



# Delivering Abortion Access to the Rural Midwest: A Partnership with Just the Pill

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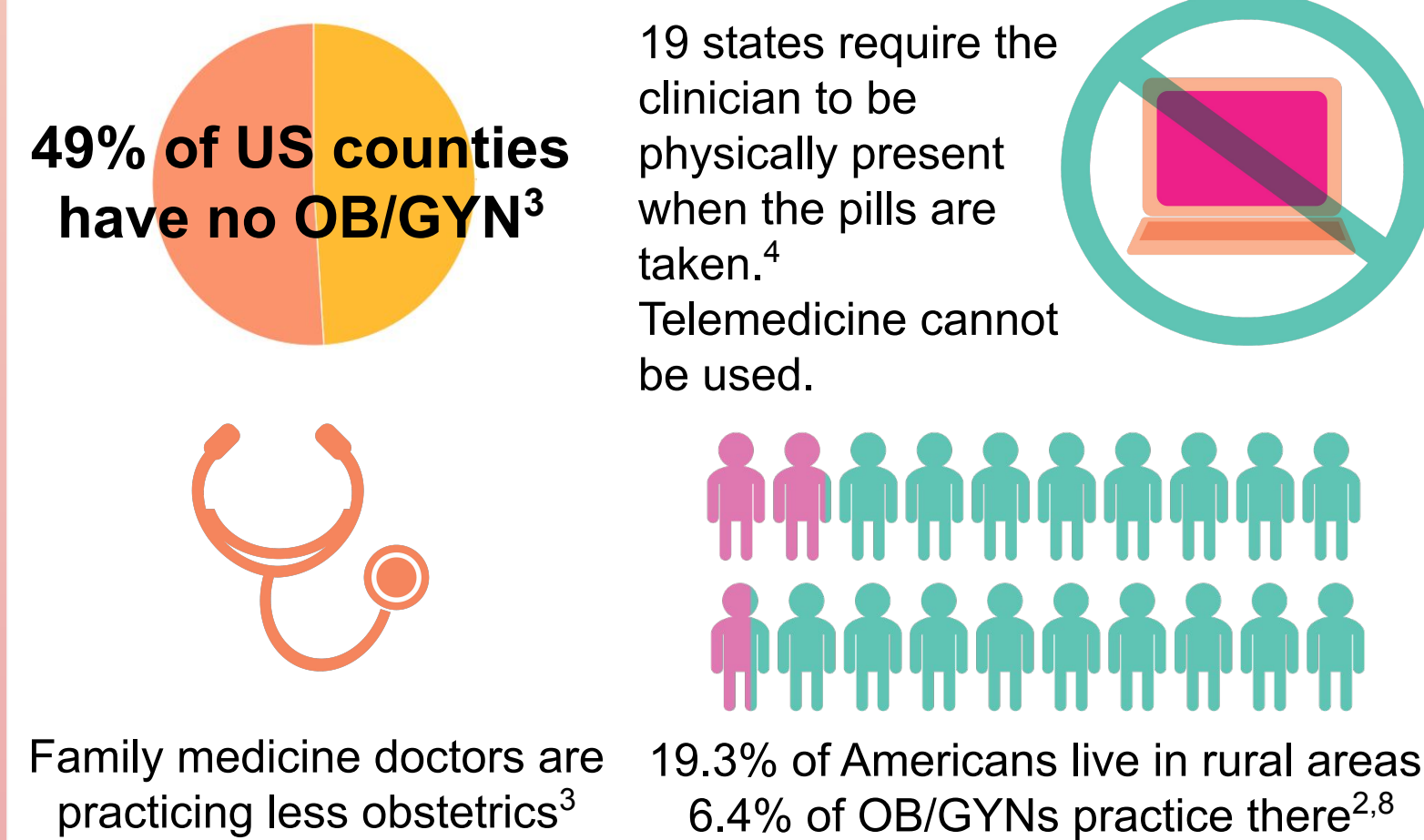
## Background

### Medication Abortion

A medical abortion can be done up to week 10 of pregnancy, and the medications must be prescribed by a physician, but in some states they can be taken at home with follow-up.<sup>1</sup>

