8.2	4.2 - 12.2
Maternal race												
White	9.5	7.1 - 11.8	12.3	8.4 - 16.3	12.3	9.5 - 15.1	13.3	9.6 - 17.0	10.9	8.4 - 13.4	9.7	7.7 - 11.6
Black	24.1	11.8 - 36.4	17.9	10.9 - 24.9	14.8	6.3 - 23.2	14.2	9.3 - 19.2	16.8	12.9 - 20.6	28.7	13.3 - 44.1
Other	5.6	0.0 - 15.2	*	*	10.6	4.3 - 16.9	*	*	11.0	6.6 - 15.4	*	*
Hispanic ethnicity												
No	11.0	8.1 - 13.8	13.0	9.7 - 16.3	13.2	10.5 - 15.8	13.8	10.8 - 16.8	11.1	8.7 - 13.6	10.4	8.4 - 12.4
Yes	13.4	3.5 - 23.4	*	*	3.0	0.0 - 6.7	*	*	10.4	7.5 - 13.2	*	*
Maternal education												
< 12 years	19.5	10.6 - 28.4	24.7	14.8 - 34.6	19.7	12.7 - 26.7	24.1	15.9 - 32.3	12.9	7.7 - 18.1	12.2	7.8 - 16.5
12 years	11.2	6.6 - 15.8	13.3	7.6 - 19.0	11.4	7.6 - 15.2	13.8	8.6 - 19.0	15.3	10.6 - 20.0	10.6	7.5 - 13.7
> 12 years	8.2	5.6 - 10.7	8.7	5.1 - 12.3	8.9	5.7 - 12.1	8.9	5.4 - 12.5	7.6	4.9 - 10.4	9.0	5.7 - 12.3
Marital status												
Married	6.5	4.4 - 8.5	8.2	5.1 - 11.4	7.8	5.5 - 10.2	7.2	4.5 - 9.8	6.1	4.2 - 8.0	7.0	4.9 - 9.1
Not married	21.8	15.3 - 28.4	24.4	17.0 - 31.8	21.6	16.0 - 27.2	23.8	17.8 - 29.9	26.0	20.1 - 32.0	17.6	13.4 - 21.8
Parity												
Primipara	9.5	5.9 - 13.0	13.5	8.5 - 18.6	14.4	10.0 - 18.9	14.3	9.8 - 18.7	11.7	8.1 - 15.3	9.2	6.8 - 11.6
Multipara	11.7	8.4 - 15.0	13.8	9.3 - 18.3	11.5	8.4 - 14.7	13.2	9.3 - 17.1	10.8	8.0 - 13.6	11.3	8.3 - 14.3
Prenatal care paid by												
Medicaid	17.8	11.9 - 23.7	20.2	14.4 - 26.1	18.0	13.1 - 22.9	17.1	12.5 - 21.6	16.2	11.9 - 20.4	14.1	11.1 - 17.1
Non-Medicaid	7.8	5.5 - 10.1	7.8	4.4 - 11.2	9.0	6.4 - 11.6	9.9	6.3 - 13.5	8.9	6.4 - 11.3	5.1	3.0 - 7.3
Source of prenatal care												
Private	9.5	7.0 - 12.1	11.5	7.8 - 15.2	10.4	7.5 - 13.4	10.9	7.8 - 14.0	11.0	8.1 - 13.9	8.9	6.6 - 11.2
Public	16.0	9.0 - 23.0	19.1	11.5 - 26.6	13.5	8.8 - 18.1	22.4	14.6 - 30.2	9.4	6.3 - 12.6	11.0	6.6 - 15.4

* Sample size is less than 30.

** Confidence interval

† Data represent July through December only.

‡ Data do not include New York City.

Pregnancy Risk Assessment Monitoring System, 1997

Contraceptive Use at the Time of Pregnancy and Mother's Perception of Partner's Pregnancy Intention

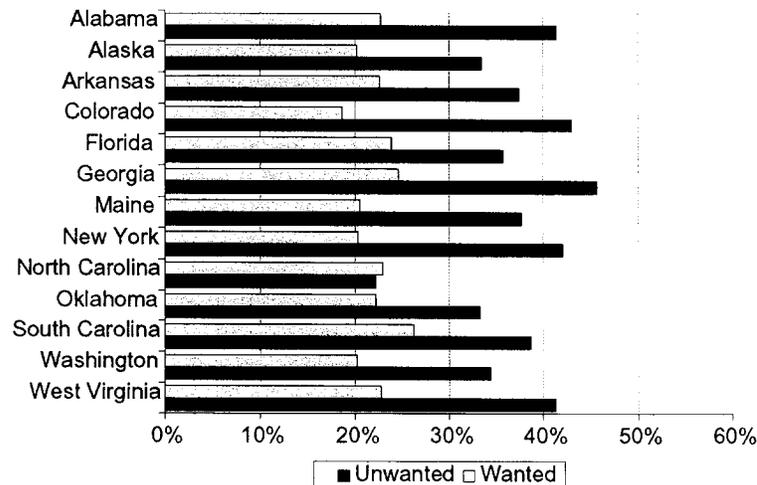
State	Unwanted			Wanted		
	Estimated Population	Pct	95% CI**	Estimated Population	Pct	95% CI**
Alabama†	1,770 - 3,186	41.4	32.1 - 50.7	10,356 - 13,173	22.8	20.1 - 25.5
Alaska‡	258 - 495	33.5	24.9 - 42.2	1,493 - 1,946	20.2	17.6 - 22.8
Arkansas§	962 - 1,824	37.4	27.7 - 47.1	5,688 - 7,595	22.7	19.5 - 25.9
Colorado¶	2,069 - 3,960	43.0	33.0 - 53.1	7,643 - 10,229	18.7	16.1 - 21.4
Florida‡	6,706 - 11,502	35.8	28.0 - 43.6	32,865 - 41,612	23.9	21.2 - 26.6
Georgia‡	3,116 - 7,248	45.7	33.4 - 58.1	20,640 - 29,038	24.7	20.7 - 28.7
Maine§	405 - 767	37.7	28.3 - 47.2	2,012 - 2,666	20.6	17.8 - 23.4
New York‡§	3,558 - 7,504	42.1	30.1 - 54.0	18,764 - 26,276	20.3	17.0 - 23.5
North Carolina‡	746 - 2,511	22.2	11.4 - 33.1	8,489 - 12,582	23.0	18.7 - 27.3
Oklahoma	1,124 - 2,485	33.4	23.1 - 43.8	7,349 - 10,051	22.2	18.9 - 25.5
South Carolina	1,559 - 3,469	38.7	27.2 - 50.3	9,073 - 12,475	26.2	22.2 - 30.2
Washington†	1,859 - 3,851	34.4	24.5 - 44.2	11,366 - 15,135	20.2	17.4 - 23.0
West Virginia‡	533 - 1,016	41.3	31.3 - 51.4	3,216 - 4,177	22.8	19.9 - 25.7

- * Mother's Perception of Partner's Intention is defined as *unwanted* if the woman reported that her husband or partner did not want the pregnancy; all other observations were defined as *wanted*.
- ‡ Data do not include New York City.
- † Data represent July through December only.
- § Groups are significantly different.
- ** Confidence interval

Notes:

- 1) Range among states is 22.2% to 45.7% for women whose partner did not want the pregnancy and 18.7% to 26.2% for women whose partner wanted the pregnancy.

Contraceptive Use at the Time of Pregnancy and Mother's Perception of Partner's Pregnancy Intention *



Pregnancy Risk Assessment Monitoring System, 1997

Contraceptive Use at Time of Pregnancy and Mother's Perception of Race is Pregnancy Intention, by Selected Maternal Characteristics

Characteristic	Alabama				Alaska				Arkansas			
	Pct	Unwanted 95% CI**	Pct	Wanted 95% CI**	Pct	Unwanted 95% CI**	Pct	Wanted 95% CI**	Pct	Unwanted 95% CI**	Pct	Wanted 95% CI**
Maternal age												
< 20 years	40.2	20.1 - 60.2	28.8	22.4 - 35.2	39.9	19.7 - 60.1	20.7	12.4 - 29.0	50.2	31.2 - 69.1	33.4	24.5 - 42.3
20-29 years	39.2	27.5 - 50.9	25.0	21.3 - 28.8	29.5	18.3 - 40.6	19.9	16.4 - 23.5	32.5	19.7 - 45.2	21.4	17.3 - 25.5
≥ 30 years	51.6	28.6 - 74.6	13.4	8.9 - 17.9	35.4	19.0 - 51.9	20.5	16.2 - 24.9	34.3	14.6 - 53.9	18.9	13.0 - 24.8
Maternal race												
White	42.8	30.4 - 55.1	20.5	17.4 - 23.5	36.1	23.8 - 48.5	19.9	16.4 - 23.4	38.6	27.0 - 50.2	19.7	16.3 - 23.2
Black	39.5	25.1 - 53.8	29.0	23.6 - 34.4	*	*	21.2	5.8 - 36.6	36.9	18.5 - 55.4	31.9	24.5 - 39.4
Other	*	*	*	*	27.2	16.8 - 37.6	20.8	17.2 - 24.4	*	*	*	*
Hispanic ethnicity												
No	41.2	31.8 - 50.6	22.7	20.0 - 25.4	33.9	25.2 - 42.7	20.0	17.3 - 22.6	37.7	27.9 - 47.5	22.9	19.7 - 26.1
Yes	*	*	*	*	*	*	24.3	12.1 - 36.5	*	*	*	*
Maternal education												
< 12 years	44.2	26.7 - 61.6	27.6	21.5 - 33.6	27.4	9.1 - 45.6	24.8	16.5 - 33.0	31.5	13.0 - 50.1	23.9	16.2 - 31.6
12 years	38.3	21.9 - 54.6	21.5	17.2 - 25.8	24.8	13.2 - 36.4	20.1	16.0 - 24.1	34.4	21.3 - 47.5	24.6	19.5 - 29.8
> 12 years	41.7	26.9 - 56.4	21.6	17.5 - 25.7	49.8	33.4 - 66.1	19.4	15.6 - 23.1	46.2	25.8 - 66.6	19.8	15.1 - 24.6
Marital status												
Married	33.7	19.3 - 48.0	19.7	16.6 - 22.8	27.0	15.4 - 38.5	18.8	15.9 - 21.8	48.8	34.3 - 63.2	20.9	17.2 - 24.6
Not married	46.2	34.1 - 58.2	29.9	24.8 - 35.0	39.3	27.1 - 51.4	24.5	19.1 - 29.8	27.5	16.1 - 38.8	26.9	20.7 - 33.1
Parity												
Primipara	39.7	25.4 - 54.1	21.4	17.7 - 25.1	33.9	20.8 - 47.0	18.4	14.1 - 22.6	46.1	30.4 - 61.8	20.9	16.2 - 25.6
Multipara	42.5	30.3 - 54.7	24.0	20.2 - 27.8	33.2	21.9 - 44.6	21.3	18.0 - 24.6	32.5	20.4 - 44.6	24.1	19.7 - 28.4
Prenatal care paid by												
Medicaid	40.9	29.8 - 52.0	28.7	24.7 - 32.7	34.4	22.9 - 46.0	23.2	18.9 - 27.5	38.2	25.8 - 50.6	26.5	21.8 - 31.3
Non-Medicaid	42.3	25.4 - 59.2	17.4	13.9 - 21.0	32.3	19.4 - 45.2	18.5	15.2 - 21.8	36.3	21.0 - 51.7	19.4	15.1 - 23.8
Source of prenatal care												
Private	45.7	33.6 - 57.7	20.6	17.5 - 23.7	47.8	31.5 - 64.1	18.7	14.5 - 22.8	44.0	31.0 - 57.0	20.6	17.0 - 24.2
Public	32.7	18.1 - 47.3	26.3	20.9 - 31.6	26.0	15.1 - 37.0	21.1	17.5 - 24.7	27.5	12.0 - 43.0	27.3	20.3 - 34.3

* Sample size is less than 30.

