

NEBRASKA 2010  
**HEALTH  
GOALS  
AND OBJECTIVES**



A MidCourse Review

## INTRODUCTION

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Healthy People 2010 is a nationwide health promotion and disease prevention initiative that is committed to improving the health of all people in the United States during the first decade of the 21<sup>st</sup> century.

Healthy People is designed to achieve two overarching goals:

- increase quality and years of healthy life, and
- eliminate health disparities in the United States.

It builds on Healthy People 2000 and a previous set of national health objectives for 1990.

The *Nebraska 2010 Health Goals and Objectives* report, issued in May 2002, outlines a set of health goals and objectives for the state that are to be achieved by 2010. This initiative shares the national goals of eliminating health disparities and increasing quality and years of healthy life for all people in Nebraska.

The current document, *Nebraska 2010 Health Goals and Objectives: A MidCourse Review*, summarizes the progress that has been made over the past five years in meeting the health goals and objectives set for the state. It also compares Nebraska's accomplishments in meeting these objectives with advancements made nationwide.

# FAMILY PLANNING

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## Healthy People 2010 Goal

The national Healthy People goal for 2010 is to improve pregnancy planning and spacing and prevent unintended pregnancy.

## Background

Despite technology that would allow couples to have considerable control over their fertility, about one-half of all pregnancies in the United States are currently unintended. Family planning efforts can aid in achieving planned, wanted pregnancies and preventing unintended pregnancies.

Unintended pregnancies are those not wanted at the time of conception or not wanted at all. Many teen pregnancies are unintended. Consequences of unintended pregnancy can be serious and costly. Socially, the costs can be measured in unintended births, reduced educational attainment and employment opportunity, greater welfare dependency, and increased potential for child abuse and neglect. Medically, unintended pregnancy is serious in terms of a lost opportunity to prepare for a healthy pregnancy, an increased chance of infant and maternal illness, and the possibility of abortion.

## Progress Toward Healthy People 2010 Objectives

### National

Of the ten Family Planning objectives and sub-objectives shared by Nebraska and the nation, two sub-objectives were met for the U.S. The proportion of sexually active high school students (males and females) who used condoms the last time they had sexual intercourse increased enough to meet the 2010 target rates.

Improvement was noted for five objectives or sub-objectives. The teen pregnancy rate was down nationwide. The proportion of high school students (males and females) who had never engaged in sexual intercourse increased, as did the proportion of each gender who had not engaged in intercourse before age 15 years.

On the other hand, the proportion of births that occurred within 24 months of a previous birth increased. The proportion of females of childbearing age (15 to 44 years) who would be at risk for unintended pregnancy but used contraception decreased. Current data were unavailable to assess progress in decreasing the proportion of pregnancies that are unintended.

### Nebraska

In Nebraska, none of the Family Planning objectives have been met so far. Progress was made toward two objectives/sub-objectives. The teen pregnancy rate decreased and the proportion of sexually active male high school students who used condoms the last time they had sexual intercourse increased from the baseline.

However, movement away from the 2010 target rates occurred for four of the ten Family Planning objectives. The proportion of births occurring within 24 months of a previous birth increased slightly. Smaller proportions of male and female high school students reported that they had never had sexual intercourse, while fewer female high school students stated that their partner used a condom the last time they had intercourse.

Data are unavailable to assess progress in decreasing the proportion of pregnancies that are unintended. Nebraska data are also unavailable to track the proportion of high school students who did not have sexual intercourse before age 15 years. Due to a change in survey methodology, current data on proportion of females of childbearing age who would be at risk for unintended pregnancy but used contraception are not comparable to the baseline prevalence estimates.

### Intended Pregnancies

The first Family Planning objective seeks to increase the proportion of pregnancies that are intended to at least 70 percent nationwide and to at least 80 percent in Nebraska (Table 8). In 1995, an estimated 51 percent of pregnancies in the U.S. were intended, while 63 percent of pregnancies in Nebraska in 1999 were intended. Unfortunately, more recent data are unavailable to assess progress toward the national and state objectives.

