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Providing Highly Effective Contraception After Childbirth Can Reduce Unintended Pregnancy

AUSTIN, Texas (June 24, 2015) — Half of all pregnancies in the United States are unintended. The majority of these pregnancies occur among women who already have children, and often happen within two years of women giving birth. In a study recently published in the journal *Obstetrics and Gynecology*, researchers at the Texas Policy Evaluation Project (TxPEP) set out to find out how many women adopted highly effective methods, when they did so postpartum, how much this reduced risk of pregnancy within 18 months of delivery.

Data from the 2006–2010 National Survey of Family Growth, a representative sample of reproductive aged women in the US, were used to determine contraceptive use at regular intervals in the first 18 months after birth. By 3 months postpartum, 72% of women were using some type of contraceptive. 13% were using a permanent method and 6% used LARC, and 0.5% of these women became pregnant within 18 months of delivery. More women relied on hormonal methods (28%) and less effective forms of contraception (25%) and 13-18% of these women became pregnant within 18 months, as did 23% of women using no contraception. At least 70% of pregnancies among U.S. women in the first year after delivery of a child were unintended. Unintended and closely spaced pregnancies are associated with adverse maternal and child health outcomes.

The authors of the study note that it is not clear why few postpartum women make use of highly effective methods but suggest that this may be due to insurance-related barriers which prevent women from obtaining long-acting reversible contraception before being discharged from the hospital. "Providing women access to long-acting reversible methods immediately after delivery could have a real impact on preventing unintended pregnancy in a state like Texas," said Dr. Kari White, assistant professor of Health Care Organization & Policy at the University of Alabama at Birmingham and lead author of the study.

A growing number of states do allow for separate Medicaid reimbursement for LARC methods immediately following delivery. Such a change is scheduled to go into effect in Texas, where 74% of unplanned births are currently publicly funded, on January 2016. In a prospective study of 800 postpartum women, TxPEP found that a large percentage of women wanted to use long-acting reversible contraceptives (LARC) and permanent methods. However, in the two Texas cities where the study was conducted, most women who wanted to use these methods were using a less effective form of contraception at 6 months after delivery. If the demand for postpartum LARC nationwide resembles that found in Texas, the new reimbursement policy will likely have a major impact on unintended pregnancy.

About TxPEP

The Texas Policy Evaluation Project (TxPEP) is a five-year, comprehensive effort to document and analyze the impact of the measures affecting reproductive health passed by the 82nd and 83rd Texas Legislatures. The project team includes researchers from The University of Texas at Austin's Population Research Center, Ibis Reproductive Health, and the University of Alabama-Birmingham.

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If you would like to receive more information about this topic or schedule an interview with Dr. White, Dr. Teal, or Dr. Potter, please contact Jennifer Potter-Miller at jpottermiller@prc.utexas.edu.