

Knowledge and Choices of Postpartum Contraception among Pregnant Teens

Karla M. Ortiz-González, MD, MPH*; Erika Benabe, MD*; Edgardo Rivera-Rosa, MD*; Ivette Negrón, MS*; Josefina Romaguera, MD, MPH*†

Objective: To describe the general knowledge and choices of postpartum contraception among pregnant teens who, at the time of the study, ranged in age from 13 to 19 years old and were receiving prenatal care at a hospital-based prenatal clinic.

Methods: Questionnaires to obtain information regarding demographic characteristics and to explore contraception knowledge and choices were voluntarily completed by 44 pregnant teens, ranging in age from 13 to 19 years old. The frequency and distribution of the variables under study were analyzed and are presented herein.

Results: Forty-four teens participated in the study. They had a mean age of 17.5 years. A significant proportion of the participants, 20 (45.5%), claimed not to know where to find information about contraception. All the participants acknowledged knowing about the male condom; as to other methods of contraception, 41 (93.2%) knew about oral contraceptive pills (OCPs), 31 (70.5%) knew about the patch, 30 (68.2%) knew about Depo-Provera, and 25 (56.8%) knew about intrauterine devices (IUD). The contraception methods about which the participants reported having the least knowledge were the sponge, the diaphragm, implants, the vaginal ring, and various natural methods. The majority (90.0%) of the participants agreed that they would prefer to use postpartum contraception. The contraceptive method of choice for postpartum contraception was the IUD (40%), which was followed in terms of preference by OCPs (17.5%), the patch (12.5%), and Depo-Provera (12.5%).

Conclusion: The majority of the pregnant teens who participated in the study professed the desire to use some sort of contraceptive method to ensure that they would not become pregnant again in the near future. To that end, most of them expressed a preference for the IUD, one of the most effective contraceptive methods available today. Nevertheless, they need more access to and information about available contraceptive methods. [*PR Health Sci J* 2014;33:117-121]

Key words: Contraception, Teen pregnancy, Post-partum period

Teen sexuality is a complex subject. Besides sexually transmitted diseases, pregnancy-related issues are among the most important concerns related to this field. Some teen girls end up having multiple unintended pregnancies, with each child adding a level of complexity to their already complicated lives. The reproductive choices made by teens have an enormous impact on their lives. Sexual activity coupled with inconsistent contraceptive use contributes to the high rates of adolescent pregnancies. Most sexually active teen girls are not trying to get pregnant, and those who already have 1 or more children would usually prefer to delay having another. For teen mothers, for whom preventing a repeat pregnancy is critical, there are a number of safe and effective contraceptive methods that can be started at any point after delivery, including immediately postpartum (1). The American College of Obstetricians and Gynecologists recommends that health care practitioners give

appropriate counseling to adolescents regarding contraceptive options and to encourage long-term use, to avoid unintended pregnancies (2-3). Adolescent contraceptive use is increasing, and compared with adult use, is characterized by shorter periods of consistent use with more contraceptive failure and more discontinuation for other reasons (4-5).

There is a marked health disparity in the incidence of adolescent pregnancy, with minority teens having a higher

*Department of Obstetrics and Gynecology, San Juan City Hospital, San Juan, Puerto Rico; †Department of Obstetrics and Gynecology, School of Medicine, University of Puerto Rico Medical Sciences Campus, San Juan, Puerto Rico

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Address correspondence to: Josefina Romaguera, MD, MPH, University of Puerto Rico, School of Medicine, Department of Obstetrics and Gynecology, PO Box 365067 San Juan, PR 00936-5067. Email: josefina.romaguera@upr.edu

rate of adolescent pregnancy than non-minority teens do (6). In 2010, Puerto Rico had a teen birth rate of 51.4 teen births per 1,000 live births. In the USA for that same time period, the rate was 34.2 teen births per 1,000 live births (7). These statistics provide a compelling reason for health practitioners to better inform themselves about teen contraceptive use. Factors such as the prevalence of use, the choices made with regard to contraceptive methods, and the effectiveness of the methods chosen all need closer study and deeper understanding. Further, in 2008, 17.8% of all live births in PR were to adolescent mothers aged from 10 to 19 years. In addition 33.8% of all pregnancies in 18- to 19-year-old adolescents were repeat pregnancies (8). In Puerto Rico, there is paucity of information regarding the use of contraception among adolescents. Therefore, studies that explore this subject are necessary.

