THE IMPACT OF ABORTION ATTITUDES AND STIGMA ON ACCESS IN DEVELOPED COUNTRIES: FINDINGS OF A SYSTEMATIC REVIEW

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Background: The right to access safe, legal abortion is championed in public health and human rights discourse alike. Despite this, and its (varying levels of) legality in Australia, access to abortion remains limited for many women.

Local and global trends indicate that socio-economic disadvantage, living in rural locations, being a migrant and adolescence all increase odds of unintended pregnancy, and are linked to reduced abortion access. Evidence related to the impact of practitioner objection to abortion provision is mounting. Relatively less is known, however, about how community attitudes and stigma impact access.

Methods: A systematic review was conducted to understand the effect of attitudes and stigma surrounding abortion on access to abortion services in developed countries. Searches were conducted in Medline, Scopus, CINAHL, Informit, Cochrane, Web of Science and Proquest databases. The search strategy included variations of the terms abortion, attitude, stigma, culture, religion, and accessibility, along with the names of developed countries.

Results: A total of 4828 (2672 unique) citations were identified, of which 189 full texts were assessed for inclusion. Over 40 articles were included in the final analysis. Included studies focused predominantly on data from surveys and in-depth interviews.

Through an analysis of the included articles, this presentation explores implications of community attitudes and prevailing stigma on access to abortion services for marginalized communities. Findings hold particular relevance to understanding the uptake, accessibility and equity of distribution of medication abortion as it becomes increasingly available in Australia.

Conclusion: Long established models of health care accessibility indicate that health beliefs mediate health care access. This review identified a scarcity of research linking health beliefs to abortion access. This missing link has implications for our capacity to use research on abortion attitudes to inform advocacy, program and policy development.