



# 3

## WHY THE GAP BETWEEN INTENT AND BEHAVIOR?

### KEY FINDINGS

- Many know little or nothing about contraception.
- Many fear the side effects of contraception.
- These fears reduce their likelihood of using effective methods.
- Myths and misinformation about pregnancy and contraception are prevalent.
- Many simply don't believe that contraception is very effective.
- Many are ambivalent about the timing and circumstances under which to start a family.

The previous section showed, in essence, that the overwhelming majority of unmarried young adults report that they do not want to get pregnant or get their partner pregnant at this time in their lives—yet they are clearly not taking adequate measures to protect themselves from pregnancy, and a small but important portion admit it is likely they will have unprotected sex in the near future. In this section, we present data on eight sets of survey findings that help to explain this apparent irrationality—this “fog zone” in which so many young adults seem to live—that undoubtedly increases their risk of unplanned pregnancy. The overlapping factors identified here likely limit the range and variety of contraceptive methods that young adults feel are realistic options for them to use, impair their ability to use their method of contraception carefully and consistently, and undermine their basic commitment to using contraception at all.

### **One: Unmarried young adults know little or nothing about many contraceptive methods, including some of the most effective ones.**

Not surprisingly, nearly all unmarried young adults say they are aware of condoms and birth control pills, and the vast majority say they are aware of emergency contraception (EC). However, long-acting methods of contraception are less well known. Three-quarters of young adults have heard of the intrauterine device (IUD), but fewer than half (44%) say they have ever heard of the implant (Table 3).

*About one-third of young adults say they know little or nothing about condoms and 63% report knowing little or nothing about birth control pills.*

Men’s awareness of some of the more common methods of contraception lags behind women’s only slightly. However for those methods that are less well-known, the gender gap is wider. There are also some notable differences by age. Older teens, for example, are less likely than 20-somethings to be familiar with less common methods of contraception such as Depo-Provera (“the shot”), the IUD, and the implant. Hispanic young adults are less likely than their peers in other racial/ethnic groups to be aware of different methods of contraception as well.

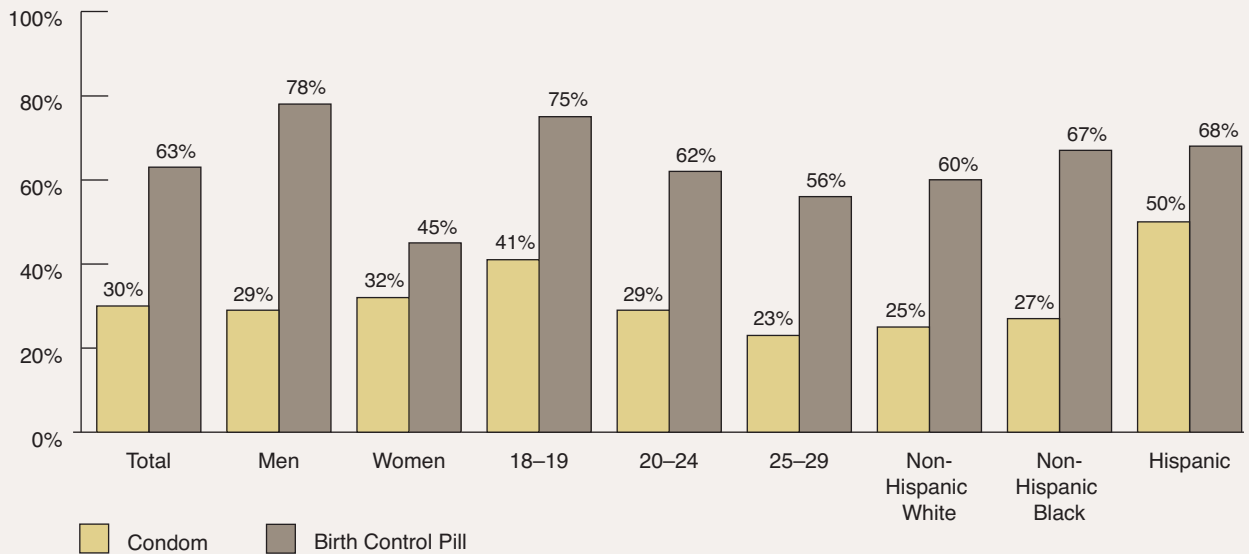
Even among young adults who have heard of various methods, many say they know little about them. While it might be expected for young adults to report they know little or nothing about less widely-used methods such as IUDs and Depo-Provera (“the shot”), many also say they know little about more common methods such as condoms and the birth control pill. In fact, nearly one-third (30%) of unmarried young adults say they know little or nothing about condoms, and 63% report knowing little or nothing about birth control pills (Chart 12).

As Chart 12 shows, reported knowledge about particular methods of contraception differs considerably by age and somewhat by race/ethnicity. Reported lack of knowledge about such common methods as the pill and the condom is highest for older teens and decreases with age. The percentage who say they have little or no knowledge about condoms is particularly high among Hispanic young adults. Those who say they know little or nothing about less common methods such as the shot and the

**TABLE 3** Percent of Unmarried Young Adults Age 18–29 Who Have Heard of Various Contraceptive Methods

	Total	Men	Women	Age 18–19	Age 20–24	Age 25–29	Non-Hispanic White	Non-Hispanic Black	Hispanic
Condom	99%	99%	99%	99%	99%	100%	100%	99%	98%
Pill	96%	94%	98%	94%	98%	96%	99%	97%	89%
Emergency Contraception	91%	87%	95%	90%	92%	90%	96%	86%	82%
Patch	88%	81%	96%	87%	89%	87%	91%	92%	78%
Depo	79%	69%	90%	74%	81%	81%	83%	82%	71%
IUD	75%	65%	87%	69%	78%	77%	81%	76%	60%
Foam, Jelly, or Cream	70%	64%	76%	60%	73%	74%	74%	71%	58%
Rhythm/Natural Family Planning	60%	53%	67%	47%	61%	67%	64%	54%	50%
Implant	44%	37%	52%	38%	42%	51%	47%	46%	34%

**CHART 12** Unmarried Young Adults Age 18–29 Who Say They Know Little or Nothing About the Following Contraceptive Methods



Based on responses to the following question for each method: “Overall, how much do you feel you know about x method and its use? Would you say you know nothing, you know a little, you know a lot or you know everything about x method?” Asked only among those who have heard of the method. Shown as a percent of all respondents.

IUD (not shown) is high across all subgroups—ranging from 65% to 77% for the shot, and from 56% to 80% for the IUD. Interestingly, Hispanic young adults are less likely than non-Hispanic whites and non-Hispanic black peers to report little or no knowledge of these less widely-used methods.

**Two: Unmarried young adults both fear the side effects of contraception and overestimate them as well...**

Even though current clinical evidence suggests otherwise, many young adults believe that it is *highly likely* they will experience serious side effects if they use certain methods of contraception. For example, 27% of unmarried young women (and 31% of unmarried young adults overall—not shown) report that it is either quite likely or extremely likely that using birth control pills or other hormonal methods for a long period of time will lead to a serious health problem like cancer (Chart 13). Yet, to date,

*Many young adults believe that it is highly likely they will experience serious side effects if they use certain methods of contraception.*

clinical trials suggest that developing serious health problems *as a result of* using the pill is clearly the exception rather than the rule.<sup>c: 8, 9</sup>

Similarly, 30% of unmarried young adults say that it is either extremely likely or quite likely that the IUD will cause an infection. However, again, clinical studies suggest much lower rates of serious side effects than what is implied by the perceptions of the women surveyed here.<sup>d: 10, 11</sup>

It is somewhat understandable that many young adults (and probably the general public for that matter) overestimate the likely side effects of using contraception. In particular, it is easy to conflate the fact that some users of a particular method do experience certain health problems with the notion that using that method *caused* the health problems. And an increased risk of health problems can also be easily confused with a notion that health problems are highly likely, even if the real chances are less than 1%.

It is also the case that many young adults do not generally view the risks associated with using contraception in a relative context—that is, the health risks that may result from using contraception as compared to the health risks that may result from not using contraception. To the extent they do, young adults' perceptions are drastically skewed toward a negative view of contraception. For example, more than one-third of unmarried young adults (37%) report that taking birth control pills for one year is riskier than having a baby. In reality, pregnancy and delivery are nearly 20 times riskier than using birth control pills for women under age 35 who don't smoke.<sup>12</sup>

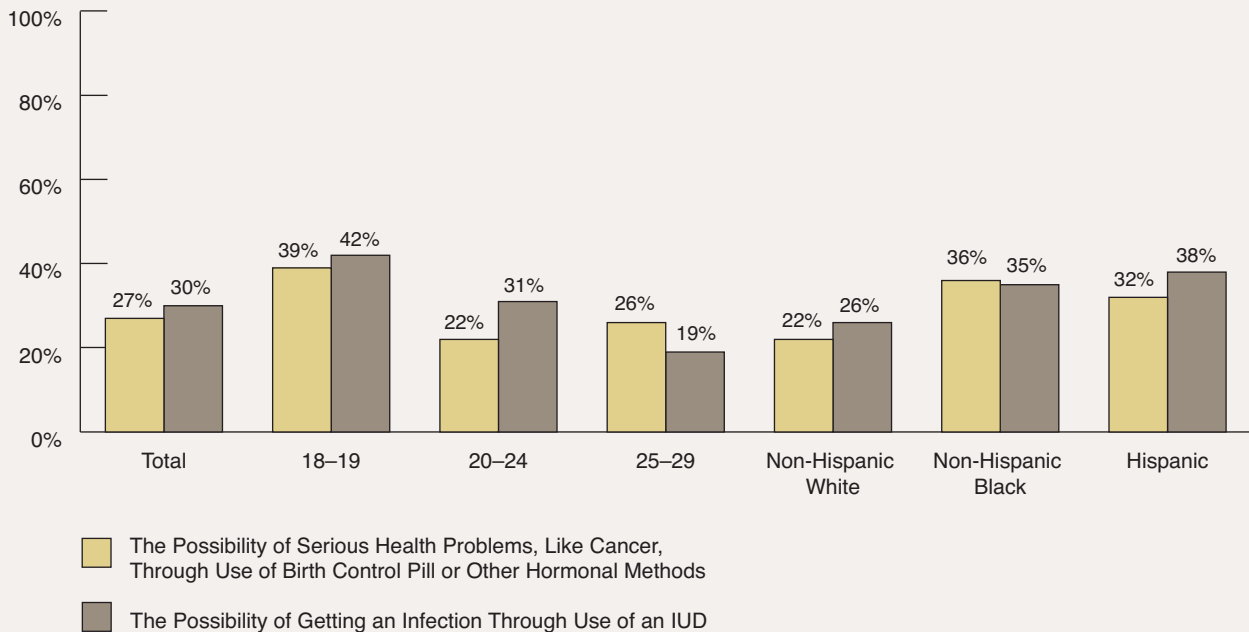
In addition to expressing concerns about side effects from various contraceptive methods, many unmarried young adults fail to recognize the health *benefits* of contraception. For example, only 24% of young adults correctly report that using birth control pills can reduce the likelihood

