**Retrospective Reproductive Concerns among Women with Children**

**Extended Abstract**

**Introduction**

The widespread availability of reliable contraceptives and increased access to assisted reproductive technology has led to unprecedented reproductive choice among U.S. women. Even with more options available to control reproduction, there is evidence that many women undershoot or overshoot their reproductive goals. Even though most women express a desire to have children, between 15 and 20% of U.S. women end their reproductive years without becoming mothers by giving birth. Some women do not have clear reproductive goals, are ambivalent about motherhood, or are "okay either way" about getting pregnant. For decades in the U.S., approximately half of all pregnancies have been classified as unintended, although the percentage has declined to about 45% recently, attributable in part to increased use of long acting reproductive control (LARCs). Among women who want children and get pregnant, there is social pressure to have a "good" birth. The creation of reproductive desires and the ability to enact them is in part based in social location (e.g. social class), leading to concerns about stratified reproduction. Situational factors (e.g. not having a male partner, extended education, lack of affordable childcare) and biological (e.g. high blood pressure, endometriosis) also contribute to reproductive concerns.

There is little empirical evidence of women's concerns are about their reproductive choices and their and outcomes. We know of no studies that ask a random sample of United States women of prime reproductive age (25-45) what they might change about their reproductive paths if given the opportunity to change anything. In a previous paper, we presented evidence regarding the range of concerns expressed by U.S. women with parity zero

status. In the current paper we focus on women with parity one or higher. Separating the analysis into women with children and women without children makes clarifies meanings of the associations of some characteristics (e.g. age or relationship status) and specific reproductive concerns (e.g. unfulfilled fertility desires) with specific categories of reproductive concerns.

## Sample and Method

We use Wave I of the National Survey of Fertility Barriers (NSFB), a representative telephone survey of fertile and infertile women of reproductive age, between 25 and 45 years. The NSFB survey focused primarily on reproductive histories and experiences related to fertility and infertility.  For instance, women were asked questions about their views on motherhood, childbearing, and their experiences with various medical and non-medical fertility treatments. With the help of computer-assisted telephone interviews (CATI), data were collected from 4,796 women and some of their partners. The NSFB oversampled women from census tracts in which over 40% of residents were African American or Hispanic, and a Spanish language interview was offered. The response rate was 53% to the screener, which is consistent with recent declines in participation in telephone survey research.

For this study, we analyzed the open-ended responses to a question that asked women to reflect back on their reproductive history.  Specifically, women were asked:  "We have asked you many questions. If you could change anything about the decisions you have made about pregnancy and childbearing, what would you change?"  Responses to this question were recorded by interviewers, though not necessarily transcribed verbatim. Interviewers were trained to probe respondents for more information on open-ended questions, to list all responses reported, to leave detailed notes on respondent answers, and to clarify if any responses were

unclear. The responses were generally brief, ranging from a single sentence to a full paragraph. Not as in-depth as some qualitative interviews, this open-ended question did allow participants to provide some information in their own words after answering several questions with limited and fixed responses (e.g. strongly agree to strongly disagree).

Most (N=4,230) of the women responded to the question; approximately 61% said that they would change nothing. Two of the authors independently coded all responses and then met to resolve disagreements, settling on 75 categories. A third author combined these 75 categories into five broader categories: (1) no concerns, (2) concerns about unintended pregnancies or births, (3) concerns about unfulfilled fertility desires, (4) concerns about family, and (5) concerns about pregnancy experiences. The analytic sample for this study includes 3,115 women without children who responded to the question.

