Post-Millennial Filipinos: Renewed Hope vs Risks

Further Studies of the 2013 Young Adult Fertility and Sexuality (YAFS) Study

Predictors and Timing of Early Childbearing in the Cordillera Administrative Region



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Message from the Executive Director

Since the turn of the century over fifteen years ago, the Philippines has seen the rise of the millennial generation of young Filipinos who are currently shaping the political landscape in late 2016 as they take a committed stand on the issues of the day.

It is appropriate for those concerned with Philippine development work to now start looking at the next generation of Filipinos and the Commission on Population has had a tradition of producing studies concerning young people.

"Post-Millennial Filipinos: Renewed Hope vs Risks" compiles 17 regional papers based on the dataset of the 2013 Young Adult Fertility and Sexuality (YAFS) study. These studies explore and discuss the emerging issues and concerns of the youth that need appropriate policy and program responses.



The latest YAFS comes more than a decade after the 2002 YAFS. The 2002 YAFS showed the concerns of the millennial Filipino much like the latest YAFS of 2013 marks the rise of the Filipinos born around the turn of the century and could foretell the shape of things to come for the 21st century young Filipino.

The post-millennial Filipino is focused on screens (smart phone, tablet and monitor) and the media is full of "hashtag-worthy" statements of 140 words.

The studies we are presenting continue to note and update matters such as sexual risk behaviors, early sexual involvement, teen pregnancy, reproductive health problems including sexually-transmitted infections as well as non-sexual risk behaviors such as smoking, alcohol abuse and drug use as well as suicide ideation and lifestyle.

We invite you to tune in to the latest findings about the post-millennial Filipino. It can only result in a more informed thread of interaction with the shapers of our country's future.

Juan Antonio A. Perez III, MD, MPH Executive Director Commission on Population

Background

The 2013 Young Adult Fertility and Sexuality (YAFS) Study is the fourth installment of a series of nationally representative cross-sectional surveys on Filipino youth aged 15-24 (for YAFS 1 and 2 and 15-27 for YAFS 3). The YAFS has yielded a valuable information about voung people's sexual and non-sexual behavior, education, labor force participation, family relationships, attitudes and values regarding certain issues concerning them, personal characteristics like self-esteem, and adverse conditions like suicidal ideation and depression symptoms, all of which are of pertinence to one's understanding of this significant sector of society. The 2013 YAFS or YAFS 4 in particular was a response to the need of updating information on the situation of today's young people. From YAFS 3 in 2002, there have been many important new developments in the environment where young people are situated that need to be studied as these affect not just their sexual and non-sexual risk taking behaviors but also their total well-being. For instance, the changes in communication and information technology such as the prevalent use of cellular phones and the internet and the new forms of communication that these have produced like social networking were not explored in the previous YAFS. The foregoing expansion in technology is presumed to have resulted to notable changes in the patterns and topographies of courtship, dating and relationships among young people. The upsurge in the incidence of HIV infection primarily among men who have sex with other men (MSMs) requires more recent reliable data on male sexual and non-sexual risk behaviors which is currently not available because regular survey rounds like the National Demographic and Health Surveys conducted every five years does not routinely include men. Moreover, with YAFS 4, core behaviors that have been monitored over time in YAFS 1, 2 and 3 were also updated. Among these are the sexual risky behaviors, such as the prevalence of early sexual involvement, teen pregnancy and reproductive health problems including sexually transmitted infections (STIs) as well as non-sexual risk behavior like smoking, drinking and drug use.

With the wealth of information yielded by the YAFS 4, the Commission on Population (POPCOM) in partnership with the Demographic Research and Development Foundation, Inc. (DRDF) came up with seventeen (17) regional papers (Regions 1-13, 4B, CAR, NCR and ARMM) that explore and discuss the emerging issues and concerns of the young people that need appropriate policy and program responses.

Predictors and Timing of Early Childbearing in the Cordillera Administrative Region

Josefina N. Natividad, ScD¹

Background and context

Fertility at either extreme of the reproductive ages of 15–49, among the youngest and the oldest, is known to be subject to an elevated risk of adverse outcomes to either mother or child. Women who start childbearing in their teens (less than 20 years old) have been documented to have a higher risk for postpartum hemorrhage, puerperal endometritis, and operative vaginal delivery. The child borne by a very young mother is also at higher risk for pre-term delivery, low birth weight, and being small for gestational age (Conde-Agudelo, Beliza, & Lammers, 2005). Compared with women aged 20–24 at childbirth, women aged 15–19 have also been found to have an increased risk of maternal death and anemia, while their children have an increased risk of early neonatal death. These risk factors are found to be independent of the level of development of the health care system and have to do more with the biological constraints of being too young for childbearing (Chen et al., 2007).