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c. For example, according to a recent meta-analysis by the Mayo Clinic of 39 clinical studies, 13% of all women in the general population (including those who did and did not use the pill) will develop breast cancer. Among them, this percentage was about one-fifth higher for women who have used oral contraceptives as compared to those who had not, roughly *suggesting an additional two to three percent chance of developing breast cancer as the result of being on the pill*. The pill has also been associated with an increased risk of heart attack and stroke, but again, the actual risk is orders-of-magnitude-lower than the notion of “highly likely,” with about 1.5 deaths per year in 100,000 non-smoking women under age 45 due to pill use. While not trivial, these numbers are far lower than suggested by many young adults' perceptions that side effects are highly likely. Put into context, the risk of death from driving a car for a year is more than 10 times higher than risks associated with pill use (approximately 17 per 100,000 men and women who die each year due to driving).

d. For example, randomized control trials determined that less than one percent of women developed Pelvic Inflammatory Disease (PID) or endometriosis in the first two years after IUD insertion. These rates fell even further in later years. The rates for women using a levonorgestrel-releasing IUD and those using the copper-T IUD were similar. The literature is somewhat variable as to whether rates for these conditions are higher in connection to IUD insertion or that IUD insertion causes infection. Regardless of causality, however, it is clear that the rates of infection are much lower than young women perceive.

**CHART 13** Unmarried Women Age 18–29 Who Believe Serious Side Effects of Certain Methods of Contraception are Either Quite Likely or Extremely Likely



Based on responses to the following questions: “For each, please tell me how likely you think it is that you would experience the effect. Even if you don’t currently have a partner or have never used the method yourself, please think about what might happen if you did. If you used the birth control pill or other hormonal methods for many years, how likely is it to give you a serious health problem, like cancer? Would you say it is not at all likely, slightly likely, quite likely, or extremely likely? If you used an IUD, how likely is it to give you an infection? Would you say it is not at all likely, slightly likely, quite likely, or extremely likely?”

that women will get certain kinds of cancer when, in fact, the use of birth control pills has been found to reduce the risk of endometrial and ovarian cancer.<sup>13</sup> Birth control pills also have been found to reduce blood loss during menstruation (which can decrease the risk of iron deficiency anemia) and certain premenstrual symptoms related to menstruation.<sup>14</sup>

**....and these fears reduce women’s likelihood of using effective methods.**

Individuals are not necessarily wrong to be concerned about side effects. An additional 1.5 stroke deaths per 100,000 women due to birth control pill use is, for some, a frightening outcome and sufficient evidence to dissuade them from using the pill—this is not a misperception but rather a heightened aversion to risk. However, many are dissuaded from pill use because they overestimate the likelihood and frequency of serious health effects. In this case, misperceptions about the likelihood of serious side effects put

young adults at risk of unplanned pregnancy by discouraging them from using more effective methods of contraception. Chart 14 shows the percentage of unmarried young women who both think the following side effects are at least somewhat likely, and also report that their fear of this side effect makes them less likely to use that method.

Note that half of all young women in the survey say that cancer or other serious health risks due to pill use are at least somewhat likely *and* that this reduces their likelihood of using birth control pills or other hormonal methods (Chart 14). Similarly, 54% of women say they believe that getting an infection from an IUD is at least somewhat likely and report that this would reduce their likelihood of using one. The reduced likelihood of using such effective methods of birth control due to concerns about serious health risks is substantial across all racial/ethnic groups and age groups.

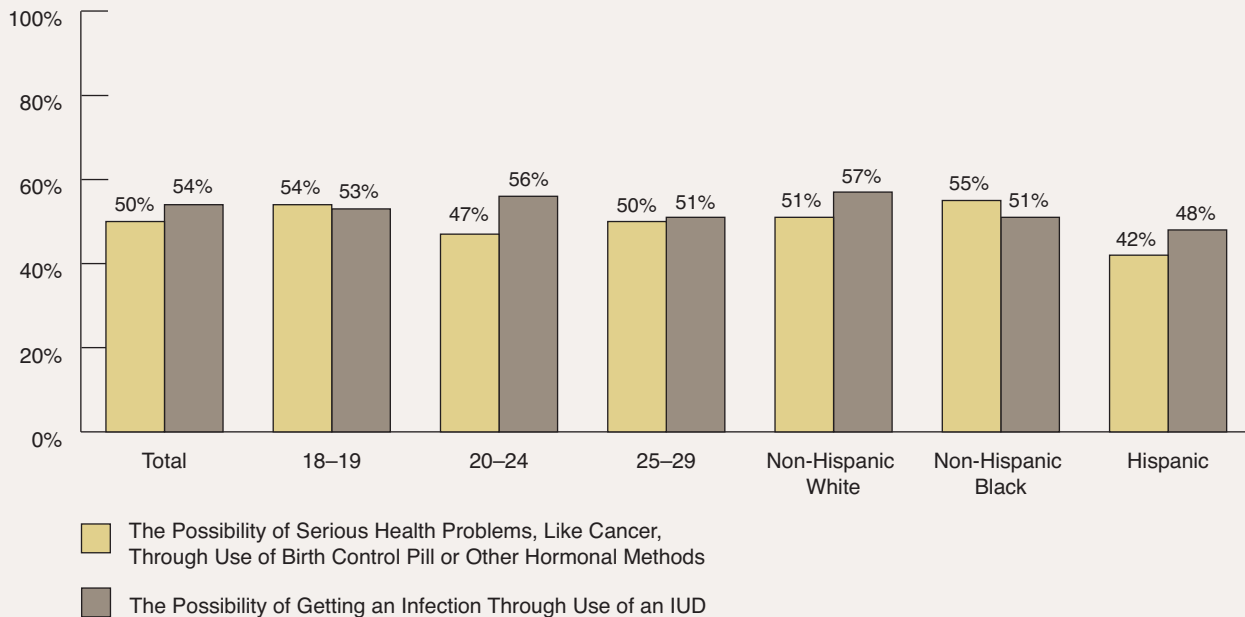
Additional perceived side effects that women report reduce their likelihood of using certain methods include:

- **Weight Gain**—36% of women say it is at least somewhat likely that the pill will cause them to gain weight and that this reduces their likelihood of using the pill, even though to date there is no clinical evidence of an association.<sup>15</sup> Again, the fact that a person who is on the pill gains weight does not necessarily mean that weight gain was caused by the pill.
- **Severe Mood Swings**—40% of women say it is at least somewhat likely that the pill will cause *severe* mood swings and that this reduces their likelihood of using it. There is no research to date, however, to support this. For example, studies have found no causal link between clinical depression and pill use (although current clinical advice is that women who have concerns about an underlying mental health issue should seek explicit evaluation and treatment).<sup>16</sup>

In addition to concerns about side effects, many young adults are confused about how specific contraceptive methods work, which may in turn make them disinclined to adopt and use a method. For example, nearly half of young adults (46%) believe that IUDs can move around in a woman's body (in reality the IUD remains in the uterus and rarely moves at all), and 40% of young adults believe that a woman must undergo a surgical operation in order to obtain an IUD (there is no surgery involved). Nearly one-quarter (24%) incorrectly believe that long-acting methods of contraception cannot be discontinued early. Roughly half of unmarried young adult women also incorrectly believe that the possible negative side effects from Depo-Provera (namely, reduction in bone mass) lasts an entire lifetime, even though such reductions in bone density have been found to

*36% of women say concern about weight gain reduces their likelihood of using the pill.*

**CHART 14** Unmarried Women Age 18–29 Who Believe the Side Effects Are Likely and That This Makes Them Less Likely to Use That Method



