



Unintended Pregnancy in the United States

- On average, U.S. women want to have two children. To accomplish that goal, a woman will spend close to three years pregnant, postpartum or attempting to become pregnant, and about three decades—more than three-quarters of her reproductive life—trying to avoid an unintended pregnancy.
- For a range of social and economic reasons, most individuals and couples want to plan the timing and spacing of their childbearing and to avoid unintended pregnancies. Unintended pregnancy also has a public health impact: Births resulting from unintended or closely spaced pregnancies are associated with adverse maternal and child health outcomes, such as delayed prenatal care, premature birth, and negative physical and mental health effects for children.
- For these reasons, reducing the unintended pregnancy rate is a national public health goal. The U.S. Department of Health and Human Services' Healthy People 2020 campaign aims to increase the proportion of pregnancies that are intended by 10% between 2010 and 2020.
- In 2011, nearly half (45% or 2.8 million) of the 6.1 million pregnancies in the United States each year were unintended.
- In 2011, there were 45 unintended pregnancies for every 1,000 women aged 15–44. In other words, nearly 5% of reproductive-age women have an unintended pregnancy each year.

- The unintended pregnancy rate is significantly higher in the United States than in many other developed countries.

Incidence of Unintended Pregnancy

- In 2010, at least 36% of pregnancies in every U.S. state were unintended. In 28 states and the District of Columbia, more than half of pregnancies were unintended.
- Rates of unintended pregnancy are generally highest in the South and Southwest, and in densely populated states.
- The states with the highest unintended pregnancy rates in 2010 were Delaware (62 unintended pregnancies per 1,000 women aged 15–44), Hawaii (61), New York (61) and Maryland (60).
- The lowest unintended pregnancy rates in 2010 were found in New Hampshire (32 per 1,000), Minnesota (36), Vermont (36) and Maine (37).

Demographic Disparities

- Unintended pregnancy rates are highest among poor and low-income women, women aged 18–24, cohabiting women and minority women. Rates tend to be lowest among higher-income women, white women, college graduates and married women. For example, in 2011, the rate of unintended pregnancy among higher-income white women was less than half the national rate (18 vs. 45 unintended pregnancies per 1,000 women aged 15–44).
- The rate of unintended pregnancy among poor women (those with incomes below the federal poverty level) was 112 per 1,000 in 2011, more than five times the rate among women with incomes of at least 200% of the federal poverty level (20 per 1,000).
- At 79 per 1,000, the unintended pregnancy rate for black women in 2011 was more than double that of non-Hispanic white women (33 per 1,000).

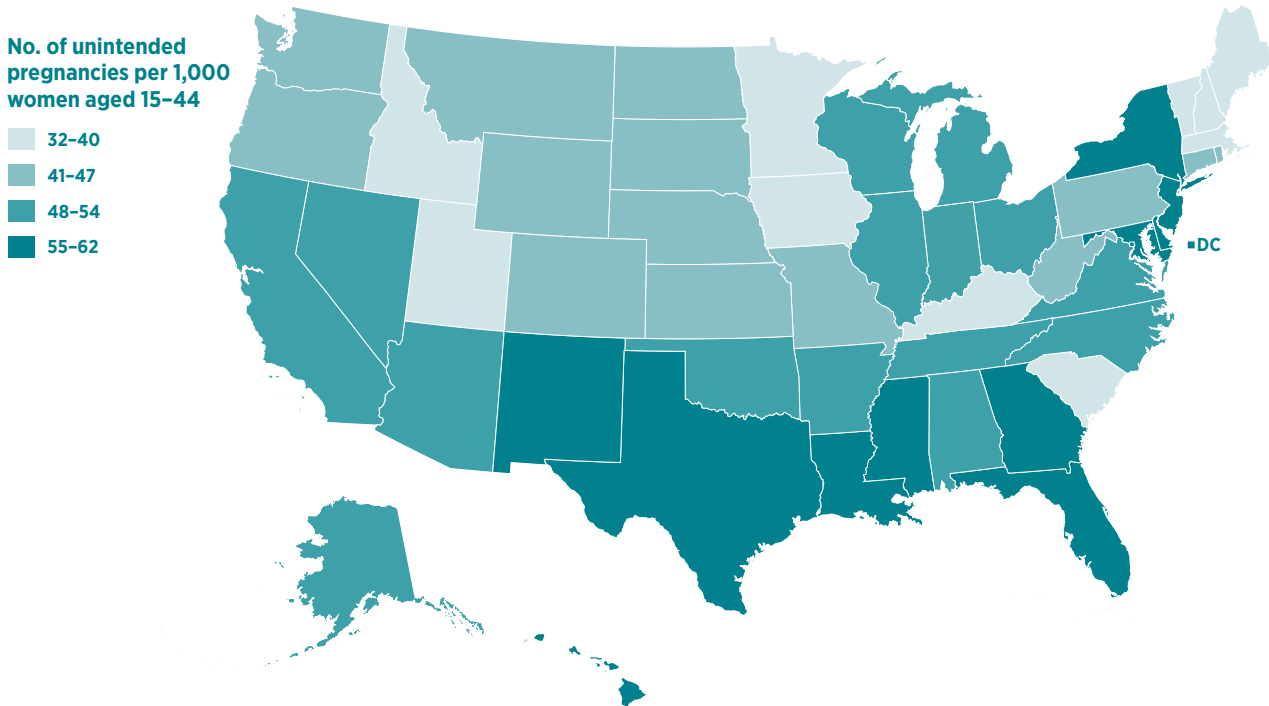
What is Unintended Pregnancy?

