


The Role of Childhood Violence, Self-esteem and Depressive Symptoms on Inconsistent Contraception Use among Young, Sexually Active Women

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Unintended Pregnancy: Prevalence

- Unintended Pregnancy (UP) is a significant public health problem
 - One-half of all pregnancies are unintended
 - Mistimed
 - Unwanted
 - Over 3 million pregnancies in the US are reported as unintended




Unintended Pregnancy: Risk Groups

- High rates of UP occur among:
 - urban women
 - women experiencing violence
 - women with limited education
 - women living in poverty
 - women with high depressive symptoms
 - women with low self-esteem



Unintended Pregnancy: Consequences

- UP has been linked to:
 - delayed prenatal care
 - increased substance use during pregnancy
 - higher infant mortality
 - reduced breastfeeding
 - increase child and maternal violence
 - higher levels of maternal depression



Unintended Pregnancy: Consequences

- Decreasing UP will have long term community effects through:
 - reducing STDs, HIV and teen pregnancy
 - improving education and socioeconomic status
 - expanding the national workforce

Unintended Pregnancy: Interventions

- To prevent UP, promoting effective, consistent contraceptive use is key!

Consistent Contraception Use

- The Affordable Care Act of 2012 provides free contraception to sexually active women
- Other nonfinancial barriers that hamper consistent contraceptive use among young, sexually active urban women
 - Violence, depressive symptoms and self-esteem

Young Women's Health Study

- Project funded by the National Institute of Child Health and Human Development (R21 HD071200 PI: DB Nelson)
- To examine individual, social, and institutional factors related to unintended pregnancy (UP) and inconsistent contraception use

Young Women's Health Study

- Enrolled 351 sexually active women from January 2013-November 2013 from urban family planning clinics
- Followed women for 6 months to assess contraception use and risk of UP



Young Women's Health Study

- Eligibility criteria:
 - Non-pregnant women
 - Sexually active
 - Age 18-30 years
 - North Philadelphia zip code
 - Never had a hysterectomy or tubal ligation



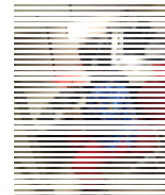
In the Clinic

- Research coordinators approached each woman, described the purpose of the study, and screened for study eligibility
- Wait time ranged from 30-60 minutes
- Questionnaire was completed prior to the clinic visit



Baseline Interview

- Audio computer assisted survey instrument (ACASI)
- Collect information on tablets:
 - Demographic factors
 - Substance use
 - Current and past violence
 - Self-reported contraception use
 - Depressive symptoms
 - Self-esteem



Contraception Use: Type

What birth control method did you or your male partner use to prevent pregnancy? (Check all that apply.)

	YES
Birth control pills	
Withdraw/ Pull-out	
Condoms	
Depo-Provera (injectable birth control)	
IUD (intrauterine device)	
Patch (on the skin birth control)	
Vaginal Ring	
Implanon (under the skin birth control)	
The morning after pill or Plan B (emergency contraception)	
Some other method	
I do not use anything to prevent pregnancy	



Contraception Use: Consistency

Would you say you used the birth control method with your male sexual partner every time, most of the time, about half of the time, some of the time, or none of the time?

Every time	1
Most of the time	2
About half of the time	3
Some of the time	4
None of the time	5



Follow-up Interview: six months

- Home visits
 - Re-contact each enrolled women
 - Conduct a short follow-up interview
 - Consistency of contraception use



Contraception Use Groups at baseline

- 36% of women reported inconsistent contraception use
- 64% of women reported consistent contraception use
 - 65% in the long acting contraception group
 - consistent use of IUD, Patch, Implanon, Vaginal Ring
 - 35% in the consistent contraception group
 - consistent use of condoms and birth control pills



