Measuring abortion service quality

Despite progress in assuring the provision of safe abortion, significant disparities remain in access to and quality of abortion services around the world. Currently, no consistent, valid, reliable method exists to routinely measure quality in abortion care, impeding learning and improvement.

To address this need, in 2018, Metrics for Management, Ibis Reproductive Health, and Ipas launched the Abortion Service Quality (ASQ) Initiative, to develop the first-ever global standard for measuring the quality of abortion services in low- and middle-income countries. The ASQ Initiative is focused on developing, validating, and championing the widespread adoption of a common metric which can be used to assess service provision in facilities and at out-of-facility locations.

**ASQ INITIATIVE STAGE 1: WHAT WE KNOW**

ASQ Initiative researchers collected and collated existing tools in use by 12 non-governmental organizations, clinics, and national health ministries across more than 80 countries, to categorize indicators and to develop a theoretical framework. This effort yielded 1,093 unique indicators in use to measure quality of care in abortion services. In collaboration with a global reference group of reproductive health experts, these indicators were classified into 13 domains and 32 sub-domains, then evaluated with the goal of reducing the list to identify indicators with the most value for measuring abortion service quality. Experts also contributed to the selection of priority abortion outcomes, against which all indicators would eventually be tested.

**ASQ INITIATIVE STAGE 2: DEVELOPING CLIENT-CENTERED INDICATORS**

To ensure that the final indicators and resulting ASQ tool appropriately and adequately address women’s concerns and values for quality care, we conducted in-depth interviews and focus group discussions in Argentina, Bangladesh, Ethiopia, and Nigeria, with women who had received abortion services. We recruited from a range of service and support models including hotlines, accompaniment models, community pharmacists, call centers, and clinics. We specifically aimed to include perspectives from young women, those whose abortion occurred after 12 weeks’ gestation, and women who have had more than one abortion. Findings contributed to the development of new client-centered indicators that were added to the list of potential indicators – some of these were conceptually new, while others provided an alternative method of assessment.

**ASQ INITIATIVE STAGE 3: WHAT MORE WE NEED TO KNOW**

The next stage of the ASQ Initiative is testing the relationship between a shorter list of prioritized indicators and abortion service outcomes in multiple regions of three countries. In-person field testing of indicators is underway with partners from public and private facilities, non-governmental organizations, and out-of-clinic sites in Bangladesh, Ethiopia, and Nigeria. After a pause in data collection due to the COVID-19 pandemic, data collection resumed in October 2020 with added COVID-19 risk mitigation measures.

**ASQ INITIATIVE FINAL STAGE: MAKING ABORTION SERVICE QUALITY MEASURABLE**

All field testing is expected to be complete by August 31, 2021. Data analysis, and indicator revisions will then take place with final feasibility testing and reporting expected by March 31, 2022 and final ASQ Initiative results expected in July 2022. The resulting indicators will be validated, reviewed, published, and widely disseminated for implementation — enabling governments, policy makers, and health care providers to strengthen abortion quality. The indicators will also assist donors in assessing and supporting evidence-based interventions in abortion care.

ASQ Initiative progress updates are available at ASQ-initiative.org.