

# Unintended Pregnancy Fact Sheet Wyoming, 2007-2010

Wyoming Department of Health

2012

## Unintended Pregnancy

### Fast Facts:

Between 2007 and 2010, 41.1% of Wyoming births were the result of an unintended pregnancy.

Unintended pregnancy costs US taxpayer \$9.6-12.6 billion per year.<sup>2</sup>

Many negative health behaviors are associated with unintended pregnancy including: delayed prenatal care, smoking during pregnancy, not breastfeeding, and postpartum depression.<sup>3</sup>

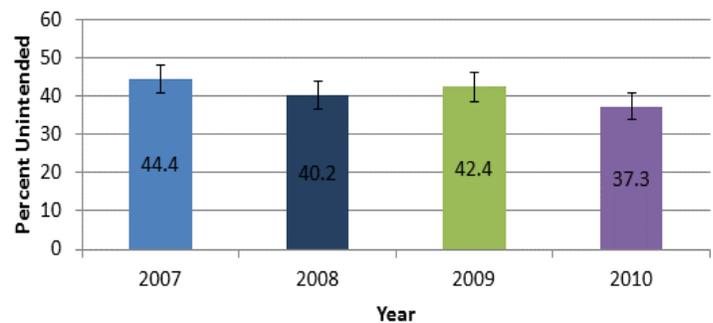
An unintended pregnancy is defined by the Centers for Disease Control and Prevention (CDC) as a mistimed, unplanned, or unwanted pregnancy at the time of conception.<sup>1</sup> The Brookings Institute estimates that unintended pregnancy costs US tax payers between \$9.6 and 12.6 billion per year in health care costs.<sup>2</sup> A study of unintended pregnancy in the United States found 49% of all pregnancies in 2006 were unintended, 29% were mistimed and 19% unwanted. This included pregnancies that ended in induced abortion or miscarriage. Among unintended pregnancies 43% ended in abortion.<sup>3</sup>

### Risk Factors<sup>3</sup>

Several risk factors for unintended pregnancy have been identified on the national level. Women are significantly more likely to have an unintended pregnancy if they are:

- Young
- African American
- Unmarried
- Nulliparous or
- Have 12 or less years of education.

Figure 1: Proportion of births that were unintended among Wyoming women, WY PRAMS 2007-2010



Source: Wyoming PRAMS

### Unintended Pregnancy in Wyoming

Between 2007 and 2010, 41.1% of live births in Wyoming were unintended. (This figure does not include women who had a miscarriage or chose to have an abortion.) No significant difference was observed between 2007 and 2010 (Figure 1).

Similar to national data, a higher percent of pregnancies were unintended among Wyoming women who were:

- Enrolled in WIC during their pregnancy
- Under 20 years old
- On Medicaid
- Unmarried
- Had 12 or less years of education, or
- From a minority racial group.

### Recommendations<sup>1</sup>

CDC recommends women of reproductive age prevent unintended pregnancy by:

- Discussing pregnancy with their provider
- Using effective contraception correctly.

Unplanned pregnancies are associated with increased health risks for both the mom and baby (see page 2). To mitigate some of these negative outcomes, the CDC recommends all women of reproductive age engage in pre-conception health including:

- Taking folic acid daily
- Maintaining a healthy diet and weight
- Being physically active
- Quitting tobacco use
- Not using alcohol and drugs.



Wyoming Department  
of Health

Commit to your health.

# Health Behaviors and Unintended Pregnancy

Unintended pregnancy is associated with a variety of negative health behaviors and outcomes. Compared with women who intended to become pregnant, women who have an unintended pregnancy are more likely to:

- Delay prenatal care
- Smoke during pregnancy
- Choose not to breastfeed
- Not take folic acid or multivitamin prior to pregnancy
- Report postpartum depression.<sup>4</sup>

## Wyoming Data

Similar associations between unintended pregnancy and health behaviors were observed in Wyoming (Figure 2). A lower proportion of women who have unintended pregnancies use a multivitamin prior to pregnancy (31.2 v. 55.1%), initiate prenatal care in the first trimester (73.0 v. 84.9%),

