

The Impact of an Unplanned Child: A Qualitative Study of the Consequences of Unintended Childbearing for Mothers and Fathers

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The premise that unintended childbearing has significant negative effects—on the behavior of mothers and on the health of infants—strongly influences public health policy and much of current research on reproductive behaviors. Yet the evidence base presents mixed findings, and some studies suggest that background characteristics of mothers may account for the relationship between pregnancy intentions and measured outcomes, such as maternal behaviors and infant health (Gipson et al. 2008; Logan et al. 2007). In a related analysis, we used nationally-representative survey data from the US National Survey of Family Growth, to reexamine these relationships using propensity analysis methods and found that mistimed and unwanted births were still less likely to be recognized early in pregnancy than intended ones (Kost and Lindberg 2014). In addition, fewer unwanted births received early prenatal care or were breastfed; they were also more likely to be low birthweight than intended births. Still, our quantitative analyses were limited in measures of the potential impact of unintended childbearing, as are virtually all existing studies on this topic. In addition, the quantitative findings do not shed much light on the mechanisms through which pregnancy intentions impact maternal behaviors and infant health. We therefore designed a qualitative study to identify consequences that are traditionally measured in quantitative analyses in order to obtain a deeper understanding of the relationship between pregnancy intentions and these measures, as well as to identify consequences that have *not* been captured in large-scale fertility surveys. We conducted in-depth interviews with women and men about their experiences before, during and after an unplanned pregnancy which resulted in birth. These qualitative data reveal new findings on consequences of unintended childbearing, both broadening and deepening our understanding of the impact of such births on the lives of women, men and families.

Data

A number of prior studies have collected and analyzed qualitative data on women's pregnancy intentions, seeking to more fully understand how women experience and characterize unintended pregnancy (Gerber et al. 2002; Kendall et al. 2005; Lifflander et al. 2007; Moos et al. 1997; Stanford et al. 2000). However, to our knowledge, this is the first qualitative study to focus on how women—and men—perceive and experience the *consequences* of unintended childbearing.

We developed and pilot-tested two in-depth interview guides (IDIs) – one each for men and women. We conducted semi-structured interviews, lasting approximately 90 minutes, in two selected sites – a large city in Oklahoma and a small city in Connecticut – for a total of 75 final interviews (36 women and 39 men). We selected primarily low-income communities, though we did not exclude potential participants on the basis of income. These two sites were selected for two reasons. One, we sought geographic variation in order to avoid findings which might reflect conditions specific to one location; second, we conducted a quantitative study of the impact of pregnancy intentions on maternal behaviors, infant and child health using recent data from the Oklahoma Pregnancy Risk Assessment Surveillance (PRAMS) survey and the Oklahoma Toddler Survey (TOTS). Therefore, qualitative findings from our Oklahoma interviews are complemented by our findings from our quantitative analysis of data from that state (Lindberg et al. 2014).

For both women and men, our criteria for participation were that the respondent be age 25-44 and have had a recent birth, with the current age of the child between one and five years of age. We chose this age range for children in order to focus discussions on longer term consequences of the birth, rather than the difficulties of caring for a newborn. In addition, women were eligible for the study if they identified the birth as having been unintended (either mistimed or unwanted). Men were not screened on pregnancy intentions, as a further goal of this study was to investigate how men identify and characterize such intentions (to be addressed in a separate paper). For the purposes of this analysis, however, we have restricted our sample of men to those with unintended (mistimed or unwanted) births. Table 1 (below) shows the distribution of respondents by gender and sociodemographic characteristics.

All interviews were digitally recorded and transcribed verbatim with identifiable information removed during the cleaning phase. We are currently developing the structure to guide coding of the interview manuscripts. Coded transcripts will be analyzed using inductive and deductive processes. Analysis of these data will begin in October 2014, but below we lay out some of the themes that we anticipate will arise during the analysis stage based on our initial review of transcripts from pilot interviews with women and men who met the study criteria.

In addition to uncovering consequences of unintended childbearing not currently measured in population-based surveys, we also asked respondents about their experiences with prenatal care, breastfeeding, as well as the health of the infant at birth (e.g. low birthweight or preterm) which are similarly measured in the NSFG. These discussions allowed us to explore the particular constraints that may underlie observed differences we found in our quantitative analyses, both at the national-level (Kost and Lindberg 2015) and in Oklahoma (Lindberg et al. 2014).

Anticipated Findings

The focus of this analysis will be to 1) provide insight into the conditions and experiences of women with births from mistimed and unwanted pregnancies that may help to explain the observed differences we see in quantitative analysis (e.g. lower levels of early prenatal care initiation, lower birthweight), and 2) identify consequences not currently measured in population-level survey for women and for men.

The semi-structured interview guide included a range of questions related to the respondent's life just prior to the pregnancy—including their work, education and home life—as well as their life during and following the pregnancy. We focused the questions to elicit discussions about whether and how the respondent's life had changed during and after the pregnancy. Respondents were queried about consequences of the birth on their relationship with the child's other parent, with their other children and with other members of their families, on their daily routines, on their own physical and emotional health, and on the physical health and development of the child. In addition, we explicitly asked respondents about their perceptions of any consequences of the pregnancy's intention status on children's health and development.

We expect all analysis to be completed by early 2015. We will prepare a draft of the paper shortly thereafter, for review prior to and presentation at the annual PAA meetings in late April.

Our quantitative findings support the conclusion that births from unintended pregnancies, particularly unwanted births, suffer disadvantage relative to intended births (Kost and Lindberg 2014; Lindberg et al. 2014). These qualitative interviews with women, focusing on these same

measures – maternal behaviors during pregnancy and infant health at birth – provide the first opportunity to link the narrative of women’s experiences with the consequences of unintended childbearing found in the research literature that is, to date, based entirely on quantitative findings.

The identification of these other, as yet unmeasured consequences should help move the field forward and enable researchers to begin to design survey questions that are more relevant to the impact of unintended pregnancy on women’s and men’s lives.

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Table 1. Number of respondents by sociodemographic characteristic and gender.

Characteristic	Gender	
	Male	Female
Total	30	36
<i>Intention status</i>		
Mistimed <2 years	7	10
Mistimed >=2 years	7	11
Unwanted	16	15
<i>Age</i>		
25-29	9	19
30-34	9	10
35-39	9	4
40-44	3	3
<i>Race</i>		
White, Non-Hispanic	11	13
Black, Non-Hispanic	13	16
Hispanic	4	6
Other, Non-Hispanic	2	1
<i>Poverty status*</i>		
0-99	11	23
100-199	8	8
200-299	7	3
300+	3	2
<i>Education</i>		
<High school	5	2
High school	8	13
Some college	12	17
College graduate	5	4
<i>Interview site</i>		
Oklahoma	12	18
Connecticut	18	18
*Percent of income relative to federally-designated poverty level for given family size. One male respondent had missing information on this characteristic.		