



Original article

Previous Pregnancies Among Young Women Having an Abortion in England and Wales


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 A B S T R A C T

Purpose: The purpose of this study was to use national statistics on abortions carried out in England and Wales to more precisely estimate the proportion of young women aged <20 years obtaining an abortion who have had one or more previous pregnancies.

Methods: Secondary analysis of abortion data from the Office of National Statistic and the Department of Health by parity for women aged <20 years, ordinarily residing in England and Wales, from 1992 to 2013.

Results: Over the past 20 years, the proportion of teenagers in England and Wales having an abortion as a result of a subsequent pregnancy increased by 33% (from .172 in 1992 to .229 in 2013). Most of this increase occurred before 2004, and the proportion now appears to have stabilized. In 2013, 22.9% of the young women aged <20 years who underwent an abortion had had at least one previous pregnancy (either a birth or an abortion). Only a minority (<5% of young women who obtained an abortion) had had more than one previous pregnancy.

Conclusions: The findings show that nearly one in four teenagers presenting for an abortion have already been in contact with health services for a previous birth or abortion. Greater policy emphasis must be placed on the accurate identification of the proportion of teenage pregnancies that occur as a result of a subsequent pregnancy and developing more effective “secondary prevention” interventions to help the first-time pregnant and parenting teenagers manage their future reproductive lives and prevent further unplanned pregnancies.

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 IMPLICATIONS AND CONTRIBUTION

Nearly, one in four teenagers aged <20 years presenting for an abortion in England and Wales have already had previous pregnancies. This adds to evidence which indicates that teenagers who become pregnant are a high-risk group for further pregnancies and suggests that greater emphasis must be placed on developing more sophisticated and effective “secondary prevention” interventions.

The teenage conception rate in England and Wales has notably declined in recent years and is now at a record low. For 15- to 19-year-olds, the estimated conception rate for 2013 was 40.5 per 1,000, down by 44% from 61.6 per 1,000 in 1998 [1] (the baseline year for the former Labour government's *Teenage Pregnancy Strategy*, which sought to halve the under 18 conception rate over a 10-year period [2]). However, further

reductions are still needed to bring the rate in line with other Western European countries [3]. As not all teenage conceptions are first-time conceptions, it is important to know the number of teenagers who become pregnant for the first time and the number who become pregnant for the second time or more. This information will help to guide more targeted interventions to maintain the downward trend in teenage pregnancy and to monitor the effectiveness of current sexual health priorities on reducing under 18 conceptions [4–6] and unwanted pregnancies among all women of fertile age, including unwanted pregnancies after a birth and after an abortion [4].

Conflicts of Interest: The authors have no conflicts of interest to declare.

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Previous research from the United Kingdom estimates that between 12.5% and 30% of teenage pregnancies are second- or higher-order pregnancies [7–12], indicating that subsequent pregnancies may be overrepresented in the under 20 conception rate. However, there are no routinely available data in the United Kingdom on the number of teenagers who have had more than one pregnancy, so establishing the prevalence is difficult. The reason for this is, at least in part, historic and cultural and represents demographic changes in marriage and motherhood. Under the Population (Statistics) Act 1938, birth registration data on the number of previous children were collected for married women only. Since 2013, legislative amendments to the Act to collect this information for all women regardless of marital status have made it possible to identify the proportion of teenage mothers having more than one child [13]. In the first year for which information on the number of previous live-born children was recorded, figures show that of the 29,054 live births to mothers aged <20 years, 25% had had at least one other live birth [14]. Nevertheless, these birth-related data fail to provide a full picture of the prevalence of teenagers who have more than one pregnancy, given that approximately half of all teenage conceptions in England and Wales end in abortion (in 2013, 61.8% of all conceptions under 16, 51.1% of all conceptions under 18, and 44.5% of all conceptions under 20) [15]. This is similar to the European average for countries with liberal abortion laws and where complete data are available [14].

