

Barriers to Contraception Access: Provider Survey

Study Information

Survey of Barriers to Contraception Access

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This form describes a research study that is being conducted by Dr. Hartman, Dr. Loomis and Lauren Cowen from the University of Rochester's Highland Family Medicine (HFM) in a parallel study conducted by Dr. Srinivasan and Dr. Gasbarro from University of Pittsburgh Medical Center (UPMC) St. Margaret.

The purpose of this study is to obtain information from providers and staff members regarding barriers to providing patient contraceptive care at family health centers.

If you decide to take part in this study, you will be asked to complete a brief survey that will ask questions about potential barriers to contraceptive care and general contraception knowledge. We estimate the survey will take 3-5 minutes to complete.

Participation in this study is being offered to all providers and staff members at HFM. Similarly, participation is being offered to all providers and staff members at UPMC St. Margaret. We expect about 100 subjects will participate in the study.

Barriers to Contraception Access: Provider Survey

Study Information

Risks and Benefits of Participation

Some of the survey questions may make you uncomfortable. You can skip any questions you do not wish to answer. To protect confidentiality, identifying information will not be collected as part of the study data. There are no other risks.

You may or may not benefit from participating in this study. The potential benefits to you from being in this study could be a better understanding of the barriers to providing contraceptive care at the clinic and an opportunity to improve this area of patient care in the future.

You will not be paid for participating in this study.

Independently, the University of Rochester and the University of Pittsburgh make every effort to

keep the information collected from you private. In order to do so, there will be no recording of names or other identifying information, so your individual responses to questions will not be linked to you personally. Data analysts will only have access to aggregate survey responses. We may jointly present our parallel study results at meetings or in publications, however only de-identified and aggregated information will be shared.

Sometimes, however, researchers need to share information you provided with people that work for the University, or regulators. If this does happen, we will take precautions to protect the information you have provided.

Your participation in this study is completely voluntary. You are free not to participate or to withdraw at any time, for whatever reason. No matter what decision you make, there will be no penalty or loss of benefits to which you are otherwise entitled.

Participating in this study will not affect your employment at the University of Rochester or at the University of Pittsburgh. You will not be offered to receive any special consideration if you take part in this research. Taking part in this research is not a part of your University duties, and refusing will not affect your job. You will not be offered or receive any special job-related consideration if you take part in this research.

Barriers to Contraception Access: Provider Survey

Study Contact Information

For more information or questions about this research you may call Lauren Cowen at (585) 330-0525 for HFM or Dr. Sukanya Srinivasan at (412) 795-6069 for UPMC St. Margaret.

Please contact your specific institutional review board for any of the following reasons:

- You wish to talk to someone other than the research staff about your rights as a research subject
- To voice concerns about the research;
- To provide input concerning the research process;
- In the event the study staff could not be reached.

The University of Rochester Research Subjects Review Board: 265 Crittenden Blvd., CU 420628, Rochester, NY 14642, Telephone (585) 276-0005 or (585) 449-4441

The University of Pittsburgh Institutional Review Board: 3500 Fifth Avenue, Hieber Building Main

Barriers to Contraception Access: Provider Survey

Demographics

1. Age

- Less than 20 years
- 20-25 years
- 26-30 years
- 31-35 years
- 36-40 years
- 41-45 years
- 46-50 years
- 51-55 years
- 56-60 years
- 61-65 years
- Over 65 years

2. Gender

- Female
- Male
- Transgender male
- Transgender female
- Other
- Prefer not to answer

3. Ethnicity/Race:

- Black/African American
- Hispanic/Latino
- White
- Asian
- American Indian/Alaska Native
- Native Hawaiian or Other Pacific Islander
- Mixed
- Other

4. Do you work at Highland Family Medicine (Rochester, NY) or St. Margaret (Pittsburgh, PA)?

- Highland Family Medicine
- St. Margaret

5. What is your level of medical training?

- 1st year resident
- 2nd year resident
- 3rd year resident
- Chief resident
- Fellow
- Faculty MD/DO
- Nurse Practitioner
- Physician Assistant

6. If you are a faculty physician, nurse practitioner or physician assistant: how many years have you practiced medicine since completion of your medical training?

