Family planning is an integral part of life planning, and includes aspects such as partnership, sexuality, contraception, desire for children, intended and unintended pregnancy, and birth. Family planning however also depends on individual factors and on the financial and social context. This means that both women and men are confronted by great challenges if they would like to start a family, but at the same time want to be successful in their careers and are concerned for equal rights and responsibilities in the relationship. Women and men alike are faced by even greater challenges if the pregnancy is unintended or occurs at an inconvenient time.

For more than 15 years now it has been one of the research focuses of BZgA to investigate the causes and decision-making processes governing how women and men deal with the issues of wanting children, pregnancy and terminations. Starting with the survey to obtain fundamental information about family planning on the part of women and men of reproductive age, the BZgA has had the particular living circumstances of specific target groups investigated over the years: pregnancies and terminations among minors, family planning among women with a migrant background, and also family planning among young adults with disabilities.

As part of its series of studies about women’s and men’s family planning, BZgA has commissioned, as another milestone, the comprehensive study ‘women’s lives 3 – family planning in women’s lives’ (project period 2011 - 2014).

- A standardized telephone population survey of a random sample of 20–44-year-old women in Baden-Württemberg, Berlin, Lower Saxony and Saxony. 4,002 women were surveyed about the reproductive events in their past; they reported a total of 4,772 pregnancies.

- Qualitative-biographical interviews with women who had said on the telephone that they had had at least one unwanted pregnancy. They were deliberately chosen to make the sample group heterogeneous. 97 women reported their biographies and opinions in their own words.

- Expert interviews with advisors from pregnancy (conflict) counselling. 24 interviews were conducted with selected advisors from different organizations in the four federal states.
The study takes a general look at the effectiveness but also at the difficulties of family planning. Family planning is defined in the widest sense as how individuals shape their personal lives with and without children. Specifically, it looked at the conditions to which unintended pregnancies and terminations can be attributed. The ‘run-up’ to an unintended pregnancy was incorporated: a woman was heterosexually active, she did not have a current desire for children, and she did not use contraception or her contraception failed. As a result the study can make statements about the women’s desire to have children and about their contraceptive behaviour in various circumstances and during various stages of their lives, as well as about the respective probabilities that pregnancies were unintended and were carried to term or terminated.

The study emphatically demonstrates that pregnancies that were ‘unintended’ and pregnancies that were wanted but that occurred too early (‘wanted but later’) had a different background and that the women reacted differently to them. As a result, a distinction is made between the two. The umbrella term for both of these is ‘unplanned pregnancies’. There are some aspects in which pregnancies that ‘merely’ occurred too early resembled wanted pregnancies.

I Results relating to family planning and contraception today

The job is important and family planning has to be reconciled with career plans

Women’s family planning now has to be reconciled with their career plans, and this remains a difficult feat to achieve: 65% of the respondents, irrespective of their level of education, agree with the statement ‘There is no right time to have a child.’ Only one in five say it is absolutely necessary to plan a birth. The lower the level of education, the more likely the women were to agree with this statement.

For the vast majority of the women surveyed in all the social groups, paid work was important. However, their work was not so important that it was prioritized over family. The idea of the man as the sole breadwinner was rejected by around two fifths of the women, while 84% agreed that mothers should not lose sight of their career prospects. 78% said that women needed their own financial security irrespective of their partner. However, depending on their level of education, the women did have different ideas about family and expectations of their partner as well as different difficulties in implementing these ideas.

- Women with a lower level of education are more family-oriented and have comparatively conservative opinions with regard to the division of labour between a man and a woman and to working mothers. Work was important to them too, but a quarter of them rejected the idea of mothers working while the children were small.

- Women with a high level of education were more in favour of equality in the relationship and of mothers working. More than a quarter (28%) agreed with the demand that men should work less while the children were little.
Figure 1

Attitudes to family planning – percentages that agreed to the statements; by education* (in %)

![Bar chart showing attitudes to family planning for different education levels.](chart1.png)

Source: BZgA, data set ‘Frauen leben 3’ 2012, 20–44-year-old women in four states

* narrowly not significant

* significant differences between the groups

Figure 2

Attitudes to family planning – percentages that agreed to the statements; by education* (in %)

![Bar chart showing attitudes to family planning for different education levels.](chart2.png)

Source: BZgA, data set ‘Frauen leben 3’ 2012, 20–44-year-old women in four states

Please tell me what type you are. The two other possible answers were ‘My work/my professional plans take precedence’ and ‘I’m very open and adaptable in both areas’.