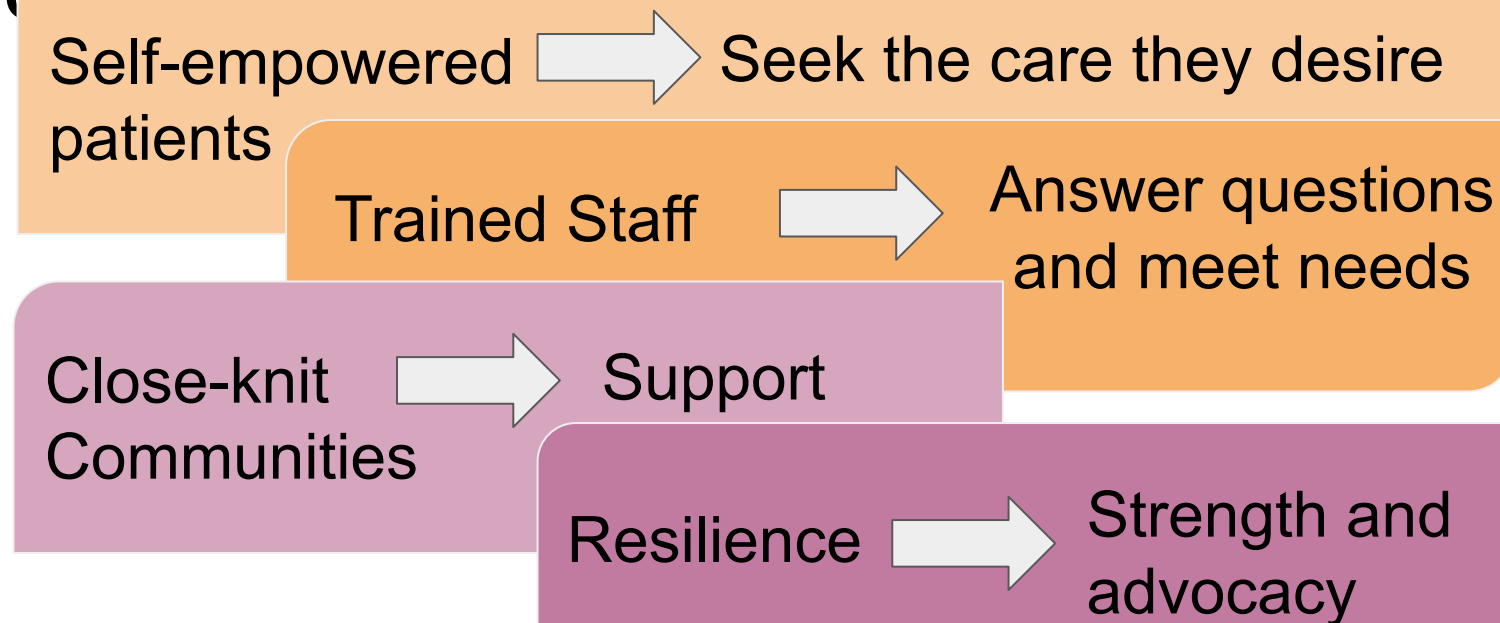
Two medications used: Mifepristone (taken first) and misoprostol (taken 24-48 hours later). This is the most effective regimen with the least side effects.<sup>2</sup>

### Unique Challenges in Rural Abortion Access



**Safety Concerns:** Some have safety concerns despite other evidence. An analysis in rural India found that medical abortion access reduced at home attempts of abortion from 32% to less than 2%.<sup>5</sup>

**US FDA REMS Requirement:** As of December 2021, Mifepristone can be dispensed at any certified pharmacy, new from prior prohibitions.<sup>6</sup> Out of the 141 patients followed during COVID (2020-21), a study found that “95% had a complete abortion (via telehealth care) without (further medical) intervention”.<sup>7</sup>