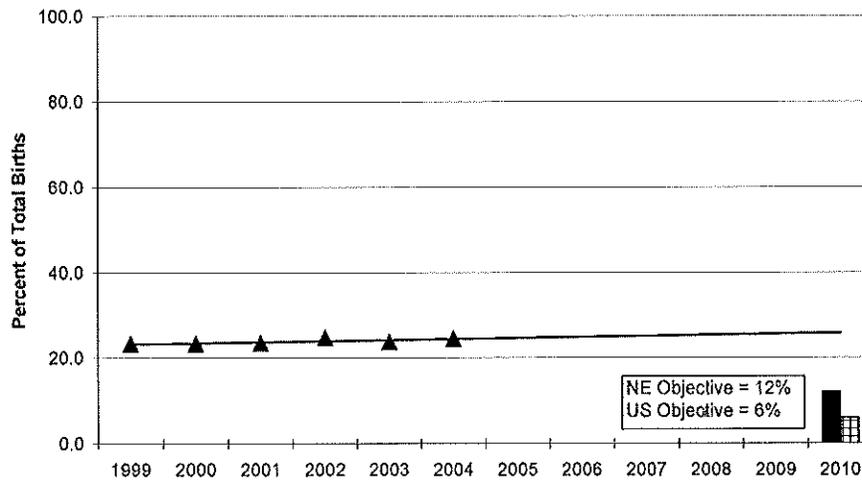
Objective		UNITED STATES			NEBRASKA			Objective			
		Baseline	Current	U.S. 2010	Baseline	Current	NE 2010				
		Year	Rate	Year	Rate	Objective	Year	Rate	Year	Rate	Objective
#9-1	Percent of pregnancies that are intended (women aged 15-44 years) Data not available by race or ethnicity	1995	51	No New Data Available	70	1999	63	Data Not Available	80		
#9-2	Percent of births occurring within 24 months of a previous birth	1995	11	2002	18	6	1999	23.3	2004	24.5	12.0
	White	1995	10	2002	18	6	1999	22.8	2004	24.1	12.0
	African American	1995	14	2002	19	6	1999	27.0	2004	28.7	12.0
	Native American	1995	NA	2002	NA	6	1999	31.8	2004	39.6	12.0
	Asian American	1995	NA	2002	NA	6	1999	27.2	2004	23.0	12.0
	Hispanic American	1995	14	2002	17	6	1999	24.8	2004	22.1	12.0
#9-3	Percent of females aged 15-44 at risk of unintended pregnancy (and their partners) who use contraception Data not available by race or ethnicity in Nebraska	1995	93	2002	89	100	1999	86.1	2004	87.5	95
#9-7	Rate of pregnancy/1,000 females aged 15-17 years (live births + fetal deaths + abortions) Data not available by race or ethnicity in Nebraska	1996	67	54	43	1999	27.5	2004	23.7	18	
#9-8	Percent of adolescents in grades 9-12 who have never engaged in sexual intercourse before age 15 years										
	9-8a. Females	1995	81	2002	87	88	1999	88	Data Not Available	92	
	9-8b. Males	1995	79	2002	85	88	1999	85	Data Not Available	92	
	Data not available by race or ethnicity										
#9-9	Percent of adolescents in grades 9-12 who have never engaged in sexual intercourse										
	9-9a. Females	1995	62	2002	70	75	1999	62	2005	59	75
	9-9b. Males	1995	57	2002	68	75	1999	62	2005	59	75
	Data not available by race or ethnicity										
#9-10	Percent of sexually active, unmarried adolescents aged 15-17 years in grades 9-12 who used condoms at last intercourse										
	9-10e. Females	1995	39	2002	56	49	1999	59	2005	56	75
	9-10f. Males	1995	70	2002	84	79	1999	63	2005	67	83