** Confidence interval

Pregnancy Risk Assessment Monitoring System, 1997

Contraceptive Use at Time of Pregnancy and Mother's Perception of Race is Pregnancy Intention, by Selected Maternal Characteristics

Characteristic	Colorado				Florida				Georgia			
	Pct	Unwanted 95% CI**	Pct	Wanted 95% CI**	Pct	Unwanted 95% CI**	Pct	Wanted 95% CI**	Pct	Unwanted 95% CI**	Pct	Wanted 95% CI**
Maternal age												
< 20 years	40.3	15.5 - 65.1	35.9	24.4 - 47.3	32.6	16.3 - 48.9	35.7	27.8 - 43.6	*	*	30.0	19.8 - 40.2
20-29 years	41.4	27.4 - 55.4	21.3	17.3 - 25.4	36.7	25.6 - 47.8	22.7	19.0 - 26.5	44.6	29.2 - 60.0	28.6	22.8 - 34.5
≥ 30 years	48.3	30.7 - 65.9	11.8	8.6 - 15.1	36.7	22.0 - 51.4	21.5	16.9 - 26.0	*	*	16.6	10.3 - 23.0
Maternal race												
White	44.4	34.0 - 54.8	18.7	15.9 - 21.5	35.5	25.0 - 46.0	20.7	17.4 - 24.0	56.9	35.6 - 78.1	19.4	14.3 - 24.5
Black	*	*	14.7	2.3 - 27.2	39.9	30.1 - 49.7	35.3	30.8 - 39.7	36.6	23.1 - 50.1	36.5	30.3 - 42.7
Other	*	*	24.7	6.8 - 42.6	*	*	20.5	1.9 - 39.0	*	*	*	*
Hispanic ethnicity												
No	39.5	28.4 - 50.5	16.3	13.6 - 18.9	35.5	26.9 - 44.2	23.2	20.2 - 26.1	46.0	33.2 - 58.9	23.9	19.9 - 27.8
Yes	52.0	29.6 - 74.4	28.4	20.6 - 36.1	36.9	19.0 - 54.7	26.6	20.0 - 33.3	*	*	33.5	9.9 - 57.2
Maternal education												
< 12 years	48.5	24.8 - 72.3	27.4	18.3 - 36.6	30.9	16.1 - 45.7	25.2	19.1 - 31.3	48.5	23.1 - 73.9	29.6	20.0 - 39.2
12 years	49.2	32.5 - 65.8	20.7	15.7 - 25.7	28.9	18.1 - 39.7	22.3	18.0 - 26.5	58.6	38.7 - 78.4	26.5	19.6 - 33.4
> 12 years	35.3	22.0 - 48.5	15.3	12.3 - 18.3	49.3	34.8 - 63.9	24.7	20.4 - 29.1	34.6	16.1 - 53.1	21.5	15.7 - 27.3
Marital status												
Married	39.6	26.5 - 52.6	15.3	12.6 - 18.0	25.4	14.0 - 36.9	21.4	18.0 - 24.7	51.0	29.3 - 72.7	17.3	12.9 - 21.8
Not married	46.0	30.9 - 61.0	33.3	25.5 - 41.1	42.2	32.0 - 52.5	29.3	24.6 - 34.1	42.1	28.0 - 56.2	42.2	34.4 - 49.9
Parity												
Primipara	37.0	22.0 - 52.0	16.3	12.7 - 20.0	34.2	22.3 - 46.1	25.3	20.9 - 29.6	39.3	20.9 - 57.7	21.9	16.2 - 27.5
Multipara	48.9	35.9 - 62.0	20.7	16.9 - 24.5	36.9	26.6 - 47.1	22.9	19.4 - 26.5	49.6	33.4 - 65.7	27.3	21.6 - 33.0
Prenatal care paid by												
Medicaid	55.5	42.2 - 68.8	25.0	19.5 - 30.5	36.2	25.9 - 46.6	27.7	23.5 - 31.9	45.5	31.9 - 59.1	34.8	28.4 - 41.3
Non-Medicaid	32.2	19.3 - 45.1	16.1	13.1 - 19.1	35.2	23.4 - 47.0	21.1	17.5 - 24.7	46.2	20.7 - 71.7	14.6	10.0 - 19.1
Source of prenatal care												
Private	40.6	27.8 - 53.3	15.9	13.0 - 18.7	35.9	26.1 - 45.6	22.7	19.5 - 25.9	48.0	33.8 - 62.1	24.1	19.7 - 28.4
Public	40.1	21.4 - 58.8	23.8	17.3 - 30.4	38.0	24.3 - 51.7	26.6	21.0 - 32.2	*	*	23.9	13.3 - 34.6

* Sample size is less than 30.

** Confidence interval

Pregnancy Risk Assessment Monitoring System, 1997

Contraceptive Use at Time of Pregnancy and Parity Pregnancy Intention, by Selected Maternal Characteristics

Characteristic	Maine				New York [†]				North Carolina [‡]			
	Pct	Unwanted 95% CI**	Pct	Wanted 95% CI**	Pct	Unwanted 95% CI**	Pct	Wanted 95% CI**	Pct	Unwanted 95% CI**	Pct	Wanted 95% CI**
Maternal age												
< 20 years	*	*	33.6	21.4 - 45.8	*	*	26.3	12.2 - 40.3	*	*	31.0	18.1 - 44.0
20-29 years	33.0	21.2 - 44.8	22.9	19.0 - 26.9	37.7	21.1 - 54.3	22.3	17.1 - 27.5	22.5	6.8 - 38.2	27.3	21.0 - 33.5
≥ 30 years	*	*	14.4	10.5 - 18.2	34.5	16.3 - 52.7	17.7	13.5 - 22.0	*	*	12.2	6.8 - 17.5
Maternal race												
White	37.1	27.5 - 46.6	20.3	17.5 - 23.1	47.0	33.6 - 60.3	19.7	16.3 - 23.1	14.5	3.4 - 25.5	21.9	16.9 - 26.9
Black	*	*	*	*	21.3	0.0 - 42.8	26.9	13.6 - 40.1	32.5	11.7 - 53.4	26.6	17.9 - 35.4
Other	*	*	*	*	*	*	20.5	3.3 - 37.8	*	*	*	*
Hispanic ethnicity												
No	39.3	29.7 - 49.0	20.4	17.6 - 23.3	39.7	26.1 - 53.3	20.1	16.3 - 23.9	21.2	10.4 - 32.0	23.2	18.9 - 27.5
Yes	*	*	*	*	*	*	37.8	22.8 - 52.7	*	*	*	*
Maternal education												
< 12 years	*	*	32.0	20.2 - 43.9	40.2	15.3 - 65.1	34.0	23.1 - 44.9	*	*	29.6	18.0 - 41.2
12 years	43.7	29.2 - 58.2	23.6	18.6 - 28.7	34.9	14.3 - 55.5	23.0	16.5 - 29.5	22.8	2.8 - 42.8	21.3	13.9 - 28.6
> 12 years	41.9	26.6 - 57.3	17.2	13.8 - 20.6	49.4	32.4 - 66.5	15.6	12.0 - 19.3	25.6	7.2 - 44.0	21.7	16.0 - 27.4
Marital status												
Married	38.7	25.1 - 52.2	16.5	13.6 - 19.4	41.6	24.9 - 58.3	15.4	12.2 - 18.6	25.0	8.1 - 42.0	18.6	14.0 - 23.1
Not married	37.0	24.0 - 50.0	32.5	25.7 - 39.3	42.4	25.7 - 59.1	35.6	27.1 - 44.2	20.3	6.3 - 34.4	33.4	24.3 - 42.6
Parity												
Primipara	37.9	22.6 - 53.2	19.8	15.7 - 23.9	57.5	38.0 - 76.9	16.5	11.9 - 21.0	14.9	1.1 - 28.7	21.5	15.3 - 27.6
Multipara	37.6	25.7 - 49.6	21.2	17.3 - 25.0	33.1	19.4 - 46.8	23.0	18.5 - 27.5	28.2	12.4 - 43.9	24.3	18.4 - 30.2
Prenatal care paid by												
Medicaid	36.3	24.8 - 47.9	33.7	27.6 - 39.9	32.3	15.4 - 49.3	34.6	26.8 - 42.4	22.9	9.2 - 36.5	30.3	22.9 - 37.7
Non-Medicaid	40.8	24.7 - 57.0	14.7	11.9 - 17.6	51.4	35.6 - 67.2	15.0	11.7 - 18.2	*	*	17.5	12.7 - 22.3
Source of prenatal care												
Private	34.6	23.8 - 45.4	19.1	16.1 - 22.1	53.6	39.3 - 67.9	16.3	12.9 - 19.7	19.0	6.0 - 32.1	19.4	14.7 - 24.1
Public	*	*	32.8	23.4 - 42.2	22.3	4.2 - 40.5	31.2	22.3 - 40.1	29.6	9.7 - 49.6	32.6	22.7 - 42.4

* Sample size is less than 30.

** Confidence interval

† Data represent July through December only.

‡ Data do not include New York City.

Pregnancy Risk Assessment Monitoring System, 1997

Contraceptive Use at Time of Pregnancy and Parity Pregnancy Intention, by Selected Maternal Characteristics

Characteristic	Oklahoma				South Carolina				Washington			
	Pct	Unwanted 95% CI**	Pct	Wanted 95% CI**	Pct	Unwanted 95% CI**	Pct	Wanted 95% CI**	Pct	Unwanted 95% CI**	Pct	Wanted 95% CI**
Maternal age												
< 20 years	25.5	5.4 - 45.6	27.0	17.0 - 37.1	39.6	15.9 - 63.4	40.4	29.3 - 51.6	21.5	1.3 - 41.7	30.4	19.6 - 41.2
20-29 years	40.0	26.1 - 53.9	22.9	18.7 - 27.2	40.3	24.2 - 56.3	26.6	21.1 - 32.2	40.6	26.8 - 54.4	22.0	17.8 - 26.1
≥ 30 years	24.6	1.5 - 47.7	17.2	11.3 - 23.2	33.8	10.8 - 56.8	17.6	11.7 - 23.6	29.9	12.5 - 47.3	15.8	11.9 - 19.7
Maternal race												
White	36.6	24.4 - 48.8	20.0	16.4 - 23.5	41.8	26.7 - 56.9	20.5	16.0 - 25.0	34.0	22.6 - 45.5	19.6	16.4 - 22.9
Black	*	*	33.3	20.5 - 46.0	35.0	16.9 - 53.2	35.6	28.1 - 43.0	32.7	21.0 - 44.5	30.7	25.4 - 36.0
Other	30.6	3.3 - 57.9	27.1	16.6 - 37.5	*	*	*	*	37.7	15.6 - 59.7	21.1	16.3 - 25.9
Hispanic ethnicity												
No	32.7	22.2 - 43.1	22.5	19.0 - 26.0	37.7	26.1 - 49.4	26.0	22.0 - 30.1	33.9	22.8 - 44.9	19.2	16.0 - 22.3
Yes	*	*	19.7	8.9 - 30.5	*	*	*	*	34.0	20.3 - 47.7	27.8	23.4 - 32.2
Maternal education												
< 12 years	32.5	13.9 - 51.1	24.8	16.0 - 33.5	50.7	30.6 - 70.8	26.6	17.1 - 36.0	45.1	23.1 - 67.2	27.8	20.1 - 35.5
12 years	33.0	16.1 - 50.0	23.4	18.0 - 28.8	33.9	13.9 - 53.8	28.7	21.5 - 35.8	35.1	19.0 - 51.2	20.5	15.2 - 25.8
> 12 years	32.3	14.6 - 50.0	18.3	13.7 - 22.9	31.7	13.0 - 50.4	23.6	18.0 - 29.2	26.4	10.7 - 42.1	17.8	13.8 - 21.8
Marital status												
Married	31.7	17.0 - 46.4	17.1	13.7 - 20.5	35.8	17.0 - 54.7	21.1	16.7 - 25.4	47.8	31.9 - 63.7	18.6	15.4 - 21.7
Not married	34.4	20.2 - 48.6	33.0	25.6 - 40.5	40.1	25.6 - 54.5	36.2	28.3 - 44.0	25.1	13.4 - 36.9	26.3	20.0 - 32.6
Parity												
Primipara	17.9	5.8 - 30.0	19.8	14.6 - 25.1	25.6	10.7 - 40.4	25.2	19.4 - 31.0	31.4	16.2 - 46.6	19.1	14.6 - 23.6
Multipara	42.6	27.6 - 57.6	23.1	18.6 - 27.5	48.8	32.7 - 65.0	26.9	21.5 - 32.2	38.0	24.6 - 51.5	20.5	16.8 - 24.2
Prenatal care paid by												
Medicaid	35.1	20.4 - 49.7	27.4	21.2 - 33.7	39.9	25.2 - 54.7	32.4	26.2 - 38.5	23.7	11.7 - 35.6	33.7	27.9 - 39.4
Non-Medicaid	31.5	17.0 - 46.0	19.4	15.6 - 23.2	36.5	18.0 - 55.0	20.0	15.1 - 24.9	43.3	28.9 - 57.8	14.5	11.4 - 17.5
Source of prenatal care												
Private	32.6	18.3 - 46.8	19.9	15.9 - 23.8	39.7	24.9 - 54.5	25.5	21.0 - 30.0	33.5	20.7 - 46.4	18.7	15.0 - 22.4
Public	37.0	18.7 - 55.4	27.6	20.8 - 34.4	37.5	17.3 - 57.7	28.2	18.7 - 37.8	40.0	21.9 - 58.1	23.9	19.1 - 28.7

* Sample size is less than 30.

** Confidence interval

Pregnancy Risk Assessment Monitoring System, 1997

Contraceptive Use at Time of Pregnancy and Parity Pregnancy Intention, by Selected Maternal Characteristics

Characteristic	West Virginia			
	Unwanted		Wanted	
	Pct	95% CI**	Pct	95% CI**
Maternal age				
< 20 years	37.0	25.4 - 48.6	32.6	27.8 - 37.4
20-29 years	41.3	26.5 - 56.2	20.0	16.1 - 23.9
≥ 30 years	*	*	23.4	17.0 - 29.7
Maternal race				
White	43.2	32.6 - 53.8	22.6	19.6 - 25.6
Black	*	*	25.9	9.7 - 42.1
Other	*	*	*	*
Hispanic ethnicity				
No	41.3	31.3 - 51.4	22.8	19.9 - 25.8
Yes	*	*	*	*
Maternal education				
< 12 years	14.7	5.3 - 24.1	24.2	17.9 - 30.6
12 years	46.6	31.1 - 62.1	23.2	18.7 - 27.6
> 12 years	56.3	37.4 - 75.2	21.7	16.8 - 26.6
Marital status				
Married	41.1	25.9 - 56.3	21.5	18.0 - 25.0
Not married	41.5	28.1 - 54.8	25.7	20.5 - 31.0
Parity				
Primipara	48.2	34.1 - 62.3	20.1	16.5 - 23.7
Multipara	37.0	23.5 - 50.5	24.9	20.6 - 29.3
Prenatal care paid by				
Medicaid	38.1	26.9 - 49.3	25.6	21.5 - 29.7
Non-Medicaid	*	*	19.2	15.2 - 23.3
Source of prenatal care				
Private	46.4	33.0 - 59.8	21.8	18.4 - 25.2
Public	40.7	19.8 - 61.6	22.0	15.2 - 28.7

* Sample size is less than 30.

