Exploring Fertility Concerns and Long-Acting Reversible Contraceptive Choice Among Young Women

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Background

Approximately 80% of college women are at risk of unintended pregnancy. The American Congress of Obstetricians and Gynecologists recommends long-acting reversible contraceptive (LARC) methods, including the contraceptive implant and intrauterine devices (IUDs), as first-line pregnancy prevention for adolescents and young women. Yet, less than 5% of 15-19 year old women using a method of contraception use LARC. Limited research explores the relationship between fertility concerns and contraceptive choice among young women. According to a recent study of U.S. women, 40% believed they might face infertility.

Objective

To better understand how young women’s beliefs about fertility impact choice of long-acting reversible contraceptive (LARC) methods, including the intrauterine device (IUD) and the implant.

Methods

- Participant Recruitment
  - Purposive sampling
  - Women aged 18 to 24 years
- In-Depth Qualitative Interviews
  - 53 in-person interviews
  - Recorded and transcribed verbatim
- Semi-structured interview guide covered topics such as knowledge and opinions of contraception, interpersonal communication, and messages about LARC methods.
- Data Analysis
  - HyperRESEARCH 3.5.2 qualitative data analysis software
  - Constant Comparative Method (Corbin & Strauss, 2008)
  - Open and Axial coding identified emerging themes
- Diffusion of innovations theory provided an appropriate conceptual lens for data collection and analysis.

Results

Stigma

Historical Influence
- “I heard [the IUD] can mess up or something. I don’t want that to happen so I’d like to know how others reacted to the IUD.”
- “I bet some kids worry about the horror stories associated with [the IUD].”

Silence
- “I’m not a risk taker. I don’t like change. I like to just do what I know.”
- “[I would] definitely have to hear personal stories…so I could weigh the consequences for myself.”

Medical Opposition
- “[My physician] said I don’t know about doing an IUD since you are so young and there was more of a complication associated with that.”
- “[My physician said] I think you should be able to remember to take a pill, and that would be my best option.”

Identity

Menstruation as a “Natural” Event
- “I kind of hate…having my period, [but I] definitely want to have kids, so it’s worth it…”
- “I read something where like your period is five times heavier…and then there’s a chance that you might not be able to have kids.”

Balancing Family and Career
- “You don’t know who you’re gonna meet or when [motherhood is] gonna happen.”
- “[The IUD] is probably more for a time in your life when you know you don’t want to have kids.”

Negotiating Risk: Fear of Infertility
- “[I am] a little bit fearful that if I were using an IUD and took it out and I was wanting to get pregnant, that I might have problems.”
- “Eventually I do want to have kids so I think about…what I currently do and how that could affect me having kids.”

Demographic Data

- White or Caucasian: 9.4%
- Black or African American: 3.8%
- Hispanic or Latino: 3.8%
- 86.8%

Conclusions

- Perceived stigma of LARC methods influenced participants’ beliefs about its impact on fertility
- Family members and friends were the participants’ primary resources for opinions about LARC methods
- Link between the fear of infertility and perceived identity was a factor in contraceptive decision-making
- Need for open and encouraging health care providers and health communication campaigns
- Beliefs of women must be addressed in order to increase LARC uptake

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