

RDav Access to Termination of Pregnancy Policy Position Paper

The Rural Doctors' Association of Victoria (RDav) recognises that sexual and reproductive freedom is a basic human right. Women* should be able to access safe and sanitary termination services in Victoria in a timely manner regardless of their age, location, marital or Medicare status. RDav also recognises that access to termination services is not an isolated issue, and with respect to the barriers to care which exist in regional and rural Victoria, views timely termination access as inextricably linked to good maternity care.

Approximately one third of Australian women will experience an unplanned pregnancy during their reproductive lives¹, and of those women, one in five will undergo a termination of pregnancy². Women living in rural areas and from poorer socioeconomic areas are known to have higher rates of unplanned pregnancy³, yet disproportionately experience increased difficulty in access to termination services⁴.

RDav is committed to working with all relevant stakeholders to ensure rural and regional Victorian women have access to termination services as close as possible to where they live.

Access barriers

There are two methods for termination of pregnancies - medical and surgical - with various clinical factors utilised to determine the safest and most appropriate method.

A medical termination can be available to most women at less than 9 weeks gestation and involves a combination of two medications working together to terminate pregnancy. Additional training and registration is required for doctors to be permitted to prescribe these medications. Only 2850 of Australia's 41,000 general practitioners are registered to prescribe a medical termination⁵. Because of this small number of prescribers, large areas of rural and regional Victoria are without access to termination services, resulting in women travelling long distances to access care⁶.

Surgical terminations are generally performed in the first 14 weeks of pregnancy and require the woman to have an anaesthetic. The procedure involves the surgical removal of the contents and lining of the uterus. Up to 80,000 women undergo a surgical termination every year in Australia⁷.

* RDav recognises that not all people with uteruses identify as women and does not seek to minimise the experiences of those who do not fit with this identity.

¹ Rowe H, Holton S, Kirkman M, et al. Prevalence and distribution of unintended pregnancy: The understanding fertility Management in Australia National Survey. *Aust N Z J Public Health* 2016;40(2):104–09. doi: 10.1111/1753-6405.12461.

² Taft AJ, Shankar M, Black KI, Mazza D, Hussainy S, Lucke JC. Unintended and unwanted pregnancy in Australia: A cross-sectional, national random telephone survey of prevalence and outcomes. *Med J Aust* 2018;209(9):407–08. doi: 10.5694/mja17.01094.

³ Marie Stopes International Australia. Real choices: Women, contraception and unplanned pregnancy. Melbourne: Marie Stopes International Australia, 2008.

⁴ Shankar M, Black KI, Goldstone P, et al. Access, equity and costs of induced abortion services in Australia: A cross-sectional study. *Aust N Z J Public Health* 2017;41(3):309–14. doi: 10.1111/1753-6405.12641.

⁵ Bateson D, McNamee K, Harvey C. Medical abortion in primary care. *Aust Prescr* 2021;44:187-92. <https://doi.org/10.18773/austprescr.2021.050>

⁶ Subasinghe A, McGeechan K, Moulton J, Grzeskowiak L and Mazza D. Early medical abortion services provided in Australian primary care. *Med J Aust* 2021; 215 (8): 366-370. || doi: 10.5694/mja2.51275

⁷ <https://www.betterhealth.vic.gov.au/health/healthyliving/abortion-procedures-surgical>

Unfortunately, timely surgical termination services are out of reach for many rural Victorian women as not all public regional health services offer regular surgical lists.

Other barriers for access to termination services include: stigma around termination; lack of understanding of relevant legislation pertaining to termination of pregnancy provision; lack of training opportunities for GPs to become termination providers; and out of pocket financial costs for women^{8,9}.

Prevention of unplanned pregnancy

RDav believe that further sexual and reproductive education in schools and improved access to long-acting reversible contraception (LARC) are needed to reduce unplanned pregnancy in women living in rural and regional Victoria. It is recognised that lack of knowledge about contraceptive options and misinformation impacts patient uptake of LARC options¹⁰.

LARC is a broad term for a group of contraceptive methods that provide effective contraception, are long acting, don't require daily intervention for functionality to remain, and are reversible when removed. These include hormonal implants (Implanon®), intra-uterine devices (Mirena®, Kyleena®) and copper intra-uterine devices. These devices require practitioners to undertake additional training in order to offer insertion.

Moving into the future

RDav supports the promotion and protection of a woman's right to body autonomy, including the right to access to termination services without discrimination.

RDav advocates for:

- Increased dialogue aimed at reducing stigma for Victorian women regarding termination of pregnancy
- Education and information sharing in school, clinical and community health settings regarding all contraceptive options, including LARCs.
- Workforce solutions that ensure enough Victorian rural doctors can provide the services required by their communities with respect to terminations and contraception care
- Improved LARC training opportunities and remuneration for rural doctors
- Improved education and support for rural doctors providing termination services
- Greater access to ultrasound services for rural communities
- Greater promotion and access to telehealth services for rural communities, especially around termination services

⁸ Sifris, R., & Penovic, T. (2021). Barriers to abortion access in Australia before and during the COVID-19 pandemic. *Women's Studies International Forum*, 86, [102470]. <https://doi.org/10.1016/j.wsif.2021.102470>

⁹ Family Planning Alliance Australia. Access to abortion services in Australia: Position statement. Manly, Qld: Family Planning Alliance Australia, 2016.

¹⁰ Claringbold L, Sancil L, Temple-Smith M. Factors influencing young women's contraceptive choices. *Aust J Gen Pract* 2019;48(6):389–94. doi: 10.31128/AJGP-09-18-4710.