

WOMEN'S EXPECTATIONS AND PRIORITIES IN ABORTION CARE



IPPF/Allison Joyce/India

OVERVIEW

“To me, the best service it starts when the doctor is able to listen to me, is able to understand me, is able to enter into my shoes like he will own the problem, and he will have a great attitude.” (Kenya)

“[The reception staff] always guided me very well. They gave me instructions in every case. They told me where I should go for a check-up and where I should go for taking medicines... they helped me a lot. So, I liked their hospitality.” (India)

Quality of care is a key part of women’s right to health and dignity, and an integral aspect of comprehensive abortion care. However, there is little existing research that addresses what women as clients consider to be a quality abortion service.

IPPF in collaboration with Ibis Reproductive Health, Family Health Options Kenya (FHOK) and the Family Planning Association of India (FPAI), undertook a qualitative study to explore women’s perception of abortion care and what aspects of quality they prioritize.

In Kenya, in-depth interviews were conducted with 24 women who had previously had an abortion. In India, a mix of in-depth interviews and focus group discussions were held with a total of 21 women who had previously had an abortion.

Participants in both countries were asked about a range of topics including their experience seeking and receiving

abortion services, their expectations prior to visiting a service delivery point for services, and the experienced or perceived abortion-related stigma they felt.

In addition, each participant was asked to identify components of quality abortion care that were most important to them.

The findings show that prior to accessing abortion services, most women held fears about the safety of the procedure, negative perceptions of abortion and low expectations of abortion services.

Women described a range of priorities for quality abortion care, most commonly the importance of kind and polite clinic staff, successful procedures and receiving accurate information.

This document provides a summary of the main findings and identifies recommendations for improved quality of care and abortion programming.

WOMEN'S PERCEPTIONS AND EXPECTATIONS OF ABORTION

The majority of study participants in both India and Kenya reported that they had low expectations of the abortion care that they would receive. Women described their fears about the safety, experience, and completion of the procedure, as well as fear of stigmatization and poor treatment by providers. These fears generally stemmed from information (or misinformation) they had gathered from their communities or social networks.

Prevalence of abortion stigma

Negative perceptions of abortion within communities were reported as common. Many women also thought that young or unmarried women were more likely to experience stigmatization from their communities and health care providers. Women reported feeling that abortion should be kept a secret and avoided telling friend and family due to fear of criticism and stigmatization for their decision. The stigma and secrecy of abortion can lead to feelings of isolation and creates a silence that prevents access to accurate information and perpetuates prevalent myths and misinformation about abortion.

"[Abortion is] wrong [because], in the first place it's a sin. Even in the society the way people view...that's why people do it secretly...but it doesn't mean if you get abortion you're a bad girl." (Kenya)

Safety and health concerns

Many women described hearing frightening stories about abortion, due to the prevalence of unsafe abortion in their communities. As a result, women feared an abortion would result in serious health complications, including infertility, injury and ill-health. In some cases, prior to having an abortion women feared that they could lose their life.

"Will I be able to conceive again?" (India)

"I was scared of whether I shall get pregnant again or not. Some do not get pregnant later. That was a thought." (India)



IPPF/Allison Joyce/India



IPPF/Graeme Robertson/ Kenya

Clients who have high expectations of a service may be more likely to accurately critique service delivery and demand better care. Therefore, clinics should support women to recognise and demand high-quality care even if their expectations are low.

Lack of information

Most women had little or no knowledge about abortion prior to seeking care. The little knowledge women did have mostly related to stories and methods of unsafe abortion. This lack of knowledge was a source of fear and worry when thinking about receiving abortion services. In some cases, it deterred women from seeking abortion care at a clinic.

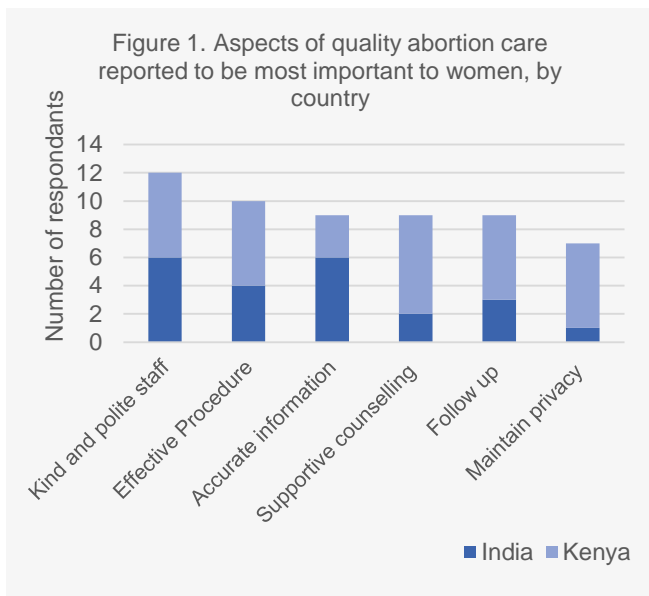
"I used to get scared as I didn't know how it happens. When I used to hear from others about an abortion service I would get scared. I used to think 'don't they get scared?'" (India)

Fear of poor treatment by clinic staff

A common expectation among participants was that they would receive poor or harsh treatment from clinic staff. Women feared that their decision to have an abortion would be judged or criticized by clinic staff, and that they might be shouted at or be denied care at the service delivery point.

