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Increasing Male Patient Awareness of Contraception Options

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COLCHESTER, VT
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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.
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 (<13 years old) and older age group (>30 years old)
References


