

Abortion Care Pathways and Methods

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21 years old, partnered, studying at university,
on “the pill”, 6 weeks pregnant by last menstrual period

Who has abortions?

- 1 in 3 women
- All racial/ethnic, religious, demographic, socio-economic backgrounds
- Britain: most White, single (\pm partner), in 20's
 - More conceptions in <16s and >35s end in abortion
 - Minority/ethnic groups over represented
 - Economic deprivation and abortion rate related
 - About one third have had more than one abortion
 - Over half already had a child

Why choose abortion?

- >90% pregnancies ending in abortion unplanned
 - Contraceptive failure, non-use, coercion
 - Smaller proportion maternal or fetal indications
- Multiple and complex reasons
- Common themes
 - Understand responsibilities of parenthood
 - Financial constraints
 - Lack of partner support

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Talks to partner and sister, wants to finish school and be married before having a child, web search for “abortion in UK”



Self-referral only

Time to consultation and treatment largely depends on resources

Travel to Britain; overnight stay

May need escort

Gestation-dependent fee (€420-€1550) only covers abortion



Self-referral; some GP, FP

Time to consultation and treatment largely depends on convenience

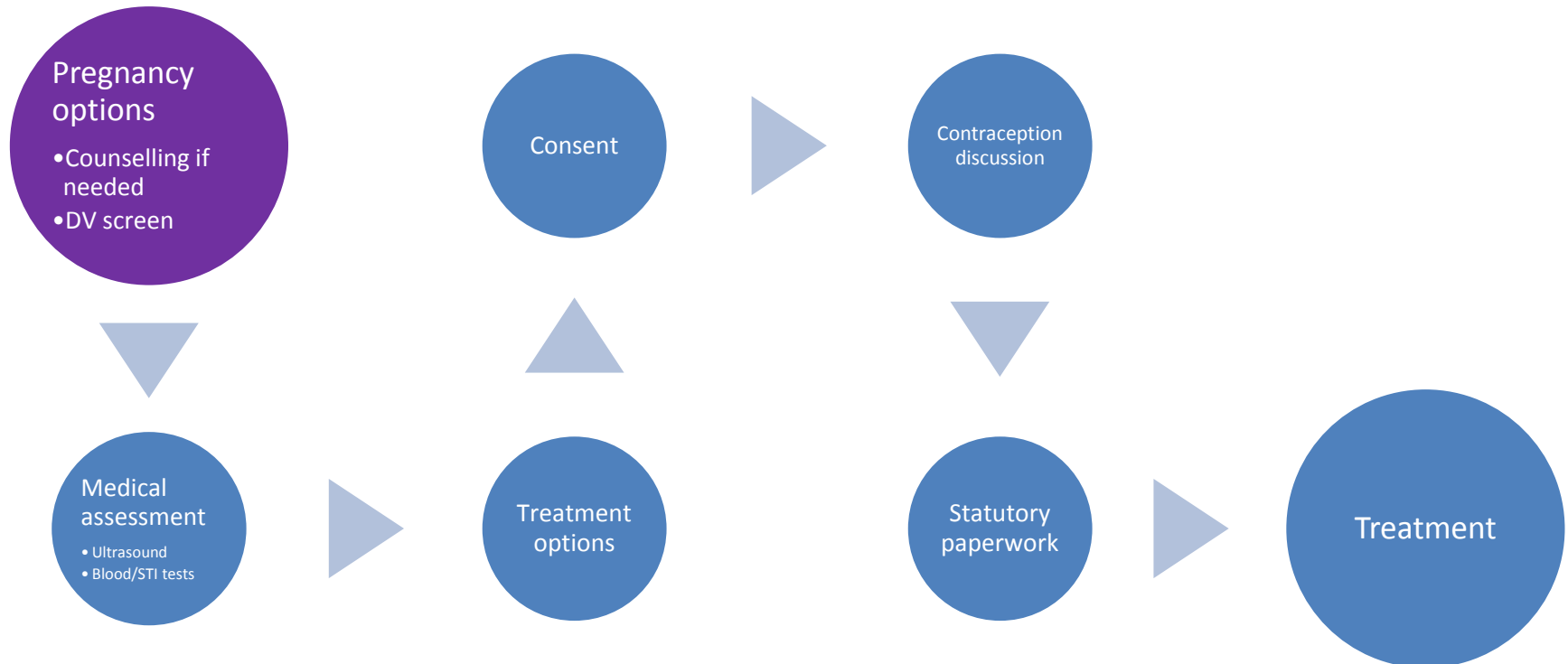
Local clinics

May need escort

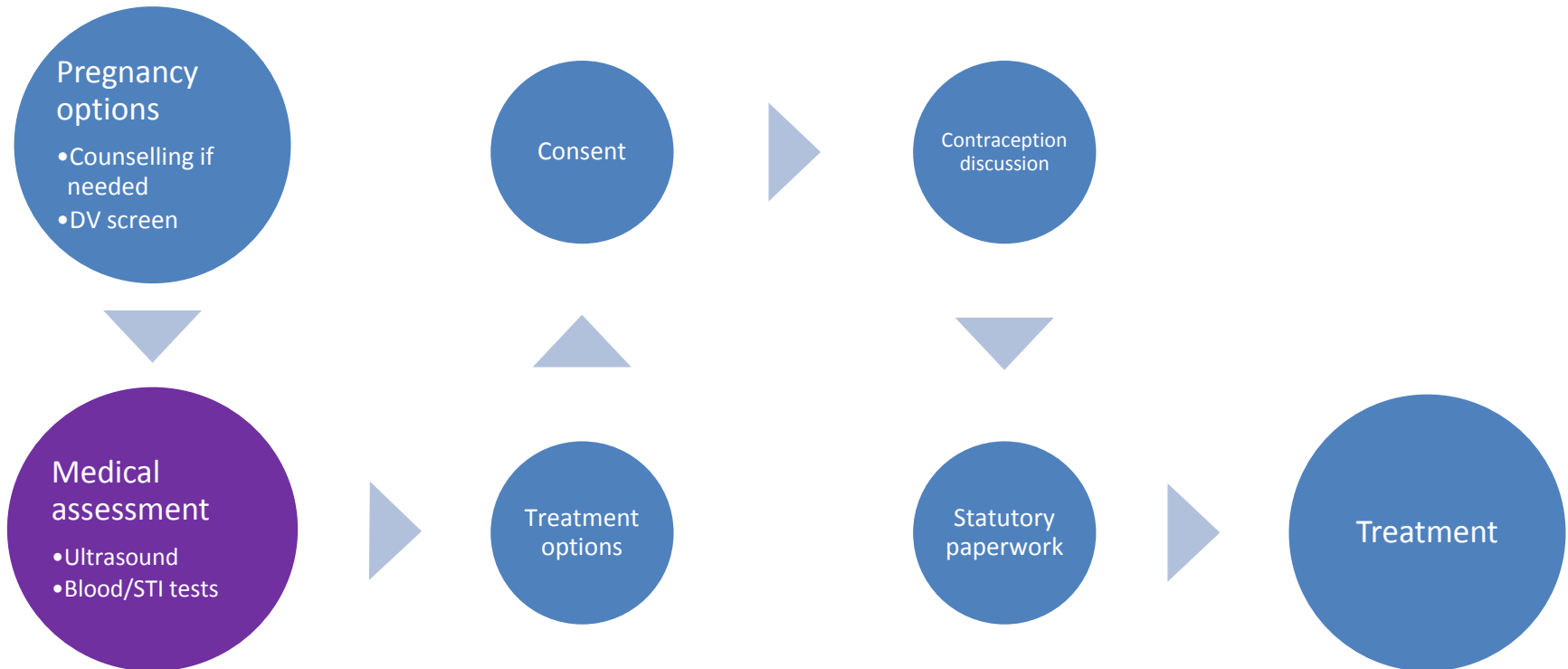
Free (NHS funded) for 98%

Also contraception, STI screening

Care pathway



Care pathway



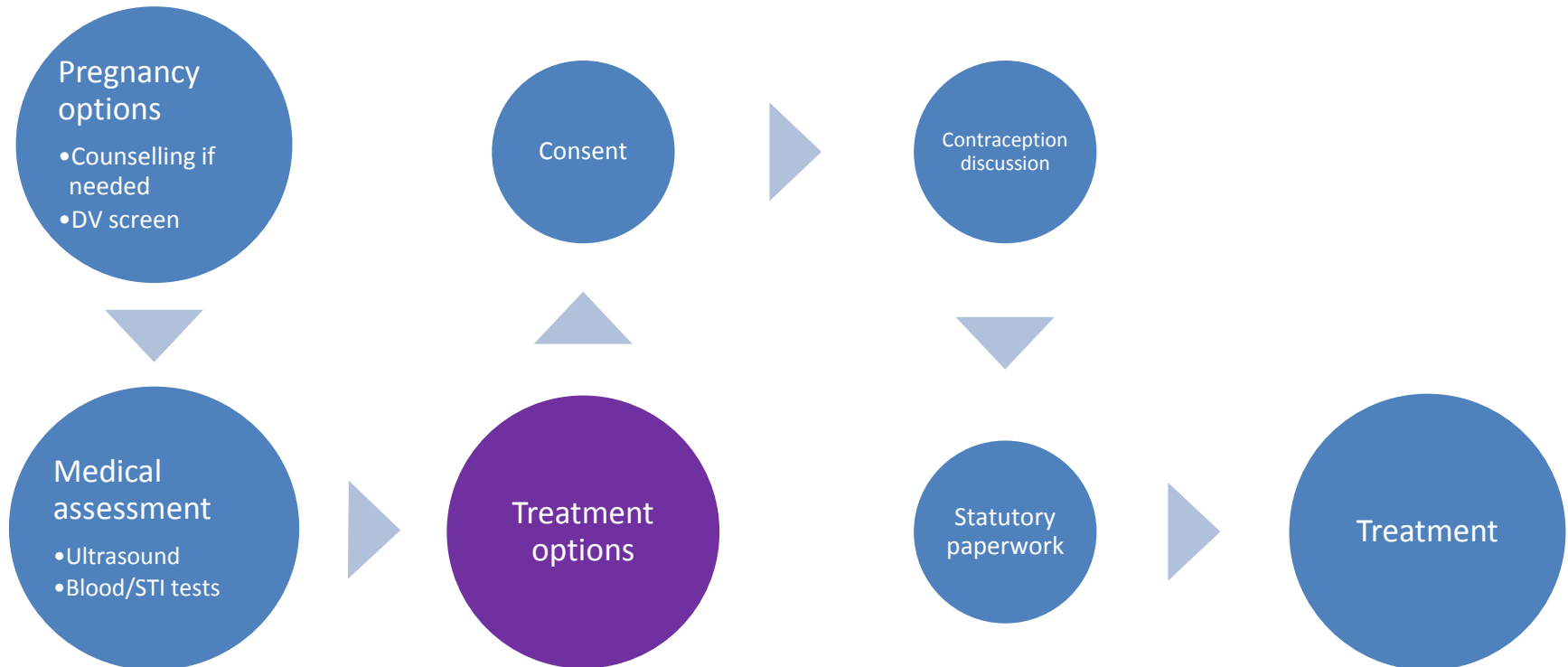
When are most abortions performed?