An **unintended** pregnancy is one that was either mistimed or unwanted (45% of all pregnancies). If a woman did not want to become pregnant at the time the pregnancy occurred, but did want to become pregnant at some point in the future, the pregnancy is considered mistimed (27% of pregnancies). If a woman did not want to become pregnant then or at any time in the future, the pregnancy is considered **unwanted** (18% of pregnancies).

An **intended** pregnancy is one that was desired at the time it occurred or sooner. When calculating unintended pregnancy rates, women who were indifferent about becoming pregnant are counted with women who had intended pregnancies, so that the unintended pregnancy rate only includes pregnancies that are unambiguously unintended.

In this fact sheet, births resulting from unintended pregnancies are referred to as unplanned and those resulting from intended pregnancies are referred to as planned.

Unintended pregnancy rates varied widely in 2010.



*Rates for Arizona, Indiana, Kansas, Montana, Nevada, New Hampshire, North Dakota and South Dakota estimated by multivariate regression.

- Women without a high school degree had the highest unintended pregnancy rate among all educational levels in 2011 (73 per 1,000), and rates were lower for women with more years of education.
- The proportion of pregnancies that are unintended generally decreases with age. The highest unintended pregnancy rate in 2011 was among women aged 20–24 (81 per 1,000 women).
- Traditional estimates understate the risk of teen pregnancy among adolescents because they typically include all women, whether or not they are sexually active. When rates are recalculated including only those sexually active, women aged 15–19 have the highest unintended pregnancy rate of any age-group.

- There are also disparities in the outcomes of unintended pregnancies across subgroups. In 2011, poor women had an unplanned birth rate nearly seven times that of higher-income women (those at or above 200% of the federal poverty level).

Trends In Unintended Pregnancy

- In the United States, the proportion of pregnancies that were unintended increased slightly between 2001 and 2008 (from 48% to 51%), but, by 2011, it decreased to 45%.
- Following a long period of minimal change, the overall unintended pregnancy rate (the number of unintended pregnancies per 1,000 women aged 15–44) decreased substantially from 54 in 2008 to 45 in 2011, a decline of 18%.

This is the lowest rate since at least 1981 and is likely due to an overall increase in contraceptive use and the use of highly effective methods.

