

Reducing Unintended Pregnancy: Drug and Alcohol Services Pregnancy Intention and Contraception Project

VICKI CHASE¹, BRIDIN MURNION¹, KELLY McNAMARA², GRACE CARNIATO¹, KATE MASTERS¹

¹Central Coast Local Health District Drug and Alcohol Services, ²The University of Sydney, Discipline of Obstetrics, Gynaecology and Neonatology.

Presenter's email: vicki.chase@health.nsw.gov.au

Introduction: People who use drugs can find it difficult to access healthcare. For women, this can mean poor access to contraception, and high rates of unintended pregnancy^{1,2}. There are a myriad of negative consequences of unintended pregnancies. These include poor pregnancy outcomes and terminations of pregnancy. The morbidity associated with unintended pregnancy causes significant individual and societal harm. Moreover, studies identify that women who use drugs want to make informed choices about contraception³. Despite these recognised risks and adverse consequences, and women's desire to make informed choices we do not routinely assess a women's contraception and pregnancy plans.

Design and Methods: A simple screening tool was developed and piloted within the Drug and Alcohol Service (DAS). When a contraceptive need is identified through screening participants are offered further referral for contraception advice.

Key Findings: Most women screened, while not planning a pregnancy are not using any form of contraception. Review of the data however suggests that these same women are open to education and when barriers are removed are willing to access highly effective contraception. 63% of those not planning a pregnancy were not using any form of contraception. Of those using contraception 55% were using less effective forms of contraception such as the pill or male condoms. When offered an opportunity to learn more about contraception and access an onsite women's health and contraception service 61% of the women screened accepted referral.

Discussions and Conclusions: The project seeks to empower women of reproductive age who access Drug and Alcohol Services to make informed reproductive choices and support their access to appropriate care.

Implications for Practice: Formal evaluation is ongoing. If this simple tool can be demonstrated to be an effective way of screening for contraceptive needs, it has broader applicability across NSW Health Drug and Alcohol Services and possibly other sectors caring for vulnerable women of reproductive age.

- 1.Black KI, Stephens C, Haber PS, Lintzeris N. Unplanned pregnancy and contraceptive use in women attending drug treatment services. The Australian and New Zealand journal of Obstetrics and Gynaecology. 2012;52(2):146-150.
- 2.Fischbein RL, Lanese BG, Falletta L, Hamilton K, King JA, Kenne DR. Pregnant or recently pregnant opioid users: contraception decisions, perceptions and preferences. Contraception and Reproductive Medicine. 2018;3:4-4.
- 3.Olsen A et al. BMC Women's Health, 2014, 14:5