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Increasing Male Patient Awareness of Contraception Options

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Problem Identification/Description of Need

- ▶ Unintended pregnancies
 - ▶ Several studies link unintended pregnancies to poorer maternal/child health outcomes and adverse social and economic sequelae.
 - ▶ 90-95% of unintended pregnancies can be prevented with consistent contraceptive use.
 - ▶ National unintended pregnancy rate is 45%.
 - ▶ In 2010 in Vermont, 46% of pregnancies were unintended.
 - ▶ Teen birth rate in Vermont was 5th highest in the nation in 2014.
- ▶ Male disengagement from the process of selecting and utilizing forms of birth control
 - ▶ Men have an equal responsibility to prevent unwanted pregnancies.
 - ▶ Studies around the world have shown that men's awareness of and support for the use of contraceptives were significantly associated with their partners' desire to use contraception.
 - ▶ Currently, most campaigns to increase use of high efficacy contraceptives are directed only towards women.

Public Health Cost/Considerations

- ▶ National (2010 data)
 - ▶ \$21.0 billion in public expenditure on unintended pregnancies
 - ▶ 68% of unplanned births were publicly funded
 - ▶ Publicly funded family planning services saved taxpayers 13.6 billion
- ▶ In Vermont (2010 data)
 - ▶ Federal and state governments spent \$31.4 million on unintended pregnancies
 - ▶ 73.5% of unplanned births in VT were publicly funded
 - ▶ Publicly funded family planning services saved taxpayers \$16.4 million

Community Perspective

- ▶ Dr. Alicia Jacobs – Family practitioner at Colchester Family Practice
 - ▶ Thought that this would be a unique way to address contraceptive use and access. She was hopeful that this intervention would encourage open conversations between partners about contraception.
- ▶ Dr. Clara Keegan – Family practitioner at South Burlington Family Practice
 - ▶ Was in support of increased male patient education on contraceptives, however felt that it was difficult to engage male patients because they are often not the ones using the most current methods. She stated that particular areas of need for increased education were emergency contraception, vasectomy, and IUDs.
 - ▶ Suggested drawing from existing resources made by The Reproductive Health Access Project.
- ▶ Informal conversations with male patients at Colchester family practice evoked a positive response. Patients felt most comfortable with the idea of an informational pamphlet to take home.

Intervention and Methodology

- ▶ A trifold pamphlet was developed targeting male patients under 30, using data and existing resources from The Reproductive Health Access Project.
- ▶ Pamphlet's objective was to provide a basic and engaging overview of male and female contraceptive options.
- ▶ Special focus on emergency contraceptives and specific ways male patients can directly impact contraceptive use and adherence.
- ▶ Pamphlets were reviewed and edited by providers at Colchester Family Practice.
- ▶ Providers at Colchester Family Practice were asked to distribute the pamphlets to young male patients who stood to benefit from contraceptive education.
- ▶ Electronic copies of the pamphlet were provided to the practice for future use and distribution.

Patient Pamphlet

Better late than never?

If you have unprotected sex or your contraceptive method fails (ex: the condom breaks) consider...

Plan B – The Morning After Pill

How it works: Plan B (or similar equivalent) is **available over the counter** at your local pharmacy/health center and typically costs \$35-60. Your partner should take it within 3 days of unprotected sex to prevent pregnancy. It is more effective the sooner it's taken. Morning after pills don't end existing pregnancies, and don't work well as a regular form of birth control.

Plan B effectiveness after unprotected sex:



- What you can do:**
- Keep Plan B on hand, just in case.
 - Know where to find Plan B.
 - Offer to share the cost.

Still have unanswered questions?

- Talk to your provider.
- Visit these online resources with up to date information!

www.reproductiveaccess.org
www.plannedparenthood.org
www.bedsider.org/methods

There are many effective contraceptive methods available, yet **46% of pregnancies in Vermont are unintended.**

Dops.

You can help prevent unintended pregnancies by having an **informed discussion** with your partner and helping them **consistently use** a method that is right for them.

Ready for fatherhood?



Family planning options for men

Options for you

Wrap it up! Male Condom 85% effective*

How it works: Blocks your sperm from entering your partner's vagina. Place and remove condoms while penis is erect. Don't forget to use a new condom each time you have sex!



