

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

Murdoch, JS.¹

Preferred conference theme: Social, political and cultural aspects

Preferred presentation type: Practice-based oral presentation

Background: The proportion of early medical abortions as a total of all abortions in Australia is estimated to be between 15% and 25%. Although abortion has been legal in the Northern Territory (NT) since 1974, prior to 2017 legislation change, early medical abortions were effectively prohibited in the community.

Approach: Family Planning Welfare Association of the Northern Territory (FPWNT) was awarded funding of \$170 per client to provide early medical abortions free of charge in the community. FPWNT raised awareness of medical abortions through media engagement and engagement with general practitioners (GPs) in the region. Clinical protocols and documentation were developed and shared with potential medical abortion providers.

Outcomes: Of 742 abortions in the NT from 1 July 2017 to 30 June 2018, 541 (73%) were early medical abortions, compared with 0% the previous year. The majority of these (429 or 79%) were prescribed at FPWNT clinics in Darwin and Palmerston. Forty-seven of these early medical abortions (11%) were for Aboriginal or Torres Strait Islander women, compared with 148/742 or 20% of all abortions. Only 13% or 54/426 of FPWNT early medical abortion clients were from outside the Darwin/Palmerston region. Nearly three quarters of FPWNT early medical abortion clients (306/426 or 72%) were referred by their GP, with 114/426 (27%) self-referring.

Innovation and significance: The proportion of medical abortions in the Northern Territory is much higher than estimates in other Australian jurisdictions only 12 months after legislation change. This indicates that medical abortion uptake can be increased in Australia by adequately funding primary care providers and providing easy referral pathways for GPs. However, some groups are underrepresented including Aboriginal and Torres Strait Islander women and women from more remote areas of the NT. Further work is required to improve access for these women.

¹. Family Planning and Welfare Association of the Northern Territory