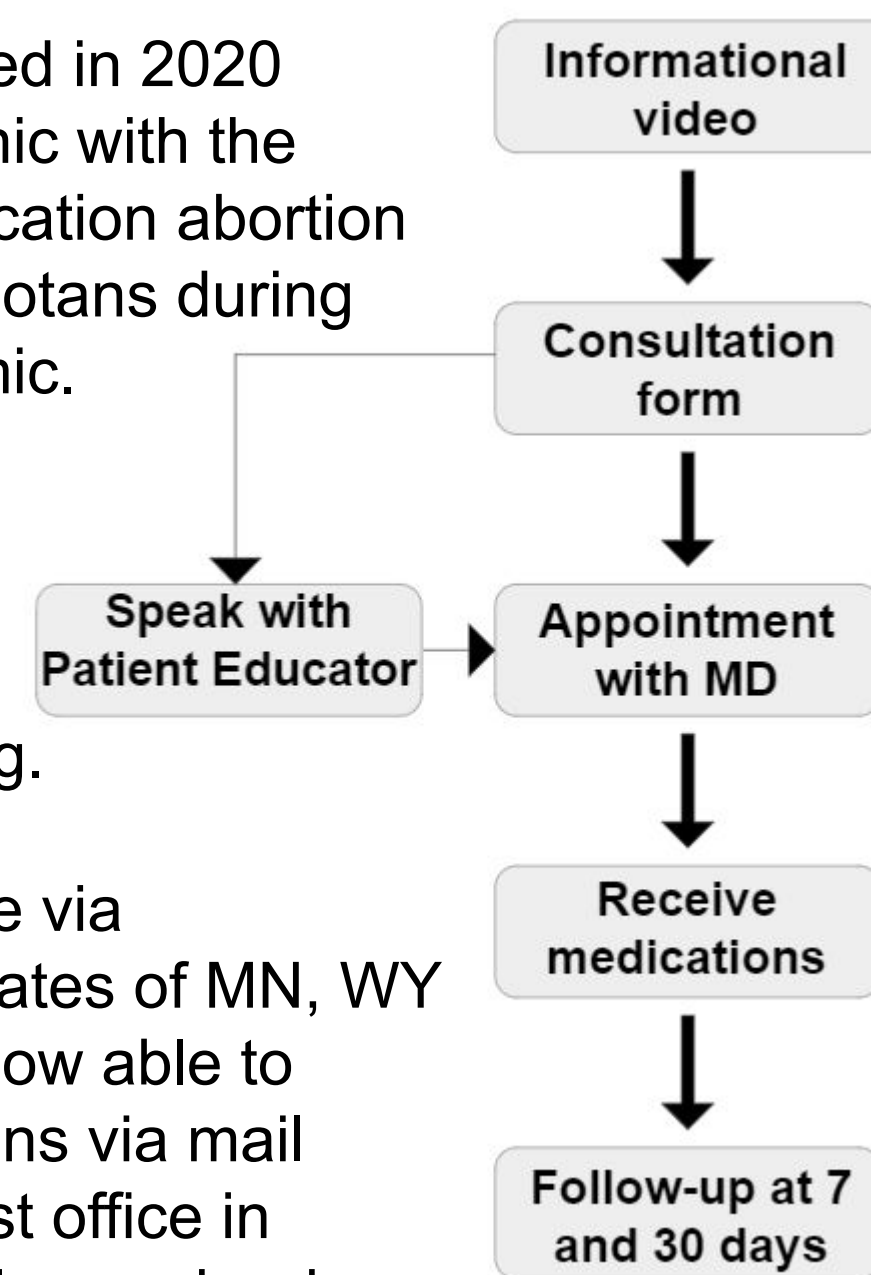
## What is Just the Pill?

Just the Pill (JtP) started in 2020 initially as a mobile clinic with the goal of providing medication abortion access to rural Minnesotans during the COVID-19 pandemic.

Starting in 2021, JtP began expanding its services to the states of Montana & Wyoming.

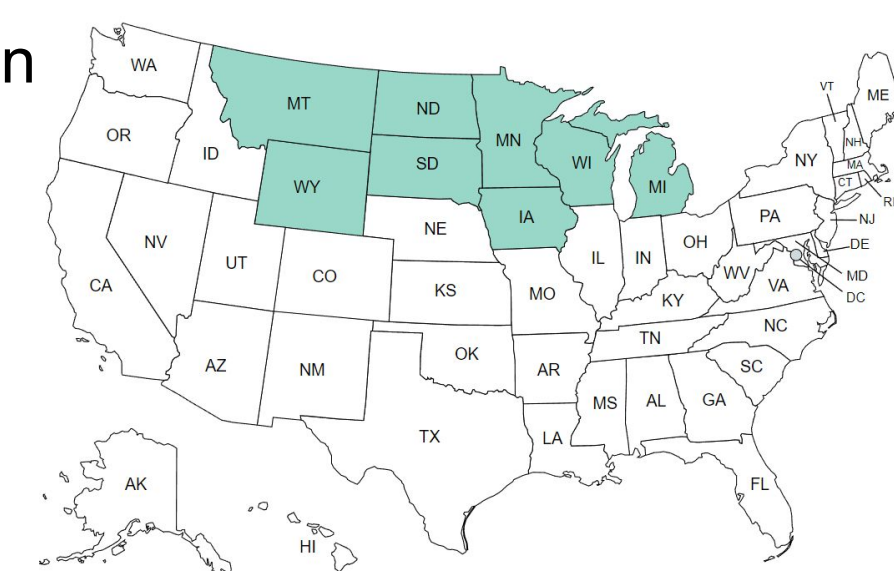
Appointments are done via telehealth within the states of MN, WY and MT. Patients are now able to receive their medications via mail or pick-up from the post office in MN, MT and WY. For those who do not live in these states, they can drive to one of the states for the appointment and for the medication.