* significant differences with regard to education
Figure 3
‘Both are equally responsible for the household’ – by education (in %)

![Diagram showing the percentage of childless women with a partner and mothers with children under the age of 6 for different levels of education.]

Source: BZgA, data set ‘frauen leben’ 3’ 2012; 20–44-year-old women in four states
* significant differences with regard to education

Figure 4
The desire for children among women who do not yet have children, by age* (in %)

![Diagram showing the desire for children among women who do not yet have children, by age for different categories.]

Source: BZgA, data set ‘frauen leben’ 3’ 2012; 20–44-year-old women in four states
* significant differences with regard to age
The expectations with regard to family, work and the partner, which differ depending on education, are not met in the actual division of labour when young children are on the scene. The percentage of mothers with a child under the age of six, who share family work equally with their partner (‘both responsible’) is equally high among women with a medium, higher and high level of education (31% to 33%) and is even somewhat higher among women with a low level of education, at 38% (not significant).

Up until age 30 women without children focus on having children later in life

Up to age 30, women without children focus on delaying starting a family (‘I want children, but only in a few years’). From 35 onwards they are largely finished with the subject of children (‘I don’t want any further children’). The percentage of women ‘wanting a child quite quickly’ is highest between the ages of 30 and 34.

The ‘right’ age requires the ‘right’ situation for women without children to want a child ‘quite soon’. A sense of security, both personally (marriage, long-standing relationship) and professionally (net household income of 2000 euros and more, working at least part-time) increased the desire in childless women under the age of 30 to have a child ‘quite soon’. The following factors spoke against having a child ‘quite soon’:

- Almost one in three had a tricky relationship situation (crisis, separation, no partner, partner does not want a child), largely irrespective of age.
- Among two thirds (67%) of the women under the age of 25 their job training played a role.
- Around half the women under the age of 34 were concerned about their financial and professional security. Among the younger women this insecurity influenced their opinion about starting or expanding a family.
- From age 40 onwards, the factor ‘too old’ started to play a significant role (44%), whereas professional reasons took a back seat.

- Trouble reconciling work and family was less important, reaching its greatest extent at 26% among the childless 30–34-year-olds.

A trend towards single-child families among women in difficult circumstances?

80% of the mothers with two children did not want any more children. A subgroup of the 20–34-year-old women with one child did not even want a second child. The main reasons they gave for this centred on professional or financial insecurity and reconciliation problems.

Women with low-level qualifications and/or mothers working half-days or longer, mothers older than 34 and mothers from Berlin are all more likely to limit their family size to one child. A new trend could stem from the fact that – among the women with low-level qualifications and a difficult income situation in particular – family expansion is put off after the first child, before being abandoned after the age of 35.

Women reliably use contraception but costs make access to safe contraception more difficult

Safe birth control is an important subject for all women, as long as they are not currently in a phase where they desire a child soon, where they are currently pregnant, or where they have just had a child. Measured by the length of a woman’s overall fertile period, this phase is relatively short.
With increasing age and the consolidation of the relationship, women are more likely to use contraceptives that are very reliable (IUD/IUS, sterilization). The younger the women, the more non-committal the relationship, or the fewer children are involved, the more likely the women are to use the contraceptive pill. Condoms are used by roughly a quarter irrespective of the presence and robustness of a relationship.

Almost half of the women who do not want a child largely avoid contraceptive risk by choosing the coil or sterilization. Women who want a child, but only later, tend to be younger; the percentage of such women on the Pill is correspondingly high. Among those who are undecided or for whom the issue is still far off in the future, around one third rely on condoms, largely not in conjunction with the Pill.

Only a small percentage (4.2%) of all the heterosexually active women who did not have a desire for children and who were not currently pregnant were not using contraception at the time of the survey. This ‘unmet need’ and therefore the risk of an unplanned pregnancy is increased not among younger women but among older ones and/or married women, as well as among women with a low level of education/a low income (6.9%; women aged 39+ 6.1%).

