It Matters How We Ask: Wanting, Planning, Trying, Hoping – Pregnancy and Childbearing

Selected Results from the Kentucky Family Planning Survey



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Overview of the Survey





Study Questions

What happens when we ask many "intendedness" questions at the same time?

Do responses by Title X clients differ from trends seen in surveillance surveys?

How do responses vary by dimensions of intention?

Will patterns emerge that can inform clinic practice?



Constructing the Kentucky Survey

- Questions from many sources and original questions
- Purpose / population of surveillance surveys differ:

NSFG: household composition and fertility patterns

BRFSS: health risk factors at individual level

PRAMS: risk factors and protective behaviors, new mothers

LMUP: pregnancy intendedness asked of pregnant women

Retrospective and prospective questions

PRAMS, BRFSS, most NSFG: retrospective

NSFG: childbearing prospective, others retrospective

Kentucky survey: prospective



Kentucky Family Planning Clinic Survey

- Collaboration between KY DPH, KY BRFSS, RNDMU
- Fielded in Lexington Fayette County and Louisville
- Clinics in both sites included:
 - Health Department FP clinics
 - Planned Parenthood
 - Community Health Centers
- Surveyed both PT and ECP clients
- \$10 gift card offered as thank you
- 238 surveys submitted
 - 228 complete enough for analysis



The London Measure of Unintended Pregnancy





London Measure of Unintended Pregnancy

- Six questions
- Asked of pregnant women
- Five questions offer three responses that align with planning, not planning and ambivalence
- Sixth question asks about health behavior changes before pregnancy: 2+ changes ~ planning; 1 change ~ ambivalence; no changes ~ not planning
- Scores may range from 0 to 12
- Scores often grouped: planning / ambivalent / not planning



Questions about Desires and Plans around Pregnancy





Survey Questions that Ask about Motivation and Feelings around Pregnancy and Childbearing

Anchor question: Are you **trying** to get pregnant?

Dimensions of Feelings and Motivation:

- ❖I hope pregnancy test result is: positive / negative / I am undecided
- ❖If pregnant, this is right time / OK time / wrong time
- ❖I would say I'm planning / not planning to be pregnant / unsure
- ❖If pregnant, I want to have a baby now / have mixed feelings about having a baby / don't want to have a baby now
- ❖If test confirms pregnancy, I will feel upset / pleased / unsure



What did we hope to learn using this constellation of questions?

- Did this clinic population differ from others surveyed?
- How did consistency of responses vary across subpopulations?
- Was there a question that predicted responses about feelings and motivation?
- Can responses help to identify women who need

Referrals to social services,

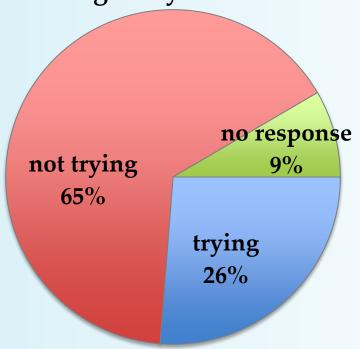
Contraceptive method counseling,

Reproductive life planning?



Are You Trying to Become Pregnant?

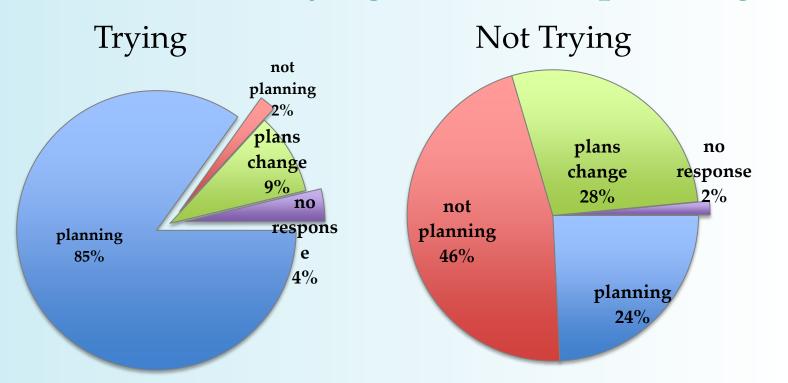
Pregnancy Test Clients



- PT clients: 53 yes / 132 no / 17 no response (shown)
- 23 ECP patients: all "not trying" (not shown)



For PT clients, is trying the same as planning?



- Is trying active and planning permissive?
- Counseling can help tease what terms mean and strength of motivation to become or avoid pregnancy.



What Do Women Trying to Be Pregnant Say?

