

## Women's Odds of Choosing Abortion Linked To Affective and Relationship Characteristics

A range of contextual and affective characteristics may be critical dimensions of a woman's decision to have an abortion, according to findings from a clinic-based study of women obtaining abortions or prenatal care in the New Orleans area.<sup>1</sup> Abortion patients scored higher than prenatal patients on a scale measuring how hard the women had tried to avoid pregnancy and lower on a scale reflecting how surprised they were about the pregnancy. Significantly smaller proportions of the former than of the latter said that they wanted a baby with their partner and that he wanted one with them. Multivariate analyses confirmed the association between these measures and the abortion decision.

The study was based on data from a self-administered survey conducted in 2002 at a suburban abortion clinic that served inner-city New Orleans women, and an interviewer-administered survey conducted in 2002–2003 at a prenatal screening clinic that is the first stop for women seeking free care during pregnancy. To ensure the comparability of the samples, the analysts included in their calculations only black women who lived in New Orleans—142 abortion patients and 464 prenatal patients.

Participants from the two clinics were similar with respect to age (61–65% were in their 20s) but differed significantly on other demographic characteristics. Higher proportions of abortion patients than of prenatal patients were not in a relationship, had at least a high school education and were employed; a lower proportion described themselves as religious.

The groups also differed on all cognitive, affective and contextual measures studied. Only 1% of abortion patients said that the pregnancy had occurred at the right time, and the same proportion reported that they had planned to get pregnant; among prenatal patients, 35% and 22%, respectively, gave these answers. On average, abortion patients scored higher than prenatal patients on scaled measures reflecting how hard they had tried to avoid conceiving, how confused they had felt when they learned of the pregnancy and how scared they had felt at that time; they scored lower on scales measuring their happiness and their surprise about the pregnancy, and their belief that the pregnancy would improve their relationship with their partner. Only 4% of women seeking abortion said that they wanted a baby with their partner, and 13% reported that their partner wanted one with them, compared with 51% and 69%, respectively, among prenatal care patients.

When women seeking an abortion were asked to indicate all of their reasons for doing so, the most common response (given by 48%) was that they could not afford a child; 40% of women said that they were not ready for a child, and 36% that they wanted no more children. Roughly 20–30% replied that they were not married, they were in an unstable relationship or they were too young; 11% said that they had terminated their relationship with their partner. Smaller proportions considered themselves too old; cited marital, legal or health problems; or said that the pregnancy had resulted from their first act of intercourse.

In a series of multivariate logistic regression analyses, the researchers examined first the demographic characteristics associated with the decision to have an abortion, then the cognitive, affective and contextual characteristics, and finally all of these characteristics simultaneously. Although the initial model indicated that relationship status, religiosity, education and employment status all were related to a woman's odds of choosing abortion, only educational level and employment remained significant in the model that took all of the variables into account. Women who had a high school education or more were significantly more likely than those with less than 12 years of schooling to choose abortion (odds ratios, 7.8 and 9.8); employed women had twice as high odds of seeking abortion as those who were not working.

Results for cognitive, affective and contextual characteristics were similar when they were assessed alone and in conjunction with demographic characteristics. In the full model, the odds that a woman decided to have an abortion increased significantly with her level of effort to avoid pregnancy (odds ratio, 1.3) and decreased as her level of surprise at becoming pregnant rose (0.7). Women who wanted a baby with their partner and those who said that their partner wanted a baby with them had sharply reduced odds of having an abortion (0.1 for each).

While the analysts recognize that their findings are limited by a lack of generalizability and by differences in the way in which the survey was conducted in the two clinics, they contend that the results have practical implications for reproductive health care providers. In helping women to make appropriate decisions regarding family planning and abortion, they suggest, providers “should explore the broad range of contextual, affective, and cognitive dimensions that influence the women's decisions.” The analysts conclude that an improved understanding of these dimensions “may ultimately contribute to improved prevention of unintended pregnancy and, thus, reduce recourse to abortion.”—*D. Hollander*

### REFERENCE

1. Santelli JS et al., An exploration of the dimensions of pregnancy intentions among women choosing to terminate pregnancy or to initiate prenatal care in New Orleans, Louisiana, *American Journal of Public Health*, 2006, 96(11):2009–2015.