Having a child at a very early age further exposes the young mother to non-health risks, such as an increased chance of not completing her education. If the pregnancy is out of wedlock, it may also expose the mother to stigma and social censure (Natividad, 2013). For these reasons, a high incidence of pregnancy at a young age, specifically before 20, is considered a public health problem that must be addressed.

Many factors contribute to the rise in teenage fertility not just in the Philippines but also in other countries. Among these are a lower age at menarche and higher rates of engagement in early sexual activity in today's cohort of young women. In more traditional societies, early marriage is the main driver of high fertility in the teen years, only tempered by higher age at menarche. As societies modernize, changing norms and standards of behavior have led to increasing sexual activity outside of marriage, which, accompanied by decreasing age at menarche, contribute to increasing fertility in the teenage years, albeit largely unintended. Sometimes both conditions that contribute to high teen fertility are found within the same society (i.e., early marriage and early premarital sexual activity), with early marriage largely found in the more traditional and rural areas and premarital sexual activity in the urbanizing centers. In a review of studies in African populations, Zabin and Kiragu (1998) reported a connection

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between age of onset of sexual activity or age at first birth and age at menarche resulting in earlier onset of childbearing for the current generation of teenagers compared with earlier cohorts.

Early childbearing is defined as having had a live birth before reaching the age of 20. An analysis of early childbearing in the Philippines from the results of the National Demographic and Health Surveys (NDHS) over a 35-year period from 1973 to 2008 shows a steadily increasing proportion of young women who had begun childbearing before they reached age 20. In general, teenage mothers in the Philippines over this 35-year period have been predominantly poor, residents of rural areas, and with low educational attainment (Natividad, 2013). Thus, the evidence of an increase in teen childbearing as documented in the 2013 Young Adult Fertility and Sexuality Study (YAFS4) should come as no surprise because it is consistent with past trends. However, the magnitude of increase is a cause for concern because YAFS4 data has established a doubling of the proportion of 15–19-year-olds who had begun childbearing over the recent 10-year period (2002 to 2013).

In the YAFS4 results, the Cordillera Administrative Region (CAR) was recorded to have had the highest proportion of young women aged 15–19 who had begun childbearing, at 18.4 percent. This rate is much higher than the national average of 13.6 percent. Because of this, the issue of teen pregnancy was selected as the topic for further analysis of YAFS4 data in CAR.

Still, even within the teen years, the risks of adverse outcomes are not uniformly distributed, as these tend to be higher in the younger teen years than in the older teen years, or closer to age 20 (Neal et al., 2012). Moreover, the interventions may be differently crafted for younger teens compared with older teens. Thus, for this paper, the timing of early childbearing is a major focus of the analysis.

It is also recognized that CAR may not be a homogeneous region in ethnic composition. While it is generally assumed that CAR is composed of ethnic Cordillera groups, the region has also been a major in-migration area from lowland provinces because of the presence of educational institutions and the mining industry. In analyzing early childbearing in the region, therefore, this major division by ethnicity will be taken into consideration, and the ethnic Cordillerans will be compared with non-Cordillerans.

A second major focus is the predictors of early childbearing. This means that the factors of interest are those that have predictive value because their timing of occurrence preceded the outcome of interest. Specifically, we looked at the types of socialization experiences of the young woman while growing up, as measured by parenting styles. It is hypothesized that the type of guidance and parenting received by young women when they were growing up will have an effect on later behavior such as engagement in early sexual activity and thus the increased risk of early and unintended childbearing. The relationship between parenting styles and practices and the child's later behavior and self-esteem is well documented in the literature in Western settings (Kan, McHale, & Crouter, 2008; Roberts & Bengtson, 1996).

The objectives of this paper are as follows:

- 1. To describe the timing of early childbearing by single age among young women aged 20–24 in CAR, differentiated by background characteristics
- 2. To examine the predictors of early childbearing based on factors related to parenting styles during the young woman's formative years as well as basic socio-demographic characteristics

Data and methods

The regional data from the YAFS4 is the source of data for this study. In all, there are 454 female respondents from CAR in the survey. The outcome or dependent variable of the study is early childbearing. This is defined as having given birth before reaching the age of 20. To avoid truncation bias from including in the analysis women who have not yet reached 20 (i.e., women aged 15–19) and who therefore may still experience early childbearing after the survey, we restricted the analysis to young women aged 20–24 at the time of the survey. One disadvantage of the sample restriction is that the number of cases available for analysis is drastically cut. In particular, the sample for this study is 262 women aged 20–24.