Women who receive state support are less likely to use the comparatively more expensive birth control options of the Pill and the coil; they are more likely to use condoms. 22% of these women also say that they have opted against the Pill or the coil at least once in their life for financial reasons. This figure is a mere 4% where the woman is in a (very) good financial situation. The experts’ statements and the qualitative interviews confirm these findings.

The qualitative interviews revealed that in addition to the costs, other aspects impeded the women’s ability to fulfil the requirements of safe contraception (regularity, effort, discipline): emotions tied to sexuality and love, ambivalences as well as overwhelming or irregular circumstances, a lack of information about medical processes that reduce the efficacy of the Pill, and a false appraisal of their own fertility. The partner’s behaviour also played a role.

The percentage of women not wanting a child anymore is highest among women over the age of 34. This is particularly true for women who already have children. Pregnancies become rarer. Here too sexual activity largely takes place in steady relationships – with children – and reduces in intensity. The use of the coil and sterilization are more widespread. Age-related risks are that women no longer consider themselves fertile, and that there is a slightly increased ‘unmet need for contraception’. The percentage of women not wanting a child anymore is highest among women over the age of 34.

The study ‘women’s lives 3’ highlights age-related risks of unplanned pregnancies

Under the age of 25 births still largely tend to be put off. Pregnancies are rare. Sexual activity is of changing intensity, dependent on the development of the relationship. Contraceptive use is largely good. Age-related contraceptive risks are inexperience and relationships that are not yet consolidated.

The vast majorities of pregnancies occur between the ages of 25 and 34. Many requirements for starting or expanding a family are given, and the percentage of women wanting a child ‘quite soon’ is highest in this group. This phase is characterized by sexual activity in more stable relationships or a marriage; the main forms of birth control are the Pill and condoms. Women who cannot afford safe contraception undergo some contraceptive risk.
II Results relating to pregnancies and in particular to unintended pregnancies and terminations

The higher the women’s level of education, the later the first child was born

Delaying the first birth is particularly prevalent among the women with higher and high levels of qualifications. With increasing age women spent longer in less committed relationships and stayed childless for longer. This can be explained as an attempt to avoid professional disadvantages. After the later start the highly qualified women ‘caught up’. Between the ages of 35 and 44 they are only marginally less often married and mothers (59%) than women with lower levels of education (63–65%). However, they did not quite ‘catch up’ with women with other qualifications, because they were more likely to remain childless and were less likely to have three or more children than women with lower-level qualifications.

Women with a low level of education started a family sooner. At 38%, they were more likely than the other educational groups to agree with the statement ‘it is better to have children young’, but this is not a majority opinion in this group either. After the early start into motherhood they waited somewhat longer to have a second child (4.5 years) and were somewhat more likely to have three or more children.

Associated with becoming a mother at a young age is that the relationship and work circumstances were not yet secure when the first child was born. This was all the more common, the lower the women’s level of education. One particular aspect among the women with a low level of education was that every second woman (52%) did not yet have a steady job at the time when the first child was born; the same was true for 35% to 39% among women with other levels of education. The higher the level of education, the more likely it was for the first child to be born into a marriage.

Figure 7

Percentage of childless women, by education and age (in %)*
Every third pregnancy was unintended, every sixth pregnancy unplanned

33.7% of all pregnancies did not occur on purpose. This figure breaks down into 17.7% unintended pregnancies, 13.3% pregnancies that were unplanned (but would have wanted later) and 2.7% pregnancies that the women felt ‘undecided/ambivalent’ about.

Of the women surveyed, 29.9% had had at least one pregnancy that was an accident. 16.8% of women had had at least one unplanned pregnancy, irrespective of whether these pregnancies were subsequently carried to term or terminated.