The purpose of this study was to describe the general knowledge of and choices for postpartum contraception in a population of pregnant teens. To explore the contraception knowledge and choices in this group is very useful to health care professionals attempting to create strategies for family planning and for preventing repeated unintended pregnancies. In addition, by being aware of and understanding the contraceptive choices of this teenage population, future studies can investigate other factors related to the use of contraception by the members of this population. Examples of those factors are the effectiveness of a particular contraception method in teens, the failure rates of the different methods, the continuous use and accessibility, as well as the sexual satisfaction associated with each method, among others. This study provided information that can be used in the development of future research into postpartum contraceptive use among teenagers.

Methods

We performed a cross-sectional study. The subjects were pregnant teens, who were receiving prenatal care at the San Juan City Hospital. Institutional Review Board (IRB) approval was obtained from San Juan City Hospital of Puerto Rico.

The medical records from a prenatal clinic at San Juan City Hospital were screened to identify pregnant teens ranging in age from 13 to 19 years old. Patients were excluded if they were not pregnant or if they were older than 19. During a prenatal-care visit, patients who met the study criteria were invited to participate in it.

Data were collected over a period of 4 months using a self-administrated questionnaire. The questionnaire was administered to participants during a prenatal-care visit and participation was, as previously stated, voluntary. The questionnaire consisted of 2 parts: the first collected information on demographic characteristics, and the second explored issues related to the participants' knowledge of

contraceptive methods and the contraceptive choices made by those participants. The questionnaire and the informed consent were provided in Spanish, the official and primary language of the population under study. Frequencies and distributions were analyzed. Data were organized and analyzed using EpiInfo.

Results

A total of 44 teens (representing 33% of the total population seen in the 4-month study period) ranging in age from 14 to 19 years were invited to take part in the study; all did so voluntarily. Because no 13-year-old girls were identified within the potential sample population at the inception of the study, none were invited to take part. The mean age of the participants was 17.5 years. Of the 44 participants, 22 (50%) had obtained their high school diplomas (2 of the 22 went on to college); 13 (29.5%) participants were still in school, 1 (2.3%) was both working and going to school, and 30 (68.2%) were neither working nor going to school; none of the participants said that they were working only. Regarding marital status, most (26, 59.1%) of the participants were single, 14 (31.8%) were cohabiting, and 4 (9.1%) were married. In terms of gravidity, 29 (65.9%) were pregnant for the first time at the time of study, 12 (27.3%) were pregnant for the second time, and 3 (6.8%) were pregnant for the third time (Table 1).

Table 1. Demographics and childbearing history

Characteristics	Number (N = 44)	Rate (%)
<i>Age</i>		
14	1	2.3
15	5	11.4
16	4	9.1
17	11	25.0
18	6	13.6
19	17	38.6
<i>Mean age</i>	17.5	
<i>Education</i>		
Elementary School	2	4.5
Middle School	11	25.0
High School	9	21.0
High School Diploma	22	50.0
<i>School/Employment status</i>		
In school	13	29.5
Working & in school	1	2.3
Not working or in school	30	68.2
<i>Marital Status</i>		
Married	4	9.1
Single	26	59.1
Cohabiting	14	31.8
<i>Gravidity</i>		
1	29	65.9
2	12	27.3
3	3	6.8

Forty-four questionnaires were distributed, of which 35 were filled out and returned. According to the information contained on the questionnaires, 22 (50%) sample members had obtained a high school diploma and 13 (29.5%) were still at school. Thirty (68.2%) of the participants were unemployed and had already abandoned school. None of the respondents had a job at the time of completing the survey. The male condom was the most commonly used contraceptive method (as reported by the participants) (72.7%), followed by the pill (18.2%) and the Depo-Provera injection (2.3%). A total of 9 respondents claimed never to have used any form of contraception before (Table 2).

