

# REPRODUCTIVE LIFE PLANNING



**Setting Goals for a Healthy Family**

**Jan Shepherd, MD, FACOG**

# Objectives

- Describe what is meant by a Reproductive Life Plan
- Discuss the role of Contraception, Preconception Care, and Interconception Care in a Reproductive Life Plan
- Identify benefits of Reproductive Life Planning

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# Reproductive Life Plan

- A set of personal goals about having (or not having) children
- It also states how to achieve those goals

**“Everyone needs to make a reproductive life plan based on personal values and resources.”**

# One Key Question

**“Do you plan to get pregnant this year?”**

# Reproductive Life Plan

**Being intentional about preparing for and starting pregnancies**

**Making conscious decisions about:**

- When to have children
- How many to have
- Ensuring the healthiest pregnancies and families

# Reproductive Life Plan

“Women’s lives are rich and complex, and the possibility of pregnancy is only one factor affecting women’s health choices.”\*

Empowering women:

**I can control my life.**

# Reproductive Life Plan

“You can choose the goals you want to work on and how you want to go about getting them done.”

## Future Dreams

- What do you want your life to be like in 5 years?  
10 years?
- How much education do you want to get?
- What type of work do you want to do?



# Reproductive Life Plan

We help clients make a Reproductive Life Plan by asking the questions:

- Do you want to have (more) children?
- How many?
- When?

**Every woman every year!**

# Reproductive Life Plan

## Encouraging clients to think in terms of:

- Planning for if/when they do want children
- Protecting themselves until that time
- Staying as healthy as possible

## First components:

- **Contraception** when pregnancy not desired
- Fertility-preserving behavior

# Contraception

**Reproductive Life Planning increases motivation to correct and consistent use**

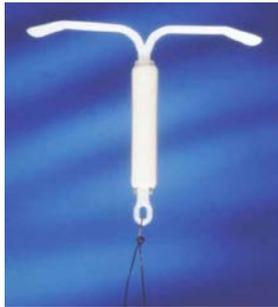
- What family planning method do you plan to use?
- How sure are you that you can use this method without problems?

**Increases use of Long-Acting Reversible Contraception (LARC) → greater success in reaching goals**

# The CHOICE Project

**BCPs failed in 4.27% of women**

**Longer-Acting Methods (LARC) failed in only 0.27% of women**



**Longer-Acting methods 22x more effective!**

# Fertility-Preserving Behavior

## Increased motivation to safer sex

- Reduced new/multiple partner risk
- Condom use

## Regular check-ups/testing

## Healthy lifestyle



# Reproductive Life Plan

## Second component – Preconception Care

“Preconception health and health care focuses on taking steps now to protect the health of a baby in the future. However, preconception health is important for all women and men, whether or not they plan to have a baby one day.”\*

\*CDC



# Benefits of Planned Pregnancies

## Allows women to:

- Avoid toxic substances
- Initiate vitamin supplementation
- Undergo preventive testing
- Stabilize medical conditions
- Substitute/eliminate teratogenic medications

## Results:

- ↓ Risk miscarriage/  
preterm delivery
- ↓ Risk fetal/infant morbidity/mortality

# Case #1

16-year-old, newly sexually active, asking for information about contraception.

Do you plan to have children?

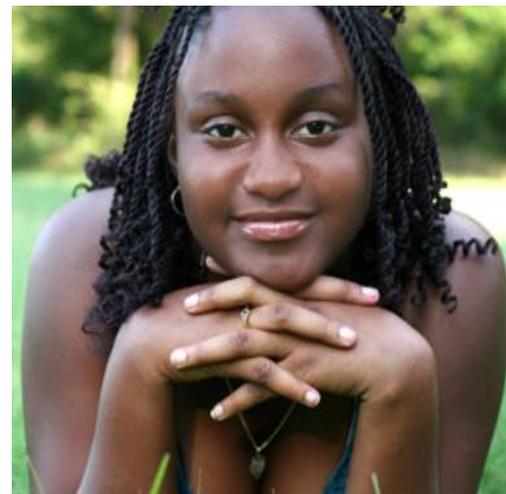
Yes

If so, how many?

Two or three

When?

Not until I finish school



# Reproductive Life Plan

## Avoiding unintended pregnancy

- Effective use of contraception
- First-line option\*

### LARC: Long Acting Reversible Contraception

- Intrauterine contraception
- Subcutaneous implant

## Preserving fertility – Reducing risk of STIs

\*American Academy of Pediatrics, September 2014.



# Case #2

19-year-old in new relationship,  
currently taking birth control pills

Do you plan to have children?

Yes

If so, how many?

Two

When?

The first one this year



# Are You Ready to Have a Baby?

- Do you want to have a baby or is a parent, partner, or someone else pushing you?
- Is your relationship ready for a baby? How will a child affect it?
- Can you afford a baby?
- What will you do for child care if you go to school, work, or just out with your partner?

# Preconception Care

Medical history, including medications

Vaccinations up to date

Screening for STIs and genetic disorders

Counseling

- DC smoking, alcohol, and recreational drugs
- Begin prenatal vitamins
- Diet and exercise

Emphasize importance of early prenatal care

# Case #3

**22-year-old, newly married, her religion prohibits contraception.**

“I believe in letting pregnancy happen when it happens, when God intends.”

