

DO WOMEN TELL THEIR CONTRACEPTIVE CARE PROVIDERS ABOUT WHEN THEY HAVE ABORTIONS?

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The politics and stigma surrounding abortion have isolated it from the rest of women's reproductive health care, creating a gap between the preventative care of contraception and the treatment for failed prevention, or abortion care. When contraceptive and abortion care are separated, women having abortions may not tell their separate contraceptive provider about their method failure and resulting abortion. We hypothesize that women underreport their contraceptive failures and resulting abortions to their contraceptive providers. If women do underreport, then their contraceptive providers do not know about the patients' contraceptive failures and cannot discuss barriers to effective use of the prior contraceptive method or counsel about more effective methods. This separation may have major implications for the epidemic of unintended pregnancy. In a sense the contraceptive provider is steering blindly, and as a result the patients may receive suboptimal family planning care.

Women underreport abortions because of the social stigma around abortion. Overall the literature shows that abortion stigma plays a detrimental role in women's lives and contributes to an implicit rule of secrecy. This secrecy is harmful when it extends to health care provider because it may increase the severity of complications if there is a delay in seeking care, but also it may affect the provider-patient relationship in regard to contraceptive counseling.

In our study, we queried 202 women seeking abortion services at four health centers in Connecticut through Planned Parenthood of Southern New England. We provided anonymous written questionnaires to determine abortion disclosure rates to contraceptive providers, reasons for abortion nondisclosure, and factors associated with disclosure.

We found that almost half of women (44%) did not disclose their abortion to their contraceptive providers. The most common reasons for nondisclosure of the abortion were "I don't want them to know I'm having an abortion" (44%), "I'm changing providers" (20%), embarrassment about the pregnancy (14%), and fear of judgment (14%). Compared to Planned Parenthood contraceptive providers, women were significantly less likely to disclose to an obstetrical/gynecological provider outside of the Planned Parenthood system and to a non-obstetrical/gynecological provider, such as a primary care physician or pediatrician. Age, race/ethnicity, income, and education were not significantly associated with abortion disclosure.

We found that only provider type was significantly associated with disclosure, while intrinsic characteristics of the women were not. This suggests that abortion stigma is pervasive and affects women from many walks of life. It is concerning that abortion stigma may be a significant factor compromising effective contraceptive counseling and patient/provider relationships.