



## What You Don't Know Can Hurt You: Patient and Provider Perspectives on Postpartum Contraceptive Care in Illinois Catholic Hospitals

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Zarina J. Wong, Lee Thompson, Angel Boulware, Jessica Chen MD, Lori Freedman PhD, Debra Stulberg MD, Lee Hasselbacher JD

### INTRODUCTION

Catholic Religious and Ethical Directives restrict access to contraception, yet offering contraception during a delivery hospitalization facilitates birth spacing and is a convenient option for patients during the postpartum period. Published in the journal *Contraception*, Ci3 researchers conducted a study exploring patient and provider experiences with hospital transparency around postpartum contraceptive care in Illinois Catholic hospitals. Researchers interviewed 44 participants with experience in Illinois Catholic hospitals: 21 patients, and 23 providers, including clinicians, nurses, doulas, and postpartum program staff.

### FINDINGS

Religious restrictions on postpartum contraception restrict access, cause unnecessary delays in care, and lead to misdiagnosis and marginalization of contraceptive care.

- Many patients knew they were delivering in a Catholic hospital; however, few were aware that Catholic policies limited their healthcare options.
- Patients expressed a desire for hospitals to be transparent, even “very vocal,” about religious restrictions and described consequences of restrictions on patient care.
- Patients lacked information to make contraceptive decisions, experienced limits on or delays in care, and some lost continuity with trusted providers.
- Consequences for providers included moral distress in trying to provide care using workarounds such as documenting false medical diagnoses while balancing career repercussions.

### IMPLICATIONS

Our research suggests that to protect patient autonomy, especially during the vulnerable postpartum period, Catholic hospitals should increase transparency regarding limitations on reproductive health care. Insurers and policy-makers should guarantee that patients have the option to receive care at hospitals without these limitations and facilitate public education about what to expect at Catholic facilities.

Read the full article, [here](#).

For more information, please contact **Lee Hasselbacher** at [lhasselbacher@bsd.uchicago.edu](mailto:lhasselbacher@bsd.uchicago.edu)