Because of the relatively small number of cases, we purposely adopted a parsimonious model for the regression runs. We eliminated some hypothesized predictor variables that did not show a possible relationship with the dependent variable during the initial bivariate explorations of the data. However, we kept in the model the factors of educational attainment, poverty status, and rural-urban residence regardless of the results of the initial bivariate analysis because we wanted to validate whether early childbearing in CAR follows the same findings at the national level that most teenage mothers are poor, rural residents, and with low education.

To study the timing of early childbearing, we conducted survival analysis. For this, we show the cumulative proportion who have begun childbearing at each given age interval beginning at one year below the earliest given age at birth, which is 13 years, and ending at age 19. We show these cumulative proportions by categories of the factors that are hypothesized to have an effect on early school leaving. Aside from education, rural-urban residence, and poverty status, we added ethnicity (Cordilleran and non-Cordilleran) and an indicator of the family environment under which the young woman was raised. This latter measure is the person/s who

raised the young woman, a dichotomous variable: raised by both parents and not raised by both parents.

To study the predictors of early childbearing, we explored the variables in the YAFS questionnaire that indicate parenting styles. The questions on parenting styles measure two dimensions: demandingness and responsiveness. The questions were worded as Likert-type scale items to which the respondent chose from among the following responses: always true, often true, sometimes true, rarely true, and never true.

The scale items for demandingness are as follows:

- a. (<u>The person who raised R</u>) had clear standards of behavior for the children when you were growing up.
- b. When you were growing up, <u>(the person who raised R)</u> often told you exactly what s/he wanted you to do and how s/he expected you to do it.

The scale items for responsiveness are as follows:

- a. (The person who raised R) listened to your opinions and feelings when you had problems when you were growing up.
- b. When you were growing up, <u>(the person who raised R)</u> often knew how you felt about different things in your family and personal life.

A second predictor that was explored was whether sex was discussed at home while the young woman was growing up. Specifically, the question asked was *"Have you ever discussed sex at home while you were growing up?"*

Results

Table 1 presents a description of young women aged 20–24 in CAR according to the characteristics covered in this paper. Results show that a little over half are of Cordilleran ethnicity, while the rest are non-Cordilleran, mostly Ilocano and a few other ethnicities. These women are highly educated; half had college-level education (may or may not have graduated). Only 6.1 percent had elementary-level education. The sample is overwhelmingly rural, with only 9.5 percent residing in an urban area. Most (86.8%) have been raised by both parents. Of the 20–24-year-old women in CAR, one in four (25.2%) had a birth before reaching age 20.

Characteristics	Percent	Ν
Ethnicity		
Cordilleran	58.8	154
Non-Cordilleran	41.2	108
Highest education completed		
Elementary	6.1	16
High school undergraduate	8.0	21
High school graduate	34.4	90
College	51.5	135
Marital status		
Never married	42.4	111
Currently married	32.1	84
Currently living in	25.2	66
Separated/widowed	0.4	1
Poverty status		
Poor		
Non-poor		
Place of residence		
Urban	9.5	25
Rural	90.5	237
Raised by both parents		
Yes	86.8	224
No	13.2	34
Had birth before 20		
Yes	25.2	66
No	74.8	196
Total	100.0	262

Table 1. Socio-demographic characteristics of women aged 20–24

Table 2 shows the proportion of women who experienced early childbearing crosstabulated with the same socio-demographic characteristics. Results indicate that the proportion who had a birth before age 20 is higher among non-Cordillerans, rural residents, and young women who were not raised by both parents compared with their respective counterparts. By poverty status, there is no substantial difference between women classified as poor (i.e., belonging to the two lowest quintiles in socio-economic status) and the non-poor (i.e., belonging to the third to fifth upper quintiles). By completed education, high school undergraduates had the

highest proportion with early childbearing experience (57.1%), followed by those with elementary-level schooling (37.5%) and high school graduates (30.0%). The prevalence of early childbearing is lowest among those with college education (15.6%). Finally, by current marital status, four in ten of the currently married 20–24-year-olds began childbearing before age 20. Similarly, four in ten of the currently cohabiting also experienced early childbearing. A small proportion of the never married (3.6%) had experienced early childbearing.

