

UNINTENDED PREGNANCY AND
CONTRIBUTING FACTORS IN VIETNAM

AN ABSTRACT

SUBMITTED ON THE THIRD DAY OF DECEMBER, 2002
TO THE INTERDISCIPLINARY PH.D. DEGREE PROGRAM
IN DEMOGRAPHY, INFORMATION TECHNOLOGY AND PUBLIC HEALTH
IN PARTIAL FULFILLMENT OF THE REQUIREMENTS
OF THE GRADUATE SCHOOL
OF TULANE UNIVERSITY
FOR THE DEGREE
OF
DOCTOR OF PHILOSOPHY
BY

Linh Cu Le

APPROVED:

William E. Bertrand, Ph.D.,
Director

Eamon M. Kelly, Ph.D.

Robert J. Magnani, Ph.D.

Janet C. Rice, Ph.D.

Stanley Samarasinghe, Ph.D.

Ilene Speizer, Ph.D.

A major factor in the social and economic development of Vietnam is population growth and its determinants. In order to provide information to assist in the organization and planning of future policy decisions, several important research questions were formulated. We intended to estimate the level of unintended pregnancy in Vietnam, to identify the determinants of unintended pregnancy, non-use and ineffective use of contraceptive methods in relation to the supply environment of contraceptive methods and family planning service. Of particular interest was the objective of identifying the determinants of abortion among unintended pregnancies. The conceptual framework included socio-demographic characteristics of both women and their husbands, selected predicting factors on the supply side of contraceptive methods and services at the community, commune and district levels. An innovative methodological element of the study which utilized the data of the 1997 Vietnam Demographic and Health Survey. Data was the calculation of 13,540 “segments” of pregnancy outcomes and contraceptive practice, based on the retrospective reproduction calendar of the women, and analyzed using bivariate and multivariate techniques.

This study found evidence of high levels of unintended pregnancy among married women in Vietnam (40 percent). An increase of one contraceptive method in the supply environment at the district level significantly reduced the risk of unintended pregnancy by 30 percent ($p < 0.01$). One increment in supply environment at community level significantly reduced the risk of non-use of contraception by 8 percent ($p < 0.05$). IUDs were found to be an important contributor to successful contraceptive practice, the availability of IUDs at commune health facilities significantly reduced the risk of

unwanted pregnancy by 50 percent. Withdrawal accounted for 35 percent of ineffective contraceptive use, and, combined with condom use, accounted for 50 percent of ineffective use. Besides supply side factors, unintended pregnancy was significantly associated with: age, early marriage, spousal age difference, number of sons alive, past unintended pregnancy, region, and contraceptive use. Factors found positively related to non-use and ineffective use of contraception included: region, age, ethnic minority, low socio-economic status, and spousal age difference. Factors found related to abortion were: region, high socio-economic status, woman over 40 years of age, spousal age difference, husband's education, past abortion, and number of sons alive. The study draws some conclusions for policy modifications focused on improving contraceptive method supply and method mix at the community level, targeting high risk groups, and promoting communication programs.