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Abortion education under pressure in U.S. medical schools

by [Lisa Anderson \(/profile/?id=003D0000017fbQEIAIY\)](/profile/?id=003D0000017fbQEIAIY) | 

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Thursday, 12 September 2013 08:30 GMT

⁽⁹⁾ hospitals offering abortion education

NEW YORK (Thomson Reuters Foundation) - The ongoing legislative battle at the state level in the United States to curtail abortion services is not taking place just at abortion clinics, but in the classrooms of medical schools where already scant abortion education is under pressure of being reduced, according to experts and medical students.

“There are still a lot of institutional barriers to getting the training, even basic training, on abortion at the medical school level,” said Sarp Aksel, president of the board of **Medical Students For Choice** (<http://www.msfc.org/>), an international group working to increase abortion-training opportunities for medical students and residents.

"We always say, without providers, there is no choice when it comes to pregnancy counseling," said Aksel, whose group has 163 chapters in 15 countries.

Aksel, a medical student at New York's Albert Einstein College of Medicine who currently is a researcher at the University of California, San Francisco, argues that while abortion education is increasingly available at the residency level, exposure to abortion education in medical school is crucial to future physicians' decision to provide abortions in their practices.

<https://www.guttmacher.org/en/about-us/members/members-registry.aspx>

"If they're not getting exposure to abortion early in their medical

training, it's likely **NEWS** will be able to take advantage of the opportunities in their residency," he told Thomson Reuters Foundation.

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The result could be fewer abortion providers to replace what is already a dwindling number, according to Medical Students for Choice:

- 87 percent of all counties in the U.S. currently have no abortion providers;
- 97 percent of family practice residents and 36 percent of obstetrics-gynecology residents have no experience in first trimester abortion procedures;
- and 57 percent of current abortion providers are over the age of 50.

FEWER CLINICS TRAINING

Most abortion training occurs outside the hospital environment in abortion clinics, which perform the vast majority - more than 90 percent - of the estimated 1.2 million abortions in the U.S. every year. Some 88 percent of those abortions occur in the first 12 weeks of pregnancy, according to the **Guttmacher Institute**

(<http://www.guttmacher.org/media/presskits/abortion-US/statsandfacts.html>), which conducts research, policy analysis and public education on sexual and reproductive health.

But abortion clinics are coming under increasing threat of closing due to states slashing family planning funding and passing so-called **TRAP** (<http://reproductiverights.org/en/project/targeted-regulation-of-abortion-providers-trap>) laws, or Targeted Regulations against Abortion Providers.

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These laws impose requirements such as mandating clinics to make expensive physical renovations to match those of outpatient surgical clinics even though no surgery is being performed, or requiring

physicians who provide abortions, many of whom come from out-of-state due to a lack of local providers, to obtain admitting privileges at local hospitals, which is often impossible.

Some state medical schools and university hospitals, dependent on anti-abortion rights legislatures for funding, are shying away from providing training in the procedure by terminating partnerships - called transfer agreements - with outside abortion providers, which allowed clinics to train students and residents and transfer patients to university medical centers in the rare case - less than 1 percent - of an emergency situation.

This happened in Ohio in April 2013, when the University of Toledo Medical Center, under pressure from anti-abortion activists and some state legislators, declined to renew a transfer agreement with one abortion clinic and ceased making a transfer agreement with another.

"Without them (transfer agreements), a clinic can't operate in Ohio, limiting opportunities for valuable training experience for medical students and residents," wrote Heidi Landecker in a Chronicle of Higher Education **article** (<http://chronicle.com/article/As-States-Try-to-Curb/139831/>), "As States Limit Abortion, Future Doctors Fight for Training".

As a result of the terminated agreements, one clinic, Center of Choice, announced its closing in June and the other, **Capital Care** (<http://www.trust.org/item/20130823174906-5zfz9/>) Network, was in danger of closing because it cannot get a new transfer agreement.

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According to the Guttmacher Institute, seven other states require transfer agreements, including Nebraska, Kentucky, Michigan, Pennsylvania, Tennessee, Virginia and Wisconsin.

Since 1996, the Accreditation Council for Graduate Medical Education (**ACGME** (<http://www.acgme.org/>)) has required training for accreditation of schools providing residency programmes in obstetrics and gynecology, but that training - except for instruction on how to deal with complications of abortion - is optional for students who object to it on moral or religious grounds.

At the residency level, however, “there has been actually a dramatic increase in training opportunities available not just in obstetrics-gynecology residency programmes but also in family practice residency programmes,” said Vicki Saporta, president and chief executive officer of the **National Abortion Foundation (<https://www.prochoice.org/>)**.

Along with ACGME requirements, abortion education at the residency level has also been boosted by the creation of such programmes as the Kenneth J. Ryan residency programme and the post-residency Family Planning Fellowship, which finances fellowships that include abortion training for young physicians.

But at the medical school level, education about abortion is still minimal and can be controversial. Interest in abortion education is sometimes frowned upon by professors who have conservative political views.

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possibilities by placing negative comments in their confidential files.