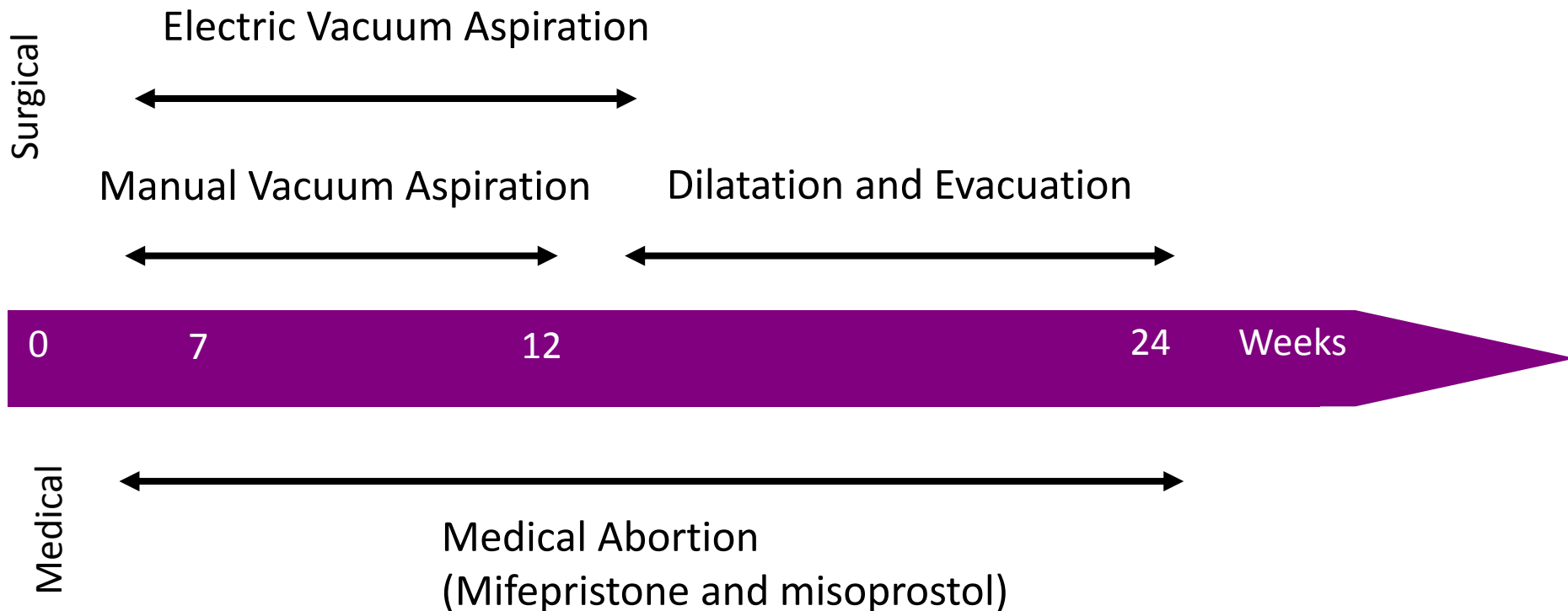
■ Residents Ireland ■ Residents E&W



