# From 0 to 73% in 12 months: rapid uptake of early medical abortions in the Northern Territory

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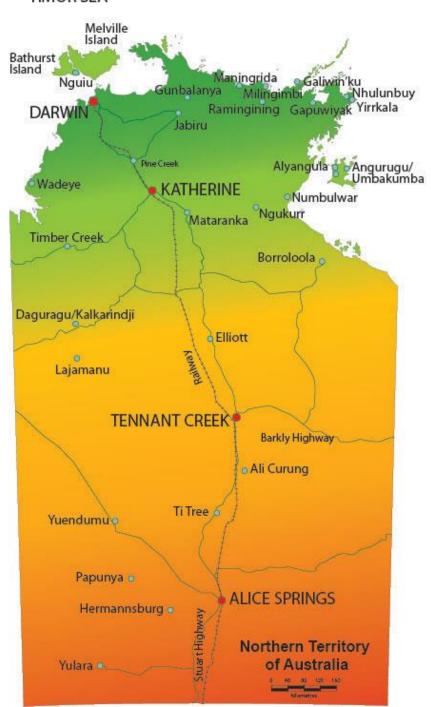
We know that early medical abortions are:

safe
effective
acceptable to women
cost effective

and yet uptake of medical abortions in Australia remains low.



# TIMOR SEA



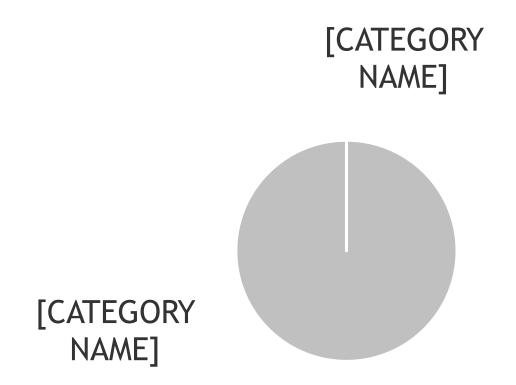
This provided the opportunity to compare proportion of women choosing early medical abortions and surgical abortions where both were provided for free.



# Number and percentage distribution of surgical terminations by hospital, 2006-2011, Northern Territory

Hospital	Number	Per cent
Royal Darwin	4275	78.1
Alice Springs	834	15.2
Darwin Private	364	6.7
Total	5,473	100.0

Before July 2017, 100% of abortions in the NT were performed in hospitals.





### THERN TERRITORY DEPARTMENT OF HEALTH

# Termination of Pregnancy Prescribed Reporting Form

To comply with the Northern Territory Termination of Pregnancy Law Reform Regulations the following information must be provided within the following timeframes:

- i. Early medical termination within 28 days of the last consultation with the woman
- ii. Surgical termination within 28 days after performance of termination
- For any other termination within 28 days after performance of termination.

## 1. General information

Woman's date of birth:	Click here to enter text.	Suitably qualified medical practitioner's full name:	Click here to enter text.
Gestational age:	Click here to enter text.	Provider number:	Click here to enter text.
Date termination initiated / performed:		Is the woman of Aboriginal or Torres Strait Islander origin?	No □ Yes, Aboriginal □ Yes, Torres Strait Islander □ Yes, both Aboriginal and Torres Strait Islander □
Region of woman's usual residence (Local Government Area)			

### 2. Method of termination

a) Early medical termination		Woman informed of requirement to be vidistance from an emergency gynaecolog Yes □ / No □ Location termination took place(Local go	ical service	
b) Surgical Termination (14 weeks or under)		Name of facility:		
c) Termination post 14 weeks		Name of second suitably qualified medical practitioner consulted		
3. Was this termination performed in an emergency? (as per Section 10 of the Act): Yes  \( \triangle / \text{No} \) \( \triangle \) 4. Follow up appointment made \( \( \left( \text{if } yes \right) \) \( \triangle \)				
Signature of suitably qualified medical practitioner		Date:		

This form must be either emailed to: WomensHealth.DoH@nt.gov.au



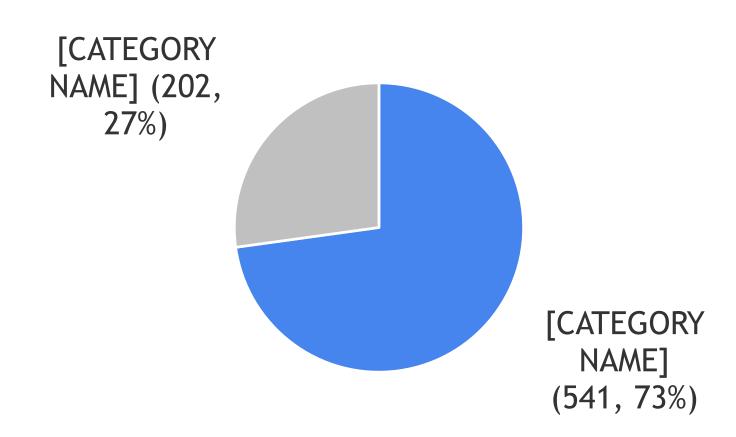
# Welfare Association of NT Inc.

- Source of referral
- Age at first presentation
- Usual residence (local government area)
- Aboriginal and Torres
   Strait Islander status
- Language other than
   English spoken at home
- Access to Medicare

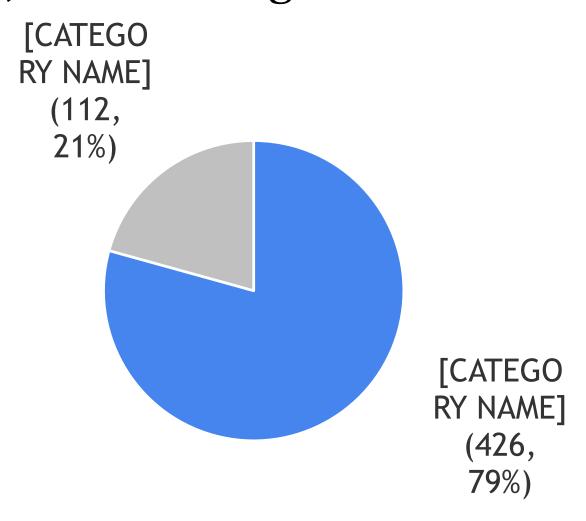
- Initial contraception failure
- Gestation at abortion provision
- Date of abortion provision

- Is abortion complete at 2/52?
- Retained products of conception?
- Required follow up for complications
- DNA to follow up
- Post abortion contraception

Between July 2017 and June 2018 73% of abortions in the NT were early medical abortions in the community.



79% of these early medical abortions were performed at Family Planning NT in Darwin or Palmerston, free of charge.



72% of clients were referred to Family Planning NT by their GP.

	Family Planning NT data – early medical abortions	NT overall data  – all abortions
Usual residence Darwin or Palmerston	87% (372/426)	73% (544/742)
Aboriginal or		

20% (148/742)

11% (47/426)

**Torres Strait** 

Islander

If early medical abortions are fully funded and available in the community setting, women are likely to choose this option.

Aboriginal and Torres Strait Islander women and women from remote areas remain under-represented.



# Thank you to

Northern Territory Primary Health Network (NT PHN)

Women's Health Policy Officers formerly Women's Health Strategy Unit at NT Department of Health

WhatRU4NT? advocacy group who fought for these changes

