

Emergency Contraception Use among Urban Arkansan Women at University Women's Clinic: Before and After Nonprescription Availability.

Nalin Payakachat, PhD and Denise Ragland, PharmD, CDE.
Department of Pharmacy Practice, UAMS College of Pharmacy

Objectives

1. To describe characteristics of women who received prenatal care at the University Women's Clinic.
2. To observe patterns of unplanned pregnancies at the University Women's Clinic before (August 2003 – August 2006) and after nonprescription availability of emergency contraception (January 2007 – October 2008).
3. To explore participants' awareness and knowledge of emergency contraception at the University Women's Clinic before and after nonprescription availability of emergency contraception.
4. To explore factors related to unplanned pregnancies.

Methods

This study is a retrospective study design of routinely collected survey data. The survey includes five questions related to prior contraception use, awareness and intention to use emergency contraception (EC) along with demographic information (e.g. age, race, education level, frequency of pregnancy, number of children, household income). The survey was verbally-administered to women who sought to receive prenatal care at the University Women's Clinic (see the attached surveys) from August 2003 to October 2008. Database generation will not include patients' names, initials, medical record numbers, or any information that can be linked to any patient identifier. Information regarding users' demographics, unplanned pregnancy rates, prior use of any contraception, awareness of EC, intent to use EC in the future will be described using descriptive statistics. Chi-square tests will be conducted to identify any statistically significant difference of unintended pregnancy rates, prior use of contraception, awareness of EC, intent to use EC in the future, and factors related to unplanned pregnancies between two periods: before and after the availability of OTC EC at a significance level alpha of 0.05.

Significance

There are approximately six million pregnancies in the US each year. Nearly 50% are unintended. Of these, approximately one million pregnancies end in abortion.^{1,2} EC is one of many contraceptive methods available for family planning to prevent unintended pregnancy. One barrier to EC access was reduced when EC became available without a prescription for women age 18 and older after FDA approval on August 24, 2006.³ However, women's lack of awareness of EC may continue to limit their access. A previous pilot study showed only 50% of women who received prenatal care at the University Women's Clinic were aware of EC.⁴ This study will examine if the current nonprescription status of EC has had an impact on awareness of availability and/or unintended pregnancy rates among women receiving care at this clinic. The results regarding awareness and knowledge of EC will be used for family health education planning at the University Women's Clinic in the future.

The student research fellow will have the opportunity to prepare data for analysis purposes and perform proper statistical analyses as well as occasional survey administration in the clinic. Additional activities may include preparing EC patient education materials and a quiz to be used as a pre-test and post-test of patient knowledge of EC in a future project. A poster presentation and publication at local, regional, or national level will be encouraged.

¹ Finer LB, Henshaw SK. Abortion incidence and services in the United States in 2000. *Perspect Sex Reprod Health* 2003;35(1):6-15.

² Finer LB, Henshaw SK. Disparities in rates of unintended pregnancy in the United States. *Perspect Sex Reprod Health* 2006;38(2):90-6.

³ U.S. Food and Drug Administration. FDA News: FDA approves over-the-counter access for Plan B for women 18 and older, prescription remains required for those 17 and under. Available at <http://www.fda.gov/bbs/topics/NEWS/2006/NEW01436.html>

⁴ Schmidt A, Hopkins D, Hong S. Knowledge of emergency contraception among teens receiving prenatal care at an Urban Community women's Health Clinic. Midwest Pharmacy Practice Residents Conference, Omaha, Nebraska, 2004 (unpublished).