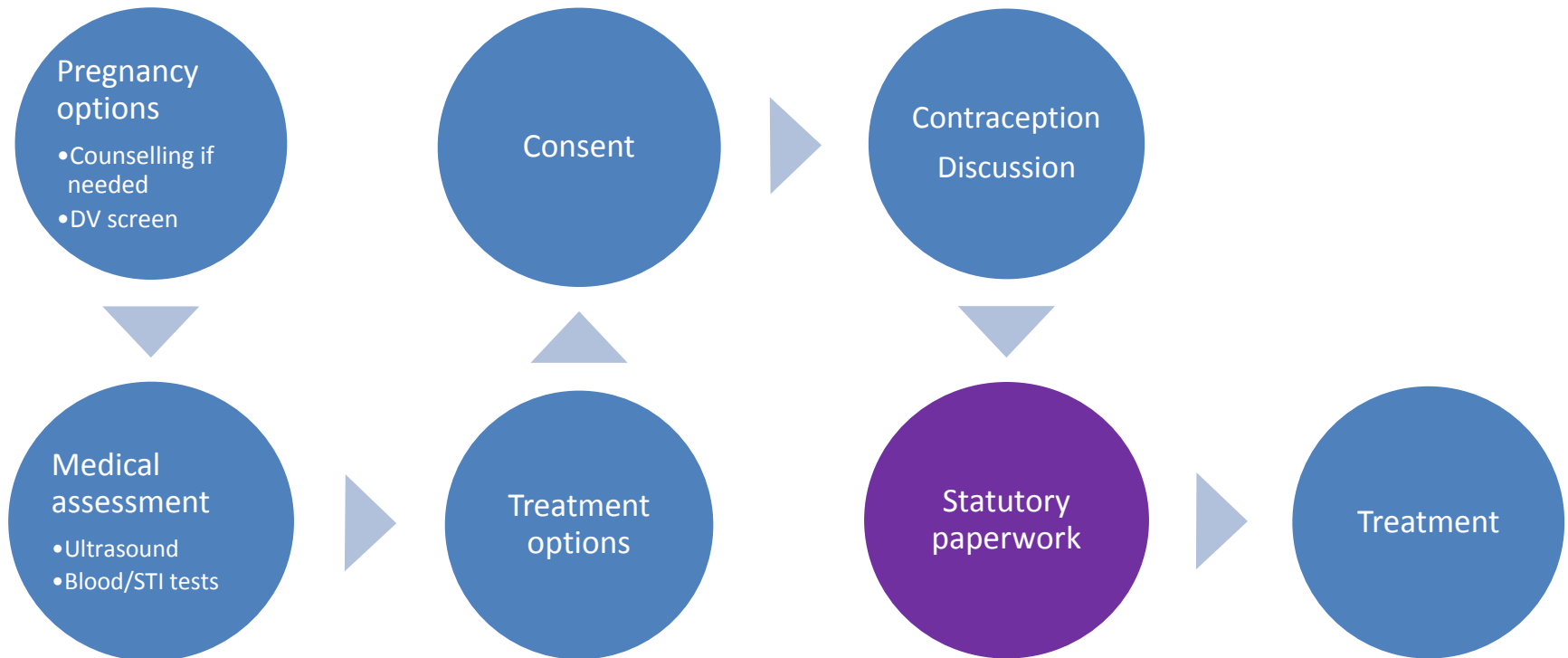
Care pathway



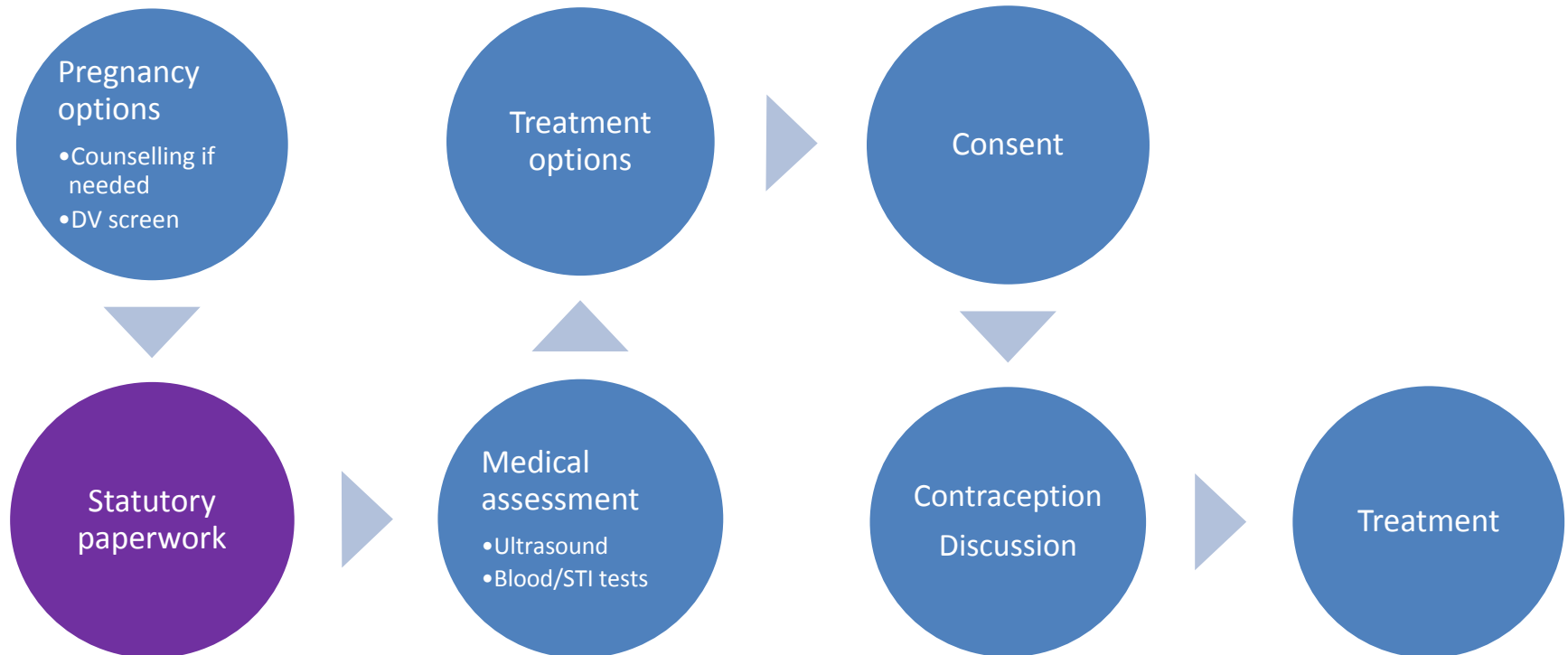
