



Satisfaction with medication abortion services among telehealth and in-person clients at a Carafem clinic in Georgia

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 client 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 client then meets with a doctor over video conference. Over video conference, the doctor assesses the client's eligibility for medication abortion. If the client is eligible, the doctor answers any questions and gives instructions on how to take the medication.

Carafem is a network of health clinics located in Atlanta, Chicago, Nashville, and Washington D.C. The clinics offer a range of sexual and reproductive health services, including in-person and telehealth medication abortion, aspiration abortion, birth control services, and testing services for sexually transmitted infections and urinary tract infections. Carafem's mission is to provide, "convenient and professional abortion care and family planning so people can control the number and spacing of their children."

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 that 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 examine client experiences using telehealth for medication abortion. From March 2018 through December 2019, we fielded an online survey among telehealth and in-person medication abortion clients at a Carafem clinic in Georgia. During their abortion visit, clients were asked if they were interested in participating in the study and, if they were, provided their phone number or email address. Clients who provided contact information received a link to the online survey via text message or email roughly two weeks after their abortion visit.

Clients were eligible to participate if they were at least 18 years of age, able to read and understand English, and had any planned follow-up visits. The survey asked clients to rate their level of satisfaction with various aspects of the clinic experience, and included questions about demographics, such as race, age, marital status, and pregnancy history. In addition, open response questions prompted clients to describe their responses and experiences. The following results reflect the responses of the 322 telehealth and in-person clients who completed the survey. Of these respondents, 124 were telehealth clients and 198 were in-person clients.

TELEHEALTH EXPERIENCE

To better understand the telehealth experience, clients who received medication abortion via telehealth were asked to report on their experiences using the video conferencing system and comfort level asking questions to the doctor. In addition, participants were asked about their preference to be in the same room as the provider.

Using telehealth technology

The **vast majority** (97.6%) of telehealth clients said that they did not experience any technical issues during their appointment. In addition, **nearly all** reported that it was easy to hear (99.1%) and see (98.3%) the doctor over video conference.

Comfort asking questions to the doctor

About 95% of telehealth clients reported that they felt comfortable asking questions to the doctor over video conference. Notably, two respondents who said they were uncomfortable asking questions indicated that their care was not negatively impacted by the use of telehealth.

Preference to be in the same room as the doctor

When asked if they preferred to be in the same room as the doctor, nearly 84% of telehealth clients reported that they did not have a preference to be in the same room.

Of those who commented on their preference to be in the same room as the provider (n=12), six said they would be more comfortable with the doctor physically present in the same room, including three who said they were used to having the doctor in the same room. Five participants reported that having the doctor in the same room would be a more personable experience. One participant said they preferred to have the provider in the same room due to privacy concerns.

COMPARISON OF CLIENT SATISFACTION

In order to compare the abortion experiences of telehealth and in-person clients, respondents were asked to report on overall quality of care, their level of satisfaction with services overall, their conversation with the doctor, and the information they received about birth control. Clients were also asked whether or not they would recommend the service they received to a friend or family member who wanted to have an abortion.

Client overall quality of care and satisfaction

Approximately 97% of in-person and 97% of telehealth clients described their overall quality of care as excellent or very good. In addition, almost all in-person (99.0%) and telehealth clients (99.2%) reported being somewhat or very satisfied overall.

Client satisfaction with their conversation with the doctor

The vast majority of telehealth (98.4%) and in-person (99.5%) clients said that they were somewhat or very satisfied with their conversation with the doctor. When asked to comment, the majority of respondents (154 out of 162) described their conversation as informative, direct, and clear.

One telehealth client said,

[The doctor] was great—she was clear with instructions. The video chat was simple, quick, and thorough.

Satisfaction with information about birth control

Nearly 98% of telehealth clients and 94% of in-person clients said that they were very or somewhat satisfied with the information provided about birth control. One in-person client said,

I chose not to get birth control through Carafem and instead through my personal doctor. However, the [Carafem] doctor did help me find the right birth control that fits my needs.

Recommend Carafem services to a friend

The majority of telehealth clients (96.0%) and in-person clients (94.9%) said that they would recommend services. Seventy-eight respondents commented on why they would recommend the service. Among telehealth respondents (n=25), the most common reason for why they would recommend the services to a friend was the speed and ease of the appointment. Among telehealth and in-person respondents, 32 said that they would recommend the services because of the positive way they were treated by the staff. One in-person participant described staff as

...compassionate, informative, helpful and empowering during every step of the process which is very important involving such a personal and sensitive life decision.

Open comments also revealed that both telehealth and in-person respondents cited their preference for medication abortion versus surgical abortion as a reason for recommending or not recommending services to a friend. Of those who said that they would recommend services, 11 said that the pill was more private and less invasive than surgery, and among the minority of respondents who said they would not recommend the service (n=7), participants described disliking the side effects of the pill and a belief that the pill was ineffective.

Client perspectives of care

Open-ended responses prompted participants to elaborate on their experiences receiving care at Carafem, including what they liked most about the care they received. **Of the 281 respondents, the overwhelming majority (205) described the staff as the part they liked most about their care.** Below are the adjectives participants used to describe the staff:



CONCLUSION ➤

Survey responses indicate that, regardless of service delivery model, Carafem clients had extremely positive experiences receiving abortion services. Given the high levels of satisfaction among telehealth clients, Carafem clinics and staff should look for ways to expand and improve telehealth services.

Open responses from this survey indicate that the majority of clients value the compassionate and non-judgmental care provided by Carafem staff, and felt well-informed about the medication abortion process and their contraceptive options. Client reasons for wanting to be in the same room as the provider emphasize the importance of offering a range of abortion care options so that they can choose the one that best fits their needs.

Providing client-centered care—irrespective of service delivery model—can ensure that clients feel comfortable, safe, and satisfied with the health care services they receive. As clinics continue to implement telehealth technology to address gaps in accessibility, these findings can help shape the expansion of telehealth for high-quality medication abortion services, as well other critical reproductive health care services.

Ibis drives change through bold, rigorous research and principled partnerships that advance sexual and reproductive autonomy, choices, and health worldwide.



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Issued January 2021