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Online Abortion Provider Christie Pitney of Forward Midwifery: “Fast, Convenient Care”

PUBLISHED 1/28/2022 by CARRIE N. BAKER

“Abortion and all sexual and reproductive healthcare is just healthcare,” said Christie Pitney, a midwife serving patients in California, Colorado, Oregon and Massachusetts. “It should be accessible without having to jump through all of these hoops.”



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"Overall, people feel really confident about doing it at home," telehealth abortion provider Christie Pitney told *Ms.* (Pitney's shirt reads, "Since people have been birthin', people have been abortin'" —a quote from Dr. Ghazaleh Moayed.)

(Forward Midwifery / Instagram)

As we await the fate of Roe v. Wade, Ms.'s "Online Abortion Provider" series will spotlight the wide range of new telemedicine abortion providers springing up across the country in response to the recent removal of longstanding FDA restrictions on the abortion pill mifepristone.

Christie Pitney is an advanced practice midwife with Forward Midwifery, serving patients seeking to end early pregnancies in the states of California, Colorado, Oregon and Massachusetts. Christie works with Plan C, is an Aid Access provider, volunteers

for the Miscarriage & Abortion Hotline and is part of the MYA Network of telehealth abortion providers.

Ms. spoke to Christie about how and why she began offering telehealth abortion services.

Carrie Baker: Could you tell me about your background and practice?

Christie Pitney: *I am a certified nurse midwife, and a sexual and reproductive health nurse practitioner. I had always wanted to work in abortion and reproductive health. During the pandemic, I reached out to Dr. Rebecca Gomperts of AidAccess to see how I could help. They did not have a provider for California yet so I was able to step into that role. Then I started Forward Midwifery, my private telehealth practice. I began offering telehealth abortion through Forward Midwifery and Aid Access for California in February of 2021 and then Massachusetts in May of 2021. I added Oregon in November of 2021. Through Forward Midwifery, I began serving Colorado in January of 2022.*

@forwardmidwifery Ding Dong again. #dingdong
#medicationabortion #abortion #abortiontok
abortionmidwife #athomeabortion #plancpills #aidaccess
#myanetwork 🎵 original sound – forwardmidwifery

Baker: Are you thinking about expanding to other states?

Christie Pitney: *I currently have pending licenses for New Mexico, D.C. New York and then potentially more as well. I want as*

many options out there as possible for folks.

Baker: How do you provide telehealth abortion care?

Pitney: As with everything, I want people to have as many options as possible. At Forward Midwifery, they have the choice of doing everything through email, online consultation, a phone call or a video call.

Baker: Can you take me through the process?

Pitney: They request an appointment time on the website and then we approve that time and send them the intake forms, including a telehealth consent form asking what state they're in and some basic medical history questions. There's a question about how they want to do the visit. I would say it's 50/50 phone call and email. Very, very few want a video call. For email care, we use a HIPAA-compliant electronic medical record system.

If it's going to be by email, then we might just send a few messages back and forth. If they have any questions, I answer them, they confirm their address, and then our requested price is \$150, but I don't want financial burdens to be a barrier for anyone. So I do a sliding scale or more like a pay-what-you-can model. If someone can't pay \$150, then I do payment plans. So they might pay 50, 50, 50, or 75 and 75. Some of them say, "I have \$10 to my name, and that's what I was going to use for groceries, I really can't afford anything." And that's okay, we're still going to make sure that they get the care that they need.

@forwardmidwifery #abortion #abortionaccess
#abortionissafe #abortionisnormal #abortionathome
#medicationabortion #telemedabortion #prochoice 🎵 Body
– Megan Thee Stallion

Baker: Are you working with funds to help make that up?

Pitney: *There was an anonymous donor who gave some funding to the pharmacy that I'm using, and so we're able to use that fund. The cost can be covered, up to \$75, which covers the cost of the medication and the shipping. But then sometimes I'm still donating the consultation time. I am also working with several of the abortions funds that help folks in the state that I provide services in. We have these funds listed on the Forward Midwifery website.*

Baker: Do you take insurance?

Pitney: *I don't at this time, but I'm working on getting credentialed so hopefully in the future I will. I'm going to start with Medicaid and then maybe eventually private insurances. I want to focus on Medicaid first to prioritize the patients with the most need.*

Baker: Do you do any patient education before you have a consult with a patient?

Pitney: *Yes, in the forms that they get right off the bat, it has patient education. So it has instructions on what to expect, on how to take the medication, on what the medications are that they're going to receive. We have a four-page typed out consent form and some infographics. We find that sending it in*

both formats is helpful because everyone has different learning styles.



Christie Pitney and her mother Merlyn Pitney serve as clinic defenders in July 2021.