	Trying to be Pregnant	Not Trying to be Pregnant
Did nothing at last sex to prevent pregnancy	96%	64%
Hope PT is positive	98%	44%
Good time for pregnancy	85%	16%
Planning to be pregnant	85%	24%
If pregnant, want baby now	98%	49%
If pregnant, will be pleased	98%	52%

What Do Women Not Trying to Be Pregnant Say?

Trying to be Pregnant	Not Trying to be Pregnant
96%	64%
98%	44%
85%	16%
85%	24%
98%	49%
98%	52%
	Pregnant 96% 98% 85% 85% 98%

How Much Uncertainty in Each Group?

	PT- Trying	PT – Not Trying	ECP
Undecided about hoped- for PT result	2%	33%	4%
Neither a good or bad time for pregnancy	15%	65%	35%
Plans about being pregnant keep changing	9%	28%	9%
If pregnant, have mixed feelings about baby now	2%	40%	57%
Unsure how I'll feel if test is positive	2%	30%	39%

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Contraception at Last Sex and Intentions





What Does Contraceptive Use at Last Sex Tell Us About Intentions and Feelings?

- Trying to be pregnant and no BC at last sex (n=52)
 - 98.1% hope test is positive, and if pregnant, want the child now and will feel pleased by test result
 - 88.2% are planning to be pregnant
 - 84.6% say this is the right time for a pregnancy
- Trying to be pregnant and used BC at last sex (n=3)
 - All three women hope test is positive, say this is the right time, want a child now and will be pleased if test result is positive
 - Two of three are planning to be pregnant; 1 NR
 - May be that last sex was after pregnancy was suspected or known



Not Trying to Be Pregnant, Using BC or Not

	Used BC	No BC
If test confirms, I will feel pleased	51.5% ←	⇒ 53.2%
If really pregnant, want a child now	48.9%	⇒ 53.3%
Hope pregnancy test result is positive	43.9%	→ 46.7%
I would say I am planning to be pregnant	24.6%	→ 26.4%
If pregnant, this is the right time	15.9%	19.6%

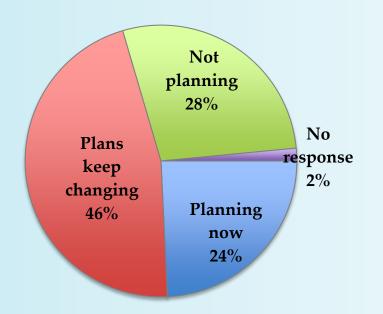
- The *similarity* in the rate of affirmative responses is striking.
- What does this similarity suggest about degree of motivation?
 - Was this the right question? Perhaps, BC use over last month?

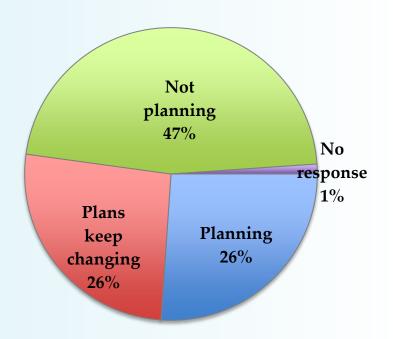


About my plans, I would say...

PT, Not Tryng, Used BC

PT, Not Trying, Did Not Use BC





- Rates of "planning" the same despite BC use / non-use but big differences in "not planning" and "plans changing"
- Reasons for not using BC when not planning to be pregnant related to physiology/fertility knowledge, access/cost barriers and inconsistent use

Do BC Methods Correlate with Planning Status?

Women 'Not Trying'	BC at last sex				No BC at last sex
	Hormonal Patch	Pill	Condom	Withdrawal	
Plans about being pregnant keep changing (n=49)	0	7	7	2	33
Not planning to be pregnant (n=90)	1	8	28	6	47

At last sex:

- ²/₃ of women whose plans keep changing used no BC
- ½ of women who were not planning to be pregnant used no BC
- Single most effective among methods named by respondent shown
- Among "Plans Keep Changing" almost half used (but small n's)
- Among "Not Planning" only 1 in 5 used a hormonal method



Consistency of Responses to Pregnancy Motivation Questions





How Consistent Were Responses to Motivation Questions?

Among EC and Not Trying to Be Pregnant, expect:

Hope pregnancy test is negative

Wrong time to be pregnant

Not planning to be pregnant

If pregnant, don't want a child now

If pregnant, will be upset

Among Trying to Be Pregnant, expect:

Hope pregnancy test is positive

Right time to be pregnant

Planning to be pregnant

If pregnant, do want a child now

If pregnant, will be pleased



Phrasing of Questions for Pregnancy Motivation

- I hope pregnancy test result is positive / negative / undecided
- If I am pregnant, this is the right time / OK but not quite right time / the wrong time
- I would say: I am planning to be pregnant / my plans keep changing / I am not planning to be pregnant
- If I am pregnant, I want to have a baby now / have mixed feelings about having a baby now / don't want to have a baby now
- If test confirms I am pregnant now, I will feel upset / pleased / unsure



How Consistent Were Responses Across Five Motivation Questions?

