

**Early Abortion Services within Primary
Care:
Factors Predicting Acceptability from
Patients At an Abortion Clinic and two
Family Medicine Centers in Chicago**

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Background

- Current rates show that abortion is one of the most commonly performed procedures in the United States.
- Most OB/GYN and some family medicine residents learn first trimester abortion to competency, but rarely provide it in their offices after residency.
- Free-standing abortion clinics hinder the continuity of care for women seeking early abortion.

Background

- Offering early abortion services in the primary care setting may offer increased access to women who are at greatest risk of unplanned pregnancy.
- According to the Guttmacher Institute, risk factors for seeking abortion in America are¹:
 - in their 20s;
 - have one or more children;
 - have never married;
 - economically disadvantaged

Methods

- Convenience sample of 310 women waiting for abortion at a specialized abortion clinic in Chicago or waiting for appointment at one of 2 Chicago family medicine community clinics
- Inclusion criteria:
 - Women between the ages of 18-45
 - Speak and understand English
 - Patients at clinic
 - Had a regular primary care provider
- All participants were anonymous

Methods

- Survey consisted of open & close ended questions:
 - Variables for demographics:
 - Age
 - Number of previous abortions
 - Insurance status
 - Education level
 - Variables to assess relationship with PCP
 - Comfort talking to physician about pregnancy prevention
 - Patients opinion of their PCP or clinic offering medical or surgical abortion
 - Time w/PCP
 - Type of PCP

Main Research Questions

- Do women at greatest risk for unplanned pregnancy agree that primary care (PC) clinic should offer abortion services (Medication and/or Surgical)?
- What are the factors that predict option of the primary care (PC) clinic for early abortion services?

Characteristics of the Sample

	% of total sample	Abortion Clinic Patient	Family Medicine Clinic
Age (average)	27.9	28.9	27.8
Education			
<i>HS or less</i>	22.8%	22.2%	23.4%
<i>Some College</i>	42.2%	40.0%	43.5%
<i>College or more</i>	35.0%	36.9%	33.1%
Public Insurance	31.7%	22.8%	51.0%
Previous Abortion	35.6%	43.0%	26.1%

Patients who stated abortion should be offered in PC clinic

	All N=310 (%)	FM Patients N=161 (51.9%)	Ab Patients N=149 (48.1%)
Stated PC clinic should offer Medical Abortion	236 (77.4)	111 (74.0)	125 (83.9) *
Stated PC clinic should offer Surgical Abortion	172 (56.4)	80 (54.4)	92 (61.7)
Stated would talk to PCP about unplanned pregnancy	159 (57.8)	104 (64.5)	55 (34.6) *
Stated abortion would/could be an option	.	92 (58.2)	NA
Stated would go to PC clinic for their abortion	180 (59.4)	77 (83.7) ^	103 (69.1) *

^ Percentage of patients reporting abortion would be an option for them. * Significant difference between two groups at p=0.05

Q1: Did women at greatest risk for unplanned pregnancy agree that primary care clinic should offer abortion services (Medication)?

Risk Factor for unplanned Pregnancy	% Yes	OR (95% CI)
Public/ No Insurance	32.3%	0.35 (0.2, 0.6)
HS education or less	20.9%	0.36 (0.2, 0.8)
< 30 years old	61.0%	0.54 (0.3, 1.1)
Previous abortion	38.0%	1.79 (0.9, 3.5)
Patient in abortion clinic	51.3%	2.74 (1.5, 5.2)

Q1: Did women at greatest risk for unplanned pregnancy agree that primary care clinic should offer abortion services (Surgical)?

