

# Welcome!

**Recognizing Bias and Coercion in  
Efforts to Increase Access to  
Contraceptive Care**



# Agenda

- Welcome and introduction
- Upstream overview
- Exploring values and bias in contraceptive care

# Upstream Team



**Dan Dobin**

VP of Strategy,  
Expansion, and Policy



**Mara D'Amico**

Senior Director of  
Partnerships



**Teagan  
Drawbridge-Quealy**

Training and Coaching  
Integration Director

# Improving contraceptive access is more urgent than ever

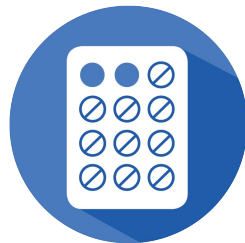
Connecticut ranks 21 out of 50 states for highest rates of unintended pregnancy, signalling room to further strengthen contraceptive care



38%

Of pregnancies are  
**wanted later or  
unwanted in**  
Connecticut

[Source: Guttmacher Institute](#)



1 in 4

women say they are **not  
currently using their  
preferred method of**  
birth control

[Source: KFF](#)



30%

Of women report **receiving  
enough information** prior to  
making contraceptive  
decisions

[Source: KFF](#)

# About Upstream

## What do we do?

Upstream USA is a national nonprofit. We work in partnership with health centers to strengthen reproductive care and autonomy by increasing **equitable access** to the full range of **contraceptive options** within primary care.

## How do we do it?

Through **free, expert-led training and technical assistance**, designed to help your health center provide **best-in-class, patient-centered contraceptive services**. Our training is CME-accredited.

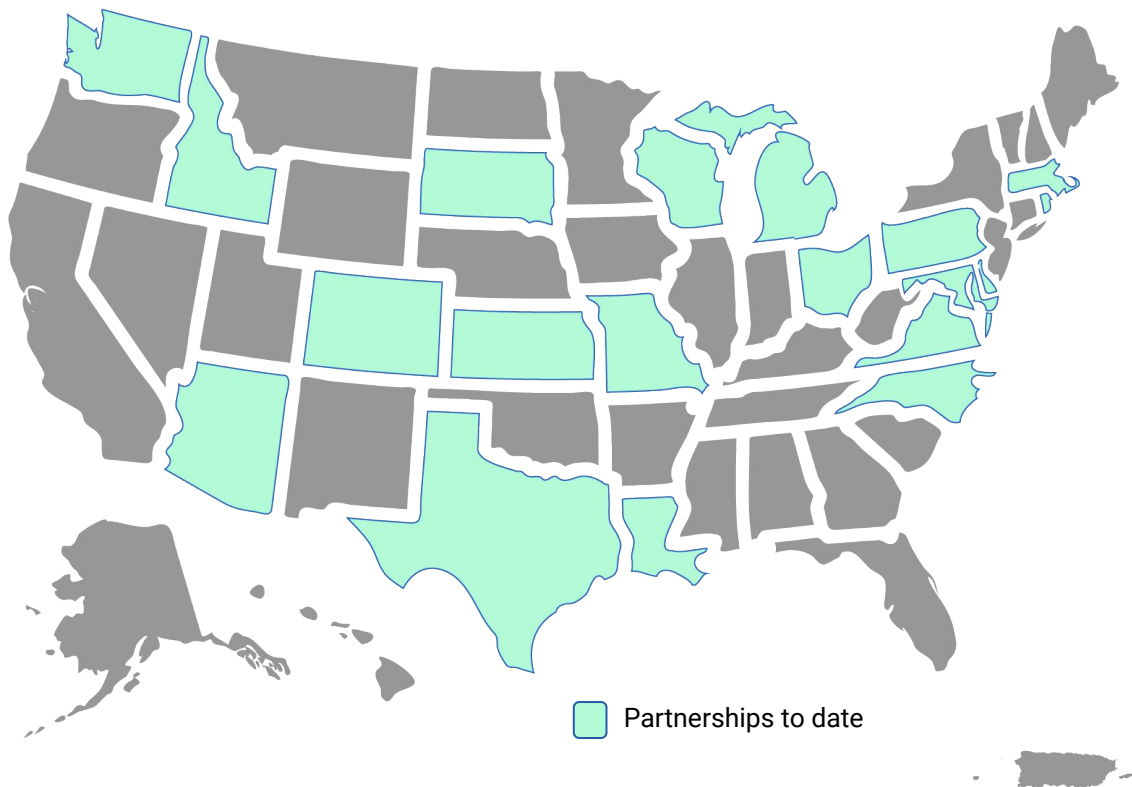
## Where do we work?

