ABORTION: EMPOWERING THE CLINICAL WORKFORCE

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OUTLINE

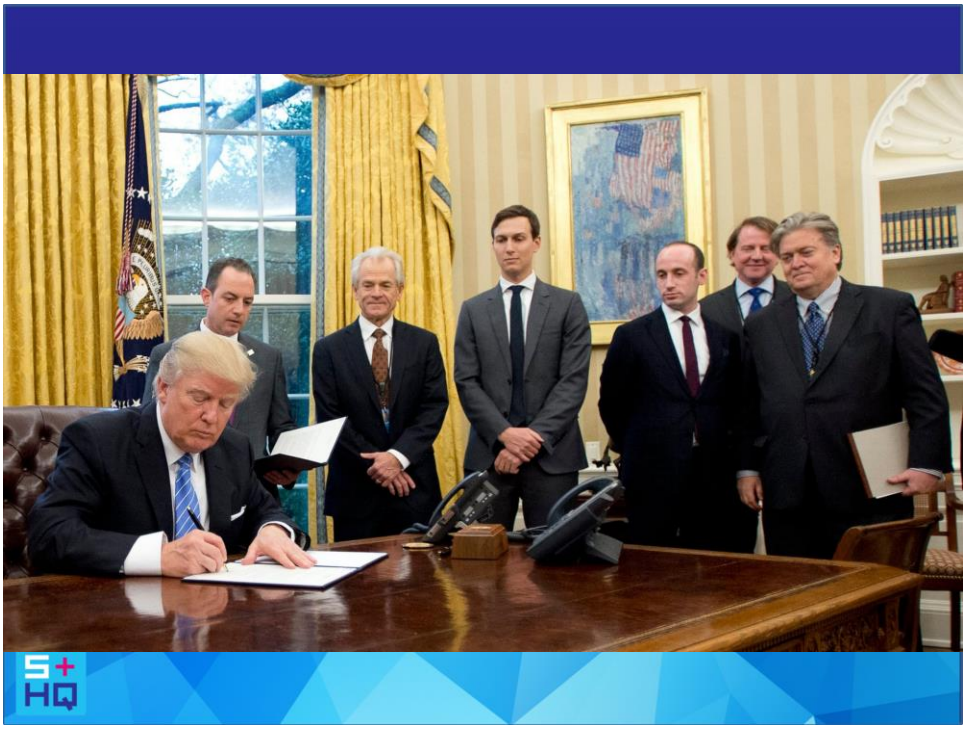
- Global Health
- Attitudes
- Implications of training
- How can we improve?

Health care vs Ethics

- 50% pregnancies in Australia are unintended
- 1 in 4 women have had an abortion
- Complications of pregnancy and childbirth biggest killer of women world-wide: Unsafe abortion: 16 %

Health care vs ethics

- Women are not dying of diseases we cannot treat
- Contraception
- Unsafe abortion



Medical Students

- Petersen: When exposed to abortion care, medical students more likely to report comfort
- Creagh: Qualitative evidence effective teaching strategies in sexual and reproductive health –positive outcomes

Training Programs

- Steinauer et al: Even partial participation in integrated family planning and abortion service provision improves patient care, counseling capacity and changes in attitudes
- Canada: 69% residents wanted more training in abortion and contraception care

Case Study

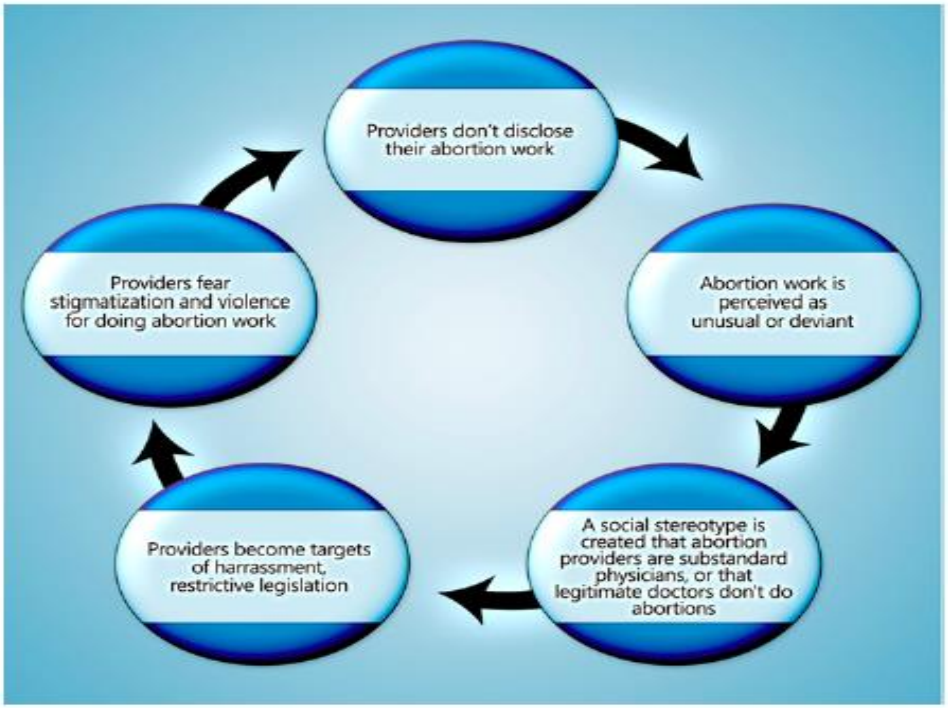
- 20 year-old Woman, Jaime
- G3 P2
- 12 weeks pregnant
- Long Hx Child Sexual abuse and Sexual Assault
- 2 children in care of the department
- Homeless

