

Impacts of Social Determinants of Health on Family Planning: Contraceptive Use and Pregnancy Intention

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Abstract

BACKGROUND: Social Determinants of Health (SDOH) play a crucial role in determining an individual's access to reproductive healthcare. Given that nearly 1 million unplanned pregnancies in the U.S. result from oral contraception misuse or discontinuation annually, those experiencing negative impacts from SDOH may experience greater barriers to family planning (FP). Our primary objective is to assess the relationships between SDOH, contraceptive utilization and pregnancy intention among individuals using the Behavior Risk Factor Surveillance System (BRFSS).

METHODS: We conducted a cross-sectional analysis of 2017 BRFSS, our main focus was to use the SDOH module to assess differences in the utilization of FP. While sociodemographic variables related to SDOH were extracted to use as controls. We then constructed bivariate and multivariable logistic regression models to determine the associations, via odds ratios, between SDOHs, contraceptive use and FP.

RESULTS: Compared to women not experiencing SDOH, we found that individuals were less likely to have used contraceptive methods who reported running out of food (AOR: 0.65; CI:0.50-0.86), not being able to afford balanced meals (AOR: 0.64; CI:0.49-0.84) or ran out of money by the end of the month (AOR: 0.45; CI:0.32-0.64). Among women not using contraceptive methods, women who were not intending to become pregnant were more likely to report suffering from financial instability including having difficulty affording balanced meals as opposed to those women who intended on becoming pregnant.

DISCUSSION/CONCLUSION: Our study found that the food insecurity and monthly financial instability domains of SDOH were significantly associated with women who did not use any contraceptive measures but had no intention of pregnancy. With changing policies around women's reproductive healthcare, addressing barriers to FP and contraceptive access is increasingly critical. Expanded funding for public health programs may provide a solution for women seeking contraceptive and FP counseling.