

### **What is Prevention First Colorado?**

Prevention First Colorado is a program and coalition run by NARAL Pro-Choice Colorado Foundation. Our mission is to increase contraception use and reduce unintended pregnancies in the state of Colorado. We believe that every child should be a wanted child, and that everyone should have access to family planning services that allow for reproductive choice, greater economic self-sufficiency, and healthier families.

### **Prevention First Colorado Program Clinic Survey**

A clinic survey was the first step in the Prevention First Colorado program's original research into the causes of poor contraceptive use and its relationship to unintended pregnancy. One hundred eighty-nine Colorado clinics were asked to participate, and 25 clinics participated (response rate of 13.2 percent). One thousand three hundred and twenty-four surveys were collected and out of those 1,027 surveys were considered valid (77 percent). Valid surveys were from non-pregnant, non-lactating women who were currently sexually active with a man and aged 18-44. The survey assessed practical barriers to contraceptive use, such as cost and access, along with socio-structural and psychological barriers. Conclusions drawn from this survey were preliminary and primarily served to form the basis of subsequent research efforts, including a telephone survey, focus groups, and interviews.

### **Survey Findings**

#### *Contraceptive History and Use*

- Just over half of respondents reported using birth control pills, 31 percent reported using condoms, and six percent reported not using birth control. 75 percent reported that they used a single form of birth control, while 19 percent reported using multiple forms.
- Fifty-eight percent of respondents reported having had sex without birth control when they did not want to become pregnant. Stated reasons for this included forgetting about birth control, being in a monogamous relationship, using withdrawal, and being under the influence of drugs or alcohol.
- Twenty percent of respondents had previously had an abortion.
- Of the respondents who reported not using contraceptives, over half said that it was "very important" that they not get pregnant.

#### *Attitudes toward Contraception*

- Responses were placed into three categories: psychological barriers, partner communication and interaction factors, and planning factors.
- Psychological barriers referred to reasons why women might choose not to think about contraception at all, and included statements such as "I don't believe I'll really get pregnant" and "I don't have sex often enough to worry about birth control."
- Partner communication and interaction factors referred to decisions about birth control made just before or during sex and dealt with last-minute contraceptives such as condoms, and included statements such as "I care more about safety than being 'in the moment' during sex" and "If a man cares about me he won't mind using a condom."
- Planning factors referred to attitudes toward preparing for birth control use ahead of time and included statements such as "I don't mind waiting for an appointment to get birth control" and "It's not hard to take a pill every day."

#### *Implications of Attitudes towards Contraception*

- Psychological barriers were deemed by researchers to be the most significant factor in determining contraceptive use or non-use. Women who indicated that they experienced psychological barriers were more likely to have multiple children, more likely to indicate that they used no birth control or used the withdrawal method or emergency contraception, and less likely to use more effective

hormonal forms of contraception than women who indicated that they did not face psychological barriers.

- Women who reported experiencing psychological barriers were more likely to use Medicaid and less likely to have private insurance than women who did not.
- Other factors associated with having had sex without birth control included use of the withdrawal method, having experienced contraceptive failure, having changed contraceptive methods within the last year, and being uninsured or unemployed.
- Women who had experienced contraceptive failure, usually as a result of inconsistent or incorrect use, appeared to have less confidence in contraceptives and were more likely to have had sex without contraceptives.
- Cost and access were not shown to be major barriers in this study, likely due to the fact that the survey was distributed through a clinic and therefore only reached women who were accessing reproductive health care.