INTRODUCTION
Medication abortion is inaccessible to many people due to a number of barriers, including a lack of providers, the need to travel long distances to access care, and inconvenient clinic hours. These obstacles are further compounded by state regulations that target where, when, and how people can access abortion. Providers have implemented telehealth—the provision of health care at a distance through technology—to expand access to high-quality medication abortion services.

In a telehealth appointment, a patient goes to the clinic to receive pregnancy and abortion options counselling and any diagnostic tests (such as an ultrasound). Instead of meeting with the doctor in person, the patient meets with a doctor over video conference, and the doctor assesses the patient’s eligibility for medication abortion. If the patient is eligible, the doctor answers any questions and gives instructions on how to take the medication.

Maine Family Planning (MFP) is a network of 18 clinics located throughout Maine working to ensure that people in the state have access to high-quality, affordable reproductive health care, comprehensive sexual health education, and the right to control their reproductive lives. MFP clinics provide both in-person and telehealth medication abortion services.

Ibis Reproductive Health (Ibis) is a global research organization working with partners around the world to design and conduct rigorous research to advance policy and service-delivery solutions than transform people’s reproductive lives.

In 2011, Ibis launched a portfolio of work to evaluate telehealth models for medication abortion in the United States. This brief presents findings from an evaluation that sought to assess patient and provider experiences using telehealth services at MFP clinics.

PROVIDER PERSPECTIVES OF TELEHEALTH
To better understand provider experiences and satisfaction with telehealth services, Ibis conducted in-depth interviews in 2017 with five providers at MFP clinics. Interview questions focused on the provider’s opinions of telehealth services, and their perceptions of the services’ impact on patients. Below are two prominent themes that emerged from our analysis:

The majority of providers said that telehealth improved access to medication abortion because, before the implementation of telehealth, patients would have to travel long distances to receive care.

“Augusta is five hours away, and that’s where our clinic was that was doing abortions [before implementation of telehealth]. So, you’re looking at expenses of missing work and finding a place to stay—and so, I think more people would have used the services but except for the fact they couldn’t travel or couldn’t get there.” –Provider

Most providers reported a similar patient experience for telehealth and in-person medication abortion.

“The actual experience or how long they spend with the doctor, or any of that doesn’t change [between in-person and telehealth visits].” –Provider

PATIENT PERSPECTIVES OF TELEHEALTH
To better understand patient perspectives of and experience with telehealth, Ibis administered a survey from 2017-2018 to evaluate patients’ in-person and telehealth experiences at MFP clinics. The survey asked patients to report their level of satisfaction with various aspects of their care, including their conversation with the doctor and overall abortion experience, as well as their preference to be in the same room as the doctor. Ninety-seven survey responses were collected from telehealth and in-person medication abortion patients.
Patients who completed the survey were then invited to participate in an in-depth interview. Nineteen patients participated in the interview, during which they were asked to describe their clinic experience, and whether or not they would recommend the clinic.

Abortion service satisfaction
Approximately 98% of in-person and telehealth patients reported being either very satisfied or somewhat satisfied with the abortion service they received.

“Everyone I interacted with, from the call center to the clinic staff, were professional informative and respectful. I felt more comfortable throughout the process because of this, and it made a very difficult thing easier to deal with. I received all the information I needed and feel grateful to the staff for their care. Everyone was nonjudgmental which was very important.” —Telehealth patient

Conversation with the doctor
About 96% of telehealth and in-person patients reported being somewhat or very satisfied with the conversation they had with the doctor.

“This woman was so kind and gentle natured…. Just by being so nonjudgmental it was like having the perfect friend or mom to talk about my situation because there was no judgment on her part and 100% support.” —Telehealth patient

Preference to be in the same room as the provider
Nearly 85% of telehealth patients reported no preference for the doctor’s location.

“I didn’t care where she was, but I think that having a conversation with someone in person, versus over like video chat isn’t very different….I think in this day and age when people have video conversations often it doesn’t make much of a difference, especially for a video chat where it mostly gives relaying information. I didn’t see it as anything different or weird.” —Telehealth patient

Overall abortion experience
The majority of in-person and telehealth patients said what they liked best about the care they received was the compassionate and nonjudgmental staff. Patients also said they liked the ease and speed of the appointment process.

“They were very informative and kind. I felt like someone important and like they’d give me all the time in the world. No judgment, just care.” —In-person patient

“…”

“I can’t thank the staff at the MFP Augusta office enough for their kind, compassionate, and thorough care.” —In-person patient

Conclusion
- Overall, telehealth and in-person patients had overwhelmingly positive clinic experiences and would recommend MFP clinics and its services to friends.
- Patient responses indicate the MFP clinics are providing high-quality abortion services. Clinic staff should continue to ensure that patients are aware of all clinic procedures and maintain patient privacy, irrespective of service delivery model.
- Based on patient and provider support of telehealth, MFP should continue to offer and explore opportunities to expand and improve telehealth services.