

“It means being safe, having power over one’s body”: Black female adolescent experiences with reproductive health counseling in primary care—a qualitative study



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Background

- Racial/ethnic disparities exist in SRH counseling.
- Black AFAB adults perceive pressure from providers and mention impacts of systemic marginalization.
- Reproductive autonomy during contraceptive decision making can improve reproductive health outcomes.
- There is limited research on the needs and experiences of Black adolescents who are assigned female at birth (AFAB) regarding their receipt of sexual and reproductive health (SRH) services.

Our project addressed this gap by:

- Exploring the perspectives and experiences of Black AFAB adolescents residing in North Carolina (NC) receiving SRH services in primary care
- Eliciting Black AFAB adolescent preferences for SRH-related communication with healthcare providers to inform efforts advancing patient-centered SRH care delivery to adolescents.

Methods

- Participants:** Black AFAB adolescents, 13-17 years old (n=20)
- Recruitment:** social media (Facebook/Instagram ads), posters in clinics and partner organizations (i.e., Planned Parenthood South Atlantic, LGBTQ centers) across NC
- Design:** Cross sectional, qualitative study with virtual semi-structured interviews
 - Parent guardian completed virtual consent
 - Adolescent completed screening form
 - \$30 incentive provided
- Analysis:** iterative review of transcripts by study team using deductive and inductive codes and Dedoose
- IRB approval from UNC Chapel Hill

Results

Table 1: Adolescent Demographic Characteristics

Characteristic	N (%)
Age	
13-14	3 (15)
15	5 (22)
16	6 (26)
17	9 (39)
Gender identity^a	
Female	22 (96)
Agender	1 (4)
Race^b	
African American	22 (96)
African American & Native American, Alaska Native, or American Indian	1 (4)
Mother’s Highest Level of Education	
College degree or higher	14 (61)
Some college	3 (13)
High school or GED	2 (8.6)
Less than high school	3 (13)
Never been sexually active	21 (91)
Never been pregnant; given birth	23 (100)
Have used birth control	8 (35)

a- What is your current gender identity? Female; male; neither exclusively male nor female (e.g. genderqueer, non-binary, gender fluid); agender; other prefer not to answer
 b- Which one or more of the following would you say is your race? Check all that apply. Black or African American; White; Asian or Asian American; Native American, Alaska Native, or American Indian; Native Hawaiian or Pacific Islander; Other

Figure 1: Diverse themes from participant interviews- word cloud

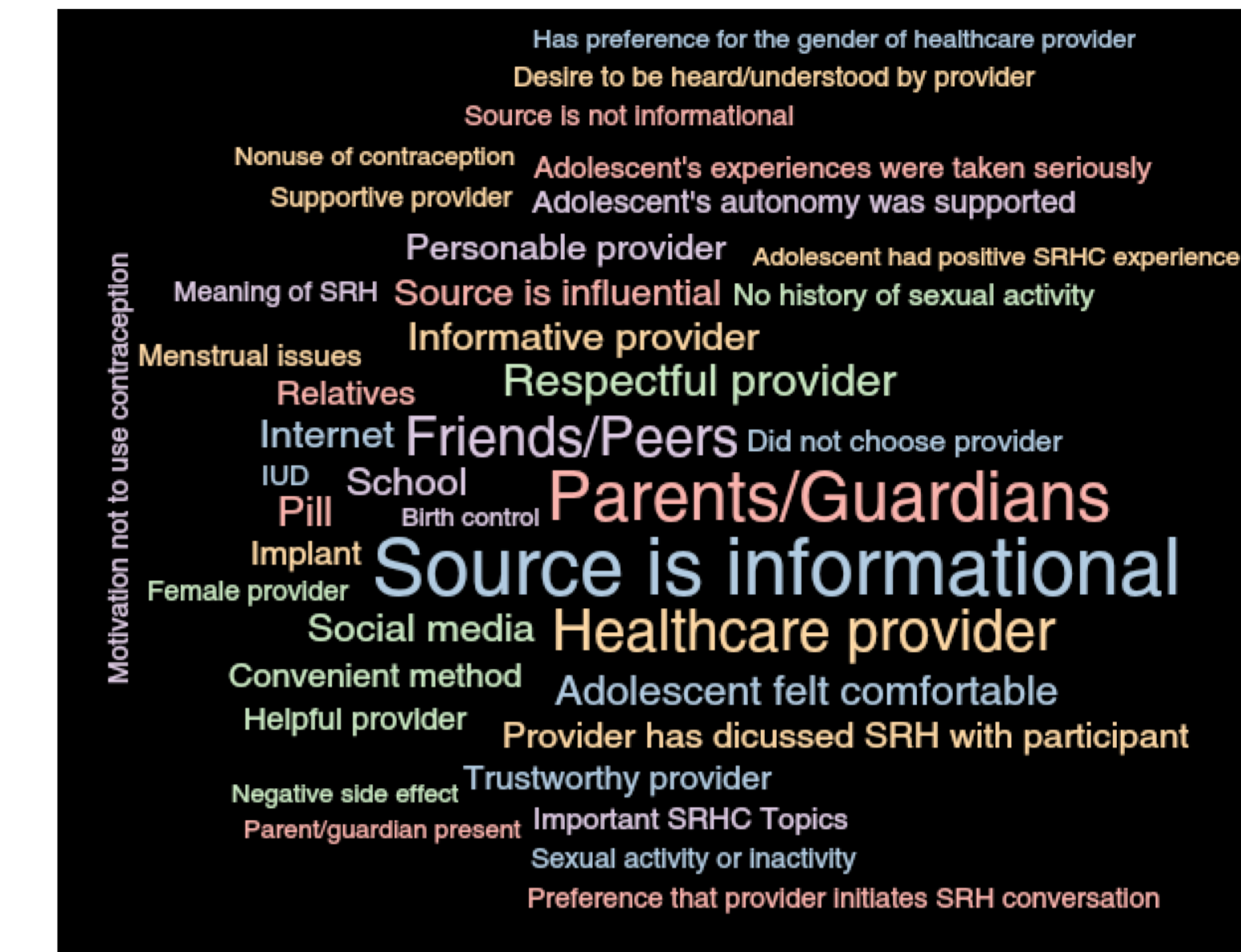


Figure 2: Selected desires and preferences of Black AFAB regarding SRH care



Conclusions

Key Findings

- Positive perceptions of healthcare providers surrounding:
 - Trust, confidentiality, respect
- Room for improvement:
 - Increasing provider’s role as advocate for patient within the patient-parent dynamic
 - Preference for provider initiation of discussion
 - Provider mirroring patient’s sex, race/ethnicity
 - Improvement in clinical spaces
 - Comprehensive SRH care

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