

Racial Inequities in Contraceptive Care Delivery: A Reproductive Justice Issue

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STUDY OBJECTIVE: The objective of this study was to examine racial/ethnic disparities in contraceptive delivery for adolescent patients within an adolescent medicine subspecialty clinical system before and during the COVID-19 pandemic. Secondly, we aimed to assess the relationship between race and contraceptive delivery by telehealth. **DESIGN:** Retrospective cohort study using electronic health record data **SETTING:** Three adolescent medicine subspecialty clinics in a large academic hospital system, including an urban location and 2 suburban locations **PARTICIPANTS:** Patients assigned female sex at birth prescribed hormonal contraception between January 1st, 2018, and May 31st, 2021. **MAIN OUTCOME MEASURES:** Method and type of contraceptive prescribed (short-acting, medium-acting, long-acting reversible contraception [LARC]) **RESULTS:** There were 2453 patients in the study; 47.5% were White, 36.0% were Black, and 8.1% identified as Hispanic. After controlling for insurance and age, Black patients, compared with non-Black patients, had twofold higher odds of receiving LARC compared with a short-acting method across the study period (aOR = 2.0; 95% CI, 1.52-2.62). We identified effect modification with significant interaction between Black race and the pandemic period, with evidence of a higher marginal probability of Black patients receiving LARCs during the pandemic. Additionally, during the pandemic, patients receiving new contraceptive prescriptions via telehealth were less likely to be Black (aOR = 0.63; 95% CI, 0.41-0.94) or publicly insured (aOR = 0.56; 95% CI, 0.38-0.81). **CONCLUSION:** Our data show significantly higher prescribing of LARCs to Black adolescents by clinicians, which could suggest differences in physician contraceptive counseling with a bias toward preferentially counseling Black patients toward LARCs. Our data also show that Black and publicly insured patients had decreased utilization of contraceptive care by telehealth during the pandemic.

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