

PREGNANCY AND FAMILY PLANNING CHOICES OF BIRTHING PEOPLE WHO USE SUBSTANCES (BPWUS) IN THE PARENT CHILD ASSISTANCE PROGRAM (PCAP)

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Background: The Parent-Child Assistance Program (PCAP) is a three-year, trauma-informed intervention that provides support, advocacy, and service connection to birthing people who use substances (BPWUS). Accessible information on contraceptive choice has been shown to help prevent unintended pregnancy and promote safer sexual relationships. Family planning increases BPWUS' sense of independence and autonomy resulting in better outcomes for the individual and children. This study aims to better describe services and barriers that may impact engagement in family planning.

Methods: This retrospective, observational study of PCAP clients and will describe engagement in family planning at multiple time points (time of conception, program intake, 12 months, and 24 months) and potentially relevant factors including access to medical coverage, health insurance, family planning services, and housing situation. Data were extracted from the Addiction Severity Index and the Biannual report recorded on each PCAP client.

Results: This study included 59 participants enrolled in PCAP. Around the time of conception for their most recent pregnancy, seven were regularly using birth control (11%). Upon intake to PCAP, 41% of participants were pregnant, 36% were not regularly using contraceptives, and 34% were regularly using contraception (includes abstinence). This increases slightly at 12 months (37%), and 24 months (41%). Clients with health insurance coverage are almost twice as likely to be using contraceptives (69%, compared to 36%). All clients reported precarious or unstable housing conditions at intake.

Conclusion: The low prevalence of contraception-use even after a recent pregnancy indicate significant barriers still exist, especially in terms of access to health insurance. This indicates the need for targeted interventions and support that empower BPWUS to make decisions about their reproductive health and improve access to choice of contraception.

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