Table 8 continued		
Data Sources:		Additional Notes:
#9-1	U.S.--National Survey of Family Growth, CDC; National Vital Statistics System (NVSS), CDC; Abortion Provider Survey, The Alan Guttmacher Institute; Abortion Surveillance Data, CDC. Nebraska--BRFSS Family Planning Module, HHSS.	Intended pregnancies include births that were wanted at the time of conception (i.e., those resulting from pregnancies that happened at the "right" time, later than wanted, or those answering "didn't care"). All pregnancies ending in induced abortion are considered unintended pregnancies. Women aged 18 to 44 who were currently pregnant or had been pregnant within the past five years were asked how they felt about becoming pregnant just before their last or current pregnancy. Those who reported they wanted to be pregnant then or sooner were considered to have an intended pregnancy.
#9-2	U.S.--National Survey of Family Growth, CDC.  Nebraska--Vital Statistics, HHSS.	Percent of females aged 15 to 44 years whose most recent live birth occurred within 24 months of a previous live birth. Percent of females giving birth whose most recent live birth occurred within 24 months of a previous live birth.
#9-3	U.S.--National Survey of Family Growth, CDC.  Nebraska--BRFSS, HHSS.	Percent of "at-risk" females currently using a method of contraception other than withdrawal. "At-risk" females are those who had intercourse in the three months prior to the survey who were not pregnant, nor seeking pregnancy, not post-partum, nor (themselves or partner) surgically or nonsurgically sterile. Unintended pregnancies are those not wanted at the time of conception or not wanted at all. CHANGE IN DATA. In 1999, rate is percent of "at-risk" females (age 18-44) currently using a method of contraception. "At-risk" females excludes women who were not sexually active, who wanted to become pregnant, who had a same-sex partner, or who had a hysterectomy. In 2002, the definition changed. Questions were asked of non-pregnant women aged 18-44 and men aged 18-59. "At-risk" excludes females who had a hysterectomy, had a same-sex partner, who want a pregnancy, or who were not sexually active. It also excludes male respondents whose partner is now pregnant or who want a pregnancy.
#9-7	U.S.--National Survey of Family Growth, CDC; National Vital Statistics System (NVSS), CDC; Abortion Provider Survey, The Alan Guttmacher Institute; Abortion Surveillance Data, CDC. Nebraska--Vital Statistics, HHSS.	
#9-8	U.S.--National Survey of Family Growth, CDC. Nebraska--Youth Risk Behavior Surveillance System (YRBS), HHSS.	
#9-9	U.S.--National Survey of Family Growth, CDC. Nebraska--Youth Risk Behavior Surveillance System (YRBS), HHSS.	
#9-10	U.S.--National Survey of Family Growth, CDC.  Nebraska--Youth Risk Behavior Surveillance System (YRBS), HHSS.	"Sexually active" is defined as having sexual intercourse in the three months prior to the interview. "Sexually active" is defined as having sexual intercourse in the three months prior to the interview.

### Time Interval Between Births

Another Family Planning objective is to reduce the proportion of mothers whose most recent live birth occurred within 24 months of a previous live birth to no more than 6 percent in the U.S. overall and to no more than 12 percent in Nebraska. Nationwide, the proportion of births spaced this closely increased by 64 percent, from 11 percent in 1995 to 18 percent in 2002. In Nebraska, nearly one-fourth (24.5 percent) of all mothers' most recent birth occurred within 24 months of a previous birth in 2004. However, this rate increased only slightly compared to the 1999 baseline (Figure 58).

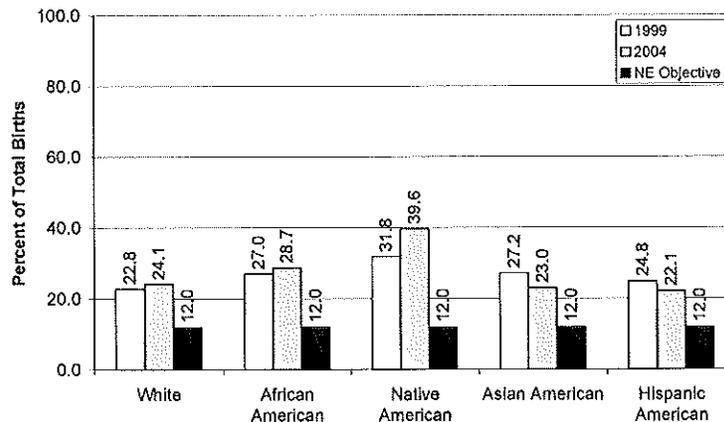
**Figure 58**  
**Nebraska Births Occurring Within 24 Months of Previous Birth**



SOURCE: Nebraska HHSS, Vital Statistics. U.S. DHHS, Healthy People 2010.

In Nebraska, the proportion of mothers with their most recent birth occurring within 24 months of a previous birth was highest among Native Americans in 2003 (39.6 percent). This rate had also increased by 25 percent from the 1999 rate (Figure 59). African Americans also recorded a slightly higher rate (28.7 percent) than the average for all mothers. Among Asian Americans (23.0 percent) and Hispanic Americans (22.1 percent), current rates were down somewhat from the baseline and were lower than rates for mothers in the other racial/ethnic groups.

**Figure 59**  
**Nebraska Births Occurring within 24 Months of Previous Birth by Race/Ethnicity**



SOURCE: Nebraska HHSS, Vital Statistics. U.S. DHHS, Healthy People 2010.