Demographic Factors

Demographic Characteristics	Total (n=258)	LARC (n=108)	Consistent (n=57)	Inconsistent (n=93)	p-value
Age	22.5	22.5	22.5	22.52	0.998
Race					0.635
Black	80.23%	79.63%	82.46%	79.57%	
White	3.49%	1.85%	5.26%	4.30%	
Other	16.28%	18.52%	12.28%	16.13%	
Hispanic Origin	15.89%	16.67%	15.79%	15.05%	0.952
Education					0.990
< High School	22.87%	24.07%	22.81%	21.51%	
High School/GED	49.22%	48.15%	50.88%	49.46%	
College	27.91%	27.78%	26.32%	29.03%	



Demographic and Substance Use Factors

	Total (n=258)	LARC (n=108)	Consistent (n=57)	Inconsistent (n=93)	p-value
Access to Provider, past yr	79.07%	82.41%	77.19%	76.34%	0.531
Lifetime Sexual Partners					0.698
1-4	40.70%	40.74%	49.12%	35.48%	
5-8	27.91%	25.93%	28.07%	30.11%	
9-19	20.16%	22.22%	14.04%	21.51%	
20+	11.24%	11.11%	8.77%	12.90%	
Problem Drinking, past yr*	10.08%	13.89%	0.00%	11.83%	0.010
Marijuana Use, past yr	42.25%	45.37%	33.33%	44.09%	0.299
Cigarette Use, current	25.58%	25.00%	21.05%	29.03%	0.545



Violence Factors

	Total (n=258)	LARC (n=108)	Consistent (n=57)	Inconsistent (n=93)	p-value
Childhood Physical Violence	46.90%	51.85%	33.33%	49.46%	0.063
Childhood Sexual Violence *	16.28%	12.96%	10.53%	23.66%	0.051
Adult Violence					
Adult Physical Violence	89.92%	90.74%	84.21%	92.47%	0.247
Adult Sexual Violence	17.05%	16.67%	12.28%	20.43%	0.432
Perception of Community Violence	37.96	39.44	35.67	37.63	0.127
Exposure to Violence	10.88	11.56	10.19	10.52	0.076
Neighborhood Disorder	27.08	27.89	25.47	27.12	0.206
Current Violence	69.38%	70.37%	59.65%	74.19%	0.165

Perceptions of community violence assessed by the City Stress Inventory



Psychological Constructs

	Total (n=258)	LARC (n=108)	Consistent (n=57)	Inconsistent (n=93)	p-value
Depressive Symptoms	9.23	8.92	8.35	10.13	0.097
Depressive Symptoms (y/n)	41.09%	35.19%	38.60%	49.46%	0.111
Self-Esteem*	23.34	23.97	24.02	22.20	0.010
Self-Esteem*					0.006
Normal/Low	59.30%	50.00%	56.14%	72.04%	
High	40.70%	50.00%	43.86%	27.96%	
Sexual Self-Efficacy	60.87	62.05	57.75	61.41	0.147

Self-esteem assessed by 10-item Rosenberg Self-Esteem Scale
 Depressive symptoms assessed by CES-D 10-item scale
 Social Provisions assessed by 24-item Social Provisions Scale



Predicting Inconsistent Contraception Use

	OR	95% CI	p-value
Childhood sexual violence*	2.153	1.157-4.008	0.016
Childhood physical violence	0.978	0.618-1.548	0.925
Community-level violence	0.997	0.977-1.102	0.763
Gravidity	0.843	0.654-1.088	0.189
Problem drinking	1.096	0.506-2.374	0.817
Self-esteem*	0.955	0.916-0.995	0.028
Depressive symptoms (y/n)*	1.600	1.001-2.542	0.046
Consistently high depressive symptoms (y/n)*	1.782	1.086-2.922	0.022

Results from univariate GEE models predicting inconsistent contraception use



Summary

- Inconsistent contraception users reported significantly:
 - More childhood sexual violence
 - Higher depressive symptoms
 - Lower self-esteem scores
 - Higher proportions of consistently high depressive symptoms



Conclusions

- When designing interventions to reduce UP it is important to recognize the importance of:
 - high levels of depressive symptoms
 - low levels of self-esteem
 - high prevalence of childhood sexual violence



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