

Advocating for comprehensive healthcare student education on abortion

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Contents

Importance of teaching healthcare students about abortion

Barriers to providing undergraduate education on abortion

Addressing the barriers

Why is it important to teach healthcare students about abortion?

1 in 4 women will have an abortion

25 million unsafe abortions annually

Comprehensive teaching on abortion increases access to safe abortion and decreases morbidity and mortality related to unsafe abortion

Effective abortion education

Prepares students for competent practice

Fosters conscientious commitment

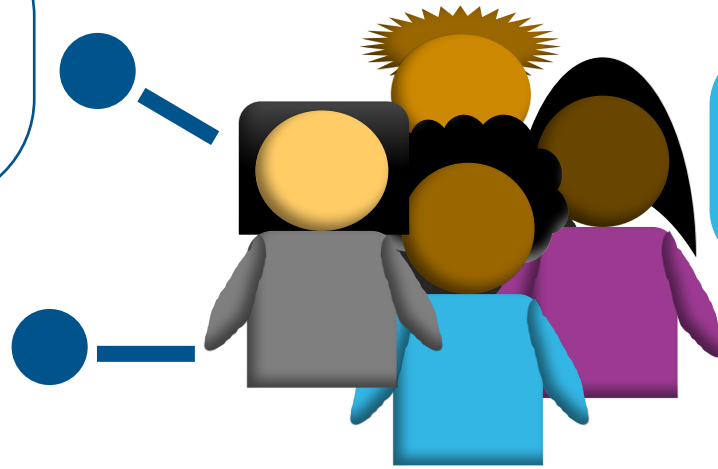
Helps sustain and improve abortion care



Studies show that students recognise importance of abortion teaching

US study (2008): 96 out of 100 medical students said teaching on abortion should be included in their curriculum.

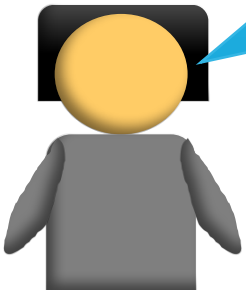
Malaysian study (2012): over 90% of 991 medical students wanted more training on abortion.



Students view abortion as **essential** part of healthcare and want teaching.

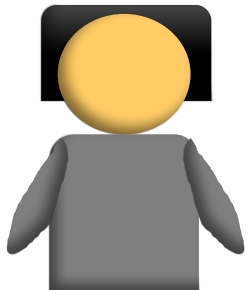
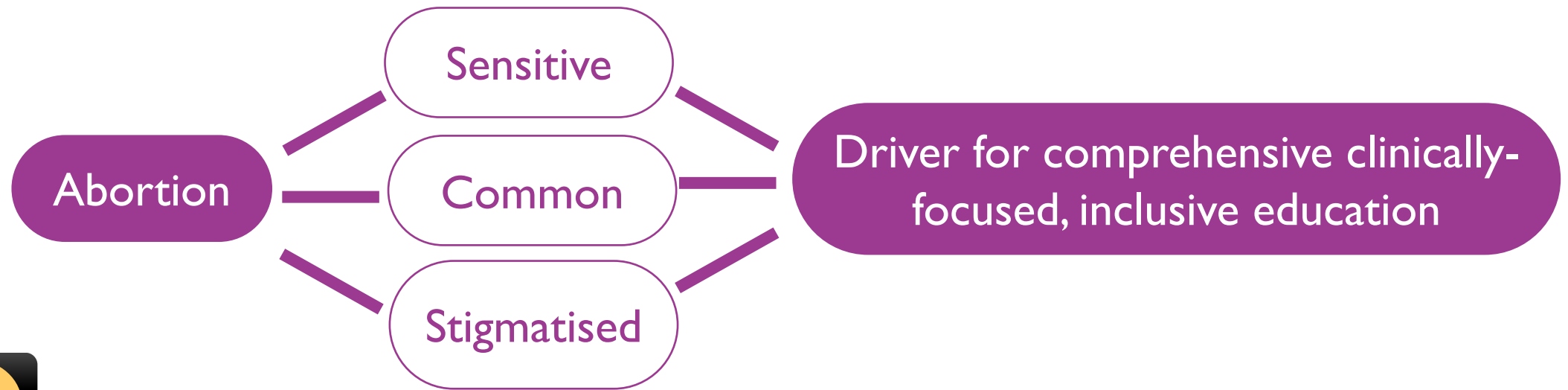
2021 UK study interviewed 19 students from five UK medical schools

