Interviewer: (0:18) Today is September 18 at 6:12 p.m. This is focus group 3007. Before we get started, I want us to help our minds think creatively and openly, and because we're not sharing our names or personal information, I just have one short question to kick us off and get to know each other a little bit. That is, what animal do you most relate to and why did you select that animal? I'm going to say an owl because they are quiet and observant and they like the dark. Sam, do you want to kick us off?

Sam: Yes, I'll go. I always thought it would be really cool to be a pelican, which I know wasn't exactly the question, but I think it would be really cool because they fly really close to the ocean, and it looks like they can almost surf the wave, flying around it.

Interviewer: (1:20) What about you, Ava?

Ava: I think I would be closest to a fox because they're super cute, but also, they have a little bit of a devious (1:30 unclear) to them.

Interviewer: (1:33) Lily?

Lily: I feel like today, it would be nice to be a giraffe. They're really chill and kind and slow lumbering, but they also have those long necks and they can see everything.

Interviewer: (1:48) Ellie?

Ellie: I'd like to be a house cat. I think it'd be great to just lounge around and eat food.

Interviewer: (1:57) What about you, Olivia?

Olivia: I think I'd go for a cheetah, the outdoor version of a house cat a lot of laziness, but then the occasional bursts of activity and productivity.

Interviewer: (2:10) Ivy?

Ivy: I would be a dolphin because I like to go swimming all the time and also using echolocation.

Interviewer: (2:22) We are very happy you are all a part of our conversation today. For the rest of the discussion, we're going to be talking about menstrual cycles. People sometimes use different words when talking about the menstrual cycle, or the days of the month when they are bleeding. What are some of the words that you use? Feel free to raise a hand. Sam?

Sam: I just use the word period.

Interviewer: (2:49) Ava?

Ava: I just use period.

Interviewer: (2:52) Lily?

Lily: Same, A lot of heads nodding. [*referring to others agreeing*}

Interviewer: (2:55) Anything else?

Ava: Sometimes I will say, "That time of the month."

Interviewer: (3:02) What about just other things that people say. It might not be what you say, but things that you're aware of. Anything out there?

Lily: People use the term PMS. Like I'm PMSing. That's another thing.

Olivia: People decades ago said you were on the rag, maybe when I was 12.

Interviewer: (3:32) Thanks, Oliva.

Sam: Yes, and also, I remember that one , and Aunt Flo.

Interviewer: (3:50) How do people usually keep track of their menstrual cycles? Either something that you do or something you're aware of people doing. Ivy?

Ivy: I use an app. You can use your Help app on your iPhone or a lot of people use other apps.

Interviewer: (4:08) Others? Sam?

Sam: I just use the calendar.

Interviewer: (4:13) Calendar?

Sam: Yes.

Ava: I don't track it. It's so irregular that I can't really track it.

Interviewer: (4:21) We're going to get into that. Lily?

Lily: I'm really bad at keeping track of things. I can't do calendars or apps or anything like that to save my life. To be honest, I always get really bad diarrhea the day before and my stomach bloats really bad, and then I know that I'm going to start my period.

Interviewer: (4:42) Anything else you do to keep track?

Ellie: Just use an app.

Interviewer: (4:47) Yes, you too. So that we have the same understanding for the rest of the discussion, when I say "menstrual cycle," I'm talking about the monthly cycles that people who menstruate have, and this includes the days of the month when you are bleeding, the time just before you bleed, the time just after bleeding, and other times in between. Does that make sense? The whole cycle.

(No audible response.)

Interviewer: (5:15) Now, I would like you to think about how your own menstrual cycles have changed while using contraception. Both changes that you have liked and changes you have not liked. First, can you please tell me any ways that contraception has changed how often you have bleeding? How often? Feel free to raise a hand. Yes, Sam?

Sam: Before, I used to be really irregular, before using contraceptives, and then since using it, as far as how often, I think that it's very predictable.

Interviewer: (5:56) More often or less often?

Sam: Sorry, with contraception, more often.

Interviewer: (6:03) Others?

Olivia: Do you want all of our lifetime contraceptive experiences? I've had two different times where I've

had continuous birth controls, which reduced my period frequency, but I controlled that. I typically just did every three months. Then I've had IUDs, which have drastically reduced the amount of bleeding, but also unpredictably.

Interviewer: (6:37) What comes to mind for others? It can be current or past. Yes, Lily?

Lily: For me, since I've been on this current one, I've noticed that I bleed less, but for a longer period of time. It's more of just long spotting, which wasn't what I used to have.

Interviewer: (7:00) Ivy, did you have thoughts?

Ivy: Before contraception, the period days went from four or five, and then after contraception, it was three. Reduced the period days of bleeding, and, which I'm sure we'll get into, reduced cramping and pain throughout the entire cycle.

Interviewer: (7:27) Any final thoughts on how often? Ellie, did you want to add your---

Ellie: I think it's less often, but in the beginning, when I went on Nexplanon, I was bleeding for a longer period, in a row, but it was really strange, because it was just spotting. I feel like it changed the way I was bleeding. I don't want to say I'm bleeding more and I'm not, but I am bleeding for longer days. I also go a month or two or three without any bleeding, so it's all over the place.

Interviewer: (8:05) We will get into all of these things. Now, I want you to think about the ways that contraception has changed how regularly you have bleeding. Yes, how predictable. Ava, you talked a bit about this before. Do you want to restate what you said?

Ava: For me, it's not predictable at all. I'll get those signs, like if I get a breakout, that's a sign, or I'll also get stomach issues. But as far as consistent amount of time between, it's not really.

Interviewer: (8:46) What do others think about how regular?

Olivia: It's really hard to say because once I've been on an IUD, the spotting is so light and minimal, that I'm not even noticing how regular it is. For a while, maybe sometimes it has been regular, and predictable, but then I'd be like, "Wait, I haven't seen spotting and it has been two months, at least." That has happened before.

Interviewer: (9:25) Sam?

Sam: Yes, I was trying to think back. Before going on contraceptive, I would go up to six months without a period. Going on the contraceptive, it would just put it exactly where it was supposed to be. Does that answer your question?

Interviewer: (9:53) Other thoughts on how regular? Ellie?