** Confidence interval

Pregnancy Risk Assessment Monitoring System, 1997

Contraceptive Use at Postpartum

State	Estimated Population	Percent	95% CI**
Alabama	39,422 - 42,638	87.4	85.2 - 89.7
Alaska	5,122 - 5,704	77.5	74.5 - 80.4
Arkansas	13,044 - 15,355	84.7	81.1 - 88.2
Florida	93,526 - 104,751	75.8	72.8 - 78.9
Georgia	42,358 - 49,615	83.1	79.3 - 86.8
Maine	8,848 - 9,627	81.2	78.5 - 83.9
New York†	66,127 - 75,383	78.0	74.5 - 81.5
North Carolina‡	30,166 - 35,171	85.3	81.4 - 89.1
South Carolina	19,878 - 23,869	88.1	84.6 - 91.7
Washington	45,620 - 50,454	79.7	76.7 - 82.7
West Virginia	12,791 - 13,888	85.1	82.6 - 87.7

* Contraceptive use at postpartum is defined as women who were using a method of contraception at the time of the PRAMS interview and whose infant was less than 4 months old at that time.

‡ Data do not include New York City.

† Data represent July through December only.

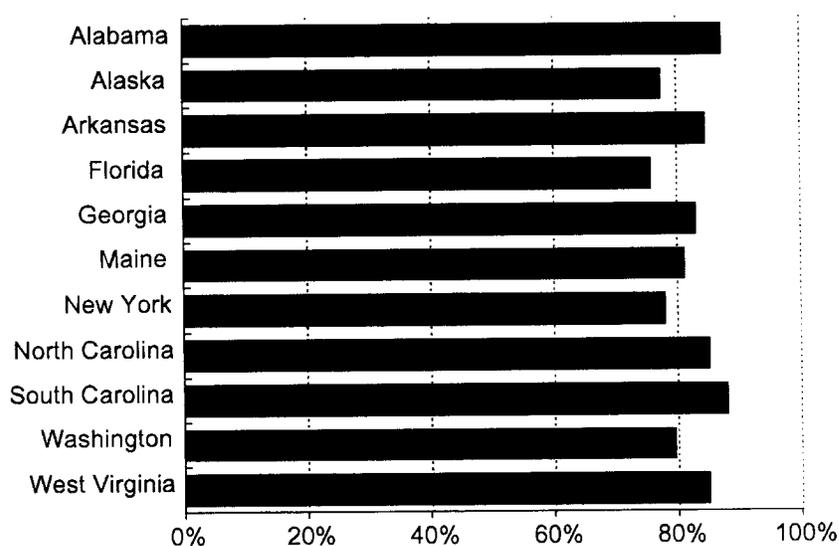
** Confidence interval

Notes:

1) Range among states is 75.8% to 88.1%.

2) 26.6% of women were excluded from this table because their infant was older than 4 months at the time of interview.

Contraceptive Use at Postpartum



Pregnancy Risk Assessment Monitoring System, 1997

Contraceptive Use at Postpartum, by Selected Maternal Characteristics

Characteristic	Alabama		Alaska		Arkansas		Florida		Georgia		Maine	
	Pct	95% CI**	Pct	95% CI**	Pct	95% CI**	Pct	95% CI**	Pct	95% CI**	Pct	95% CI**
Maternal age												
< 20 years	87.6	82.1 - 93.0	73.2	63.0 - 83.5	78.1	68.2 - 88.0	74.4	66.1 - 82.8	83.4	74.4 - 92.4	92.0	85.5 - 98.4
20-29 years	87.5	84.5 - 90.4	78.8	74.8 - 82.9	88.4	84.3 - 92.5	79.9	75.7 - 84.1	80.2	74.7 - 85.8	81.9	78.3 - 85.5
≥ 30 years	87.2	82.7 - 91.6	76.8	72.0 - 81.5	81.0	73.0 - 88.9	71.4	66.2 - 76.6	87.6	81.8 - 93.4	77.6	72.9 - 82.2
Maternal race												
White	86.7	84.0 - 89.4	81.8	78.2 - 85.5	86.0	82.2 - 89.8	76.7	73.0 - 80.3	83.6	78.6 - 88.6	81.4	78.7 - 84.1
Black	89.9	86.1 - 93.7	*	*	81.0	71.5 - 90.6	75.1	70.4 - 79.7	83.7	78.9 - 88.5	*	*
Other	*	*	66.7	61.6 - 71.8	*	*	54.2	31.2 - 77.1	*	*	*	*
Hispanic ethnicity												
No	87.9	85.7 - 90.1	76.5	73.4 - 79.6	84.6	81.0 - 88.2	77.9	74.7 - 81.2	84.0	80.3 - 87.8	81.2	78.5 - 84.0
Yes	*	*	92.8	84.9 - 100	*	*	68.0	60.3 - 75.7	*	*	*	*
Maternal education												
< 12 years	83.9	78.5 - 89.4	73.8	64.7 - 82.9	81.9	72.8 - 91.0	72.4	64.8 - 79.9	84.5	76.5 - 92.6	85.0	76.2 - 93.8
12 years	90.9	87.6 - 94.2	78.4	74.1 - 82.7	85.1	79.8 - 90.4	75.9	70.8 - 80.9	83.2	76.6 - 89.9	81.3	76.7 - 86.0
> 12 years	86.7	83.3 - 90.1	78.7	74.3 - 83.0	85.5	80.0 - 91.1	77.3	72.8 - 81.8	82.4	76.9 - 87.9	80.8	77.3 - 84.4
Marital status												
Married	87.6	84.9 - 90.3	79.2	75.7 - 82.6	87.3	83.4 - 91.2	77.0	73.3 - 80.8	83.9	79.2 - 88.6	82.7	79.8 - 85.7
Not married	86.9	82.9 - 90.9	72.6	66.8 - 78.5	78.4	70.8 - 86.0	73.5	68.2 - 78.8	81.4	75.3 - 87.6	77.3	71.6 - 83.0
Parity												
Primipara	84.1	80.4 - 87.8	76.9	71.8 - 82.0	84.7	79.3 - 90.1	74.7	69.9 - 79.4	80.8	75.1 - 86.6	84.3	80.6 - 88.0
Multipara	90.0	87.3 - 92.7	77.8	74.2 - 81.4	84.7	79.9 - 89.4	76.7	72.7 - 80.8	85.1	80.2 - 90.0	78.7	74.9 - 82.5
Prenatal care paid by												
Medicaid	88.1	84.9 - 91.2	71.6	66.7 - 76.6	82.1	76.6 - 87.7	75.4	70.7 - 80.1	82.4	77.1 - 87.7	79.4	74.4 - 84.4
Non-Medicaid	86.9	83.7 - 90.0	81.4	77.8 - 85.0	86.6	81.9 - 91.2	76.1	72.1 - 80.2	83.8	78.5 - 89.1	82.1	79.0 - 85.3
Source of prenatal care												
Private	88.2	85.6 - 90.8	80.0	75.5 - 84.5	84.6	80.3 - 88.8	77.6	74.1 - 81.2	83.4	79.2 - 87.6	81.9	79.0 - 84.8
Public	85.9	81.4 - 90.5	79.7	75.8 - 83.7	86.3	79.1 - 93.4	73.0	66.6 - 79.5	85.9	77.3 - 94.6	84.1	76.7 - 91.4

* Sample size is less than 30.

** Confidence interval

Pregnancy Risk Assessment Monitoring System, 1997

Contraceptive Use at Postpartum, by Selected Maternal Characteristics

Characteristic	New York†		North Carolina‡		South Carolina		Washington		West Virginia	
	Pct	95% CI**	Pct	95% CI**	Pct	95% CI**	Pct	95% CI**	Pct	95% CI**
Maternal age										
< 20 years	84.2	70.7 - 97.7	78.2	65.6 - 90.9	85.0	73.7 - 96.4	71.7	60.2 - 83.2	87.9	84.7 - 91.1
20-29 years	79.1	73.6 - 84.7	88.6	84.0 - 93.2	92.4	88.6 - 96.2	83.8	79.9 - 87.6	85.4	81.9 - 88.9
≥ 30 years	76.1	71.3 - 81.0	83.3	76.7 - 89.9	82.2	74.8 - 89.6	76.5	71.6 - 81.4	82.4	76.5 - 88.2
Maternal race										
White	78.9	75.4 - 82.5	87.1	83.1 - 91.1	86.1	81.4 - 90.8	80.7	77.2 - 84.1	85.5	82.8 - 88.1
Black	60.5	40.3 - 80.8	84.0	75.7 - 92.3	92.8	87.8 - 97.8	76.3	70.9 - 81.7	84.9	72.9 - 97.0
Other	*	*	*	*	*	*	73.8	68.7 - 79.0	*	*
Hispanic ethnicity										
No	77.6	73.4 - 81.8	85.6	81.8 - 89.3	88.2	84.6 - 91.8	79.2	75.7 - 82.6	85.2	82.7 - 87.8
Yes	85.3	74.2 - 96.4	*	*	*	*	80.9	76.7 - 85.1	*	*
Maternal education										
< 12 years	78.0	65.6 - 90.4	81.0	69.9 - 92.0	83.6	73.0 - 94.1	80.5	73.2 - 87.9	82.9	76.8 - 88.9
12 years	81.2	74.8 - 87.6	89.6	83.8 - 95.5	92.8	88.0 - 97.7	83.1	78.0 - 88.2	86.3	82.6 - 90.1
> 12 years	76.6	72.2 - 81.0	84.2	79.1 - 89.3	84.4	78.5 - 90.4	78.4	73.9 - 82.9	85.4	81.1 - 89.7
Marital status										
Married	77.0	73.0 - 81.0	85.3	80.9 - 89.7	85.0	80.2 - 89.8	80.9	77.5 - 84.3	84.9	81.8 - 88.1
Not married	80.9	73.3 - 88.5	85.1	77.8 - 92.5	94.2	89.8 - 98.6	75.8	69.3 - 82.4	85.5	81.2 - 89.9
Parity										
Primipara	77.1	71.7 - 82.6	82.3	76.4 - 88.2	86.2	80.3 - 92.0	79.6	74.8 - 84.3	82.6	78.7 - 86.4
Multipara	78.6	74.0 - 83.3	87.9	82.9 - 92.8	89.5	85.1 - 93.9	79.3	75.2 - 83.3	87.2	83.7 - 90.6
Prenatal care paid by										
Medicaid	76.4	68.4 - 84.4	87.4	81.6 - 93.2	91.7	87.3 - 96.1	78.0	72.6 - 83.4	86.6	83.4 - 89.8
Non-Medicaid	78.6	74.7 - 82.4	83.6	78.6 - 88.6	84.8	79.4 - 90.3	80.4	76.8 - 84.0	83.3	79.1 - 87.4
Source of prenatal care										
Private	76.7	72.8 - 80.7	84.4	79.9 - 89.0	88.8	84.9 - 92.7	79.4	75.4 - 83.5	84.9	81.8 - 88.1
Public	78.8	68.7 - 88.9	86.7	79.0 - 94.4	88.5	79.8 - 97.2	82.7	78.1 - 87.2	84.4	78.5 - 90.3

* Sample size is less than 30.

** Confidence interval

† Data represent July through December only.

‡ Data do not include New York City.

Pregnancy Risk Assessment Monitoring System, 1997

Discussion of Postpartum Contraceptive Use with Prenatal Care Provider †

State	Estimated Population	Percent	95% CI**
Alabama	46,230 - 48,997	84.5	82.4 - 86.7
Alaska	7,728 - 8,202	84.7	82.4 - 87.0
Arkansas	24,545 - 27,082	80.6	77.8 - 83.5
Colorado	41,852 - 45,423	82.3	79.8 - 84.8
Florida	133,631 - 144,204	78.2	75.7 - 80.8
Georgia	86,417 - 98,039	85.3	82.1 - 88.6
Maine	10,387 - 11,055	84.2	81.9 - 86.6
New York‡	91,410 - 100,042	78.1	75.1 - 81.2
North Carolina	42,482 - 46,801	84.8	81.6 - 88.1
Oklahoma	33,687 - 36,606	81.1	78.2 - 84.0
South Carolina	39,337 - 42,561	87.5	84.8 - 90.2
Washington	59,431 - 63,465	84.2	81.7 - 86.7
West Virginia	13,612 - 14,686	81.0	78.3 - 83.7

* Discussion of Postpartum Contraceptive Use with Prenatal Care Provider is defined as women who reported a discussion with their health care provider during prenatal care about the use of contraception after delivery.

‡ Data do not include New York City.

† Data represent July through December only.

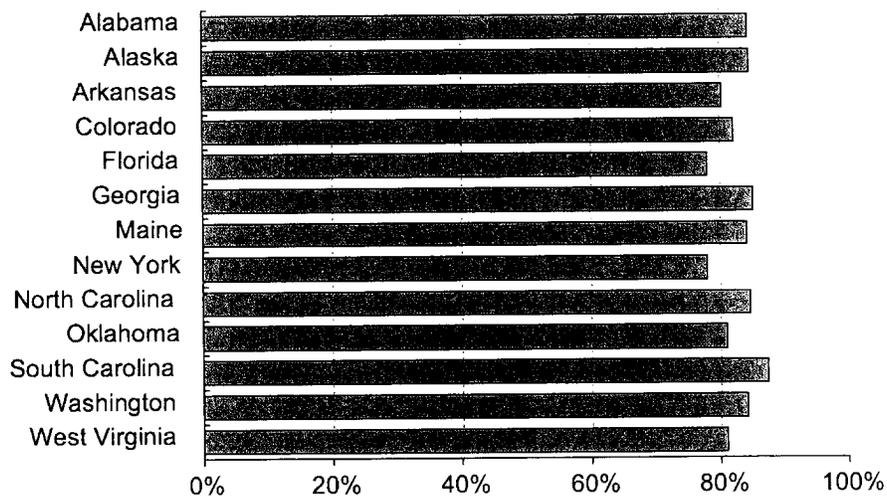
** Confidence interval

Notes:

1) Range among states is 78.1% to 87.5%.