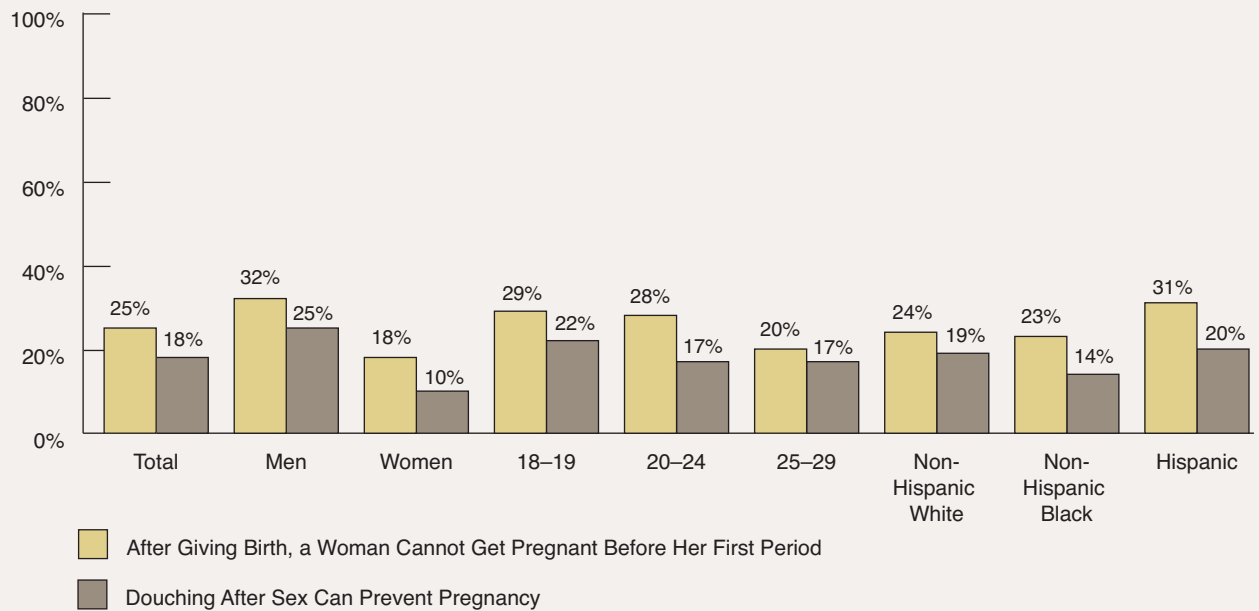
Based on those who responded “somewhat,” “quite,” or “extremely likely” to the following questions: “For each, please tell me how likely you think it is that you would experience the effect. Even if you don’t currently have a partner or have never used the method yourself, please think about what might happen if you did. (1) If you used the birth control pill or other hormonal methods for many years, how likely is it to give you a serious health problem like cancer? (2) If you used an IUD, how likely is it to give you an infection? Would you say it is not at all likely, slightly likely, quite likely, or extremely likely?” And based on those who responded “somewhat” or “a lot” to the following questions: (1) “How much does the possibility of serious health problems, like cancer, reduce your likelihood of using birth control pills or other hormonal methods?” (2) “How much does the possibility of getting an infection reduce your likelihood of using an IUD?”

be reversible and are largely back to normal within two and a half years of discontinuing this method.<sup>17</sup>

**Three: Many unmarried young adults also harbor a number of myths and misinformation about pregnancy and contraception as well.**

The survey also probed how selected myths and misperceptions about the chances of getting pregnant and the proper use of particular methods may serve to further undermine young adults’ ability to use contraception effectively. Unmarried young adults were asked a set of six questions to help gauge their knowledge regarding the likelihood of pregnancy under

**CHART 15** Knowledge About Pregnancy—Unmarried Young Adults Age 18–29  
Who Incorrectly Believe the Myths Below



various circumstances (See Appendix 2 for the actual questions). One-fifth (20%) were unable to answer more than half correctly, based on true/false response.

For example, one-quarter of young adults incorrectly believe that a woman cannot get pregnant after she has given birth if she has not yet had her period,<sup>18</sup> and nearly one in five (18%) incorrectly believe that douching after sex can prevent pregnancy (Chart 15).<sup>19</sup> Perhaps not surprisingly, men seem to know less about pregnancy risk than women. Myths are also more common among those who are relatively younger and more common among Hispanics compared to their non-Hispanic white and non-Hispanic black peers (Chart 15).

Unmarried young adults were also asked whether they believe the following incorrect statements:

- Pregnancy is less likely if one has sex standing up.
- A woman cannot get pregnant while she is breastfeeding.

Although most answered these two questions correctly, there were a few notable exceptions. Hispanic young adults are more likely to incorrectly

believe that a woman cannot get pregnant while breastfeeding (16%), and to believe that having sex standing up reduces the chances of pregnancy (20%). Men are also more likely to believe that having sex standing up reduces the risk of pregnancy (18%).

Similarly, when presented with 23 questions related to particular methods of contraception, one-third (32%) of unmarried young adults were unable to answer more than half correctly. On average, respondents were able to answer 13 out of 23 questions correctly, based on true/false response. (See Appendix 2 for the actual questions.)

Of course, for any given contraceptive method, one might expect knowledge gaps and myths among people who have never used it. But the following results show that some method-specific myths are not trivial even among young adults who have *used* the method before. For example, among unmarried young adults who have ever relied on birth control pills for pregnancy protection, nearly half incorrectly believe that you should take a break from the pill every few years (Chart 16).<sup>20</sup> Some 14% incorrectly believe that birth control pills are effective even if a woman misses taking her pills two or three days in a row, and 14% incorrectly believe a woman is unable to get pregnant for two months after discontinuing the pill (Chart 16).<sup>21</sup>

*18% of men incorrectly believe having sex standing up reduces the risk of pregnancy.*

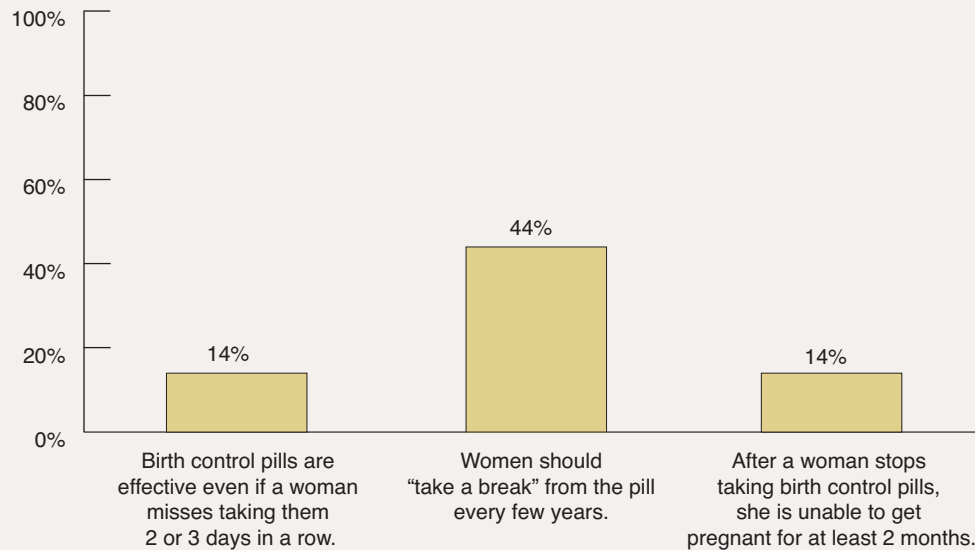
Among unmarried young adults who have ever used condoms, more than one-third (37%) incorrectly believe it is okay to use petroleum jelly as a lubricant for latex condoms when, in fact, using petroleum jelly as a lubricant actually increases the likelihood that the condom can break (Chart 17).<sup>22</sup> Similarly, nearly one-quarter (24%) incorrectly believe that wearing two latex condoms provides extra protection (wearing two latex condoms actually increases the likelihood that both condoms will break due to increased friction).<sup>23</sup> A surprisingly large share of young adults who have used condoms (27%) also did not know that it is important for a man to pull out right after ejaculation, holding the condom (Chart 17).

Among those who have relied on either the rhythm method or natural family planning,<sup>e,24</sup> 40% do not know when a typical woman's most fertile time of the month is (midway between periods). Similarly, among those who have had sex but report using either no method of contraception

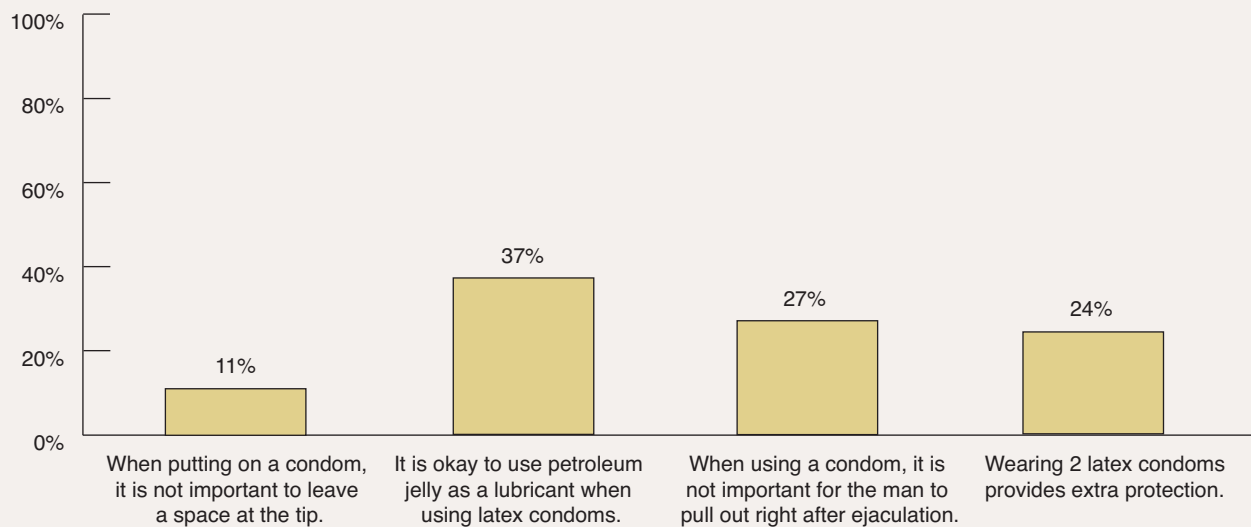
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e. Both the rhythm method and natural family planning are considered fertility awareness-based methods of family planning. The rhythm method is generally not considered to be very effective (the typical use failure rate is approximately 25%). However, more formal natural family planning methods—those that assess cervical mucus or rely on a variety of signs of fertility—have been found to be more effective. In particular, women who have received specific instruction on natural family planning methods are at lower risk of experiencing an unintended pregnancy than those who less formally rely on these types of methods.