Data on the number of previous births and abortions within the population of young women presenting for an abortion can be obtained from national abortion figures, published by the Department of Health (DH). The annual bulletin, *Abortion Statistics, England and Wales Series* (2002–2013) and associated data tables include information on the number of previous pregnancies to women by age and outcome. Previously these data were published by the Office of National Statistics (ONS) in the *Abortion Statistics Annual Reference Volume—Series AB* (1991–2001). Abortion statistics for 2013 show that 13.4% of abortions to teenagers aged <20 years were to teenagers who had one or more previous abortions and 12.2% were to teenagers who had one or more previous live or still births [9]. Using data published by the DH and ONS, Collier [16] reported that the proportion of abortions carried out subsequent to a previous live or still birth increased by 20% between 1992 and 2007 (from .096 to .115), whereas a 47% increase (from .091 to .134) was observed for those who had undergone a previous abortion. In recent years, this proportion has remained relatively stable. However, Collier could not report the overall rate of abortions after one or more previous pregnancies as published national data are limited to reporting previous abortions and previous births in separate subcategories. These categories are not mutually exclusive and individuals can belong to one or both subcategories, thus excluding the possibility of calculating a subsequent pregnancy rate by simply adding the previous birth numbers to the previous abortion numbers.

The aim of this article was to address the limitations of previous research and use the data held by the DH from abortion notification forms (HSA4) to identify the proportion of teenagers presenting for an abortion for whom previous pregnancies (ending in either an abortion or live or still birth) have also been recorded. This will provide an indication of the prevalence of subsequent teenage pregnancies in England and Wales. In doing so, this article will also demonstrate the need to maintain and publish national data to monitor trends, evaluate interventions,

and support strengthening of public policies aimed at the prevention of further pregnancies among pregnant and parenting teenagers.

Methods

Data

This study used previously unpublished abortion data from abortion notification forms (HSA4 revised 1991, 2002, and 2006) routinely collected by the DH to determine the proportion of young women presenting for an abortion who have been pregnant at least once before (either resulting in a live or still birth or an abortion) and to assess the changes in these figures over time. This more detailed, population-level information was released on special request for research purposes.

For abortions performed in England and Wales, it is a legal requirement that official notification is supplied to the Chief Medical Officer under the Abortion Act 1967. The medical practitioner taking responsibility for the abortion must do this within 14 days of the procedure using an abortion notification form (HSA4). In the patient details section of the form under the heading “Parity” (Form HSA4 revised 2006, Section 3: F), the form provides space for the medical practitioner to include information on numbers of any previous pregnancies (resulting in live births and still births over 24 weeks; miscarriages and ectopic pregnancies; or abortions). This information is derived from hospital records and patient report. Data on spontaneous miscarriage and ectopic pregnancies were not incorporated into the analysis as these have only been available since 2003.

For this study, we requested data for women aged <20 years and ordinarily residents of England and Wales, from 1992 to 2013, in a cross-tabulated format to identify the number of abortions by the number of previous abortions and previous births by calendar year. These data were supplied as population-level summary data in an Excel spreadsheet. This permitted the identification of the number of young women who had experienced any combination of preceding pregnancy outcomes (none, only abortion, only birth, a combination of abortion, and birth). The data were cross-checked against published DH data on abortions, abortions after a previous abortion, and abortions after a previous birth for young women aged <20 years, which were extracted from the annual abortion statistics series published by the DH and ONS (1992–2013). Then, for each year, the number of abortions in this age group was divided by the midyear population estimates published by the ONS for women aged 15–19 years, to calculate rates per 1,000.

Ethical approval was not sought for this study as it was based on the secondary analysis of an existing, summarized anonymous data set presented at population level.

Analysis

The number of young women aged <20 years experiencing previous pregnancies was identified and used to calculate the proportion of abortions from first pregnancies and the proportion which were to second- or higher-order pregnancies (i.e., either after at least one previous birth or previous abortion). This was calculated for each year from 1992 to 2013, with 95% confidence intervals and is reported in Table 1 along with the proportion of previous abortions and previous births for 1992–2013 calculated using routinely published abortion data. This is

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