Methods by gestational age



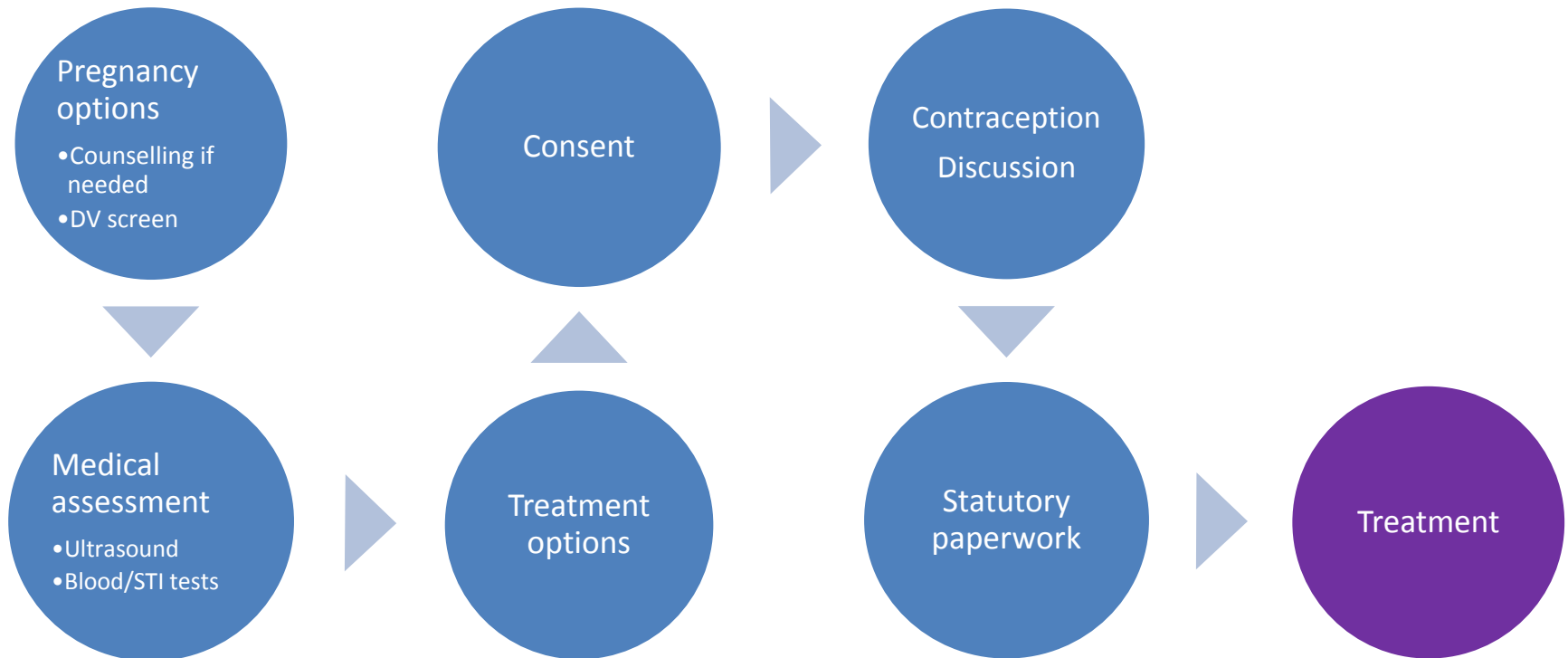
Care pathway



Care pathway



