



## Women's Sexual and Reproductive Health Coalition

### Response to Senate inquiry into universal access to reproductive healthcare

The SPHERE coalition is a cross-sectoral, multidisciplinary alliance comprising over 150 clinician experts and consumers, representatives from peak bodies and key stakeholder organisations and eminent Australian and international researchers with a shared vision for improving women's sexual and reproductive health, with a particular focus on contraception and abortion care.

On the 25<sup>th</sup> of May 2023, the Senate Community Affairs References Committee (The Committee) released a report and made 36 recommendations to the Federal Government following its inquiry into universal access to reproductive healthcare. The inquiry provided an opportunity to obtain views of stakeholders through a single process and highlighted key issues and opportunities relating to reproductive healthcare. The report and associated recommendations demonstrated the complexity of these issues and the need for a strategic and collaborative response.

In providing a response we have grouped the recommendations into four major content areas, with strategies to increase:

- Access to care
  - Affordability
  - Workforce support, training and capacity building
  - Public awareness and education
- **Access to care and directing resources to populations in need**  
The recommendations sought to address access issues in relation to :
    1. Expanding the types of health professionals who can deliver services (Rec 2)
    2. Equipping all public hospitals within Australian to provide surgical pregnancy terminations, or timely and affordable pathways to local providers (Rec 15).
    3. Providing a national support, information and referral model for sexual and reproductive healthcare services, such as 1800 My Options and healthdirect (Rec 17)
    4. Continuing current MBS telehealth items for sexual and reproductive healthcare (Rec 19)
    5. Improving access to MS-2 step, through expanding types of health practitioners who can prescribe it, and reducing their training requirements (Rec 20).

SPHERE coalition suggested actions to achieve these outcomes:

Suggested actions	Responsible agents
Harmonise abortion legislation across state and territories.	Federal government, State and Territory governments

\*The Coalition uses *women* as an inclusive and broad term that refers to and acknowledges the diversity in needs and experiences of all people who may access and use hormonal contraception.



<p>Regional level planning by Primary Health Networks (PHNs) that involves:</p> <ul style="list-style-type: none"> <li>• Development of an integrated regional approach to contraception and abortion care</li> <li>• Identifies gaps in service provision at a local level by mapping the availability of services.</li> <li>• Commissions health services to fill those gaps, including the establishment of training in community settings, and map the availability of services.</li> </ul>	<p>Federal government through PHNs</p>
<p>Increase access to Long-acting reversible contraceptives (LARC)</p> <ul style="list-style-type: none"> <li>- Increase access to postpartum LARC before hospital discharge through provision of midwife-led contraceptive counselling</li> <li>- Incentivise and fund GPs and other health practitioners to undertake LARC insertion/removal training in areas of need, as identified by regional reporting</li> <li>- Appropriately remunerate health professionals for LARC insertion and removal</li> </ul>	<p>Federal Government in consultation with PHNs and health professionals</p>
<p>Increase access to MS-2 Step</p> <ul style="list-style-type: none"> <li>- Advocate for nurses and midwives to administer mifepristone and misoprostol for the purposes of EMA through the use of standing orders and amendments to practice policy and procedures</li> </ul>	<p>Federal Government in consultation with state and territory government, as state-based law reform is required. Federal Government consultation with relevant health providers and health practices.</p>

- **Contraception and Abortion Affordability**

The recommendations sought to make contraception and abortion more affordable through addressing a range of issues that contribute to the cost of these methods and services:

1. Considering and implementing options to make contraception more affordable (Rec 4)
2. Improving access to a broader range of contraceptives currently not on the PBS (Rec 6)
3. Implementing options to subsidise the non-hormonal copper IUD (Rec 7)
4. Addressing remuneration for healthcare practitioners (see section C below).

SPHERE coalition suggested actions to improve contraception and abortion affordability:

<b>Suggested actions</b>	<b>Responsible agents</b>
<p>Patient funding assistance:</p> <ul style="list-style-type: none"> <li>- Provide free abortion care (including ultrasound as required), for all women including international students and those on temporary visas</li> </ul>	<p>Federal government funded, and administered through State/Territory Governments and/or LHNs</p>



