**P U R P O S E**

In South Carolina, 50% of pregnancies are unintended despite improved access to the IUD and the implant. Researchers conducted theory-based formative research to develop a contraceptive choice campaign aimed at increasing LARC uptake by women ages 18-44 years old in Charleston, South Carolina. Researchers developed and tested message concepts and designs.

**M E T H O D S**

Systematic theory-based formative research to develop messages that resonate with women:

- **Phase 1**: 6 focus groups (n=61), 2 hrs., $50 participant incentive
- **Phase 2**: 18 interviews, 30 minutes, $25 participant incentive
- **Phase 3**: Web-based survey (n=547), 15 minutes, Qualtrics

The theory of planned behavior (TPB) and diffusion of innovations theory guided the development of campaign concepts and messages in this study.

**Participant Recruitment**: January – July 2014

- Facebook, email, printed flyer, online participant recruitment
- Charleston-area women aged 18 to 44

**A N A L Y S I S**

Phases 1 and 2: Qualitative Focus Groups & Interviews

- 6 focus groups and 18 interviews audio-recorded, transcribed, coded.
- HyperRESEARCH 3.5.2 qualitative analysis software
- Grounded theory constant comparative method (Glaser & Strauss, 1967)
- Open Coding, axial coding, line by line coding to identify emergent themes (Corbin & Strauss, 2008)
- Qualitative data analysis revealed messages and designs that resonated with women: Emphasizing LARC as the healthy option, highlighting LARC effectiveness, including available and trustworthy characters, and utilizing language of control emerged as themes. Women reported a preference for statistics illustrating effectiveness combined with empowering messages of control over contraceptive decision-making.

Phase 3: Quantitative Web-Based Survey

- 547 completed surveys used to test and confirm efficacy of campaign messages
- Descriptive statistics to analyze participant characteristics and survey items
- Reliability analyses were conducted on the theory of planned behavior (TPB) constructs to assess internal consistency
- Structural equation modeling (SEM) affirmed the TPB’s fit as a predictor of LARC attention and uptake
- Demonstrated attitude and subjective norm as strong indicators of intention to adopt LARC methods

**R E S U L T S**

**Cost**

- “Since it’s free, that changes a lot because I feel like my previous perception was that this was really expensive and I would never do it just for that reason.”

**Source**

- “Besides a source, the statistic doesn’t really mean anything.”

**Statistics/Effectiveness**

- “With the percentages that they have for the IUD and the implant of 99% versus the pill that’s 9.1% effective, that kind of opens your eyes a little bit more, since, must people go for the pill.”

**Characters**

- “This one about the female doctors who were lazy and independent didn’t quite get to me. If they were to do it to their bodies then I’d feel a little more comfortable doing it to my own body.”

**Information-Seeking**

- “I think (I’d) Google is good because people always have smartphones now, or Pads, that you can scan those, so I was interested in that. If that was in a magazine, I would definitely scan it because then you have it in your phone to look up later.”

**Choice**

- “I do like the ‘You have options.’ I think that’s a great slogan. I really do because people do feel like they are limited.”

**C O N C L U S I O N S**

- Findings extend concepts, methods, and theory in the fields of public health and communication, offering practical recommendations to develop an initiative to increase uptake of highly effective contraception in South Carolina.
- Clinicians and practitioners can use results to further develop standard practices, patient education materials, programming, and campaigns related to LARC methods.
- Researchers partnered with a local reproductive health care center to implement further testing of a contraceptive choice campaign targeting LARC use (NIH Grant is currently under review)
- More information is needed to understand PCB vs. actual control over obtaining a LARC method.