



the campaign to prevent unplanned pregnancy

December 2, 2020

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## NEW STUDY REVEALS INCREASED PATIENT SATISFACTION FOR POWER TO DECIDE'S ONE KEY QUESTION®

(Washington, D.C.) — A [study](#) recently published in the journal *Contraception* found significant increases in patient satisfaction when [One Key Question](#)® was integrated in clinic practices. The study entitled *Effects of Clinic-level Implementation of One Key Question on Reproductive Health Counseling and Patient Satisfaction*, is the first published study to evaluate Power to Decide's [One Key Question](#) in comparison with control practices.

One Key Question provides a framework for health care providers and others to routinely ask their patients about pregnancy desires and offers personalized counseling and care based on their response. One Key Question routinely asks patients if they would like to become pregnant in the next year and offers four answer options, *yes, no, unsure, and okay either way*.

“The One Key Question approach focused on patient-centered counseling and shared decision-making for reproductive health, so I was not at all surprised to see patient satisfaction increase,” stated Dr. Debra Stulberg, Chair of Family Medicine at the University of Chicago, and the study's senior author.

The percent of patients who reported they received reproductive counseling also went up after practices implemented One Key Question, although this increase did not reach statistical significance. The study defined reproductive health counseling as the patient reporting that their provider talked with them about pregnancy prevention, preconception health or both.

“In both OB/GYN and primary care, the practices in our study had high rates of providing reproductive health counseling at baseline, but we still saw increases with One Key Question,” continued Stulberg.

A rise in maternal mortality and increased restrictions to access contraception have reinforced the importance of integrating comprehensive family planning services, including contraceptive and preconception counseling as a critical part of routine care. In that vein, the Centers for Disease Control and Prevention (CDC) and the Department of Health and Human Services (HHS) recommend clinicians routinely ask reproductive age patients about their pregnancy desires and offer tailored, patient-centered counseling based on the patient's preferences.

“We are encouraged about the study findings and what it means for reproductive health,” said Colleen Crittenden Murray, Senior Science Officer, DrPH, MPH at Power to Decide. “Notably, results suggest that One Key Question has potential to positively affect reproductive health care and that patients are receptive and satisfied with the counseling provided. For health care and social service providers, this

work highlights the importance of shared decision-making approaches to reproductive health care and offering patient-centered counseling based on patient’s needs and desires.”

Power to Decide recently launched One Key Question Online as an interactive digital training suite that clinical and non-clinical providers can access anywhere, anytime. The One Key Question Certification Training focuses on starting the conversation with patients about pregnancy desires. Providers can also elect to continue with Preconception and Contraception Pathways to Care Training. These trainings offer providers key information and practical strategies to integrate One Key Question into their practice and address the patient experience. One Key Question focuses on equally supporting those who want to get pregnant, those who do not and those who are ambivalent.

To learn more about One Key Question Online and to take the training, click [here](#).

**Power to Decide** is a private, non-partisan, non-profit organization that works to ensure all people—no matter who they are, where they live or what their economic status might be—have the power to decide if, when and under what circumstances to get pregnant and have a child. Please visit us at [www.PowerToDecide.org](http://www.PowerToDecide.org) or follow us on Facebook and Twitter.