

# Family planning among teenage mothers

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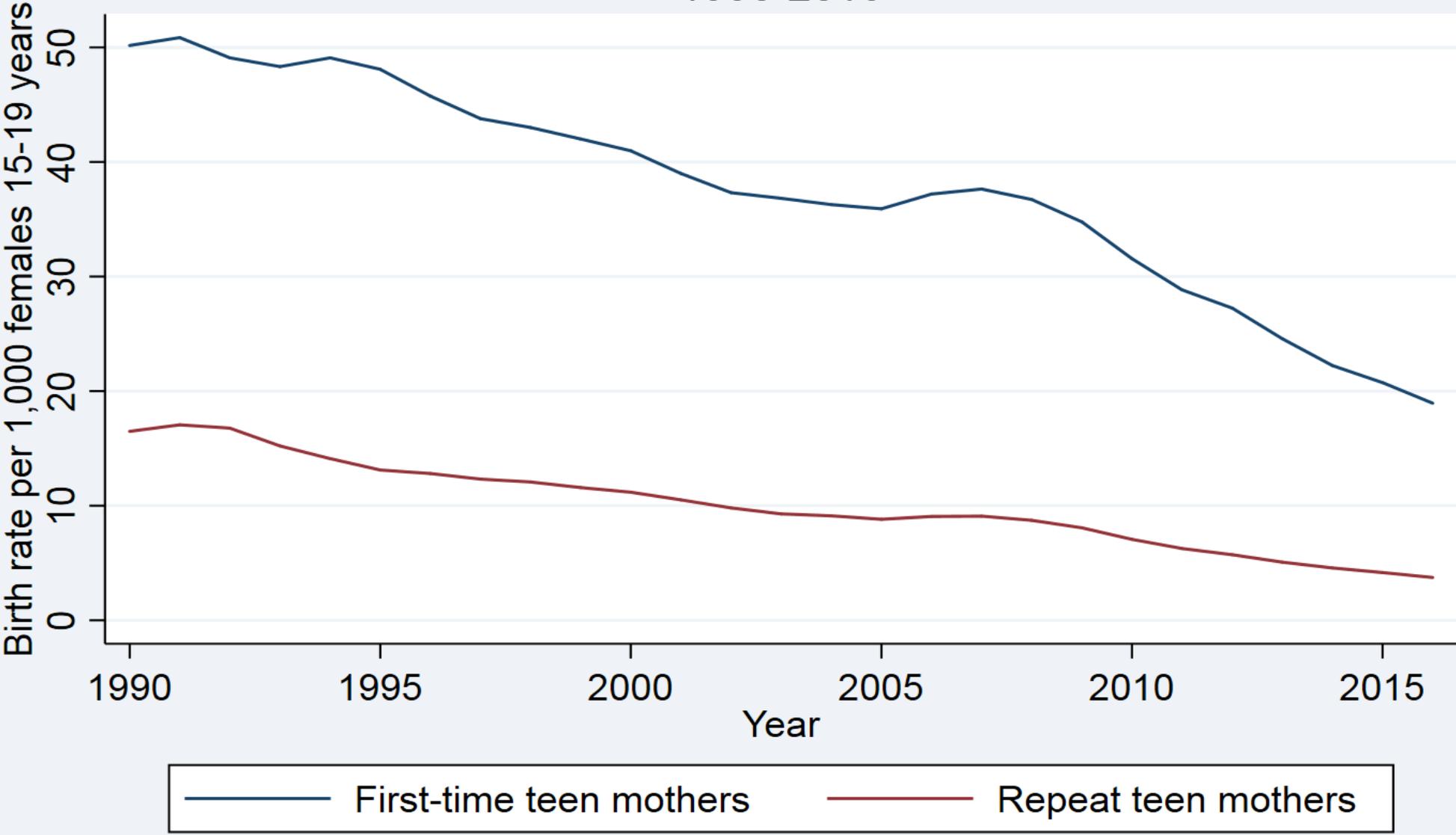
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# Teen births in the United States: 2017

- 196,294 teen births (every 3 minutes)
- 1 in 6 teen births is a repeat teen birth
- 80-90% + first and repeat teen pregnancies unintended

# Teen Birth Rate by Type

## 1990-2016



Sources: CDC Natality Data files; SEER Population data

# Repeat v. first-time teen mothers

- Elevated risk of:
  - Low birth weight
  - Preterm birth
  - Infant mortality

# Repeat v. first-time teen mothers

- Elevated risk of:
  - Low birth weight
  - Preterm birth
  - Infant mortality
- *Who are repeat teen mothers?*
- *What is driving poor birth outcomes?*
- *What are their longer-term outcomes?*

