



**Reproductive Health
in Nursing**

**Definitions &
Orienting Facts**

Public Health in Unintended Pregnancy and Prevention Care

Definitions

Comprehensive Sexuality Education: According to the Sexuality Information and Education Council of the United States “comprehensive sex education includes age-appropriate, medically accurate information on a broad set of topics related to sexuality including human development, relationships, decision making, abstinence, contraception, and disease prevention. They provide students with opportunities for developing skills as well as learning.”

Early Pregnancy Decision-Making: Refers to the decision-making process that a woman engages in when faced with an unintended pregnancy. Pregnancy options include continuing the pregnancy with the intention to parent, continuing the pregnancy with the intention to adopt, or choosing abortion care.

Fetal Alcohol Spectrum Disorder (FASD): FASD is a combination of mental and physical health defects in children whose mother consumed excessive amounts of alcohol during pregnancy. Permanent health effects are common.

Housing Insecurity: A state of marginal housing: a person is not homeless but does not have a stable or predictable place to live.

Induced or Therapeutic Abortion (commonly referred to as “abortion”): An abortion that is brought about intentionally, also called a therapeutic abortion. Standard medical terminology refers to induced abortion and spontaneous abortion (commonly referred to as a miscarriage).

Intimate Partner Violence: Physical, sexual, or psychological harm by a current or former partner including reproductive control behaviors such as birth control sabotage. This type of violence can occur among heterosexual or same-sex couples and does not necessarily involve sexual intimacy.

Long Acting Reversible Contraceptives (LARC): LARCs refer to methods of contraception that can last for several years. Examples are intrauterine devices (which range from 3-10 years) or a hormonal implant called Nexplanon (3 years). Some people also consider the Depo-provera injection (which lasts for 3 months) to be a LARC.

Medication Abortion: This method of early abortion is currently used up to 70 days of pregnancy in the U.S. The most commonly used regimen includes mifepristone (formerly known as RU486) followed by misoprostol. Generally a woman has an appointment with a provider where she obtains mifepristone and misoprostol. After taking mifepristone in her provider’s office, she self-administers misoprostol one to three days later at home. Within a few hours, she has cramping and bleeding that ends the pregnancy.

Methadone Maintenance Treatment: The U.S. Department of Health and Human Services Substance Abuse and Mental Health Services Administration (SAMHSA) defines methadone as “A synthetic opioid that blocks the effects of heroin and other prescription drugs containing opiates. Used successfully for more than 40 years, methadone has been shown to eliminate withdrawal symptoms and relieve

drug cravings from heroin and prescription opiate medications.” MMT can reduce/eliminate cravings for opioid drugs, prevent the onset of withdrawal, and block the effects of other opioids.

Minimum Wage vs. Living Wage: The minimum wage is the lowest amount that an employer may legally pay an employee and varies by state. A living wage is the amount that an employee must earn to live locally based on cost of living.

Pregnancy Resource Center (also known as Crisis Pregnancy Centers): PRCs are federally and privately funded “clinics” that offer women free prenatal care and new baby supplies but are also designed to discourage women from choosing abortion care. PRCs are often affiliated with anti-abortion organizations or religious organizations. PRCs often provide women with false and misleading information about abortion and take actions to delay or impede a woman’s access to abortion care. Often they look like a medical clinic, but are not staffed by medical professionals nor do they use evidence-based clinical guidelines. While PRCs can be a good option for women who are certain they want to continue a pregnancy and need access to free pre- and post-natal care, they are not a good option for women who unsure about whether or not to continue a pregnancy. No health care provider should pressure a woman into a decision about her pregnancy.

Primary/Secondary/Tertiary Public Health Prevention: Different stages of prevention that work together to promote health and prevent disease. Each stage can work at an individual level or population level. Generally, primary prevention is seen as preventing the onset of disease, secondary prevention is seen as screening for disease, and tertiary prevention is treatment of disease.

Public Health: The science and art of preventing disease, prolonging life, and promoting health of the community through population health analysis.

Reproductive Coercion: The American College of Obstetricians and Gynecologists describes reproductive and sexual coercion as involving behavior that includes “explicit attempts to impregnate a partner against her will, control outcomes of a pregnancy, coerce a partner to have unprotected sex, and interfere with contraceptive methods.”

School-Based Health Centers: Health centers that range in services and staffing patterns but all of them are located in schools. Parents must opt-in in order for their children to receive treatment at a school-based health center. Health center staff work in collaboration with school staff to make sure that the health center is an integral part of life at the school.

Second Trimester Abortion: Termination of pregnancy performed between weeks 13-28 often using a dilation and evacuation method (D & E).

Survival Sex: When someone exchanges sex for basic needs such as housing or food.

Unintended Pregnancy: An unintended pregnancy is a pregnancy that is mistimed, unplanned, or unwanted at the time of conception.

Orienting Facts

Unintended Pregnancy

The Healthy People Goals focus on national health indicators of physical activity, overweight/obesity, tobacco use, substance abuse, responsible sexual behavior, mental health, injury and violence, environmental quality, immunization, and access to health care. Improving responsible sexual behavior with the goal of improving pregnancy planning, preventing unintended pregnancy, and improving the health and well-being of women, infants, and families is the cornerstone of the national reproductive health goals.

