

Patients' and doctors' preferences for providing reproductive health care in primary care settings

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The role of primary care physicians continues to expand to meet the increasing demand for more comprehensive and complex services.

Given the recent threats to Title X funding and the 2019 federal appeals court decision to uphold the "domestic gag rule," implementation of reproductive health services in the primary care setting is important to help ensure patient access to this care. Protocols to expand reproductive health services, such as contraceptive and preconception counseling and provision, are increasingly being adopted by primary care providers.

In order to reduce unmet contraceptive need and maternal and infant mortality, recent initiatives propose that primary care providers systematically incorporate "pregnancy intentions screening" and subsequent contraceptive and/or preconception care counseling for women of reproductive age.

To assess both physician and patient perspectives related to these proposed protocols, CUNY SPH faculty Meredith Manze and Heidi Jones, in collaboration with Diana Romero and Lynn Roberts, and several MPH students, recently published three studies in the journals *Contraception* and *Family Medicine*.

In a cross-sectional survey of 443 [primary care physicians](#) in New York State, the researchers found that the vast majority of respondents (88 percent) felt pregnancy intention screening should be routinely included in primary care, with 48 percent reporting that they routinely perform such screening. Some [internal medicine](#) and other types of doctors cited a need for additional training in order to provide contraceptive provision, contraceptive counseling, and preconception care.

The researchers also conducted four focus groups and 18 in-depth interviews with a total of 39 women in New York State and found they were receptive to the availability of reproductive health services in primary care and the benefits to streamlining this care, provided clinicians approach these services in a manner that respects patient autonomy and reproductive desires.

Lastly, in a survey among over 1000 patients in four New York State Federally Qualified Health Centers, the researchers found that most patients supported inclusion of reproductive health discussions and contraception and STI services at these centers. Among those with a preference, patients preferred to be asked about reproductive health service needs rather than pregnancy intentions or desires.

"Interestingly in our studies, both primary care physicians and patients preferred to be asked an open-ended, [service](#)-oriented question, 'Can I help you with any reproductive health services today?' over one focused on pregnancy alone," says Jones. "This may allow for a broader range of reproductive health discussions in the primary care setting."

These findings support the continued expansion of reproductive health services in primary care settings.

Manze adds, "With proper training, especially for internal medicine physicians, routine assessment of patients' reproductive health needs in primary care can help ensure access to a full range of reproductive health services."

More information: Meredith G. Manze et al. Women's Perspectives on Reproductive Health Services in Primary Care, *Family Medicine* (2020). [DOI: 10.22454/FamMed.2020.492002](https://doi.org/10.22454/FamMed.2020.492002)

Meredith G. Manze et al. Physician perspectives on routine pregnancy intention screening and counseling in primary care, *Contraception* (2019). [DOI: 10.1016/j.contraception.2019.11.004](https://doi.org/10.1016/j.contraception.2019.11.004)

Heidi E. Jones et al. Primary care patients' preferences for reproductive health service needs assessment and service availability in New York Federally Qualified Health Centers, *Contraception* (2020). [DOI: 10.1016/j.contraception.2019.12.003](https://doi.org/10.1016/j.contraception.2019.12.003)

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