(Forward Midwifery / Instagram)

Baker: If they schedule a phone appointment, what happens?

Pitney: Patients have already received the patient education prior to the phone call, so usually the phone call is answering additional questions that they might have. For some

patients, it's five minutes or less. Some patients have a little more anxiety and more questions, and I've had them go on, usually no more than about 30 to 40 minutes.

Baker: Are you able to do same day consults?

Pitney: Yes, most of the time, we are able to.

Baker: Do you offer appointments on weekends or at night?

Pitney: Right now, we aren't but my schedule will be changing soon. So it is a possibility.

Baker: What pharmacy do you use?

Pitney: Honeybee Health. I also just emailed American Mail Order Pharmacy to get connected with them as well.

Baker: How long does it take for the pills to reach the patients?

Pitney: I'm having them mailed with USPS priority shipping, so one to three days from when I send the prescription to the pharmacy.

Baker: What kind of follow up care do you provide to patients after they get their pills?

Pitney: We don't schedule any sort of follow up. We tell the patients that they can call us at any time though. I have a phone number that rings to me 24/7 and I have a clinical assistant who's available Monday through Friday, eight hours

per day. Between the two of us, they'll always be able to get a hold of someone. We also provide the Miscarriage and Abortion Hotline phone number, so they can call or text them if for some reason they can't get ahold of me. We let them know that they can do a pregnancy test about four weeks after taking their medications. But ultimately, monitoring pregnancy symptoms is the most reliable way to know that the medications were successful and that everything went well for them.

Baker: How often do people follow up with you by phone or text afterwards?

Pitney: Rarely. Less than 10 times ever for my Forward Midwifery patients. Aid Access utilizes a help desk team so I don't always know about patient follow up unless they have a medical question.



View this post on Instagram

A post shared by Forward Midwifery (@forwardmidwifery)

Baker: How many patients have you seen since you opened in February?

Pitney: *I have had 1,097 patients overall through November. December was my busiest month that I've had since I started. I had a total of 274 patients. And then 128 through mid-January.*

Baker: Who are your telehealth patients?

Pitney: *They are a whole range of people. I've had minors—I think the youngest that I've had was 15 years old—up to mid to late 40s. Most have had at least one child. My clinical assistant speaks Spanish so I'm able to see Spanish speaking patients.*

For a little while, I was keeping a map of where the patients were located in California. It was all over, but by far the most patients I was getting were from Los Angeles. It's a progressive state, a progressive city, with multiple abortion clinics, but there are just so many different barriers that we don't always think about to getting healthcare in general and abortion specifically. So people were still turning to telehealth.

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Baker: Are many of your patients coming from out of state into the states you cover to get this service?

Pitney: I think that that is happening more now, as more and more restrictions are popping up since S.B.8 and S.B.4 in Texas. We have had 10 to 20 Texas patients in just the last few weeks.

Baker: Do you have a sense of why your patients are using telehealth?

Pitney: Yes—because they want fast, convenient care. There are often long wait times at Planned Parenthood. And I've had folks tell me that they're doing it because they have had horrible experiences going to a clinic and going past protesters, and they can't deal with that trauma again. Others felt that this was a more private way of doing things. Childcare is a huge, huge thing too. Patients also come to us because of our low price of \$150, and because we allow rent plans.

Baker: How do your patients find you?

Pitney: Plan C and social media platforms like TikTok and Instagram. I post a lot of TikTok videos to educate folks about telehealth abortion.

@forwardmidwifery Getting reported for posting informative content. #abortion #medicationabortion #abortionaccess #abortionisnormal #plancpills #myanetwork #abobo original sound – forwardmidwifery

Baker: Do you offer advance provision abortion pills?

Pitney: Yes, absolutely. I'm happy to do that for all of my states.

Baker: Do you offer missed period pills?

Pitney: We are doing that as well, yes.

Baker: How have your patients responded to telehealth abortion?

Pitney: People overall are very thankful and appreciative. Overall, people feel really confident about doing it at home.

One thing that I think is hugely important for people to know is that if you're going to do a medication abortion, whether it's in clinic or at home through telehealth, the abortion works at home no matter what. If you go to a clinic, you're going to get the [mifepristone] and take it there, but the mife

has little to no side effects, and then 24 to 48 hours later, you take that miso [misoprostol] and that's when the bleeding and cramping starts. Any bleeding, cramping, passing of the pregnancy tissue is going to happen at home, regardless of whether you get your medications at a clinic or in the mail.

@forwardmidwifery. Oops. Accidentally dropped this here again. [#abortionbyemail](#) [#abortion](#) [#21stcenturyabortion](#) [@plancpills](#) [↗ original sound - forwardmidwifery](#)

Baker: What are your motivations for offering telehealth abortion?