Ellie: Mine is very irregular now. Before I had it more or less every month, like on timeish , give or take, a couple days or a week. It was very consistent, like five days. This many I was actually bleeding, this was spotting. Now, I don't bother tracking it. I tracked when I was in a different study, but now that that's over, I don't track at all. Because it's just, I don't know, fake, I feel like. It's very irregular.

Interviewer: (10:29) What about any ways that contraception has changed how long you have bleeding? Ivy?

Ivy: Mine is shortened.

Interviewer: (10:43) You mentioned that, yes. It was five to three, shortened. Others and how long? Yes, Lily?

Lily: Mine has gotten much longer. I really used to bleed heavy for a short period of time. Now, it's very light and spotting for five to eight days, which is a lot longer. It used to be more like three to six, and now it's up to eight, probably.

Interviewer: (11:09) Others? Sam?

Sam: I think for me it shortened it. Mine used to be bleeding for longer, but maybe not as heavy throughout that period of time. Now, it's very heavy for just a couple days.

Interviewer: (11:29) Ava, what about you?

Ava: Typically, I think it's shortened it, however, there are random periods where… This last one was the same or longer.

Interviewer: (11:46) Anyone else, to add?

(No audible response.)

Interviewer: (11:56) Now, when you have bleeding, how has contraception changed how much you bleed during those days? We've already heard a little bit about that, but yes, how much you're bleeding. Ivy?

Ivy: I can tell how much I'm bleeding by the type of tampon I use and I will use a heavy tampon, for day one, let's say, and then as it moves down, as it progresses per day, I'll use a lighter flow tampon. For me, day one of three is super heavy. Day two is lighter, I'll use a regular size tampon, and then regular for day three, or sometimes just a light pad. That's how I gauge it.

Interviewer: (12:44) How has that changed---

Ivy: Since contraception?

Interviewer: (12:47) Since, yes.

Ivy: Before when I was on five days, it was more heavy and then lighter, but most days I was using just a regular tampon and fine, and I didn't have to use an ultra or a super, or those kinds of names that tampons use [*laughter*].

Respondent: Or like "mega" [*others agree, laugh*]

Interviewer: (13:11) What about you, Olivia?

Olivia: Mine is definitely lighter.

Interviewer: (13:15) Lighter?

Olivia: Yes.

Interviewer: (13:18) Ellie?

Ellie: When I spot it's a lot lighter. Sometimes I'm like, "I don't know if I should count this or not," When you wipe it, I'm like "oh there is a little something there, I guess". Then other times, when I have an

actual flow, I feel like it is heavier, but I didn't have light periods to begin with, so I feel like it never went more to than a medium flow anyways.

Interviewer: (13:38) What about you, Lily?

Lily: Previously, I would use, I don't know what they're called, the winged pads that are really heavy duty for the entire time of my period. Now, I will use one small pad for one day, and then pantyliners for the rest of the time. That's about what I do, just a lot more manageable .

Interviewer: (14:06) Any other thoughts over here? Ava?

Ava: I think for me, it has made the first day heavier, but then the days after that were lighter.

Interviewer: (14:17) Sam?

Sam: Yes, I have recently gotten back on birth control in the last year and it's the same birth control that I used a few years ago, but it definitely changed this time and the type of… What was it? The amount of bleeding?

Interviewer: (14:42) Yes.

Sam: Yes, the amount of bleeding is really heavy and then I had an experience where I actually passed my uterus lining intact. That's really different.

Interviewer: (15:00) That's a great segue because my next question was about how your bleeding looks. Has contraception changed what your blood looks like?

Sam: Yes, it's very interesting. Prior to the whole thing passing, it had been passing in chunks, like a chunk, like with a normal period Then with the period that I had, the whole thing came out fully intact and it was very interesting because it wasn't bloody, like a period, like you would think. It just was really, really fleshy. Yes, it happened twice in the last year.

Interviewer: (15:56) Others?

Ava: I haven't noticed any difference.

Interviewer: (16:04) Lily?

Lily: For mine, maybe that first day when it's heavier, it's a bit more of the bright red, but basically, the rest of the time, it's light colored. Small bits of the dark, where the spotting color is dark brownish, that color. It's almost always like that. It's rarely vibrant. One part of one day it will be a little bit vibrant. The rest of it's very dark.

Interviewer: (16:35) What about over here?

Ellie: Yes, the spotting I have is also just a brown, like oxidized. I don't know. I think it's just because maybe it takes so long to get out. I don't really know. It comes out a little bit each day and I'm like, "What the heck?" Other than that, I think my period would actually have a—like on the balance, it's been the same. [*participants discuss Sam's decidual cast in a side conversation, confirming what Sam said above*]

Interviewer: (17:03) Olivia?

Olivia: Definitely lighter, like brownish, lightish-brownish. I would say mauve, [*laughter*] but something

that's not as red-red. Also, I have had an occasional blobs that are… Weird blobs. It's, kind of, a moving on, sort of, situation [*laughter*] We don't need to know about that.

Interviewer: (17:32) Ivy?

Ivy: I would say mine were more on the brown/red side, than a bright red.

Interviewer: (17:40) Any changes that occurred that aren't blood that was involved? Anyone?

Lily: In my past, I've struggled with yeast infections. That doesn't happen anymore. I've noticed that since I've been taking it, I have almost no discharge throughout the rest of the month.

Interviewer: (18:05) Anyone else want to add anything?

Ellie: Now that you say that, I think I have less discharge overall too.

Ava: Yes.

Interviewer: (18:17) You do as well, Ava?

Ava: Yes.

Interviewer: (18:21) Now can you tell me how contraception has changed your menstrual cramps? Ivy?

Ivy: Mine has reduced significantly.

Interviewer: (18:32) Olivia?

Olivia: When I have spotting, it's so infrequent that I almost… I think I do sometimes have cramps, but it's like a retroactive, like three days later, I'm like, "That's what that was." It's not anywhere near the level of cramping I had with periods without it.

Interviewer: (18:54) What about you, Ellie? How has it changed cramping?

Ellie: I didn't really have cramps to be honest. I still don't.

Interviewer: (19:02) Lily?

Lily: I used to have really bad cramps, which is a part of why I chose to go on contraception, because it would make me sick for a day or two. Now, with it, I have almost no cramps. I will, maybe one day, in the morning, will have discomfort and then I'm like, "Oh, yes, that's cramps." It's not as frequent anymore and I very rarely get them.