In addition to providing access to abortion care, JtP offers birth control options as well as treatment for sexually transmitted infections.



## Project Goals

- Volunteer with Just the Pill to serve people in the upper midwest who need abortion access (MN, WI, MT, ND, SD, IA, MI, WY).
- Gain perspective on the challenges and modalities that are unique to rural healthcare by interacting with patients.
- Practice professional communication on sensitive topics like reproductive healthcare.



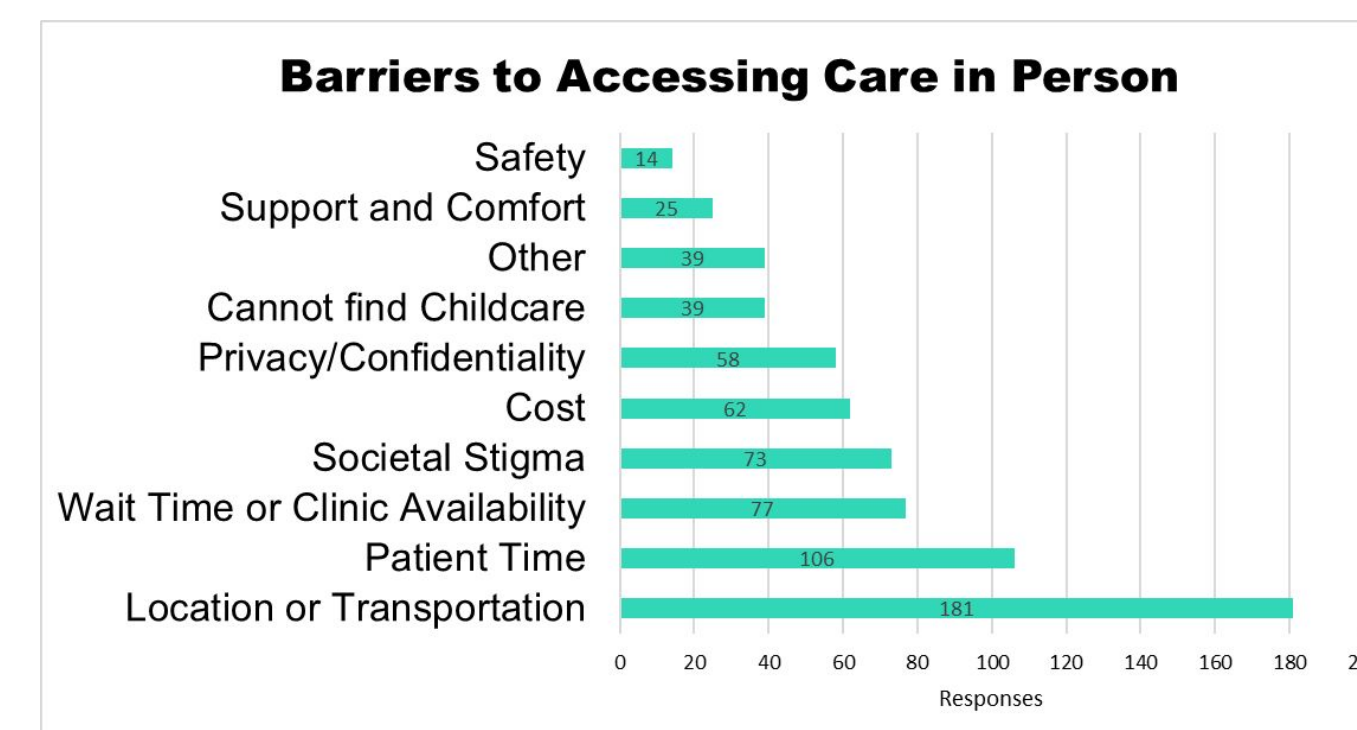
## Methods

- **Patient Population:** Pregnant people seeking abortions who reside in areas that have limited access to abortion services.
- **Success looks like:** Reducing JtP's administrative burden so that its staff can focus on patient care and advocacy.
- **Actions taken:**
  - Assisted JtP in EMR documentation
  - Texted with patients: scheduled appointments, referred to financial assistance organizations, answered questions
  - Analyzed QI data that will be used to inform legislators, funders, and JtP's operations

