What is the Relationship Between Contraceptive Programs and Abortions in the United States?
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Abstract

Introduction/Context: This literature review was conducted to determine/assess the relationship between contraceptive programs and abortion, especially those resulting from unplanned pregnancies, in the United States due to its high abortion rates regardless of the prevalence of modern contraception and contraceptive programs.

Methods: A systematic review of the literature regarding trends in reproductive health services among adult women was conducted, with attention on contraception program and abortion rates, in order to determine whether or not there is a correlation between contraceptive educational programs and abortions resulting from unplanned pregnancies.

Results: 10 articles pertinent to the research question were found. Of the 10, one of them reported the positive effects that programs that provided contraceptives had on its use and abortion. Whereas other articles mainly reported a negative correlation between the two variables and the demographic influence on contraceptive use and thus abortion rates, one article reported a positive correlation between the variables.

Conclusions: Based on the systematic review conducted, overall, there is a negative correlation between the two variables such that a decline in the use of contraceptives and family planning services is associated with an increase in abortion rates.

Keywords: abortion, contraception, contraceptive, emergency contraception, trends, contraceptive trends, contraceptive programs, abortion relationships, contraceptive use, birth control and abortions, unplanned pregnancies, and contraceptive education.

Introduction

The association between contraceptive use and abortion is one that has always been, especially in developing and developed countries (Kavanaugh & Schwarz, 2008). The United States, which is a developed country, is one where this association is quite common and still relevant. Although there has been a reported decline over the years, USA still has one of the highest abortion rates. Regardless of the presence of modern contraception programs, the rate of abortion is still high, with variations/averaging (in terms of race, education, and age) across the country. Research shows these two variables influence each other such that an increase in one factor is associated with a parallel increase in other (positive correlation/linear relationship), or an increase in one is associated with a decrease in the other (negative correlation/inverse relationship).

Methods

We conducted a systematic review of the literature. We decided to focus our search on the United States due to the fact that it has one of the highest rates of abortions. We then chose which databases to use. We specifically decided to use databases that specialized in the health sciences, specifically in epidemiology and population health. We searched through PubMed, JSTOR, Academic OneFile, The Cochrane Library, and Scopus.

Search keywords included: abortion, contraception, contraceptives, emergency contraceptives, abortion trends, contraceptive trends, contraceptive programs, contraceptives and abortion relationships, contraceptive use, birth control and abortions, unplanned pregnancies, and contraceptive education.

We further narrowed down our search by focusing on articles that were published in the 2000s. We wanted to focus on this cohort due to the fact that there have been many advancements in contraceptive programs and abortion acceptance, since the 1990s. There was a lack of contraceptive programs and awareness in the 1990s. In contrast, there are many programs available in the 2000s, that offer information and resources for contraceptives. Once we had collected relevant articles, we conducted a systematic review and sorted the articles in terms of relevancy to the topic. We ranked them by tiers (tier 1 being the most relevant, and tier 3 being the least relevant). We then focused on the tier 1 and tier 2 articles and comprehensively reviewed them.

Discussion

In this systematic review, the overall trend that was observed was a negative correlation between both variables such that the higher the availability of contraception and contraceptive programs, the higher its usage, and thus a decrease in abortion rates. The effectiveness of contraceptives was predicted by an individual’s socioeconomic status and their acculturation (Ward et al., 2010). Individuals with a high socioeconomic status were more likely to use contraceptive programs and contraceptive programs than those with lower socioeconomic status. In turn, this led to a decreased rate of abortions from unplanned pregnancies. In addition to this, abortion clinics that distributed or made various forms of contraceptives (such as IUCs and oral contraceptives) available reported positive results, as ~93% of the patients were satisfied with their IUCs and had continued to use it (Drey et al., 2009). This shows that contraceptive programs have an impact on contraceptive use/reduction in unplanned pregnancies leading to abortions. However, the programs must be targeted at a primary intervention level, rather than at a secondary level. Many of the programs were done at abortion clinics, subsequent to the individual having an abortion. The outcomes following the contraceptive education at the abortion clinics led to positive use with contraceptives, but it was only a short-term impact (Koby, 2001). Thus, contraceptive educational programs need to be implemented at an early stage, in order to ensure that women understand why they are beneficial and make it a habit to use them. In turn, this should help lessen the rate of abortions resulting from unplanned pregnancies as the relative risk of abortions dramatically increase when contraceptives are not utilized or effectively utilized. Lastly, not a lot of values and calculations (e.g. Odds ratios) were encountered in our study because they aren’t pertinent to our research question and topic.

The main type of limitation that was encountered was a methodological limitation. There was a lack of prior research on this topic. Many of the articles examined abortions and various types of contraceptive programs. However, there was a lack of sufficient research on contraceptive programs linking to abortions. In addition to this, there were language barriers as well. Many of the articles of interest were not written in English and could not be used. Also, there were many articles that were not relevant, abstracts, but we did not have access to them because they required payments and were outside of the university’s database.

Conclusion

Although there has been an overall decline in abortion rates, it is still pretty high due to restricted access, lack of appropriate information, and sufficient contraceptive programs. Overall, it was observed that there is a negative correlation between these two variables and most individuals were satisfied with the use of contraceptives, if appropriately informed. Therefore, a need for the implementation of more contraceptive programs is apparent based on the results of this systematic review. Additionally, it was observed that most interventions that have already been implemented have had short term impacts. Consequently, more interventions with long term impacts need to be implemented. For example, early targeting – the younger population should be targeted and educated to enhance the reduction of the abortion rate in the long run. However, more research needs to be done on this topic to make information more available and guide the successful implementation of these programs.

References