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"I think when students who are interested in abortion care and learning about it are shunned in their medical schools. That's a big problem," said Aksel, who has experienced such disapproval from instructors.

"Medical school is a rigidly hierarchical culture and it is, in most places, dramatically resistant to controversy. And so students who are viewed as lightning rods for controversy can be subtly, and not so subtly, punished by the hierarchy," Lois Backus, executive director of Medical Students for Choice, told Thomson Reuters Foundation.

In addition, physicians who provide abortion services face stigma and even threat of physical harm - as do the women seeking abortions.

"I've spent my fair share of time in abortion clinics and talking with women and, honestly, what I'm risking is nothing compared to what they're risking," Aksel said.

"They risk being ostracised from their family, their community. They risk not being able to complete their education. They are so much more at risk than me. The fact that they are willing to cross those picket lines," he said, referring to anti-abortion protests outside clinics, "that, for me, is what keeps me going."

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By K. Sophie Will (phone: +1 0932000026) | [@ksophiewill](https://twitter.com/ksophiewill)

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Friday, 25 October 2019 17:00 GMT



"Chief executive farmer" is cutting plastic waste and climate-changing emissions, while pulling farmers out of poverty

By K. Sophie Will (<http://surveys.trust.org>) | [ABOUT THOMSON REUTERS FOUNDATION \(HTTP://WWW.TRUST.ORG/\)](http://www.trust.org/)

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LONDON, Oct 25 (Thomson Reuters Foundation) - Mark Sultan Gersava

grew up in poverty, news of 12 children of a slash-and-burn subsistence farmer in the Philippines province of Sultan Kudarat.

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Today he is the "chief executive farmer" of a company aimed at tackling that same poverty, and combating climate change at the same time.

His firm Bambuhay helps farmers shift from slash-and-burn agriculture - which accounts for about a third of deforestation in the Philippines - to growing bamboo, now in demand as an alternative material to throw-away plastic.

The company, now in its second year of operation, makes popular bamboo straws, toothbrushes, tumblers, and bamboo-based charcoal briquettes, to replace those made from wood.

So far Bambuhay has sold nearly 400,000 reuseable bamboo straws, Gersava said.

This week, wearing a bamboo salakót, a traditional farmers hat, he told delegates to the **One Young World**

(<https://www.oneyoungworld.com/summit-2019>) conference of youth leaders in London what drove him to launch his company.

"In the span of one year, I experienced two super typhoons (and) the hottest measured temperature in Philippines history," Gersava said.

"This was the first time I had faced the direct consequences of climate change," he said.

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LESS POVERTY, FEWER EMISSIONS

Gersava settled on bamboo - a fast-growing plant that absorbs large amounts of climate-changing carbon dioxide and can help prevent soil erosion - as a way of taking action on both climate change and poverty.

The Philippines climate, he said, is perfect for growing the giant grass and has helped poor farmers "become agripreneurs".

The effort has helped cut extreme poverty for thousands of farmers so far, he says.

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"Bamboo is a symbol of poverty in the Philippines. If you live in a bamboo

house, you're very poor - that's basically how it was before," he told the

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"But bamboo now has gained a lot of good attention since I started the company," he said.

Bambuhay has partnered with the Philippines government and farmers to replant 540 hectares (1,340 acres) of deforested land through the company's Bamboo AgroForestry Program, Gersava said.

Just how versatile bamboo fibre can be was evident in the entrepreneur's own attire at the conference, including a sleek bamboo wallet and his cone-shaped hat, a golden salakót.

Such hats are usually made from reeds, but his was produced by farmers from bamboo - a gift in gratitude for his help in pulling them out of poverty, he said.

"When I wear this hat, I feel connected to the farmers. They are the one who are left behind," Gersava said.

"They are the most important people that we that we need to protect. ... We need to value these people more."

BAMBOO BUSINESS

Last year, Gersava sold his condominium, quit his job and with no formal business training and just \$2,000 in start-up funds launched Bambuhay, his social enterprise.

"It's very hard to start a business in the Philippines," he said.

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"There's no support from the government, you have very limited

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Now Gersava employs 17 full-time staff. He says as CEO his aim is not to become rich but to ensure much of what the company earns passes to its farmers.

Still, in addition to helping farmers, he's been able to help pay college fees for his two nieces and support his siblings and parents, he said.

He says his work is far from done. By 2030, he aims for his company to have helped establish 1 billion bamboo plants and to have lifted 100,000 farmers out of poverty, especially in extremely poor areas such as his hometown and the province of Sulu.

Growing up in an impoverished family in Sultan Kudarat, he said, has given him a deep understanding of who pays the highest price as climate change impacts, from floods and droughts to heatwaves and storms, intensify.

"The wealthy CEOs and politicians are not the ones suffering the most from the consequences of climate change. It is the rural villager," he said.

"It is the struggling farmers who are suffering from severe water shortages and droughts that will be the worst hit by food insecurity," he predicted.

To battle both poverty and climate change, "we cannot continue with business as usual", he said.

"We must continue to innovate, to protest and to hold government and companies' feet to the fire," he said in a speech at the conference.

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