Table 1

Degrees to which a pregnancy was intended, and their distribution, calculated taking all pregnancies into account

<table>
<thead>
<tr>
<th>The pregnancy was …</th>
<th>n = 4,772</th>
</tr>
</thead>
<tbody>
<tr>
<td>‘intended’</td>
<td></td>
</tr>
<tr>
<td>…I wanted it and the timing was right; also: it should have happened earlier (‘wanted’ or ‘wanted at the time’)</td>
<td>66.3%</td>
</tr>
<tr>
<td>…I wanted it but only later (wanted, but later)</td>
<td>13.3%</td>
</tr>
<tr>
<td>‘not intended’</td>
<td></td>
</tr>
<tr>
<td>…I was ambivalent/undecided (also: wanted, yes and no)</td>
<td>2.7%</td>
</tr>
<tr>
<td>It was unintended (and carried to term)</td>
<td>10.0%</td>
</tr>
<tr>
<td>It was unintended (and terminated)</td>
<td>7.7%</td>
</tr>
</tbody>
</table>

Source: BZgA, data set ‘women’s lives 3’, 2012, 20–44-year-old women in four states
Comprehensive contraception cannot completely prevent unplanned pregnancies

36% of all the unintended pregnancies and 43% of all the unwanted pregnancies occurred when the women were using contraception. If there was no steady relationship, it was more likely that no contraception was used, possibly because reliable contraception had ended and sexual intercourse was not expected.

Not every unintended pregnancy is a problem

Among 84% of the unintended pregnancies there are characteristics that are to be expected for pregnancies that are wanted at the time: no contraception was used and/or the reaction to the pregnancy was (very) positive. Inconsistencies of this nature are more the rule than the exception. They are often found in pregnancies that had ‘only’ occurred too early; they are true for almost all of these premature pregnancies if the relationship situation was also favourable. For the unplanned pregnancies the percentages for these inconsistencies were lower. Pregnancies were more likely to occur while the women were using contraception (43%) and only a small percentage (13%) was seen as (very) positive; the reaction was (very) negative for 64%.

For almost one in two of the women who had become pregnant by accident (48%), the decision to have the child was ‘immediately obvious’ and self-evident. This was particularly true for pregnancies that should have occurred later (59%) and less so for pregnancies that were seen more as a nuisance (35%) – this too demonstrates that pregnancies that occurred too early were not necessarily seen as a problem.
57% of the unintended pregnancies were carried to term. 43% were terminated. The qualitative interviews reveal a largely child-focused line of argument in the decision-making about an unintended pregnancy, where personal biographical development opportunities (job training etc.) are also seen as a good foundation for a good future for a child. The decision-making contained the consideration whether ‘it was doable (either alone or together)’.

The percentage of unplanned pregnancies compared to the total number of pregnancies was higher in those periods of life where the women did not yet want a child or did not want a child anymore.

- Every second pregnancy (51%) below the age of 20 and around a quarter (23%) of the pregnancies occurring between the ages of 20 and 24 were unintended; 44% of them were terminated. Highly qualified women had more unintended pregnancies and they were also more likely to terminate them.

- Pregnancies that occurred between the ages of 25 and 34 were least likely to be unintended (12%). Because of the large number of total pregnancies, these 12% constitute a higher absolute number than there are cases in the under-25s group. Around two out of five unintended pregnancies were terminated. Women with a low level of education were more likely to experience an unintended pregnancy, but they were then more likely to accept it.

- The termination probability is somewhat but not significantly lower than in the other age groups. Pregnancies that occurred at an age of 34+ were again somewhat more often unintended (by 20%, not significant). The probability of a termination was high, but not significantly higher than for pregnancies in the 25–34 age group. Unintended pregnancies were more likely to be accepted by women with a higher level of education than by women with a low level of education.

Figure 10
Pregnancy intention – by age at which pregnancy occurred1 (in %)*

Source: BZgA, data set ‘Frauen leben 3’ 2012, 20–44-year-old women in four states
1 age at birth of child/termination
* significant age differences
The quality of the relationship has the biggest influence on how wanted a pregnancy was and how it was dealt with

In all periods of life and for every age group a complicated relationship situation increases the probability of an unplanned/unintended pregnancy and a termination. It is the most important reason given by women who experienced pregnancies under the age of 34.

- Pregnancies that occurred in a complicated relationship situation were six times more likely to be unintended (58%) than pregnancies in stable relationships (10%).
- In a complicated relationship situation more than every second unplanned pregnancy (54%) was terminated, but only one in three in a stable relationship (32%).
- The most commonly cited reason for a termination, given by about a third of the respondents, was a complicated relationship situation or the absence of a partner. 40% of women who were still childless at the time cited this reason.

