GUIDING PRINCIPLES OF REPRODUCTIVE HEALTH CARE

UNIVERSAL ACCESS All women must have full and equal access to all the reproductive health care they need, including abortion. This means that care must be available in every community, in every language that women need, and, most fundamentally, that it be free of charge.

COMPREHENSIVE CARE High quality abortion care means not simply the safest possible procedures performed under the best possible medical conditions, but provision in a sympathetic environment with all the counselling and personal support necessary.

Beyond this, there must be care for the whole cycle of women's reproductive lives; not only abortion, but safe and effective contraception, midwifery, sexuality counselling, and well-woman and well-baby care. Care must not be fragmented between different medical disciplines and facilities. Continuity of care can be achieved by women working with the same practitioner through all stages of particular health concerns, be it prenatal care and birthing, or abortion.

CHOICE Care must be founded on respect for all choices a woman may make. For fully informed choice to be a reality every woman must have access to all the information needed to make the best decision for her circumstances and to all the services required to carry that decision out.

The fundamental goal is the EMPOWERMENT of women. This means not simply high-quality health care, but care provided in such a way that enhances women's control over their lives -- that contributes to their autonomy. This is health care that puts control of all key decisons regarding a woman's health and reproduction in her own hands and provides all the services, counselling, information and support to enable her to put her decision into practice.

The best way to ensure both fully accessible and high-quality woman-centred care is in COMMUNITY REPRODUCTIVE HEALTH CENTRES. All the services and counselling women need would be available in one location. The clinics would operate without the fragmented division of labour and monopolization of knowledge and power of professionalized medicine. Finally, and most fundamentally, the clinics would be accountable to the women of their community and would be responsive to local needs and priorities.