- *“I feel like if we weren’t taught it properly... then that might mean that we... aren’t prepared to help women who want or need abortions appropriately, **without stigmatising them or making them feel guilty**. So although it is a sensitive topic I do think it is very important that we address it at medical school.”*



All students interviewed wanted to be able to provide competent and respectful abortion-related care.

Students interviewed for this study felt...

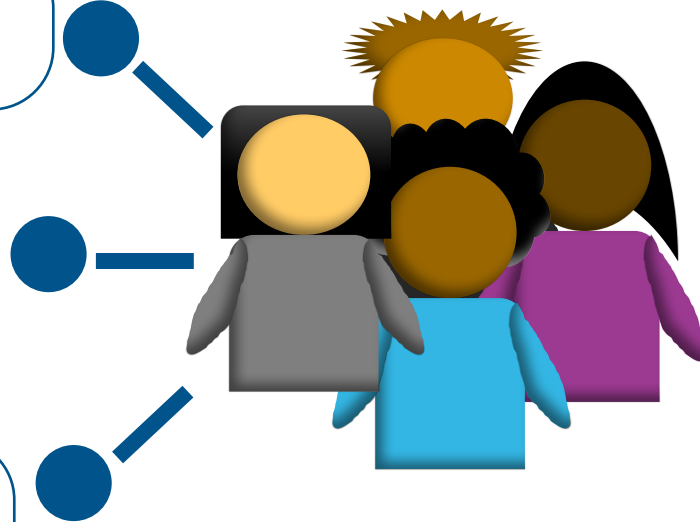


Curricular content studies

India (2013): 13% of 2000 senior students exposed to clinical abortion experience.

USA (2008): onus on students to seek out clinical training.

UK (2021): majority of teaching under 2 hours.



Abortion often **not included** in core healthcare student curricula.

Lack of knowledge on legal and clinical aspects of abortion care.

When included, **focus on legal/ethical aspects**

Students confusing abortion with EC
Seeking out clinical training

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Healthcare educators face numerous barriers...

Malaysia study (2012)

“There will always be barriers to the inclusion of abortion education in the medical curriculum... due to **pressure from the anti-choice and pro-life movements.**”

Chicago study (2008)

Limited opportunity for **clinical** observation

Limitations in core curriculum

Lack of time due to workload

Efforts to shield students from **‘sensitive issues’**



UK study (2021)

Abortion perceived as a **‘sensitive’ topic**

Difficulty accessing clinical **placements**

More guidance/ educational resources wanted

Lack of **curriculum time**

Lack of experienced **teachers**

Institutional and national factors



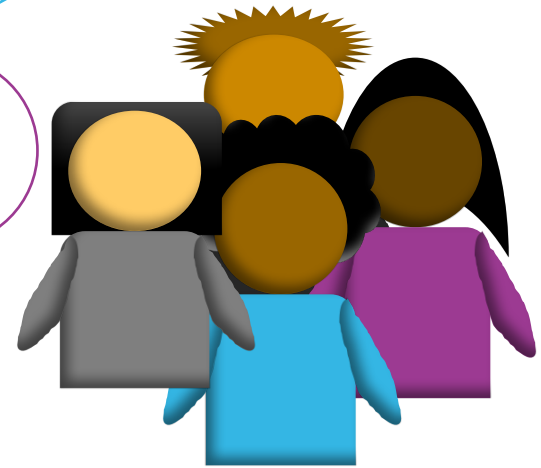
Lack of national governing body guidance on curriculum content. on abortion

Few institutional guidelines
Individually governed, not regulated by single enforcing body

Global diversity in accreditation of medical, nursing and midwifery schools

Great disparities in curricular content

Reliance on **commitment of individuals**



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Advocating for comprehensive abortion education

National level

Inclusion in national curricular guidance

Making Abortion Safe Advocacy e-learning resources



Institutional level

Overcoming key barriers



UK medical student abortion education

RCOG

- Understand clinical relevance of the Abortion Act.
- Know abortion methods and complications.
- Take a history.
- Manage complications.