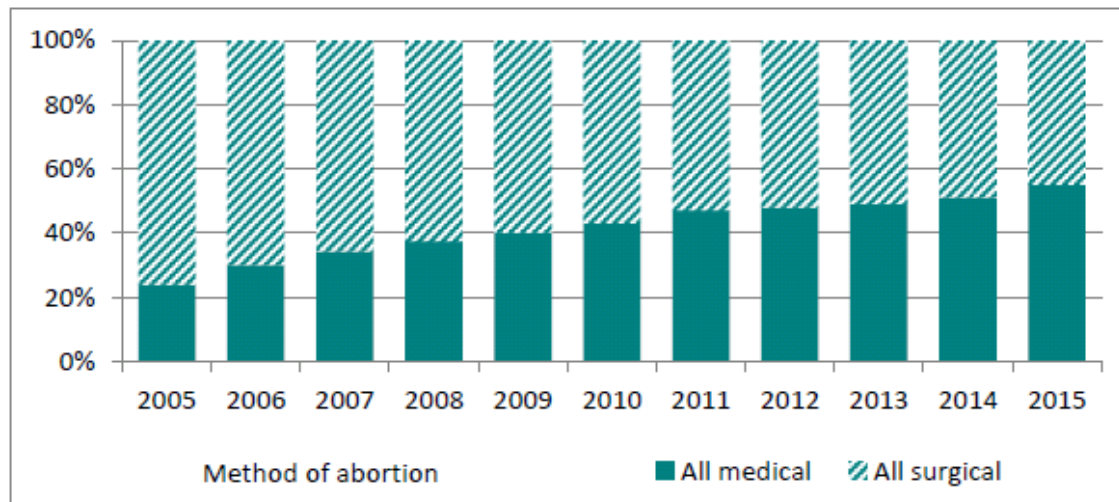
Care pathway



What methods are most common?