Medical History

- Methamphetamine addiction
- Hepatitis C
- Depression and anxiety
- Severe post partum haemorrhage 2nd child requiring transfusion

Presents for a referral termination

- Cannot afford to pay for one privately
- Called the tertiary hospital
- ONLY doctor who even considers TOP surgically at that gestation on leave
- No one else trained or willing



The Legitimacy Paradox

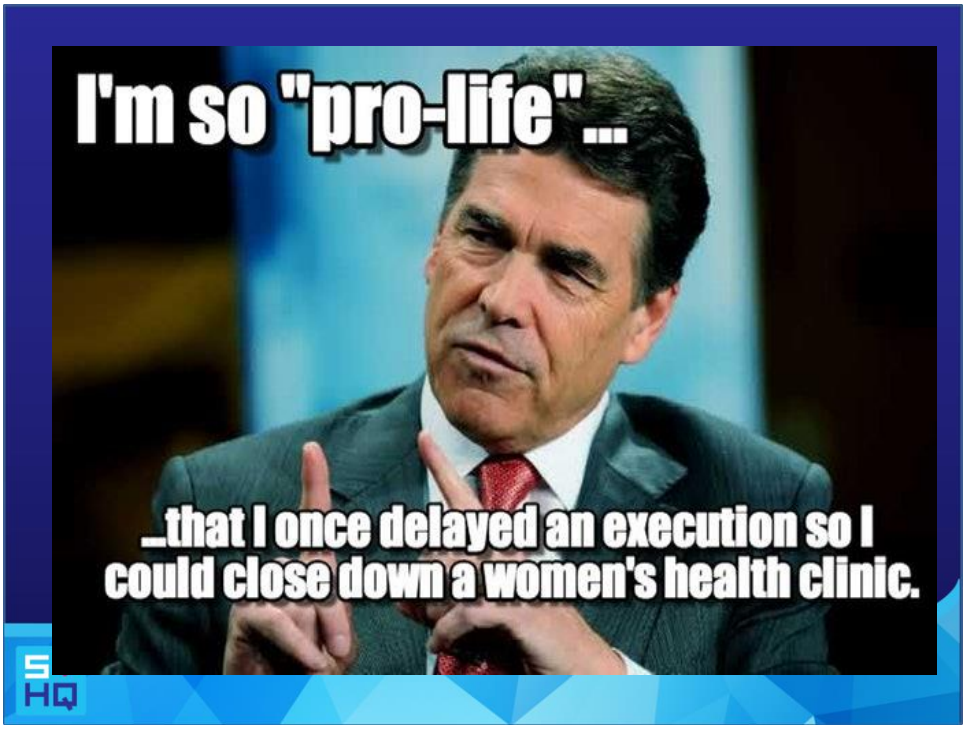
- Stigma and silence produce a vicious cycle
- Perpetuates a stereotype
- “legitimate doctors”
- Legitimacy paradox has adverse consequences for abortion resources, women’s experience, abortion law and policy

Perceptions of GP provision medical abortion

- Increase access
- Essential component of women's health care
- Solution to a workforce shortage
- Primary care nurse involvement; partnership relationship with a GP
- Extra training and skills, links with local services

Advanced Training Module: Victoria

- 5 trained O and G registrars, 4/5 comfortable surgical up to 18 weeks, 1/5 up to 14 weeks
- 20 residents: All confident in LARC insertion, MTOP, and many surgical up to 12 weeks
- All residents would consider this a routine part of their general practice when they qualify



Training in abortion care

- Changes attitudes
- Increases knowledge and skills
- Normalises abortion care
- Increases the perceived legitimacy
- Increases access
- Saves lives

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