- Between 1981 and 2008, unintended pregnancy rates among poor women were on the rise, while the rate among higher-income women declined steadily. Between 2008 and 2011, however, the rate among women with incomes below the federal poverty level dropped from 137 per 1,000 women aged 15–44 to 112 per 1,000—an 18% decline in just three years. The rate among higher-income women decreased 20% between 2008 and 2011.
- The unintended pregnancy rate among teens has been declining since the late 1980s. Between 2008 and 2011, the unintended

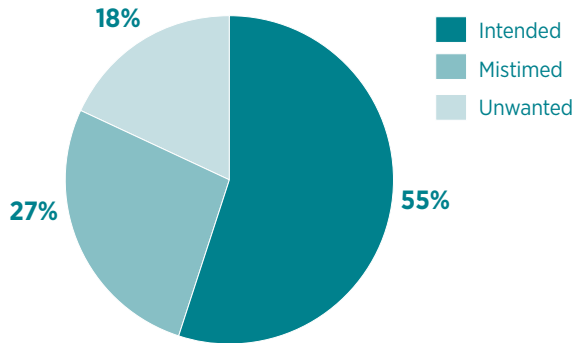
pregnancy rate among women aged 18–19 declined 20%, and the unintended birth rate declined 21%. Among women aged 15–17, the unintended pregnancy rate declined 44% during the same period, and the unintended birth rate declined 47%.

Outcomes of Unintended Pregnancy

- In 2011, 42% of unintended pregnancies (excluding miscarriages) ended in abortion, and 58% ended in birth. This was a small shift from 2008, when 40% ended in abortion and 60% ended in birth.
- The unintended birthrate in 2011 was 22 per 1,000 women aged 15–44. The abortion rate was 17 per 1,000 women.
- The proportion of unintended pregnancies ending in birth decreased across all

PREGNANCIES BY INTENTION STATUS

Nearly half of U.S. pregnancies were unintended in 2011.



racial and ethnic subgroups between 2008-2011. The proportion of women experiencing unintended pregnancy and choosing to end it in abortion was higher among black women than among women in other racial and ethnic groups.

- In 2011, lower proportions of poor and low-income women than of higher-income women chose to end an unintended pregnancy in abortion. Consequently, poor women

had a relatively high unintended birthrate.

- The proportion of births that fathers report as unintended—about four in 10 in a 2006–2010 study—is similar to that reported by mothers. The proportion varied significantly according to fathers’ union status, age, education level, and race and ethnicity.
- More than one in 10 single men indicated in 2006–2010 that they did not know

about the pregnancy until after the child was born. Single men aware of the pregnancy reported nearly three-fourths of births as having resulted from unintended pregnancies.

Cost Of Unintended Pregnancy

- Two-thirds (68%) of the 1.5 million unplanned births that occurred in 2010 were paid for by public insurance programs, primarily Medicaid. By comparison, 51% of births overall and 38% of planned births were funded by these programs.
- Of the two million publicly funded births in 2010, about half were unplanned. By comparison, 38% (1.5 million) of 4.0 million total births nationwide were unplanned.
- In eight states and the District of Columbia, at least 75% of unplanned births were paid for by public programs. Proportions were highest in Mississippi (82%) and the District of Columbia (85%). Seven of

these nine jurisdictions are in the South, a region with high levels of poverty.

- Total public expenditures on unintended pregnancies nationwide were estimated to be \$21.0 billion in 2010—\$14.6 billion in federal expenditures and \$6.4 billion in state expenditures.
- In 19 states, public expenditures related to unintended pregnancies exceeded \$400 million in 2010. Texas spent the most (\$2.9 billion), followed by California (\$1.8 billion), New York (\$1.5 billion) and Florida (\$1.3 billion). Those four states are also the nation’s most populous.