UCL Medical School in 2014

- 3 hours on legal/ethical aspects of abortion
- **10 minutes** on the clinical aspects of abortion
- No clinical placements in abortion care

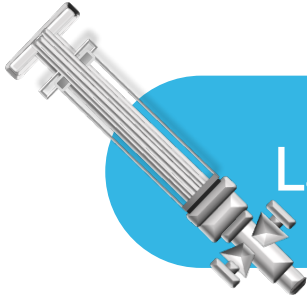


Institutional barriers to comprehensive abortion education

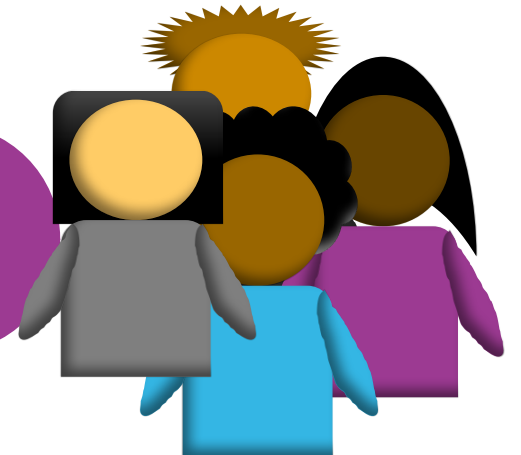
Lack of curriculum **time**



Lack of **clinical** learning opportunities



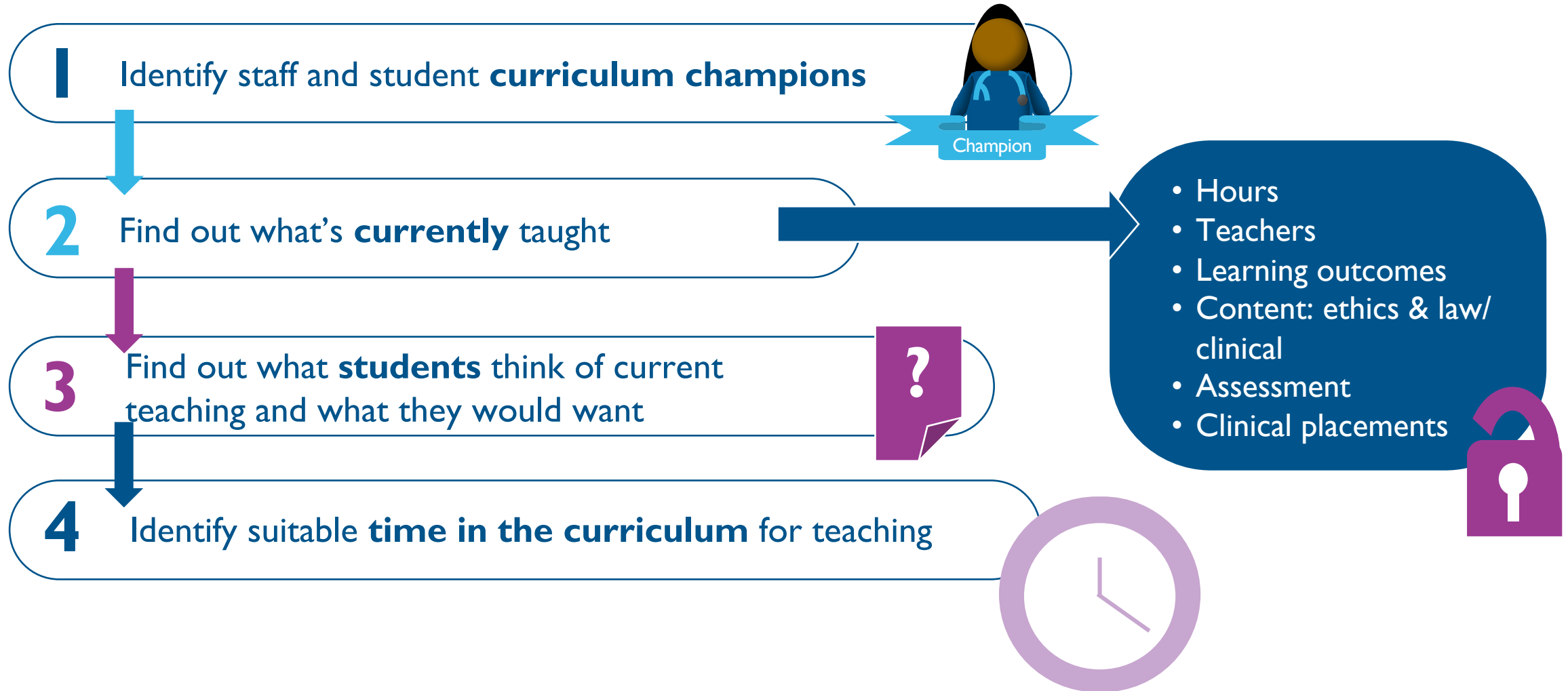
Lack of willing **teachers** with relevant expertise



