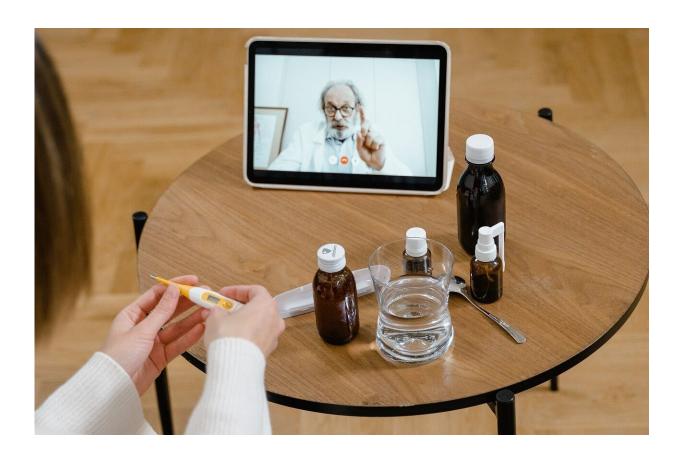


Exploring patient preferences for telehealth sexual and reproductive health care

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Credit: Pixabay/CC0 Public Domain

Telehealth services for medical care have increased rapidly since the start of the COVID-19 pandemic, but little research explores how patients feel about these services for sexual and reproductive health care.



In an exploratory study published in the journal *Family Practice*, CUNY SPH Ph.D. student Silpa Srinivasulu, Associate Professor Meredith Manze, and Associate Professor Heidi Jones sought to understand patient acceptability of telehealth sexual and reproductive health in <u>primary care</u> settings and strategies to strengthen remote care for patients.

The team conducted focus groups and interviews with 30 New York women of reproductive age and found that patients prefer telehealth for sexual and reproductive health in primary care, especially for simple conversations and questions. Telehealth for more complex conversations, like pregnancy planning and fertility, seemed challenging. Overall, telehealth was convenient, offered improved access, and minimized power dynamics that tend to impact patient-provider interactions.

Their experiences underscored the importance of continuing and expanding primary care telehealth services as the modality may not only expand access to care, but also patients' reproductive autonomy by offering them opportunities to discuss comprehensive sexual and reproductive health in ways that work best for them.

"Primary care providers can strengthen the quality of telehealth sexual and <u>reproductive health</u> by taking extra steps to build trust and rapport with patients," says Srinivasulu. "Providers should also acknowledge the seriousness of pregnancy-related conversations and discuss ways to provide this care remotely to interested patients."

More information: Silpa Srinivasulu et al, "I totally didn't need to be there in person": New York women's preferences for telehealth consultations for sexual and reproductive healthcare in primary care, *Family Practice* (2022). DOI: 10.1093/fampra/cmac102



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