Interviewer: (19:33) Ava?

Ava: I got pretty bad cramps the first day, but I don't know if that's… I've been on birth control for so long, so I don't know if that's due to the birth control or age. I don't know. I still get bad cramps the first day.

Interviewer: (19:50) Then, Sam?

Sam: Yes, I would say the cramps actually got worse with the passing of the cast. That was the most, well, higher.

Interviewer: (20:16) Now, while you've been sharing your experiences, [note takers names]have been

noting them on cards that they're going to put on the wall. Then we will review and talk about them.

Interviewer: (20:48) For how often, we heard, less often now, but at first, longer bleeding. We have reduced days of bleeding, longer bleeding time, more often, less often, reduced, but unpredictably. For how regular, we had, don't track, but irregular, unpredictable, irregular, symptoms before it starts. stomach issues, hard to say due to minimal bleeding, and regular. When we talked about how much blood, heavier and posterior lining, starts off heavy, lighter spotting, a bit heavier, lighter, and first day heavier. Then when we asked about menstrual cramps, reduced cramping, milder cramping, no cramping before or after contraception, infrequent cramps, bad cramps on first day, and then, worsening. Then for how long, shorter overall, but sometimes longer, shorter, but heavier, a couple of days, shortened from five to three days, and has gotten much longer. Then when we talked about how blood looks, less or no discharge, more brown/red, occasional globs, more chunky, looks lighter, spotting looks brown, intact uterine lining, and then first day looks more bright red, then darker. Take a moment to take this in and, what did we miss, or what else would you want to add about any of these sections, or any other ways?

Sam: This is just an observation . I feel like this is so interesting to me because it's the full spectrum from just the small sampling of us all. It's shorter, it's longer, it's heavier, it's lighter. Sorry, this is probably why you're doing the study. I'm like… [laughter].

Interviewer: (23:23) Yes, anything that you would add to this? Olivia?

Olivia: Maybe this is because I'm old, but I feel like earlier in your life, where you're working to not get pregnant, you care a lot about these details, you're noticing them more. Once I got an IUD, I was like, "Guess what I'm not? Pregnant, 99.9 percent chance." I just stopped noticing it, which I would say, maybe that makes me a bad reporter , I don't know, but yes.

Interviewer: (24:00) Anything else to add up there?

(No audible response.)

Interviewer: (24:05) Now, I want to ask how these changes to your menstrual cycle have made your body feel? Yes, Lily?

Lily: Because the cramps are basically almost completely gone, way better, and then I also notice that I have shorter times of an upset stomach or diarrhea, and all of that part of it. All of that is much better. One thing that has bothered me, I don't know if this quite applies to the question, but because I have a longer time with spotting, I just feel a little bit grosser. With the spotting, I just always have to wear pantyliners and stuff and take showers a lot. That part, and it smells a little bit worse. I don't know if it's the dark spotting, or something, so I'm constantly changing them more and showering more.

Interviewer: (25:05) Others on how have the changes made your body feel?

Ellie: The increased spotting, it does feel like, I don't know, it does smell. It's not bad, but it's just that period smell, that you're just like, "This is not what I want to do right now." Also, I don't PMS anymore. For me, I'll consistently, maybe a week before my period, I used to, I don't know, have crappy days or something, consistently, and that's how I'd always know. I'd be like, "I'm definitely getting my period soon," because I… I don't know if I'd act irrationally, but honestly, I was crying over things that I wouldn't normally cry, but now that I've been on the contraceptive, I don't PMS, so I don't go through that emotional state. I think that has been something that I don't even think about, but when I do think

about it, I'm like, "Life is better," because I don't.

Interviewer: (25:59) Others? Sam?

Sam: I think being on it, I don't feel as good. I feel like I said, general bloating, and a little extra layer of, for lack of better terms, just fattiness. I've noticed, when I have been off of it, all that just sheds away, not literally, not in a period , but it's just very quick to just, I feel like I get back to my body.

Interviewer: (26:33) Anything around energy or sleep? Any other changes that---

Lily: I thought of another one---

Interviewer: (26:41) Yes, Lily.

Lily: I used to become hungry and would eat excessively my entire period, and now I only have an increased appetite like one day.

Interviewer: (26:56) Other thoughts on how your body feels?

(No audible response.)

Interviewer: (27:08) How about how these changes have impacted your day-to-day life? Good things? Bad things? Yes, Ivy?

Ivy: I will say sometimes I will have irregular spotting, and for my sports, that's particularly annoying, because if I'm wearing a white uniform, I had that happen last month, and that's not good, especially if someone else notices. I would say contraception has helped my period, because I don't experience that, but when I do, it's just an inconvenience.

Interviewer: (27:54) Other ways it has impacted your life? Olivia, did you want to add---

Olivia: I feel like it hasn't changed a lot about how I feel in my body, generally. It makes it a little harder to know, really, what's going on, and maybe I'm thinking about it more because I'm going towards menopause. There was a period of time where I was like, "Oh," I could still know I was… I can sometimes feel eggs when I would ovulate, which is weird, but for a long time, even with the IUD, I was still noticing that sometimes. Then with the irregularity of it, it's like, "What is going on here?" I'm not sure. Is this the IUD? Am I still having regular cycles? I don't actually know and I don't care that much. Functionally, it doesn't matter as much.

Interviewer: (29:04) Other thoughts on how changes have impacted your life? Things you might avoid doing. Yes, Lily?

Lily: Overall, I'd say it has improved mine because I don't have the cramps, I'm able to function better, sleep better.

Interviewer: (29:19) Ava?

Ava: For me, I think it's more so just annoying, an inconvenience, but I would just get used to it, but when it comes to things like wearing cute underwear, or wearing a skirt, or wanting to have sex, it's kind of an inconvenience.

Interviewer: (29:47) Sam?

Sam: I think, thinking about the history of being on it and then me and my partner did family planning,

had kids and then going back on birth control. Going back on birth control really was about because my periods would become so… They were heavy before, but then they were really heavy after having kids, and it was the idea of going on the contraceptive to actually skip a period. Like, if we were going to go on a vacation, and I didn't want to be so inconvenienced by it, that has been a positive thing for me to be able to say, "I just don't want to deal with this."

Interviewer: (30:36) Ellie, did you have anything to add?