### Contraceptive Use Among Females of Childbearing Age

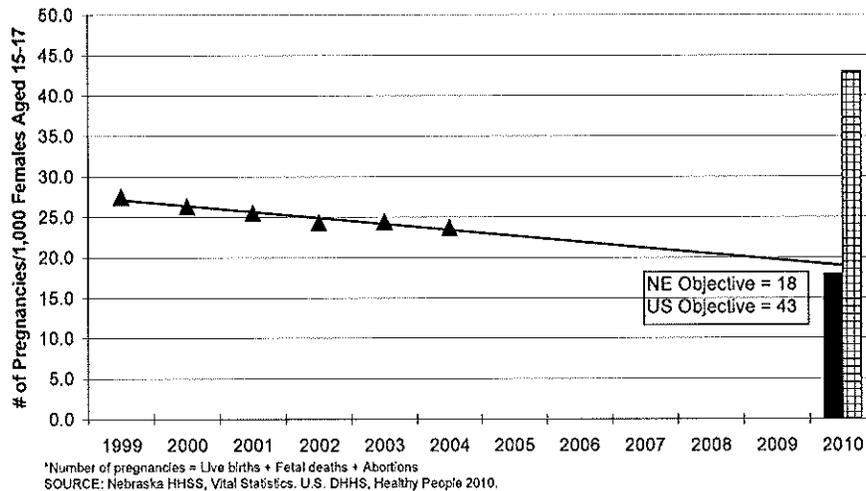
Nebraska and the nation have both established an objective that aims to increase the proportion of females aged 15 to 44 who would be at risk of unintended pregnancy but use contraception. The U.S. target rate is 100 percent, while the Nebraska target rate is 95 percent (Table 8). Definitions and data collection differ between the state and the U.S., so data are not necessarily comparable, although current rates are similar. Nationally, the proportion of adult females (or their partners) using contraception decreased from 93 percent in 1995 to 89 percent in 2002.

In Nebraska, the 1999 baseline is not comparable to 2004 data, due to a 2002 change in the categories of respondents asked this question and the definition of “at-risk”. Currently, the BRFSS questions are asked of non-pregnant women aged 18 to 44 years and men aged 18 to 59 years. The definition of “at-risk” excludes women who had a hysterectomy, had a same-sex partner, who want a pregnancy, or who were not sexually active. It also excludes male respondents whose partner is now pregnant or who want a pregnancy. Based on these criteria, 87.5 percent of at-risk respondents used contraception to avoid unintended pregnancy in 2004.

### Teen Pregnancy

A target rate of no more than 18 pregnancies per 1,000 females aged 15 to 17 years has been set for Nebraska. For the U.S., the target rate is no more than 43 pregnancies per 1,000 in this age group. Teen pregnancy rates have declined nationwide and in Nebraska. In the U.S., the 2004 rate of 54 pregnancies per 1,000 females in this age group represents a decrease of 19 percent from the 1996 baseline. In Nebraska, the 2004 rate (23.7 per 1,000) is less than one-half the national rate and was down 14 percent from the 1999 baseline (Figure 60).

**Figure 60**  
**Rate of Pregnancies\* Among Nebraska Females**  
**Aged 15-17 Years**



### Sexual Intercourse Among Adolescents

Three objectives regarding sexual behavior among adolescents have been adopted nationwide and in Nebraska. The first of these seeks to increase the proportion of high school students who have not engaged in sexual intercourse before the age of 15 years. The U.S. target is at least 88 percent for both genders, while the Nebraska target rate is at least 92 percent for males and for females (Table 8).

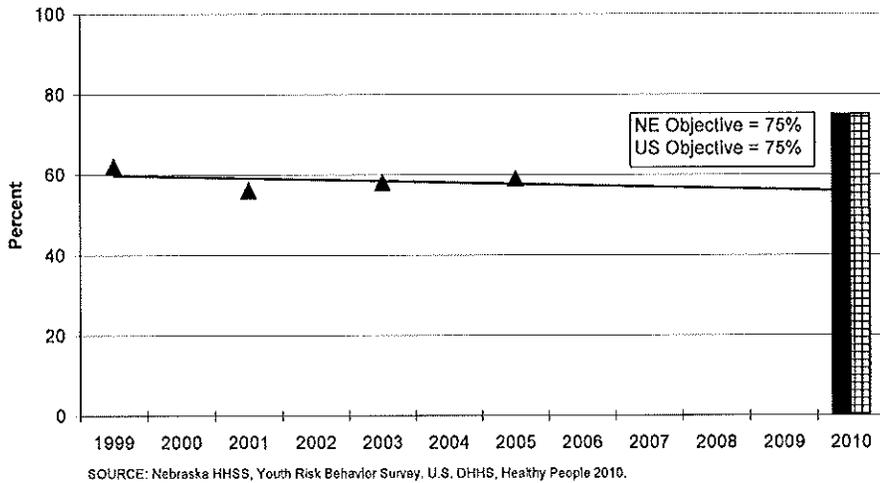
Nationwide, the proportion of females who have not had sexual intercourse before this age rose from 81 percent in 1995 to 87 percent in 2002. Among male high school students, this rate also increased (from 79 percent in 1995 to 85 percent in 2002). In Nebraska, no current data are available to assess progress. However, the 1999 baseline rates (88 percent of high school girls and 85 percent of high school boys) are similar to the 2002 national rates.

