

# ABORTION IN VICTORIA

## The Melbourne Declaration

Endorsed by the participants of the 'Abortion in Victoria: Where are we now? Where do we want to go?' Conference, held at The University of Melbourne, 30 November 2007.

Reproductive rights rest on the recognition of the basic right of all couples and individuals to decide freely and responsibly the number, spacing and timing of their children and to have the information and means to do so, and the right to attain the highest standard of sexual and reproductive health.

### Effort should be made to improve sexual health and reduce the need for abortion.

1. We welcome the identification by the Victorian Department of Human Services of sexual and reproductive health as a health promotion priority. We support a multi-layered approach, including education, better services, improved technology and community debate about sexuality and fertility.
2. Contraception should be accessible and affordable to all Victorian women.

### Abortion services should be accessible to all women.

3. Abortion should be removed from The Crimes Act 1958 (Vic).
4. Regional public health services must take responsibility for access by women in their region to abortion services. If abortion services are not available within their local facilities, then arrangements should be made with the nearest available services.
5. A government funded statewide pregnancy information service should be developed, implemented and advertised to ensure timely, professional, accessible and comprehensive information, referral and advocacy for women wanting to discuss pregnancy options.

6. Health professionals (including pharmacists) who have a conscientious objection to contraception or abortion should make their objection known and refer to services which can assist.
7. Abortion should be funded through Medicare and the public health system.
8. Data on all abortions carried out in Australia should be collected and collated to inform service development and health promotion strategies.

### Abortion services should conform to world's best practice.

9. Victorian best practice guidelines for the provision of abortion services should be developed, implemented and regularly reviewed.
10. Decisions on the availability of methods of abortion should be based on best medical evidence. The option of medical abortion with mifepristone and prostaglandin should be available to women where medically appropriate.

11. All services, including those providing abortion, should respond to the individual needs of women. They should provide counselling and social support where required, and should not impose restrictive requirements such as mandatory counselling or cooling off periods.

12. Medical workforce training and succession planning should be addressed systematically and sustainably

13. Impartial, accurate, evidence-based information must be provided to enable women to make an informed decision. Legislation along the lines of the Commonwealth Transparency of Advertising and Notification of Pregnancy Counselling Services Bill should be enacted.

### Women having abortions and abortion providers should be free from harassment.

14. Buffer zone legislation must be introduced to prevent picketing and other forms of harassment in the vicinity of abortion services.

The Conference was hosted by **The Key Centre for Women's Health in Society (University of Melbourne), The Royal Women's Hospital, Family Planning Victoria and Women's Health Victoria.**