Some of the categories (e.g. pregnancy experiences) have little relevance for most women without children; we retained all five categories to allow for later comparisons between this sample and the sample of women with children

**Results**

Table 1 contains the multinomial logistic regression model of characteristics associated with types of retrospective concerns among women who have had children. Compared to women who "wouldn't change a thing", women who are more religious have lower odds of having concerns about unintended pregnancies. Compared to women who wouldn't change a thing, women with higher economic hardship, women who are employed, and women who have never married have higher odds of having retrospective concerns about unintended pregnancies. Older

age, having ever met criteria for subfecundity (compared to never), having private insurance (compared to not having it) are associated with higher odds of retrospective concerns about unfulfilled fertility desires, compared to not wanting to change a thing. Black women have lower odds of retrospective concerns about unfulfilled fertility desires, compared to not wanting to change a thing. Higher economic hardship and being employed full-time are associated with higher family concerns compared to not wanting to change a thing. Women who are employed full-time (compared to any other category) have lower odds, and women who identify as Black (compared to White) have higher odds of concerns about pregnancy, compared to not wanting to change a thing. The only characteristics not associated with any of the types of retrospective reproductive concerns are social support and identifying as Hispanic or Asian, compared to identifying as White.

In addition to comparing women in each retrospective concern category to women with no concerns, we also estimated models of the associations of characteristics and the odds of having each type of concerns compared to all the other types (See Table 2). Among women with parity 1plus, higher age and ever experiencing subfecundity (compared to never) are associated with higher odds of unfulfilled fertility desires compared to unintended fertility. Women who identify as Black or Hispanic (compared to White) and women who have never married (compared to those who ever have) have lower odds of have having unfulfilled fertility desires compared to unintended fertility. Private insurance (compared to any other insurance status), identifying as Hispanic (compared to White), and never marrying (compared to any other status) are associated with lower odds of family concerns compared to unintended fertility concerns. Women who have had an episode of subfecundity, who are employed full time, and who never married have lower odds of pregnancy concerns compared to unintended fertility

concerns. Higher religiosity is associated with higher odds of having pregnancy concerns compared to unintended fertility concerns. Higher age and having private insurance are associated with lower odds of family compared to unfulfilled fertility desires. Higher age, ever having an episode of subfecundity, having private insurance, and being employed full time are associated with lower odds of having pregnancy concerns compared to unfulfilled fertility concerns. Women who identify has Black have higher pregnancy concerns than unfulfilled fertility compared to White women. Ever having an episode of subfecundity and being employed full time are associated with lower odds of pregnancy compared to family concerns. Women who identify as Black have higher pregnancy than family concerns compared to white women. Similar to the comparisons with no concerns, social support and identifying as Asian are not associated with higher or lower odds of being in any of the concern categories, but unlike the comparison with no concerns, Hispanic women differ from White women in the comparison with unintended fertility.

## Conclusions

As expected, social location (e.g. economic hardship, insurance status, race/ethnicity) and life course indicators (e.g. age and marital status) are associated with differential odds of having any retrospective as well as the odds of having particular retrospective reproductive concerns among women with children. Compared to studies that focus on one reproductive issue at a time (e.g. abortion, infertility, unintended pregnancy, problem births, etc.), in this study we coded responses from a random sample of women asked to express their concerns. This approach differs from that of research that asks about reproductive experiences and then assumes that they are problematic or that assesses the psychosocial consequences of presumed problematic events. Because fertility research tends to focus on problematic events, it was interesting to find

that many women claimed that they had no retrospective reproductive concerns. The fact that the kinds of concerns (e.g. unfulfilled desires to have or not to have children, family building, pregnancy problems) are associated with situational and social location characteristics indicates either that some women have more definite expectations than others, that some women are more successful at  having their expectations met, or both, At a minimum, we find that, retrospective reproductive concerns are at least in part a reflection of socially constructed meanings of fertility, pregnancy, and families.

**Table 1. Multinomial logistic regression. Categories of retrospective concerns among women with children, N=3,115, NSFB.**