# Repeat v. first-time teen mothers

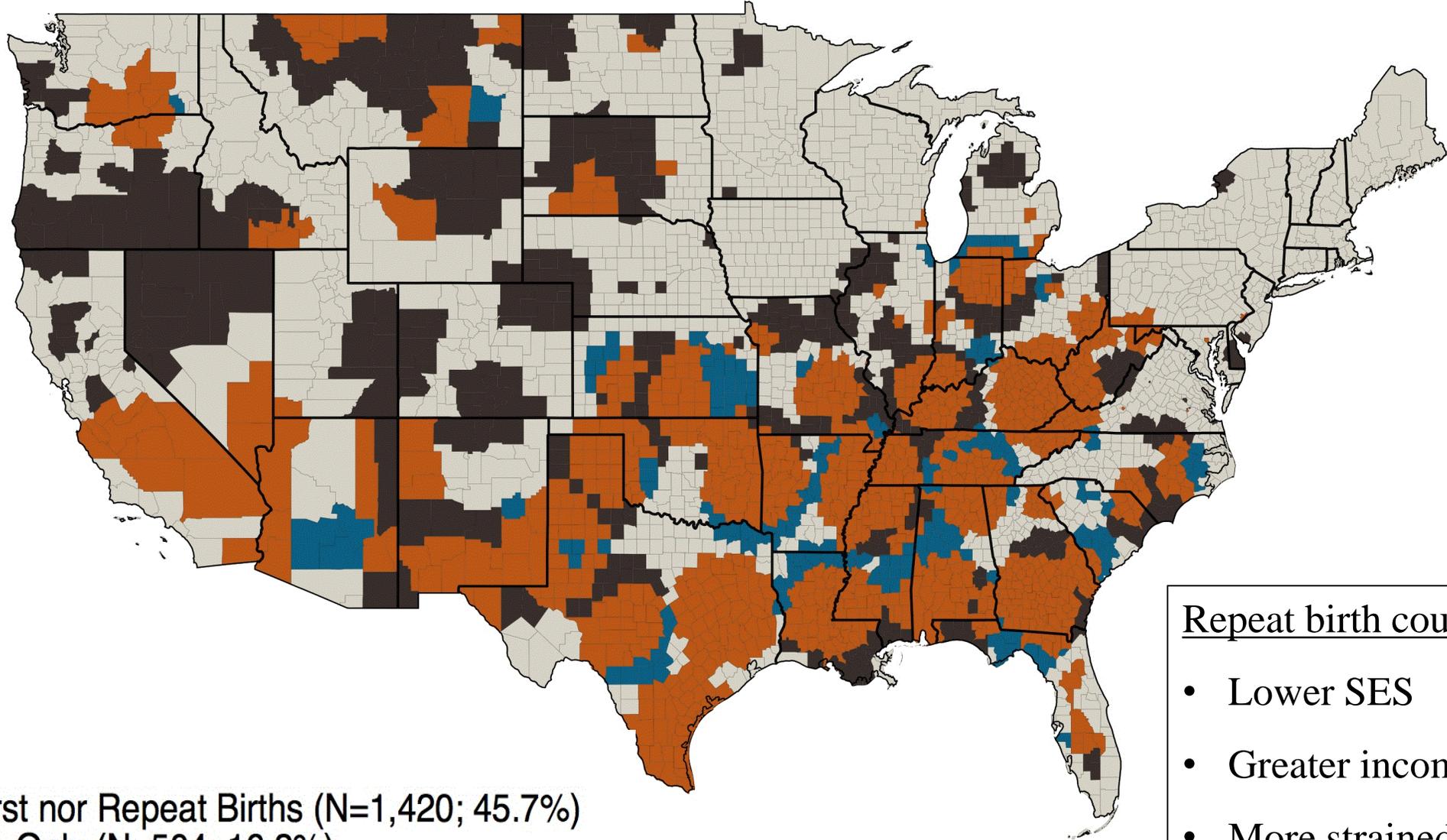
## Pregnancy-Associated Health Behavior

- Inadequate prenatal care
- Tobacco use during pregnancy
- Sexually transmitted infections
- Inadequate pregnancy weight gain
- Breastfeeding

## Gestational Health Conditions

- **Lower** gestational diabetes
- **Lower** gestational hypertension

US Vital Statistics- Birth Files, 2009-2017  
*N* = 2,547,350



■ Neither First nor Repeat Births (N=1,420; 45.7%)  
■ First Births Only (N=504; 16.2%)  
■ Repeat Births Only (N=193; 6.2%)  
■ First and Repeat Births (N=991; 31.9%)

Repeat birth counties:

- Lower SES
- Greater income inequality
- More strained reproductive health services

# Implications:

## Clinical:

- Screening for behavioral risk as for physical health risk

## Health services access:

- Prenatal & postpartum care
- Contraceptive care

## Social determinants:

- Support for educational persistence, job training, economic opportunity
- Reductions in poverty, income inequality

Teen mothers are not a lost cause...