- According to Finer and Zolna (2014) half of pregnancies among American women are unintended, and four in 10 of these are terminated by abortion.
- The Guttmacher Institute reports that “the average American woman spends about five years pregnant, postpartum or trying to become pregnant, and three decades—more than three-quarters of her reproductive life—trying to avoid an unintended pregnancy.” Guttmacher’s Fact Sheet on *Induced Abortion in the United States* indicates the likelihood of having an abortion rises over the course of a lifetime: 1 in 10 women will have an abortion by age 20, and 1 in 3 will have an abortion by age 45.
- Healthy People 2020 cites negative outcomes associated with unintended pregnancy as a greater risk of birth defects, low birth weight and infant mortality. Unintended pregnancy can also result in delays in initiating prenatal care, inadequate folic acid intake through multivitamins or diet, tobacco and alcohol use in pregnancy, increased physical abuse and violence in pregnancy, reduced likelihood of breastfeeding, and maternal depression.
- In contrast, birth spacing helps to reduce the risk of adverse outcomes: less prematurity, fewer low birth weight babies, fewer small for gestational age babies and less perinatal death. Public health measures are needed to promote ideal birth spacing and to promote the benefits of preconception care.

Insecure Housing

- According to the U.S. Department of Housing and Urban Development, (HUD) on any night in January 2013, it is estimated that about 610,000 people were homeless in the United States and approximately 65% were living in shelters or transitional housing.
- HUD also reports more than 1 in 10 individuals who are homeless are

between the ages of 18 and 24 years old.

- A study by Winetrobe et al. (2013) found that over 62% of homeless females between the ages of 14 and 27 years old reported having been pregnant.
- Homeless women have a higher rate of pregnancy and a higher proportion of unintended pregnancy than women with secure housing. (Saver et al., 2012)
- Housing insecurity is associated with poor health outcomes for young children. (Cutts et al., 2011)

Substance Use

- The U.S. Department of Health and Human Services Substance Abuse and Mental Health Services Administration (SAMHSA) report on *Methadone Treatment for Pregnant Women* defines methadone as “a long-acting opioid medication used with counseling and other services to treat individuals addicted to short-acting opioid drugs.” MMT can reduce/eliminate cravings for opioid drugs, prevent the onset of withdrawal, and block the effects of other opioids.
- According to the CDC there are between 0.2 and 2.0 cases of Fetal Alcohol Spectrum Disorder per 1,000 births in the United States.
- The Guttmacher Institute reports that states have varying laws about when and how women can receive abortions and a joint report from Ibis Reproductive Health and the Center for Reproductive Rights showed that states with more abortion restrictions performed worse overall on women’s and infant’s health indicators compared with states with fewer restrictions.
- The 2014 ACOG Committee Opinion on *Opioid Abuse, Dependence, and Addiction in Pregnancy* states that “according to the 2010 National Survey on Drug Use and Health, an estimated 4.4% of pregnant women reported illicit drug use in the past 30 days. A second study showed that whereas 0.1% of pregnant women were estimated to have used heroin in the past 30 days.”
- The same report also states that “during pregnancy, chronic untreated heroin use is associated with an increased risk of fetal growth restriction, abruptio placentae, fetal death, preterm labor, and intrauterine passage of meconium.”

Inadequate Sexuality Education

- According to Advocates for Youth comprehensive sexuality education has been shown to reduce teen pregnancy, reduce sexually transmitted infections and increase teen comfort with negotiating relationships.
- Sexuality education programs are not standard across the United States. Individual states and/or local school districts are able to determine if and to what extent sexuality education is taught in schools. The American Medical Association “urges schools to implement comprehensive, developmentally appropriate sexuality education programs” and “supports federal funding of comprehensive sex education programs that stress the importance of abstinence in preventing unwanted teenage pregnancy and sexually transmitted infections, and also teach about contraceptive choices and safer sex.”
- The Guttmacher Institute brief, [An Overview of Minors’ Consent Law](#), provides background information and includes a chart with laws by state on minors’ right to consent without parental permission to contraception, STI, abortion, prenatal care, and medical care for minor’s child.

Intimate Partner Violence

- The U.S. Preventive Services Task Force (USPSTF) recommends that clinicians screen women of childbearing age for intimate partner violence (IPV), such as domestic violence, and provide or refer women who screen positive to intervention services. B rating (The USPSTF recommends the service. There is high certainty that the net benefit is moderate or there is moderate certainty that the net benefit is moderate to substantial. Offer or provide this service).
- Most major medical organizations including the American Medical Association, the American Academy of Pediatrics, the American Academy of Family Physicians, the American College of Obstetricians and Gynecologists, American College of Emergency Physicians, Emergency Nurses Association, American Association of Colleges of Nursing, American Nurses Association, Association Women’s Health, Obstetrical, Neonatal Nursing, Nurse Practitioners in Women’s Health recommend routine IPV screening as a part of standard patient care. However, there is no evidenced-based screening tool with well-established psychometric properties. Given national estimates that 1 in 3 women have experienced physical violence at the hands of an intimate partner, it is important to screen women with available screening tools in an attempt to identify women at risk.

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