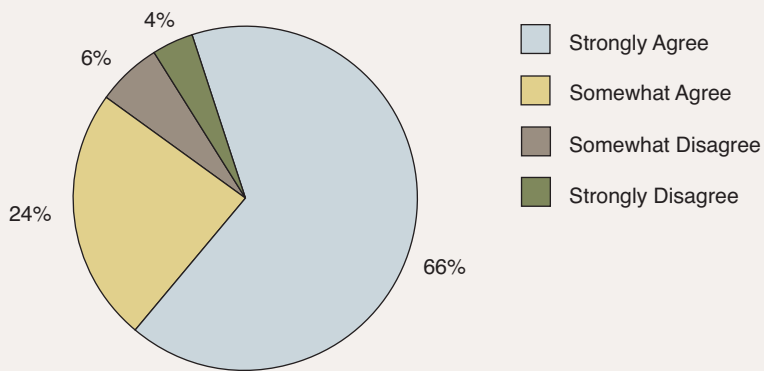
**CHART 16** Among Unmarried Young Adults Age 18–29 Who Have Ever Relied On Birth Control Pills, Those Who Incorrectly Believe the Myths Below



**CHART 17** Among Unmarried Young Adults Age 18–29 Who Have Ever Used Condoms, Those Who Incorrectly Believe the Myths Below



**CHART 18** Unmarried Young Adults Age 18–29 Who Agree They Have All the Information They Need to Avoid an Unplanned Pregnancy



Based on responses to the following question: “Do you strongly agree, somewhat agree, somewhat disagree, or strongly disagree with the statement: ‘I have all of the information I need to avoid an unplanned pregnancy.’”

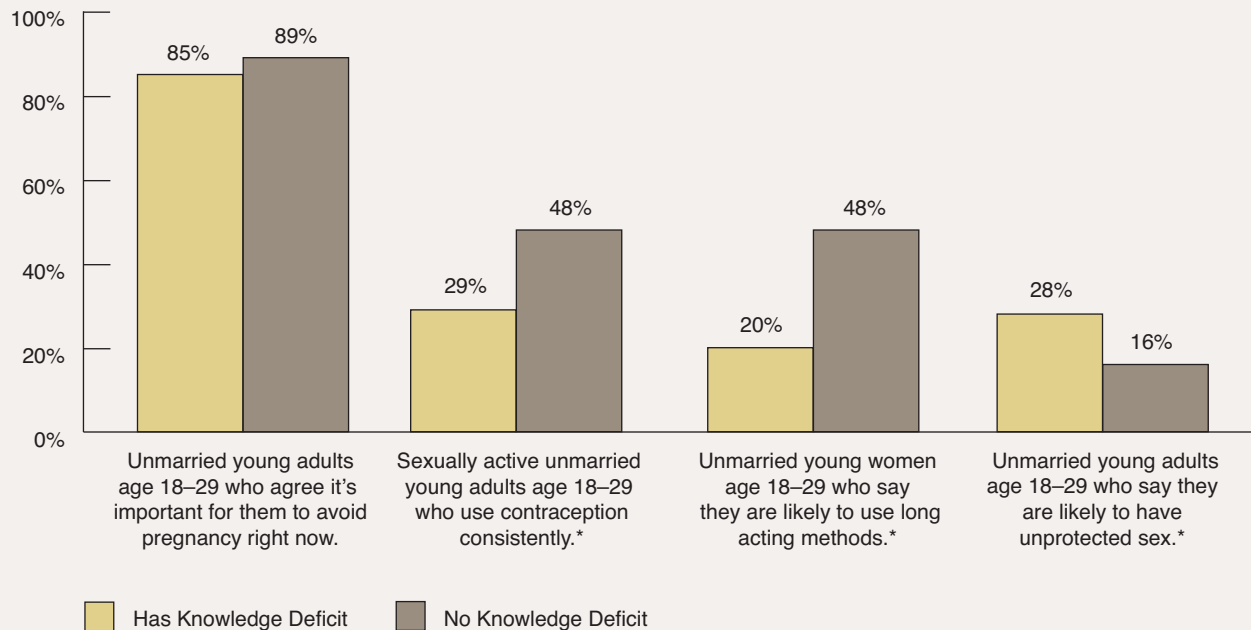
or a method other than condoms, a hormonal or long acting one (and therefore could be considered at risk for pregnancy), 68% do not know when the most fertile time is. In addition, 24% of women who have ever used Depo-Provera believe that a woman is still protected from pregnancy for at least three months after missing her shot (Depo-Provera should be administered every three months in order to be effective).

**Four: Even though many unmarried young adults have significant gaps in their knowledge about contraception and fertility and continue to hold onto some myths, they *think* they know enough to prevent unplanned pregnancy.**

Despite the many shortcomings in unmarried young adults’ knowledge about contraception and fertility noted previously, nearly all say they have all the knowledge they need to avoid an unplanned pregnancy—fully two-thirds *strongly* agree that they do, and another quarter (24%) somewhat agree that they do (Chart 18). The proportion who strongly agree that they have all the knowledge they need to avoid an unplanned pregnancy approaches or exceeds two-thirds across every subgroup (not shown), with one notable exception—among older teens (age 18–19), only 56% strongly agree that they have all the information they need to avoid an unplanned pregnancy.

*Nearly all young adults say they have all the knowledge they need to avoid an unplanned pregnancy.*

**CHART 19** Attitudes and Behavior Related To Pregnancy Prevention, by Presence of Knowledge Deficit



\* significant at  $p < .05$

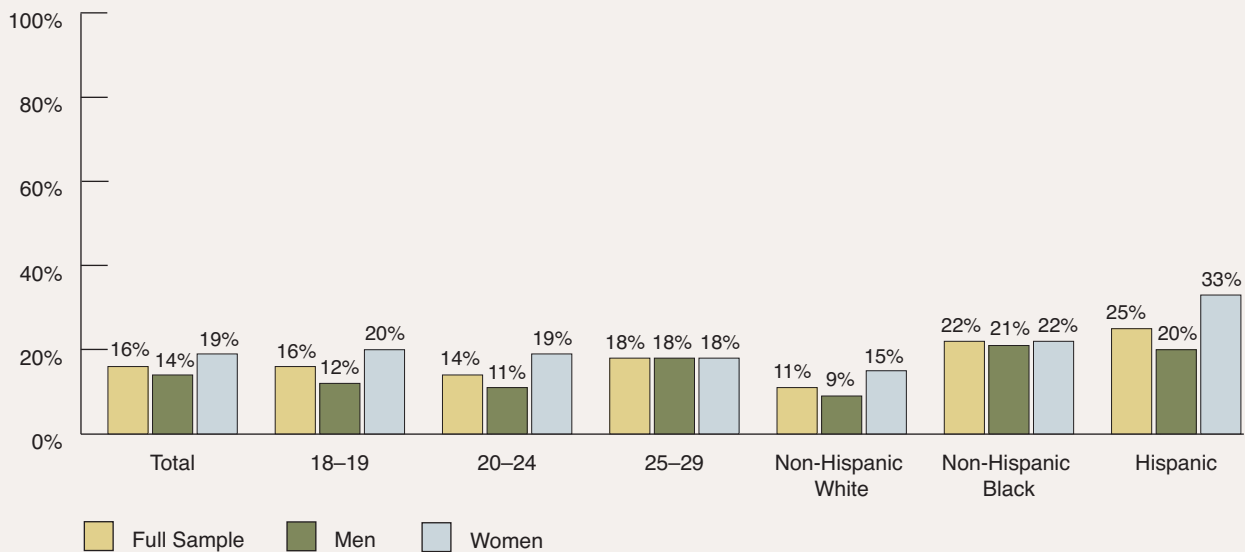
Even among those who answered *less than half* of all the pregnancy and contraceptive knowledge questions described above correctly, 81% agreed that they had all the knowledge they need and 52% strongly agree they have all the knowledge they need (not shown). And yet, additional analysis shows that those who do have these knowledge gaps are significantly less likely to protect themselves from pregnancy than those who don't (Chart 19). Those with knowledge gaps are 40% less likely to use contraception consistently, 58% less likely to consider using long-acting methods (among women), and nearly twice as likely to say they will probably have unprotected sex in the near future.<sup>f</sup>

**Five: Unmarried young adults overestimate the general odds of getting pregnant and their own odds of being infertile.**

Another factor that may undermine unmarried young adults' careful and consistent use of contraception is that many overestimate the general

<sup>f</sup>. This is the only set of results for which statistical significance of differences between groups of respondents was tested. All other differences between subgroups discussed elsewhere in the report have not been tested for statistical significance.

**CHART 20** Unmarried Young Adults Age 18–29 Who Believe it is Quite or Extremely Likely That They Are Infertile, by Gender

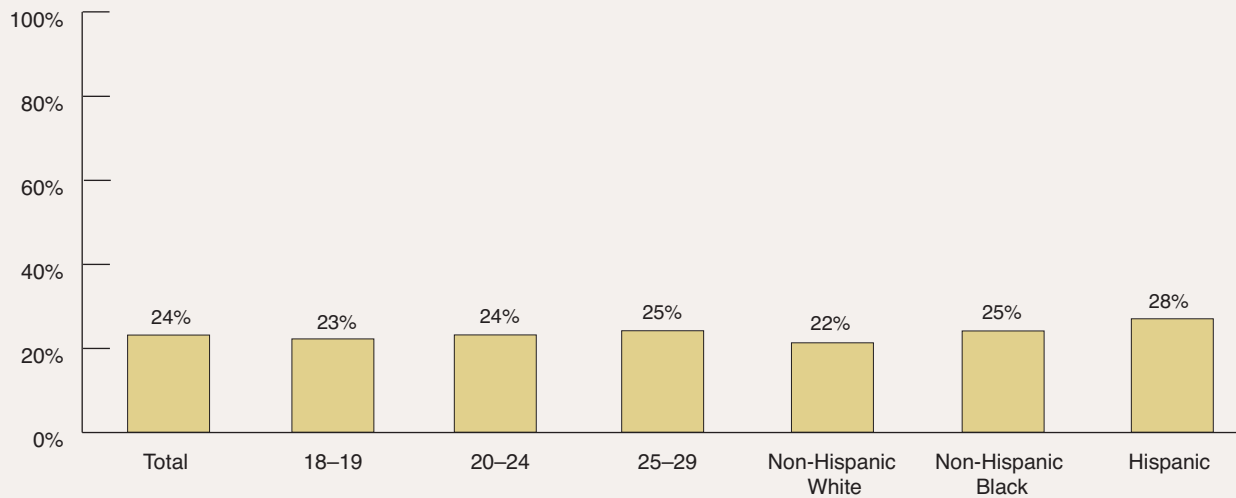


Based on responses to the question: “Some people are unable to become pregnant, even if they want to. How likely do you think it is that you are infertile or will have difficulty (IF FEMALE: getting pregnant) (IF MALE: getting a woman pregnant) when you want to? Do you think it is not at all likely, slightly likely, quite likely, or extremely likely?”

likelihood of pregnancy from unprotected sex and the likelihood that they themselves are infertile, which in turn may lead them to think they don’t need to use contraception. For example, more than one in five unmarried young adults (22%) believe there is an almost certain chance that pregnancy will typically occur after just one act of unprotected intercourse. While it is the case that pregnancy *can* occur after one act of intercourse, the likelihood of it happening is actually between 3% and 5% on average.<sup>25</sup> That is, many young adults overestimate their chance of getting pregnant from unprotected sex. On the one hand, this might encourage young adults to be more careful in using contraception. On the other hand, if one believes that pregnancy is nearly certain after one act of unprotected sex and pregnancy does *not* occur, one might be more likely to risk having unprotected sex again and may even believe that he or she is infertile.