Based on the data extracted from the questionnaires, it can be said that all the participants were aware of the male condom, 41 (93.2%) knew about OCPs, 31 (70.5%) knew about the patch, 30 (68.2%) were aware of Depo-Provera, and 25 (56.8%) had heard of the IUD.

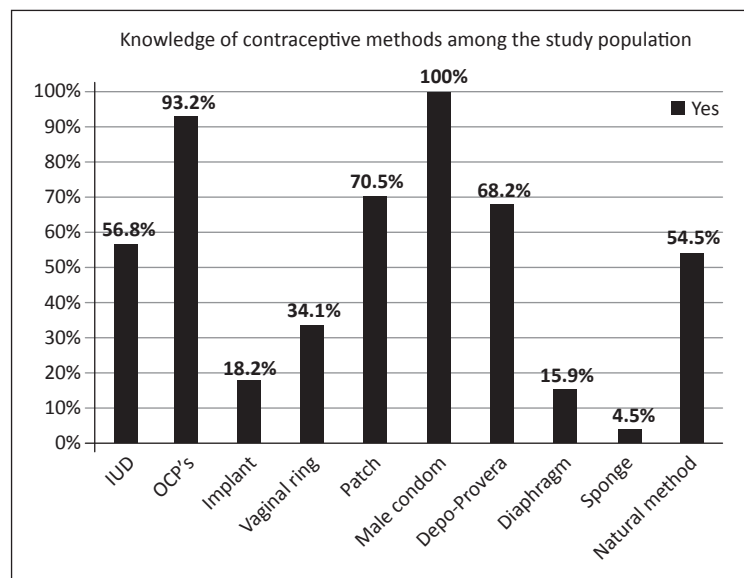


Figure 1. Percentage of participants that reported having knowledge (or being aware of) the different contraceptive methods.

Table 2. Contraceptive methods used in the past by study participants and postpartum contraceptive methods of choice (total participants, N = 44)

Contraceptive method	Used in the past	Postpartum contraceptive method of choice
Male Condoms	32 (72.7%)	2 (5%)
OCPs	8 (18.2%)	7 (17.5%)
Depo-Provera	1 (2.4%)	5 (12.5%)
IUD		16 (40%)
The Patch		5 (12.5%)
The Vaginal Ring		2 (5%)
Implants		1 (2.5%)
Others		2 (5%)

None of the participants reported having used an IUD, a diaphragm, the patch, a vaginal ring or a contraceptive implant. The contraceptive method of choice was the IUD (40%), which was in turn followed in terms of preference by OCPs (17.5%), the patch (12.5%), and Depo-Provera (12.5%). One of the participant did not specify a preferred method of postpartum contraception and another participant claimed that she preferred sterilization as her postpartum method of contraception.

The contraception methods about which the participants possessed the least knowledge were the sponge, the diaphragm, implants, the vaginal ring, and the natural method (Figure 1).

Regarding contraception use after delivery, 40 (90.9%) of the participants stated that they were interested in using some form of contraceptive method, while 4 (9.1%) were not interested in using any form of contraception at all. The 2 stated reasons for not using contraception after delivery were that the participant/s was/were interested in getting pregnant again in the near future and that the participant/s believed that contraceptives were not effective. Among the participants who wanted to use contraception after delivery, the contraceptive

method of choice was the IUD (40%); this most preferred method was followed by OCPs (17.5%), the patch (12.5%), and Depo-Provera (12.5%) (Table 2).

Discussion

In Puerto Rico, little has been published about teen contraceptive use. Although the teen birth rate in PR has decreased in the last few years, it remains significantly higher than the birth rates of most industrialized nations are. According to the Vital Statistics Report of 2010, the birth rate in Puerto Rico of women aged 18 to 19 years was 33.8% (8). Teen pregnancy has an adverse effect on society. Teen pregnancy and childbirth contribute significantly to dropout rates among high school girls (9-11). Our data revealed that 45% of the participants had obtained a high school diploma, but only 2 of the girls continued their studies after high school. In addition, most of the participants (68.2%) were not working or attending school at the time of the study.

