Birth Control Practices among Oklahoma Teen Mothers

The teen birth rate in both the United States and Oklahoma is decreasing and more teens are waiting before becoming sexually active. However, few teens who are sexually active use the most effective birth control methods.

Although only abstinence is 100% effective, long acting reversible contraception (LARC) can greatly reduce the risk of unintended pregnancy when used correctly and consistently. These methods are effective in preventing pregnancy, last for several years, and are reversible. LARC methods include the subdermal implant and the intrauterine device (IUD).

In Oklahoma’s PRAMS, mothers were asked questions related to birth control use at the time of pregnancy, postpartum birth control methods, and pregnancy intention before they became pregnant with their new baby.

This Brief examines the birth control practices among Oklahoma mothers less than 18 years old using PRAMS 2012-2014 data.

At the time of pregnancy, 36.5% of Oklahoma teen mothers were using a birth control method compared to 44.3% of older mothers (Figure 1). This means that almost 64% of teen mothers were not using a method at the time of pregnancy.

The most common reasons that Oklahoma teen mothers gave for not using birth control at the time of pregnancy were: their partner did not want to use anything (30.8%), they thought they could not get pregnant (28.2%), they did not mind if they got pregnant (26.4%), and they thought they or their partner were sterile (18.3%; data not shown).

Postpartum, 84.4% of Oklahoma teen mothers were using a birth control method. This was slightly higher than use among older mothers (80.5%; Figure 1). Figure 2 highlights the major types of postpartum birth control methods used by Oklahoma teen mothers. The most frequently reported methods were condoms (45.9%) and birth control pills (28.1%).
**PREGNANCY INTENTION**

Among Oklahoma teen mothers, nearly 64% indicated their most recent pregnancy was unintended. Additionally, 15.3% reported their pregnancy was intended and 21.2% indicated they were not sure what they wanted at the time of pregnancy (Figure 3).

Of the nearly 64% of teen mothers that reported an unintended pregnancy, 23% used a LARC method postpartum (data not shown).

*Table 1* shows the effectiveness of the major types of postpartum birth control methods used by Oklahoma teen mothers. LARC methods have an unintended pregnancy rate of less than 1% annually; however, most Oklahoma teen mothers are using methods with higher unintended pregnancy rates (such as condoms and pills).

**CONSIDERATIONS AND RECOMMENDATIONS**

Providers should recommend LARC as first-line birth control for all women and teens not desiring a pregnancy within the next year. Moreover, insertion of an IUD or implant immediately postpartum would reduce the risk of subsequent unintended pregnancy among teen mothers.⁵

Education related to assertiveness and negotiation skills when communicating with partners and potential partners is essential for Oklahoma teens. Teens also need to know about available methods, how to access them if they choose to be sexually active, and to use condoms consistently along with LARC to decrease the risk of sexually transmitted infections (STIs).⁵

Routine counseling at all health care provider visits about contraceptive methods and preventive health issues is recommended for teens.⁵ Additionally, barriers to using LARC methods (such as cost and lack of awareness) have to be addressed in order for more teens to use these methods.

Due to ease of use, safety, and low failure rates, LARC methods remain ideal options for sexually active teens to consider.

---

**References**


---

**PREPARED FOR A LIFETIME**

Maternal & Child Health Service
Oklahoma State Department of Health

---

**ACKNOWLEDGEMENTS**

Special assistance for this Brief was provided by Ayesh Lampkins, MPH, CHES; Binitha Kunnel, MS; Alicia Lincoln, MSW, MSPH; Amy Terry, MS, RN; Maurianna Adams, MPA; Michele Sterin, MSN, APRN-CNP; and Wanda Thomas.

Funding for the Oklahoma Pregnancy Risk Assessment Monitoring System (PRAMS) is provided by the Centers for Disease Control and Prevention (CDC) and the Maternal and Child Health Bureau, Department of Health and Human Services, Maternal and Child Health Services (MCH) Title V Block Grant.

PRAMS is a population-based surveillance system about maternal behaviors and experiences before, during, and after pregnancy. Approximately 250 mothers are selected to participate in Oklahoma each month. Mothers are sent as many as three mail questionnaires seeking their participation with follow-up phone interviews for non-respondents. Information included in the birth registry is used to develop analysis weights that adjust for probability of selection and non-response. Prevalence rates were calculated using SAS callable SUDAAN. PRAMS 2012-2014 had a response rate of 63.6%.

The Oklahoma State Department of Health (OSDH) is an equal opportunity employer and provider. This publication, issued by the OSDH, was authorized by Terry L. Cline, PhD, Commissioner of Health, Secretary of Health and Human Services. A digital file has been deposited with the Publications Clearinghouse of the Oklahoma Department of Libraries. Copies have not been printed but are available for download at www.health.ok.gov. August 2017