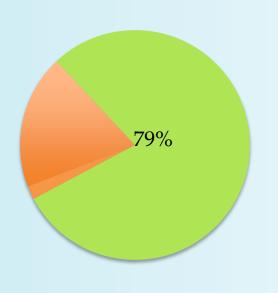
- Among Women 'Trying to be Pregnant'
- Among Women 'Not Trying to be Pregnant'
- Among Women Who 'Talked with Provider'
- Among Women 'Living With Partner'

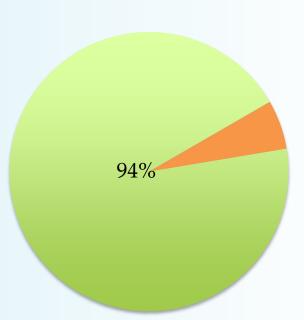


Consistency of Answers Among PT Clients 'Trying to Be Pregnant'

Respondents

Items



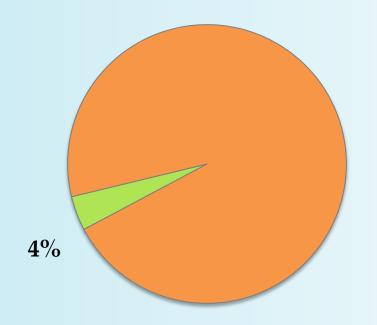


- Women responding consistent with stated intention: 80%
- Items consistent with pregnancy intention: 94% so even among the 20% who were not consistent, most of their responses were congruent with stated intention.

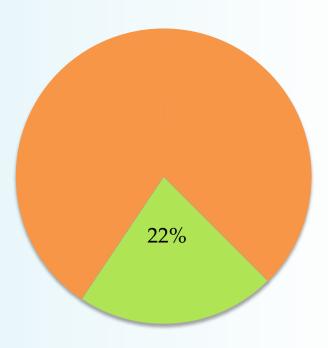


Consistency Among PT Clients 'Not Trying' to be Pregnant





Items

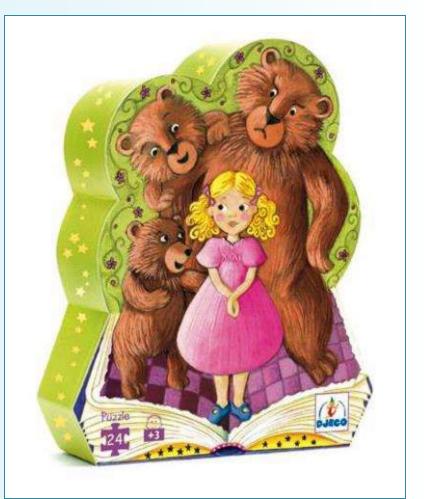


- Only 4% of respondents gave consistent responses to questions
- Among all items, only 1/5 were congruent with stated intention
- Opportunity to better understand importance of factors for clients



What We're Calling 'Ambivalent' Responses in Following Tables

- "Not too hot, not too cold" – the middle of the options for response
- Not all "middle" responses bear the same weight of uncertainty
- Respondent may not intend to imply indecision or ambivalence



PT Clients Not Trying to be Pregnant

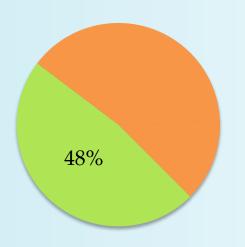
	Positive	Ambivalent	Negative
Hope pregnancy test is	Positive 58 (45%)	Undecided 43 (33%)	Negative 29 (22%)
If pregnant, timing is	Good 21 (17%)	OK but not right 86 (66%)	Wrong 23 (18%)
I would say I am	Planning 32 (25%)	Plans keep changing 37 (29%)	Not planning 59 (46%)
If pregnant, I a baby now	Want 64 (50%)	Have mixed feelings about 52 (40%)	Don't want 13 (10%)
If I am pregnant, I will feel	Pleased 68 (52%)	Unsure 44 (34%)	Upset 18 (14%)

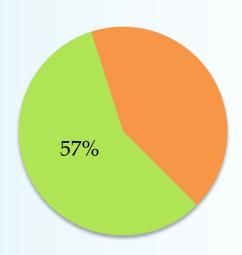


What do these clients need? Fertility knowledge? RLP? Better method?

