

Impact of Personal Experience with Abortion on Obstetric and Gynecology Residents' Intention to Provide Family Planning Following Residency

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Abstract

OBJECTIVE: This study aims to determine if an Obstetrics and Gynecology (Ob/Gyn) resident's personal experience influence practice patterns.

DESIGN: Voluntary online multiple-choice survey sent to all Ob/Gyn residents in the United States

MATERIALS & METHODS: The IRB approved survey was completed by 409 residents with 383 responding to the question on personal history of abortion (PHA). Data regarding demographics, religious affiliation, residency program metrics and training experience was gathered and analyzed. Chi-square test was performed on descriptive statistics and ANOVA testing was performed on continuous variables with $p < 0.05$ considered significant.

RESULTS: Those with a personal history of abortion were older ($p = 0.007$), politically democrat ($p = 0.016$), sought out additional training in family planning ($p = 0.009$), considered it extremely important that their program offer abortion training ($p < 0.001$) and were more likely to intend to provide abortions post-residency ($p < 0.001$).

CONCLUSION: Personal experiences do affect a physician's plans on abortion provision post residency. Programs must remain aware of biases and establish an open environment where residents can provide family planning to the degree that they find comfortable.

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