2) 3.1% of women were excluded from this table because they had no prenatal care.

Discussion of Postpartum Contraceptive Use with Prenatal Care Provider †



Pregnancy Risk Assessment Monitoring System, 1997

Discussion of Postpartum Contraceptive Use by Prenatal Care Provider by Selected Maternal Characteristics

Characteristic	Alabama		Alaska		Arkansas		Colorado		Florida		Georgia		Maine	
	Pct	95% CI**	Pct	95% CI**	Pct	95% CI**	Pct	95% CI**	Pct	95% CI**	Pct	95% CI**	Pct	95% CI**
Maternal age														
< 20 years	96.1	93.4 - 98.9	89.6	83.5 - 95.7	88.1	83.1 - 93.0	88.8	82.4 - 95.3	90.1	85.8 - 94.4	93.7	89.6 - 97.9	87.8	80.3 - 95.4
20-29 years	84.6	81.7 - 87.6	85.4	82.4 - 88.5	79.9	76.0 - 83.7	82.9	79.4 - 86.3	78.7	75.2 - 82.3	84.6	79.8 - 89.3	85.0	81.8 - 88.2
≥ 30 years	75.5	70.1 - 81.0	81.8	77.8 - 85.9	77.4	71.3 - 83.5	79.8	75.6 - 83.9	73.0	68.3 - 77.6	83.1	77.4 - 88.9	82.2	78.2 - 86.2
Maternal race														
White	81.5	78.6 - 84.4	84.4	81.4 - 87.3	79.8	76.4 - 83.1	82.9	80.4 - 85.4	76.2	73.0 - 79.4	84.7	80.3 - 89.1	83.9	81.5 - 86.3
Black	91.4	88.2 - 94.5	89.6	79.8 - 99.4	85.5	80.5 - 90.5	73.6	52.7 - 94.5	85.6	82.5 - 88.6	87.0	82.9 - 91.2	*	*
Other	*	*	84.9	81.5 - 88.3	*	*	67.4	49.3 - 85.5	74.0	56.9 - 91.2	*	*	*	*
Hispanic ethnicity														
No	84.6	82.4 - 86.8	84.7	82.4 - 87.1	80.7	77.8 - 83.6	80.5	77.6 - 83.4	79.7	77.0 - 82.5	85.4	82.2 - 88.7	84.1	81.6 - 86.5
Yes	*	*	84.2	73.9 - 94.4	*	*	89.3	85.1 - 93.5	72.6	66.4 - 78.8	82.4	65.4 - 99.3	*	*
Maternal education														
< 12 years	91.7	88.0 - 95.3	82.6	75.9 - 89.3	86.1	80.0 - 92.1	92.2	87.3 - 97.1	82.0	76.6 - 87.5	86.4	77.9 - 95.0	89.2	82.4 - 95.9
12 years	86.0	82.4 - 89.6	85.4	82.0 - 88.8	81.1	76.7 - 85.5	81.1	76.3 - 86.0	82.0	78.2 - 85.8	86.5	81.5 - 91.5	83.0	78.8 - 87.2
> 12 years	79.6	75.8 - 83.4	85.5	82.3 - 88.7	77.3	72.6 - 82.1	79.7	76.4 - 83.1	73.2	69.0 - 77.4	83.9	79.3 - 88.5	84.4	81.3 - 87.5
Marital status														
Married	80.6	77.6 - 83.6	83.3	80.5 - 86.1	78.8	75.1 - 82.5	81.4	78.5 - 84.2	75.0	71.7 - 78.4	83.1	78.8 - 87.3	83.8	81.0 - 86.5
Not married	92.5	89.8 - 95.2	88.5	84.9 - 92.0	84.5	80.3 - 88.6	85.3	80.3 - 90.4	84.0	80.3 - 87.6	90.1	85.4 - 94.8	85.3	80.7 - 90.0
Parity														
Primipara	85.5	82.4 - 88.6	86.1	82.4 - 89.8	81.1	76.9 - 85.3	80.3	76.4 - 84.2	79.6	75.8 - 83.4	84.7	80.0 - 89.4	82.8	79.2 - 86.4
Multipara	83.7	80.6 - 86.9	83.8	81.0 - 86.7	80.3	76.4 - 84.2	84.0	80.8 - 87.3	77.2	73.8 - 80.6	85.9	81.5 - 90.3	85.3	82.2 - 88.5
Prenatal care paid by														
Medicaid	92.0	89.8 - 94.3	85.7	82.4 - 89.1	80.5	76.5 - 84.4	88.5	85.1 - 91.9	84.2	80.9 - 87.5	87.4	82.8 - 92.0	84.5	80.3 - 88.7
Non-Medicaid	77.2	73.5 - 81.0	84.0	81.0 - 87.0	80.7	76.6 - 84.9	79.5	76.3 - 82.7	73.4	69.7 - 77.1	83.1	78.5 - 87.7	84.1	81.2 - 87.0
Source of prenatal care														
Private	80.8	77.9 - 83.7	86.1	82.7 - 89.6	80.3	76.9 - 83.7	81.5	78.4 - 84.6	75.4	72.3 - 78.6	84.5	80.8 - 88.2	84.2	81.6 - 86.8
Public	93.5	90.7 - 96.4	85.4	82.3 - 88.4	80.8	75.2 - 86.3	84.1	79.2 - 89.0	84.7	80.4 - 88.9	89.1	83.3 - 94.9	85.3	78.8 - 91.9

* Sample size is less than 30.

** Confidence interval

Pregnancy Risk Assessment Monitoring System, 1997

Discussion of Postpartum Contraceptive Use With Prenatal Care Provider by Selected Maternal Characteristics

Characteristic	New York†		North Carolina†		Oklahoma		South Carolina		Washington		West Virginia	
	Pct	95% CI**	Pct	95% CI**	Pct	95% CI**	Pct	95% CI**	Pct	95% CI**	Pct	95% CI**
Maternal age												
< 20 years	89.2	79.9 - 98.5	92.3	85.9 - 98.7	85.0	77.7 - 92.2	90.6	84.7 - 96.6	88.7	82.1 - 95.4	85.9	82.6 - 89.3
20-29 years	82.1	77.7 - 86.5	83.2	78.5 - 87.9	79.6	75.8 - 83.4	87.1	83.3 - 90.9	84.8	81.2 - 88.4	83.0	79.6 - 86.5
≥ 30 years	72.8	68.3 - 77.4	83.5	77.8 - 89.2	82.1	76.4 - 87.8	86.4	81.5 - 91.3	82.3	78.2 - 86.5	72.6	66.2 - 79.1
Maternal race												
White	78.8	75.7 - 81.9	84.4	80.6 - 88.2	80.0	76.7 - 83.3	85.2	81.6 - 88.8	84.5	81.6 - 87.3	81.1	78.4 - 83.9
Black	74.6	61.8 - 87.5	88.9	83.4 - 94.5	86.4	78.1 - 94.8	91.2	87.2 - 95.2	85.8	82.2 - 89.3	77.3	61.5 - 93.0
Other	70.0	50.3 - 89.6	*	*	83.8	76.2 - 91.3	*	*	81.9	76.8 - 87.0	*	*
Hispanic ethnicity												
No	77.6	74.0 - 81.2	84.9	81.7 - 88.2	81.4	78.5 - 84.4	87.3	84.6 - 90.1	83.8	80.9 - 86.6	80.9	78.3 - 83.6
Yes	90.6	82.9 - 98.4	*	*	77.5	65.9 - 89.1	*	*	88.7	85.8 - 91.7	*	*
Maternal education												
< 12 years	84.3	75.7 - 92.9	88.5	81.2 - 95.8	81.2	74.0 - 88.4	93.4	88.8 - 98.0	90.6	86.0 - 95.3	85.5	80.6 - 90.4
12 years	78.5	72.7 - 84.4	88.8	83.8 - 93.8	79.0	74.1 - 83.9	89.6	85.3 - 93.9	83.2	78.3 - 88.1	82.1	78.1 - 86.0
> 12 years	76.0	72.1 - 80.0	80.2	75.3 - 85.2	82.2	78.0 - 86.4	83.4	78.8 - 88.0	83.4	79.6 - 87.3	76.9	71.9 - 81.8
Marital status												
Married	77.3	73.9 - 80.8	81.1	76.9 - 85.4	81.3	78.0 - 84.7	84.1	80.4 - 87.8	83.4	80.4 - 86.4	79.2	75.9 - 82.6
Not married	80.3	74.0 - 86.6	92.3	87.9 - 96.6	80.9	75.3 - 86.4	93.0	89.5 - 96.5	87.0	82.6 - 91.4	84.9	80.7 - 89.1
Parity												
Primipara	76.1	71.3 - 80.9	82.4	77.4 - 87.5	82.1	77.4 - 86.8	85.7	81.3 - 90.0	83.3	79.2 - 87.4	80.1	76.2 - 84.0
Multipara	79.6	75.7 - 83.6	86.8	82.7 - 91.0	81.4	77.7 - 85.2	88.8	85.4 - 92.2	84.5	81.2 - 87.8	81.7	78.1 - 85.4
Prenatal care paid by												
Medicaid	84.4	78.7 - 90.2	92.3	88.5 - 96.1	82.2	77.4 - 87.0	91.8	88.6 - 95.1	87.3	83.5 - 91.1	84.2	81.0 - 87.4
Non-Medicaid	75.7	72.1 - 79.2	78.3	73.4 - 83.2	80.4	76.8 - 84.1	82.9	78.6 - 87.2	82.8	79.5 - 86.0	76.5	72.0 - 81.0
Source of prenatal care												
Private	75.9	72.4 - 79.5	82.4	78.3 - 86.5	81.5	77.9 - 85.1	86.8	83.7 - 89.9	82.2	78.7 - 85.7	78.0	74.6 - 81.3
Public	84.8	78.0 - 91.6	90.5	85.2 - 95.8	79.8	74.3 - 85.3	92.7	87.8 - 97.6	86.7	82.8 - 90.6	86.6	81.3 - 92.0

* Sample size is less than 30.
 ** Confidence interval

† Data represent July through December only.
 ‡ Data do not include New York City.

Pregnancy Risk Assessment Monitoring System, 1997

Contraceptive Use at Postpartum and Discussion of Postpartum Contraceptive Use with Prenatal Care Provider

State	Discussed			Not discussed		
	Estimated Population	Pct	95% CI**	Estimated Population	Pct	95% CI**
Alabama [‡]	32,017 - 35,517	89.3	87.0 - 91.6	5042 - 7183	79.6	72.8 - 86.3
Alaska [‡]	4,239 - 4,823	80.3	77.1 - 83.4	590 - 917	66.5	58.1 - 74.9
Arkansas	10,101 - 12,331	85.3	81.3 - 89.3	2078 - 3311	82.7	74.6 - 90.9
Florida	67,194 - 78,128	78.0	74.5 - 81.5	17108 - 24164	69.9	62.9 - 77.0
Georgia	33,675 - 40,819	84.4	80.3 - 88.5	4398 - 7765	77.1	66.1 - 88.2
Maine	7,227 - 8,061	81.8	78.9 - 84.8	1094 - 1604	78.9	71.8 - 86.1
New York [‡]	50,338 - 59,562	80.5	76.7 - 84.4	11020 - 16587	72.3	63.9 - 80.7
North Carolina [‡]	25,235 - 30,335	89.1	85.3 - 92.8	2805 - 5286	66.9	54.4 - 79.3
South Carolina	16,021 - 19,889	88.0	84.0 - 92.0	1877 - 3699	86.1	75.8 - 96.3
Washington	36,835 - 41,882	81.1	77.9 - 84.4	5840 - 8950	74.8	66.7 - 82.9
West Virginia	9,554 - 10,776	85.5	82.5 - 88.4	2000 - 2817	83.7	77.5 - 89.9

* *Discussed* Postpartum Contraceptive Use with Prenatal Care Provider is defined as women who reported that their prenatal health care provider discussed postpartum contraceptive use; *not discussed* is defined as women who reported no discussion of postpartum contraceptive use with their prenatal health care provider.

‡ Data do not include New York City.

† Data represent July through December only.

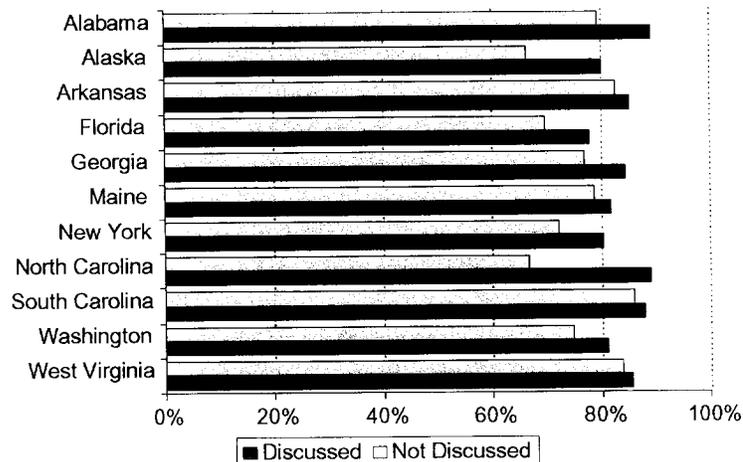
§ Groups are significantly different.