This logic chain helps to explain the finding that 16% of young adults overall (19% of women and 14% of men) report that it is either quite likely or extremely likely that they are infertile (Chart 20). Overall, 59% of women and 47% of men say it is at least slightly likely they are infertile (not shown). Unmarried non-Hispanic white young adults are roughly

**CHART 21** Unmarried Young Women Age 18–29 Who State Their Concerns About Infertility Are Based on Information From a Doctor



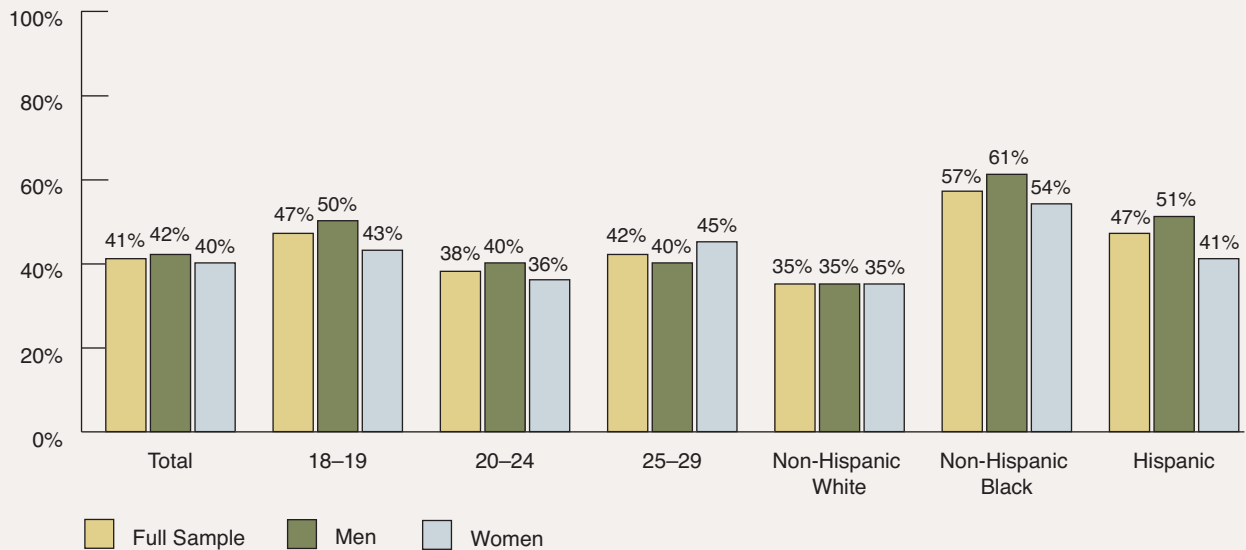
Based on response of YES to the question: “Which of the following are reasons why you think you might be infertile or have difficulty getting pregnant when you want to? A doctor has told you that you are infertile or that you might have difficulty getting pregnant.”

half as likely to express fertility concerns compared to their non-Hispanic black and Hispanic peers. Unmarried Latina young adults are particularly likely to believe they are infertile—33% believe it is extremely likely or quite likely that they are infertile.

*59% of women and 47% of men say it is at least slightly likely they are infertile even though most are not basing their concern on information from a doctor.*

What is the reality regarding infertility? Data on the precise proportion of young men and women who are unable to get pregnant are limited, however, what data are available suggest that young women *seriously overestimate* their likelihood of infertility. Published results from the NSFG, for example, show that among women age 15–29, only 8.4% have impaired fecundity (measured as an inability to conceive or carry a baby to term).<sup>26</sup> A similar measure, infertility, refers just to the inability to conceive. This is measured among married women only, and is equal to 6.3% among those 15–29.<sup>27</sup> These measures are two to three times lower than the proportion reported above who believe they are quite likely or extremely likely to be infertile. Comparable data are not available for men, however it is likely that they too overestimate the chances that they are infertile. While the incidence of infertility among the young adult population is of concern, misperceptions regarding infertility are also problematic—those young adults who incorrectly believe they are infertile may discover unexpectedly that they are not.

**CHART 22** Unmarried Young Adults Age 18–29 Who Believe There is a 50% Chance or Greater of Getting Pregnant if on the Pill For a Year, by Gender



Based on response to the question: “Overall, if a couple is having sex regularly and the woman is using birth control pills, what are the chances of her getting pregnant in a year? Please give me a number from 0-100 where 0 means no chance and 100 means a 100% chance.”

Interestingly, the vast majority of women (75%) are *not* basing their fertility concerns on actual information from their doctor (Chart 21). Only about one-quarter of women who report that it is either extremely likely or quite likely they are infertile have ever been told by a doctor that they may have difficulty getting pregnant. Some are basing their views on other family members who believe they themselves are infertile, or on having had unprotected sex in the past without getting pregnant.

**Six: Many simply don’t believe that contraception is very effective.**

Although many unmarried young adults overestimate the general odds of getting pregnant, and many tend to underestimate their *own risk of getting pregnant* from unprotected sex (due in no small part to their perceptions of impaired fertility), they also severely underestimate the effectiveness of commonly used contraceptive methods. In fact, more than four in ten unmarried young adults report that the chance of getting pregnant within a year while using the birth control pill is 50% or greater. Put another way, many young adults believe that there is more than a 50/50 chance of getting pregnant even if you are using a highly effective method of birth control such as the pill (Chart 22).

This belief persists despite research suggesting that the pill is typically 92% effective, meaning that couples who are using the pill have an 8% chance of getting pregnant in one year. If they use the pill perfectly (consistently and correctly), the chance of getting pregnant in one year drops to less than 1%.<sup>28</sup>

Misconceptions about the effectiveness of the birth control pill vary slightly by age and quite dramatically by race/ethnicity. While there are virtually no differences by gender, young adults who are either younger (age 18–19), non-Hispanic black, or Hispanic are more likely than their peers to doubt the effectiveness of the pill. In fact, nearly 6 out of 10 non-Hispanic black young adults report that you have a 50% chance or greater of getting pregnant while using the pill.

Young adults also tend to underestimate the effectiveness of some methods of contraception relative to others. In particular they fail to recognize that those methods that are less dependent on user compliance tend to be more effective over time in preventing unplanned pregnancy. To the extent that these misperceptions dissuade young adults from using more effective methods, this may increase their risk of unplanned pregnancy.<sup>g, 29</sup>

As the following chart shows, when asked which methods are more effective, many women incorrectly believe that the IUD and birth control pills are equally effective at protecting against unplanned pregnancy, and nearly one-third (32%) falsely report that birth control pills are more effective than the IUD (Chart 23). Only half correctly report that the IUD is more effective than the pill.

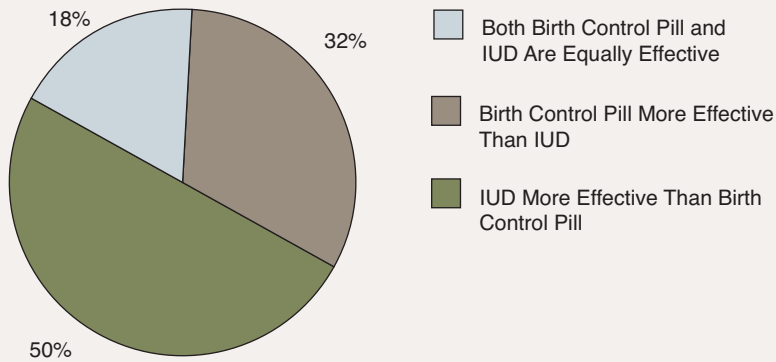
The effectiveness of condoms is even more dependent on user compliance than the pill. That is, users must wear a condom or insist that their partner does each time they have sex in order to fully protect themselves from unplanned pregnancy and sexually transmitted infections. In fact, the chance of getting pregnant while using condoms is nearly two times greater than the chance of getting pregnant while using birth control pills, but almost half of young adults think that condoms are either equally or more effective than birth control pills (Chart 24).

Similarly, although women using condoms are five times more likely to have an unplanned pregnancy within the first year of using condoms

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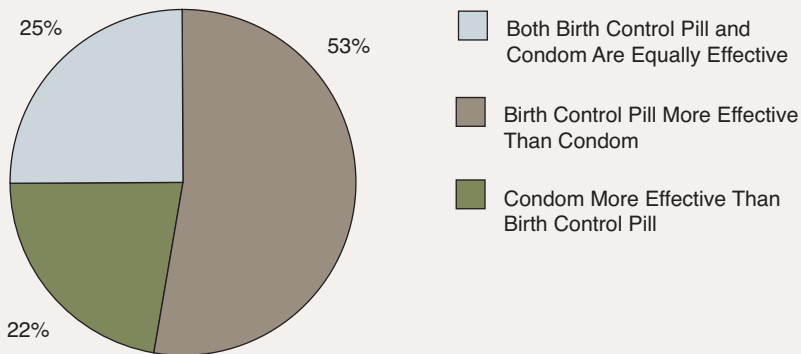
g. For example, some methods, such as the birth control pill, require high user compliance compared to long-acting methods. That is, the woman must remember to take the pill every day in order for it to be effective. Other methods, such as the IUD, do not require the user to do anything on a daily basis. These methods are sometimes considered “forgettable” methods because they require no additional compliance on the part of the user after they are inserted. Because many women find it hard to remember to take a pill every day, typical use failure rates for methods such as the birth control pill are higher than those for long-acting methods such as the IUD that are not user dependent—8 % versus less than 1% respectively.

