

Factors associated with contraceptive nonuse among obese women

Lisa S. Callegari

Objectives: To identify risk factors associated with contraceptive nonuse among obese women.

Methods: We performed a case control study of sexually active, obese women (body mass index > 30), aged 20 to 44 years, at risk of unintended pregnancy using the 2006-2010 National Survey of Family Growth. We defined cases as contraceptive nonusers and controls as users of any contraceptive method. We assessed demographic, reproductive, behavioral, and health services factors associated with nonuse using generalized linear models with a log-link function to estimate relative risks and 95% confidence intervals (CI).

Results: Of 1,359 obese respondents at risk of unintended pregnancy, 21.4% were nonusers (n=292). In our multivariable model, nonusers compared to users were more likely to be between the ages 35 to 39 years (aRR 1.65, 95%CI 1.05-2.59), non-Hispanic black (aRR 1.43, 95%CI 1.03-2.00), single (1.44, 95%CI 1.04-2.00), parous with 1 prior birth (aRR 1.52, 95%CI 1.07-2.15) or 2 births (aRR 1.57, 95%CI 1.10-2.23); to have infrequent sex (aRR 1.67, 95%CI 1.27-2.22); and to perceive difficulty becoming pregnant (aRR 1.89, > 95%CI 1.42-2.53). Obese nonusers did not differ significantly from users in socioeconomic indicators. Compared to users, nonusers were less likely to have discussed contraception with a health care provider (OR 0.45, 95%CI 0.31-0.65).

Conclusions: Efforts to decrease contraceptive nonuse among obese women should focus on older, non-Hispanic black, single, parous women across all socioeconomic strata. Increasing contraceptive counseling by providers may improve contraceptive uptake, especially among obese women who have infrequent sex and who perceive difficulty becoming pregnant.

Thesis Committee:

Melissa Schiff, MD, MPH (Chair)

Sarah Prager, MD, MAS



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