

ABORTION – WHAT YOU NEED TO KNOW

We know people become pregnant when they don't want to be, when their situation isn't suitable or when carrying a pregnancy to term is impossible.

Pregnancies end in a range of ways. About 6 in every 10 known pregnancies is carried to term, about 1 to 2 in 10 is miscarried and about 2 in 10 end in abortion. Abortion is part of the suite of reproductive health care services and, as the figures above show, is more common than many people realise. That said, it's a topic that's not often spoken about.

If you are pregnant, you can decide to:

- Continue the pregnancy.
- Continue the pregnancy and adopt, foster, whāngai or find an option appropriate to you and your family.
- End the pregnancy by having an abortion.

This resource is written to give you more information about pregnancy and abortion. It also includes details for agencies who can help you with adoption or fostering if that is what you decide to do.

HOW DO I KNOW IF I AM PREGNANT?

You may have signs of pregnancy as early as one week after conception.

- Your period is late or lighter or shorter than usual
- You are more tired than usual
- Your breasts are tender or swollen
- You need to urinate (pee) more than usual
- You have nausea or vomiting
- You have mood changes
- You crave some food and other food makes you feel sick.
- You feel bloated or have period-like cramps.

If you have been having penis in vagina sex and you have any of these signs, your first step should be to confirm if you are pregnant.

You can take a pregnancy test at a Family Planning clinic or a midwife, or your health provider or you can buy a pregnancy test kit at supermarkets or pharmacies.

If you are under 22 years old and a New Zealand Resident, your visit to Family Planning is free. If you are over 22 and a New Zealand Resident, and your test is positive, your visit will be free.

Pregnancy test kits range in price from \$8.00 to \$30.00 in supermarkets and chemists. They are reliable as long as you follow the instructions carefully.

If you see a nurse or doctor for your test, they will ask when the first day of your last period was. This will help them calculate how many weeks pregnant you could be.

If the test result is negative and you do not want to get pregnant, check out your contraceptive options at a Family Planning clinic or your health provider. Many of them will be available to you at no cost.

A positive test means that you are pregnant.

BUT WHAT ABOUT THE EMERGENCY CONTRACEPTION PILL?

The Emergency Contraception Pill (ECP) **prevents** a pregnancy from occurring. If you are already pregnant, it does not cause an abortion.

ECP is best taken as soon as possible after unprotected sex – that is, penis in vagina sex where you have not used contraception or it has failed. If you weigh more than 70kg, ECP does not seem to be as effective and the nurse or doctor can talk with you about that. They might suggest a copper IUD, which can be put in within 5 days of the unprotected sex. It can stay in place for up to 10 years – so, if you want, it can be your long-term contraception too.

You can get the ECP on prescription from a Family Planning clinic or your health provider, or you can buy it from a pharmacy. Some people still talk about the morning after pill – it is now called the Emergency Contraceptive Pill because you have a little more time (up to 72 hours) to be able to take it.

PREGNANT? THINGS TO THINK ABOUT...

It is normal to have many different feelings if you have an unplanned pregnancy. You might feel frightened, angry, shocked, upset, lonely or confused. Or you might feel happy, positive and excited about a pregnancy. It might be difficult to decide what to do or you might know right away what you want to do.

Thinking about the answer to some of these questions might help you make a decision about what to do.

- What do I want to do with my life?
- Would a pregnancy and baby change my plans?
- What about my education and career?
- How do I feel about being responsible for a child?
- Is this a good time to have a baby?
- Do I have the skills to cope with a child?
- What is my relationship with the person I got pregnant with? Do I want to remain connected to them through a child? Will they help me whatever I decide to do?
- Am I ready to be a parent?
- Will I tell my parents? My family or whānau? Will they support me?
- If I have the baby who will help me? Where will I live? Where will the money come from?
- How do I feel about adoption or guardianship? Is there another option that might work for me?
- How do I feel about having an abortion?
- Do I really understand my options?
- Have I given myself a chance to think things through?

TALKING TO SOMEONE CAN BE HELPFUL

The research tells us that most people who decide to have an abortion are very certain about their decision. If you are not sure, you may want to talk with someone else. Choose someone you trust and who will listen to you. This could be your partner, a trusted friend, whānau or family member. Or it could be a counsellor or health professional. Many counsellors, doctors and nurses can be very helpful, as most can give you unbiased advice.

Remember: it is **not OK** to be pressured into continuing the pregnancy, keeping the baby, giving it up, or having an abortion. The decision must be yours. No one else should make you have an abortion, or force you to continue with a pregnancy.

Whatever you decide, it is important to act quickly so you can seek an abortion as early as possible or begin maternity care. If you think it would be helpful, ask the healthcare provider if you can see a counsellor. Counselling should be provided free of charge to anyone considering abortion who is undecided or has things they want to talk through.

WHAT IS ABORTION?

An abortion is when a procedure or medicine is used to end a pregnancy. It is also called termination of pregnancy.

