Introduction

Intrauterine devices (IUDs) may allow women the opportunity to optimally control their fertility, due to the method’s high level of effectiveness, lack of requisite compliance, and long-acting nature.

At the same time, conceptions of freedom and control may vary based on social advantage, particularly for disadvantaged women, who may prefer a method that they can stop using without visiting a provider.

Methods

- In-depth individual were conducted with 38 Black and Latina women (ages 18-24) in the San Francisco Bay Area in 2013. Interviews focused on contraceptive decision-making processes, and attitudes toward and knowledge of IUDs.
- Qualitative interview data were analyzed using Dedoose, a web-based program for mixed methods analysis.

Results

For young women with career and educational aspirations, the IUD was seen as a method that could offer them the control they needed to meet their goals.

"...It's actually helping me to do what I want to do in order to like get to the point where I can have kids."

One socially advantaged young woman noted that IUDs were "perfect for people my age," as "most of us are in school."

For others, IUDs were not aligned with their perception of control. The idea of a device inside them, that might be unnecessary if they weren't in a relationship, that they could not stop using without seeing a provider, was worrisome.

"I feel like it would have control over me instead of me having control."

I keep going back to that freedom. I'd rather have the freedom to stop it at any time than rather just keep it like the implant or the IUD for a long period of time, even though knowing that I'm not going to be with anybody."

Many participants intended to become pregnant within 5-7 years and found this timeline incompatible with a long-acting, internal method of contraception.

"...if I really got to a point in my life where, like, you know, like [I] wasn't necessarily like trying to get pregnant but I wouldn't mind it either like, I wouldn't want to [use an IUD]. I'd want to have the freedom to like you know like stop the birth control right away."

"I can take [the pill] every day and not have to worry about getting pregnant. And I can take it as long as I can and want, and if I wanted to stop I can just stop. And then have a kid. I wouldn't have to visit the doctor or anything, like the IUD, you would have to go to the doctor, I guess and take it out. Yeah, I have a little more control."

For some, the notion of a contraceptive method that could work long-term was not attractive because they had limited control of their daily lives due to lack of opportunity.

"Most Black folks in this country are dealing with things day to day or week to week; that's just the reality of the situation for most Black communities in this country. So to make them – to make folks have to plan that far in advance, it doesn’t seem reasonable to me. Because that doesn't happen in any other aspect of their life. Maybe for a woman who knows everything she’s doing. The girl who says, 'Oh, I'm gonna be in this college, and I want to become a lawyer down the line, and I want to become a lawyer down the line, and I know exactly what I'm going to do, I know exactly where I'm gonna be four years from here,' that makes sense. But for a woman 18 to 24 to use an IUD, like you don't know where you're gonna be at. Most of us don't know where we're gonna be at."

Conclusion

- The way that control and freedom are conceptualized varies by numerous contexts, including educational opportunity, socioeconomic status, and relationship status.
- Because IUD insertion and removal are billed as separate procedures, women who become uninsured and/or lack economic stability may be unable to remove their IUD when desired. The option of self-removal may offer an opportunity for women to feel more control over an IUD.
- For socially disadvantaged young women, the notion of losing control of their fertility is thorny, even if maintaining control means using a less effective method that does not best suit their current pregnancy intentions.
- Sociologist Chikako Takeshita1 has noted a paradox embodied by the IUD, wherein women simultaneously gain and lose control of their bodies. Situating analyses of control, freedom and empowerment around IUD use in this paradox can reveal the complex web of factors that influence contraceptive decision-making.