

Safe abortions critical to sexual and reproductive health - A model of care for early medication abortion (EMA) for vulnerable populations at the Kirketon Road Centre (KRC), Sydney.

Authors:

Cho LC¹, Corneliss VJ^{1,2}, Silins E^{1,3}, Read E^{1,2}

¹Kirketon Road Centre, Kings Cross, Sydney, NSW; ²Kirby Institute, UNSW Australia, Sydney, NSW; ³NDARC, UNSW Australia, Sydney, NSW

Background/Purpose:

Access to safe medication abortions is a critical part of sexual and reproductive health yet access to these services is hampered by social marginalisation, stigma and cost. The NSW Abortion Law Reform Act 2019 theoretically relocated abortion out of the law and into the healthcare system. The practicalities of access ensure abortion is by no means easy or equitable. KRC's early medication abortion (EMA) model of care reduces these barriers and provides free or low cost, confidential medication abortion care to people who are already sidelined from mainstream health systems.

Approach:

Eligibility is assessed using evidenced based guidelines for EMA. Clients attend low cost imaging and other assessments and pathology tests are free. Medication packs and MS-2 Step are supplied by a local pharmacy for a dispensing fee, or at cost price if without Medicare. Appointments are face-to-face and telehealth.

Outcomes/Impact:

Since November 2021, clients from marginalized populations have been able to access EMA at KRC. They have been referred by a peer-based sex worker organisation, NGO's and by word of mouth. Aboriginal people, homeless people and people from culturally diverse backgrounds have attended. Unplanned pregnancy care would otherwise have been inaccessible to these clients. Feedback has been overwhelmingly positive with many expressing a sense of relief their needs were being met.

Innovation and Significance:

KRC's EMA model of care increases access to abortion services by providing non-judgemental, high quality and confidential sexual and reproductive health care services to people who may otherwise face stigma in mainstream services or are isolated in society even before dealing with unplanned pregnancy. The model utilises a multidisciplinary team approach consisting of trained counsellors, nurses, midwives and doctors. It completes the suite of reproductive services at KRC which includes sexually transmitted infection (STI) testing and treatment, contraception, antenatal care and referral to surgical abortion care.

Disclosure of Interest Statement:

PR has received research funding from Gilead Sciences, as well as institutional and individual honoraria from Gilead Sciences, Abbvie and MSD.