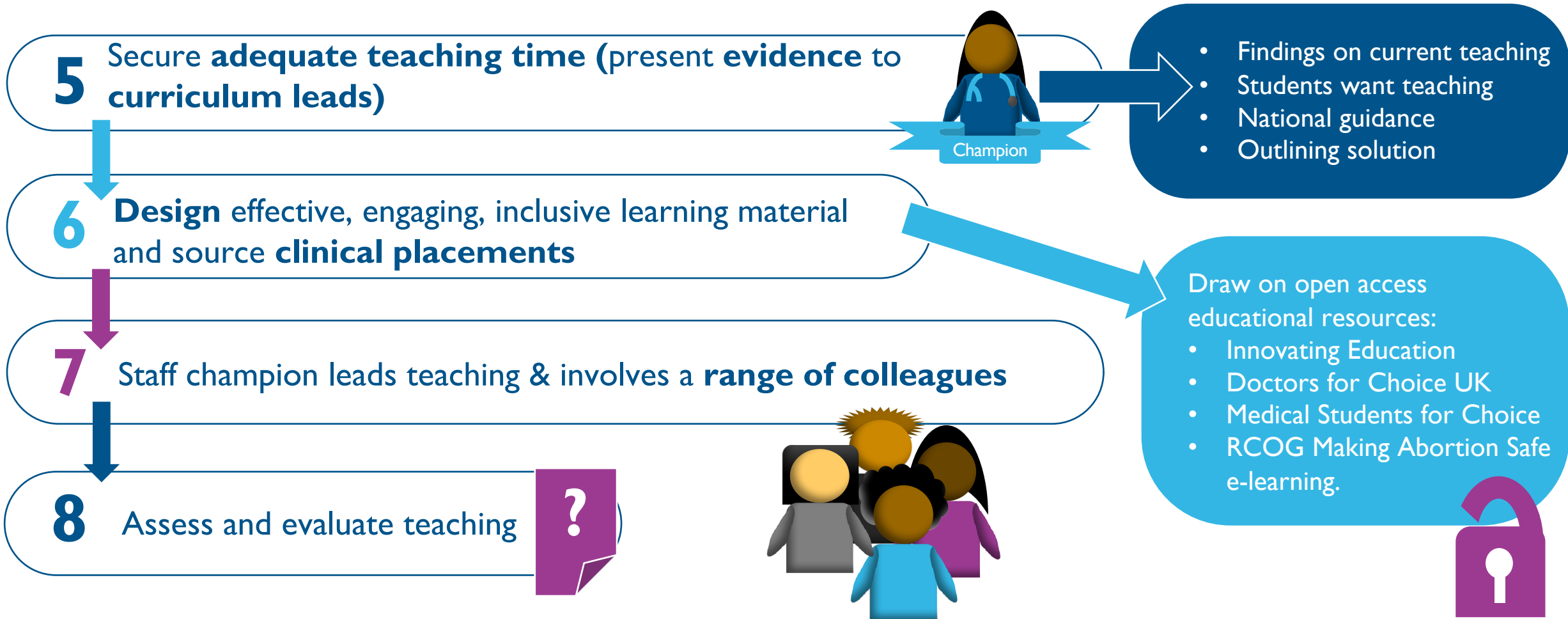
Abortion perceived as a **sensitive** topic



