



# Serving Those With The Highest Rates of Unintended Pregnancy in Iowa

Brief No. 5

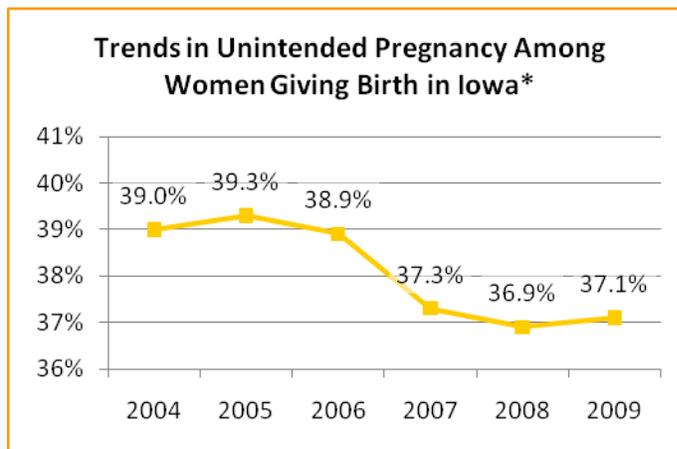
April, 2011

**In 2009, nearly 40% of live births in Iowa were the result of unintended pregnancies.**

## Unintended Pregnancy in Iowa

Between 2004 and 2009, nearly 40% of live births in Iowa were the result of unintended pregnancies. If data were available for all pregnancies—not only those that end in birth, but also those that end in abortions or miscarriages—it is estimated that the percentage of unintended pregnancies would be much higher. Trend analyses suggest that after a three-year decline, the percentage of

unintended pregnancies among women giving birth may now be increasing. The rate of births resulting from unintended pregnancy declined between 2005 and 2008, with the biggest decrease occurring between 2006 and 2007. Between 2008 and 2009 there was a slight increase in the proportion of live births that were a result of an unintended pregnancy.



These data are from Barriers to Prenatal Care and have been supplied by Mary Losch, Assistant Director of the Center for Social and Behavioral Research at the University of Northern Iowa, and the Iowa Department of Public Health.

\*Data have been weighted to match the demographic characteristics of all residents who gave birth in Iowa based on data from birth certificates for each year shown.

### Inside this issue:

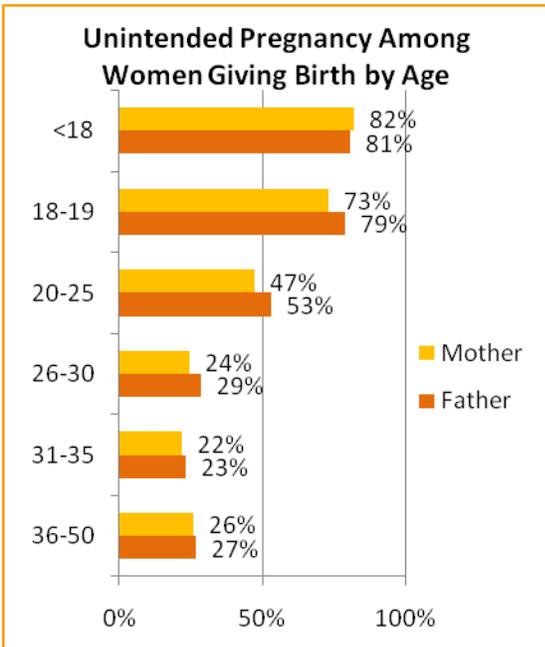
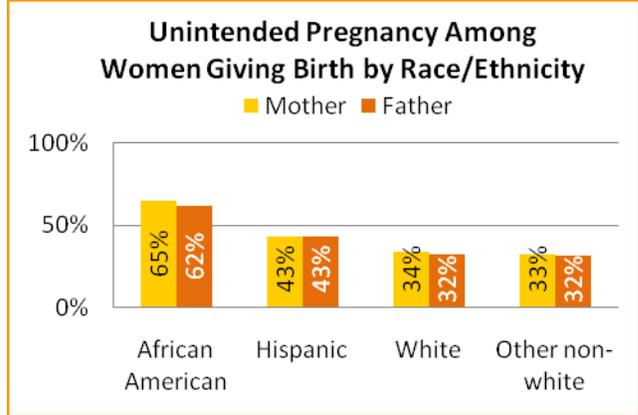
- Unintended Pregnancy in Iowa 1
- Who Has Unintended Pregnancies? 1
- Disparities in the Rate of Unintended Pregnancy 2
- Creating a Profile 3
- Populations Reached by the Iowa Initiative 3
- Conclusions 4
- References 4