A related 2010 objective, established for the U.S. and for Nebraska, is to increase to 75 percent the proportion of high school students (males and females) who have never engaged in sexual intercourse. Nationally, progress was made toward this objective for both male and female students. Among females,

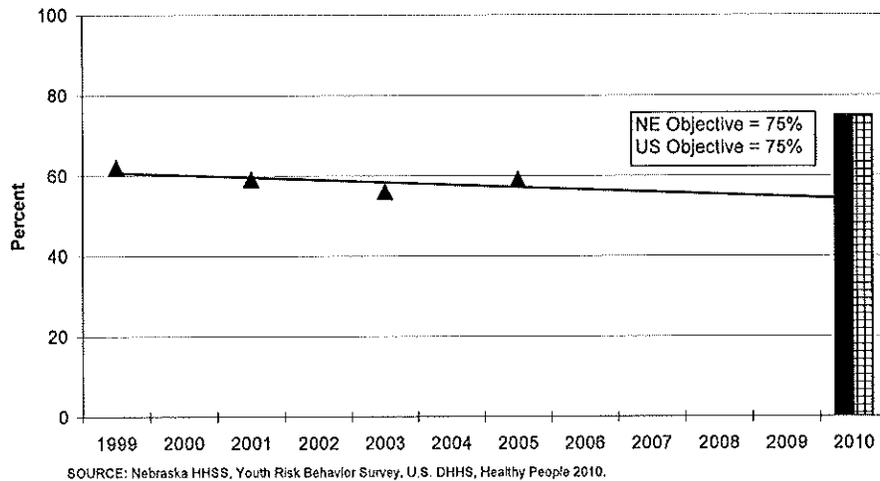
the proportion who had never had sexual intercourse increased from 62 percent in 1995 to 70 percent in 2002. For male high school students, the proportion was up 19 percent (from 57 percent in 1995 to 68 percent in 2002).

In Nebraska, the trend was negative for both male and female high school students (Figures 61 and 62). For both genders in 1999, 62 percent reported they had never engaged in sexual intercourse. The proportion was lower in each of the three YRBS studies conducted after that, with a 2004 prevalence estimate of 59 percent each for males and females.

**Figure 61**  
**Nebraska Adolescent Females (Grades 9-12)**  
**Who Never Engaged in Sexual Intercourse**



**Figure 62**  
**Nebraska Adolescent Males (Grades 9-12)**  
**Who Never Engaged in Sexual Intercourse**



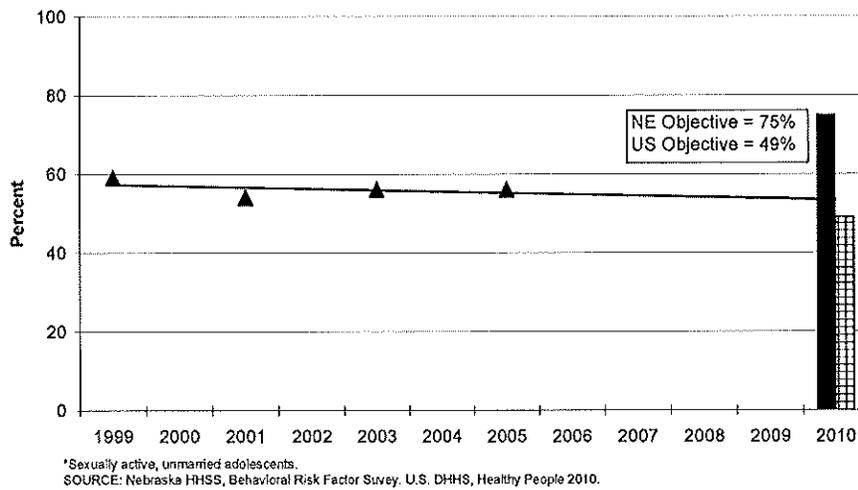
### Condom Use Among Sexually Active Adolescents