Ellie: Yes, it's inconveniencing because I do have spotting more than I did before, but I also go through longer stretches of time between bleeding. I think also before, because I had regular cycles, it was a thing I was planning for. I'd start using pads. Then I was like, "I don't want to get bloody," but then I just waste clean pads because it wouldn't come. Now that it's irregular, I don't really care and I just feel like if it comes, it comes. That part of it is a relief because I'm not stressing myself out preemptively.

Interviewer: (31:20) Once again, Maddy and Leah have been noting your answers on cards, so they're going to add them to our wall here.

(31:28-31:46 Silence.)

Interviewer: (31:46) We talked about how your body feels, noticed smell, bloating, steadier emotions, feels gross, needs to change products or shower more, feeling better---

Interviewer 2: (32:03) Better.

Interviewer: (32:04) Better, and hungry one day, and decreased appetite. Then impact on life, more convenient to skip a period for travel, relief because of less period stress, inconvenient because more spotting, more anxious for sex, wearing cute underwear or skirts, improved overall sleeping because less cramps, makes it harder to know what's going on with your body, ovulation, et cetera, and irregular spotting, it's annoying for playing sports, especially with white uniforms. Anything to add to that? How your body feels or the impact on life?

Lily: We haven't quite reached the topic of too much of our sex life involved. One thing that has changed, in some ways, it's nicer because obviously, you're on contraception, so it's just easier to not worry about it because I have one partner. On the other hand, I've noticed that it makes me dryer, so then it can make sex more uncomfortable, a little bit more difficult, and I don't orgasm as easily. Then, when I talk about impact on life, it can be a bummer sometimes.

Interviewer: (33:36) Anything else about relationships or sex or anything like that that you want to share?

(No audible response.)

Interviewer: (33:47) Other things around impact on life?

Ava: Yes--

Interviewer: (33:51) Yes, Ava?

Ava: I feel like my libido is probably impacted by birth control. It's, like, less.

Interviewer: (33:58) Is it less?

Ava: Yes.

Interviewer: (34:02) Sam?

Sam: I would say that, too. I hadn't really thought about it. Yes, I would say my libido. I'm also on spironolactone, which I knew that was also gonna lower the libido, but I don't know how those interact with each other, or if one is higher than the other, but I would also say that I'm dryer, in sex mostly.

Interviewer: (34:34) We'll leave this up here and I'll come back to them. We're going to do another activity now to show us more about your experiences with menstrual cramping while on contraception. We've got pictures of the bodies, front and back, and we're going to give you stickers and you're going to place the stickers anywhere on the body where you've experienced menstrual cramping or menstrual pain. We have different color stickers for the type of contraception. This is contraception that you're either using now, or have used in the past. First, let's have the people who are using pills, or have used them in the past grab a yellow sticker, as many yellow stickers as you'd like, and place them anywhere on the body where you have experienced menstrual cramping.

Respondent: What if it's a few? How many stickers do you want---

Interviewer: (35:38) You can use as many stickers as you want, but we will review and talk about it. You'll be able to add your thoughts. Then, while pill users are putting stickers up, anyone using injectables, we have green stickers, in the past or currently, for injectables. For implants, we have blue. For a non-hormonal or copper IUD, purple. Then for a hormonal IUD, red. Then any other hormonal method, orange. That would be like a NuvaRing, orange. Then, lastly, we have one more sticker that is the gold star. You're going to just have one. I want you to take a gold star and place that on the area on the body where the cramping bothers you the most. *[Participant movement and chuckles while taking gold stars]*

Respondent: This is just for while you're on contraception?

Interviewer: (37:56) Yes. Everybody get all their stickers up?

(No audible response.)

Interviewer: (38:12) Then, let's go back to our seats. I see some stickers on this part of the body. What are some words that you would use to describe this?

[Participants need clarity on question being asked.]

Interviewer: (38:24) Sorry, I wasn't clear. The area of the body. What is this?

Respondent: The actual---

Respondent: Your breasts?

Interviewer: (38:31) Right. Now, someone who put stickers there, tell me about your experience. Sam, what---

Sam: Yes, I put stickers there. Yes, I noticed with the contraceptive, my breasts tenderness around my period is a bit more.

Interviewer: (38:52) Ava?

Ava: Yes, they get tender, but they become fuller.

Interviewer: (39:01) Anyone else? Yes, Lily?

Lily: The same. They feel tender and bigger and heavier. They just feel heavy and uncomfortable.

Respondent: Do you put them up like this?

Lily: I do, I do. I wake up in the morning and do that.

Interviewer: (39:25) What about this area of the body? This cluster here. What are some words that we would use to describe that part of the body?

Respondent: Your uterus area.

Respondent: Lower abdomen.

Interviewer: (39:39) Abdomen. Lower abdomen. Anything---

Respondent: Yes, your vaginal area.

Interviewer: (39:45) Your stomach, yes. Lots of stickers here. Someone who put a sticker there, want to tell me about your experience with cramping there? What was that like? Olivia?

Olivia: It felt like a fist in there. I don't know, that's a weird description.

Interviewer: (40:07) Others?

Ivy: Tension.

Interviewer: (40:11) Ivy, tension. Other experiences with cramping here? What does it feel like?

Lily: Like a stabbing pain.

Interviewer: (40:25) Yes, Ivy?

Ivy: Nausea, sort of the whole body.

Interviewer: (40:35) Now, for someone who put a gold star here, why does that bother you the most? Yes, Ivy?

Ivy: It bothers me the most because I feel like it impacts all of my functioning more so than my breasts. Walking or running, any activity is decreased. It's this thing that won't stop.

Ava: You can feel it when you're standing, sitting, laying. It's like the same no matter what.

Interviewer: Yeah, it's always there.

Olivia: Yeah, I put a star there because when it is cramping, that is where it is most intense, and can be most uncomfortable.

Interviewer: (41:24) Any other thoughts on this area?

(No audible response.)

Interviewer: (41:30) What about here? Yes, Sam? Tell us about your experience… First tell me, what is this part of the body?

Sam: That's the vulva, vagina area, that bottom part. It's interesting, listening, I really don't experience a

lot of cramping in the area that most of these stars were left in, the abdomen area, but I almost always have mostly a throbbing experience and it's just really heightened in the whole bottom area, that canal. Yes, from the experience of passing the cast. It was like totally…I mean I was having contractions..

