

## **Explaining the Direction: Notes**

### **EXPLANATION:**

After trying to do signups and encountering new requests to upload a government ID or to pay for a consultation fee before moving on, we had a realization that we were meeting firsthand the struggle that people were facing when it comes to accessing contraception. As a result, in our research we will still answer questions about how, and the effectiveness of contraceptive recommendations, but instead of a focus on the demographic attributes of the IDs, we will conduct a thorough review on the level of recommendation accuracy and the ease of accessibility for different online contraception providers and platforms.

### **METRICS OF EVALUATION:**

- Accessibility
  - o Are websites easy to navigate? Are there barriers to access (insurance, provision of ID, info difficult to locate, etc.)
  - o How many states does the company operate within?
- Privacy
  - o How is the patient's personal information treated after being entered into their system?
- Medical accuracy/responsibility
  - o Are BC providers asking the right questions as to confounding health conditions, and are they making responsible recommendations in kind?
- Quality of information provided
  - o Does the site seek to educate patients on birth control uses and options, or is the sentiment of site content and email communication primarily to market a product?
- Options
  - o Does the BC provider offer varying forms of contraception that would fit a wide range of patients' needs, including EC?
  - o If not, does the provider inform the patient that they may be better suited to other options, or are low-fit products still marketed?

### **FINAL PRODUCTS:**

- Policy review
- Background and lit review
- Provider Scores
  - o Accessibility

- Privacy
- Accuracy
- Quality
- Study Scores
  - Best for access for contraceptive deserts
  - Best for LGBTQ+ people
  - Best overall
  - Worst overall
  - Our recommendation
  - OBGYN recommendation
  - The winning combination

#### IN DEPTH EXPLANATION:

##### Results Produced:

- Do birth control providers have incentive to provide to individuals with or without insurance?
  - Measured through ID set with “howPay” variable. Will analyze frequency (and sentiment?) of emails received by IDs with different answers to this question (coverage/out of pocket).
- Do birth control providers use medical information effectively when recommending birth control options?
  - Measured through medical conditions subset (PCOS, PMDD, HBP, Blood Clots, Reason for consultation). Will analyze whether BC providers ask for important medical info before making recommendations that could potentially be harmful; if they do ask, whether they are recommending safely and accurately; further, are medical questions overly invasive and/or unnecessary
  - OB/GYN interview will be helpful with determining framework/guidelines for necessary vs. Invasive (response received from Carillion, info pending scheduling)
- Do birth control companies' market various products based on the reason provided for consultation?
  - Using “reason for consult” variable, will analyze emails received marketing products (ex. Skincare, etc.); whether received, difference between reasons given and products received/recommended, etc.
- Do birth control companies provide emergency contraceptives in an accessible manner, and does this vary by state?

- Use dry runs to determine whether EC provided by companies and in which states (completed)
- Preliminary results indicate this process may be unnecessarily difficult; information more difficult to locate on some sites than others