There are different types of abortion procedures. The choice you have will depend on how long you have been pregnant and the service offered by the provider you see.

EARLY ABORTION PROCEDURES (UP TO ABOUT 14 WEEKS)

Early abortions can be offered at hospitals, a community clinic, or a doctor's office.

EARLY MEDICAL ABORTION (EMA)

This type of abortion is like an early miscarriage. It is an option in the first 9 weeks of pregnancy.

To have an EMA, you have to take two medicines. The first medicine, mifepristone, blocks the hormone that is necessary for the pregnancy to continue. The second medicine, called misoprostol, causes the uterus to expel the pregnancy. The nurse or doctor will tell you how and when to take the medicine. These medications can be taken at home at a time that suits you.

SURGICAL ABORTION

A surgical abortion (also called vacuum aspiration or suction termination) is a method usually used between 5 and 6 weeks up to 14 weeks of pregnancy.

You are given either a local or a general anaesthetic, or you may have conscious sedation so you are aware but not alert. The decision about pain relief depends on how long you have been pregnant. A small tube is inserted into the uterus via the vagina to remove the pregnancy by suction. The procedure usually takes about 5 to 10 minutes and then you will rest up for an hour or so. You go home on the same day.

LATER ABORTION PROCEDURES (ABOUT 14+ WEEKS)

Later abortions must happen in a hospital or special clinic.

MEDICAL ABORTION

This uses medications that are stronger than those for Early Medical Abortion and it can take longer to work. It is similar to having a later miscarriage. You may need to stay in hospital overnight.

SURGICAL DILATION AND EVACUATION (D&E)

This method is used after 15 weeks of pregnancy. Your cervix is gently stretched so that forceps and a suction tube can go into the uterus. It takes 10 to 20 minutes and needs a general anaesthetic. You may need to stay in hospital overnight.

AGE

However old you are, you have the legal right to decide what you want to do about your pregnancy.

There is no legal age limit on seeking or having an abortion. This means you can consent (agree) to an abortion - or refuse to have one - as long as you are “competent” which means you are able to really understand the decision.

If you are under 16, you do not need to tell your parents or get their permission to have an abortion. But most young people do tell their parents or another adult. If you cannot talk with your parents, it is a good idea to talk with another trusted adult. If you decide to have an abortion, it is good to have adult support.

You do not need to tell your partner or the person you had sex with about your decision. You do not need permission from your partner before having an abortion. Your partner has no legal right to be told about your decision and cannot force you to have or not have an abortion. While many people choose to involve partners in the decision, it is yours to make.

Abortion services are confidential. Doctors, nurses and other health workers are not allowed to give out information about you without your consent (agreement) unless they think that you are in danger.

WHERE CAN I HAVE AN ABORTION?

The Ministry of Health website, www.health.govt.nz has a list of abortion providers across New Zealand.

You can contact the provider yourself.

Your local Family Planning Clinic may provide early abortion services or can also tell you where services are available in your area. No matter how many weeks pregnant you are, you can contact your general practitioner (GP), midwife, Family Planning Clinic or an abortion service provider in your area to find out about abortion services that meet your specific needs.

WHEN CAN I HAVE AN ABORTION

The earlier in your pregnancy that you have the abortion, the safer the procedure is.

New Zealand law does not set an upper time limit to have an abortion. However, abortions for pregnancies over 20 weeks are very rare, and not many doctors provide them. Abortions after 20 weeks are usually done because of a serious problem with the foetus or with your health and a team of health providers will be involved.

CAN I CHANGE MY MIND?

You can change your mind about having an abortion at any time before it takes place.

Before you have the abortion, you will get information about what to expect, what to bring to your appointment, how long it will take, and how to take care of yourself.

You might find it very helpful to bring someone with you for support or have a support person at home with you if you are having an EMA.

DOES ANYONE HAVE TO KNOW?

It is your decision who you tell about your pregnancy or your abortion. That includes your partner, and parents. If you come to a Family Planning Clinic, your GP will not be told unless you ask for your notes to be shared with them.

WHAT DOES IT COST?

Abortion is free for New Zealand Residents. If you need to have an ultrasound scan, there may be a cost for that.

People who are not New Zealand Residents' have to pay for an abortion in New Zealand. The costs will vary, depending on where they get the service.

If you are a New Zealand Resident and your local District Health Board (DHB) does not provide an abortion service, the DHB may help pay for your travel.

DOES IT HURT?

All methods have at least some discomfort, usually similar to strong period pain. You will get more information about types of abortion and how to deal with any discomfort or pain.

WHAT HAPPENS AFTER AN ABORTION?

When you leave the clinic, you will have information about what to expect, and a phone number to call for help if you need it. You will be asked to come to a free check-up within two weeks.

After your abortion, you could have bleeding for up to three weeks. After a surgical abortion, the bleeding should be similar to a period. It may be much

heavier after a medical abortion and you could have discomfort or pain similar to period cramps. Painkillers like paracetamol can help to relieve this pain.