Risk Factor for unplanned Pregnancy	% Yes	OR (95% CI)
HS education or less	20.6%	0.51 (0.3, 1.0)
Public/ No Insurance	34.1%	0.66 (0.4, 1.1)
Previous abortion	38.3%	1.1 (0.7, 1.8)
< 30 years old	60.5%	0.87 (0.5, 1.4)
Patient in abortion clinic	53.5%	1.64 (1.0, 2.6)

Common reasons women stated for why abortion services should be offered at their PC clinic

Convenience, Safety and Comfort with physician

Quotes for why women stated Medication Abortion (RU-486) should be offered:

- “I don't personally think it is right for me, but people need it. So it might as well be offered somewhere safe.”
 - *Respondent # 669 (Family Medicine Patient)*

- “Sometimes women become pregnant when they didn't choose to, for example rape or (they) not ready, it is a personal decision.”
 - *Respondent # 581 (Family Medicine Patient)*

Common reasons women stated for why abortion services should be offered at their PC clinic (2)

Convenience, Safety and Comfort with physician

Quotes for why women stated First Trimester Surgical Abortion should be performed:

- “It’s a well established clinic people may feel more comfortable (there) than going to an independent clinic.”
 - *Respondent # 141 (Abortion Clinic Patient)*

- “A lot of people come here, if they are comfortable the services should be provided here, I would be more comfortable here ,(they have my) medical history .”
 - *Respondent # 572 (Family Medicine Patient)*

Q2: What are the factors that predict option of PCP clinic for early abortion services?

Variables	% PCP	OR (95% CI)
Comfortable talking with PCP about BC	96.7%	3.98 (1.28, 12.37)
< 30 yrs old	47.8%	0.52 (0.27, 1.00)
Public Insurance	35.2%	1.56 (0.8, 3.0)
Education		
High School or Less	19.4%	<i>Reference</i>
Some College	46.1%	1.38 (0.64, 2.98)
College or More	34.4%	1.24 (0.56, 2.76)
Had Previous abortion	40.6%	0.59 (0.3, 1.1)
PCP is Family Medicine Doctor	89.9%	1.60 (0.6, 4.0)
PCP is OG/GYN	10.1%	<i>Reference</i>
Time with PCP (>5 years in clinic)	42.2%	1.03 (0.6, 1.9)
Patient in abortion clinic	57.2%	0.47 (0.24, 0.90)

Most important factors that predict use of abortion services at Primary Care Clinic

Multivariate analysis

Variable	Adjusted OR (95% CI)
Private Insurance (I would do public insurance since all of your previous slide use public)	1.74 (0.83, 3.63)
Previous Abortion	0.58 (0.39, 0.86)
Older Age Group (> 30 years old)	2.45 (1.25, 4.81)
Survey completed in family medicine clinic	2.11 (1.05, 4.24)

Common reasons women stated they opt for their PC clinic for their first trimester abortion

1) Convenience 2) They know medical history 3) Comfort with doctor

Quotes:

- “Abortions clinics don't make you feel comfortable, he (my doctor) knows my body.”
 - Respondent # 594 (*Family Medicine Patient*)

- “There would be no people protesting and it would be convenient and confidential.”
 - Respondent # 652 (*Family Medicine Patient*)

- “I because my doctor knows me at the clinic they don't know you.”
 - Respondent # 250 (*Abortion Clinic Patient*)

Common reasons women stated they opt for their PC clinic for their first trimester abortion (2)

1) Convenience 2) They know medical history 3) Comfort with doctor

Quotes:

- "There would be less focused on the fact that having abortion (and) more holistic care."
 - Respondent # 500 (*Family Medicine Patient*)
 -
- "I am more comfortable there, I like the idea of anonymity [at the abortion clinic], but I would go where I have more trust in the doctor"
 - Respondent # 120 (*Abortion Clinic Patient*)

Conclusions

- While the majority of women interviewed agreed that the PCP should offer early abortion services, women at greater risk of unplanned pregnancy did not show a strong preference for this option
- “Comfort” with PCP, being older than age 30 and being a patient in the FM clinic were important factors in opting for PCP for early abortion services

Conclusions (2)

- Significantly more patients in the family medicine clinics said they “would” talk to their doctor about an unplanned pregnancy than what the abortion clinic patients “actually” did
 - Difference between reality and perception?

Limitations

- Anonymous survey
 - It is not possible to verify information given by the respondents
- Not necessarily generalizable
 - Survey completed in only 3 clinics in Chicago, therefore the results may not speak to the opinions of all women with PCPs in the US
- There is little demographic data making it difficult to determine more information about the sample.
 - No zip code, income or race information obtained in survey
- Small sample size

Thank you

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