

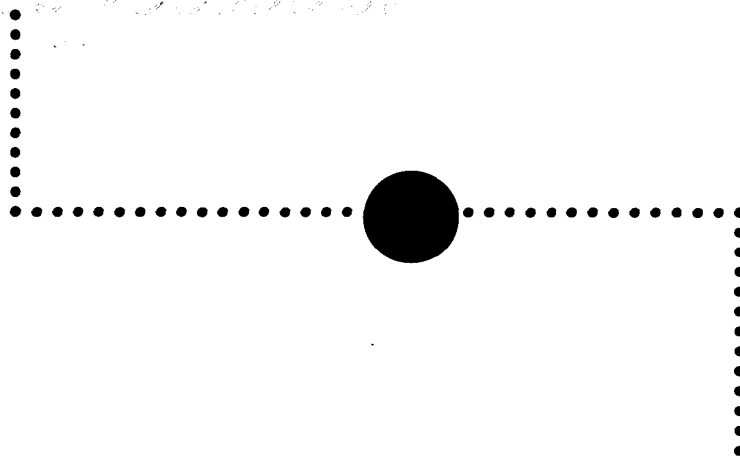
Prepared for the Kaiser Family Foundation
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Kaiser Family Foundation



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Report No. 100
Patients' Perspectives
From the
Patient's
Perspective:



Quality of
Quality of
Abortion Care
Abortion Care

INTRODUCTION

For women of childbearing age, abortion is the most common type of surgery performed in the United States today.¹ And the safety of legal abortion has been extensively documented.² Yet little is known about how *abortion patients* rate the quality of the care they receive.

During the last decade, the health care industry has increasingly recognized the importance of patient evaluations of care. Today, less of a distinction is made between technical quality of care measures – traditionally called “clinical outcomes” – and patients’ values and preferences. Patient feedback can, in fact, provide critical insights for health care providers and consumers alike.

RESEARCHING ABORTION QUALITY: THE PATIENT’S PERSPECTIVE

The climate surrounding abortion makes research in this area difficult. Nearly half (43%) of all women in this country will have an abortion by the time they are 45,³ yet most keep the procedure secret and many are reluctant to participate in studies about it. Because abortions are usually performed in freestanding clinics,⁴ these providers are often not part of organizations like health systems, hospitals, or physician office practices that routinely survey their patients. At the same time, national standards used in accreditation and evaluation do not contain measures specifically for abortion services.

To learn how women view abortion care, the Kaiser Family Foundation commissioned a study of more than 2,200 patients. The Picker Institute, a health care assessment and improvement research organization, interviewed a diverse group of women drawn from 12 abortion providers in a dozen states around the country. The study, the first of its kind on such a large scale, found that patients generally gave abortion providers high marks for quality of care. Women also indicated which areas were most important to them – and how abortion providers could improve upon their services.

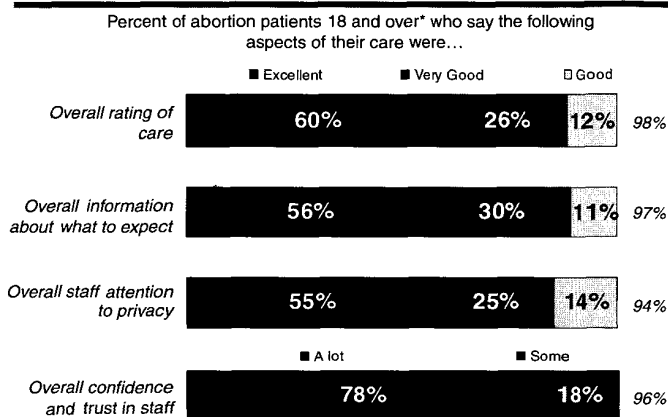
KEY FINDINGS ON OVERALL QUALITY OF CARE

Women are highly satisfied with their abortion care

- 60 percent rated care as “excellent,” 26 percent called it “very good,” and an additional 12 percent said it was “good.”
- 96 percent say they would recommend their abortion provider to a friend or family member.

Figure 1

Abortion Patients Give Their Care High Marks



* In 12 clinics nationwide

Kaiser Family Foundation and The Picker Institute. *From the Patient's Perspective: Quality of Abortion Care*. Kaiser Family Foundation: Menlo Park, CA 1999

Quality of abortion care is comparable to other outpatient surgery

- More abortion patients rated their care as “excellent” than did women who had undergone other outpatient surgery (53%). However, nearly the same percentage of abortion patients (98%) said their care was “excellent,” “very good,” or “good,” as did women who had other outpatient surgery (97%).
- Across all other aspects of care compared, abortion patients’ care was similar to that of other women who had outpatient surgery.

WHAT MATTERS MOST TO WOMEN?

To understand how patients assess abortion quality, researchers looked at which factors most influenced patients' overall level of satisfaction. Figure 2 illustrates the aspects of care that mattered most to women obtaining abortions, and were most closely correlated with their overall rating of care.

Women reported that abortion providers did relatively well in each of these areas:

- 98 percent had the procedure explained to them on the day of their visit, and 99 percent said the explanation was clear.
- 94 percent thought staff attention to privacy was "excellent," "very good," or "good."
- 78 percent reported having "a lot" of confidence and trust in staff.
- 88 percent said they felt they were treated with "a lot" of respect and dignity by staff.
- 75 percent indicated that they got "all" the help they needed when they called with questions after the abortion (NOTE: only 21 percent of women made this call).

Perceptions about quality of abortion care were not influenced by a patient's age, race, type or lack of insurance, or number of weeks pregnant.