The third objective related to adolescent sexual behavior tracks the proportion of sexually active, unmarried high school students who used condoms the last time they had sexual intercourse. For female

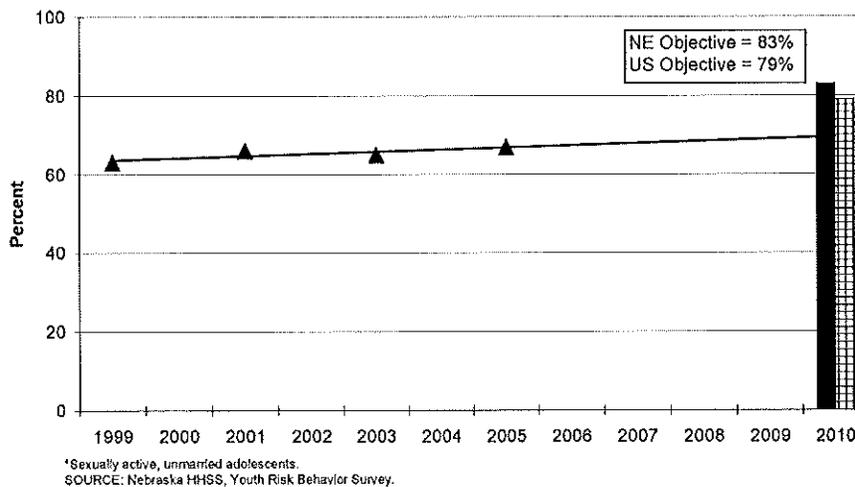
students, the U.S. objective is to increase the prevalence of condom use to at least 49 percent, while for males the target rate is at least 79 percent (Table 8). For Nebraska, the target rates are at least 75 percent for female high school students and at least 83 percent for male students. Progress was made nationwide, with both of the U.S. objectives met as of 2002. In 2002, 56 percent of high school girls and 84 percent of high school boys who were sexually active reported using condoms the last time they had intercourse.

In Nebraska, the proportion of girls who reported that their partner used condoms the last time they had intercourse actually decreased somewhat from 59 percent in 1999 to 56 percent in 2005 (Figure 63). Among high school boys, however, the proportion using condoms at last intercourse increased from 63 percent in 1999 to 67 percent in 2005 (Figure 64).

**Figure 63**  
**Nebraska Adolescent Females\* Aged 15-17 Years**  
**Who Used Condoms at Last Sexual Intercourse**



**Figure 64**  
**Nebraska Adolescent Males\* Aged 15-17 Years**  
**Who Used Condoms at Last Sexual Intercourse**



## REFERENCES

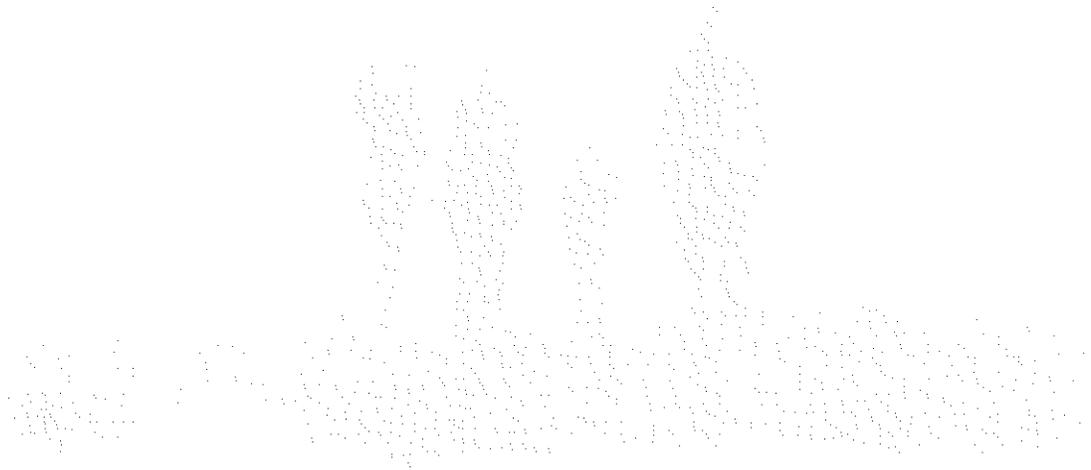
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### General

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### Family Planning

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