Most of the teens who participated in the study professed the desire to use some sort of contraception to prevent or indefinitely postpone future pregnancies. Nevertheless, a significant proportion of the participants claimed not to know where to get information about contraceptive methods. In addition, although more than half knew about contraceptive methods such as OCPs, the patch, Depo-Provera, and IUDs, these participants had never used either the patch or an IUD, and only a very few of them had used either an OCP or Depo-Provera. This shows that the participants remain unclear on how to gain access to several of the available contraceptives. Moreover, 34% of the study participants were not experiencing their first pregnancy.

A limitation of the study was that the characteristics of the teens receiving prenatal care at our institution were specific to the members of the sample population and may differ from those of the general population of Puerto Rico. Most of the patients had the government-provided medical insurance and resided in public housing projects (all located in the San Juan metropolitan area). For this reason, our results cannot be generalized to the population of teens in Puerto Rico. The small sample size represents another limitation of this report.

The results of this study contribute to further expanding the knowledge of contraceptive effectiveness and attitudes about contraception among teens. The data gathered by this study can be used to guide future studies and to formulate strategies to prevent repeat pregnancies in this population.

The results of this study clearly indicate that the majority of the pregnant teens desired to use some form of contraception to prevent a repeat pregnancy in the near future. Most of the study participants expressed a preference for the IUD, which is one of the most effective contraceptive methods available.

Nevertheless, almost half of the participants claimed that they did not know where to find information about contraceptive methods. These individuals did not even recognize the gynecologist as a provider who could orient them about contraception. Although the pregnant teens that participated in this study expressed their desire to use contraception as a way to postpone or prevent further pregnancies, they need more access to contraceptives and more information about available options. Understanding the teenage population and providing its members with education regarding contraceptive methods is essential if we are to help them avoid unintended pregnancies.

Resumen

Objetivo: Describir el conocimiento general y las preferencias de contraceptivos después del periodo post-parto en adolescentes embarazadas, las cuales al momento del estudio, estaban entre las edades entre de 13 a 19 años y estaban recibiendo cuidado prenatal en clínica hospitalaria. **Métodos:** Se obtuvo información acerca de características demográficas, y se exploró el conocimiento y la selección de contraceptivos, administrando cuestionarios a 44 adolescentes embarazadas entre las edades de 13 a 19 años. La frecuencia y distribución de las variables bajo estudio fue analizada y presentada en el manuscrito. **Resultados:** Cuarenta y cuatro adolescentes participaron en el estudio, con una media de edad de 17.5 años. Una parte considerable de las participantes, 20 (45%), desconocían donde buscar información acerca de contracepción. Todas las participantes refirieron conocer acerca del condón masculino, 41 (93.2%) acerca de las pastillas anticonceptivas orales, 31 (70.5%) acerca del parcho, 30 (68.2%) acerca de Depo-Provera y 25 (56.8%) acerca del

dispositivo intrauterino (DIU). Los métodos contraceptivos, los cuales las participantes reportaron conocer menos fueron: la esponja, el diafragma, el implante, el anillo vaginal y varios métodos naturales. La mayoría de las participantes (90.0%) coincidieron en que preferían usar contracepción post-parto. El contraceptivo preferido para contracepción post-parto fue el dispositivo intrauterino (40%), seguido en termino de preferencia por los contraceptivos orales (17.5%), el parcho (12.5%) y la Depo-Provera (12.5%). **Conclusión:** La mayoría de las participantes desean utilizar un método contraceptivo para evitar embarazos recurrentes en un futuro cercano. En adición, las preferencias están inclinadas por uno de los métodos anticonceptivos más efectivos, el dispositivo intrauterino. Sin embargo, las participantes necesitan más acceso e información sobre métodos anticonceptivos.

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