Figure 2

Adequacy of Information Matters Most to Abortion Patients

Measures that most influenced abortion patients' overall rating of the quality of their care

Measure	Rank*
Adequacy of overall information	1
Overall staff attention to privacy	2
Confidence and trust in staff	3
Being treated with dignity and respect	4
Post-procedure help (among those requiring it)	5

*Ranked by closest correlation with patients' overall rating of care

Kaiser Family Foundation and The Picker Institute. From the Patient's Perspective: Quality of Abortion Care. Kaiser Family Foundation: Menlo Park, CA 1999

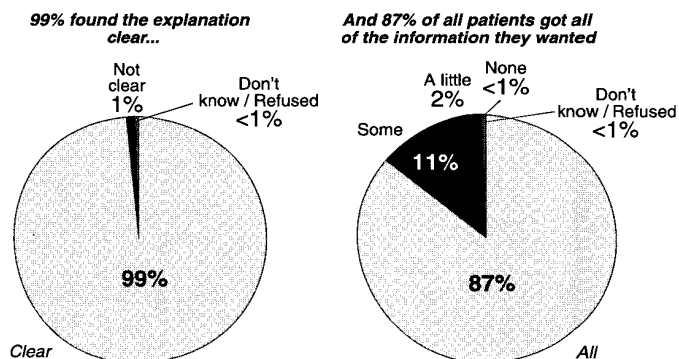
AREAS OF EXCELLENCE

Overall information and counseling. Women said they received as much information and counseling as they wanted (85%) or more (9%). In contrast, patients in Picker Institute satisfaction studies involving *other* health care services consistently report wanting more information than is given. Ninety-five percent (95%) of women were given information on the day of their abortion about what to expect during the procedure. A large majority (87%) of women say they received "all" the information they wanted on what to expect. Most women (94%) also reported having a chance to discuss their concerns and fears. After the abortion, 96 percent of patients were told what problems they should watch for, and 95 percent of those women said they received enough information.

Figure 3

Abortion Patients Rate the Information They Received Highly

Of the 98% of abortion patients who say the procedure was explained to them on the day of the procedure...



Kaiser Family Foundation and The Picker Institute. From the Patient's Perspective: Quality of Abortion Care. Kaiser Family Foundation: Menlo Park, CA 1999

Pain control. Abortion providers offered different anesthesia options depending on the type of abortion provided, number of weeks gestation, patient preference, and insurance requirements. In some facilities, the same protocol was used for all patients; three quarters (73%) of patients reported being given a choice of anesthesia. Most women (91%) felt their pain management was adequate.

Birth control and STD counseling. Ninety-seven percent (97%) of women had birth control explained to them, and 99 percent found the information clear. One in five (22%) women said they needed the clinic staff's help in deciding what kind of contraception to use after their abortions; these women ranged in age from 18 to 39. On average, six in ten (60%) patients report receiving information on sexually transmitted diseases (STDs), including HIV.

AREAS OF IMPROVEMENT

While most areas of abortion care were rated favorably by a vast majority of women, roughly one in five identified the following areas in which improvements could be made:

Telephone interactions with staff. Patient satisfaction is strongly correlated with information and counseling provided by health care providers – both for abortion patients and women receiving other outpatient surgery. In fact, women who had abortions cited information as the most important element in assessing the quality of their care. Although abortion providers generally got high marks for the information and counseling they provided, 25 percent of patients still reported that they were not put “completely” at ease when they first contacted the clinic. Similarly, of the one in five (21%) women who called with questions or problems after leaving the abortion provider, one quarter (25%) said that they did not get “all” the help they needed.

Privacy in waiting and recovery areas. Unlike women undergoing other surgeries, women seeking abortions are especially sensitive to the possibility of being recognized. According to the survey, staff attention to privacy was the second most important factor in determining abortion patient satisfaction. Again, while women were pleased overall with how abortion

providers protected their confidentiality, 22 percent stated that they wanted more privacy in the recovery room, and 19 percent thought staff were only somewhat or not sensitive to their concerns about confidentiality in the waiting room.

Time with the physician. In most areas of health care, patients report wanting to have more time with their physicians. This view was shared by one in five (19%) women who had abortions, including 7 percent who wanted “a lot” more time. For the vast majority of women (90%), the physician made them feel comfortable, with 51 percent saying s/he made them feel “very comfortable.”

METHODOLOGY

A sample of 2,215 women ages 18 and over who had an abortion at one of twelve abortion clinics nationwide were surveyed. The abortion clinics in the study represent the characteristics of clinics nationwide, and the patients resemble abortion patients nationwide, based on key demographics and allowing for age (no minors were included in the study), in the most recent available data. Telephone interviews were conducted with the women three to four weeks following their abortion between July and October 1998. A complete description of the study methodology is available in the full report.

Additional free copies of this publication (#1480) or the full report (#1475) on the findings, including the questionnaire and top line data, are available on the Internet at <http://www.kff.org>, or by calling the Kaiser Family Foundation's publication request line at 1-800-656-4533.

The Kaiser Family Foundation, based in Menlo Park, California, is an independent national health care philanthropy and not associated with Kaiser Permanente or Kaiser Industries.

¹ Almost a million and a half abortions are performed each year, typically for women ages 15 to 44. Henshaw, Stanley K., *Abortion Incidence and Services in the United States 1995-1996*, *Family Planning Perspectives* 30(6): 263-270&287, 1998.

² Council on Scientific Affairs, American Medical Association, *Induced Termination of Pregnancy Before and After Roe v. Wade*, *JAMA*, 268: 3231-3239, 1992.

³ Henshaw, Stanley K., *Unintended Pregnancy in the United States*, *Family Planning Perspectives* 30(1): 24-29&46, 1998.

⁴ Henshaw, Stanley K., *Abortion Incidence and Services in the United States 1995-1996*, *Family Planning Perspectives* 30(6): 263-270&287, 1998.

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