Consistency of Answers Among EC Clients

Respondents Items





- Almost half EC clients gave consistent responses. These seem sure about their plans but may benefit from a more effective method.
- Almost as many responses by EC clients were positive or uncertain as were negative. Such women need RLP as much as an effective method.



Women Who Came for EC Prescription

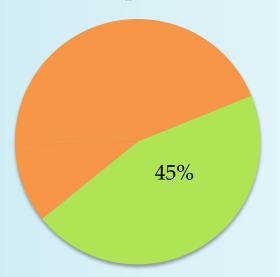
	Positive	Ambivalent	Negative
Hope pregnancy test is	Positive 0	Undecided 1 (4%)	Negative 22 (96%)
If pregnant, timing is	Good 0	OK but not right 8 (35%)	Wrong 15 (65%)
I would say I am	Planning 0	Plans keep changing 2 (9%)	Not planning 21 (91%)
If pregnant, I a baby now	Want 3 (13%)	Have mixed feelings about 13 (57%)	Don't want 7 (30%)
If I am pregnant, I will feel	Pleased 1 (4%)	Unsure 9 (39%)	Upset 13 (57%)



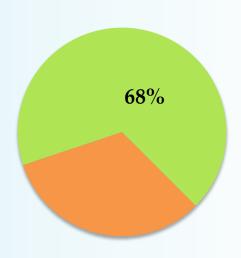
What do ambivalent EC clients need? Social services? RLP?

Consistency Among Women Living With Partner





Items



- Consistent responses among 45% of women.
- 68% of items congruent with stated intention.
- Correlates with NSFG: > intentionality among married women

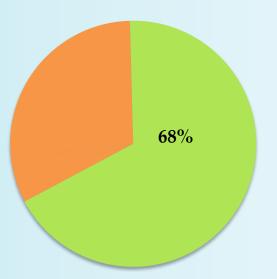


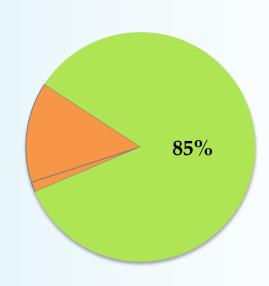
But \uparrow proportion of babies born to unmarried mothers. Who / what supports 'unpartnered' women in achieving adequate social support?

Consistency Among Women Who Agreed with Partner for Her to Become Pregnant

Respondents

Items





- Partner agreement has strongest association with positive motivation
- Implication for health education / clinic visits: inclusion of partners in RLP.
- If partners have this great an effect on pregnancy motivation measures, what roles can we assist them in playing regarding contraceptive method and birth timing / spacing?

Pregnancy Motivation Among Women By Desired Time to Childbearing





Characteristics of Women Stating Desire to Have a Child within Two Years

- N=109, average age 25 years
- PT 99% ECP 1%
- Prior clinic visit: Yes 39% No 61%
- Planning to be pregnant: 61%
- Talked with provider about PCH / RLP 72%
- Any intimate partner violence: 13%
- Pregnancy history
 - Previous pregnancy: 75%; range 1 5+ pregnancies
 - Previous childbearing: 39%; range 1-4 children
 - Greater number of pregnancies than children: 30%



Characteristics of Women Stating Desire for No (or No More) Children

- N=13, average age 25 years
- PT 39% ECP 62%
- Prior clinic visit: Yes 46% No 54%
- Used BC at last sex: 69%
 Most effective method used: pill 1/3, condom 2/3
- Talked with provider about PCH / RLP 62%
- Any intimate partner violence: 31%
- Pregnancy history
 - Previous pregnancy: 54%; range 1 4 pregnancies
 - Previous childbearing: 39%; range 1-2 children
 - Greater number of pregnancies than children: 86%



Conclusions





What Have We Learned?

- Very low use of effective contraceptive methods
- Trying and planning are synonymous only for women planning to be pregnant – need to clarify intent with women who say 'not trying' or 'not planning'
- Many EC and PT clients not trying for pregnancy report thoughts and feelings congruent with planning.
- Women who reached agreement with partner to be pregnant have highly consistent responses affirming planning, right time, wanting a child now, feeling pleased if pregnant.
- Asking a variety of questions about trying, planning and wanting enriches understanding of how dimensions of intention play out in individual lives.
- Such questions can triage women into categories of need for simple solution, intensive education and counseling, and reproductive life plans.



Questions?



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This Afternoon: Unraveling Pregnancy Motivation



