

Original research article

Fear of intrauterine contraception among adolescents in New York City[☆]

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Abstract

Objective: The intrauterine contraceptive device (IUD) is one of the most effective contraceptive methods, but it remains underutilized, especially among adolescents. Little is known about how adolescents perceive IUDs. The objective of this study is to explore urban, minority female adolescents' attitudes and beliefs about IUDs and to identify barriers to IUD use.

Study design: Qualitative semistructured interviews were conducted with 21 adolescents aged 14 to 21 years who had heard about the IUD but never used one personally. Participants were recruited from two urban school-based health clinics and one community health center. Individual interviews were audiotaped and transcribed. Themes were identified by two independent researchers through line-by-line analysis of interview transcripts.

Results: Fear of the IUD predominated. Respondents related fears about pain, expulsion, foreign body and the potential for physical harm. Common themes in support of the IUD included the IUD's superior efficacy compared to other contraceptive methods and the ability to use this method long term. Despite identifying IUD benefits, most respondents did not appear to think the method would be well suited for them.

Conclusion: Though the IUD is safe and effective for adolescents, we found that urban female adolescents have many device-related concerns which must be addressed to make this method more acceptable.

Implications: Understanding urban, minority adolescents' perspective on IUDs and their specific concerns about IUD method use can help clinicians provide targeted and relevant contraceptive counseling.

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1. Introduction

Teen pregnancy, while on the decline, continues to pose a significant public health challenge in the United States, and socioeconomic, racial and ethnic disparities persist [1,2]. The intrauterine device (IUD) is a long-acting, reversible method of contraception that has been available in the United States since the mid-1960s but has not yet gained popularity among adolescents [3]. Only 3.6% of contracepting females age 15–19 report using the IUD [4]. Recent studies have demonstrated that the IUD is not only safe but also more effective at preventing adolescent pregnancy than the contraceptive pill, patch and ring [5].

Few studies have examined knowledge and attitudes about the IUD among adolescents. Those in the literature have consistently found that less than half of adolescents in the United States have ever heard about the IUD [6–8]. These studies have mainly enrolled participants in settings that specialize in family planning and gynecology [9]. Little is known, however, about how female adolescents with some basic knowledge of the IUD perceive this contraceptive option.

The objectives of this study are to explore the attitudes, knowledge and beliefs of urban female adolescents toward IUDs and to identify barriers to IUD use. Since little is known about this topic, we used a qualitative approach to gain a better understanding of adolescents' perceptions about the IUD.

2. Methods

2.1. Study sites and participants

Adolescents were recruited from the waiting rooms of one Bronx federally qualified community health center and two

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school based-health centers (SBHCs) located in Bronx public high schools, which together served approximately 6700 students [10]. The SBHCs offer a range of primary care services, including reproductive health services. At the time of study recruitment, the majority of students at both high schools (94% at one location and 67% at the other) were enrolled in their SBHC, and neither SBHC placed IUDs or subdermal implants. Students who desired an IUD or subdermal implant were referred to another site. Demographically, the Bronx is 55% Latino/Hispanic and 43% Black/African-American; 40% of the population has not graduated from high school, and 28% of families lives below poverty level [11]. The Bronx has the highest rate of teen pregnancy of any New York City borough [12].

Eligibility criteria for our study included (a) female sex; (b) Spanish or English speaking; (c) age 14–21 years and (d) knowledge, but not prior use, of an IUD. Goal recruitment was a total of 20 adolescents, a number selected for a high likelihood of achieving theme saturation. The study protocol was approved by the Montefiore Medical Center institutional review board.

2.2. Interview guide

The interview guide was developed in accordance with the theory of planned behavior (TPB), modeled off of a previously used interview guide with a similar aim [13]. TPB postulates that personal attitudes, perceived social norms and perceived behavioral control come together to influence actual behavior [14]. Examples of interview questions are included in Table 1.

2.3. Data collection

Study researcher (J.P.) approached all adolescents in the clinic waiting room during recruitment periods. Adolescents were introduced to the project and, if they agreed to participate, taken to a private space to determine eligibility. Eligible teens were invited to participate in a semistructured, one-on-one interview that lasted an average of 16 min (range: 12–22 min). Oral consent was obtained, and no personal identifying information was collected. No compensation was provided. All interviews were conducted by J.P. At the conclusion of the interview, baseline demographic

data were collected. Audiotaped interviews were transcribed verbatim by a professional transcription service (GMR Transcription).

2.4. Data analysis

An initial codebook was generated from the interview guide, with codes decided upon a priori. Formal coding of transcript text was performed independently by two study researchers (J.P. and P.S.). Initial codes were then collapsed, and additional themes were identified based on material that emerged from the interviews. Text was fully recoded to reflect all identified themes. Coded transcripts were reviewed by both authors to determine agreement and to discuss differences of opinion. Persistent discrepancies in coding and in determination of themes were settled by the third researcher (S.E.R.).

3. Results

In May 2011, 39 female adolescents were approached for the study, 35 agreed to take part in the screening, and 21 were eligible and therefore enrolled. The sole reason for ineligibility of the additional 14 potential participants was never having heard about the IUD. Participants ranged in age from 14 to 19; mean age was 16.4. Fourteen percent of the participants self-identified as Black, 76% as Latina, 5% as both Black and Latina and 5% as other. Teens enrolled in this study reported first hearing about the IUD from a variety of sources, only a minority of which were from a clinical setting: five from health care providers, five from the media (TV shows and advertisements), eight from friends and family members and three from health educators/health class.

In terms of accessing the IUD, the majority of respondents (12) said that they would go the school-based health clinic to obtain an IUD; a few noted that they would ask their outside pediatrician or request a referral to go elsewhere. Of those who felt that there would be challenges to obtaining an IUD, four were scared of their parents finding out, and four believed that the need for parental consent/age restriction for obtaining an IUD would pose a problem. Other obstacles to obtaining an IUD cited by respondents included potential insurance issues and not knowing where to obtain an IUD.

3.1. Negative attitudes

The overwhelming attitude expressed about the IUD was pervasive fear (18/21 participants). While some expressed a generalized fear, most identified a fear pertaining to one of the following categories: pain, expulsion, foreign body and potential for harm.

3.1.1. Fear of pain

Fear about pain was generally related to the insertion or removal process but also included concern about the device itself causing pain, especially with activity.

Table 1
Sample interview questions

Semistructured interview sample questions
Specific questions about the IUD
What have you heard about the IUD?
What do you think are some good things about using an IUD?
What worries might you have about using an IUD?
Can you describe the kind of person who might use an IUD? How are you like that person? How are you not like that type of person?
What do your girlfriends think about IUDs?
If you decided that you wanted to use an IUD, where would you go get it?
If you wanted an IUD, what might make it hard for you to get it?

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