**Respect cultural, religious and personal attitudes toward reproduction**

“Because I don’t know when that will be, I’ll make sure I’m always in optimal health.”



# Case #4

22-year old had her second baby 6 weeks ago, breastfeeding.

Do you plan to have more children?

Yes

When?

In a year or two

- Opportunity to point out optimal spacing

How will you protect yourself until then?



# Spacing Pregnancies

**Table 5.** Meta-analysis of Dose-Response Regression Slopes and Prediction of the Risk of Adverse Perinatal Outcomes for Interpregnancy Intervals <18 Months and >59 Months

Risk Increase	Increase, % (95% CI)		
	Preterm Birth (12 Studies)	LBW (7 Studies)	SGA (12 Studies)
Per month for intervals <18 mo*	1.92 (1.80-3.04)	3.25 (3.09-3.41)	1.52 (1.40-1.64)
Per month for intervals >59 mo†	0.55 (0.49-0.61)	0.91 (0.83-0.99)	0.76 (0.71-0.81)
Predicted by the model			
Interpregnancy interval, mo			
3	28.8 (27.0-30.6)	48.8 (46.4-51.2)	22.8 (21.0-24.6)
6	23.0 (21.6-24.5)	39.0 (37.1-40.9)	18.2 (16.8-19.7)
9	17.3 (16.2-18.4)	29.3 (27.8-30.7)	13.7 (12.6-14.8)
12	11.5 (10.8-12.2)	19.5 (18.5-20.5)	9.1 (8.4-9.8)
15	5.8 (5.4-6.1)	9.8 (9.3-10.2)	4.6 (4.2-4.9)
18-59‡	1.00	1.00	1.00
72	6.6 (5.9-7.3)	10.9 (10.0-11.9)	9.1 (8.5-9.7)
96	19.8 (17.6-22.0)	32.8 (29.9-35.6)	27.4 (25.6-29.2)
120	33.0 (29.4-36.6)	54.6 (49.8-59.4)	45.6 (42.6-48.6)
144	46.2 (41.2-51.2)	76.4 (69.7-83.2)	63.8 (59.6-68.0)

Abbreviations: CI, confidence interval; LBW, low birth weight; SGA, small for gestational age.

\*Risk increase per each month that interpregnancy interval is shortened from 18 months.

†Risk increase per each month that interpregnancy interval is lengthened from 59 months.

‡Reference category.

# Case #5

25-year-old woman in committed relationship with another woman

Do you plan to have children?

Undecided

Have you and your partner thought about options for achieving this?

- Offer resources
- Discuss maintaining healthy lifestyle



# Case #6

35-year-old married woman with no children, on birth control pills, had abortion this year due to career concerns.

**Do you plan to have children?**

I think so.

**How many? When?**

I don't know.

- Consider easier-to-remember birth control.
- Discuss declining fertility and increased risks of pregnancy with age >35.



# Maternal Age

## Age >35 at conception

- Decreased fertility
- Increased maternal and fetal complications
- Risk of trisomy 21, 13, 18 increase with age

	Risk of trisomy 21	Risk of any aneuploidy
Age 35	1/378	1/192
Age 40	1/106	1/66
Age 45	1/30	1/21

# Case #7

45-year-old divorced mother of 3  
worried that her menstrual periods are  
becoming heavy and irregular.

Are you currently in a heterosexual  
relationship?

Yes

Do you plan to have any more children?

NO!

- Chance to point out that she is  
likely still fertile

What are you using for contraception?



# Men: Partners in Reproductive Health

**Does he want to be a father?**

**What is his Reproductive Life Plan?**

“I’d like to be a father after I finish school and have a job to support a family. While I work toward those goals, I’ll talk to my partner about her goals for starting a family. I’ll make sure we correctly use an effective method of contraception every time we have sex until we’re ready to have a baby.”



# Preconception Care

- Stay as healthy as possible
- Annual check-up with testing for STIs
- Avoid tobacco, alcohol, and other drugs
- Consider his family history, past medical history, medications, exposure to toxins, immunizations



# Benefits of Reproductive Life Planning

## Reduced unintended pregnancy

- Empowers men and women to have control over their lives
- Planned pregnancies are healthier

## Increased preconception care

- Healthier moms
- Healthier babies



# Reproductive Life Planning

## Healthy Families



# QUESTIONS?



# Wrap Up and Reminders

## Upcoming Webinars:

- **Centering Pregnancy and Centering Parenting: Innovative models for prenatal, well-woman, and well-baby care:** April 30 from 3:00 – 4:00 PM EST
- **Quality Family Planning Recommendations and Healthy Start:** May 5 from 3:00–4:00 PM EST
- **Part 1: How to Talk to Parents about Breastfeeding: Starting the Conversation:** May 12 from 3:00-4:00 EST
- **Collective Impact: Launching our Learning Together:** May 13: from 3:00-4:00 EST
- **Male Inclusion/Fatherhood: Why is this important and readiness strategies for staff and organization:** May 14 from 3:00-4:00 EST
- **Domestic Violence Screening and Follow-up:** May 19 from 3:00-4:00 EST

## EPIC Center website:

- <http://www.healthystartepic.org>
- Includes all recorded webinars, transcripts, and slide presentations