	Had birth	
	before 20	Ν
Ethnicity		
Cordilleran	22.1	154
Non-Cordilleran	29.6	108
Highest education completed		
Elementary	37.5	16
High school undergraduate	57.1	21
High school graduate	30.0	90
College	15.6	135
Marital status		
Never married	3.6	111
Currently married	41.7	84
Currently living in	40.9	66
Separated/widowed	0.0	1
Poverty status		
Poor	25.6	78
Non-poor	25.0	184
Place of residence		
Urban	16.0	25
Rural	26.2	237
Raised by both parents		
Yes	23.2	224
No	35.3	34
Total	25.2	262

Table 2. Proportion of women aged 20–24 who had a birth before age 20 bysocio-demographic characteristics

The timing of early childbearing

When the measure of early childbearing is reduced to one indicator that groups together all women who are below age 20, as presented in Table 2, one important dimension of early childbearing is missed. This is the timing of early childbearing, or the exact age of the woman when she bore her first child. Timing is an important dimension to consider because, as has been established in past studies, the risk to mother and child associated with early childbearing is not uniformly manifest across the teen years. The risks are higher at the lower end of the teen years and diminish the closer one gets to age 20.

The succeeding figures present the result of the survival analysis on the timing of early childbearing. The youngest recorded age at first birth was exact age 13. In the survival curves, we use the starting age of 12 when the proportion who had given birth is 0. The survival curves show the comparative timing of early childbearing by ethnicity, education, poverty status, place of residence, and whether the young woman was raised by both parents.

A. By ethnicity

Although Table 2 indicates that the proportion who began childbearing before 20 is higher among non-Cordillerans, Figure 1 shows that the timing of childbearing appears to be slightly earlier among Cordillerans, as the cumulative proportion who had a birth at each age is higher among Cordillerans at ages 13, 14, 15, and 16. For non-Cordillerans, there is a sudden increase at age 19. The higher proportion of early childbearing among non-Cordillerans is mostly accounted for by births at ages 18 and 19, when presumably the risks, although still high compared with all women, are not so high compared with all teens. Thus, in terms of exposure to the risk associated with early childbearing, the Cordilleran women may be more at risk because they started childbearing earlier than the non-Cordillerans.



Figure 1. Timing of childbearing by ethnicity

B. By educational attainment

The patterns of the survival curves across educational attainment show a distinct education-related difference in the timing of early childbearing. Among those who at age 20–24 reported their highest educational attainment to be an elementary level of schooling, childbearing indeed had a very early start at age 13. While the difference in total proportion who began childbearing before age 20 between those with elementary and with high school undergraduate education is substantial in Table 2, Figure 2 indicates that those with elementary-level schooling had a more risky age-related pattern. In fact, the childbearing rates are zero before age 17 for those with higher than elementary schooling. Most of the births occurred to women with higher than elementary schooling at ages 17, 18, and 19.



Figure 2. Timing of childbearing by current educational level

C. By poverty status

The comparison by poverty status indicates no evident difference in the pattern of timing of early childbearing before age 16. The curves diverge somewhat at age 17 when more of the poor have begun childbearing, but at 18 and 19, it is the non-poor who have a higher proportion who had an early birth (Figure 3).



Figure 3. Timing of childbearing by poverty status

D. By place of residence

Figure 4 compares the survival curves of early childbearing between rural and urban residents. The figure shows that early childbearing among urban residents is confined to ages 18 and 19. However, the number of urban cases is extremely low (n = 4) and thus unstable and likely not adequately representative of the experience of urban CAR residents in general. To truly compare urban and rural residents, a bigger sample size is needed.



Figure 4. Timing of childbearing by place of residence

Figure 5 shows the survival curve for rural residents, for which the number of cases is substantially larger. The curve shows that the earliest age at childbearing is 13, but no births happened at ages 14 and 15. It picks up starting at age 16, but most rural residents who had early childbearing experience had their first birth at 17, 18, and 19.



Figure 5. Survival curve for rural residents

E. By person/s who raised the young woman

Classifying the young women of CAR aged 20–24 into those raised by both parents and those raised by other arrangements (e.g., single parent [either father or mother], mother and stepfather, father and stepmother, grandparents), the survival curves show a manifest difference in the timing of early childbearing between the two groups (Figure 6). Not only did those who were not raised by both parents start childbearing earlier (at age 13), but the proportion who had an early birth is also higher at each age.



