## HIV Status and Unintended Pregnancy and Contraceptive Use among Women in Zambia

Akinrinola Bankole, Guttmacher Institute, United States Isaac F. Adewole, University of Ibadan, Nigeria Kumbutso Dzekedzeke, Independent Consultant, Zambia Olutosin Awolude, University of Ibadan, Nigeria Maximillian M. Bweupe, Ministry of Health, Zambia

It has been generally established that HIV-positive women want fewer children than HIV-negative women. Preliminary evidence also suggests that women who are HIV-positive tend to desire and use contraception more than their HIV negative counterparts. However, little is known about their relative ability to actually prevent unintended pregnancy. This knowledge is crucial to helping policy makers and program planner put in place measures to enable women meet their reproductive goals in the era of HIV.

**Main Question:** Do the experience of unintended pregnancy and efforts to prevent its occurrence differ by HIV status? In other words, are women who are HIV-positive likely to have greater experience of unintended pregnancy and contraceptive use than their HIV-negative counterparts? Effort will be made in this paper to establish answer to this question and to provide explanation for the relative success of the HIV-positive women compared to HIV-negative ones in preventing unintended pregnancy.

**Methods**: We interviewed a random sample of 1,280 women aged 18-49 in three provinces in Zambia in 2010. Women were asked about their fertility desires, actual fertility and contraceptive behaviors. They were also asked whether they had been tested for HIV, and, if so, their HIV status. This paper compares recent experiences of unintended pregnancy and contraceptive use at the time of the unintended pregnancy occurred among three groups of women: HIV-positive women, HIV-negative women and those who did not know their status. Using multivariate analysis, we examine the relationship between HIV status, unintended pregnancy experience and contraceptive use at the time of the occurrence of the unintended pregnancy while controlling for the effects of women's characteristic variables.

**Preliminary Results**: Among the 1,245 women whose HIV status was determinable, 5% reported being HIV-positive, 53% were HIV-negative and 41% did not know their status. Twenty nine percent of the women had experienced an unintended pregnancy and 24% had done so in the five years preceding the survey. The proportion of women with recent experience of unintended pregnancy (in the last 5 years) is highest for HIV negative women (30%) followed by HIV-positive women (24%) and lowest for women who did not know their status (17%). To gain further insight into the circumstances surrounding

unintended pregnancy experience we examined contraceptive use at the time of the unintended pregnancy. The findings show that HIV-negative women were more likely to be using contraception at the time unintended pregnancy occurred than the other two groups (40% compared to 32% for HIV-positive women and 26% for women who did not know their status. In terms of current status, among not currently pregnant sexually active women who want to postpone or stop childbearing the proportion currently using contraception is similar for HIV-positive (58%) and HIV-negative (54%) and much lower for those who did not know their status (38%).

Conclusions: Preliminary analysis of the data suggests that although HIV-negative women are more likely to try to prevent an unintended pregnancy compared to HIV-positive women the observed difference does not seem to translate into a greater ability succeed in achieving fertility goals. Alternatively, the report of higher unintended pregnancy among HIV-negative women may signify a greater motivation to prevent childbearing among them compared to their HIV-positive counterparts. Given that little is still known about how HIV status affects attitudes to childbearing and motivation to use contraception, more research is needed to understand the observed differences in experiences of unintended pregnancy and use of family planning methods by HIV status. Further analysis of these recently collected data will help to bridge some of the currently existing gaps and provide pertinent information for establishing programs and policies that promote the achievement of the reproductive preferences of women and their spouses.