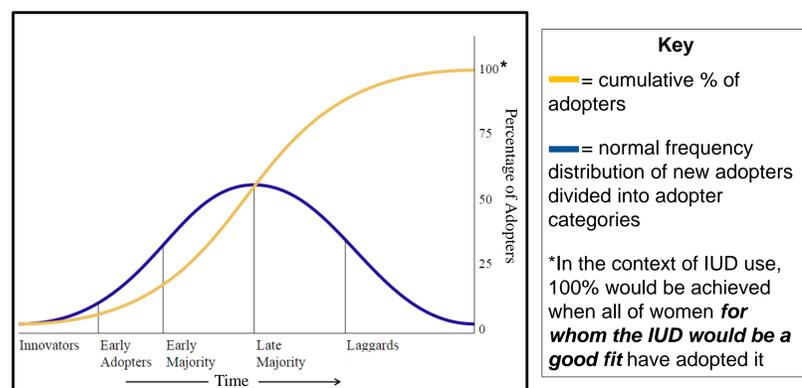


BACKGROUND

- Prior studies have shown that social networks are a valued source of information about contraception.
- Low IUD uptake among contraceptive users (7.7% in the US) may be explained in part by prevalent misinformation and concerns about IUDs spread through social communication.
- Applying **diffusion of innovations theory** to an IUD social communication intervention may be an effective means to increase awareness, positive attitudes and adoption of IUDs.



Diffusion of Innovations Theory: Experiences and influence of innovators and early adopters gradually reaches a “tipping point”, leading to the normalization and increased adoption of the innovation.

OUR HYPOTHESIS

Activating IUD users to disseminate evidence-based information and their personal experience with IUDs may accelerate the normalization and acceptance of IUDs among contraceptive users.

FORMATIVE RESEARCH

Using focus groups and interviews with IUD users and non-users, we assessed women’s perceptions of how peers can provide information to encourage IUD use.

- The majority of respondents (83%) valued learning about contraceptive methods from women who had experience using them.

“If you have a friend that’s actually tried [the method] and they can share their experience with you, then it kind of gives you like a more open mind about it.” -25-year-old

- Almost 80% of IUD users had recommended IUDs to others.

“When someone’s alarm goes off and it’s like, ‘Oh, I’ve got to take my birth control,’ like I’ll mention [IUDs] to all my friends. I just feel like I’m so lucky, that like should probably spread the word.” -23-year-old IUD user

- IUD never-users expressed interest in learning about how IUDs feel and potential side effects from IUD users.
- After participating in a non-directive discussion about IUDs, IUD non-users reported increased acceptability to the idea of having an IUD themselves (11% pre-discussion versus 36% post-discussion, $p=.02$).

DEVELOPED AN INTERVENTION TO SUPPORT POSITIVE SOCIAL COMMUNICATION ABOUT IUDS

In collaboration with the design and development team from Bedsider.org and Dr. Tom Valente, social network expert, we developed a multi-pronged, low-cost, and peer-led IUD communication intervention.



- Intervention is designed to be delivered in clinic settings to IUD users by their family planning provider.
- Goals of the intervention are to encourage satisfied IUD users to share their IUD experience with their peers and to equip them with evidence-based IUD information to dispel myths and address concerns of non-users.

PILOT STUDY OF INTERVENTION

We piloted the WhyIUD intervention in a San Francisco safety-net family planning clinic to:

1. Assess its feasibility and acceptability among IUD users, their social networks, and clinic staff
2. Determine the best method to recruit peers of the IUD user so that we can:
 - a) Investigate the makeup of IUD users’ social networks
 - b) Measure the effect of our intervention on the attitudes and perspectives of IUDs in a future RCT

PILOT STUDY METHODS

Baseline:	Baseline - 1 month:	3 months:
We recruited IUD users (n=10) from a safety net family planning clinic in San Francisco to receive the Why IUD intervention.	IUD users recruited women of reproductive age with whom they felt comfortable talking about birth control.	Quantitative surveys and qualitative interviews were conducted with IUD users and social contacts.
IUD users completed a baseline survey.	These women were enrolled as “social contacts” (n=32) and completed baseline surveys.	

PILOT STUDY FINDINGS

Characteristics of IUD Users’ social networks

- IUD users felt comfortable talking about birth control with an average of 5.4 women.
- Social contacts’ relationship to IUD user:
 - 90% were friends
 - 10% were family
- Out of social contacts who enrolled (n=32), 26% had IUDs.

Acceptability of and engagement with WhyIUD intervention

IUD users:

- Overall, women liked the design and content of the intervention materials.
- Interviews suggested there was a positive effect on IUD users’ social communication.

“My best friend and I went to the movies. After the movies I was like, “I have something for you” [and gave her the pamphlet]. She was like “Oh, ok, thank you... why did you get [an IUD]?” We had never actually discussed this... [Having the pamphlet] was like having a start, and a good reason to talk [about my IUD].” -IUD user

“I liked the [text messages] because they would check up on me and they would ease my mind by reminding me [the IUD] is the most effective [method]. I liked it!” -IUD user

- Engagement with intervention website and text messages was lower than desired.

Clinic staff:

- Reported that implementing intervention was easy and did not disrupt clinic flow.
- Made recommendations around streamlining instructions for clinic staff.

Feasibility of recruiting and collecting data from IUD users’ social contacts

- 59% of IUD users’ social contacts enrolled in the study.
- 100% of social contacts who completed baseline surveys completed follow up surveys.

CONCLUSIONS

- Harnessing social communication about IUDs promises to be a powerful strategy to influence social norms around IUDs.
- Ensuring adequate engagement with WhyIUD intervention is challenging given our goal to keep it low-cost and easy to implement in clinic.
- Recruitment of social contacts was adequate, suggesting a large-scale study of this intervention is feasible.

NEXT STEPS

- Based on feedback from participants and clinic staff, we are optimizing our intervention.
- We plan to pilot our optimized intervention in a setting with lower uptake of IUDs to target innovators earlier on the diffusion of innovations curve.