Everyone has different feelings after an abortion. Most people feel relief. Even if you are relieved, you could experience strong emotions afterwards. You might feel anger, freedom, regret, guilt, sadness. These feelings may come and go. Or you may hardly think about it again.

If you feel you need support, there are counsellors who specialise in this work – you might find it useful to talk with one of them.

WHAT ARE SOME OF THE RISKS WITH HAVING AN ABORTION?

Abortion is a very safe procedure with fewer risks than pregnancy or childbirth. But as with any medical or surgical procedure, there are some risks.

It is safer to have an abortion before you are 12 weeks pregnant.

Problems after an abortion are rare (about one in 20). The most likely risk is infection in the two weeks after your abortion. You can lower infection risk by having showers rather than baths, using sanitary pads rather than tampons, and avoiding swimming.

Infections are easy to treat with antibiotics. But, left untreated, they can cause health problems.

Rare problems can include bleeding too much (haemorrhaging), damage to the cervix and uterus. Sometimes other internal organs can be affected. Again, the risk is extremely small.

You should get medical help if you have any of these symptoms: high temperature, bleeding that soaks through 2 pads an hour for 2 or more hours, smelly discharge.

DOES HAVING AN ABORTION MAKE IT HARDER TO GET PREGNANT IN THE FUTURE?

It is very unlikely that having an abortion will make it harder for you to become pregnant in the future.

If your abortion was straightforward, it will not reduce your future chance of getting pregnant or having a baby. Problems are not common.

If there was damage to your cervix, there is some evidence that you may have a very small increased risk of miscarriage if you get pregnant again.

DOES ABORTION CAUSE BREAST CANCER?

No. There is no evidence that shows that having an abortion increases your risk of developing breast cancer.

DOES HAVING AN ABORTION AFFECT YOU EMOTIONALLY FOR A VERY LONG TIME?

Usually not, but everyone is different. The research tells us that having poor mental health before an abortion is the strongest predictor of poor mental health following an abortion.

DOES IT ALWAYS WORK?

Very rarely the abortion may not end the pregnancy. This is more common with medical abortion and early surgical abortion. If this happens, you will need more treatment.

It is important to have your check-up two weeks after the abortion to make sure any problems are treated immediately. At this appointment, you can also talk about the contraception that might be best for you.

WHEN CAN I HAVE SEX AGAIN?

It is best not to have sex for at least two weeks after the abortion. If you do, use a condom, with lube, to protect yourself from infection.

CONTRACEPTION

You can get pregnant within 2 weeks of having an abortion.

If you want to prevent pregnancy, talk with your nurse or doctor about what the best contraception might be for you and when you should start using it. You might be able to get some types of contraception at the same time you have your abortion.

WHAT ABOUT THE PARTNERS?

Unplanned pregnancy may be difficult for your partner or the person you had sex with.

While they may feel they have a right to be informed or involved, the law says they do not have to be told and they don't have any rights to make decisions about continuing or terminating the pregnancy.

Your partner should not pressure you to do something you do not want to do, whether that is to continue the pregnancy or to have an abortion.

If you continue a pregnancy, a partner who is named on a birth certificate is legally and financially responsible for that child, until the child reaches their 19th birthday. If the partner is under 18 years of age, the financial responsibility falls on their parents.

Your partner may feel excluded, which can sometimes result in strong and uncomfortable feelings. They may be frustrated, angry, or hurt if they do not agree with your decision. If this is the case, they should look for help and support to come to terms with this and they could get counselling.

If you feel scared or unsafe in your relationship or your pregnancy was the result of rape or coercion, you can seek help from Women's Refuge.

For more information about adoption and keeping a pregnancy:

- For more information about adoption contact a social worker at Oranga Tamariki on 0508 326 459 orangatamariki.govt.nz
- For more information about maternity care in New Zealand <https://www.health.govt.nz/your-health/pregnancy-and-kids/services-and-support-during-pregnancy/maternity-care>
- For more information about finding a midwife <http://www.findyourmidwife.co.nz/>

For more information about abortion or ending a pregnancy:

- For more information about abortion providers in New Zealand <https://www.health.govt.nz/your-health/healthy-living/sexual-health/considering-abortion/abortion-provider-locations>
- To call Family Planning phone 0800 372 546 or visit our website www.familyplanning.org.nz
- For more information about Women's Refuge services www.womensrefuge.org.nz

Abortion law in New Zealand changed in March 2020. The law says:

- If you are not more than 20 weeks pregnant, you can see a qualified health practitioner to have an abortion. There are no specific legal requirements up to this point.
- If you are more than 20 weeks pregnant, a qualified health practitioner may provide abortion services if they believe that the abortion is clinically appropriate considering your physical and mental health, overall wellbeing and the gestational age of the foetus. The practitioner must consult with at least one other qualified health practitioner before providing abortion services.