According to the qualitative interviews, a ‘complicated relationship situation’ includes the beginning of a relationship or a crisis in the relationship, a separation, affairs, a violent relationship, a partner who consumes drugs or alcohol, or relationships in which the woman felt devalued and in which the partner was not interested in responsible fatherhood.
Job and money concerns made unplanned pregnancies, but not necessarily terminations, more likely

- 36% of the pregnancies that occurred in uncertain job and financial situations were unplanned (49% of them were carried to term); when these issues were secure, 12% were unplanned (of which 63% were carried to term).

- The professional and financial uncertainty was cited by one fifth of the women as a reason for termination, the second-most common reason for a termination.

Struggling to reconcile work and family (plans) was one reason for not wanting a child quickly, but women who were 25+ when they became pregnant, it was not a reason for a termination. In the qualitative interviews the women were more likely to express the concern that if they had one or two children (and were potentially a single parent), then they would not be able to find a job, whereas those women in a firm job described arrangements with an employer.

The study revealed age-related conditions for unwanted and terminated pregnancies

Specifically relevant for pregnancies that occurred in women under the age of 25 were the frequent and specific difficulties of the relationship at a young age, the feeling of being young and immature as well as the indicators for unsettled circumstances, such as professional and financial uncertainty, the women’s educational situation, inadequate living conditions, and the difficulty in reconciling work and family (plans).

The specific situation for women who got pregnant between the ages of 25 and 34 is that they are less likely to cite inadequate job and relationship security. Where it existed it had a big influence on the wantedness of the pregnancy, but not on the likelihood of a termination. The two main reasons for a termination were the relationship situation (35%) and health concerns (26%). An unfavourable job situation interfered with the women’s desire to have a child, but unplanned pregnancies were accepted as long as the private, personal circumstances did not get in the way. This was also true for pregnancies that occurred at 35+.

The (age-dependent) family situation also had an influence: if a woman who already had a child got pregnant, it was rarely unplanned (12%); if it was unplanned, it was less commonly accepted (48%). Around one third of the women who got pregnant when they already had two or more children (30%) said it was unplanned – a comparatively high percentage. But two out of three of these pregnancies were then accepted – a significantly higher percentage than in cases where families were smaller (65%).

<table>
<thead>
<tr>
<th>Main reasons for opting for a termination – by age at termination (in %)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age at termination</td>
</tr>
<tr>
<td>-------------------</td>
</tr>
<tr>
<td>Difficult/no partnership</td>
</tr>
<tr>
<td>Occupational or financial uncertainty</td>
</tr>
<tr>
<td>Health concerns*</td>
</tr>
<tr>
<td>Young, immature*</td>
</tr>
<tr>
<td>In job training or university*</td>
</tr>
</tbody>
</table>

* Source: BZgA, data set ‘women’s lives 3’, 2012, 20–44-year-old women in four states, several answers possible
* significant group differences
Terminations – putting off starting a family or limiting the number of children?

The differing timing in family planning depending on the women’s level of education is also reflected in their terminations: for 75% of the highly qualified women the termination either came before the birth of the first child or they were still childless at the time of the survey. They essentially delayed starting a family.

The issue of limiting family size was less relevant: 15% of the terminations came after the first child, 9% after the second. Even for the women with a low level of education the majority of terminations occurred before the first child, but the overall percentage was lower at 47%. There were significantly more terminations after the first child (40%) and a further 14% after the second child.

With regard to unintended pregnancies and terminations, decisions were largely made together – the quality of the relationship was crucial

Fears about unfair decisions in the event of unintended pregnancies were rejected: joint participation in the decision was high. The consensus was less marked for unwanted pregnancies and terminations but it was still common.

In 6% of the pregnancies that were premature but still carried to term (‘wanted, but later’) the woman decided on her own and in 5% of cases the decision was left to her. If the pregnancy was unwanted but carried to term, then 17% of the women had made the sole decision and in 12% of cases the decision was left to them. When it came to terminations, more women decided on their own (30%), while 26% were left to make the decision.

The quality of the relationship is the biggest indicator of the mode as well as of the result of the decision. Joint decisions are just as common in the case of unwanted pregnancies carried to term in steady relationships as in the pregnancies that were wanted but should have occurred later. The joint nature of the decision for a termination was similarly high in steady relationships too.