Interviewer: (42:34) Then, for the gold star, why does this bother you the most?

Sam: It occupies my total brain. I can't not think about it. It totally affects my quality of life.

Interviewer: (42:50) What about here? What is this part of the body?

Ellie: My cramps are really bad, the inflammation, and it will go into my legs.

Interviewer: (43:02) What would you call this?

Ellie: Oh, my legs. Thighs.

Interviewer: (43:04) Thighs?

Ellie: Mm-hmm (affirmative).

Interviewer: (43:09) Anything else you want to say about that? It feels like inflammation, you said?

Ellie: Yes, I don't get cramps as bad now that I'm on it, but whenever I do get bad cramps, it does just feel like basically everything from here down is cramping and tight with tension.

Interviewer: (43:28) Moving on to the back of the body, what are some words you would use to describe this part of the body?

Respondent: Lower back.

Interviewer: (43:35) Lower back, yes. Someone want to tell me about their experience with cramps or pain in the lower back? Yes, Ava?

Ava: For me, it feels really sore. I have back pain, usually, but on my period, I just feel like after a work out or something.

Interviewer: (44:00) Anyone else?

Lily: I have an old back injury so I don't know how much this affects it, but when my cramps are bad and that area is inflamed, it puts pressure on my back injury, so my back hurts. It radiates to the rest of that whole area and makes me think different [*unsure last word*].

Interviewer: (44:19) What about here? Is this lower back or is this something else?

Lily: Butt. *[chuckles]*

Interviewer: (44:25) Yes, tell us about your experience with cramps there.

Lily: I don't know if it's because my cramps give me diarrhea. I don't know if it's that, but I swear sometimes my butt is just sore.

Interviewer: (44:39) Then here? Yes, Ava?

Ava: Yeah, I put that on the upper thigh. When I get back pain I feel like it radiates downward to the upper thigh area.

Interviewer: (44:55) How do you manage your menstrual cramping? Yes, Ivy?

Ivy: I normally take an over the counter acetaminophen and that will kick in in about 45 minutes to an hour, so the first hour that's not being treated by medication is pretty painful. It was way more painful on a scale of 10, being a nine, and debilitating, before contraception. Whereas now, with contraception, the first hour is maybe a three.

Interviewer: (45:31) Others? How do you manage menstrual cramping?

Ava: Tylenol.

Interviewer: (45:37) Tylenol, yes, Ava. Others? Sam?

Sam: Yes, I would use a heating element, pad thing, and ibuprofen, and sometimes the ibuprofen will be very effective.

Olivia: So far, ibuprofen is my solution to most life problems. Whether I'm getting a headache or I'm getting cramps, I don't mess around with it. I just try to take that as soon as possible and it usually works.

Interviewer: (46:08) Anything that you don't… Yes, go ahead, Lily.

Lily: I have another one. I feel like I'm being so personal. If it's really, really bad, there are still a few times where I get severe cramps that are really debilitating, I'll make myself orgasm.

Interviewer: (46:23) Yes?

Lily: It helps a lot. I read on Google one time and it does work.

Interviewer: (46:27) Yes?

Olivia: It says it helps for headaches.

Interviewer: (46:34) Anything that you avoid doing because of cramping?

Ava: Moving.

Interviewer: (46:46) Yes, Ivy?

Ivy: Anything that requires a lot of mental focus. If I'm about to take an exam, school, and it's online, I'll try to put it off so that I'm more mentally focused, like when I'm off my period.

Interviewer: (47:10) We talked about this a bit over here already, but have you had less or reduced cramping and pain while using contraception? Anyone? Yes, Olivia, can you tell us about that, just generally?

Olivia: Just massively reduced. I find the IUD fairly magical because it really is I have some cramping and some bleeding or spotting, but it's on average very minimal and not nearly as much.

Interviewer: (47:45) Lily, did you have your hand---

Lily: Yes, I still have the occasional cramps, but it's a massive improvement from being out for a couple days every month to every other month having cramps for a portion of the day.

Interviewer: (48:03) Ellie, did you want to add anything?

Ellie: I used to have a little bit of cramps every once in a long while, before I had a contraceptive. Now that I'm on it, haven't had like any at all but I don't know if that counts as reduced. I've only had it for a year, so it's not a big enough timeframe to compare it to before this.

Interviewer: (48:27) Yes, Sam?

Sam: It's interesting to me because for me, it's this mixed bag of, if I'm using a contraceptive to potentially think about skipping a period, then it's obviously eliminating it entirely. That's great, but then so far my experience in the last year has been the opposite side of things and having my period with it is extremely worse. It's a mixed bag of, is it better or worse?

Interviewer: (49:02) Now, for the next few questions, looking back at all the ways that contraception has changed your menstrual cycle that we talked about here on the wall, and all the places that you've had menstrual cramping over here, out of all the ways that we've talked about how this has impacted your life, and such, what information did you get from a clinic or a healthcare provider about changes to your menstrual cycle, before starting the contraception that you're using? Lily?

Lily: I got a pretty thorough rundown with everything, but I also started in a birth control study. They were excessively thorough about it, so that was very helpful. I very much wasn't surprised by any of the changes that I had.

Interviewer: (49:54) Others?

Olivia: When I started the birth control pill years ago, I just somehow figured out that you… Some provider at some point mentioned you could take this continuously, you don't have to have a period, but it was never really explained to me more than that. Then, the next time I went back, I was like, "That's how I'm doing it now." I'm spending a little more, like more of a prescription, because that was some logistical problem. For the IUD, I don't think… It just was like, "You probably will have less bleeding, but nobody knows what you're going to get, really, I think. It wasn't really thoroughly… Mostly, it wasn't explained.

Olivia: It was extremely painful to get it inserted and no one does anything about it for your pain, which I find terrible, but that's I mean I've had kids and gone through labor. It's maybe more painful to get an IUD placed.

Interviewer: (51:00) Ivy?

Ivy: I would say I spoke with my mom and my family doctor before getting prescribed birth control pills and I would say that they said it would help with crampings, shorten my bleeding, which both did, but then when I was deciding between taking the one continuously versus taking it for three weeks and then a week off while you have a period, I didn't want to lose my period because I liked the confirmation that I'm not pregnant. Switching to now taking it consistently and continuously, I find I'm more anxious if I am sexually active that, "Am I pregnant?" I don't know. There are other ways, obviously, to prevent pregnancy, but taking it consistently is different, mentally, for me.