**CHART 23** Unmarried Young Adults Age 18–29, Perceived Relative Effectiveness of Contraceptive Methods



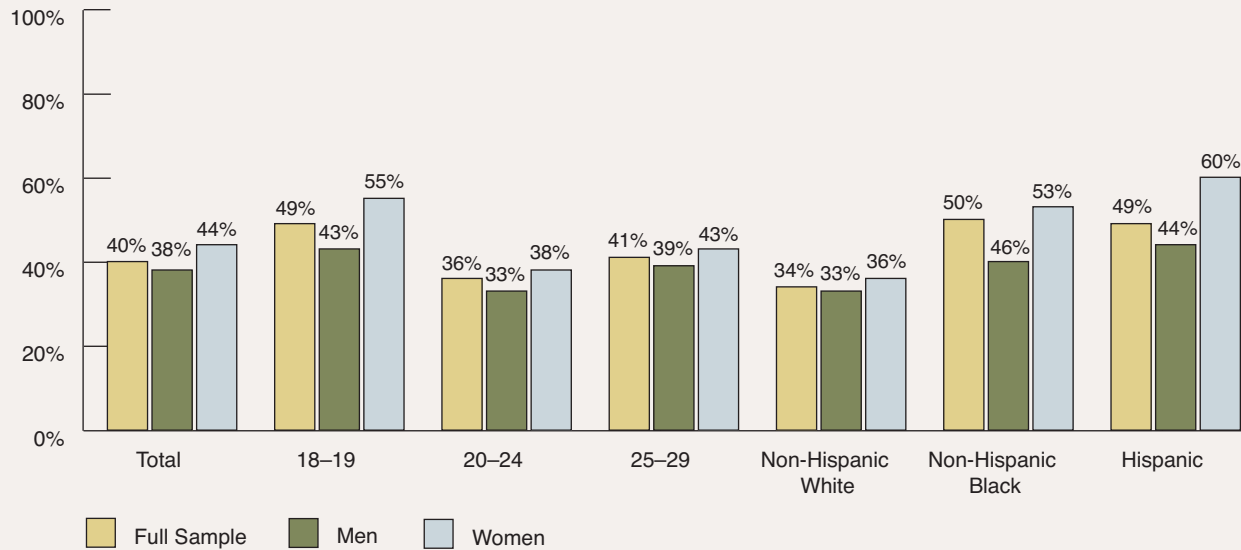
Based on responses from the question: “For each of the following pairs of birth control methods, please tell me which one you think is more effective at preventing pregnancy and which one is less effective. If you think they are equally effective say it is a tie.”

**CHART 24** Unmarried Young Adults Age 18–29, Perceived Relative Effectiveness of Contraceptive Methods



Based on responses from the question: “For each of the following pairs of birth control methods, please tell me which one you think is more effective at preventing pregnancy and which one is less effective. If you think they are equally effective say it is a tie.”

**CHART 25** Unmarried Young Adults Age 18–29 Who Agree With the Statement: “It doesn’t matter whether you use birth control or not, when it is your time to get pregnant, it will happen,” by Gender



Agree is a combination of respondents who answered “strongly agree” and “somewhat agree” from a choice set of “strongly agree, somewhat agree, neither, disagree, strongly disagree.”

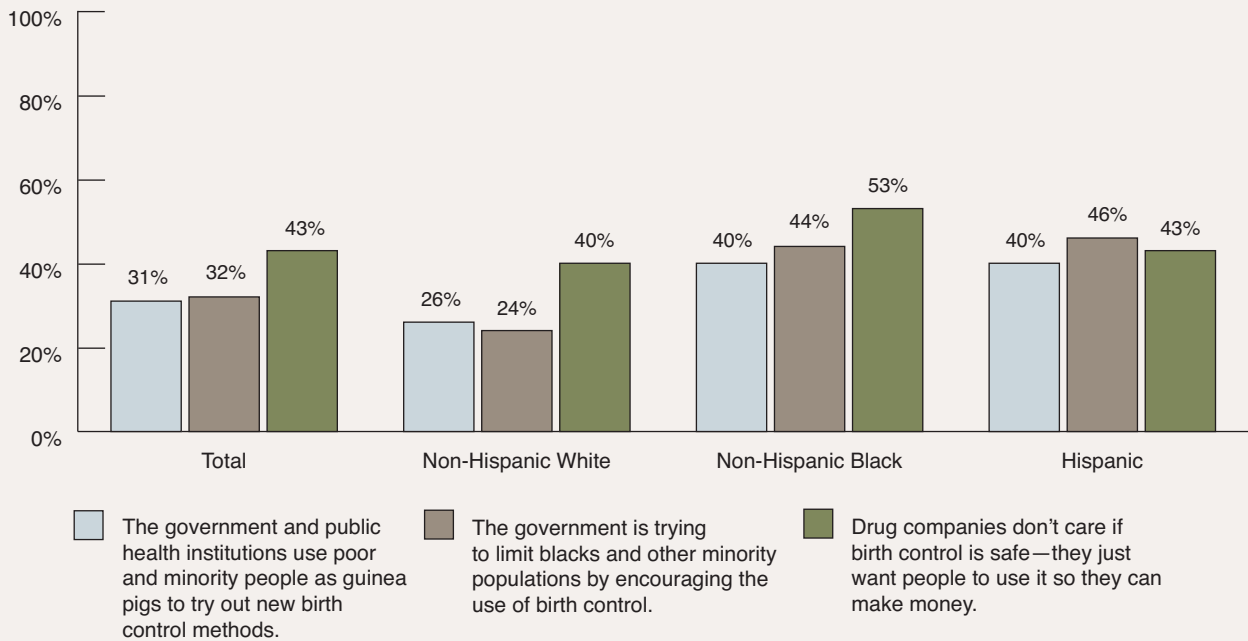
*Four in ten young adults agree “it doesn’t matter whether you use birth control or not, when it is your time to get pregnant, it will happen.”*

compared to women using Depo-Provera, 23% of young adults report that condoms are more effective than Depo-Provera and 15% say the methods are equally effective.<sup>30</sup> Moreover, even though the vast majority of young adults correctly report that condoms are typically more effective than withdrawal, only three-quarters of young adults correctly report that withdrawal is better than using no method.

**Seven: Many unmarried young adults have a fatalistic view of unplanned pregnancy that further undermines their faith in contraception, and some are openly suspicious of the entire family planning enterprise.**

It is also the case that many unmarried young adults are fatalistic about unplanned pregnancy and the role of contraception overall. An alarming four in ten unmarried young adults strongly agree or somewhat agree with the statement, “it doesn’t matter whether you use birth control or not, when it is your time to get pregnant, it will happen” (Chart 25). This, in turn, suggests not only that they may have little confidence in contraception itself or their ability to use it, but that they also see pregnancy

**CHART 26** Unmarried Young Adults Age 18–29 Who Somewhat or Strongly Agree With the Following Statements



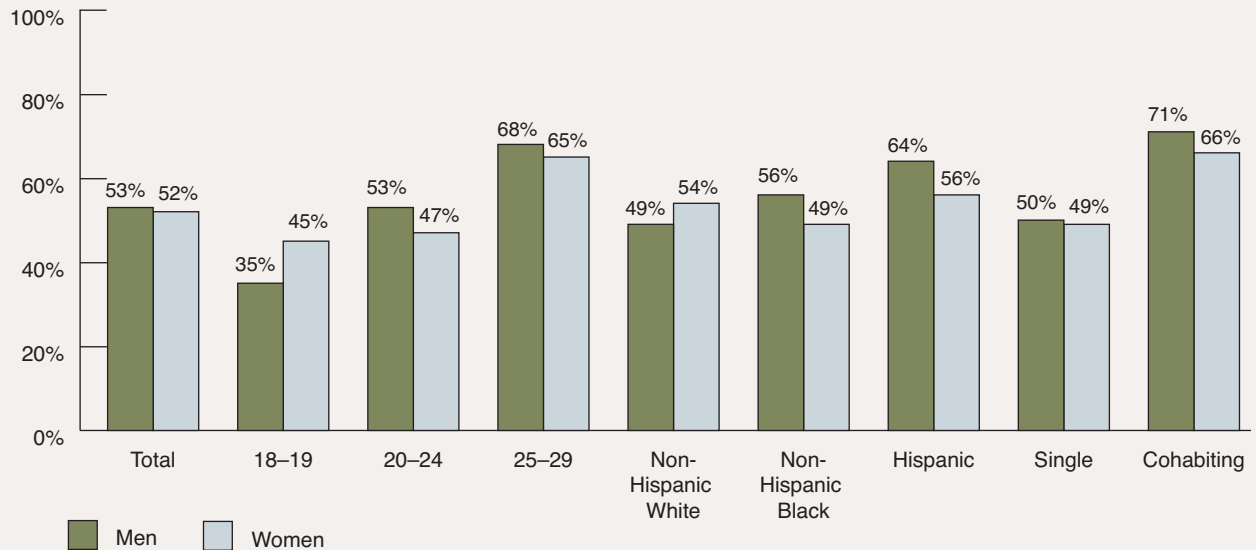
as something that is subject to a larger, ill-defined set of influences well outside of basic biology and birth control technology.

There are few differences by age, but those who are younger (age 18–19) seem slightly more likely than those who are older to agree that birth control use doesn't much matter when it comes to getting pregnant. It is also the case that Hispanics (49%) and non-Hispanic blacks (50%) are more likely than non-Hispanic whites (34%) to believe that birth control doesn't matter much (Chart 25).

In addition to expressing little confidence in birth control, young adults also express strong suspicion of the whole birth control enterprise, particularly for minority populations. Chart 26 shows the proportion of unmarried young adults that either somewhat or strongly agreed with each of the statements listed. The distrust is directed to government, public health institutions, and drug companies that market birth control methods. In particular, many young adults believe that:

- the government and public health institutions use poor and minority people as “guinea pigs” to try out new birth control methods (31% agree overall, 40% among non-Hispanic blacks and Hispanics);

**CHART 27** Unmarried Young Adults Age 18–29 Who Agree With the Statement: “If things were different in my life, I would love to have a baby now,” by Gender



Based on those who responded either “strongly agree” or “somewhat agree” from a choice set of “strongly agree, somewhat agree, neither, disagree, strongly disagree.”