Advocating for comprehensive abortion education



Advocating for comprehensive abortion education



Abortion education in UK medical schools: a survey of medical educators, 2021

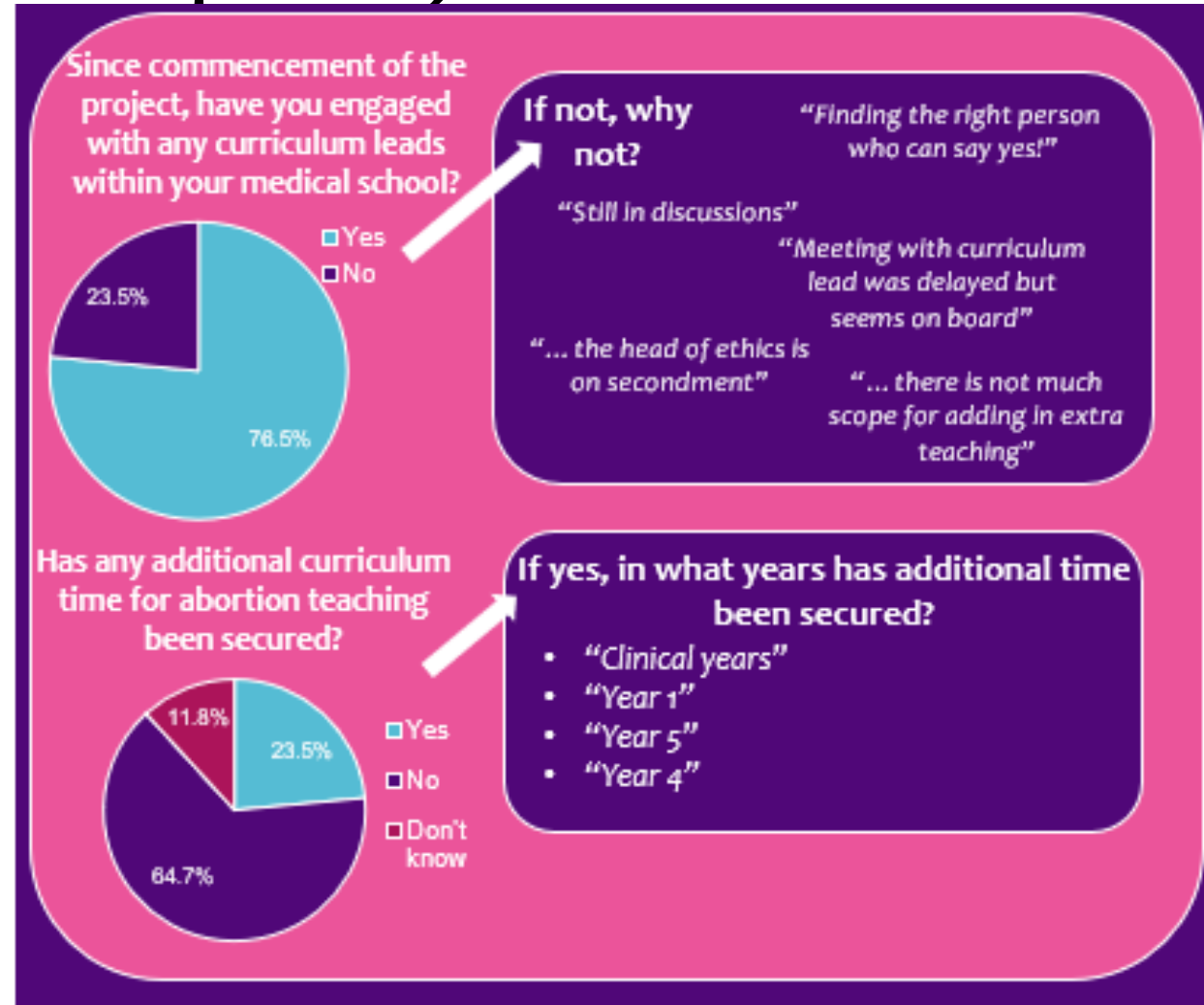
Results Some 76% (25/33) of medical schools responded to one or both surveys. The number of hours spent on ethico-legal teaching ranged from under 1 hour to over 8 hours, with most clinical teaching lasting under 2 hours. Barriers to teaching were reported by 68% (21/31) of respondents, the most common being difficulty accessing clinical placements, lack of curriculum time, and the perception of abortion as a sensitive topic. Some 74% (23/31) of respondents would welcome additional guidance on teaching abortion to medical undergraduates.

