

Examining Reproductive Healthcare Utilization of those who Use Substances



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BACKGROUND

- People who use substances and those seeking reproductive healthcare both face stigmas surrounding treatment
- · People seeking reproductive healthcare are met with barriers to access
- Previous studies have been conducted on smaller sample sizes in geographically limited areas
 - Studies have found that reproductive healthcare service utilization increases with more discussion [less sitgma] (Tlaye, 2018)
 - There is a higher frequency of utilization among women who use substances (Hall, 2013)

AIM

Determine associations between the utilization of reproductive healthcare services and alcohol, tobacco, and substance use using nationally representative data

METHODS

CDC National Survey of Family Growth 2017-2019 data 6141 Participants (N=6141)

- Ranging from ages 15-49
- · Identify as women
- · Nationally representative
- Conducted through
 - In-person interviews
 - Self-administered surveys
 - Computer-Assisted Personal Interviewing (CAPI) Variables were determined with questions such as
 - · During the last 12 months, how often have you used [substance]?
 - (In the past 12 months, have you received) [reproductive service]?

14 total variables were determined (7 for substance use, 7 for reproductive services)

RESULTS

Correlations

	Birth Control (1738)	Emergency Contracep. (167)	Abortion (32)	Pap Smears (2980)	Pelvic Exams (2996)	Prenatal Care (316)	STD Services (2216)
Smoking Tobacco (1015)						-	+
Binge Drinking (2173)	+	+	+	+			+
Marijuana (1453)	+	+	+			-	+
Cocaine (155)	+	+				-	+
Crack Cocaine (22)							
Crystal Meth. (40)							+
Injection (18)		+					

- +: A significant positive correlation
- -: A significant negative correlation

CONCLUSIONS

There were significant correlations among users of substances (cigarettes, binge drinkers, marijuana, cocaine, crystal methamphetamine, and injection) with the use of reproductive healthcare services (largely birth control, emergency contraception, and STD services, but also abortion, pap smears, and prenatal care).

2,025 Participants received no reproductive healthcare in the past 12 months with the top reasons due to no perceived need, not being able to afford, no time off from work, and "other" reasons.

FUTURE CONSIDERATIONS

- Integrating treatment of substance use with reproductive healthcare services can provide better accessibility. (Klaman, 2020)
- Identifying biases and stigma against substance use to encourage treatment and utilization of reproductive services
- · Additional analyses are needed to factor in poly-substance use among participants.
- · Opioid use should be considered as a variable in future studies.
- Can be replicated for future survey data to address the needs of specific populations at multi-level application

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