

Study Summary: **Risk and Facilitating Factors of Contraception Use among Female Methadone Clinic Patients, Ages 18-45**

Research Team

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Background

In 2014, Knox County reported 103 babies diagnosed with neonatal abstinence syndrome (NAS), representing 11% of all babies born with NAS in Tennessee. Over a quarter of women who gave birth to NAS babies were using prescribed opioids, including women in medication assisted treatment (MAT) clinics. Preventing unintended pregnancies among women enrolled in MAT could decrease the number of babies born with NAS.

Study Aim

Describe the demographic characteristics of the women in MAT, their past and present contraceptive use, and their knowledge and attitudes about contraception

Study Methods

Women aged 18-45 who were being treated at either of two Behavioral Health Group clinics in Knoxville for opioid dependence between January 12, 2015 and February 13, 2015 were eligible to participate in a 61 question survey addressing the aforementioned objectives.

Study Results

The survey was completed by 287 women. The vast majority of women were white (94%) and from Tennessee (97%). Over a third of the women were married (38%) and nearly two thirds (62%) had a high school degree or less. Nearly a third (32%) of women had a history of non-consensual sex. Other characteristics of the participants included:

- 41% of the women did not have health insurance and 42% had public insurance. Lack of health insurance was the primary barrier (23%) reported to using contraception.
- Nearly one in five of the women (18.1%) experienced physical abuse in the past year and a third (32.4%) had had sex without giving consent in their lifetime.
- Over half of the women had 2-3 pregnancies, and nearly a third (31%) had ≥ 4 pregnancies. Only 7% of women using contraception were using a long-acting reversible method such as an IUD.
- Women who had seen a medical provider or been to a women's health clinic for contraception were 3.5 times more likely to use contraception than those without such a visit.
- Contraceptive knowledge was poor (the average percent of correct answers was 23%). Greater contraceptive knowledge was associated with increased contraceptive use.

Study Implications

- Access to free or low cost contraception for women in MAT clinics would overcome the main barrier to contraceptive use and decrease NAS births.
- Providing reproductive education and healthcare, and contraceptive options, including LARC, to women in MAT clinics may increase contraceptive use and decrease NAS births.
- Increasing a woman's belief that she can control her ability to become pregnant may increase contraceptive use.
- *For a full report of this study (prepared by the grantee), please [click here](#).*