** Confidence interval

Notes:

- 1) Range among states is 78.0% to 89.3% for women who reported discussion of postpartum contraceptive use with prenatal care provider, and 66.5% to 86.1% for women who reported no discussion of postpartum contraceptive use with prenatal care provider.
- 2) 28.6% of women were excluded because they had no prenatal care, their prenatal care status was unknown, or their infant was older than 4 months at the time of interview.

Contraceptive Use at Postpartum and Discussion of Postpartum Contraceptive Use with Prenatal Care Provider



Pregnancy Risk Assessment Monitoring System, 1997

Contraceptive Use at Prenatal Care Discussion of Potential Contraceptive Use with Prenatal Care Provider by Selected Maternal Characteristics

Characteristic	Alabama				Alaska				Arkansas			
	Discussed		Not discussed		Discussed		Not discussed		Discussed		Not discussed	
	Pct	95% CI**	Pct	95% CI**	Pct	95% CI**	Pct	95% CI**	Pct	95% CI**	Pct	95% CI**
Maternal age												
< 20 years	89.0	83.6 - 94.5	*	*	77.5	66.8 - 88.2	*	*	76.2	64.6 - 87.7	*	*
20-29 years	89.3	86.3 - 92.3	81.6	73.1 - 90.2	80.5	76.1 - 84.8	71.6	60.1 - 83.1	89.3	85.1 - 93.5	86.8	76.1 - 97.5
≥ 30 years	89.7	85.1 - 94.3	78.8	67.7 - 89.9	80.9	75.9 - 85.9	62.7	49.6 - 75.7	83.1	73.8 - 92.3	73.0	56.9 - 89.0
Maternal race												
White	88.6	85.7 - 91.4	80.1	72.7 - 87.5	84.1	80.3 - 87.9	72.1	62.0 - 82.2	86.6	82.4 - 90.9	83.6	74.7 - 92.6
Black	91.4	87.6 - 95.3	80.8	64.7 - 96.9	*	*	*	*	79.5	68.4 - 90.6	*	*
Other	*	*	*	*	70.3	64.8 - 75.9	54.0	39.7 - 68.4	*	*	*	*
Hispanic ethnicity												
No	89.6	87.3 - 91.9	80.1	73.3 - 86.9	79.2	75.9 - 82.5	65.9	57.2 - 74.6	85.1	81.0 - 89.2	83.2	74.9 - 91.4
Yes	*	*	*	*	98.3	97.0 - 99.7	*	*	*	*	*	*
Maternal education												
< 12 years	85.9	80.4 - 91.4	*	*	78.4	68.4 - 88.5	*	*	79.1	68.0 - 90.3	*	*
12 years	91.9	88.4 - 95.4	85.4	74.8 - 96.0	80.7	76.1 - 85.3	68.6	55.4 - 81.8	85.5	79.5 - 91.5	85.5	74.2 - 96.8
> 12 years	89.1	85.5 - 92.6	77.5	68.4 - 86.7	80.7	76.1 - 85.4	66.6	54.2 - 78.9	88.1	82.3 - 94.0	77.1	63.6 - 90.7
Marital status												
Married	89.4	86.6 - 92.2	81.2	74.0 - 88.4	83.1	79.5 - 86.6	63.5	53.7 - 73.3	87.7	83.4 - 92.0	87.1	78.2 - 96.0
Not married	89.2	85.3 - 93.2	71.1	52.6 - 89.7	72.4	65.7 - 79.1	79.0	67.6 - 90.4	79.6	70.8 - 88.3	68.3	49.4 - 87.1
Parity												
Primipara	86.7	82.9 - 90.5	71.3	60.1 - 82.6	78.2	72.5 - 83.8	73.7	60.6 - 86.8	84.5	78.3 - 90.8	84.5	72.8 - 96.2
Multipara	91.4	88.6 - 94.2	86.3	78.6 - 94.1	81.5	77.7 - 85.2	62.5	51.8 - 73.3	85.8	80.6 - 91.1	81.6	70.5 - 92.7
Prenatal care paid by												
Medicaid	89.7	86.6 - 92.8	76.7	62.6 - 90.9	75.3	70.1 - 80.6	56.5	41.6 - 71.4	81.0	74.3 - 87.6	86.4	76.4 - 96.5
Non-Medicaid	89.0	85.6 - 92.4	80.4	72.7 - 88.1	83.5	79.6 - 87.5	72.2	62.4 - 82.0	88.5	83.6 - 93.4	80.0	68.1 - 92.0
Source of prenatal care												
Private	90.3	87.6 - 93.0	79.9	72.7 - 87.1	83.5	78.9 - 88.1	58.5	43.7 - 73.2	85.4	80.7 - 90.0	81.4	71.0 - 91.7
Public	87.1	82.5 - 91.7	*	*	81.0	76.7 - 85.4	75.5	65.0 - 85.9	84.0	75.0 - 93.0	93.4	85.9 - 100

* Sample size is less than 30.

** Confidence interval

Pregnancy Risk Assessment Monitoring System, 1997

Contraceptive Use at Prenatal Care Discussion of Postpartum Contraceptive Use with Prenatal Care Provider by Selected Maternal Characteristics

Characteristic	Florida				Georgia				Maine			
	Pct	95% CI**	Pct	95% CI**	Pct	95% CI**	Pct	95% CI**	Pct	95% CI**	Pct	95% CI**
Maternal age												
< 20 years	76.2	67.2 - 85.3	*	*	87.0	78.3 - 95.6	*	*	91.3	83.9 - 98.6	*	*
20-29 years	81.8	77.1 - 86.4	72.0	61.7 - 82.3	80.3	74.0 - 86.6	77.7	63.4 - 92.0	81.9	77.9 - 85.9	86.1	77.6 - 94.6
≥ 30 years	73.4	67.1 - 79.8	69.5	59.5 - 79.6	90.0	84.3 - 95.8	76.5	57.0 - 95.9	79.3	74.2 - 84.3	67.2	54.6 - 79.8
Maternal race												
White	78.6	74.3 - 82.8	70.7	62.8 - 78.6	84.7	79.3 - 90.1	77.8	64.2 - 91.4	81.9	78.9 - 84.8	79.0	71.8 - 86.2
Black	77.4	72.3 - 82.5	72.0	59.6 - 84.5	85.2	80.0 - 90.4	79.9	63.4 - 96.4	*	*	*	*
Other	63.8	37.8 - 89.8	*	*	*	*	*	*	*	*	*	*
Hispanic ethnicity												
No	80.2	76.5 - 83.9	71.1	63.2 - 79.0	85.2	81.1 - 89.3	79.0	68.3 - 89.6	82.0	79.0 - 85.0	78.3	71.0 - 85.6
Yes	68.8	59.4 - 78.2	66.5	51.5 - 81.5	*	*	*	*	*	*	*	*
Maternal education												
< 12 years	74.1	65.5 - 82.7	64.7	43.7 - 85.7	88.4	80.7 - 96.0	*	*	85.0	75.4 - 94.6	*	*
12 years	76.8	71.1 - 82.6	73.2	61.6 - 84.8	84.1	76.4 - 91.8	81.5	66.2 - 96.9	82.7	77.8 - 87.7	76.2	63.0 - 89.4
> 12 years	80.8	75.7 - 85.9	69.3	59.6 - 78.9	82.1	76.0 - 88.3	79.2	64.3 - 94.0	81.3	77.4 - 85.1	77.9	68.5 - 87.3
Marital status												
Married	78.9	74.5 - 83.3	72.0	64.1 - 79.8	84.1	78.8 - 89.4	79.2	66.7 - 91.7	83.3	80.0 - 86.6	78.8	70.8 - 86.7
Not married	76.3	70.5 - 82.1	63.2	47.7 - 78.6	85.0	78.8 - 91.1	69.7	46.7 - 92.7	78.3	72.1 - 84.4	79.4	63.4 - 95.5
Parity												
Primipara	76.1	70.6 - 81.5	72.0	61.2 - 82.8	81.2	74.8 - 87.6	81.1	67.2 - 94.9	84.9	80.8 - 88.9	83.6	74.8 - 92.3
Multipara	79.5	74.9 - 84.1	68.5	59.2 - 77.8	86.9	81.7 - 92.1	72.7	55.5 - 90.0	79.5	75.4 - 83.6	74.3	63.2 - 85.5
Prenatal care paid by												
Medicaid	77.2	71.9 - 82.4	62.7	49.4 - 75.9	84.6	79.0 - 90.2	74.2	56.8 - 91.6	79.6	74.2 - 85.0	83.4	70.9 - 95.9
Non-Medicaid	78.6	73.9 - 83.3	73.3	65.1 - 81.4	84.2	78.3 - 90.1	78.7	64.5 - 92.8	83.0	79.6 - 86.4	77.0	68.3 - 85.7
Source of prenatal care												
Private	79.0	74.8 - 83.1	72.4	64.9 - 79.9	84.6	80.1 - 89.0	75.8	63.3 - 88.4	82.1	78.9 - 85.3	79.6	71.6 - 87.5
Public	76.2	69.4 - 83.0	58.7	39.4 - 78.1	86.2	76.0 - 96.4	*	*	84.7	76.6 - 92.8	*	*

* Sample size is less than 30.
 ** Confidence interval

Pregnancy Risk Assessment Monitoring System, 1997

Contraceptive Use at Postpartum Discussion of Postpartum Contraceptive Use With Prenatal Care Provider by Selected Maternal Characteristics

Characteristic	New York [†]				North Carolina [†]				South Carolina			
	Discussed		Not discussed		Discussed		Not discussed		Discussed		Not discussed	
	Pct	95% CI**	Pct	95% CI**	Pct	95% CI**	Pct	95% CI**	Pct	95% CI**	Pct	95% CI**
Maternal age												
< 20 years	88.0	73.7 - 100	*	*	74.7	60.3 - 89.2	*	*	81.3	67.1 - 95.4	*	*
20-29 years	81.8	76.1 - 87.6	69.1	53.4 - 84.8	92.2	88.1 - 96.4	69.9	53.4 - 86.4	92.0	87.7 - 96.3	94.0	84.4 - 100
≥ 30 years	78.2	72.6 - 83.7	73.6	63.6 - 83.6	91.6	86.4 - 96.7	53.6	32.5 - 74.7	83.7	75.8 - 91.6	72.0	50.7 - 93.4
Maternal race												
White	80.9	77.0 - 84.8	73.5	65.5 - 81.6	90.4	86.5 - 94.3	72.3	59.0 - 85.6	85.8	80.6 - 91.1	86.2	74.7 - 97.7
Black	72.1	51.5 - 92.8	*	*	87.1	78.5 - 95.8	*	*	93.0	87.4 - 98.6	85.6	62.5 - 100
Other	*	*	*	*	*	*	*	*	*	*	*	*
Hispanic ethnicity												
No	80.6	76.0 - 85.1	70.0	59.6 - 80.5	89.5	85.9 - 93.2	66.8	54.3 - 79.3	88.0	84.0 - 92.0	86.1	75.8 - 96.3
Yes	82.6	69.2 - 95.9	*	*	*	*	*	*	*	*	*	*
Maternal education												
< 12 years	87.0	75.9 - 98.1	*	*	80.4	68.4 - 92.5	*	*	83.6	71.9 - 95.2	*	*
12 years	81.6	74.3 - 88.9	80.4	66.0 - 94.8	92.2	86.5 - 97.9	*	*	92.0	86.3 - 97.7	98.0	95.7 - 100
> 12 years	78.8	73.9 - 83.8	70.4	60.5 - 80.2	90.7	86.3 - 95.1	60.9	45.5 - 76.2	84.9	78.4 - 91.4	80.4	64.4 - 96.3
Marital status												
Married	79.5	75.1 - 83.9	71.1	62.2 - 80.0	90.9	86.9 - 94.8	64.9	51.1 - 78.8	85.0	79.7 - 90.4	81.4	68.0 - 94.8
Not married	83.4	75.7 - 91.2	76.8	54.6 - 99.0	85.2	77.1 - 93.4	*	*	93.6	88.4 - 98.8	99.5	98.9 - 100
Parity												
Primipara	79.5	73.2 - 85.7	69.6	57.8 - 81.4	86.6	80.7 - 92.6	67.1	51.1 - 83.1	84.7	78.0 - 91.5	93.6	83.7 - 100
Multipara	81.2	76.4 - 86.1	74.7	62.7 - 86.6	91.0	86.3 - 95.8	66.5	46.7 - 86.4	90.3	85.5 - 95.1	79.7	63.0 - 96.3
Prenatal care paid by												
Medicaid	80.3	72.1 - 88.4	73.5	47.8 - 99.3	87.3	81.1 - 93.5	*	*	91.4	86.4 - 96.3	92.0	77.0 - 100
Non-Medicaid	80.6	76.3 - 85.0	72.0	63.4 - 80.7	90.7	86.3 - 95.1	63.2	49.5 - 77.0	84.7	78.6 - 90.8	82.6	69.1 - 96.2
Source of prenatal care												
Private	79.1	74.7 - 83.5	70.2	61.4 - 78.9	90.0	85.9 - 94.1	64.1	50.2 - 78.1	88.1	83.8 - 92.5	92.0	83.5 - 100
Public	81.6	71.7 - 91.5	*	*	86.0	77.6 - 94.5	*	*	86.6	76.3 - 97.0	*	*

* Sample size is less than 30.

** Confidence interval

† Data represent July through December only.

‡ Data do not include New York City.

