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

*CDC
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?
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!
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
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
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
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

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
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?
### 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

<table>
<thead>
<tr>
<th></th>
<th>Preterm Birth (12 Studies)</th>
<th>LBW (7 Studies)</th>
<th>SGA (12 Studies)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Increase, % (95% CI)</td>
<td>1.92 (1.80-3.04)</td>
<td>3.25 (3.09-3.41)</td>
<td>1.52 (1.40-1.64)</td>
</tr>
<tr>
<td>Per month for intervals &lt;18 mo*</td>
<td>0.55 (0.49-0.61)</td>
<td>0.91 (0.83-0.99)</td>
<td>0.76 (0.71-0.81)</td>
</tr>
<tr>
<td>Per month for intervals &gt;59 mo</td>
<td>1.00</td>
<td>1.00</td>
<td>1.00</td>
</tr>
</tbody>
</table>

*Risk increase per each month that the interpregnancy interval is shortened from 18 months.
†Risk increase per each month that the interpregnancy interval is lengthened from 59 months.
‡Reference category.

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

<table>
<thead>
<tr>
<th>Age</th>
<th>Risk of trisomy 21</th>
<th>Risk of any aneuploidy</th>
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</thead>
<tbody>
<tr>
<td>Age 35</td>
<td>1/378</td>
<td>1/192</td>
</tr>
<tr>
<td>Age 40</td>
<td>1/106</td>
<td>1/66</td>
</tr>
<tr>
<td>Age 45</td>
<td>1/30</td>
<td>1/21</td>
</tr>
</tbody>
</table>
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?
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
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](http://www.healthystartepic.org)
- Includes all recorded webinars, transcripts, and slide presentations