Pitney: *I got into it because I lived in a rural area, and it was hard for folks in my area to access that care. I lived in the Central Valley between Fresno and Bakersfield, where the closest abortion clinic was a 45-minute drive away from where I lived. Unfortunately, I wasn't able to offer abortion services at my FQHC [federally qualified health center] because of political restrictions. Many of the folks living in that area are working six or seven days a week, they have childcare needs, they don't have reliable transportation. So even though they live in California, it was still too much to get to that clinic. And so that's why I think telehealth is an amazing option for folks who need it.*

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Any bleeding, cramping, passing of the pregnancy tissue is going

to happen at home, regardless of whether you get your medications at a clinic or in the mail.

Baker: How does it feel to be able to help people in this way?

Pitney: *It's so important. It feels great to be able to help my patients in having autonomy, independence and control of their lives.*

Baker: Have you experienced any harassment for offering telehealth abortion by anti-abortion extremists?

Pitney: *I have on social media, but no personal threats or mail.*

Baker: Was it difficult to start your telehealth abortion practice?

Pitney: *I didn't find it that difficult to get started. I got malpractice insurance, I got the electronic medical record system, I set up accounts with GenBioPro and Honeybee Health.*

It feels great to be able to help my patients in having autonomy, independence and control of

their lives.

Baker: The FDA requires providers to sign up with the mifepristone distributors Danco or GenBioPro. Is that burdensome?

Pitney: *I did not find it to be burdensome. Providers might see that and think that they're on some list or that it's gonna be this huge effort to make an account, but it's really like a two-page document that you have to fill out. For someone who already has an established practice, adding telemedicine abortion is such a simple thing that can be handled in one day.*

Baker: What do you do with Plan C?

Pitney: *I am a consultant for Plan C. I talk to providers about starting their own telehealth practice, or connect them to existing providers like Choix and Just the Pill. When I was starting, I used Plan C's Access Delivered toolkit to start my practice. I later contributed to the second edition and now I help distribute the toolkit. Plan C asked me to come on and help other providers navigate setting up a practice. It's just so important that we have as many providers doing this work as possible. The more providers doing this work the better.*



Pitney (left) and her midwifery cohort. ([Forward Midwifery / Instagram](#))

Baker: Any final thoughts?

Pitney: Abortion and all sexual and reproductive healthcare is just healthcare. It should be accessible without having to jump through all of these hoops. While I don't think that it should be a political issue, in the U.S. it is, so that makes it important for people to be involved politically, to vote and sign petitions and contact their local politicians. I think it's important that people stay informed and get involved in whatever way they are able to. If they have money to donate, if they have time to donate, if they can share things on social media, whatever that looks like for people. It's a critical issue with *Roe v. Wade* most likely getting overturned. It's only going to become more important that we have as much access as possible in the states that are not going to restrict abortion.

Explore the full collection of online abortion providers profiles:

- Dr. April Lockley Answers Your Questions About Abortion Pills: 'To Protect Each Other As Much As We Can', Ms., March 16, 2022
- Online Abortion Provider Razel Remen: 'Telemedicine Abortion Is Safe and Reliable' Ms., March 2, 2022
- Telemedicine Abortion Provider Rebecca Gomperts Gets Abortion Pills Into the Hands of Those Who Need Them: 'It's a Privilege' Ms., Feb. 23, 2022
- Telemedicine Abortion Provider Alison Case: "Helping People in Texas Access Abortion Care" Ms., Feb. 15, 2022
- Telemedicine Abortion Provider Melissa Grant: "Abortion? Yeah, We Do That." Ms., Feb. 2, 2022.
- Online Abortion Provider Christie Pitney of Forward Midwifery: "Fast, Convenient Care," Ms., Jan. 28, 2022.
- Online Abortion Provider Julie Amaon of Just the Pill Is "Making Abortion as Easy as Possible for People," Ms., Jan 26, 2022.
- Online Abortion Provider and "Activist Physician" Michele Gomez Is Expanding Early Abortion Options Into Primary Care, Ms., Jan. 19, 2022.
- Online Abortion Providers Cindy Adam and Lauren Dubey of Choix: "We're Really Excited About the Future of Abortion Care," Ms., Jan. 14, 2022.
- Telemedicine Abortion Provider Dr. Deborah Oyer Supports Patient Autonomy and Control: "No Different Than When They're in Clinic," Ms., Jan 12, 2022.
- Online Abortion Provider Robin Tucker: "I'm Trying To Remove Barriers. ... It Feels Great To Be Able To Help People This Way," Ms., Jan. 4, 2022.
- Abortion on Demand Offers Telemedicine Abortion in 20+ States and Counting: "I Didn't Know I Could Do This!" Ms., June 7, 2021.

Is It Legal to Order Abortion Pills Online?

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