Rennison C, Woodhead EJ, Horan C, Lohr, PA, Kavanagh J. (2022) 'Abortion education in UK medical schools: a survey of medical educators'. *BMJ Sex Reprod Health*, doi: 10.1136/bmjsex-2021-201387.

Doctors for Choice UK Curriculum Champions project

- **Jan 2022 : 40 volunteer healthcare providers and medical students (Curriculum champions) recruited**
- **Aim: improve abortion teaching** at their local medical school (by 2022/23 academic year)
- Champions supported to work through **the eight-step plan with 18 medical schools**

Curriculum Champions progress– 18 responses (45% of Champions)



Curriculum Champions project 6 month evaluation

What has been the most useful aspect of the Curriculum Champions project?

“Opening dialogue with the university”

“Having collaborative weight and backing of national project with trusted affiliations”

“Hearing what is provided at other medical schools across the country to be able to benchmark”

“Suggested teaching materials”

“Brainstorming with other people concurrently working on project to identify common pitfalls/hurdles”

“Having a network”

“... involvement from doctors, as opposed to the project being led only by students. It gives us a lot more gravitas!”

What ongoing support would you like the Curriculum Champions project to provide?

“Sharing resources and tips”

“pre-recorded lecture from pro-life perspective”

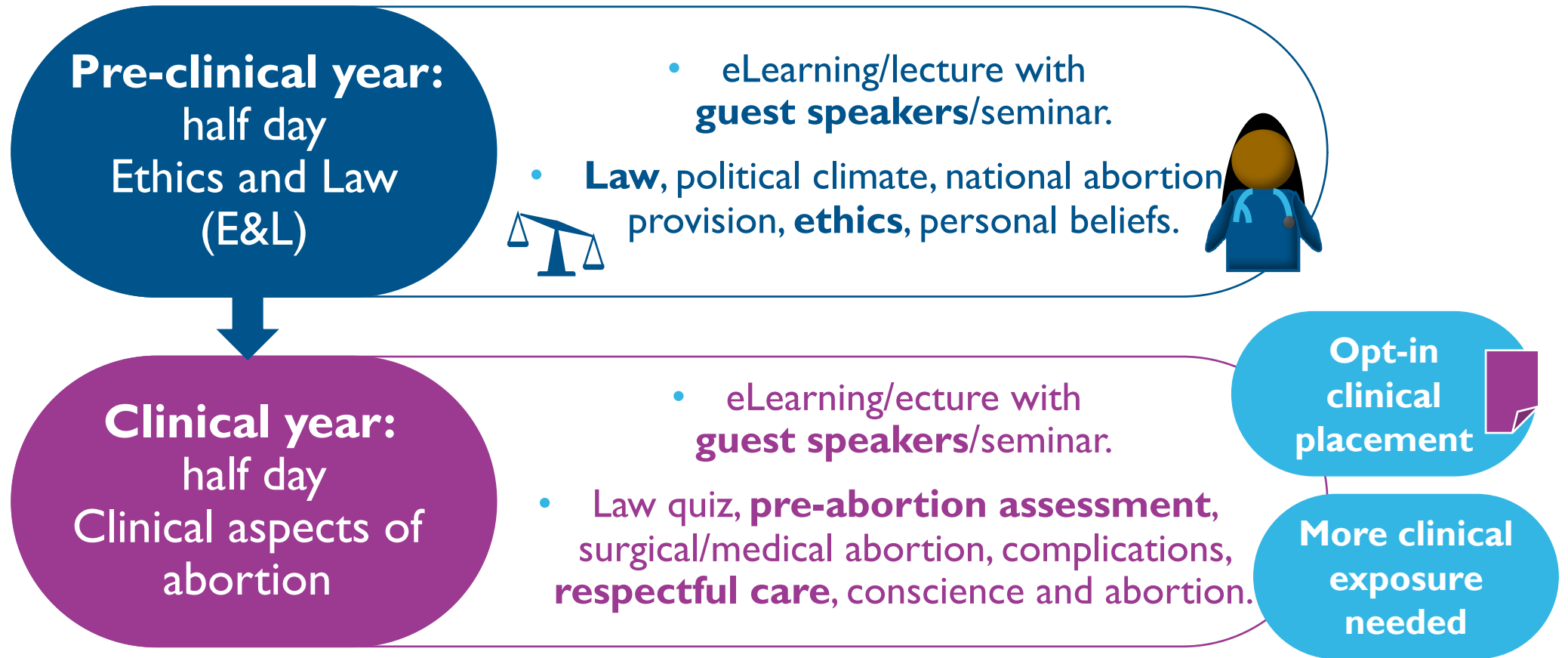
“... guidance on including [abortion] in summative assessments”

