

Understanding Facilitators and Barriers of Contraceptive Use in Young Women Impacted by Commercial Sexual Exploitation

Mikaela Kelly MPH¹; Elizabeth Barnert MD, MPH, MS²; Sarah Godoy MSW¹;

Laura Abrams PhD, MSW³; Eraka Bath MD¹

¹UCLA Department of Psychiatry; ²UCLA Department of Pediatrics; ³UCLA Luskin School of Public Affairs



BACKGROUND

- > 100,000 youth in the United States at-risk for commercial sexual exploitation
- Youth impacted by commercial sexual exploitation (CSE)
 have high reproductive health risks and high rates of STIs
 and unplanned pregnancy
- Literature on their reproductive health needs from their perspective is sparse

OBJECTIVE

 We sought to the attitudes and beliefs of youth impacted by CSE towards contraception and pregnancy

METHODS

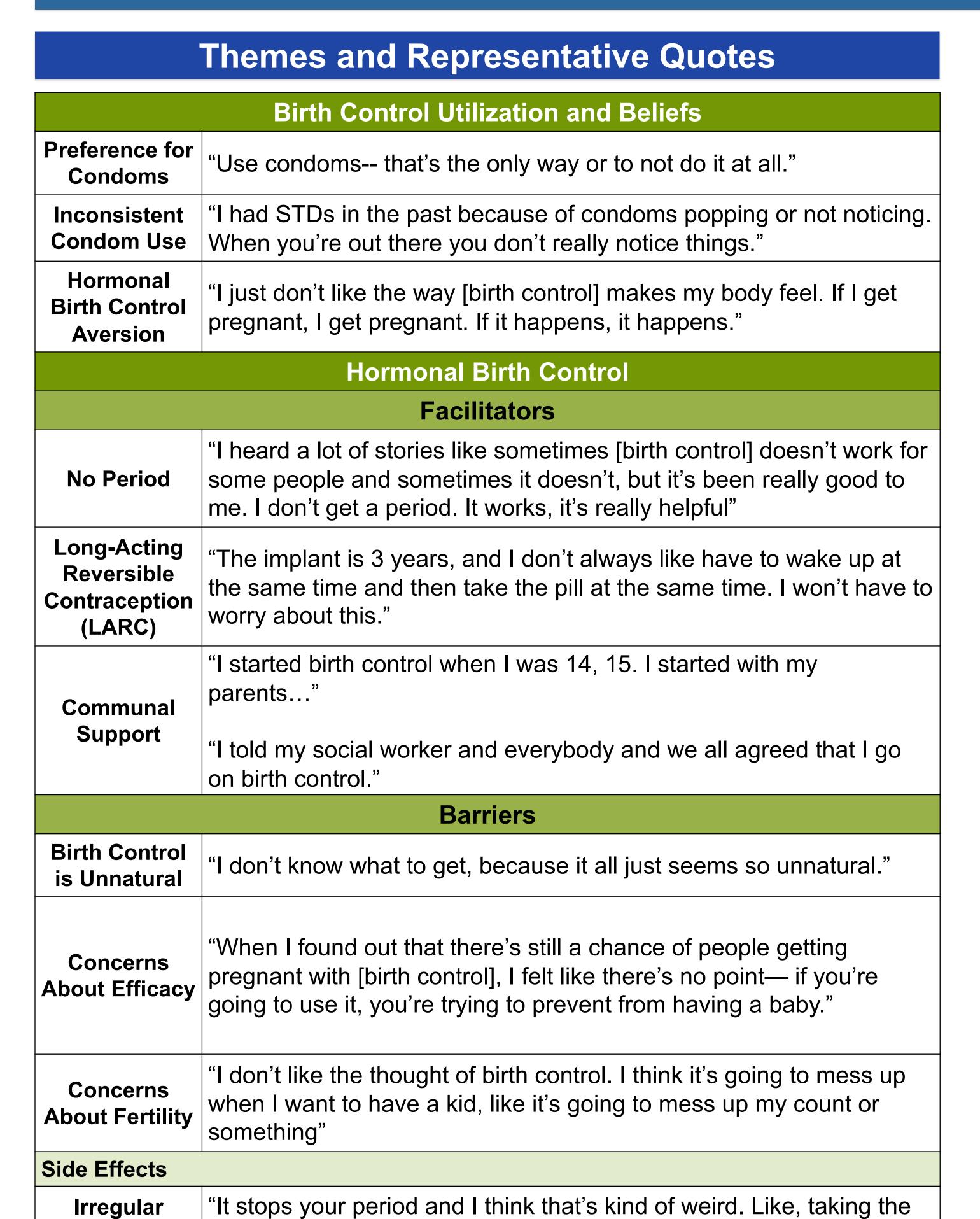
- **Design:** In-depth analysis of qualitative analysis of semistructured interviews with 21 youth impacted by CSE
- **Step 1:** Team built partnerships with programs servicing these youth and obtained IRB approval
- **Step 2:** Conducted one-on-one interviews with study participants in residential group homes and a specialized juvenile delinquency court
 - Participants: CSEY (n = 21)
- <u>Data Collection</u>: Surveys gathered sociodemographic information. Interviews explored youths' reproductive health needs and experiences with reproductive healthcare services
- **Step 3**: Thematic content analysis of interviews utilizing DEDOOSE software

