

## Policy Brief: Contraceptive Care

# Planned Parenthood: Skilled Providers of Contraception and High Quality Care

### Skilled Providers of Contraception:

Planned Parenthood providers are specialists in reproductive health care, and offer women care that stands out for its high quality. Studies of health care providers in the U.S. have shown that Planned Parenthood providers have higher levels of expertise in contraception, including for methods that require advanced training, such as IUDs and contraceptive implants. Expertise is important because women often rely on information from providers in order to find the contraceptive method that works best for them.

Research shows that women have far greater access to important contraceptive services, such as IUDs, at Planned Parenthood than at other providers. Knowledge about the patients that can use IUDs and implants is also higher at Planned Parenthood than at other practice settings, where providers often confuse medical contraindications and method eligibility for women seeking IUDs and contraceptive implants.

### Specialized knowledge and training:

Rigorous research has revealed that clinicians at Planned Parenthood health centers are far more skilled at offering their patients high-efficacy IUDs and implants. A study of 410 Planned Parenthood staff from 40 health centers across the country showed that most clinicians knew that IUDs could be offered to teenagers (96%) and to women who had not yet given birth (98%)<sup>1</sup>, two groups of women that face high risk of unintended pregnancy. In contrast, research based on national probability samples of contraceptive providers in primary care, including family physicians<sup>2</sup> and advance practice nurses<sup>3</sup>, reveals that these providers are far less trained: of family medicine physicians providing contraception, only some of them knew that IUDs could be offered to teenagers (30%) or women who had not yet had a child (43%). Their lack of knowledge means that many of the women at high risk for unintended pregnancy will not even be offered their most effective contraceptive option.

Specialists in reproductive health care are far more likely than providers in primary care settings to offer their contraceptive patients evidence-based care. Planned Parenthood providers in a study conducted with UCSF demonstrated much higher expertise in the use of contraception among women with other medical risks, such as smoking or obesity.

- Research shows that women have far greater access to important contraceptive services, such as IUDs, at Planned Parenthood than at other providers.
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It is particularly important for providers to know about methods that are appropriate alternatives for women who may have contraindications to the combined hormonal pill (with estrogen), such as smokers. Almost all Planned Parenthood clinicians (93%) knew a smoker could consider a levonorgestrel IUD (which does not contain the hormone estrogen) and 95% women with obesity as well. In contrast, among the national sample of family medicine physicians, approximately half knew levonorgestrel IUDs could be offered to a smoker (52%) or women with obesity (57%).

### Access:

Women seeking IUDs and other highly effective methods, such as the implant, are not able to get these methods from many kinds of providers: a large survey of contraceptive providers in the California State family planning program revealed that only half of private practice providers (53%) or county or city clinics (49%) offer patients the IUD onsite. For the contraceptive implant, only 18% of private practices and 41% of county or city clinics offer patients the method. Among Planned Parenthood providers, on the other hand, 99% offer both IUDs and implants.<sup>4</sup> Furthermore, the Planned Parenthood sites offer much better access to these methods because 95% can provide patients with their method of choice on the same day as their visit, rather than requiring women to return for another visit. In private practices only 21% of those offering these methods can deliver them same-day to patients, and in community health centers only 30% can.<sup>5</sup> Women who have access to IUDs or implants on the day of their office visit have double the initiation rates of women who have to return for the method.<sup>6</sup>

### Sources

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