BONUS - Also protects against STIs

- What you can do:**
- Have condoms available at both your place and theirs - and anywhere in between that you might have sex!

Pull out - Withdrawal 73% effective

How it works: Pull your penis out of your partner's vagina before ejaculation. This isn't a great way to protect yourself from STIs or fatherhood, but it's better than nothing.



Get Snipped - Vasectomy >99% effective

How it works: Blocks the tubes that add sperm to your semen. A clinician performs this procedure in 10-15 min and it **lasts for the rest of your life.** A vasectomy won't affect sexual function or feeling.



*Many contraceptives are more effective theory than in real life. **Real-life effectiveness** takes typical user slip-ups/accidents into account. **This pamphlet reports real-life effectiveness** because we believe that's most relevant to real-life users.

Options for your partner

Go Long! Long-acting birth control

The IUD >99% effective

How it works: T-shaped plastic rod placed in your partner's uterus by a clinician. It prevents pregnancy by killing or blocking sperm from reaching the egg. The IUD's strings hang down into the vagina - you might even be able to feel them during sex. Depending on the type, IUDs can last from **3-12 years.**

The Implant >99% effective

How it works: Plastic rod placed under the skin of your partner's upper arm by a clinician. The rod releases hormones that prevent sperm from reaching eggs for up to **3 years.**

Go Short - Short-term options

The Shot 97% effective

How it works: Your partner receives a hormonal injection from a clinician every **3 months** that prevents sperm from reaching eggs.

- What you can do:**
- Offer to accompany them to their doctor's appointment for moral support. The procedure for getting an IUD/implant/shot can be intimidating and uncomfortable for your partner.
 - Offer to share the cost, these options can be expensive for your partner.

The Pill 92% effective

How it works: Your partner takes a hormonal pill once **daily** that prevents sperm from reaching eggs.

The Patch, Ring 92% effective

How it works: The patch and the ring release hormones in your partner's body that prevent sperm from reaching eggs. The patch can be placed anywhere on your partner's skin and needs to be changed **once a week.** The Ring is inserted into your partner's vagina and needs to be changed **once a month.**

- What you can do:**
- Remind your partner to take their pill daily or help them set an alarm/text reminder.
 - Remind your partner to switch out their ring or patch.
 - Offer to share the cost, these options can be expensive for your partner.
 - Many hormonal contraceptives can cause side effects such as nausea, weight gain, headaches, and altered sex drive - so be understanding if your partner experiences them.



Wait, what if it's too late?

Turn page for information on **the morning after pill**



Response from Providers

- ▶ Providers at Colchester Family Practice responded positively to the project and intervention.
- ▶ They thought that the pamphlet was engaging, and would be a valuable resource for young men.
- ▶ Providers were excited to share the pamphlet with patients, and felt that it would aid more in-depth discussions about contraception.
- ▶ One provider suggested that the pamphlet may also be a great fit for distribution at the UVM Student Health Center

Evaluation of Effectiveness/Limitations

- ▶ Effectiveness
 - ▶ Provider response suggested that the pamphlet was engaging, and directly addressed areas of lacking education.
 - ▶ Effectiveness of the pamphlet could be further assessed using a pre-distribution and post-distribution survey if the intervention is implemented at other practices.
- ▶ Limitations
 - ▶ Although international studies suggest a link between male partner support and contraceptive adherence, there have been few studies exploring the issue in the United States. Cultural differences unique to the United States weaken extrapolation of international data.
 - ▶ The pamphlet provided the basics on a wide variety of contraceptives. The intervention may have been more effective if it focused on only one topic, such as Emergency Contraception.

Recommendations for future projects

- ▶ Assess need at similar primary care practices and health centers in the area, including the UVM student health center.
- ▶ Develop a pre/post implementation survey, assessing knowledge of contraceptives before and after reading the pamphlet.
- ▶ Continue improving the pamphlet so that it is maximally engaging and effective.
- ▶ Collaborate with Planned Parenthood of Northern New England to adapt the pamphlet for broader use.
- ▶ Develop a similar pamphlet targeting younger age group (<13years old) and older age group (>30 years old)

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