“Providing sessions for the champions to share with the university - it may help them acknowledge the educational shortcoming.”

“Continue to meet to discuss strategies and share experiences”

Expand: nursing/midwifery schools

Current abortion teaching at UCL medical school



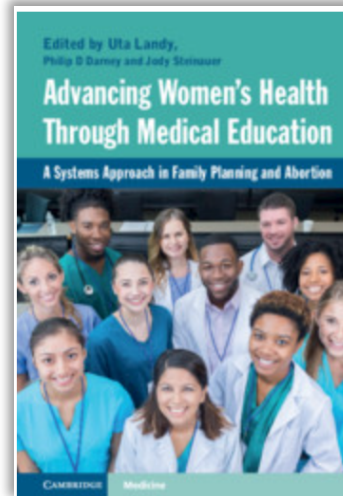
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Summary

Teaching healthcare students about abortion is important

Improves access to safe abortion care and decreases morbidity and mortality related to unsafe abortion, fosters conscientious commitment to abortion care

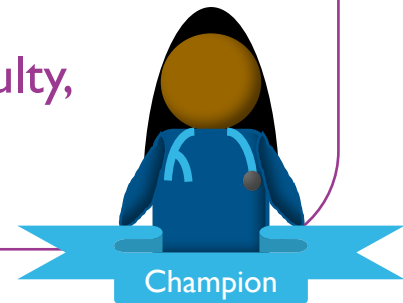
- *Students want teaching.*

Often not included in healthcare student curricula.



Advocating for comprehensive abortion education

- National and institutional level
- Institutional barriers can be overcome: **engage** faculty, students and potential teachers.
- Draw on **open access** education resources.

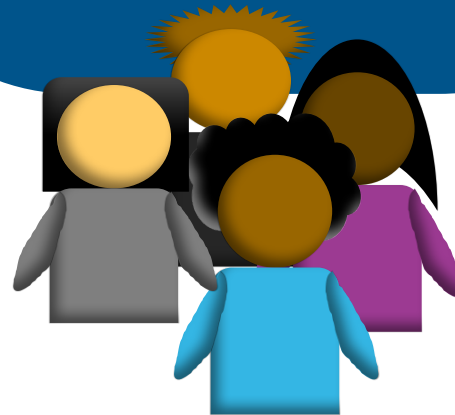


How this teaching on abortion was received

Most students felt they received the **right amount of teaching**



96% of students rated their abortion teaching as 'important', regardless of attitude to abortion



... reflects efforts to ensure teaching is **engaging** and **inclusive** and **respects different beliefs**

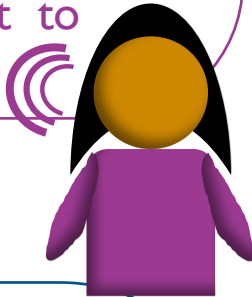


Importance of inclusive teaching

“A course mate [who] is quite staunchly pro-life”
felt...like they had been
respected”

Guest
speakers

- Person who has had an abortion.
- Dr with a conscientious objection to abortion.
- Dr with a conscientious commitment to abortion care.