| Variable | Categories of Retrospective Concerns vs. No Concerns (e.g "Wouldn't Change a Thing") | | | | | | | | | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| | 1. Unintended | | | | 2. Unfulfilled | | | | 3. Family | | | | 4. Pregnancy | | | |
| | Beta | SE | P | Sig | Beta | SE | P | Sig | Beta | SE | P | | Beta | SE | P | Sig |
| Age (MC) | .00 | .01 | .783 | | .09 | .01 | .000 | ** | .01 | .01 | .409 | | .00 | .02 | .909 | |
| Subfecund | .11 | .11 | .329 | | .41 | .12 | .001 | ** | .26 | .14 | .061 | | -.31 | .17 | .077 | |
| Religiosity | -.06 | .02 | .003 | ** | -.02 | .02 | .482 | | -.02 | .03 | .450 | | .05 | .04 | .139 | |
| Social support (MC) | .01 | .02 | .533 | | .02 | .03 | .487 | | -.03 | .03 | .313 | | .01 | .04 | .794 | |
| Economic hardship (MC) | .13 | .03 | .000 | *** | .06 | .03 | .058 | | .08 | .04 | .031 | * | .01 | .05 | .911 | |
| Private health insurance | .16 | .14 | .243 | | .41 | .16 | .010 | * | -.24 | .16 | .140 | | -.10 | .21 | .620 | |
| Employed full-time | .33 | .12 | .004 | ** | .07 | .12 | .567 | | .29 | .14 | .037 | * | -.47 | .18 | .009 | ** |
| Black | .19 | .15 | .201 | | -.58 | .18 | .001 | ** | -.18 | .19 | .328 | | .50 | .23 | .028 | * |
| Hispanic | -.07 | .15 | .640 | | -.52 | .17 | .003 | | -.33 | .19 | .078 | | -.04 | .24 | .878 | |
| Asian | -.10 | .42 | .812 | | -.19 | .40 | .644 | | -1.06 | .73 | .147 | | .38 | .54 | .481 | |
| Never married | .95 | .15 | .000 | *** | -.09 | .23 | .714 | | -.08 | .23 | .718 | | -.20 | .30 | .497 | |
| Constant | -2.03 | .15 | .000 | *** | -2.10 | .17 | .000 | ** | -2.02 | .18 | .000 | *** | -2.19 | .22 | .000 | *** |
| Pseudo R squared | .080 | | | | | | | | | | | | | | | |

Note: Base category is "Wouldn't change a thing."

Note: Subsample includes 3,115 women with children.

Note: Data source is the National Survey of Fertility Barriers.

Note: MC = Mean Centered

Note: Comparison Groups for Indicator Variables: (Not Subfecund, No Private Insurance, Not Employed Full-time; White; Ever Married)

**Table 2. Significance tests for differences among grioups with retrospective reproductive concerns (N=3,115), NSFB.**

**Significance Tests for difference among Concerns**

| | Unintended vs. | | | Unfulfilled vs. | | Family vs. |
|---|---|---|---|---|---|---|
| Variable | Unfulfilled | Family | Pregnancy | Family | Pregnancy | Pregnancy |
| | *Beta* | *Beta* | *Beta* | *Beta* | *Beta* | *Beta* |
| Age (mean-centered) | .083 *** | .007 | -.004 | -.075 *** | -.087 *** | -.012 |
| Subfecund | .298 * | .153 | -.418 * | -.145 | -.716 *** | -.571 ** |
| Religiopsity (mean-centered) | .049 | .044 | .118 ** | -.004 | .070 | .074 |
| Social support (mean-centered) | .004 | -.043 | -.005 | -.047 | -.009 | .038 |
| Economic hardship (mean-centered) | -.061 | -.045 | -.119 * | .016 | -.059 | -.075 |
| Private health insurance | .248 | -.395 * | -.261 | -.643 ** | -.508 * | .134 |
| Employed full-time | -.262 | -.040 | -.800 *** | .222 | -.538 ** | -.761 *** |
| Black | -.770 *** | -.371 | .314 | .399 | 1.084 *** | .685 * |
| Hispanic | -.452 * | -.256 * | .035 | .196 | .487 | .291 |
| Asian | -.084 | -.960 | .483 | -.876 | .568 | 1.444 |
| Never married | -1.036 *** | -1.032 *** | -1.154 *** | .004 | -.118 | -.121 |
| Constant | -.065 | .016 | -.160 | .080 | -.096 | -.176 |

Note: Data Source is the National Survey of Fertiltiy Barriers.

Note: *=p<.05; **=p<.01; ***=p<.001.