PREGNANCY OPTIONS COUNSELING APPROACH

- 1. **Affirm** the complexity in reproductive decision-making and the many ways to build and support families with dignity.
- 2. **Create** an open, inclusive, non-judgmental environment where the patient feels safe to ask questions, understands your willingness to discuss all options, and trusts you for accurate information and care.
- 3. **Validate and normalize** multiple, complex, and varied feelings around pregnancy, like certainty, shame, disappointment, shock, guilt, and regret. Some patients may come to a decision quickly, others may not.
- 4. **Actively listen** to the patient. Offer silence for the patient to process and share. Ask open-ended questions. Be open to, interested in, and curious about the patient's process and feelings. Learn from the patient.
- 5. Clarify the facts the timing of the pregnancy, option to take their time before deciding, the accessibility of resources.
- 6. **Reassure** the patient that you will support them no matter what decision they make. Offer information and referrals.

OTHER TIPS

- 1. Frequently reflect on your biases, assumptions, and values. What scenarios are hard for you and why? Do you want patients to make certain decisions? Why and for whom do you feel that way? Work to mitigate those biases when you provide options counseling.
- 2. The patient has "the answer," not you. Only the patient knows the right decision for themselves and their family.
- 3. Seek to understand how the patient is doing, their feelings and beliefs, using **open-ended questions**: "what thoughts or feelings are coming up for you right now?" Keep in mind, not all patients will feel comfortable sharing their true feelings.
- 4. **Affirm** that the patient's choice not to be a parent now is not the same as choosing not to be a parent in the future.
- 5. Refer to the **pregnancy**, not the baby.
- 6. Ask about other **supports** in the patient's life.
- 7. Express your **gratitude** to the patient for sharing their feelings and coming to you for support.
- 8. The patient may not come to a decision at the end of the visit or be ready to discuss options at this time. Offer written information on all options for them to read on their own. Offer to schedule a timely **follow-up** appointment or phone call.

COUNSELING UNCERTAIN OR AMBIVALENT PATIENTS

- 1. Validate and normalize the patient's feelings.
- 2. Ask **open-ended questions in a non-directive manner** to help the patient explore their feelings and preferences (i.e. "can you say more about what you are feeling?").
- 3. Some patients may find it helpful to consider **their personal pros and cons** of each choice, both in the short and long-term.
- 4. **State restrictions** on abortion will affect how much time the patient has to make a decision about whether or not to get abortion care in-state and the types of abortion options available.
- 5. If the patient comes to a decision, reassure and encourage them to **trust and respect themselves** and their decision.
- 6. **If still uncertain**, consider encouraging your patient to do the following exercise over the course of several days before making a follow-up appointment:
- Spend one day writing a list of all positive and negative feelings about keeping the pregnancy.
- Spend the day with ambivalent feelings, not making any decisions.
- Spend one day writing a list of all positive and negative feelings about not keeping the pregnancy. (Often, one recurrent theme or feeling will emerge to help the patient to make a decision.)

