NAPCRG 52nd Annual Meeting — Abstracts of Completed Research 2024.

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#### Title

*Primary care clinics' changes in abortion care after participation in the 2022-23 ExPAND Mifepristone Learning Collaborative* 

# **Priority 1 (Research Category)**

Women's health

### Presenters

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## Abstract

Context: The ExPAND Mifepristone (ExPAND) learning collaborative is a year-long program focused on growing the pool of abortion providers by integrating medication abortion into primary care. Objectives: 1) Participating clinics begin to provide mifepristone for early pregnancy loss (EPL) and/or abortion care. 2) Those unable to provide abortion care will: a) learn about evidence-based use of mifepristone for abortion care; b) implement supportive referrals for patients seeking abortion care. Study Design: This analysis reports change in practices as tracked through learning collaborative milestones and clinician/staff self-report. Setting and Population Studied: The ExPAND 2022-23 cohort supported 3 clinics in the Midwest (1 FQHC, 2 community hospital clinics). Instrument: Each organization's baseline readiness was measured with clinic-level aggregate data. Pre- and post-participation surveys were administered to all clinicians/staff to assess familiarity with mifepristone, knowledge of the medication, and attitudes toward abortion care. A separate tracker assessed each organization's progress towards their goals for mifepristone integration. Outcome Measures: Chi-squared tests were used to assess change in clinician knowledge and practices after participation in ExPAND and change in clinician/staff attitudes towards abortion care. Significant results in bivariate pre vs. post analyses were analyzed with logistic regression to control for respondent role, clinic type, and clinic location. Results: Post-survey respondents answering "agree" or "strongly agree" to feeling comfortable discussing options for abortion care are 2.07 times those of pre-survey respondents (95% CI 1.10-3.87). However, there was no statistically significant increase in odds of post-survey respondents correctly answering that clinicians must register with the medication manufacturer to prescribe mifepristone (OR=0.47, 95% CI 0.09-2.33). Familiarity with mifepristone increased for all three clinics after participation in ExPAND. Overall, 49% of post-survey respondents answered that they have used mifepristone to treat a patient within the past year compared to 26% of pre-survey respondents (p=0.03). Conclusions: After participation in the

ExPAND Learning Collaborative providers reported increased comfort with options counseling for abortion care. Participating clinics now carry mifepristone and providers report increased familiarity with the medication mifepristone in abortion care.

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