To the magnificent results of two very intended pregnancies –
and to the one who made it all possible

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ABSTRACT

The promotion of planned pregnancies has long been a goal of women's reproductive health researchers and advocates within the United States. However, almost half (49%) of all pregnancies in the U.S. are unintended (Finer and Henshaw, 2006). The goal of this research is to increase understanding of intentionality, from expanding upon established antecedents of pregnancy intention to examining the effect of pregnancy intention on the utilization and evaluation of reproductive health services.

The first study examined the relationship between pregnancy intention and satisfaction with prenatal and hospital-based labor and delivery care. Results revealed that women with unwanted pregnancies were more likely to report lower satisfaction with their prenatal care provider, their provider's communication skills, and with their perceived sense of control during labor and delivery.

The second study examined the potential for pregnancy history as an antecedent of pregnancy intention in a nationally representative sample of women ages 15-44. Separate analyses were further conducted to examine if these hypothesized relationships changed as women aged. Pregnancy history, in particular a history of prior unwanted pregnancy, was found to be significantly associated with an increased likelihood of subsequent unintended pregnancies. Conversely, women with a history of younger age at first pregnancy and/or pregnancy loss were less likely to report their pregnancies as unintended. When analyzed separately by age group, the relationship between pregnancy history and pregnancy intention were generally strongest for women ages 30-44.

The final study tested the relationship between pregnancy intention, pregnancy history, and the utilization of pregnancy prevention services, specifically utilization of

contraception during the interval between pregnancies and the election of post-pregnancy tubal sterilization. Pregnancy history was found to be significantly associated with the contraceptive use. Women who first became pregnant before age 30 were more likely to utilize contraception in the pregnancy interval, while a history of both unwanted pregnancy and pregnancy loss were negatively associated with this outcome.

The relationship between pregnancy history, pregnancy intention, and the evaluation and utilization of reproductive health services, further complicated by influence of age, supports the view of intentionality as a complex and potentially influential construct.