

Kristyne Mansilla, M.D.

M.P.H. Candidate, Global Health Track

kristyne.mansilla@vanderbilt.edu

Practicum Site: Tennessee Department of Health

Practicum Site Supervisor: Elizabeth Harvey, Ph.D., M.P.H.

Postpartum Visit Attendance and Contraceptive Method Effectiveness, Tennessee 2016—2019



Keywords: Postpartum, Family Planning, Healthcare access

Background: Increasing access to family planning services is a Title V Maternal and Child Health priority at the Tennessee Department of Health. In Tennessee, more than half of women (52%) reported their last pregnancy was mistimed. In other states, women who reported discussing family planning with their prenatal care provider were more likely to use more effective contraception after delivery. My practicum objective was to perform measurements of association and verify patterns of use of contraceptive measures of women in Tennessee and use effective communication strategies to disseminate findings with stakeholders.

Methods: I performed weighted survey quantitative analyses with the Tennessee Pregnancy Risk Assessment Monitoring System (PRAMS), combining 2016-2019 databases. Statistical significance was assessed at $p < 0.05$ and analyses were conducted using Stata version 16.1.

Results: I described effective postpartum contraception use and patterns of attendance to postpartum healthcare visits. Then performed bivariate and adjusted multivariate logistic regression analyses to investigate associations between them. Additional analysis examined pre versus postpartum contraception behavior changes in women who were not trying to get pregnant when they did. I found that who attended a postpartum visit [adjusted odds ratio (OR)=3.01, 95% CI: 2.1-4.37, p-value <0.001] were 3 times as likely to choose effective contraception compared to women who did not attend one. I communicated these findings to the family planning public health administrations and the PRAMS Steering Committee in Tennessee through oral presentations and an infographic.

Conclusions: Improving postpartum healthcare access and information about effective contraception may lead to increased use of more effective contraception. In line with the ACOG Committee Opinion on Optimizing Postpartum Care, postpartum care should become an ongoing process, rather than a single encounter, with services and support tailored to each woman's individual needs and with contraception included in a full assessment of physical, social, and psychological well-being.