

University of Missouri, St. Louis

IRL @ UMSL

Undergraduate Research Symposium

UMSL Undergraduate Works

September 2021

Statistical Analysis of Birth Control Counseling Recipients

Aman Chishti
afcgcp@umsystem.edu

Follow this and additional works at: <https://irl.umsl.edu/urs>



Part of the [Maternal and Child Health Commons](#)

Recommended Citation

Chishti, Aman, "Statistical Analysis of Birth Control Counseling Recipients" (2021). *Undergraduate Research Symposium*. 82.

Available at: <https://irl.umsl.edu/urs/82>

This Poster is brought to you for free and open access by the UMSL Undergraduate Works at IRL @ UMSL. It has been accepted for inclusion in Undergraduate Research Symposium by an authorized administrator of IRL @ UMSL. For more information, please contact marvinh@umsl.edu.

Objectives: Birth control counseling and management are incredibly important for women's health. However, women often report that they do not receive adequate birth control counseling. This study characterized demographic factors associated with receiving birth control counseling. **Methods:** The population for this study included women aged 18–50 in the Medical Expenditure Panel Survey 2018, a nationally representative database. The predictors analyzed in this study were age, race, insurance status, and poverty status. Multivariable logistic regression was used to assess the effect of these predictors on receiving birth control counseling in the last 12 months.

Results: The study population included 5054 women aged 18–50, with 1175 women receiving recent birth control counseling. Factors associated with reduced odds of receiving birth control counseling were increased age (OR: 0.94 [95% CI: 0.93, 0.95], $p < 0.001$), Black race (OR: 0.71 [95% CI: 0.55, 0.92], $p = 0.010$), Asian/Pacific American race (OR: 0.40 [95% CI: 0.28, 0.57], $p < 0.001$), and being uninsured (OR: 0.40 [95% CI: 0.29, 0.58], $p < 0.001$). High income status was associated with increased odds of receiving birth control (OR: 1.48 [95% CI: 1.12, 1.95], $p = 0.007$).

Conclusions: Demographic factors were found to be significantly associated with rates of recent birth control counseling. This study may suggest that healthcare providers should ensure that they provide high-quality birth control counseling to interested women who are older, Black, Asian/Pacific American, or uninsured. This study may also suggest that these populations are less likely to seek birth control counseling.