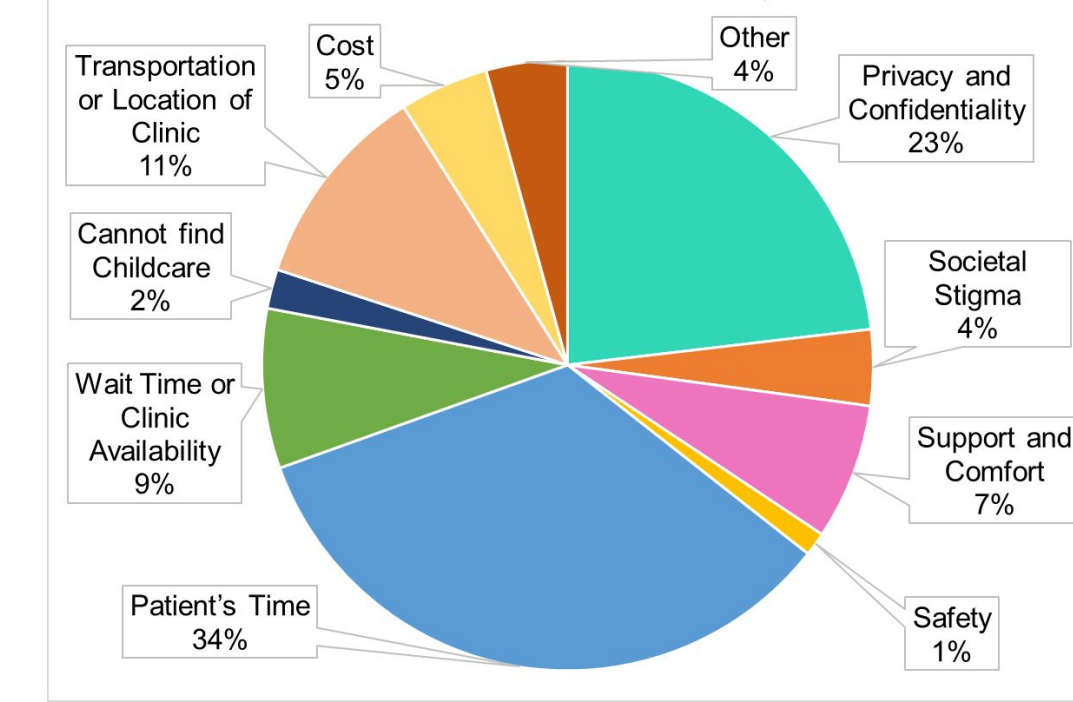
## Results

34.1% of respondents said that without abortion services online they would either continue their pregnancy or have to delay care significantly more than two weeks.

87% of respondents listed no drawbacks to receiving care online.



### Patient Reasons for Choosing Online Care



## Discussion and Future Directions

- Location/Transportation was the most reported barrier to receiving in-person care, but the majority of patients reported receiving online care for reasons related to time and privacy
- Most (76%) patients learned about JtP via Google, yet few (6.4%) had concerns about legitimacy
- Traveling to have phone calls (1.8%) or pick up mail (3.6%) remained barriers to receive care. JtP is currently working to expand services.
- JtP is filling a major gap in access to abortion healthcare, given the number of respondents who would have delayed receiving care by more than 2 weeks without JtP

### Reflections:

We learned how to help patients advocate for their health and wellbeing during stressful life circumstances. We also learned just how vital JtP's services are via witnessing the gratitude of patients and analyzing survey results.

### Future Directions

- Collect and analyze data regarding reach and use of JtP's services to determine mechanisms to expand knowledge of services
- Streamline volunteer process

## References

1-S.C. Department of Health and Environment Control, 2021 *Methods of Abortion*  
 2-Just the Pill, 2021  
 3-The American College of Obstetricians and Gynecologists, 2016, *Health Disparities in Rural Women*  
 4-Guttmacher Institute, 2021 *Medication Abortion*  
 5-Iyengar K & Iyengar SD, 2016 *Reproductive Health*  
 6-U.S. Food and Drug Administration, 2021, *Mifeprex (Mifepristone) Information*  
 7-Upadhyay et al, 2021 *JAMA Netw Open*  
 8-Nasser, H.E. *One in Five Americans Live in Rural Areas*, 2017, *US Census Bureau*

## Acknowledgments

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