Interviewer: (52:05) Did you get information from your provider on that and was it helpful?

Ivy: I would say in my situation, my family doctor is also male, so him explaining this to me was a different introduction. He's a medical doctor, but it's different coming from a woman, I feel like, and when he explained it to me, he made it very casual that, "All you do is take it consistently now. You may

get spotting, but it's a case-by-case basis," so I would say it was more on a vague side versus… That's how I was introduced to it.

Interviewer: (52:43) Now, others' experiences with information from healthcare providers. Ava?

Ava: Yes, I think I wish that I would have been more informed on a comparable level because there are so many different birth controls and when I first started birth control, it was for a different reason, or it was for a more singular reason than what I'm on birth control for now. I also use birth control for controlling my skin and my… There are certain hormones that work better for different purposes, but I had to do a lot of that research on my own to figure out which one I could check off most of my boxes.

Interviewer: (53:35) Others?

Sam: Yes, honestly, it has been so long for me that when I started...I use the NuvaRing, so I must have, at that juncture, had some information passed, but then because it just seemed to work up until this past year, it seemed to work, I didn't mess with it. It has been interesting though because through all those years, because I think I was on NuvaRing for almost 10 years, partly going off of it for family planning, that it never came up. I never was asked if it was working or if there were other things out there… That was an interesting thing, now thinking about it. I'm like, "There were probably just a couple options and that's the one we chose."

Interviewer: (54:26) What about information on how your menstrual cycle would change? Any information like that?

Ava: I think it was very glossed over. Very brief irregular cycle. I didn't ever have a discussion with my doctor about what that meant. I just drew inferences in my own mind of like, what he might of meant.

Interviewer: (54:54) Lily?

Lily: Like I mentioned before, the current one that I'm on, I started for medical research, so that was very specified. Then, in the past, I've gotten my birth control from places like Planned Parenthood and usually they have been… I feel like it was pretty thorough, but I think a lot of, even when you're in a physician's area, they still use vague terms, like "inconsistent" or they use more social words. They don't get as specific, so then I feel like they're just like, "Yes, a lot of people are irregular." I don't know. I feel like it could be a little bit more specified. In the past, it was very similar.

Interviewer: (55:44) What do you think is the most important information that you would want a friend to know about these changes, before starting contraception? Yes, Lily?

Lily: For me, it would be the possibility to affect your cramps and how your body feels, and its impact on your sex life.

Interviewer: (56:12) Others? What's one thing?

Ivy: Yes, I would say in terms of, if you are sexually active, understanding the risks of certain birth controls and what their percentage rate is for protection, and keeping that in mind. Just because you're using contraception, it doesn't mean that you won't get pregnant. There's still that percent error. In terms of the question, how it affects periods, I would say that keeping notes or a journal and tracking and don't be afraid to say to your doctor that, "This isn't the right one. We need to make a change," and being your own advocate.

Interviewer: (57:06) Anyone else? Sam?

Sam: Yes, I was totally blown out with a couple of particular instances when on birth control, the lining of the uterus. I had no idea and I would love to tell a friend, “It happens. It's a low probability, but don’t freak out.”

Interviewer: (57:37) Yeah, thanks Sam.

Ava: I would say if your period becomes irregular, that doesn’t mean that there’s something wrong. That's usually pretty common. I thought that, when I started taking this birth control, if mine was irregular, I was like, oh my god am I pregnant? But it just became so normal, but I think people could get anxiety if they don’t have that information .

Interviewer: (58:11) Ellie, did you have any thoughts on one thing you would want someone to know with these changes?

Ellie: I just feel like there are so many different changes that could happen. I wouldn't be able to say, “You should look out for one thing.” I would just tell them to Google it. They get percentages of the different types of side effects people experience. I’d be like, “If it's one in thousands, you’re probably okay. You’re probably not dying *[chuckles]*.”

Interviewer: (58:42) We’re going to do one last activity. For this final activity, sometimes healthcare providers or researchers ask questions, these questions about your menstrual cycle. I’m going to ask each of these questions and then we’ll take a few minutes to discuss. The first question we will talk about is, when you last had a period, would you describe it as light, moderate, or heavy? Please raise your hand if you would say light. Lily, Ellie, Olivia.

Respondent: I hate this question.

Interviewer: (59:33) We’re going to talk about it. Can the light people avoid the cords and stand over in that corner? We’re going to move around a little bit. Raise your hand if you would say heavy? Sam. Why don’t you stand here? The rest of you would say moderate. Do you want to just come over here, right here by the wall? We have light, moderate, heavy. How did you decide on your answer? Let’s start with the light group. Someone share, how did you decide? Yes, Lily?

Lily: Less cramps and bleeding. It was mostly spotting, so I considered that light.

Interviewer: (60:29) Others?

Ellie: The last one I had was, I think it was the sort of a flow. I don’t know. It was a step above just, “Oh, it's spotting.” I did have to use a proper pad, but I don’t know it was just really light.

Olivia: I think mostly spotting equals light. Do you want to know why I hate the question?

Interviewer: (60:50) Not yet. Moderate. How did you decide on your answer?

Ava: I think about length of my period and I usually judge it by how heavy it is the first day. So average that out and I’m moderate.

Interviewer: (61:12) Ivy?

Ivy: I’d say that I chose moderate because for me it was three days, and then I did use a super max tampon the first day, and it progressively got lighter, so I averaged it out to being moderate.

Interviewer: (61:32) Sam, how did you decide on heavy?

Sam: Just from a bleeding standpoint. I've already mentioned that I had the actual cast, so that's like, whoa, that's heavy enough. It really hurt and cramps, it was super hard to pass, so that's what feels really heavy. Then, the period itself is so heavy, a super plus tampon, I'll bleed through to a pad within an hour.

Interviewer: (62:10) How long ago was this period that you were thinking about when you answered this question? Could you raise your hand if it was within the last month or two? Sam, Ivy, Ava, Olivia. Is that a hand from Ellie? Yes.

Ellie: Can you see?

Interviewer: (62:28) Yes, everybody. Now, was there anything about that question that made it difficult to answer? Olivia, why don't you kick us off?

