Summary Report:

(abridged for public distribution 2/14/10)

The Summit to Develop Strategies to Secure Access to and Expand the Provision of Second-Trimester Abortion Care

Convened September 26-27, 2008

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ANSIRH's mission is to ensure that abortion health care and policy are grounded in evidence.

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Summit Background

Abortion continues to be a contentious issue in the U.S, threatening women's health and reproductive freedom. While campaigns to limit women's access to all abortions continue, the 2007 Supreme Court decision to uphold the "Partial Birth Abortion Ban Act of 2003" highlights the particular vulnerability of second-trimester abortion services. The lack of success in fighting this Ban in combination with public discussions about the value of the fetus have led many, even within the prochoice movement, to question the wisdom of continuing to fight for later abortions. Anti-choice activists have successfully seized on public and prochoice movement ambivalence about later abortion to promote laws and regulations that undermine access to all abortions.

Approximately 120,000 women obtain second-trimester abortions in the U.S. each year, and this number has remained constant for 25 years. The women who seek later abortions are disproportionately young women, low-income women and women of color who face numerous delays in obtaining services that contribute to the later gestational ages at which they present for care.

In 2007, ANSIRH (Advancing New Standards in Reproductive Health) of the University of California, San Francisco launched **the National Strategic Initiative to Secure and Expand Second-Trimester Abortion**, to develop strategies to increase second-trimester abortion services and support those who offer this service. From the outset, the Initiative recognized that addressing the issue of second-trimester abortion would require a coordinated pro-active strategy that brings together organizations across the reproductive rights and reproductive justice movement to develop an approach that integrates new research, a sophisticated communications strategy, innovative legal approaches, the development of evidence-based public policy, and strategies informed by women of reproductive age.

ANSIRH launched the Initiative with a multi-step process designed to engage the reproductive rights community in focusing on the multiple dimensions of second-trimester abortion. Initially, ANSIRH staff summarized the available literature on second-trimester abortion in the United States and obtained supplementary unpublished data from experts in the second-trimester abortion field. To build on this literature review, ANSIRH conducted an online survey of advocates and clinicians to explore their perspectives on second-trimester abortion access and provision.

ANSIRH then shared the results of this survey with a small daylong focus group which included providers, legal advocates, researchers, and activists. Participants discussed their opinions about the survey results and made recommendations about ways to improve access to second-trimester abortion and to support the women who need these services and the clinicians who provide their care. The findings from this meeting were combined with the existing data into a draft report that made preliminary recommendations for action.

Subsequently, ANSIRH formed an Advisory Board which reflected the range of sectors where action is needed to secure access to and expand provision of second-trimester abortion. Evolving drafts of a comprehensive White Paper summarizing research and identifying recommendations were sent to each board member for review. The Advisory Board members also recommended additional key stakeholders to be interviewed to inform the Initiative. During

this process, ANSIRH interviewed a total of 22 Advisory Board members and key stakeholders. Initial recommendations that were generated were shared at meetings of the National Abortion Federation, the National Coalition of Abortion Providers, the National Leadership Networking Initiative and the Training and Access Working Group for additional feedback.

In order to solidify support among organizations already aware of the Initiative, build new alliances across the reproductive rights community and identify a strategy for implementation of key recommendations, in September 2008 ANSIRH convened a two-day Summit of experts to move the Initiative forward.

Overview of the Summit

ANSIRH convened the *Summit to Develop Strategies to Secure Access to and Expand the Provision of Second-trimester Abortion Care* on September 26-27 in Oakland California which was attended by 45 representatives from the field. The two-day Summit highlighted findings and recommendations from the White Paper, brought in new findings and perspectives from other organizations, and generated specific recommendations and commitments for moving forward. Working groups of experts were convened to refine and prioritize recommendations in five key areas: Communications/public opinion, training/the shortage of providers, service delivery/increasing access, legal and policy obstacles, and identifying research that would support each of these areas. Additionally, the Summit identified a structure for moving forward after the meeting, building on the work accomplished during the convening. Recommendations from the Summit are included in a larger confidential report which can be obtained upon request of the organizers and are organized as three strategic goals:

- 1. Understand and Remove Current Obstacles to Access
- 2. Address Provider Shortages and Increase Training
- 3. Change the Discourse around Second-Trimester abortion

Next Steps in Implementation

The Summit generated a good deal of enthusiasm, collaboration, and creativity among participants. In addition to the recommendations generated by the working groups, many organizations stepped forward to initiate new projects and collaborations.

To build on the momentum generated by the Summit, participants discussed several models for moving the strategic initiative forward. It was agreed that a centralized structure was needed to coordinate and promote the work projects identified at the Summit. There was consensus that some staffing of the new Network was necessary so that communication, coordination, agenda setting and momentum could be maintained. There was also a strong desire for a follow-up meeting in approximately one year.

Ibis Reproductive Health agreed to become the administrative organizer for the new Network and support its initial activities. Identifying fiscal support for the new Network will be a critical next step in the Initiative to expand access to second-trimester abortion.