Pregnancy Risk Assessment Monitoring System, 1997

Contraceptive Use at Prenatal Discussion of Potentially Contraceptive With Prenatal Care Provider by Selected Maternal Characteristics

Characteristic	Washington				West Virginia			
	Pct	Discussed 95% CI**	Pct	Not discussed 95% CI**	Pct	Discussed 95% CI**	Pct	Not discussed 95% CI**
Maternal age								
< 20 years	77.9	66.4 - 89.5	*	*	90.0	86.7 - 93.4	82.6	72.1 - 93.1
20-29 years	84.8	80.7 - 89.0	77.7	66.4 - 89.0	86.4	82.5 - 90.2	81.0	71.7 - 90.2
≥ 30 years	77.1	71.5 - 82.6	77.5	66.6 - 88.4	79.6	72.2 - 87.0	88.7	79.2 - 98.2
Maternal race								
White	81.9	78.1 - 85.6	76.3	66.8 - 85.7	86.2	83.2 - 89.2	83.0	76.5 - 89.4
Black	77.5	71.4 - 83.6	77.5	65.1 - 89.9	79.7	63.1 - 96.2	*	*
Other	76.4	70.5 - 82.4	64.2	51.6 - 76.9	*	*	*	*
Hispanic ethnicity								
No	80.4	76.7 - 84.2	74.6	65.5 - 83.6	85.6	82.7 - 88.5	83.7	77.5 - 89.9
Yes	84.0	79.8 - 88.3	64.9	50.4 - 79.5	*	*	*	*
Maternal education								
< 12 years	82.1	74.1 - 90.1	66.6	39.6 - 93.7	88.1	82.2 - 93.9	61.2	39.6 - 82.8
12 years	85.8	80.6 - 90.9	73.5	57.5 - 89.5	85.4	81.0 - 89.7	87.6	79.2 - 95.9
> 12 years	78.7	73.6 - 83.7	78.9	68.4 - 89.3	84.8	79.7 - 90.0	87.1	78.8 - 95.4
Marital status								
Married	81.8	78.1 - 85.5	77.5	69.0 - 86.1	84.1	80.4 - 87.9	87.3	81.0 - 93.7
Not married	78.8	72.0 - 85.6	62.1	41.4 - 82.8	88.4	83.9 - 93.0	70.4	54.5 - 86.3
Parity								
Primipara	82.2	77.3 - 87.2	74.7	62.2 - 87.1	84.6	80.4 - 88.9	74.2	63.5 - 84.8
Multipara	79.8	75.3 - 84.3	74.4	63.4 - 85.4	86.1	82.1 - 90.2	92.1	86.0 - 98.2
Prenatal care paid by								
Medicaid	80.1	74.3 - 85.8	69.1	52.6 - 85.6	87.6	84.0 - 91.1	80.6	71.0 - 90.2
Non-Medicaid	81.5	77.6 - 85.5	76.6	67.3 - 85.8	82.6	77.6 - 87.5	86.4	78.4 - 94.4
Source of prenatal care								
Private	80.9	76.6 - 85.3	73.5	63.3 - 83.8	85.0	81.4 - 88.7	85.0	78.3 - 91.6
Public	82.9	78.0 - 87.8	81.4	69.0 - 93.7	85.1	78.8 - 91.5	*	*

* Sample size is less than 30.

** Confidence interval

State Exhibits

Alabama

PRAMS 1997 Special Report

AL

Alabama *Pregnancy Risk Assessment Monitoring System, 1997*

Characteristics of 1997 PRAMS-Eligible Population **

Characteristic	Population	Percent	Respondents [†]
Maternal age			
< 20 years	10,441	17.9	344
20-29 years	33,077	56.8	963
≥ 30 years	14,714	25.3	466
Maternal race			
White	38,389	65.9	1,161
Black	19,151	32.9	599
Other [§]	698	1.2	13
Hispanic ethnicity			
Yes	1,029	1.8	23
No	57,187	98.2	1,750
Maternal education			
< 12 years	13,852	23.9	409
12 years	19,320	33.3	607
> 12 years	24,831	42.8	751
Marital status			
Married	38,175	65.6	1,133
Not married	20,055	34.4	640
Parity			
Primipara	25,393	43.6	875
Multipara	32,825	56.4	897
Live births	58,238		1,773

Characteristic	Estimated Population	95% CI [‡]	Percent	95% CI [‡]	Respondents [†]
Prenatal care paid by					
Medicaid	29,099	28,234 - 29,964	50.0	48.6 - 51.4	913
Non-Medicaid	29,129	28,323 - 29,935	50.0	48.6 - 51.4	858
Source of prenatal care					
Private	39,677	38,263 - 41,090	71.2	68.8 - 73.6	1,199
Public	16,054	14,655 - 17,453	28.8	26.4 - 31.2	482

** PRAMS-eligible population is defined as all state residents who delivered a live birth in-state during 1997.
[†] Number of women who completed a PRAMS survey.
[‡] Confidence interval
[§] Other includes Native American, Asian, and unknown.

Sources:
 Figures for "Prenatal care paid by" and "Source of prenatal care" are estimated from the PRAMS sample; all other figures are compiled from state birth certificate data.

Alabama *Pregnancy Risk Assessment Monitoring System, 1997*

Contraceptive Use at the Time of Pregnancy,** by Selected Maternal Characteristics

Characteristic	Estimated Population	Percent	95% CI†
Maternal age			
< 20 years	2,475 - 3,951	29.0	23.0 - 35.0
20-29 years	7,517 - 10,077	26.6	23.0 - 30.2
≥ 30 years	1,553 - 2,921	16.0	11.4 - 20.6
Maternal race			
White	7,551 - 10,053	22.2	19.2 - 25.3
Black	4,371 - 6,394	30.0	25.0 - 35.0
Other‡	*	*	*
Hispanic ethnicity			
No	12,509 - 15,508	24.4	21.8 - 27.0
Yes	*	*	*
Maternal education			
< 12 years	3,029 - 4,778	29.0	23.4 - 34.7
12 years	3,690 - 5,531	22.7	18.5 - 26.9
> 12 years	4,671 - 6,795	23.7	19.7 - 27.7
Marital status			
Married	6,616 - 9,053	20.5	17.4 - 23.5
Not married	5,377 - 7,447	32.3	27.6 - 37.0
Parity			
Primipara	5,014 - 7,084	22.8	19.1 - 26.4
Multipara	6,946 - 9,448	26.0	22.4 - 29.7
Prenatal care paid by			
Medicaid	7,571 - 9,792	29.9	26.1 - 33.6
Non-Medicaid	4,518 - 6,612	19.2	15.6 - 22.7
Source of prenatal care			
Private	7,770 - 10,354	22.9	19.8 - 26.0
Public	3,405 - 5,154	26.7	21.8 - 31.7

* Number of women sampled was less than 30.

** Contraceptive use at the time of pregnancy is defined as women who were using a method of contraception when they got pregnant.

† Confidence interval

‡ Other includes Native American, Asian, and unknown.

Alabama *Pregnancy Risk Assessment Monitoring System, 1997*

Unintended Pregnancy** Among Women Delivering a Live-Born Infant, by Selected Maternal Characteristics

Characteristic	Estimated Population	Percent	95% CI [†]
Maternal age			
< 20 years	6,342 - 8,520	74.4	68.2 - 80.6
20-29 years	13,737 - 16,850	49.5	45.4 - 53.6
≥ 30 years	3,010 - 4,780	29.4	23.6 - 35.3
Maternal race			
White	14,100 - 17,174	41.7	38.1 - 45.4
Black	9,307 - 11,927	66.0	60.5 - 71.5
Other [§]	*	*	*
Hispanic ethnicity			
No	24,725 - 28,160	49.5	46.5 - 52.5
Yes	*	*	*
Maternal education			
< 12 years	6,761 - 9,088	67.5	61.3 - 73.8
12 years	8,353 - 10,894	50.6	45.4 - 55.8
> 12 years	7,719 - 10,290	38.7	34.1 - 43.4
Marital status			
Married	11,611 - 14,568	35.8	32.2 - 39.5
Not married	12,188 - 14,872	76.9	72.4 - 81.5
Parity			
Primipara	11,286 - 14,079	50.9	46.4 - 55.3
Multipara	12,413 - 15,460	47.8	43.5 - 52.0
Prenatal care paid by			
Medicaid	16,100 - 18,637	66.0	61.8 - 70.1
Non-Medicaid	8,008 - 10,494	33.3	29.0 - 37.6
Source of prenatal care			
Private	14,097 - 17,237	41.8	38.1 - 45.5
Public	8,362 - 10,790	65.3	59.7 - 70.9

* Number of women sampled was less than 30.

** Unintended pregnancy is defined as a pregnancy for which the woman either wanted to be pregnant later or did not want to be pregnant at any time.

† Confidence interval

§ Other includes Native American, Asian, and unknown.

Alabama *Pregnancy Risk Assessment Monitoring System, 1997*

Contraceptive Use at the Time of Pregnancy and Pregnancy Intention,** by Selected Maternal Characteristics

Characteristic	Unintended			Intended		
	Estimated Population	Pct	95% CI†	Estimated Population	Pct	95% CI†
Maternal age						
< 20 years	1,837 - 3,158	33.6	26.0 - 41.3	120 - 673	15.8	5.6 - 26.0
20-29 years	5,449 - 7,691	43.0	37.1 - 48.8	867 - 1,972	9.1	5.7 - 12.6
≥ 30 years	1,004 - 2,167	40.7	29.1 - 52.3	258 - 999	6.7	2.9 - 10.6
Maternal race						
White	5,410 - 7,612	41.6	35.9 - 47.4	1,122 - 2,311	7.9	5.2 - 10.6
Black	3,201 - 4,962	38.5	31.6 - 45.3	326 - 1,131	13.3	6.4 - 20.2
Other§	*	*	*	*	*	*
Hispanic ethnicity						
No	9,143 - 11,821	39.7	35.3 - 44.0	1,676 - 3,082	8.8	6.3 - 11.4
Yes	*	*	*	*	*	*
Maternal education						
< 12 years	2,190 - 3,721	37.3	29.4 - 45.2	173 - 849	13.4	5.2 - 21.7
12 years	2,749 - 4,378	37.0	30.0 - 44.0	313 - 1,049	7.3	3.5 - 11.1
> 12 years	3,221 - 5,048	46.0	38.2 - 53.7	734 - 1,773	8.8	5.3 - 12.4
Marital status						
Married	4,498 - 6,585	42.3	35.9 - 48.7	1,291 - 2,590	8.3	5.6 - 11.0
Not married	4,172 - 6,052	37.8	31.9 - 43.7	203 - 805	12.4	5.4 - 19.5
Parity						
Primipara	3,432 - 5,192	34.0	28.1 - 40.0	698 - 1,683	9.8	5.9 - 13.6
Multipara	5,226 - 7,457	45.5	39.3 - 51.7	730 - 1,778	8.3	4.9 - 11.6
Prenatal care paid by						
Medicaid	5,705 - 7,739	38.7	33.5 - 43.9	683 - 1,565	12.6	7.9 - 17.3
Non-Medicaid	3,035 - 4,827	42.5	34.7 - 50.4	760 - 1,882	7.2	4.2 - 10.1
Source of prenatal care						
Private	5,678 - 7,965	43.6	37.7 - 49.4	1,122 - 2,334	7.9	5.2 - 10.7
Public	2,474 - 4,011	33.9	27.0 - 40.8	290 - 1,037	13.2	6.2 - 20.1

* Number of women sampled was less than 30.

** Pregnancy intention is defined as *intended* if the woman reported that she wanted to be pregnant then or sooner and as *unintended* if the woman either wanted to be pregnant later (mistimed) or did not want to be pregnant at any time (unwanted).

† Confidence interval

§ Other includes Native American, Asian, and unknown.

Alabama Pregnancy Risk Assessment Monitoring System, 1997

Reasons for Not Using Contraception at the Time of Pregnancy and Pregnancy Intention**

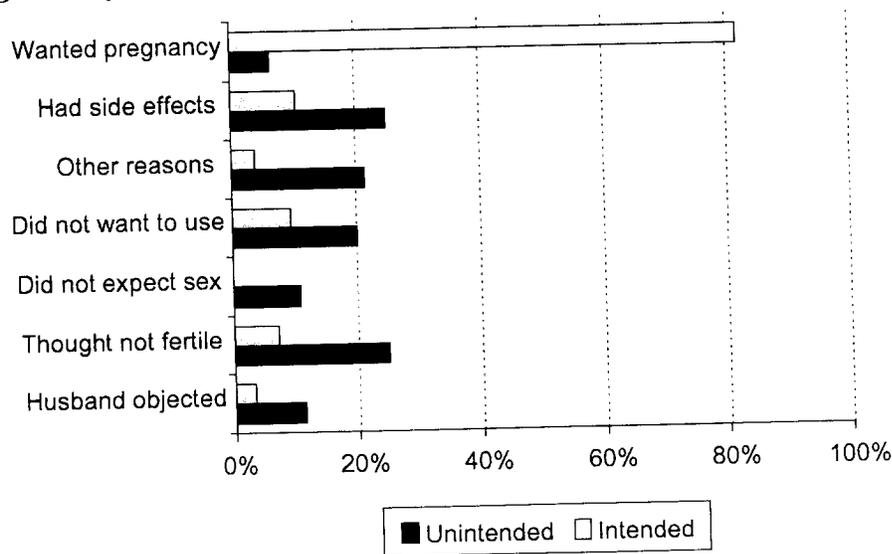
Characteristic	Intended			Unintended		
	Estimated Population	Pct	95% CI†	Estimated Population	Pct	95% CI†
Husband objected	391 - 1,215	3.2	1.6 - 4.8	1,187 - 2,422	11.4	7.7 - 15.1
Thought not fertile	1,209 - 2,406	7.2	4.9 - 9.6	3,089 - 4,831	24.9	20.0 - 29.9
Did not expect sex	0 - 19	0.0	0.0 - 0.1	1,141 - 2,293	10.8	7.3 - 14.3
Did not want to use	1,673 - 3,053	9.5	6.8 - 12.2	2,396 - 4,022	20.2	15.5 - 24.9
Other reasons‡	503 - 1,372	3.8	2.0 - 5.5	2,597 - 4,254	21.5	16.7 - 26.2
Had side effects	1,878 - 3,347	10.5	7.6 - 13.3	3,112 - 4,845	25.0	20.1 - 30.0
Wanted pregnancy	18,891 - 22,036	81.9	78.4 - 85.4	581 - 1,520	6.6	3.7 - 9.5

** Pregnancy intention is defined as *intended* if the woman reported that she wanted to be pregnant then or sooner and as *unintended* if the woman either wanted to be pregnant later (mistimed) or did not want to be pregnant at any time (unwanted).

