

OPINION: Ensure access to high-quality abortion care during and after the COVID-19 pandemic

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Self-managed abortions are vital to combat the spread of COVID-19 while ensuring access to safe and essential health services

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The global response to the spread of COVID-19 has changed life dramatically. Evolving restrictions on travel and physical distancing mean that access to contraception and abortion services will become even more difficult for people facing challenges accessing reproductive health care. This pandemic will leave a permanent impact on the health sector—but it presents an opportunity to adopt evidence-based strategies to expand access to information about and access to self-managed medication abortion at home.

Two new evidence reviews show that women can manage abortions with safe and effective medicines during early pregnancy. Self-managed abortion (SMA) is an important option for people seeking abortion care—especially now, as our health systems face severe resource constraints.

Worldwide, about **40-50 million** abortions occur each year. Of these, nearly half (45%) are unsafe, of which the majority happen in low- and middle-income countries (LMICs). Medication abortion is simple: it involves swallowing one pill—mifepristone—followed 24-48 hours later by putting four additional pills inside one's cheek or under the tongue for 30 minutes. The World Health Organization (**WHO**) supports clinical use of this regimen up to 12 weeks of pregnancy, and research has shown this protocol is 95-97% effective. Complications are rare in people with pregnancies up to 10 weeks.

A new **Cochrane review**, from scientists at **Population Council** and **the WHO**, examined data from 18 randomized and non-randomized comparative trials with more than 11,000 women in ten countries, and found that women who self-administered abortion drugs in early pregnancy had similar rates of successful abortion and of safety as women undergoing provider-administered procedures in LMICs, and the United States. Most studies used the combination regimen (mifepristone and misoprostol) where women took the second drug (misoprostol) at home. A **scoping review** by researchers at **Ibis Reproductive Health** investigated evidence from almost 100 studies covering a wider range of abortion methods. The authors also found that self-management with medication abortion drugs was safe and effective.

Self-management of medication abortion has been documented in **legally restrictive and legally permissive countries**. Online providers like **Women on Web** and **Women Help Women** have been supporting people through the process remotely without in-person interaction with a clinical provider for years. We know that many women prefer to manage their abortion in the comfort in their own **home**. Telemedicine has also shown to be a safe and effective option; a **2019 review**, and a **clinical study in Iowa**, documented similar safety, effectiveness, and self-assessment of outcomes in comparison to routine clinic appointments. **Research** has also shown that self-management of medication abortion later in pregnancy (beyond nine weeks) can be safe and effective.

Abortion is an essential health service, and access to surgical abortion services remains critical, especially for those seeking later abortion care, and others who prefer it.

The current health crisis has put severe strains on global health care systems, resulting in the rationing of health care services. Historically, epidemics and economic crises disproportionately affect women, girls, and those who already face barriers to accessing health care. Supporting people's ability to manage their abortion care will protect reproductive and human rights—and reduce demands on our health system. As the global scientific evidence continues to grow, we hope SMA will become an option for everyone who wants to end an unwanted pregnancy.

Decision makers should use this evidence to drive immediate changes in law, regulations, and services during and after the pandemic. Governments and health systems should make information about and access to self-managed medication abortion available as an urgent strategy to address the COVID-19 pandemic.

As this global health crisis continues to reshape our lives and health systems, let's use this moment as an opportunity to provide more options to women, and ensure their rights, health, and well-being are priorities even as we take the necessary steps to address the pandemic.