



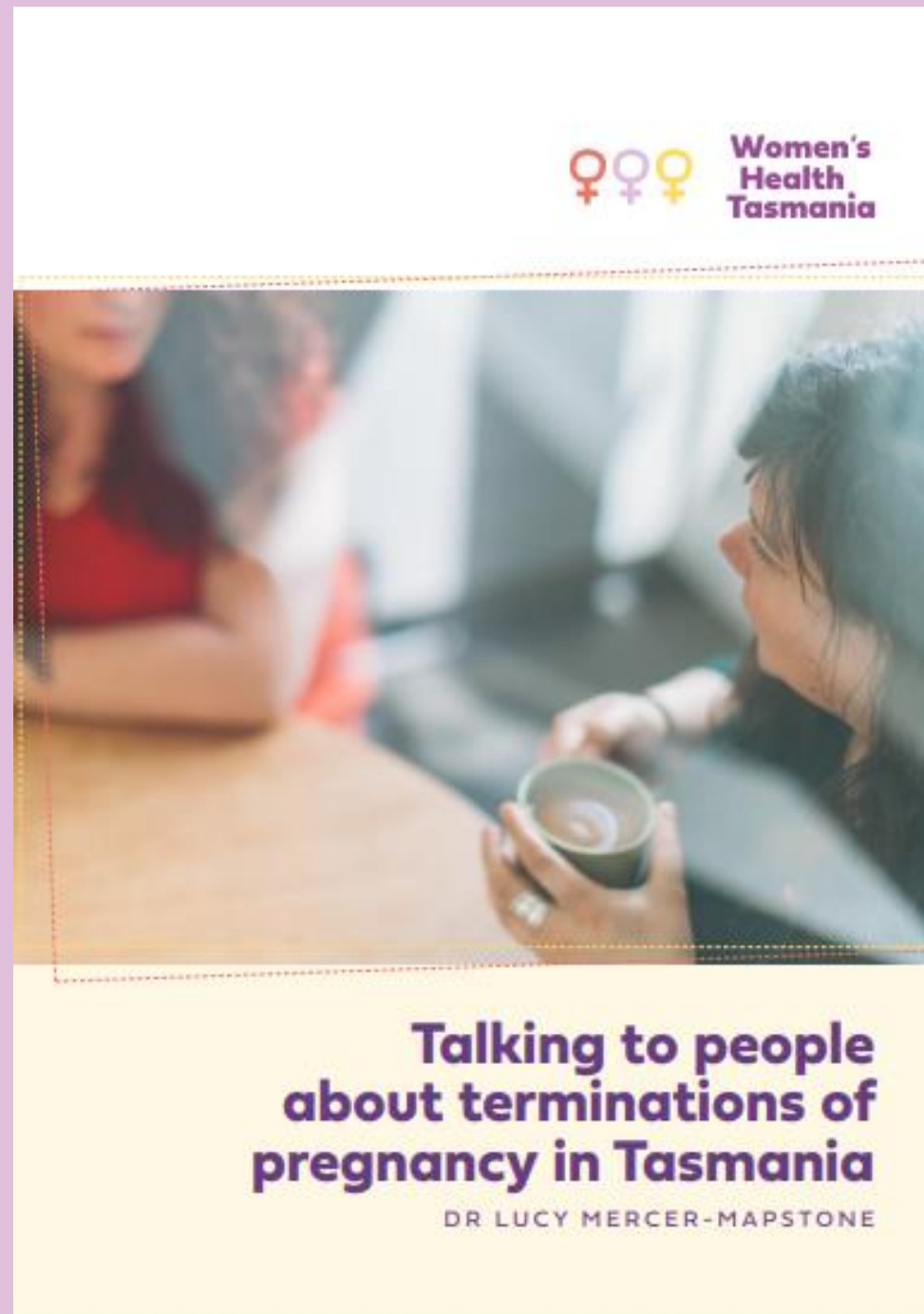
**Women's
Health
Tasmania**

Termination of pregnancy

A good practice guide
for Tasmanian care providers



The research



- Conducted for Women's Health Tasmania by Dr Lucy Mercer-Mapstone
- Participants were people who had accessed terminations in Tasmania since 2013
- Medical and surgical terminations, private and public care pathways
- People on low incomes, LGBTIQ+ people, Aboriginal people, culturally and linguistically diverse people, people living with disability and chronic health issues



"At the time and in the moment, it's mega scary. When it comes to taking the first pill, it's easy to feel isolated, even if you do have support, because ultimately, it's just you making the decision. It's just a super vulnerable moment. I wasn't made aware of the level of pain. You're actively miscarrying and that's confronting. That's what I was not really prepared for. Because you get told all about the logistical side of things but that's the only focus."

— RESEARCH PARTICIPANT, 2022

"I had a really good experience at [the termination provider]. Everyone in the whole process was very kind and just treated me like any other patient experiencing any other procedure. They ran through everything that could happen and how everything goes, they made sure I knew everything, so there was nothing unexpected."

— RESEARCH PARTICIPANT, 2022

"When I went to the GP, I was 100% clear that I wanted a termination. There was no ambiguity whatsoever. The GP referred me to a specialist, but the specialist had no idea that I was seeking a termination. He did an ultrasound and had the screen open so I could see the foetus... which was not what I was expecting. I then had to go through asking him for a termination and it wasn't something that he even did. I'm sure the GP referred me there because she didn't believe in terminations. If I'd been on the fence about it, or confused or young or alone, it would have been appalling—it could easily have swayed me to make a different decision. I feel really strongly that what happened to me shouldn't be allowed to happen."

— RESEARCH PARTICIPANT, 2022

"The most important thing for me and my journey was that the medical providers were not panicking about the fact that I was trans. When we got to the specialist, he was amazing. He made it clear that he had worked with other trans people, and he explicitly said, 'You are who you are, and my job is to make sure you get the best possible care and treat you with respect.'"

— RESEARCH PARTICIPANT, 2022

Research findings

What's working well

- A choice between MTOP and STOP
- Specialised services and knowledge
- Compassionate care
- Individual practitioners and services going 'above and beyond'

What's not working well

- Finding out how to get a termination
- Fragmented processes
- Patchy aftercare
- Stigma, judgement or coercion



Research findings

Barriers to access

- Cost
- Regional scarcity of services
- Time-specific scarcity of services
- Lack of inclusivity

23 recommendations

- Practitioners
- Women's Health Tasmania
- Primary Health Tasmania
- State and Federal Governments
- Systemic policy and practice





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The good practice guide



The approach

- Pro-choice
- Non-directive
- Non-judgemental
- Independent
- Trauma informed
- Inclusive



Principles of good practice

- 1 Safety
- 2 Choice
- 3 Equity
- 4 Accountability
- 5 Person-centred care
- 6 System-wide care



Features of good practice

- 1 Privacy and confidentiality
- 2 Accessibility
- 3 Non-judgemental practice
- 4 Trauma informed practice
- 5 Clarity of information
- 6 Treatment options
- 7 Specialised knowledge
- 8 Inclusion
- 9 Communication
- 10 Continuity of care
- 11 Aftercare



23
good
practice
indicators



Includes

- The legal context
- Conscientious objection
- Special topics:
 - Terminations and young people
 - Reproductive coercion
- Links to clinical guidelines, training and professional resources

"The next doctor that I saw was particularly supportive and non-judgemental. She had a great sense of humour about everything and made me feel just like it was a regular doctor's appointment, nothing out of the ordinary."

— RESEARCH PARTICIPANT, 2022



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