Figure 6: Abortions by method, England and Wales, 2005 to 2015



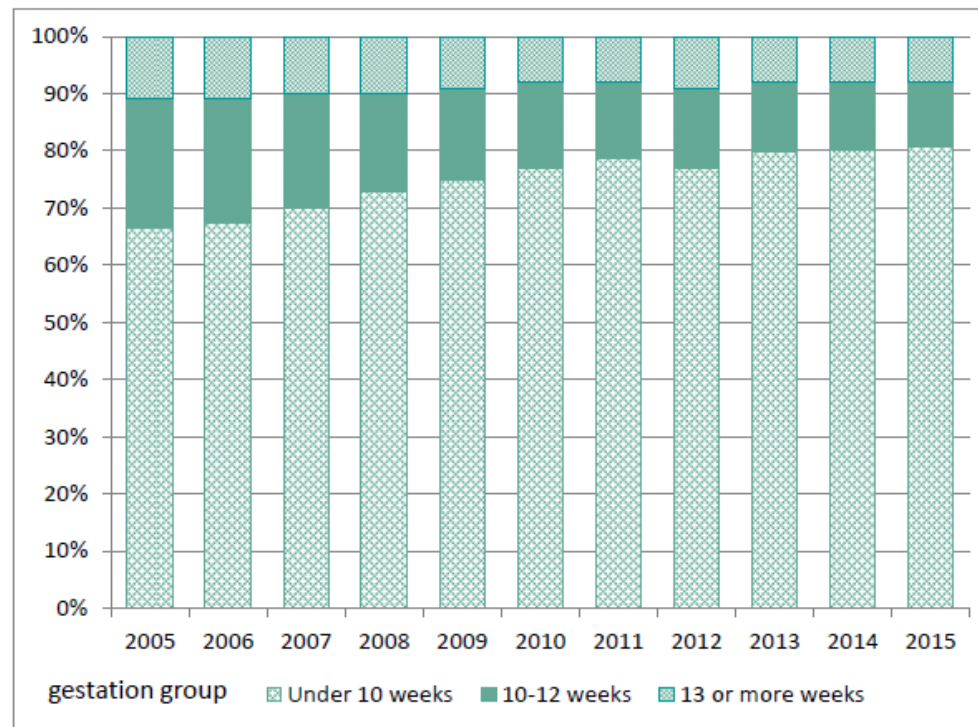
Methods by gestational age



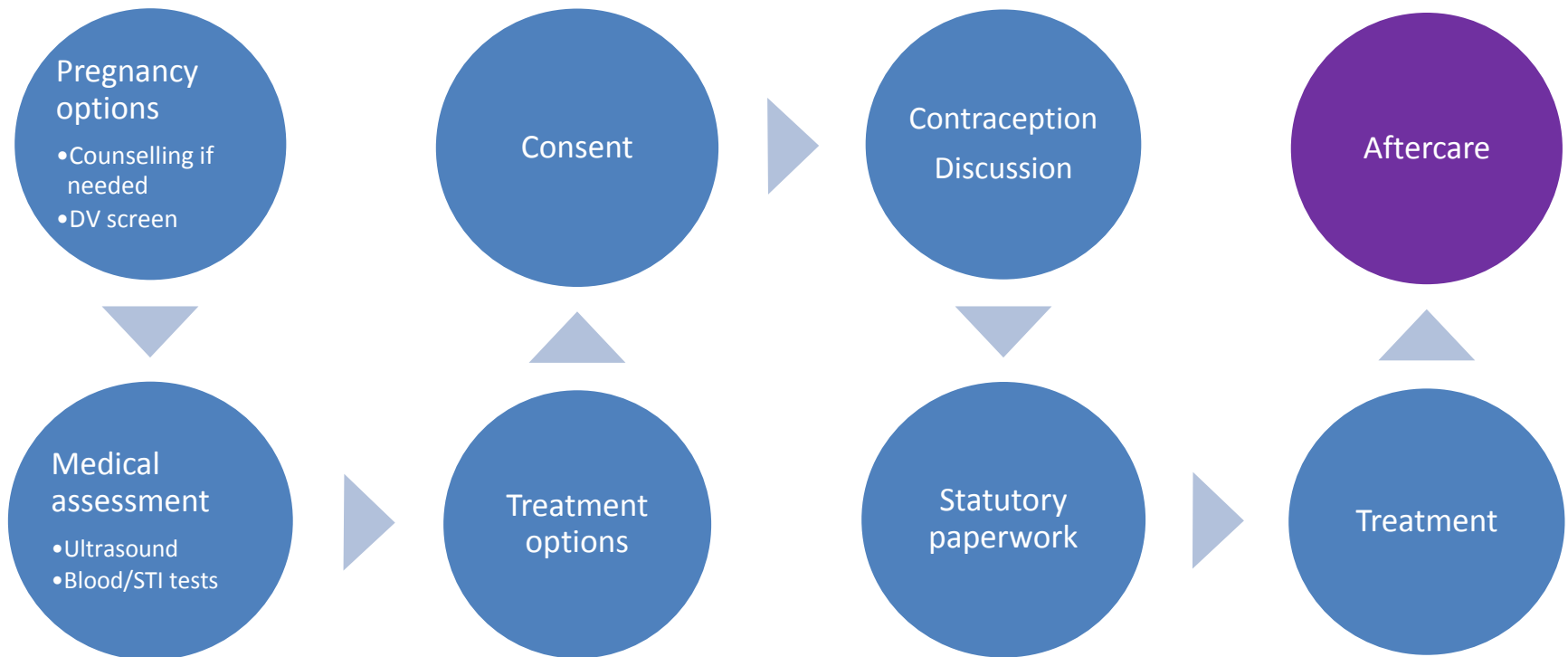
Progressive downward shift in gestation with rise in medical methods in E&W



Figure 5: Abortions by gestation weeks, England and Wales, 2005 to 2015



Care pathway





Air travel post treatment
Managing miscarriage en route with
early medical
24-telephone advice line
Assistance from unfamiliar services
Phone counselling if needed



Local travel post-treatment
Managing miscarriage en route with
early medical
24-telephone advice line
Assistance from familiar clinic
Phone or in person counselling if
needed

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Thank You