CONTRACEPTION COUNSELING AT THE TIME OF FIRST TRIMESTER ABORTION: WHAT DO WOMEN WANT?

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Contraception counseling is commonly a routine component of abortion services. However, our pilot study of 202 women seeking first-trimester surgical abortion demonstrated that the majority of women do not want to discuss contraception during the counseling session as part of their abortion care. To examine the generalizability of our findings, we conducted a multi-center study at several locations across the United States to examine women undergoing both medical and surgical abortion in the first trimester with regard to their interest in contraception counseling.

We surveyed 1,959 women in Cleveland, Ohio; Chicago, IL; and Sacramento, CA seeking first trimester medical and surgical abortion. Before undergoing any counseling as part of their abortion care visit, women completed self-administered surveys about their interest in contraception counseling, topics of interest for those who desire counseling, reasons for disinterest in counseling, and desire to initiate immediate post-abortion contraception.

Approximately one-third of women reported that they wanted to undergo contraception counseling as part of their abortion care. The majority of subjects who favored counseling preferred to discuss contraceptive methods that are easier to use and methods that are more effective than those that they had previously used. On the other hand, the majority of women (61.7%) reported that they did not want contraception counseling. Most of them reported that they already know which post-abortion contraceptive method they want. Women who reported disinterest in counseling because they were content with their index contraceptive method were more likely to use either a short-acting hormonal method (including the contraceptive pill, patch, ring, or injectable) or no contraception.

Despite the fact that a large proportion of women reported that they did not want contraception counseling, most women (n=1,386, 70.8%) wanted to leave the clinic with a birth control method. Women who reported that they did not use any contraception leading to the current pregnancy were more likely to desire immediate post-abortion contraception. Most women preferred to leave the clinic with a long-acting reversible method (intrauterine device or implant, 18.5%) or other hormonal method (pills, patch, ring, or injectable, 66.5%).

Our findings suggest a framework to tailor contraception and abortion counseling to meet women’s needs. Contraceptive services, including counseling and method initiation, are important for the majority of women seeking first trimester abortion. Our results suggest that abortion clinics should allocate resources, including time and effort, toward emphasizing immediate contraceptive initiation for highly effective contraception.