

WOMEN'S PERSPECTIVES ON THE ROLE OF THE GP IN CONTRACEPTIVE
DECISION-MAKING: UNTAPPED POTENTIAL FOR A 'REPRODUCTIVE JUSTICE'
APPROACH?

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DISCLOSURES

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BACKGROUND/AIMS

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- Uptake of LARC in Australia is relatively low
- Lack of in-depth, fine-grain evidence on the barriers to LARC use
- This study important because:
Provides rich evidence of diversity, individual contexts and sexual health biographies
- Aims to provide pilot data on:
How age and stage of life shapes contraceptive decision making
How women experience different models of contraceptive service delivery

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METHODS

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- Twelve qualitative interviews with South Australian women aged 23 to 48 years.
- Life grid (Wilson et al. 2007) visual tool used both as ice breaker and to assist in mapping reproductive biographies.
- Women asked to describe their contraceptive histories and what factors had shaped their decisions over time.
- Women included if they had ever considered using LARC.
- Qualitative, thematic analysis of narratives carried out (Riessman 2008)

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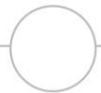
RESULTS

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- Relationships of **trust** and **mutual respect** with GPs = women more empowered
- Ageism and biases of GPs impacted access to LARC
- Women valued shared decision making model
- Women desired autonomy and self determination, but still invested in longstanding GP relationships

“women themselves know better than funders or practitioners do about where contraception fits into their lives, relationships, and long-term goals at any particular moment”
Higgins 2014 p.239

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CONCLUSIONS/IMPLICATIONS

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CONCLUSIONS:

- Relationships of trust are key for self-determination and ‘reproductive justice’ (Higgins 2014)
- Women valued longstanding GP relationships
- GP practices can pose a significant barrier to LARC use

IMPLICATIONS:

- Better resources for GPs around socio/cultural diversity, LARC and referral services
- Consideration of other models of service that put ‘reproductive justice’ into action
- More research: what does ‘reproductive justice’ and the GP relationship look like for CALD women, women in low socio-economic contexts etc.

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