Olivia: I get asked this at the doctor's all the time. "When was your last period," and I'm like, "I don't really feel like I have periods. I have occasional spotting days." The last time I had a period, period, was, I don't know, a really long time ago. Then I feel like I shouldn't even be calling it a period because it doesn't even feel like it. That's all. It also implies, I think, when you just ask… I don't know, it implies that this is something that happens to you regularly and that you have an idea about what light, moderate, and heavy means, because I only know about my own period.

Interviewer: (63:27) Anything else that makes this question hard to answer? Do you want to elaborate on that last bit a bit? Ellie?

Ellie: Yes, it's difficult to know what light, moderate… I was thinking about that, too. I feel like my best guess is based off what pads or tampons I use. I'm like, based off what I'm using, I guess I fall on this end of the spectrum. I was part of a study here for Nexplanon, and we would do one, two, and three, I think, for no bleeding, spotting, and then bleeding. Even with spotting and no bleeding, sometimes I'd get just one little bit. I'd be like, "Was that just something or was that blood?" I wouldn't know the difference from when I would count spotting to bleeding. Is it when I have to use a liner to a tampon, or a pad? I don't know. I'm just guessing.

Interviewer: (64:20) What about over here? Sam?

Sam: I just am so fascinated by it all. When they come out, "You might not even know if you're having a period," I'm like, "There is no question about what's happening in my body." I wish they made a bigger tampon. They don't even make a big enough tampon for me.

Interviewer: (64:48) Anything else about this question that makes it hard to answer? Yes, Ivy?

Ivy: I would say all the time when I'm asked this at the doctor's, it's one of the first questions they ask me after they take my blood pressure, and they were like, "When did you have your last period," and I was like, "Wait, when was that?" I don't know. It's not something that I'm always thinking about. I think unless you are tracking it with an app or a calendar, that's why you need it, is because it's not the first thing on my mind, or it's not something… It makes it a hard question to ask because you're trying to go back in your memory to think about it.

Ellie: Sorry, I have one more---

Interviewer: (65:30) Yes, Ellie?

Ellie: Doesn't period include the whole cycle? So if you're on a birth control, is it just breakthrough bleeding, technically? Cause I'm not ovulating I don't think.

Interviewer: (65:42) That makes this hard to answer?

Ellie: Yes. So is that really a period? *[chuckles]*

Interviewer: (65:49) Yeah, alright. We have one more question. We're going to stay in our groups. Sometimes, healthcare providers or researchers may ask you, on the heaviest day of your last period, how many menstrual pads, tampons, or other materials did you need to use to collect or absorb your bleeding for that day? Again, we're just going to answer the question, and then we'll talk about it. Please raise your hand if you used one. On the heaviest day of your last period. Olivia would say one. Ellie, one. Raise your hand if you would say two, three, or four. That's Lily, Ava, and Ivy. Five, six, or seven? Eight, nine, or 10? Eleven, 12, or 13?

Sam: Probably getting closer.

Interviewer: (66:56) Then there's a more than 13 option.

Sam: Maybe more than 13.

Interviewer: (66:59) Sam is saying more than 13.

Sam: This is in a 24-hour---

Interviewer: (67:05) This is on the heaviest day.

Sam: Yes.

Interviewer: (67:13) You were in the light group. No, you were---

Lily: The light group. I said four.

Interviewer: (67:20) You said four. Here, yes, why do you think people in your group had different answers?

Lily: This isn't a comment on people. I would say sometimes it's also optional hygiene things. I really don't like for things to build up, but also, I'm very sensitive to it, so I probably change mine more often than most do. Then, just because I would consider my overall period light, maybe my heaviest day was still heavier than theirs, even though the rest of it was barely spotting, then I would still consider it light.

Interviewer: (68:05) Was there anything about this question that made it difficult to answer?

Olivia: Was there a zero option?

Interviewer: (68:11) There was not.

Olivia: Yes, because I said one because, and I actually don't remember it. Did I throw on a pantyliner that last time? Maybe, but I just said one. But sometimes it's zero.

Interviewer: (68:26) Right, I did not give that as an option.

Ellie: I still wasn't thinking of it as the 24 hours. I was just thinking of it as the daytime.

Interviewer: (68:36) Yes, it doesn't specify.

Lily: I feel like it's easier if it's more objective, if we were talking about numbers of pads, as opposed to how we were defining it. There isn't really an operative term for light, moderate, or heavy. I find the question to be easier.

Interviewer: (68:53) Thanks, Lily.

Ava: I think a little bit of the opposite, because, like you mentioned, everyone changes theirs at a different rate. For me, I just look at a timeframe. When it has been three or four hours, I'm just going to change it regardless. Everyone has their own system.

Interviewer: (69:19) Other things that make this question hard?

Olivia: It doesn't specify mega tampons or not.

Interviewer: (69:30) What kinds of tampons.

Olivia: Yes.

Interviewer: (69:33) Are they all the same? What do you think someone that is using something other...what about this other materials category?

Olivia: Like a cup. Weren't there cups for a while that people were into?

Interviewer: (69:53) Yes, there are cups. Thoughts? Ivy?

Ivy: I also think sometimes if you don't have access to actual feminine hygiene products, so a lot of people will change their underwear and clean it, or they'll use just toilet paper, or paper towel, whatever they can get to absorb the blood, even though it's not the most efficient.

Interviewer: (70:13) Then how might they answer this question?

Ivy: Yes, that's a lot, if you're just using some paper towel.

Interviewer: (70:18) Yes, how much other material, yes. Any other thoughts on this question?

(No audible response.)

Interviewer: (70:28) You can come back to your seats.

Olivia: It also implies that your last period was meaningful.

Interviewer: (70:39) Yes.

Olivia: Compared to your other periods. Maybe it's representative, or something, but maybe it's not.

Interviewer: (70:49) Sometimes people have very small amounts of bleeding and they may not even need to use a menstrual pad, tampon, or other material, as we have established. What words would you use to describe this very small amount of bleeding?

Respondent: Spotting.

Lily: Yes, spotting.

Interviewer: (71:08) Anything else?

(No audible response.)

Interviewer: (71:12) What does that word mean to you?

Lily: I think it's the word that I learned somewhere through life and it makes sense, because you get little spots.

Interviewer: (71:24) Lily, how do you know when you're having that kind of bleeding?

Lily: It's also usually a darker kind. I think that that's a part of the connotation of spotting.

Interviewer: (71:40) Olivia?