## Who Has Unintended Pregnancies?

As part of the statewide initiative to reduce unintended pregnancies in Iowa, numerous programs are testing various strategies to curtail this very high rate. The success of these programs will be determined, in part, by whether they reach the groups who have the highest rates of unplanned pregnancies and births. This report examines which subgroups in Iowa have higher than average rates so that programs might better tailor their efforts for these special groups.

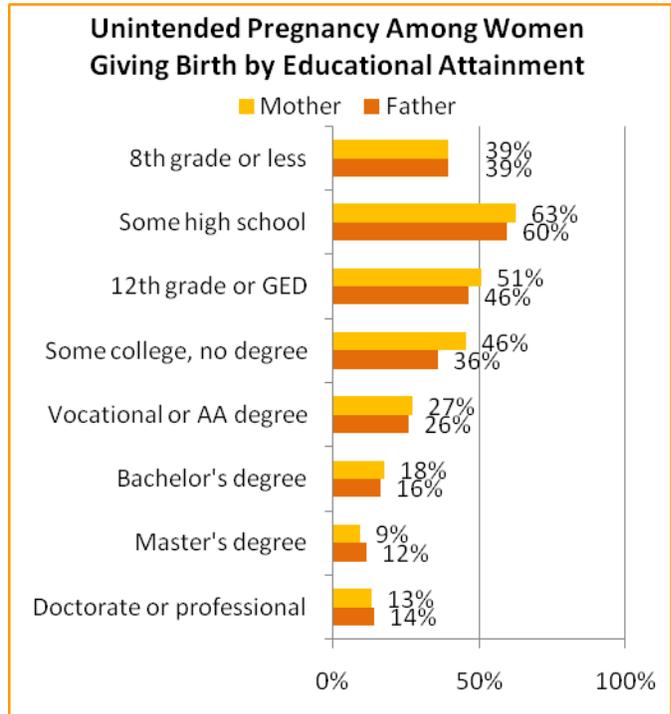
## Disparities in the Rate of Unintended Pregnancy Among Women Giving Birth in Iowa

Rates of unintended pregnancy vary by **race and ethnicity**. These rates are highest among African Americans (62%-65%) followed by Hispanics (43%). Rates are lowest among Whites (32%-34%) and other non-White groups (32%-33%). When the mother is Hispanic and the father is African American, this rate climbs to 77%.

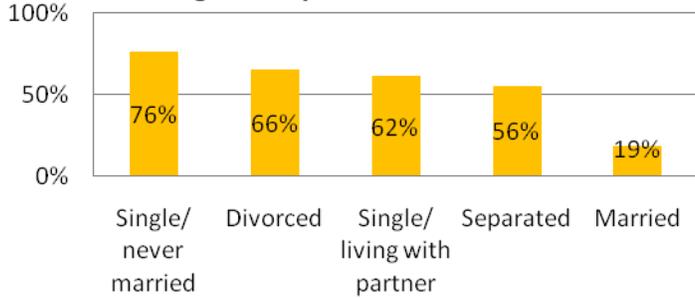


Rates also vary by **ages** of the parents. Rates are highest when the mother and/or father are 19 and under. This trend appears across demographic groups (race/ethnicity, marital status, education or family income). Parents aged 20-25 also have a high proportion of births resulting from unintended pregnancy.

Rates vary by **educational attainment** and are highest when the mother and/or father had some high school education but have not completed high school. They are also above average for mothers and fathers with a 12th grade education or GED and for mothers with some college education but no degree.