Upstream has worked across the United States, and is now engaged in five state-based efforts in **Delaware, Massachusetts, Washington, North Carolina and Rhode Island**. We have worked with over **30 partners across MA and RI**, including >20 FQHCs

# Working to expand contraceptive access nationwide

## Upstream by the Numbers

- 100+ health center partners
- 19 states with partnerships
- 9 years of experience
- 150+ employees
- \$45M annual budget
- 5M patients served by 2030



# Patient-Centered Principles

**UNBIASED**



**NON-  
COERCIVE**



**TRAUMA-  
INFORMED**



# Comprehensive contraceptive care means that all patients:

- are being **universally screened for pregnancy intention and offered basic contraceptive education**, if indicated and desired
- interested in preventing pregnancy are immediately **offered comprehensive contraceptive counseling and education**
- receive contraceptive care in alignment with current **clinical best practices**

- have access to the **full range of FDA-approved contraceptive method** categories
- can access or discontinue their chosen contraceptive method **during the same visit** in which they request to do so
- can **access their method of choice** without out-of-pocket cost being a limiting factor
- can access contraceptive care via **telehealth**



# Contraception and Maternal-Child Health



Equitable access to contraception is **one piece of the puzzle** to help families and individuals determine if and when they want to have a child.

# Building Better Access

## PATIENT-FACING CHANGES



Train providers



Educate and equip licensed and non-licensed staff



Use patient-centered educational materials



Develop referral protocols

## SYSTEMS-BASED CHANGES



Optimize coding and billing



Use your EHR data to track progress



Source, store, & replenish contraceptive methods



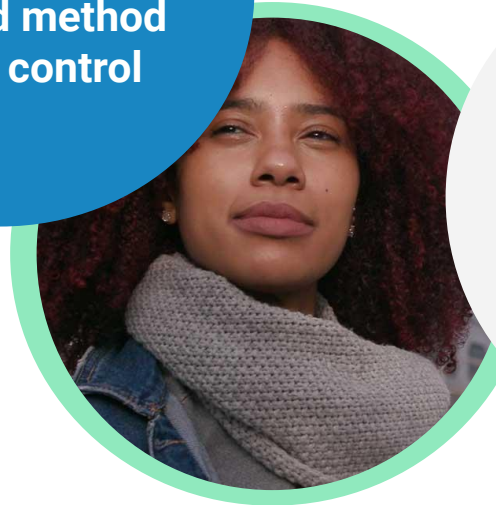
Create sustainable policies & workflows

# Are your patients making fully informed, autonomous contraceptive choices?



% of patients **did not feel pressured** to choose a specific method of birth control

% of patients **have access to their preferred method of birth control**



% of patients feel that health center staff **take their birth control preferences seriously**



# Available Resources



B

## Free program offerings

- Up to **7.5 hours** in CME/CE contact hours accredited by ACCME, ACPE and ANCC
- **Upstream team** dedicated to your health center, including a clinical advisor
- **Printed materials** for patient education and job aides

## Funding to offset your time

- **\$25-50k** depending on the size of your organization

# Benefits of Partnering with Upstream

Expert-led training &  
clinical support  
improves care quality



Patient-centered  
design improves  
patient experience



A tailored approach  
respects your time



CME-accredited  
training supports  
staff development





# We train health centers to take a patient-centered approach to contraceptive counseling



- Discuss how a patient's history with bias and coercion could affect their care experience
- Explain the difference between unconscious bias and coercion
- Discuss strategies for building awareness of unconscious biases and preventing coercion
- Identify and discuss elements of reproductive bias or coercion in patient scenarios