Preventing Unintended Pregnancy

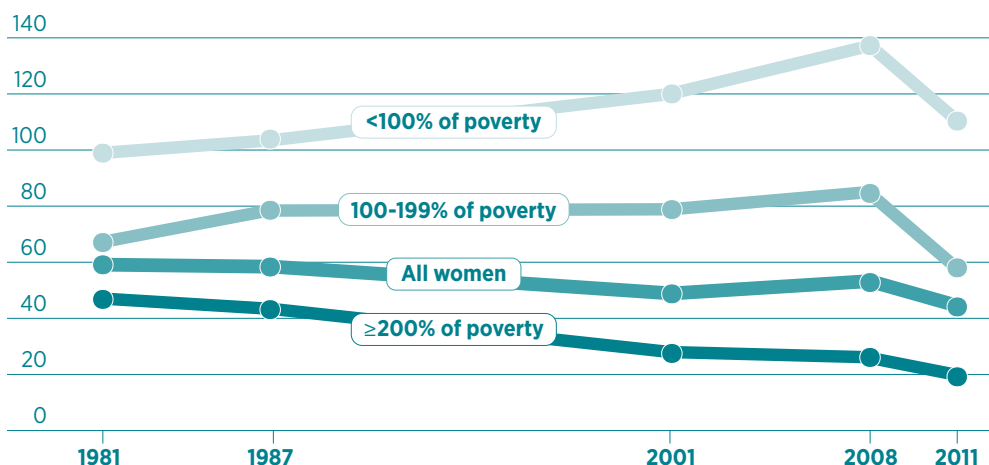
- Two-thirds (68%) of U.S. women at risk for unintended pregnancy use contraceptives consistently and correctly throughout the course of any given year; these women account for only 5% of all unintended pregnancies. By contrast, the 18% of women at risk who use contraceptives inconsistently or incorrectly account for 41% of all unintended pregnancies. The 14% of women at risk who do not practice contraception at all or who have gaps of a month or more during the year account for 54% of all unintended pregnancies.

- Publicly funded family planning services help women avoid pregnancies they do not want and plan pregnancies they do want. In 2014, these services helped women avoid two million unintended pregnancies, which would likely have resulted in 900,000 unplanned births and nearly 700,000 abortions.

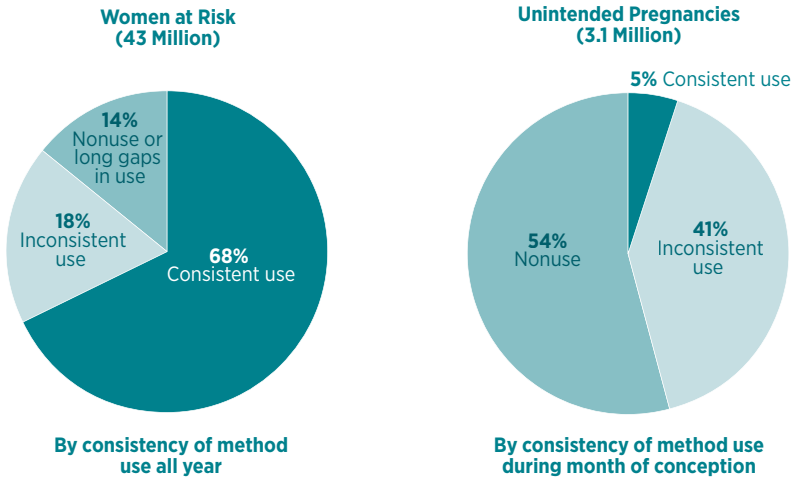
UNINTENDED PREGNANCY RATES

Between 1981 and 2011, unintended pregnancy has become increasingly concentrated among poor and low-income women.

Rate (per 1,000 women aged 15–44)



In 2008, the two-thirds of U.S. women at risk of pregnancy who used contraceptives consistently accounted for only 5% of unintended pregnancies.



NOTES: "Nonuse" includes women who were sexually active, but did not use any method of contraception. "Long gaps in use" includes women who did use a contraceptive during the year, but had gaps in use of a month or longer when they were sexually active. "Inconsistent use" includes women who used a method in all months that they were sexually active, but missed taking some pills, or skipped use or incorrectly used their barrier method or condom during some acts of intercourse. "Consistent use" includes women without any gaps in use who used their method consistently and correctly during all months when they were sexually active, including those who used a long-acting or permanent method.

- Without publicly funded family planning services, U.S. rates of unintended pregnancy, unplanned birth and abortion for 2014 would have been 68% higher.
- Had publicly funded family planning services not existed, the public costs of unintended pregnancies in 2010 might have been 75% higher.
- The costs associated with unintended pregnancy would be even higher if not for continued federal and state investments in family planning services. In 2010, the nationwide public investment in family planning services resulted in \$13.6 billion in net savings from helping women avoid unintended pregnancies and a range of other negative reproductive health outcomes, such as HIV and other STIs, cervical cancer and infertility.

SOURCES

These data are the most current available. References are available in the HTML version: <https://www.guttmacher.org/fact-sheet/unintended-pregnancy-united-states>



Good reproductive health policy starts with credible research

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