In difficult relationship situations on the other hand, irrespective of whether the pregnancy was carried to term or terminated, the women decided on their own or the decision was left up to them in more than half of the cases. The qualitative interviews demonstrate that if there are affairs, problematic relationships or a potential father with no interest in the child, the woman’s sole decision can lead to her regaining her autonomy and leaving her partner.
Client
Bundeszentrale für gesundheitliche Aufklärung (BZgA)
Executive Director: Dr. med. Heidrun Thaiss
Maarweg 149 – 161
50825 Köln
Tel. 0221 8992-0
www.bzga.de
www.sexualaufklaerung.de
www.forschung.sexualaufklaerung.de

Editor in Chief
Angelika Hessling, BZgA

Translation
Dr. Michael Scuffil, Leverkusen

Editing, Conception an Design
Kühn Medienkonzept & Design GmbH, Köln

Printed by
Druckhaus Gummersbach PP GmbH

Impression
1.1.08.16

All Rights Reserved

This publication is made available by the BZgA free of charge. It is not intended for resale by the recipient to third parties.

To order
By mail: BZgA, 50819 Köln
By fax: 0221 8992-257
By email: order@bzga.de

Order number: 13319406
The Research Project

Project period
Juli 2011 bis Juli 2014

Project management
Prof. Dr. Cornelia Helfferich, Sozialwissenschaftliches FrauenForschungsInstitut (SoFFI F.) im Forschungs- und Innovationsverbund an der Ev. Hochschule Freiburg (FIVE e.V.)

Contributors
Heike Klindworth †, Dipl. Biol., Diana Cichecki, B.A., Judith Eckert, M.A., Yvonne Heine, M.A., Julia Wiesinger, B.A., Ines Wlosnewski, Dipl. Demogr., and Rainer Wagner as well as a team of interviewers, and assistants who worked on analysing the survey sections

Co-operative partner
Prof. Dr. Wolfgang Eßbach, Institut für Soziologie der Universität Freiburg

Implementation of the telephone interviews
TNS Emnid, Bielefeld, Abteilung Empirische Sozialforschung, Heidrun Bode

Sample and method

1) Survey of 20–44-year-old women
• 4002 women aged between 20 and 44 from the resident population of four states, an equal number being taken from each: Baden-Württemberg (n = 1000), Berlin (n = 1002), Lower Saxony (n = 1000) and Saxony (n = 1000)
• telephone survey with a standardized questionnaire

2) Qualitative one-on-one interviews with 20–44-year-old women
• 97 qualitative biographical interviews with 20–44-year-old women from the four states who had ever either given birth to a child they had not intended, or who had terminated a pregnancy
• qualitative-biographical face-to-face interviews with question guide

3) Survey of experts active in pregnancy counselling
• 24 guided interviews on the telephone with experts (family and pregnancy counsellors with experience of counselling under the terms of sections 2 and 5 of the Pregnancy Conflict Law), contrasting selection depending on funding source in the four selected states

Abstract
The study ‘women’s lives 3. Family Planning in Women’s Lives – Focus: Unintended Pregnancies’ provides a comprehensive picture of family planning in the lives of women aged from 20 to 44, and, within this framework, insights and explanations on the occurrence of unintended pregnancies that were either continued or terminated. The aim of the study is to learn more about why unintended pregnancies occur and what motivates women either to continue with, or to terminate, the pregnancy. The following questions were investigated.

When and why do women wish or not wish for a child, and more specifically in which phases of life, and in which situations? What do women think is the right time in their lives to have a baby? How safe is the contraception they use? How did they come to be unintentionally pregnant in spite of the possibility of contraception? What influenced their decision on whether or not to continue with the pregnancy?

The relationship they were in is incorporated as a context as are the career situation or training plans.

The BZgA intends to use the results as the scientific foundation for its conceptual work in the fields of sexuality education and family planning. Empirically backed data are needed in order for it to fulfil its statutory remit to develop information services and materials that are relevant to needs and target-group specific, being tailored to the lives and situations of those to whom they are addressed.

Funded by
Bundeszentrale für gesundheitliche Aufklärung (BZgA)
Project management: Angelika Hessling