# Opportunities!



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Developmental Psychology

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## Teen Mothers' Educational Attainment and Their Children's Risk for Teenage Childbearing

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Teen mothers who complete high school AFTER giving birth:

- Better self-rated health at age 50 (via + income)
- Children (M/F) are less likely to be teen parents themselves

# Opportunities!

Teen mothers who have one (v. repeat) births at age ~28

- + graduate high school
- - financial hardship
- - welfare/social programs

# Contraception

- Tool for preventing repeat births, facilitating ongoing education
- Total reduction in adolescent pregnancy and births 2007-2014 attributable to improved contraceptive use

# Long-acting reversible contraception (LARC)



- > 99% effective
- One appointment, one payment
- Lasts 3-12 years



- “Oops proof”
- “Set it and forget it”
- ~5% of adolescents use

# Contraceptive counseling

# Contraceptive counseling

- Prioritizes effectiveness, emphasize LARC
- Didactic- moving toward person-centered, shared decision-making
- Brief, presented with other information
- Similar for adolescent/adult women
- Notable exceptions at the provider level— but not standardized

# Study: Family planning among teen mothers

- Qualitative interviews
- Latina adolescents (& their mothers)
- 3<sup>rd</sup> trimester of first pregnancy (& 3 months postpartum)
- Contraceptive knowledge, preferences, experience with counseling
- Future goals, role of contraception



# Goals for the future

I: Right before you found out you were pregnant, did you have any plans for the future?

P: *Yeah, I actually had plans to be a nurse. To, uh, study OB nurse. But, I'm still, **I'm still having that dream** still. Still kicking up a bit, but I feel like it's going to be a little bit harder to get there because of the baby, so **I just have to still keep on going to school.***

Latina adolescent, age 16, 37 weeks pregnant

# Contraception as facilitator of goals

I: Have you thought about how birth control could affect how you can achieve your goals?

P: *It's actually going to be really helpful for me. So, I mean, I pretty much would love to have birth control if, whenever I get done with my pregnancy.*

I: Okay, and how would it be helpful for you?

P: *It would be helpful by, uh, not getting pregnant again and finding a easier path to go to college.*

Latina adolescent, age 16, 37 weeks pregnant

# Knowledge of contraception

I: What do you know about birth control?

P: *“I mean, not as much as I think I should, but I feel like that's kind of on me because **I don't ask questions**. Um...But I just know that it helps like prevent you from getting pregnant.”*

I: What types of birth control do you know about?

P: *“I know about the implant in your arm, [and] the one that goes in like up your- **I don't know where it goes up**, but it's like one that you have for, like, 10 years.”*

Latina adolescent, age 16, 37 weeks pregnant

# Considerations for adolescent contraceptive counseling

## More than effectiveness: multidimensional considerations

- Time frames/time horizon
- Body knowledge
- Contraceptive experience
- Side effects
- Social influences
- Logistical constraints (consent, \$, access)
- Avoid coercion
- Autonomy

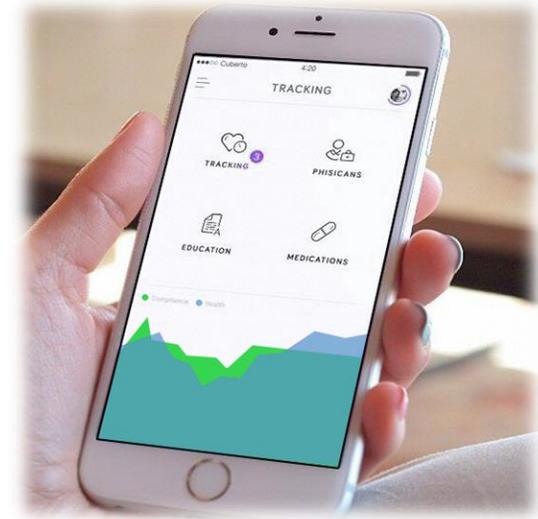
Toward a developmentally appropriate  
contraceptive counseling method for  
adolescents...

