

Understanding the availability of public abortion in Australia: a review of HealthPathways

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Background

- Medical and surgical abortion care is difficult to access in Australia, particularly in rural and regional areas.¹⁻³
- Barriers to primary care provision of medical abortion include lack of training, stigma, fear of demand, and lack of support from public hospitals.⁴⁻⁶



- Little is known about abortion service availability in Australia:
 - ✗ no transparent, coordinated referral system for abortion care
 - ✗ no nationally reported data on public availability of abortion services.⁷
- HealthPathways is an online system used by primary care clinicians to access referral pathways to local services.⁸ Reviewing these pathways offers an opportunity to address this evidence gap.

Aim

To describe referral pathways for abortion services available on each HealthPathways portal in Australia.

Methods

- An audit of HealthPathways was conducted from January - June 2022.
- Permission was sought from each HealthPathways portal in Australia (34) in order to access their online content.
- Search terms “abortion”, “termination of pregnancy” and “unplanned pregnancy” used to access relevant pages on each HealthPathways portal.
- Text data were extracted from each portal for to public, private or General Practitioner (GP) referral options for medical and surgical abortion.
- Data were analysed to collect counts of HealthPathways portals with public, private or GP provider referral options, messaging directing referrers away from public services, and restrictive inclusion criteria for referral acceptance.

Conclusion and Recommendations

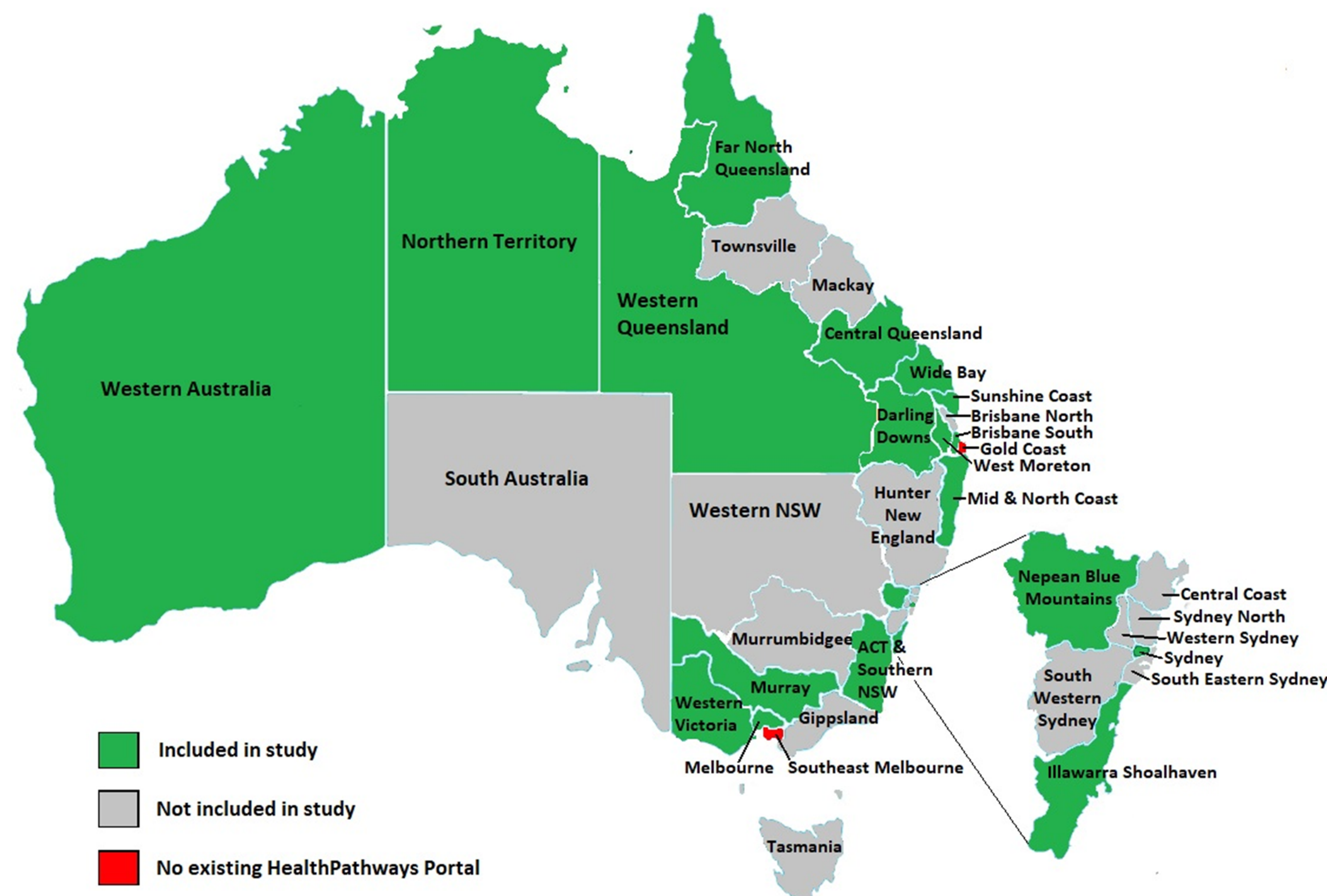
- Many regions across Australia do not have public abortion services, or do not have information available to GPs about how to access these services.
- Limited public provision means that women will continue to experience barriers to abortion access.
- Equitable and accessible abortion in Australia requires:
 - National data collection and reporting on abortion care
 - Transparency around service availability
 - Clear guidelines to support referral pathways
 - Public hospital provision of comprehensive abortion care

References

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Results

17/34 Australian HealthPathways participated in this study.



Availability of medical abortion

35% 6/17 of HealthPathways had **no public referral options**



12% 2/17 **no referral options** (public, private or GP provider)

Of the public options available:

64% discouraged public access

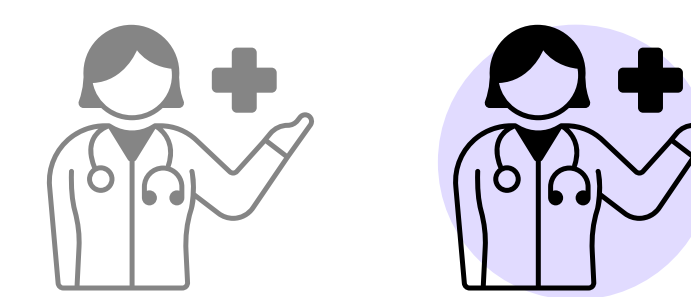
“Does not provide routine TOP [termination of pregnancy] service”

27% displayed restrictive inclusion criteria

“Medically or obstetrically complex patients only”

Availability of surgical abortion

47% 8/17 of HealthPathways had **no public referral options**



18% 3/17 **no referral options** at all (public or private)

Of the public options available:

67% discouraged public access

“Limited service... consider private providers before contacting...”

44% displayed restrictive inclusion criteria

“FDIU [fetal death in utero] only”