

AN INTEGRATED WOMEN'S HEALTH AND CONTRACEPTION CLINIC INTO A DRUG HEALTH SERVICE: A PILOT STUDY ASSESSING FEASIBILITY AND ACCEPTABILITY

Authors:

White B¹, Reid S^{1,2}, Haber PS^{1,2}, Day CA¹, Black K^{1,2}

¹ University of Sydney, ² Royal Prince Alfred Hospital

Introduction and Aims: Compared to the general population, women engaged in drug treatment services have higher rates of unplanned pregnancies and adverse pregnancy outcomes. Despite numerous recommendations for better access to contraception, there have been few improvements in this regard. Aim: To assess the feasibility and acceptability of integrating a women's health/contraception clinic within a drug health service, focused on improving access to long acting reversible methods of contraception (LARC) including intrauterine devices (IUDs) and implants.

Design and Methods: Following the establishment of a women's health/contraception clinic at an opioid substitution treatment program in Sydney, female clients were surveyed regarding their contraception knowledge and needs and related health issues. Interested and eligible women were informally referred to the contraception clinic. Participation was voluntary and reimbursed with a \$30 voucher.

Results: Thirty-eight/fifty-five (69%) women participated. Respondent's median age was 39 years (range 24-54), 25 (66%) were single and 23 (61%) were trying to avoid pregnancy. Most women had heard of at least one form of LARC (IUD =28, implants=33); eight reported current LARC use (IUD=3, implants=5) and 21 reported they would consider using it (IUD=6, implants=13, both=2). Twelve women were eligible for contraception (sexually active, aged <50 years, not using contraception and wishing to avoid pregnancy) but after three months only two had presented to the contraception clinic for assessment.

Discussion and Conclusions: There was low uptake of on-site contraception services for this group of opioid dependent women, despite an expressed need and willingness at this site.

Disclosure of Interest Statement:

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