<ul style="list-style-type: none"> <li>- Provide free contraception for women (including costs associated with LARC insertion and removal)</li> <li>- Maintain locally administered public funds to assist patients to cover indirect costs where services are not provided in the local hospital.</li> </ul>	
<p>MBS support through rebates and appropriate remuneration:</p> <ul style="list-style-type: none"> <li>- Continue to support telehealth rebates for sexual and reproductive health through the MBS</li> <li>- Continue to support medical abortion care through time-based MBS item numbers (Face-to-face and telehealth)</li> <li>- Review impacts of the new MBS item number for GP consultations of 60 minutes or more on equitable access to early medical abortion following 12 month of its introduction</li> <li>- Introduce new MBS item numbers for consultations for non-medical health practitioners to facilitate task-sharing of early medical abortion and LARC insertion/removal</li> </ul>	<p>Federal Government in consultation with the Medical Services Advisory Committee (MSAC) and other relevant stakeholders.</p>

• **Workforce support, training and capacity building**

The recommendations recognised the importance of a well-supported, trained workforce, and the need to develop further capacity in the space through:

1. Seeking to provide opportunities and incentives for all healthcare professionals (Rec 2)
2. Ensuring adequate remuneration for healthcare professionals (GPs, nurses, and midwives) through Medicare:
  - a. to provide contraceptive administration services (Rec 5)
  - b. to provide contraceptive counselling and advice (Rec 10)
  - c. to deliver medical termination services (Rec 18)
3. Improving access to workforce training, support and professional development (Rec 8 and 9)

SPHERE coalition suggested actions to improve workforce support, training and capacity building:

<b>Suggested actions</b>	<b>Responsible agents</b>
<p>Expand scope of practice of health practitioners:</p> <ul style="list-style-type: none"> <li>- Ensure early medical abortion (EMA) provision and LARC administration are included in the scope of practice of nurses, midwives, Aboriginal Health Practitioners and pharmacists.</li> <li>- Develop appropriate funding models that support scope of practice, including rebates, remuneration and subsidies for different health practitioners.</li> </ul>	<p>Federal government through the National scope of practice review</p>
<p>Workforce training and support:</p> <ul style="list-style-type: none"> <li>- Embed training in abortion and contraceptive counselling, early medical abortion, and insertion/removal of LARC in all obstetrics and gynaecology, GP, practice nurse, nurse practitioner and midwife training programs</li> <li>- Provide continued funding of the AusCAPPs community of practice</li> </ul>	<ul style="list-style-type: none"> <li>- Professional colleges and training providers (including RANZCOG, RACGP, ACCRM, ACN)</li> <li>- Federal government, through federal programs or grants.</li> </ul>



<p>Incentivise workforce training in areas of need:</p> <ul style="list-style-type: none"> <li>- Provide incentives and fund GPs and other health practitioners to undertake training in abortion/contraception care as identified by regional planning</li> </ul>	<p>Federal government through PHNs</p>
<p>Extend MBS funding:</p> <ul style="list-style-type: none"> <li>- Provide appropriate remuneration for healthcare practitioners</li> <li>- Subsidise costs for medical equipment for contraception and abortion services</li> </ul>	<p>Federal government through MSAC, and in consultation with practicing clinicians, nurses, midwives</p>

- **Public awareness and education**

The recommendations recognised the need to improve education about sexual and reproductive health in the community through:

1. Training health professionals in delivering health care in a culturally sensitive and inclusive manner (Rec 14 and 24)
2. Expanding culturally and linguistically diverse (CALD) health workforce (Rec 25)
3. Developing sexual and reproductive health education programs and resources for a range of communities (Rec 29 and 34)

SPHERE coalition suggested actions to improve public awareness and education:

<b>Suggested actions</b>	<b>Responsible agents</b>
<p>Improve health literacy about contraception and emergency contraception among community members (including development of resources in easy-English and other languages).</p>	<p>Federal and state/territory government supported, led through relevant LHNs and with consultation with relevant community groups</p>
<p>Develop materials to increase public awareness of medical and surgical abortion care options (including medical abortion via telehealth), informed by women’s needs and preferences.</p>	<p>Australian and state/territory government supported, led through relevant LHNs</p>

## A. Other SPHERE Coalition Suggested Actions:

The report also recommended:

1. Development of an implementation plan for the National Women’s Health Strategy 2020-2030 (Rec 16)
2. Improvement of the collection and publication of health data, especially in relation to pregnancy terminations (Rec 22).

SPHERE coalition suggested actions:



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<b>Suggested actions</b>	<b>Responsible agents</b>
Formally track progress on delivery of the outcomes of the National Women's Health Strategy by developing a transparent, comprehensive, nationally agreed implementation plan and key performance indicators, and report against these on an annual basis.	Federal government, in consultation with relevant key stakeholders.
Develop a national abortion care standard, data collection and reporting framework that includes key performance indicators (KPIs) similar to that which has been introduced in the UK	Federal Government



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