Figure 6. Timing of childbearing by person/s who raised the young woman

Predictors of early childbearing

We explored various ways of scoring parenting styles based on the responses to the four questions stated earlier. The result of this preliminary analysis showed that of the four items, only the first one, "(*The person who raised R*) had clear standards of behavior for the children when you were growing up," exhibited a potential relationship with early childbearing, as shown in Table 3.

Table 3. Proportion who experienced early childbearing by response to the question "(*The person who raised R*) had clear standards of behavior for the children when you were growing up"

	Had birth before 20	Ν	
Never/rarely	71.4	7	
Sometimes	33.0	45	
Often/always	21.9	210	
Total	25.2	262	

The results in Table 3 suggest that young women who reported that the person who raised them often or always had clear standards for behavior for the children had the lowest prevalence of early childbearing. For the three other items measuring parenting style, no such clear direction of relationship was observed.

The other predictor of early childbearing considered in the analysis was whether there was discussion of sex at home when the young woman was growing up. Specifically, the question was *"Have you ever discussed sex at home as you were growing up?"*

Table 4. Proportion who experienced early childbearing by response to the question"Have you ever discussed sex at home as you were growing up?"

Ever discussed sex at home	Had birth before 20	Ν	
Yes	25.6	43	
No	25.1	219	
Total	25.2	262	

The results shown in Table 4 indicate that there is no relationship between discussing sex at home during the growing-up years and the prevalence of early childbearing; thus, this variable was dropped from the multivariate analysis.

The final regression model predicting the likelihood of early childbearing has the following independent variables: educational attainment, poverty status, rural-urban residence, ethnicity, whether raised by both parents, and the high frequency of clear standards for behavior imposed by the person who raised the respondent while growing up. The results of the regression analysis are shown in Table 5.

	95% CI for odds ratio			
Factor	Odds ratio	Lower	Upper	р
Cordilleran	0.76	0.41	1.42	ns
High school undergraduate	2.25	0.53	9.54	ns
High school graduate	0.67	0.19	2.39	ns
College	0.25	0.07	0.94	.040
Poor	0.56	0.26	1.18	ns
Urban	0.73	0.22	2.43	ns
Raised by both parents	0.56	0.24	1.27	ns
With clear standards				
often/always	0.43	0.21	0.87	.019

Table 5.	Odds ratios	for factors	predicting	the probabi	lity of early	childbearing
		among	20–24-year	-old female	S	

Note. ns = not significant.

Only two factors significantly predict the likelihood of early childbearing among young women aged 20–24 in CAR, both protective against the risk of giving birth before age 20. These are having a college-level education and having parents or guardians who had clear standards for behavior while the person was growing up. The risk of early childbearing is not significantly different between Cordillerans and non-Cordillerans, between urban and rural residents, between the poor and non-poor, and between young women raised by both parents and those not raised by both parents.

Discussion

In general, the rate of early childbearing in CAR is high, with 25 percent of women aged 20–24 already having begun childbearing before they reached age 20. However, it is also important to examine the timing of early childbearing, as the risks to both mother and child are not uniformly distributed across the teen years. Evidence shows that the rates of childbearing shoot up generally after age 17. In terms of interventions to try to arrest the high and increasing rates of early childbearing, it is thus important to be mindful of the need to come up with age-appropriate strategies, because what works for 17- and 18-year-olds will not be applicable to females in the lower teens, such as 13, 14, 15, or 16. The results of the survival analysis also indicated that young women with low education (especially those with elementary education) start childbearing much earlier than the rest of their counterparts. Since they have left school, school-based intervention in high school will not reach them. Again, it is important to find a way to reach these women who left school early, as they are likely to be missed by current programs.

The regression analysis also showed that the risk of early childbearing in CAR is not higher among the poor and among rural residents, as has been traditionally established by the NDHS series. This means that the efforts to curb high teen childbearing should be exerted equally to reach all young women regardless of residence and poverty status. Moreover, even if a college education has been found to reduce the risk of early childbearing, college-educated women still have a substantially high prevalence of early childbearing at 16 percent. Therefore, curbing the problem means addressing all education levels including college.

Finally, the finding that parenting style as a child is growing up can have a significant effect on later risk behavior is an important input in the design of future programs, as it provides evidence that the type of parenting a child receives while growing up has long-term effects on the child's later behaviors, such as early sexual activity leading to early childbearing. The effect of parenting style on the child's later behavior is well documented in the Western literature. It is gratifying to note that this effect is not culture specific and that it too is found to have a positive impact on later behaviors. This finding is worth exploring, both through further analysis of the full data set and through application in practical terms in the parenting education sessions conducted by the Commission on Population.

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