- Less than 5 years
- 5-9 years
- 10-14 years
- 15-19 years
- 20-24 years
- 25-30 years
- Over 30 years
- N/a

7. What aspects of maternity care do you work in?

- Outpatient Prenatal only
- Inpatient Deliveries only
- Prenatal and Deliveries
- None

8. Where do you receive clinician information and/or skills training for maternal care and contraception?

- Residency program training
- Conference workshop training
- Published practice guidelines
- Primary care journals
- UpToDate
- Dynamed
- Other (please specify)

Barriers to Contraception Access: Provider Survey

Patient Barriers to Contraception Access

9. Do you believe child-care is a barrier for patient access to contraception?

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

10. Do you believe insurance coverage/patient cost is a barrier for patient access to contraception?

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

11. Do you believe difficulty scheduling appointments is a barrier for patient access to contraception?

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

12. Do you believe lack of awareness and misconceptions is a barrier for patient access to contraception?

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

13. Which of the following **have you directly observed** as reported barriers for **patient access to** contraception? (Please rank)

<input type="text"/>	Child-care
<input type="text"/>	Insurance coverage/patient cost
<input type="text"/>	Transportation
<input type="text"/>	Difficulty scheduling appointments
<input type="text"/>	Absence from work
<input type="text"/>	Lack of awareness or misconceptions about contraceptive methods
<input type="text"/>	Concern for side effects
<input type="text"/>	Religious beliefs
<input type="text"/>	Cultural attitudes about sex, young parenting, family size
<input type="text"/>	Other

14. If you chose "other" in the previous question, please specify:

Barriers to Contraception Access: Provider Survey

Provider Challenges for Contraception Counseling and Interventions

15. Do you believe appointment timing is a challenge for addressing contraception?

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

16. Do you believe resident supervision (sufficient preceptor staffing to supervise trainees) is a challenge for addressing contraception?

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

17. Do you believe training (experience in family planning counseling, prescribing birth control and/or procedural insertion of devices) is a challenge for addressing contraception?

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

18. Do you believe identifying appropriate candidates and contraceptive safety concerns is a challenge for addressing contraception?

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

19. Which of the following challenges have **you directly experienced with patients** when attempting to provide contraception counseling and/or interventions in the Health Center? (Please Rank)

<input type="text"/>	Timing (sufficient time to address contraception during the visit)
<input type="text"/>	Resident supervision (sufficient preceptor staffing to supervise trainees)
<input type="text"/>	Reliable availability of contraception devices (IUD/nexplanon)
<input type="text"/>	Training (experience and confidence in family planning counseling, prescribing birth control and/or procedural insertion of devices)
<input type="text"/>	Appropriateness of candidates and contraceptive safety (higher STI risk, safety for adolescents and nulliparous women)
<input type="text"/>	Difficulty discussing contraceptive options for adolescents with parents present or fear that confidentiality cannot be maintained
<input type="text"/>	Other

20. If you chose "other" in the previous question, please specify:

Barriers to Contraception Access: Provider Survey

Contraception Knowledge

21. LARC (Long Acting Reversible Contraception) is appropriate for adolescents and nulliparous women.

- True
 False

22. ACOG (American College of Obstetricians and Gynecologists) Guidelines recommend the use of routine prophylactic antibiotics at the time of IUD (Intrauterine Device) insertion to decrease risk of pelvic infection.

- True
 False

23. History of previous ectopic pregnancy is a contraindication for IUD contraception.

True

False

24. Immediate post-partum insertion of LARC is safe.

True

False

25. Which of the following are required prior to inserting an IUD in an asymptomatic patient according to ACOG recommended guidelines? (mark all that apply)

Pap Smear

STI (Sexually Transmitted Infection) testing

Pregnancy test

None of the above