Unintended pregnancy is associated with an increased risk of health problems for both women and babies. When used correctly, contraceptives are very effective at preventing unintended pregnancy. The most effective contraceptive methods, with failure rates of less than 1%, are those that do not require user intervention. These methods include: male and female sterilization, intrauterine devices (IUD) and contraceptive implants. Moderately effective methods require consistent and correct use, and have typical-use failure rates between 6-12%. These methods include hormonal pills, patches, rings, and shots, as well as non-hormonal diaphragms.

**FIGURE 1**

**Effective contraceptive use among women at risk of unintended pregnancy, Oregon**

Starting in 2014, respondents are asked about their use of contraception "at last intercourse" rather than "currently". Also, the upper age limit of reproductive-age women was increased from 44 to 49 in 2014.

Source: Oregon Behavioral Risk Factor Surveillance System (BRFSS)
In 2016, 69.2% of women at risk of unintended pregnancy reported using effective methods of contraception at last intercourse, consistent with previous years (Figure 1). No significant differences in contraceptive use are observed among women of different ethnic and racial groups.

**FIGURE 2**

Contraceptive method use among women at risk of unintended pregnancy, Oregon

* Starting in 2014, respondents are asked about their use of contraception “at last intercourse” rather than “currently”. Also, the upper age limit of reproductive-age women was increased from 44 to 49 in 2014.

Source: Oregon Behavioral Risk Factor Surveillance System (BRFSS)

In 2016, 16% of women at risk of unintended pregnancy reported using no method of contraception at last intercourse, and 15% reported using the least effective methods (condoms, sponges/diaphragms, spermicide and withdrawal) (Figure 2).

Oregon has multiple programs and policies in place to increase access to effective methods of contraception and quality family planning services, yet unintended pregnancy remains a major public health concern. Unintended pregnancy is disproportionately concentrated among poor and low-income women, young women (ages 18-24 years), and minority women.
Additional Resources: [Reproductive Health Program, Oregon BRFSS](#)

**About the Data:** Data source is the Oregon Behavioral Risk Factor Surveillance System (BRFSS). BRFSS is a telephone survey conducted annually among non-institutionalized adults age 18+. Women at risk of unintended pregnancy are defined as women age 18-49 (18-44 from 2010-2013) who are not pregnant, have not had a hysterectomy, are not post-menopausal, are sexually active with an opposite-sex partner, and who answered the contraceptive use questions in the survey. Effective contraceptive methods are defined as the most effective methods (intrauterine device, implant, vasectomy and tubal ligation) and moderately effective methods (hormonal patch, ring, shot and pill) (from 2010-2013, moderately effective methods were included only if the respondent indicated they were used “every time” the respondent had sex). Less effective methods include condoms, spermicide, sponge/cap/diaphragm (which are grouped together in BRFSS, otherwise diaphragms are considered moderately effective methods), emergency contraception, and withdrawal.

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