† Confidence interval

"Other" could be classified most frequently into existing categories ("wanted pregnancy" or "thought not fertile") or into new reasons (lapse in use or method change, fear of method side effects, or financial barriers).

Reasons for Not Using Contraception at the Time of Pregnancy and Pregnancy Intention



Alabama *Pregnancy Risk Assessment Monitoring System, 1997*

Mother's Perception of Partner's Intention as Unwanted,** by Selected Maternal Characteristics

Characteristic	Estimated Population	Percent	95% CI†
Maternal age			
< 20 years	658 - 1,562	10.3	6.3 - 14.3
20-29 years	3,020 - 4,838	11.9	9.2 - 14.6
≥ 30 years	517 - 1,388	6.8	3.8 - 9.9
Maternal race			
White	2,507 - 4,109	8.4	6.4 - 10.4
Black	1,804 - 3,278	14.4	10.5 - 18.3
Other‡	*	*	*
Hispanic ethnicity			
No	4,791 - 6,923	10.3	8.4 - 12.1
Yes	*	*	*
Maternal education			
< 12 years	1,099 - 2,266	12.8	8.6 - 17.0
12 years	1,195 - 2,381	8.9	6.0 - 11.8
> 12 years	1,782 - 3,261	10.4	7.5 - 13.3
Marital status			
Married	1,615 - 2,989	6.0	4.2 - 7.8
Not married	2,830 - 4,551	19.0	14.9 - 23.1
Parity			
Primipara	1,713 - 3,096	9.2	6.6 - 11.7
Multipara	2,727 - 4,447	11.4	8.8 - 14.1
Prenatal care paid by			
Medicaid	3,124 - 4,810	13.9	11.0 - 16.8
Non-Medicaid	1,350 - 2,700	7.0	4.7 - 9.3
Source of prenatal care			
Private	2,873 - 4,637	9.5	7.3 - 11.7
Public	1,440 - 2,715	13.1	9.3 - 17.0

* Number of women sampled was less than 30.

** Mother's Perception of Partner's Intention is defined as *unwanted* if the woman reported that her husband or partner did not want the pregnancy; all other observations were defined as *wanted*.

† Confidence interval

‡ Other includes Native American, Asian, and unknown.

Alabama Pregnancy Risk Assessment Monitoring System, 1997

Contraceptive Use at the Time of Pregnancy and Mother's Perception of Partner's Intention,** by Selected Maternal Characteristics

Characteristic	Unwanted			Wanted		
	Estimated Population	Pct	95% CI†	Estimated Population	Pct	95% CI†
Maternal age						
< 20 years	164 - 728	40.2	20.1 - 60.2	2,074 - 3,460	28.8	22.4 - 35.2
20-29 years	961 - 2,120	39.2	27.5 - 50.9	6,080 - 8,432	25.0	21.3 - 28.8
≥ 30 years	180 - 803	51.6	28.6 - 74.6	1,129 - 2,354	13.4	8.9 - 17.9
Maternal race						
White	877 - 1,952	42.8	30.4 - 55.1	6,222 - 8,547	20.5	17.4 - 23.5
Black	546 - 1,459	39.5	25.1 - 53.8	3,456 - 5,304	29.0	23.6 - 34.4
Other§	*	*	*	*	*	*
Hispanic ethnicity						
No	1,715 - 3,114	41.2	31.8 - 50.6	10,190 - 12,991	22.7	20.0 - 25.4
Yes	*	*	*	*	*	*
Maternal education						
< 12 years	355 - 1,132	44.2	26.7 - 61.6	2,364 - 3,956	27.6	21.5 - 33.6
12 years	314 - 1,054	38.3	21.9 - 54.6	3,068 - 4,776	21.5	17.2 - 25.8
> 12 years	574 - 1,527	41.7	26.9 - 56.4	3,715 - 5,650	21.6	17.5 - 25.7
Marital status						
Married	372 - 1,177	33.7	19.3 - 48.0	5,887 - 8,225	19.7	16.6 - 22.8
Not married	1,116 - 2,292	46.2	34.1 - 58.2	3,812 - 5,604	29.9	24.8 - 35.0
Parity						
Primipara	515 - 1,396	39.7	25.4 - 54.1	4,139 - 6,048	21.4	17.7 - 25.1
Multipara	960 - 2,086	42.5	30.3 - 54.7	5,521 - 7,820	24.0	20.2 - 27.8
Prenatal care paid by						
Medicaid	1,065 - 2,177	40.9	29.8 - 52.0	6,029 - 8,092	28.7	24.7 - 32.7
Non-Medicaid	418 - 1,296	42.3	25.4 - 59.2	3,724 - 5,684	17.4	13.9 - 21.0
Source of prenatal care						
Private	1,111 - 2,320	45.7	33.6 - 57.7	6,161 - 8,524	20.6	17.5 - 23.7
Public	319 - 1,040	32.7	18.1 - 47.3	2,786 - 4,414	26.3	20.9 - 31.6

* Number of women sampled was less than 30.

** Mother's Perception of Partner's Intention is defined as *unwanted* if the woman reported that her husband or partner did not want the pregnancy; all other observations were defined as *wanted*.

† Confidence interval

§ Other includes Native American, Asian, and unknown.

Alabama *Pregnancy Risk Assessment Monitoring System, 1997*

Contraceptive Use at Postpartum,** by Selected Maternal Characteristics

Characteristic	Estimated Population	Percent	95% CI†
Maternal age			
< 20 years	2,475 - 3,951	29.0	23.0 - 35.0
20-29 years	7,517 - 10,077	26.6	23.0 - 30.2
≥ 30 years	1,553 - 2,921	16.0	11.4 - 20.6
Maternal race			
White	7,551 - 10,053	22.2	19.2 - 25.3
Black	4,371 - 6,394	30.0	25.0 - 35.0
Other‡	*	*	*
Hispanic ethnicity			
No	12,509 - 15,508	24.4	21.8 - 27.0
Yes	*	*	*
Maternal education			
< 12 years	3,029 - 4,778	29.0	23.4 - 34.7
12 years	3,690 - 5,531	22.7	18.5 - 26.9
> 12 years	4,671 - 6,795	23.7	19.7 - 27.7
Marital status			
Married	6,616 - 9,053	20.5	17.4 - 23.5
Not married	5,377 - 7,447	32.3	27.6 - 37.0
Parity			
Primipara	5,014 - 7,084	22.8	19.1 - 26.4
Multipara	6,946 - 9,448	26.0	22.4 - 29.7
Prenatal care paid by			
Medicaid	7,571 - 9,792	29.9	26.1 - 33.6
Non-Medicaid	4,518 - 6,612	19.2	15.6 - 22.7
Source of prenatal care			
Private	7,770 - 10,354	22.9	19.8 - 26.0
Public	3,405 - 5,154	26.7	21.8 - 31.7

* Number of women sampled was less than 30.

** Contraceptive use at postpartum is defined as women who were using a method of contraception at the time of the PRAMS interview and whose infant was less than 4 months old at that time.

† Confidence interval

‡ Other includes Native American, Asian, and unknown.

Alabama *Pregnancy Risk Assessment Monitoring System, 1997*

Discussion of Postpartum Contraceptive Use With Prenatal Care Provider,** by Selected Maternal Characteristics

Characteristic	Estimated Population	Percent	95% CI†
Maternal age			
< 20 years	8,862 - 11,288	96.1	93.4 - 98.9
20-29 years	25,373 - 28,926	84.6	81.7 - 87.6
≥ 30 years	9,061 - 11,717	75.5	70.1 - 81.0
Maternal race			
White	29,909 - 33,207	81.5	78.6 - 84.4
Black	14,032 - 17,113	91.4	88.2 - 94.5
Other‡	*	*	*
Hispanic ethnicity			
No	45,768 - 48,579	84.6	82.4 - 86.8
Yes	*	*	*
Maternal education			
< 12 years	10,356 - 12,991	91.7	88.0 - 95.3
12 years	15,091 - 18,222	86.0	82.4 - 89.6
> 12 years	17,612 - 20,807	79.6	75.8 - 83.4
Marital status			
Married	28,771 - 32,075	80.6	77.6 - 83.6
Not married	15,785 - 18,596	92.5	89.8 - 95.2
Parity			
Primipara	20,370 - 23,685	85.5	82.4 - 88.6
Multipara	23,784 - 27,388	83.7	80.6 - 86.9
Prenatal care paid by			
Medicaid	24,566 - 26,598	92.0	89.8 - 94.3
Non-Medicaid	20,763 - 23,300	77.2	73.5 - 81.0
Source of prenatal care			
Private	29,867 - 33,243	80.8	77.9 - 83.7
Public	13,322 - 16,030	93.5	90.7 - 96.4

* Number of women sampled was less than 30.

** Discussion of Postpartum Contraceptive Use with Prenatal Care Provider is defined as women who reported a discussion with their health care provider during prenatal care about the use of contraception after delivery.

† Confidence interval

‡ Other includes Native American, Asian, and unknown.

Alabama *Pregnancy Risk Assessment Monitoring System, 1997*

Contraceptive Use at Postpartum and Discussion of Postpartum Contraceptive Use With Prenatal Care Provider,** by Selected Maternal Characteristics

Characteristic	Discussed			Not Discussed		
	Estimated Population	Pct	95% CI†	Estimated Population	Pct	95% CI†
Maternal age						
< 20 years	4,907 - 6,873	89.0	83.6 - 94.5	*	*	*
20-29 years	18,129 - 21,505	89.3	86.3 - 92.3	2,745 - 4,435	81.6	73.1 - 90.2
≥ 30 years	6,844 - 9,277	89.7	85.1 - 94.3	1,580 - 2,961	78.8	67.7 - 89.9
Maternal race						
White	21,663 - 24,980	88.6	85.7 - 91.4	4,101 - 6,054	80.1	72.7 - 87.5
Black	8,863 - 11,563	91.4	87.6 - 95.3	557 - 1,505	80.8	64.7 - 96.9
Other‡	*	*	*	*	*	*
Hispanic ethnicity						
No	31,769 - 35,275	89.6	87.3 - 91.9	4,972 - 7,104	80.1	73.3 - 86.9
Yes	*	*	*	*	*	*
Maternal education						
< 12 years	5,946 - 8,170	85.9	80.4 - 91.4	*	*	*
12 years	10,232 - 13,012	91.9	88.4 - 95.4	1,347 - 2,618	85.4	74.8 - 96.0
> 12 years	13,520 - 16,534	89.1	85.5 - 92.6	2,644 - 4,314	77.5	68.4 - 86.7
Marital status						
Married	21,209 - 24,515	89.4	86.6 - 92.2	4,222 - 6,218	81.2	74.0 - 88.4
Not married	9,638 - 12,173	89.2	85.3 - 93.2	486 - 1,299	71.1	52.6 - 89.7
Parity						
Primipara	12,804 - 15,755	86.7	82.9 - 90.5	1,780 - 3,179	71.3	60.1 - 82.6
Multipara	17,777 - 21,198	91.4	88.6 - 94.2	2,769 - 4,497	86.3	78.6 - 94.1
Prenatal care paid by						
Medicaid	15,866 - 18,405	89.7	86.6 - 92.8	883 - 1,915	76.7	62.6 - 90.9
Non-Medicaid	15,290 - 17,973	89.0	85.6 - 92.4	3,766 - 5,661	80.4	72.7 - 88.1
Source of prenatal care						
Private	21,822 - 25,192	90.3	87.6 - 93.0	4,398 - 6,422	79.9	72.7 - 87.1
Public	8,108 - 10,500	87.1	82.5 - 91.7	*	*	*

* Number of women sampled was less than 30.

** Discussion of Postpartum Contraceptive Use with Prenatal Care Provider is defined as *discussed* by women who reported that their prenatal health care provider discussed postpartum contraceptive use; *not discussed* is defined as women who reported no discussion of postpartum contraceptive use with their prenatal health care provider.

† Confidence interval

‡ Other includes Native American, Asian, and unknown.

