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TITLE

FACTORS ASSOCIATED WITH POSTPARTUM CONTRACEPTIVE USE AMONG WOMEN WHO HAVE EXPERIENCED SHORT BIRTH INTERVALS

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ABSTRACT

Context: In the US, nearly 33% of pregnancies are conceived within 18 months of a previous pregnancy. Pregnancies that result from these short birth intervals (SBI) can pose serious risks. One key strategy for preventing SBI is by promoting postpartum contraceptive (PPC) use. However, data on factors associated with PPC use among women who have had SBI are sparse.

Objective: The purpose of this study was to evaluate factors associated with PPC use among women with SBI.

Methods: Data from the Pregnancy Risk Assessment Monitoring System, a large national survey initiated by the CDC, were used. Since only Mississippi and Tennessee include a question about SBI on their survey, this analysis was limited to women from those states. Logistic regression was used to obtain odds ratios (ORs) and 95% confidence intervals (CIs) to ascertain important predictors of PPC use among women with SBI.

Patients: 382 women aged 18-40 years who reported that their last two pregnancies were ≥ 18 months apart.

Interventions: Women self-reported information on experiences before, during, and after pregnancy shortly after giving birth.

Main Outcome Measure: Women self-reported if they were currently using any form of contraception, approximately 2-4 months following a live birth.

Results: Nearly 87% of women reported PPC use. Minority women had decreased odds of PPC use compared to Non-Hispanic white women (Non-Hispanic black: OR=0.15, 95% CI: 0.03-0.71 and Hispanic/other: OR=0.29, 95% CI: 0.04-2.12). Women who were unmarried and had greater parity had increased odds of PPC use (unmarried vs. married: OR=6.39, 95% CI: 1.33-30.67; 3 vs. 2 children: OR=3.16, 95% CI: 1.00-10.00 and ≥ 4 vs. 2 children: OR=2.87, 95% CI: 0.95-8.69).

Conclusions: Findings underscore the importance of providing additional counseling regarding the importance of PPC use in certain subgroups of women to prevent SBI.

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