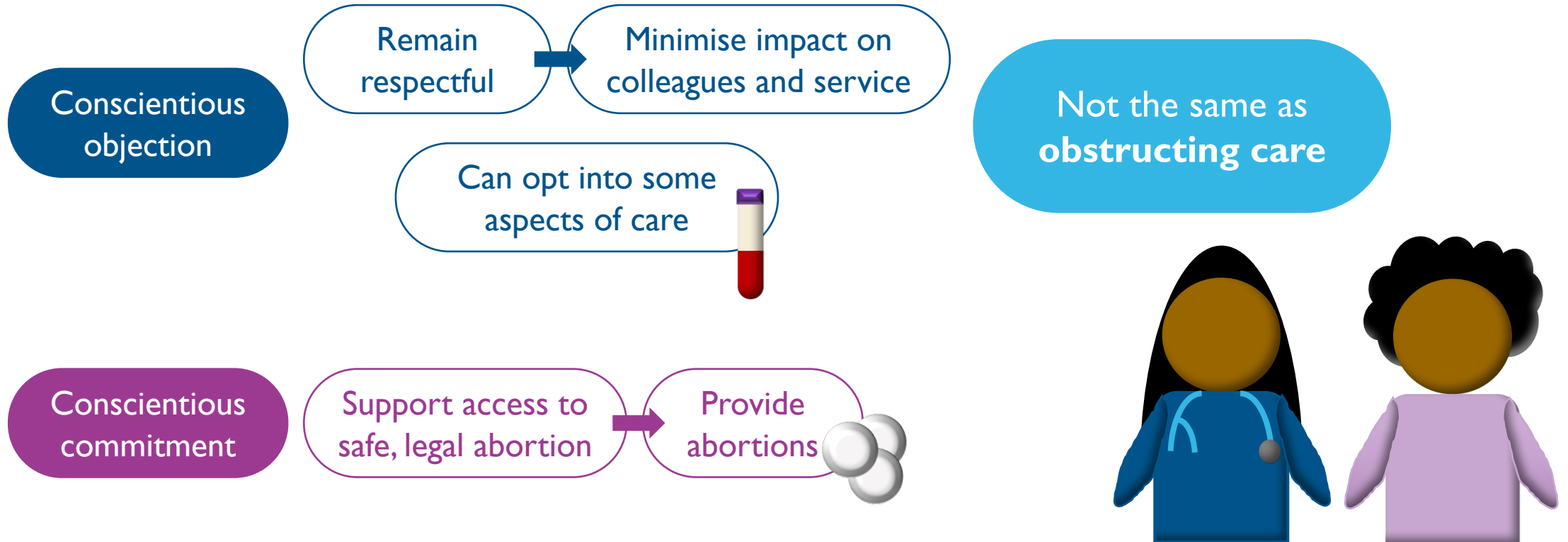
Conscience
and
abortion

Conscientious
Objection

Conscientious
Commitment

Teaching about conscience and abortion

Opting out of clinically-appropriate treatment is a serious moral decision.



Why we provide



<https://vimeo.com/453594455>

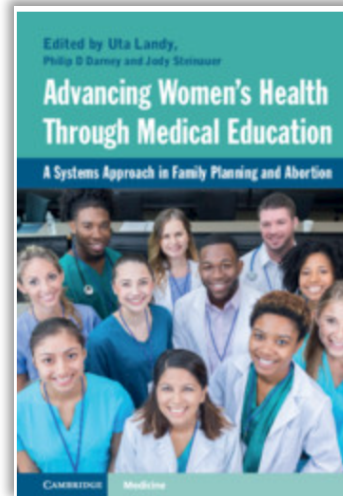
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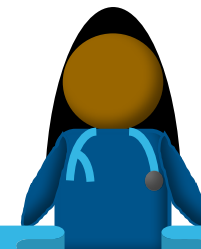
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Champion