Olivia: If you don't have to use more than a pantyliner, in my mind, is really spotting.

Interviewer: (71:45) Yes, Ivy?

Ivy: I was told when I first heard the word that it was relating to the final time of your period bleeding length, and that it's common, but not everyone gets it. That word is still probably the hardest vocabulary word that I have learned in my menstrual cycle journey.

Interviewer: (72:12) You've been very helpful in telling us about these two questions. In the next section, which is brief, we are getting to the end here. In the next section, we're going to talk about sex and sexual relationships. I want to restate what I said at the beginning and just acknowledge that may be a sensitive topic and you don't have to answer anything that you don't want to, especially since we don't know each other well, you can step out, or which, of course, we can skip this section all together. I have two more questions that healthcare providers may ask people that are using contraception and we would like your opinion. Sound okay?

(No audible response.)

Interviewer: (72:51) Sometimes healthcare providers or researchers want to know about whether or not you have had sex recently. For some people, this is a sensitive topic, maybe hard to talk about. How would you like to be asked if you had sex or not, or any reflections on that question? Have you had sex recently?

Respondent: Are you asking us or are you asking us about the question?

Interviewer: (73:15) About the question.

Respondent: How would you like---

Interviewer: (73:20) Thank you for clarifying that. Yes, healthcare providers might ask you that. What do you think about that? Lily?

Lily: My doctors usually say something like, "Are you currently sexually active?" That usually makes it easier because to me, that's like, "Do you currently have a sexual partner, and is it a part of your contraception reasons?" As opposed to, "What do you mean by recently?" That's usually how it's framed to me, that's usually a preference of mine, and I don't mind being asked that.

Interviewer: (73:52) Ivy?

Ivy: I don't mind being asked it. I think it's just… Sometimes, if it's the first question they ask you when you walk in the door, maybe can we talk about something else first, for my own comfort? I don't mind if

it's delivered in a considerate way and the question about how recent, I think recent, what does that mean? I'd rather it in months or in weeks or days. That would be a better way for me to better deliver an accurate response.

Interviewer: (74:28) Others? Olivia?

Olivia: Also, the word "sex". Let's be a little more specific. Do you mean sexual intercourse with a penis and a vagina? This is what my kids are learning in elementary school. The specificity.

Interviewer: (74:45) What does the word "sex" mean to you, when asked in this context.

Olivia: Yes, you think when you hear this question, "They want to know if there's any chance that I might be pregnant?" Which I've also had people ask me before. "Is there any chance you could be pregnant?" I'm like, "I mean hardly…I guess there's some slight chance, but probably not."

Interviewer: (75:15) Other reactions to this question? What about over here?

Sam: Yes, I don't have a problem.

Ava: I usually get asked, "Are you sexually active?" I think that doctors should be asking those.

Interviewer: (75:38) One more question. Healthcare providers and researchers sometimes ask whether or not you have used a second method of contraception when you last had sex? How do you think it's best to ask that question? Do you have any reactions to, "Have you used a second method?"

Ellie: I feel like that's a good thing to ask.

Interviewer: (76:03) Yes? Ellie, yes?

Ellie: With the doctor, it makes sense that they're asking about your health history. So, for me is always in that context, so I don't really care if it's too… I feel like a direct question is always better.

Interviewer: (76:18) Other thoughts? Yes, Lily?

Lily: I also don't mind that question, how it's phrased. I think the only thing I would add would be, for example, and giving some just… I'm aware of other examples, but some people may not be aware or may not think that could be a benefit. Maybe giving context of why you're asking this and then examples of what secondary methods are.

Interviewer: (76:47) Yes, Ivy?

Ivy: I agree as well, giving examples so that I can align my experiences with those examples.

Interviewer: (76:55) Would you think of withdrawal, like pull out, as a second method?

Respondent: Mm-hmm (affirmative), yes.

Interviewer: (76:59) Yes?

Lily: Condoms because it does help with STDs just because you have multiple partners. Just because you're on contraception, doesn't mean you shouldn't use condoms as well.

Interviewer: (77:15) Any other thoughts on this question?

(No audible response.)

Interviewer: (77:21) We are coming to the end here, but before we end, is there anything else that you would want, you think we should know about your experiences with menstrual cycles while taking contraception and that we did not talk about today? I'll give you a moment to think about that, maybe take a look at our walls. Yes, anything else for you?

Lily: I don't know if this is the purpose of how you ask questions, to see what we'd bring up, but maybe some more that do ask about the impact of sex life. That is very important for a lot of people, deciding what contraception they're going to use can be very influenced by if it's going to impact your sex life or not. How your period, cramping, blood, all that kind of stuff also impacts your sex life.

Olivia: When I go to the doctor, I would like the first question about this stuff to be multiple choice, not, "When was your last menstrual period," or, "Do you have periods?" I want it to be like, "I have regular periods with no hormones or birth control. I have…" Whatever. I'd like it to be multiple choice, of, describe your situation.

Interviewer: (78:56) More options when talking to---

Olivia: Yes.

Interviewer: (79:00) Anything else? Yes, Ivy?

Ivy: I'm not sure if this is outside the scope of this study, but impact on social relationships and family, because due to how contraception affects periods, I don't know, just sometimes there's a stigma about contraception, in general, or feeling like it's too personal or embarrassing for, I don't know, your brother, or something, to see you taking it and he's like, "What are you taking?" I don't know. Then you have to explain it and there's… I don't know why it's embarrassing though. It shouldn't be embarrassing. Something around the lines---

Interviewer: (79:44) Yes, do you want to say more about that broadly? Just about stigma or--

Ivy: Stigma or impact on relationships in society or something along those lines.

Interviewer: (79:57) Not intimate partner relationships, but---

Ivy: External family support.

Lily: That makes sense because when I was younger, I had to lie and say that I was taking it for acne.

Sam: I haven't thought about that in so long, but I remember being a teenager and taking it because I had such irregular periods. I was nervous that someone would think that I was sexually active when I wasn't.

Respondent: That's so funny.

Lily: Social impact of contraception.

Interviewer: (80:41) Thank you for joining our discussion today. We were very grateful. We're going to stop the recording. Today is September 18 at 7:33 p.m. and this is focus group 3007. Let's stop this now. Now we are finished, but before you leave, I would love to hear a brief---

(Audio ends abruptly.)