*Even among those young adults who say it is important to avoid pregnancy right now, nearly one-third say they would be pleased if they found out today that they or their partner were pregnant.*

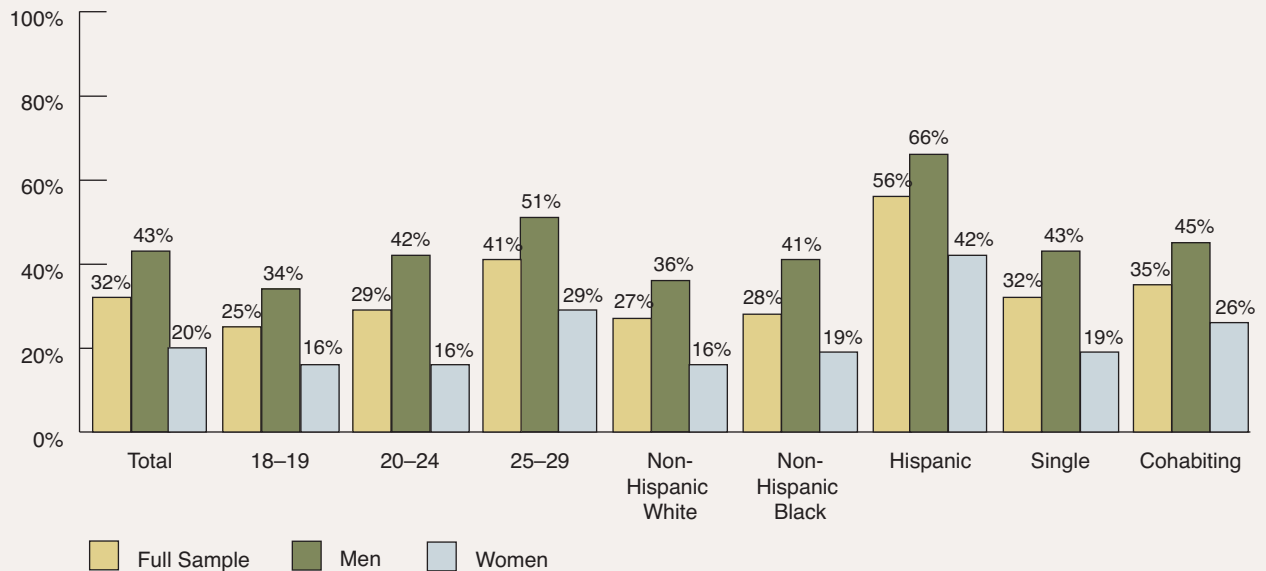
- the government is trying to limit blacks and other minority populations by encouraging the use of birth control (32% overall, 44% among non-Hispanic blacks and 46% among Hispanics); and
- drug companies are only interested in making money and don’t care if birth control is safe (43% agree overall, 53% among non-Hispanic blacks and 43% among Hispanics).

Some of this mistrust is no doubt rooted in the troubling and complex history of interactions between minority populations and major institutions, both overall and in the field of reproductive health specifically. Although this history is beyond the scope of this report,<sup>31</sup> the sobering findings presented here highlight how strong and pervasive this mistrust remains among today’s young adults of all racial and ethnic backgrounds.

**Eight: Many unmarried young adults are drawn to parenthood, but are ambivalent about when and under what circumstances to start a family.**

As noted before, the majority of unmarried young adults say it is important to avoid pregnancy in their lives right now. Still, most see

**CHART 28** Among Unmarried Young Adults Age 18–29 Who Report That it is Important to Avoid Pregnancy Right Now, Those Who Would be Pleased if They Found Out Today That They or Their Partner Were Pregnant, by Gender



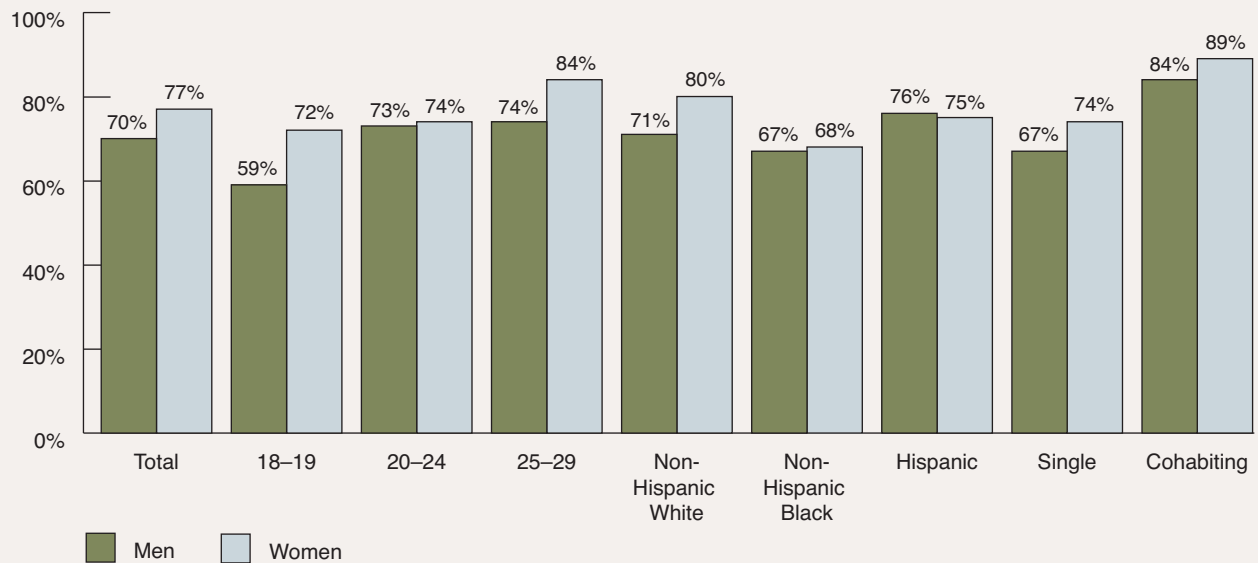
Based on those who responded either “very pleased” or “a little pleased” to the question: “If you found out today that (you were/your partner was) pregnant, how would you feel: Very upset, a little upset, a little pleased, very pleased, wouldn’t care.” Measured among those who responded that it was very important or somewhat important for them to avoid pregnancy right now.

parenthood in their futures and more than half (53% of men and 52% of women) even say they would like to be parents now if “things in their life were different” (Chart 27).

The proportion of unmarried young adults who say they would like a baby right now if things in their lives were different is relatively high among those in their 20s and among all racial/ethnic groups—approaching or exceeding half of those surveyed in each group. Not surprisingly, the proportion of unmarried young adults who say they would like a baby right now if things were different in their lives is particularly high among those in cohabiting relationships (71% of men and 66% of women) and those in their late twenties (68% of men and 65% of women). Even among 18- and 19- year-olds, more than one-third of men and 45% of women say they would like a baby now under different circumstances. Across all subgroups, findings are relatively similar for men and women.

Furthermore, even among those who say it is important to them to avoid pregnancy right now, nearly one-third say they would be at least a little

**CHART 29** Unmarried Young Adults Age 18–29 Who Agree with the Statement: “It is OK for an unmarried female to have a child”, by Gender

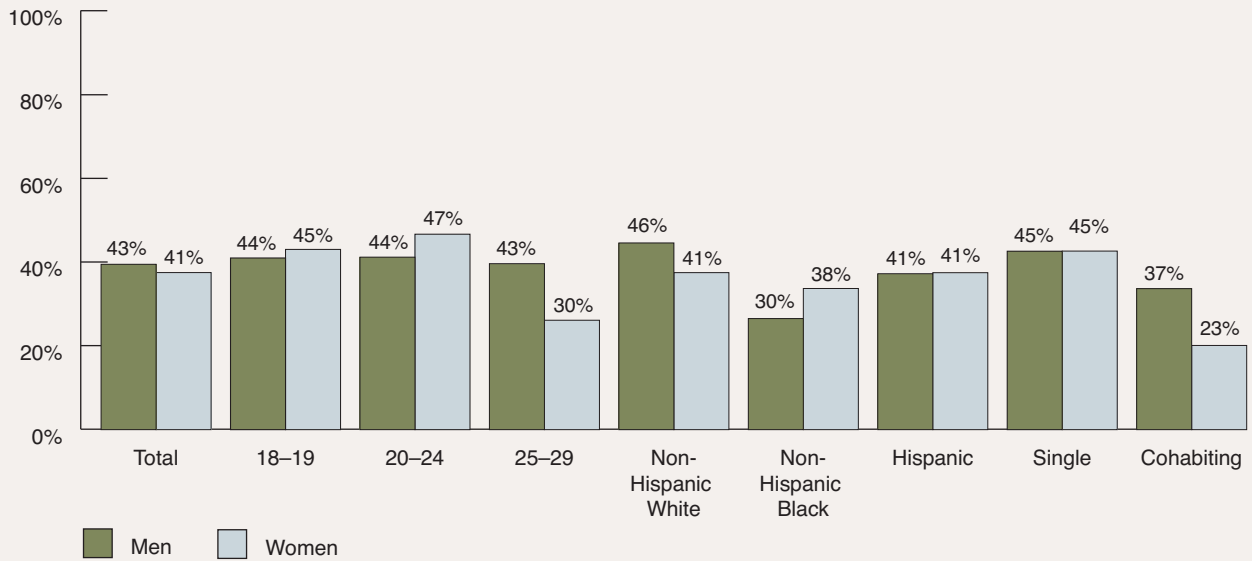


Based on those who responded either “strongly agree” or “somewhat agree” from a choice set of “strongly agree, somewhat agree, neither, disagree, strongly disagree.”

pleased if they found out today that they or their partner were pregnant (Chart 28). The difference between men and women on this particular dimension is striking. The proportion of men who would be pleased about a pregnancy is *more than twice* that of women. The proportion also varies considerably by age and race/ethnicity. Surprisingly, there is little difference on this measure between those who are living together and those who are not. Across all subgroups, these findings of ambivalence may suggest a growing difficulty among many unmarried young adults in charting a path from the present to the future, as well as balancing family aspirations with other life goals.