# Adolescent-friendly health care

- WHO: “meets the needs of young people sensitively and effectively and is inclusive of all adolescents”
- “Adolescent friendly” initiatives
  - Adolescent-centered methods: youth voice needs, give input (**autonomy**)
  - Improved health care experience for adolescents

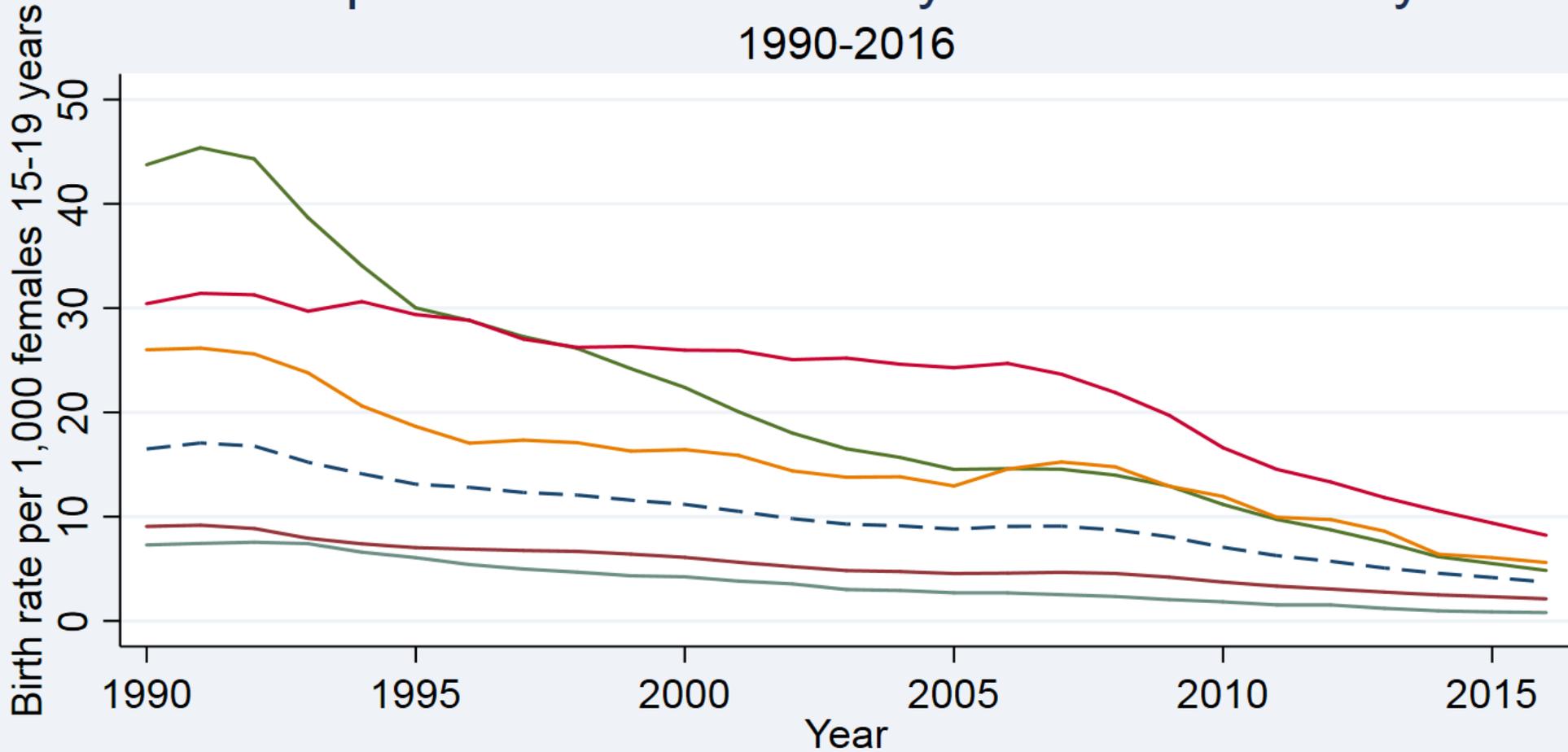
# Pilot work

- Developmental considerations for adolescents
- Youth and provider advisory groups
- Delivery format
- Clinic workflow



Thank you!

# Repeat teen birth rates by race and ethnicity 1990-2016



Sources: CDC Natality Data files; SEER Population data