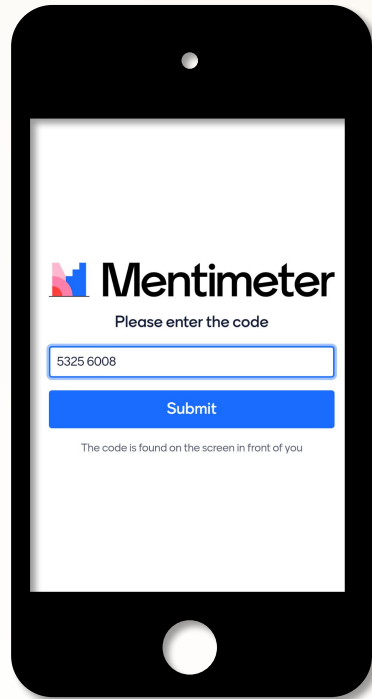


# Navigating Personal Values in Contraceptive Care

upstream<sup>USA</sup>



# Activity: Personal Values



1. Pull out your phone
2. Go to [www.menti.com](https://www.menti.com)
3. Enter the code: **5305 9630**  
or scan the QR code

**Keep your phone out for the next poll!**



**Personal values can influence decisions, guide behaviors, and may evoke strong feelings and reactions.**

# Personal values on sexual and reproductive health

**Birth control shouldn't be covered by employers.**

**Birth control should be free and available at every pharmacy.**

**Schools should not teach sex education in health class.**

**Schools should teach comprehensive sex education.**

**It's not okay for people to have sex before they're married.**

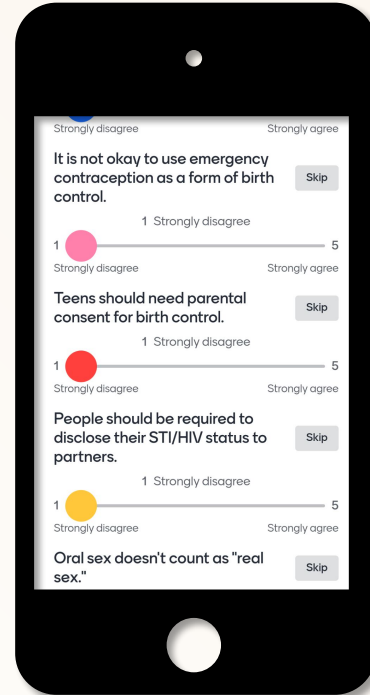
**It's okay for consenting people to have sex whenever they want.**



Patients may see you as  
an expert and take  
**your values to be  
medically accurate facts.**

# Activity: Sexual and Reproductive Health Values

1. Pull out your phone
2. Go to [www.menti.com](https://www.menti.com)
3. Enter the code: **5305 9630**  
or scan the QR code



Click on **Go to slide** at the top of your screen





Having personal values is not  
right or wrong—  
**they just exist.**

**upstream** USA

# Strategies for addressing your biases



**Identify and be aware of  
your own values and  
unconscious biases**



**Shift your language**



**Always center  
the patient**



Values-based Language	Shifted Language
<p><b>Should</b></p> <p>“Everyone <b>should</b> use birth control.”</p>	<p><b>Could</b></p> <p>“You could use birth control.”</p>
<p><b>Best</b></p> <p>“IUDs <b>are the best</b> method because they last so long.”</p>	<p><b>Choice</b></p> <p>“The best method, is the one a person has access to and will use correctly and consistently.”</p>
<p><b>Everyone/All</b></p> <p>“<b>Everyone who</b> uses the Shot experiences weight gain”</p>	<p><b>Spectrum</b></p> <p>“Some patients who use the Shot experience weight gain, some don’t.”</p>

**“Contraceptive care is  
creating the space for  
patients to truly be in  
the driver’s seat of  
their future goals.”**



## Individual reflection:

What can you do  
to **acknowledge**,  
**address**, and **unlearn**  
your own biases?

# Questions?

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