Unmarried young adults’ vision of how parenthood and relationships intersect isn’t always clear or realistic. Nearly three-quarters of unmarried young adults believe it is okay for an unmarried woman to have a child. While this varies somewhat by gender, age, race/ethnicity, and relationship status, the proportion who agree that having a child outside of marriage is okay approaches or exceeds two-thirds for every subgroup (Chart 29).

**CHART 30** Unmarried Young Adults Age 18–29 Who Agree with the Statement: “In my family it is not acceptable to have a child out of wedlock,” by Gender

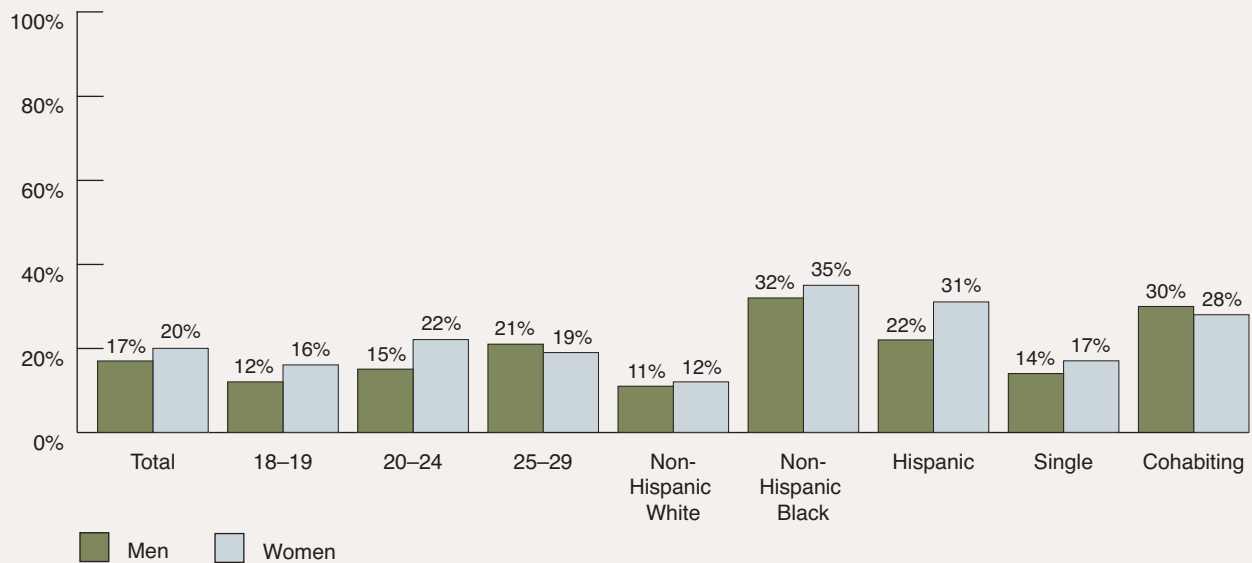


Based on those who responded “strongly agree” or “somewhat agree” from a choice set of “strongly agree, somewhat agree, neither, disagree, strongly disagree.”

However, unmarried young adults’ hold somewhat more traditional views when it comes to marriage and parenthood *in their own lives*. Overall, just over 40% of men and women believe that it is *not acceptable* within their own families to have a child outside of marriage (Chart 30). Men and women are relatively similar in their responses, and there is little variation by age or race/ethnicity, with the notable exception of women in their late twenties and non-Hispanic black women. Not surprisingly, there is large variation by relationship status—those in cohabiting relationships are much less likely than those who are not living together to believe that it is unacceptable in their family to have a child outside of marriage.

Unmarried young adults are even more traditional when it comes to expectations of actually having a child outside of marriage. Overall, fewer than one-fifth (17%) of men and 20% of women say they think it is likely they will have a baby while unmarried (Chart 31). Men and women are relatively similar in this respect, although responses vary a bit by age. The proportion who expect to have a birth outside of marriage varies most by race/ethnicity—11% and 12% of non-Hispanic white men and women,

**CHART 31** Unmarried Young Adults Age 18–29 Who Say They Are Likely to Have a Baby While Unmarried, by Gender



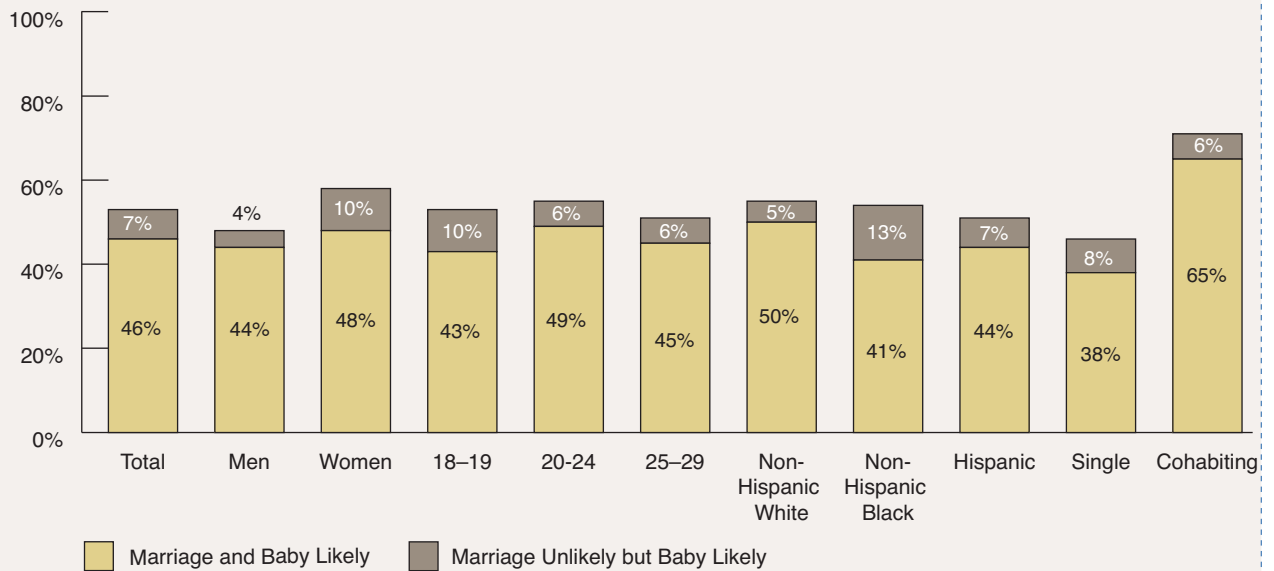
Based on those who responded “extremely likely” or “quite likely” to the following question: “For the following, please tell me how likely you think it is to happen to you. Would you say it is not at all likely, slightly likely, quite likely, or extremely likely: That you will have a baby while you are unmarried?”

22% and 31% of Hispanic men and women, and 32% and 35% of non-Hispanic black men and women say it is likely they will have a baby outside of marriage (Chart 31).

Whether these proportions seem large or small is a matter of interpretation. The majority of unmarried young adults do not expect to have a child outside of marriage. However, that 18% of unmarried young adults overall (and up to one-third for some subgroups) expect to have a child outside of marriage is not trivial.

What remains clear is that nonmarital childbearing is substantially higher in the real world. Although relevant data are limited, published results from the NSFG indicate that, among women in their early thirties in 2002, about 30% of all women have had a child outside of marriage by the time they reach their early thirties.<sup>32</sup> It is also true that the proportion of births in any given year that occur outside of marriage is approaching four in ten

**CHART 32** Unmarried Young Adults Age 18–29 Who Report it is Likely That They Will Have a Baby With Current Partner and, Within That, Proportion Who Believe They Will Marry Current Partner



Based on those who responded “extremely likely” or “quite likely” to the following question: “For the following, please tell me how likely you think it is to happen to you. Would you say it is not at all likely, slightly likely, quite likely, or extremely likely: That you will have a baby with your current partner?” and “That you will marry your current partner?”

overall—an increase of more than one-third since 1990—and seven in ten among non-Hispanic black women.

Ironically, it could be young adults’ high expectations that they will marry, and that they will have children within those marriages, that contributes to the large number of births outside of marriage. More than half (53%) say it is quite likely or extremely likely that they will have a baby with their current partner. The vast majority of those who expect to have a baby with their current partner also expect to marry that partner. Not surprisingly, this is noticeably higher among cohabiting couples but otherwise does not vary substantially across subgroups (Chart 32).

One possible narrative suggested by these results is that, while young adults are definitely not seeking to get pregnant or get someone pregnant right now, they do want children and many expect to marry and start a family with their current partner—thus if they got pregnant right now, it

would simply be a slight mistiming of a happy event. Such expectations could seriously erode motivation for using contraception consistently and effectively.<sup>33</sup>

Unfortunately, data on the actual likelihood of young adults marrying and having children with their current partners paints a less optimistic portrait than the expectations expressed in this survey. For example, published results from the NSFG indicate that, among women reaching their early thirties in 2002 who had ever cohabited, only 54% of those cohabitations led to marriage and only two-thirds of those marriages were still intact.<sup>34</sup> Of the 46% of those ever living together that did not get married, the overwhelming majority (87%) had split up.<sup>35</sup>

Anecdotally, many young adults in a relationship say that if they were to experience an unplanned pregnancy, they know their partner would “be there for them,” and that the new baby might solidify their present relationship.<sup>36</sup> Again, existing data tell a somewhat different story. Analyses of the Early Childhood Longitudinal Study—Birth Cohort indicate that, among those unmarried cohabiting couples who had a child resulting from an unplanned pregnancy, just 23% go on to marry two years after the child’s birth, and 35% split up. And, among partners not living together, an unexpected birth led to a more formal union (either cohabiting or marriage) in only 30% of the cases two years after the birth.<sup>37</sup>