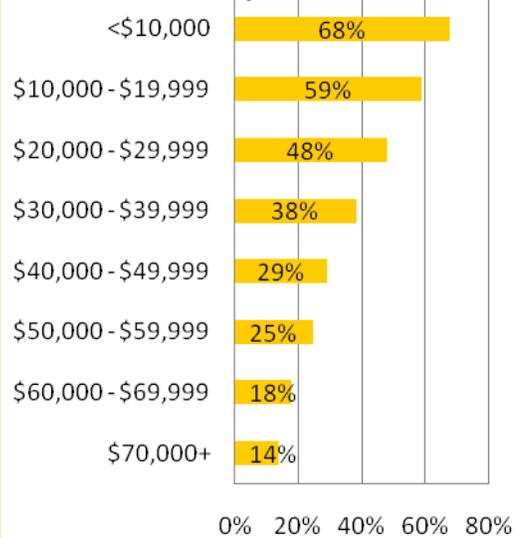
### Unintended Pregnancy Among Women Giving Birth by Mother's Marital Status



Rates of unintended pregnancy among women giving birth also vary by **marital status** and are highest among non-married women. Rates are above average for all groups of non-married women and are highest among those who have never been married (76%). Rates for women who are single and never married, divorced, or separated are above average regardless of any other demographic.

The proportion of unintended pregnancies among women giving birth increases as **family income** decreases. These rates are above average among those who make \$39,999 or less and highest among those who make less than \$10,000 (68%). In contrast, only 14% of live births among women with family income at \$70,000 or more are the result of unintended pregnancies.

### Unintended Pregnancy Among Women Who Gave Birth by Family Income



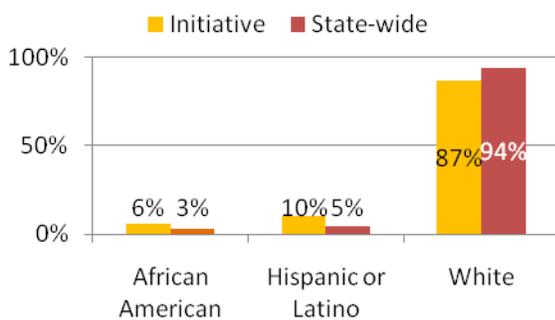
## Creating a Profile

The factors associated with an increased risk of unintended pregnancy are related to one another and often co-occur. Thus, among young African American unmarried girls with little education and low income (under \$30,000), 92% are the result of unintended pregnancies.

## Populations Reached by the Iowa Initiative

The Iowa Initiative to Reduce Unintended Pregnancies includes a variety of research and program efforts<sup>i</sup>. All of these programs focus on women ages 18-30. However, some programs place a heavier focus on the highest risk groups.

### Races/Ethnicities of Clients Served by Family Planning Clinics



For example, many clinics in Iowa have been working to reduce unintended pregnancy by promoting the use of long-acting reversible birth control methods. While the overall population in Iowa is 4.5% Hispanic or Latino<sup>ii</sup>, the clients at these clinics are 10% Hispanic or Latino. Similarly African Americans are 2.8% of the population in Iowa<sup>ii</sup> but 5.7% of the clients at these clinics. Overall these clinics serve higher percentages of Hispanics/Latinos and African Americans than are found in the average Iowa population, but proportionally fewer whites than are in the state.



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For additional information,  
please see the following briefs:  
**Evaluating the Iowa  
Initiative to Reduce  
Unintended Pregnancies**

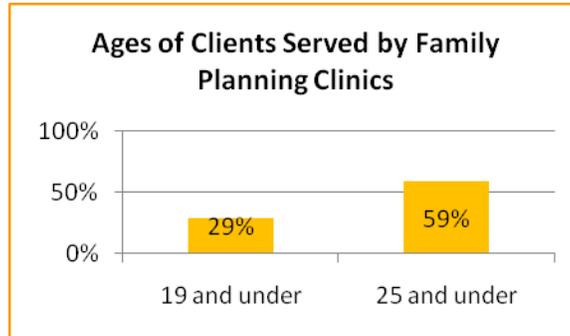
#### **Unintended Pregnancy: The Iowa Experience in National Context**

