

Characterizing Barriers to Contraceptive Use Among Opioid-Maintained Women

Mariel R. Golden¹, Dennis J. Hand², Sarah H. Heil^{2,3}

¹College of Nursing and Health Sciences, ²Department of Psychiatry, ³Department of Psychology

Abstract

This research seeks to identify reasons for the high rate of unintended pregnancies among the opioid maintained (OM) population compared to the general population. More than 85% of pregnancies among opioid-maintained (OM) women are unintended, compared to 40% in the general population. Unintended pregnancy is highly preventable with the proper use of birth control methods. Understanding barriers to contraception use among OM women may be important to decreasing unplanned pregnancies. OM participants were 28 women in opioid agonist treatment screened for participation in an ongoing contraception study. Participants provided demographics, reproductive history and completed a survey from the National Campaign to Prevent Teen and Unwanted Pregnancy. The research compares the OM women to women in the National Campaign survey on variables which could interfere with birth control use. Variables include access to information, who women trust for information regarding contraception, values related to contraceptive use, attitudes toward unintended pregnancy, behavior involving contraception with primary and non-primary partners, etc. The data reveals differences between OM women and those in the Nation Campaign survey. OM women had an increased lack of trust in health care professionals (52 % vs. 77%); less OM women have had a doctor help select birth control (17% vs. 51 %). The groups were similar in the percentage that believes pregnancy should be planned (68% vs. 78%), but OM women reported less consistent contraceptive use (25% vs. 68%). The findings indicate underlying faults within health care that prevent OM women from accessing and having successful use of birth control.