

# Running the Numbers

*A Periodic Feature to Inform North Carolina Healthcare Professionals  
About Current Topics in Health Statistics*

From the State Center for Health Statistics, North Carolina Department of Health and Human Services  
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## Unintended Pregnancies in North Carolina

More than half of all pregnancies in North Carolina and the United States are unintended. Unintended pregnancies are those that are unwanted (now or at any time in the future) or occur before a woman wanted to become pregnant. In North Carolina, an estimated 45% of the more than 115,000 live births each year were unintended at the time of conception. In addition, there are approximately 27,000 induced abortions each year in North Carolina, and presumably the vast majority of those result from unintended pregnancies.

Among live births, women with unintended pregnancies are less likely to seek early prenatal care, more likely to smoke during pregnancy, less likely to breastfeed, and more likely to have a low-weight birth. Women with unintended pregnancies are likely to also have other risk factors (such as low-socioeconomic status), but the evidence suggests that a well-timed pregnancy in itself leads to better health behaviors and improved infant health.

The North Carolina Pregnancy Risk Assessment Monitoring System (PRAMS) is a mail and telephone survey of a random sample of North Carolina women who have recently had a live birth. It is supported by the Centers for Disease Control and Prevention (CDC) and is currently conducted in more than 30 states. In North Carolina, approximately 1,800 women are interviewed each year. Pregnancy intendedness is captured from the PRAMS survey question that asks mothers to indicate how they felt about becoming pregnant just prior to conception. Those who answered that they wanted to be pregnant "sooner" or "then" were categorized as intended; those who answered "later" or "not then or at any time in the future" were categorized as unintended.

Forty-five percent of 1997-2000 PRAMS survey respondents indicated that their pregnancy was unintended, with 34% saying that they wanted to be pregnant later and another 11% saying that they did not want to be pregnant then or at any time in the future. The following categories of women had a particularly high percentage of live births that were unintended: age less than 20 years (76%), less than a high school education (61%), household income below \$14,000 (66%), and unmarried (73%). Having a live birth that was unintended was strongly associated with never taking a multivitamin (folic acid) before pregnancy, late entry into prenatal care, smoking during pregnancy, domestic violence, postpartum depression, and not breastfeeding.

A planned pregnancy gives women the opportunity to prepare for a healthy pregnancy. Healthy behaviors before and during pregnancy reduce the risk of a low-weight birth. Though the risk of unintended pregnancy is higher among younger women, more than 75% of all unintended pregnancies are to women ages 20 and older. Therefore, efforts to reduce unintended pregnancies must include all age groups. Access to appropriate contraceptive services is certainly very important. Many family planning programs also provide a broad range of preventive health services such as patient education and counseling; breast and pelvic examinations; cervical cancer, STD, and HIV screenings; pregnancy diagnosis and counseling; and referral to appropriate medical and social services.<sup>1</sup> This emphasis on pre-conceptional health means that women who do choose to become pregnant are better prepared physically and mentally. Federal funds from the Title X program and Medicaid support family planning services for low-income individuals. These publicly-funded services are available on a voluntary and confidential basis.

The full report from which these results were taken was published by the State Center for Health Statistics in November 2002 (SCHS Studies No. 136) and can be accessed at <http://www.schs.state.nc.us/SCHS/pubs/title.cfm?year=2002>

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1 Buescher PA. Healthier mothers and children through women's preventive health services. *NC Med J* 1990;51:262-264.

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