

Fertility Appreciation Collaborative Rockin' and Rollin'in Cleveland

A diverse group gathered in the Rock 'n' Roll Capital of the World at the end of September for the Fertility Appreciation Collaborative to Teach the Systems (FACTS) Conference that preceded the 2012 Family Medicine Education Consortium's (FMEC) Northeast Regional Meeting. The morning workshop included five family physicians, a PhD industry expert, a second year medical student, and a US military officer. The half day conference included: 1) a review of findings from the faculty survey on fertility awareness based methods (FABMs), 2) a discussion of faculty development needs and small-group breakouts to review potential clinical resources and supports, and 3) an updated look at our needs to achieve the goals of the Collaborative:

Background assessment: Dr. Manhart presented a background assessment of fertility awareness based methods (FABMs) that examined data from a variety of US surveys. These indicated:

- ☐ Waning use of FABMs over the last two decades in women between the ages of 15 and 54. Current use may be as low as 3%.
- ☐ Increased patient interest, particularly among women wanting to use FABMs for the purpose of achieving pregnancy (37%)
- ☐ 22.5% of women were interested in FABMs for postponing pregnancies with a higher percentage of men indicating an interest for this purpose.
- ☐ Women want to hear from their physicians about these methods.

After the results of a 2003 survey of FABM users were presented, the ensuing discussion highlighted that:

- ☐ A three to one ratio of positive to negative comments in the qualitative feedback received.
- ☐ women users expressed discouragement in approaching their physicians who commonly dismiss the use of FABMs
- ☐ 80% of users were satisfied with their FABM use. Roughly 20% of couples reported increased tension in their relationships or struggles with the method, especially in the early going.

Participants then shared helpful insights about fertility awareness-based methods. They noted that some physicians' discomfort with FABMs is due, in part, to a lack of knowledge of and confidence in these methods. From a patient perspective, learning an FABM is in some ways similar to learning chronic disease self-care skills. While not for a "disease", fertility monitoring can be a useful skill throughout the life cycle. There is a learning curve when behavior change is taking place—this may be one of the sources of stress in couples who are new to an FABM. When applied correctly by motivated patients, FABMs can provide safe and effective protection against pregnancy for those whose goal is to avoid pregnancy. There appear to be clinician needs

for more information on proper patient selection, information sharing and referral to available resources to learn the selected FABM.

Faculty Survey: Dr. Motley presented a preview of the results from a recent survey sent to 120 women's health curriculum directors in Family Medicine residency programs in the FMEC that showed the following:

- ☐ A 45% response rate to the survey
- ☐ Unfamiliarity among Family Medicine faculty about methods other than the rhythm method and a very small percentage of faculty members proficient in teaching any FABM method.
- ☐ In a 2 to 1 ratio, a willingness to offer an FABM to a patient interested in using one.
- ☐ Qualitative feedback from faculty members noting
 - “positive aspects” (including themes of increased self knowledge, being “hormone free”, relatively inexpensive & accessible to the user) and
 - “constraints” (including themes of requiring education & appropriate application interest, readiness/motivation, time requirements & convenience)

To address the knowledge gap, FACTS plans to continue faculty development program planning, working to understand clinical workflows within practices and the barriers and facilitators of presenting FABMs as a “menu option” for family planning and fertility monitoring. Biases revealed by some respondents to the survey highlight the importance of preserving respectful dialogue in conversations about FABMs among FACTS collaborators, faculty, providers and patients.

Evidenced based review of FABM efficacy. An early goal of FACTS was to review the clinical data supporting the effectiveness of FABM in avoiding pregnancy. Sub-team #1 has now completed that milestone with acceptance of the manuscript “Fertility Awareness-Based Methods of Family Planning: A Review of Effectiveness for Avoiding Pregnancy Using SORT” by *Osteopathic Family Physician*. The review is scheduled for publication in 2013.

Congratulations to sub-team #1 (members include Mike Manhart, Marguerite Duane, April Lind, Irit Sinai, Jean Golden-Tevald, Ilene Richmond, Richard Fehring, Geraldine Matus, and Mari Sanchez Wohlebe). Conclusions from this review have been integrated into the CME presentation on FABMs and FACTS members are encouraged to consider how best to use this publication to support FABM and FACTS once published.

Review of educational materials in development: Dr. Duane led the group as they reviewed drafts of a brochure about FACTS, patient education materials and the CME overview presentation on FABMs (also showcased at this FMEC meeting). Subsequent breakout groups critically analyzed different educational materials developed by the executive team to appeal to *faculty, patients, and funders*. The goal was to identify improvements and to reshape the

documents to appeal to specific target audiences. Dissemination strategies for educational materials were reviewed along with potential barriers. Recommendations included:

- ☐ Revising the flow of information, consolidating information, using two separate documents to describe goals for the FACTS group and for describing the FABMs,
- ☐ Including specific action items for the various audiences
- ☐ Packaging FACTS more in terms of why there is a need, what it will accomplish and why that is important.
- ☐ Extending the FABM message beyond family planning to fertility cycle monitoring for health.

All audiences interested in the work of the FACTS collaborative need tangible ways to participate, albeit in different capacities. The three breakout groups will formalize their recommendations in October.

Other news and notes:

- ☐ A new student group with a mission similar to FACTS has formed at the University of Texas Southwestern Medical School and may serve as a model for future student groups to connect with the parent FACTS group. Along with these efforts, it will continue to be helpful to evaluate other initiatives and what successful steps they completed to expand their work.

Looking toward the future/next steps: The wrap up session was a brainstorming and sequencing of “next steps”. Several needs were identified: developing additional resources for patients, educators and clinicians, creating more opportunities for “face to face” time for completion of projects, finding more evidence to support broader uses of FABMs, the need opportunities for increased financial resources, and a look at shared experiences as FACTS continues to grow.

Your role in FACTS? We’ve been making good progress...and we continue to need your commitment and involvement. The redesign of the FMEC website will require FACTS members to “re-register” with the Collaborative. Please take a few minutes to go to www.fmec.net, choose Collaborative Projects, then Fertility Appreciation Collaborative to Teach the Systems. Enter your demographic information, along with a few sentences about yourself and your interests. We’ll be reaching out to you in the next month or so with a reminder. As your year end planning takes place, please consider a generous donation to FACTS through the FMEC. You may make an on-line donation through www.fmec.net or send a check made payable to “FMEC” and writing FACTS in the memo.