

## **FMWC Advocacy Action Plan to Improve Domestic Services for Unwanted Pregnancy**

The consequences of unwanted pregnancy (UP) can affect women and their families in profound ways. Approximately half of all UP in North America end in abortion (AMWA position paper). In Canada, annual abortion stat. is over 100,000.

The 1988 Supreme Court of Canada decision confirmed there is no criminal law to restrict access to abortion services. The Canada Health Act ensures that all women should have access to this medical service. The choice to terminate an UP therefore has legally been determined in Canada to belong to the woman alone. Once she makes her informed choice, she is entitled to a safe, timely, and confidential medical care.

However, in reality 30 years later, the lack of sufficient numbers of adequately trained health care providers limits access to abortion services (medical and surgical). Only one in six hospitals presently offer surgical abortion services and those numbers are decreasing. Consequently, significant barriers exist for many Canadian women in the form of inappropriate access and wait-times, financial burdens, and ongoing societal stigma.

Part of this problem is due to our present state of medical education curricula, which has failed to provide our future physicians with sufficient formal training and exposure to the topic. In a recent survey, 57% of family medicine residents who responded, reported receiving no school-organized education on abortion during, and more than 80% received less than 1 hour in instruction on the topic (BMC Med Education 2018).

Medical schools, still, tiptoe around this subject in the classrooms. Abortion remains a polarizing issue in the medical community; providers may fear for their safety.

Given this background, the FMWC, SOGC and Action Canada for Sexual Health and Rights working group has developed an advocacy plan targeting curricular planners and health providers, media, and policy makers for capacity building. Details of the action plan will be presented at the MWIA Centennial meeting.