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#### **Iowa Service Providers**

Allen Women's Health  
Central Iowa Family Planning  
Edgerton Women's Health  
Center  
Emma Goldman Clinic  
HCCMS Family Planning  
Hillcrest Family Services  
New Opportunities  
North Iowa Community  
Action Organization  
Northeast Iowa Community  
Action  
Planned Parenthood of the  
Heartland  
Planned Parenthood of  
Southeast Iowa  
Southern Iowa Family  
Planning Clinic  
St. Luke's Family Health  
Center  
Trinity Muscatine Public  
Health  
Visiting Nurse Services  
Women's Health Services

These clinics also served disproportionate percentages of the younger age groups who are most at risk of unintended pregnancy. With a wide range of ages from 9 to 79, the average patient age was 26 with a median age of 23. The majority (59%) of these clients were 25 and under with over one-quarter (29%) 19 and under. The Initiative's investment in these clinics thus seems to reach those most at risk of unintended pregnancy.



The Iowa Initiative has also included the development, implementation, and evaluation of other innovative strategies to reduce unintended pregnancy among these high risk groups. For example, The Initiative has produced two radio serial dramas, one aimed at African Americans and one aimed at Hispanics/Latinos, with the goal of increasing knowledge and changing attitudes and beliefs about family planning. These programs include 32 episodes each, all of which will be available online. *Queen Street*, designed for African Americans, and *La Noche Te Da Sorpresas*, designed for Hispanics/Latinos, started broadcasting over the radio in October, 2009. Radio programs may be an ideal way to reach these populations as these groups are frequent users of radio throughout the day.

The Initiative is also implementing a program that is taking place in beauty salons across Iowa with the goals of increasing knowledge, influencing behavior, and ultimately reducing unintended pregnancies. While this program does not specifically focus on one race or ethnicity, target areas include the county with the highest population of African Americans and a county with a high population of Latinas in Iowa. This program should also be applicable to women with lower education levels as all materials have been written at a 6<sup>th</sup>-8<sup>th</sup> grade reading level. The "Speak UP Project" encourages stylists to discuss reproductive health with their clients. This is supported through trainings for stylists and the use of mirror clings, brochures, and condoms.

While The Initiative has different forms of social marketing, one project is designed specifically for college students. This campaign consists of using media including social networking sites, such as Facebook, public stunts, event sponsorship, campus radio promotions, promotional items, and print media such as coasters and koozies, along with newspapers and posters.

## Conclusions

Almost 40% of all births in Iowa are from unintended pregnancies, costing the state millions in public expenditures<sup>iii</sup>. The prevention of these pregnancies has the potential of reducing the myriad of negative social outcomes associated with unintended pregnancies and is likely to result in significant cost-savings. Vast disparities in the rates of unintended pregnancy exist. Unmarried, low-income, non-white women with less education and who are 25 and under are more likely to experience an unintended pregnancy than other women. The Iowa Initiative includes many program efforts to serve these high risk women, particularly those with multiple risk factors.

### References:

- <sup>i</sup> Information about the Iowa Initiative to Reduce Unintended Pregnancies came from:  
Losch, M. The Iowa Initiative to Reduce Unintended Pregnancies: Intervention Proposals. October 1, 2007.  
Losch, M. The Iowa Initiative to Reduce Unintended Pregnancies: Annual Report for 2009. March 11, 2010 (Revision).
- <sup>ii</sup> US Census Bureau. Iowa QuickFacts. Retrieved from: <http://quickfacts.census.gov/gfd/states/19000.html>.
- <sup>iii</sup> Udeh, B., Losch, M. and Spies, E. The Cost of Unintended Pregnancy in Iowa: A Benefit-Cost Analysis of Public Funded Family Planning Services. Retrieved from: [http://ir.uiowa.edu/ppc\\_health/48/](http://ir.uiowa.edu/ppc_health/48/).