

Pilot study of “My Birth Control,” a contraceptive decision support tool

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Why develop a decision support tool (DST)?

- Counseling has been shown to influence contraceptive use, but women are frequently dissatisfied with the contraceptive counseling they receive.
- Contraception is a preference-sensitive decision, for which shared decision making between the patient and the provider is considered optimal.
- A contraceptive DST is a promising approach to facilitating shared decision making and patient-centered care.
- In collaboration with Bedsider.org, we developed a tablet-based decision support tool to help women choose the best method for them.

Systematic development process:

- Initial needs assessment using observation of counseling and qualitative interviews of patients and providers
- Collaboration with UCSF family planning experts to synthesize evidence and create a storyboard
- Development of a prototype with our design and programming team
- Input from patient and provider stakeholder groups on the design, layout, and informational content of the tool
- Cognitive testing around understandability and user-friendliness
- Pilot testing at a safety-net clinic in San Francisco



“The app was vibrant, I wasn’t bored...I was interested in what was next.”

Structure of the tool:

- Educational modules relevant to choice of contraceptive method
- Interactive component where patients indicate preferences
- Health history checklist evaluating eligibility for methods
- Interactive “method chooser” screen with a method comparison feature
- Screen that allows the patient to enter questions
- Final page that includes the methods the patient is interested in, preferences, medical history, and questions for provider to be printed out and used during the visit

Methods:

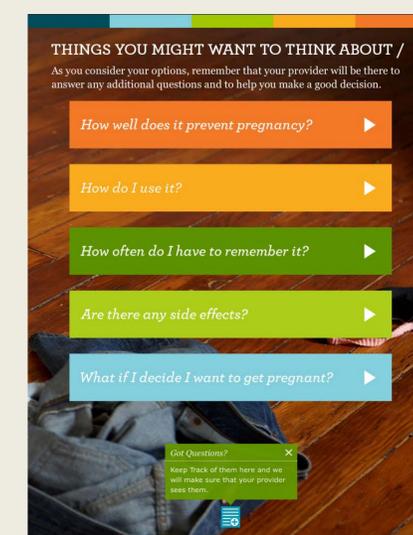
- Pilot testing of the prototype was conducted at a safety-net clinic in San Francisco among women of reproductive age seeking a contraceptive method (n=84).
- Using bivariate and multivariate analyses, we compared contraceptive knowledge and satisfaction between women using the tool and women receiving usual care.

Contraceptive efficacy module

Personal “Birth control profile” print-out

Findings:

- Trends towards better outcomes:
 - Women who used the tool reported increased knowledge about all methods compared with those who received usual care (p=.09).
 - A higher proportion of women who used the tool demonstrated increased knowledge about LARC methods compared with women in usual care (99% vs. 82%, p=.13).
 - A higher proportion of women who used the tool than those who did not reported complete satisfaction with their method choice (29% vs. 12%; p=.06).
- In qualitative interviews, women reported that they found the tool to be engaging, with an adequate level of detail
- Providers and clinic staff reported no adverse effects of use of the tool in a real world clinic setting.



“I was able to ask better questions and be more confident...not just going into it being like, ‘whatever, I don’t know.’”

Next steps:

- We are currently conducting a cluster randomized trial in four safety net clinics in the Bay Area, funded by the Patient-Centered Outcomes Research Institute
- We plan to implement the tool in other clinics across the country in collaboration with Bedsider.org, as well as integrate it into their website for nationwide dissemination