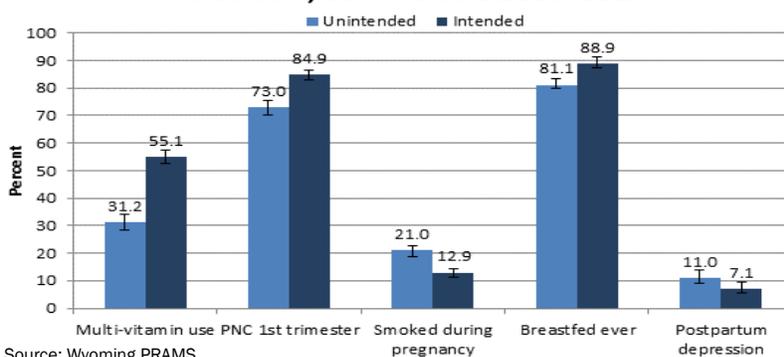
and choose to breastfeed (81.1 v. 88.9%) compared to women who had an intended pregnancy. Among those with an unintended pregnancy a higher proportion smoked during pregnancy (21.0 v. 12.9%) and reported postpartum depression symptoms (11.0 v. 7.1%) compared to those with an intended pregnancy in Wyoming.

## Long-term Impacts

The health behaviors associated

with unintended pregnancy can have lasting health effects on both the mother and the infant. Failure to take a multivitamin or folic acid supplement, smoking during pregnancy and failure to breastfeed are associated with birth defects,<sup>5</sup> delivery of low birth weight infants,<sup>6</sup> and childhood obesity,<sup>7</sup> respectfully. These long term outcomes may be addressed through prevention of unintended pregnancies.

**Figure 2: Health Behaviors by Pregnancy Intention, WY PRAMS 2007-2010**



## What is PRAMS?

The Wyoming Pregnancy Risk Assessment Monitoring System (PRAMS) is a surveillance project of the Wyoming Department of Health and the Centers for Disease Control and Prevention (CDC). Wyoming PRAMS collects Wyoming-specific, population-based data on maternal attitudes and experiences before, during and shortly after pregnancy. The goal of the PRAMS project is to improve the health of mothers and infants by reducing adverse outcomes such as low birth weight, infant mortality and morbidity, and maternal morbidity. To learn more about Wyoming PRAMS, visit our website: <http://www.health.wyo.gov/familyhealth/mchepi/prams.html>

### References:

1. Centers for Disease Control and Prevention, Unintended Pregnancy Prevention, Accessed: Sept 28, 2012. <http://www.cdc.gov/reproductivehealth/unintendedpregnancy/>
2. Thomas, A and Monea E. The High Costs of Unintended Pregnancy. *Center on Children and Families at Brookings*. July 2011: CCF Brief 45.
3. Finer LB and Zolna MR. Unintended pregnancy in the United States: incidence and disparities, 2006. *Contraception*, Nov 2011 84(5):478-485.
4. Cheng D, Schwarz EB, Douglas E, Horon I. Unintended pregnancy and associated maternal preconception, prenatal and postpartum behaviors. *Contraception*. 2009; 79(3):194-8.
5. CDC. Recommendations for the use of folic acid to reduce the number of cases of spina bifida and other neural tube defects. *MMWR* 1992;41.
6. CDC. The health consequences of smoking: a report of the Surgeon General. Atlanta, GA: US Department of Health and Human Services, CDC; 2004.
7. Koletzko B, von KR, Closa R, Escribano J, Scaglioni S, Giovannini M, Beyer J, Demmelmair H, Anton B, Gruszfeld D, Dobrzanska A, Sengier A, Langhendries JP, Rolland Cachera MF, Grote V. Can infant feeding choices modulate later obesity risk? *Am J Clin Nutr*. 2009; 89(5): 1502-1508.



Public Health Division  
PRAMS  
Wyoming Department of  
Health  
6101 Yellowstone Road,  
Suite 420  
Cheyenne, WY 82002  
Phone: (307) 777-5769  
Fax: (307) 777-8687  
E-mail: [PRAMS@wyo.gov](mailto:PRAMS@wyo.gov)

**Commit to your health.**