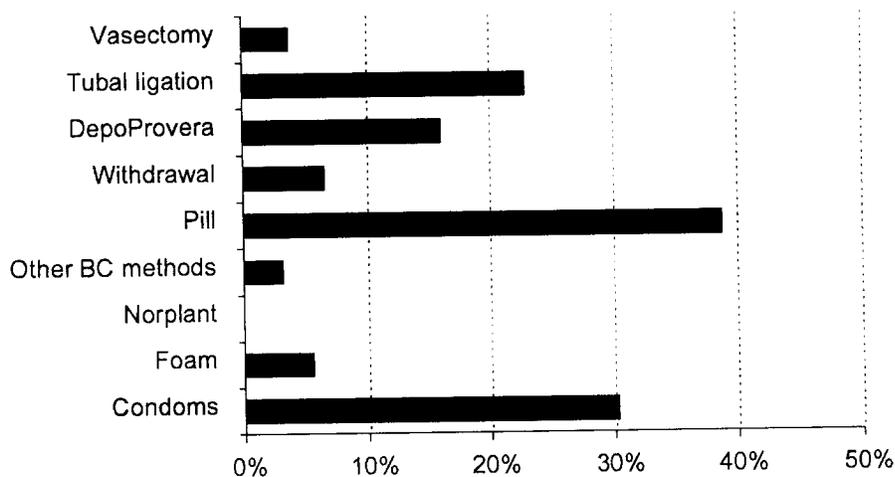
Alabama *Pregnancy Risk Assessment Monitoring System, 1997*

Method of Contraception Used at Postpartum**

Characteristic	Estimated Population	Percent	95% CI†
Condoms	11,019 - 13,887	30.3	27.0 - 33.6
Foam	1,598 - 2,963	5.6	3.9 - 7.2
Norplant	0 - 180	0.1	0.0 - 0.4
Other BC methods	788 - 1,826	3.2	1.9 - 4.4
Pill	14,376 - 17,481	38.8	35.3 - 42.3
Withdrawal	1,967 - 3,438	6.6	4.8 - 8.4
DepoProvera	5,510 - 7,629	16.0	13.5 - 18.5
Tubal ligation	8,055 - 10,716	22.9	19.8 - 25.9
Vasectomy	989 - 2,169	3.8	2.4 - 5.3

** Postpartum period is defined as the period from delivery through 4 months after delivery.
 † Confidence interval

Method of Contraception Used at Postpartum**



Alabama *Pregnancy Risk Assessment Monitoring System, 1997*

Reasons for Not Using Contraception at Postpartum**

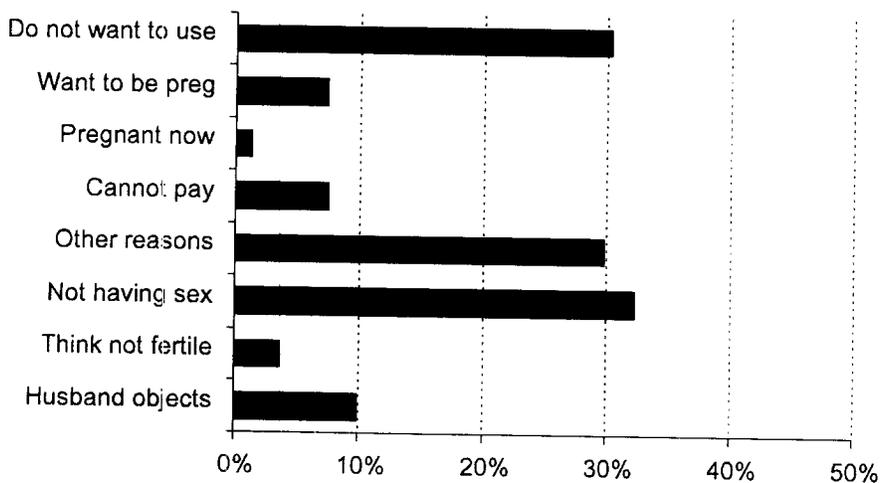
Characteristic	Estimated Population	Percent	95% CI†
Husband objects	225 - 942	9.9	4.1 - 15.7
Think not fertile	6 - 419	3.6	0.2 - 7.1
Not having sex	1,273 - 2,546	32.3	23.4 - 41.3
Other reasons‡	1,148 - 2,371	29.8	21.0 - 38.5
Cannot pay	135 - 751	7.5	2.5 - 12.5
Pregnant now	0 - 174	1.3	0.0 - 2.9
Want to be pregnant	138 - 730	7.4	2.5 - 12.2
Do not want to use	1,180 - 2,394	30.3	21.5 - 39.0

** Postpartum period is defined as the period from delivery through 4 months after delivery.

† Confidence interval

"Other" could be classified most frequently into existing categories ("wanted pregnancy" or "thought not fertile") or into new reasons (lapse in use or method change, fear of method side effects, or financial barriers).

Reasons for Not Using Contraception at Postpartum



State Exhibits

Alaska

PRAMS 1997 Special Report

AK

Alaska *Pregnancy Risk Assessment Monitoring System, 1997*

AK

Characteristics of 1997 PRAMS-Eligible Population**

Characteristic	Population	Percent	Respondents†
Maternal age			
< 20 years	1,113	11.3	169
20-29 years	5,293	53.9	716
≥ 30 years	3,412	34.8	488
Maternal race			
White	6,361	64.8	685
Black	445	4.5	41
Other§	3,014	30.7	647
Hispanic ethnicity			
Yes	602	6.1	68
No	9,193	93.9	1,300
Maternal education			
< 12 years	1,398	14.4	208
12 years	4,084	42.2	614
> 12 years	4,205	43.4	536
Marital status			
Married	6,789	69.3	918
Not married	3,008	30.7	454
Parity			
Primipara	3,692	37.7	490
Multipara	6,111	62.3	881
Total	9,820		1,373

Characteristic	Estimated Population	95% CI‡	Percent	95% CI‡	Respondents†
Prenatal care paid by					
Medicaid	3,964	3,666 - 4,261	40.4	37.5 - 43.2	620
Non-Medicaid	5,856	5,586 - 6,127	59.6	56.8 - 62.5	753
Source of prenatal care					
Private	4,006	3,728 - 4,284	47.0	43.9 - 50.1	472
Public	4,514	4,223 - 4,805	53.0	49.9 - 56.1	720

** PRAMS-eligible population is defined as all state residents who delivered a live birth in-state during 1997.

† Number women who completed a PRAMS survey.

‡ Confidence interval

§ Other includes Alaska Native, Asian, other non-white, and unknown.

Sources:

Figures for "Prenatal care paid by" and "Source of prenatal care" are estimated from the PRAMS sample; all other figures are compiled from state birth certificate data.

Alaska *Pregnancy Risk Assessment Monitoring System, 1997*

Contraceptive Use at the Time of Pregnancy,** by Selected Maternal Characteristics

Characteristic	Estimated Population	Percent	95% CI†
Maternal age			
< 20 years	218 - 456	27.6	19.2 - 35.9
20-29 years	896 - 1,265	21.0	17.6 - 24.4
≥ 30 years	595 - 908	21.9	17.7 - 26.1
Maternal race			
White	1,196 - 1,649	22.2	18.7 - 25.6
Black	28 - 142	23.2	9.1 - 37.4
Other‡	551 - 770	22.0	18.6 - 25.4
Hispanic ethnicity			
No	1,797 - 2,286	22.1	19.5 - 24.7
Yes	55 - 199	23.0	11.5 - 34.6
Maternal education			
< 12 years	270 - 531	26.8	19.4 - 34.2
12 years	674 - 1,008	20.7	16.9 - 24.5
> 12 years	741 - 1,073	22.0	18.2 - 25.8
Marital status			
Married	1,154 - 1,567	19.5	16.6 - 22.3
Not married	643 - 973	28.9	23.9 - 33.9
Parity			
Primipara	614 - 948	21.6	17.4 - 25.9
Multipara	1,181 - 1,594	22.5	19.3 - 25.6
Prenatal care paid by			
Medicaid	836 - 1,197	25.7	21.6 - 29.8
Non-Medicaid	957 - 1,347	19.7	16.5 - 22.9
Source of prenatal care			
Private	700 - 1,057	22.0	17.8 - 26.1
Public	833 - 1,167	22.2	18.7 - 25.6

** Contraceptive use at the time of pregnancy is defined as women who were using a method of contraception when they got pregnant.

† Confidence interval

‡ Other includes Alaska Native, Asian, other non-white, and unknown.

Alaska *Pregnancy Risk Assessment Monitoring System, 1997*

AK

Unintended Pregnancy** Among Women Delivering a Live-Born Infant, by Selected Maternal Characteristics

Characteristic	Estimated Population	Percent	95% CI†
Maternal age			
< 20 years	590 - 941	78.9	70.3 - 87.6
20-29 years	1,598 - 2,061	39.6	35.3 - 43.9
≥ 30 years	753 - 1,098	29.9	25.0 - 34.8
Maternal race			
White	1,961 - 2,499	38.2	34.0 - 42.4
Black	97 - 287	55.2	37.0 - 73.4
Other‡	971 - 1,227	43.9	39.5 - 48.4
Hispanic ethnicity			
No	3,055 - 3,637	40.7	37.5 - 44.0
Yes	86 - 265	37.5	22.7 - 52.3
Maternal education			
< 12 years	592 - 943	60.2	51.7 - 68.7
12 years	1,380 - 1,819	45.7	40.7 - 50.7
> 12 years	938 - 1,311	29.5	25.1 - 33.9
Marital status			
Married	1,789 - 2,284	31.8	28.2 - 35.4
Not married	1,269 - 1,700	65.2	59.7 - 70.6
Parity			
Primipara	1,144 - 1,576	42.7	37.3 - 48.1
Multipara	1,912 - 2,409	39.3	35.4 - 43.2
Prenatal care paid by			
Medicaid	1,589 - 2,059	55.5	50.5 - 60.5
Non-Medicaid	1,464 - 1,929	31.4	27.5 - 35.3
Source of prenatal care			
Private	1,014 - 1,435	33.2	28.3 - 38.2
Public	1,562 - 2,010	45.3	40.8 - 49.8

** Unintended pregnancy is defined as a pregnancy for which the woman either wanted to be pregnant later or did not want to be pregnant at any time.

† Confidence interval

‡ Other includes Alaska Native, Asian, other non-white, and unknown.

Alaska *Pregnancy Risk Assessment Monitoring System, 1997*

Contraceptive Use at the Time of Pregnancy and Pregnancy Intention,** by Selected Maternal Characteristics

Characteristic	Unintended			Intended		
	Estimated Population	Pct	95% CI†	Estimated Population	Pct	95% CI†
Maternal age						
< 20 years	162 - 379	35.6	24.2 - 47.0	*	*	*
20-29 years	479 - 769	34.2	27.5 - 40.8	203 - 403	10.9	7.4 - 14.3
≥ 30 years	316 - 573	48.0	38.2 - 57.8	98 - 232	7.6	4.6 - 10.7
Maternal race						
White	745 - 1,132	42.1	35.1 - 49.1	165 - 366	7.4	4.6 - 10.1
Black	*	*	*	*	*	*
Other‡	245 - 398	29.5	23.4 - 35.5	149 - 283	15.4	11.0 - 19.9
Hispanic ethnicity						
No	1,080 - 1,497	38.6	33.5 - 43.8	336 - 567	9.3	7.0 - 11.6
Yes	*	*	*	0 - 64	10.4	0.0 - 21.4
Maternal education						
< 12 years	185 - 428	39.9	28.1 - 51.7	28 - 121	14.7	6.0 - 23.3
12 years	344 - 600	29.7	22.8 - 36.5	106 - 250	9.4	5.7 - 13.0
> 12 years	422 - 693	49.6	40.7 - 58.6	139 - 311	8.4	5.3 - 11.5
Marital status						
Married	650 - 991	40.3	33.6 - 47.0	259 - 477	8.4	6.0 - 10.9
Not married	381 - 657	35.2	27.6 - 42.7	63 - 166	14.4	8.3 - 20.6
Parity						
Primipara	361 - 634	36.9	28.7 - 45.1	92 - 249	9.4	5.2 - 13.5
Multipara	669 - 1,014	38.9	32.6 - 45.3	219 - 404	9.4	6.6 - 12.1
Prenatal care paid by						
Medicaid	496 - 801	35.6	28.8 - 42.4	143 - 291	14.8	10.0 - 19.6
Non-Medicaid	532 - 849	40.9	33.5 - 48.4	169 - 362	7.2	4.6 - 9.7
Source of prenatal care						
Private	426 - 724	47.0	37.7 - 56.3	82 - 235	6.4	3.4 - 9.5
Public	453 - 724	33.1	26.6 - 39.5	191 - 358	12.7	9.0 - 16.4

* Number of women sampled was less than 30.

** Pregnancy intention is defined as *intended* if the woman reported that she wanted to be pregnant then or sooner and as *unintended* if the woman either wanted to be pregnant later (mistimed) or did not want to be pregnant at any time (unwanted).

† Confidence interval

‡ Other includes Alaska Native, Asian, other non-white, and unknown.

Alaska *Pregnancy Risk Assessment Monitoring System, 1997*

AK

Reasons for Not Using Contraception at the Time of Pregnancy and Pregnancy Intention**

Characteristic	Intended			Unintended		
	Estimated Population	Pct	95% CI†	Estimated Population	Pct	95% CI†
Husband objected	231 - 449	7.3	5.0 - 9.5	213 - 427	14.7	10.1 - 19.3
Thought not fertile	175 - 357	5.7	3.8 - 7.6	483 - 777	28.9	23.0 - 34.7
Did not expect sex	11 - 93	1.1	0.2 - 2.0	202 - 424	14.4	9.6 - 19.1
Did not want to use	518 - 826	14.3	11.2 - 17.5	391 - 655	24.0	18.5 - 29.4
Other reasons‡	249 - 463	7.6	5.4 - 9.8	437 - 728	26.7	20.9 - 32.5
Had side effects	293 - 519	8.7	6.3 - 11.0	301 - 548	19.5	14.3 - 24.6
Wanted pregnancy	3,545 - 4,096	81.6	78.2 - 85.1	136 - 310	10.2	6.4 - 14.1

** Pregnancy intention is defined as *intended* if the woman reported that she wanted to be pregnant then or sooner and as *unintended* if the woman either wanted to be pregnant later (mistimed) or did not want to be pregnant at any time (unwanted).

† Confidence interval

"Other" could be classified most frequently into existing categories ("wanted pregnancy" or "thought not fertile") or into new reasons (lapse in use or method change, fear of method side effects, or financial barriers).

Reasons for Not Using Contraception at the Time of Pregnancy and Pregnancy Intention