PARTICIPANT DEMOGRAPHICS

- 21 cisgender females participated in the study
- The majority (67%) identified as African-American, 19% as White, 10% as American Indian, 10% as Other, 5% as Asian, and 14% did not report their race
- 33% of participants identified their ethnicity as Hispanic/Latina
- Average age of participants was 17 years old (Range: 15-19)
- 71% of participants were homeless in the last 3 months
- 67% spoke only English, 33% spoke English and Spanish

Racial Demographics 67% 19% 14% 10% 5% Mod Recorded Resident Resident

RESULTS



pill to stop your period, it's not normal to me"

problems with my weight."

control I want."

see anybody."

The shot makes you fat. I don't want to gain weight. I have

"The pill, the shot, make you fat. I don't want to gain any more

weight.. I'm always big, so I don't actually think about what birth

"I have friends that were on different types of birth control and they

all had bad experiences with it. So I was just like, no [birth control]."

'I don't feel the need to be on birth control right now because I don't

'They would show you how things would go and tell you. They told

"If it has to do anything with the vagina or anything I always go to

me how, if I didn't know take the pill. They actually explained it to me

Planned Parenthood

and told me about other methods of birth control."

Planned Parenthood and that's really easy."

Bleeding

Weight Gain

Peer Accounts

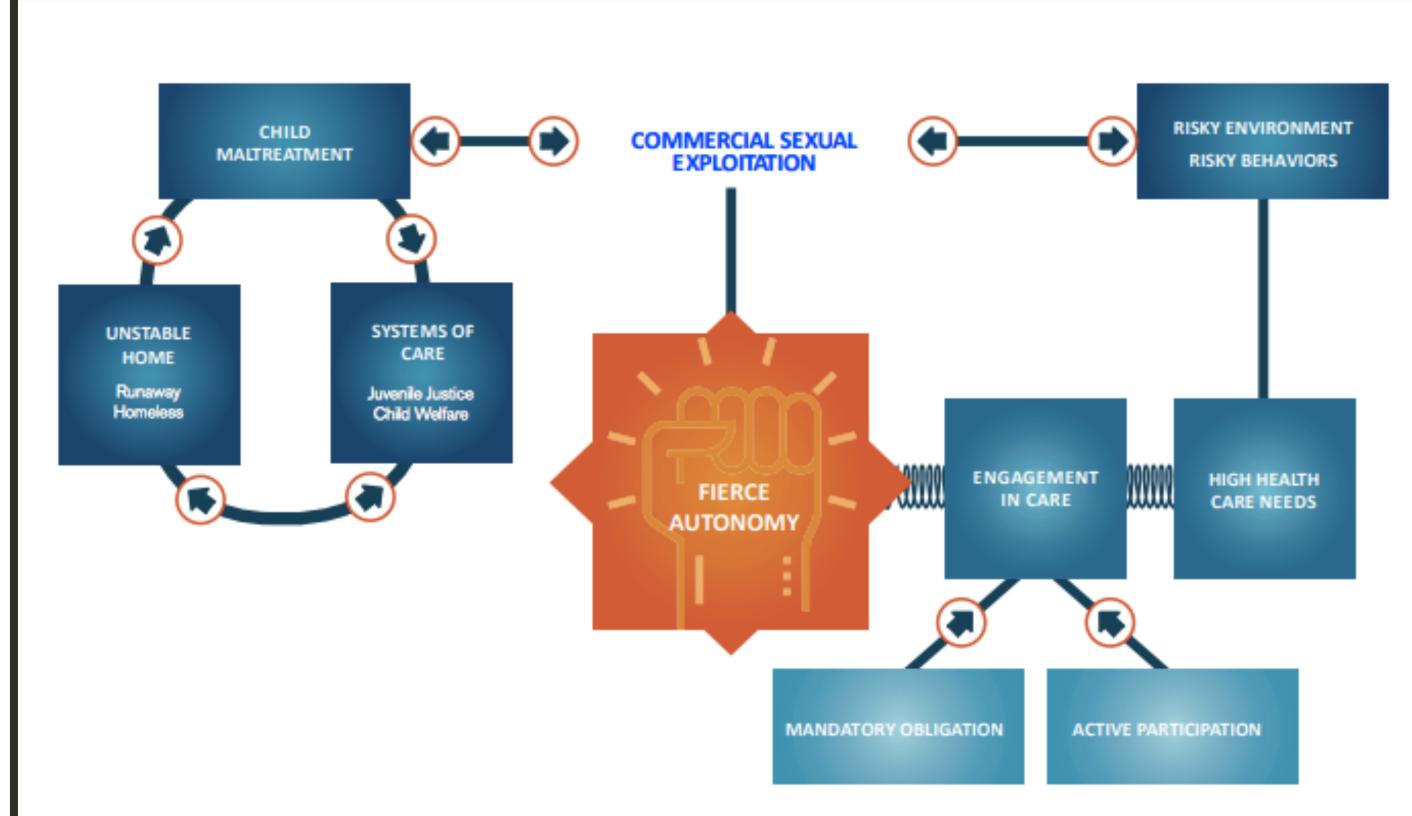
No Identified

Need

Positive

Experiences

Conceptual Model: Fierce Autonomy



Summary

- Youth impacted by CSE intensely valued autonomy
- Reported easy access to contraception; strongly preferred condoms as primary form of contraception
- Aversion towards hormonal birth control was attributed to personal experiences and peer accounts of side effects
- Common belief that hormonal methods are "unnatural," cause infertility, and have low efficacy
- Youth reported frequent unprotected sex
- Had an attitude towards pregnancy of "if it happens, it happens"

CONCLUSIONS

- Emphasizing shared decision making in reproductive health care planning is critical
- Reinforcing consistent condom use and contraceptive education that dispels prevailing myths, sets clear expectations regarding side effects, and emphasizes autonomy is most likely to be effective

ACKNOWLEDGEMENTS

We thank Judge Catherine Pratt and the Los Angeles County STAR Court for their partnership. We also thank the participating youth and group homes. Support was provided from NCATS AND NIDA of the National Institutes of Health via UCLA CTSI KL2 Program and AACAP NIDA K12. We thank UCLA professors Drs. David Farabee, Christine Grella, and Paul Chung.