"I was afraid of whether someone would scold me for [making] this decision or not. If they asked me why I have not taken pills, why I have not inserted copper [IUD] and all that, what I should answer them? I was worried about all these things. All these things came to my mind before coming here." (India)

WOMEN'S PRIORITIES FOR QUALITY ABORTION CARE



Participants were asked to identify three components of abortion care that were most important to them. They identified a variety of aspects that contributed to the best part of their own abortion care, or were important characteristics of what they perceived as the highest quality care. These ranged from kind and polite clinic staff, to highly skilled providers, to the affordability of the service. Figure 1 represents the six most commonly identified components of a quality abortion service.

Kind and polite clinic staff

Participants in both India and Kenya prioritized interpersonal aspects of care, particularly kind and caring interactions with providers. Women wanted a provider who was “encouraging”, “supportive”, “concerned” and “reassuring”. They also mentioned the importance of a warm welcome when they first arrived at the clinic.

“He made me to feel really comfortable... That is in fact what I liked about him... He just told me this is going to be a quick thing. Don't fear, you are going to be safe.” (Kenya)

An effective and safe procedure

Women emphasized the importance of the efficacy and safety of the procedure, and the competence and skills of the provider. Women in Kenya specifically mentioned the importance of the availability and provision of reliable, quality medication. Many women defined a “successful abortion” as one that brings no complications, maintains a woman’s fertility, and doesn’t lead to death.

“The most important [aspect] is this one on the doctor, the way he attends you, because when he gives you a drug, he gives you the right one, and he offers you the right service.” (Kenya)

Accurate and clear information provision

Most women had little or no knowledge about abortion services prior to seeking care. Therefore, women wanted to have a clear understanding of what to expect during the procedure. Women in India prioritized receiving information on pre- and post- abortion care in the clinic and at home. They also noted the importance of being aware of cost and payment options for the service.

“They must make the patient aware of what will happen after taking the tablet and when to call back and ask for help, if there is heavy bleeding then what to do.” (India)

Supportive and non-judgmental counselling

Women in both Kenya and India noted the value of counselling. Women in Kenya particularly valued being supported during the decision-making process, being listened to, and to be able to discuss their concerns. Women from both countries also noted the value of receiving counselling about contraceptive methods.

“When someone just gives you a platform to speak, that one sounds better. I can call that quality.” (Kenya)

Follow up services

Many women emphasized that follow-up services are a crucial aspect of quality care, and viewed this as an indicator that providers care about a woman’s health after the abortion procedure. Women considered it a useful way to receive detailed information about after-care and to discuss any questions or concerns.

“I got the service beyond my expectations. After giving me that service, they called me here again for a check-up [about] whether I have any problem[s] or not.” (India)

Maintaining confidentiality and privacy

Privacy was a key consideration for women in both countries when seeking abortion services. One woman in Kenya thought that a respectful abortion would be one that guaranteed confidentiality. Privacy and confidentiality are important as women fear facing abortion stigma from their communities.

“I would like [it] to be that I share [my experience] with the health provider I will find in the room. I don't want that information to be leaked out of that room. So confidentiality is very key.” (Kenya)

Understanding which components of care are most important to women when seeking and receiving abortion services will enable clinics to improve quality, client-centered care. This information should be used to design quality of care and client satisfaction measures to be responsive to women’s priorities and needs.

RECOMMENDATIONS TO IMPROVE QUALITY ABORTION CARE

Address and alleviate women's concerns about abortion

- ✓ Ensure that all clinic staff are aware of the fears and expectations that women may have when they arrive for care. Incorporate this into ongoing counselling and values clarification training to equip staff with strategies to reduce clients' fears.
- ✓ Take into account and devise strategies to mitigate the impact of different factors such as marital status and age on women's experience of and ability to access abortion care.
- ✓ Establish networks or virtual spaces where women who have had an abortion can speak with other women and share their experiences.

Use positive and non-stigmatizing language and communication

- ✓ Foster positive interpersonal communications between clinic staff and clients, for example by providing values clarification and client care training for all clinic staff, including receptionists and guards, to ensure women feel welcomed by staff.
- ✓ Review all information and communication materials using IPPF's guide "How to talk about abortion" and remove all stigmatizing language and images.*
- ✓ Use visual materials focused on diversity to communicate the inclusiveness of the clinic to all women, including young and unmarried women.

Raise expectations with regards to quality of care

- ✓ Place placards or posters in the waiting room outlining the rights of the client and use other mechanisms to inform clients what they can expect from the clinics' quality care.
- ✓ Provide information sheets or waiting room education including topics such as what will happen during the visit, quality of the medication, the qualifications of the providers, and that clients will be treated with respect.
- ✓ Inform clients during community awareness raising activities about the standard of quality of care provided at the clinic, including that all services are youth-friendly and stigma-free.

Provide sufficient and accurate information, and supportive counselling

- ✓ Allocate sufficient time for comprehensive counselling and consultation, and provide all necessary information, listen to client's opinions and concerns, and address all questions.
- ✓ Inform women of what to expect at all points of the service, from pre-abortion counselling to post-abortion follow-up, and include information about any necessary lab tests or examinations.
- ✓ Implement a checklist for counselling to ensure that all client's priorities, concerns and questions are addressed.
- ✓ Include skills-building on active listening during counselling training for service providers

Review and adapt service delivery to meet all needs of the client

- ✓ Provide as many elements of care as possible on one site, including lab tests, other SRH services and all necessary medicines.
- ✓ Ensure that women are attended to in clean, comfortable and well-presented facilities.
- ✓ Ensure clients are comfortable at all times, for example by providing sanitary napkins and drinking water, and home-like comforts in the recovery room.
- ✓ Provide all clients with different options to receive follow-up care if they would like it, for example via phone, community workers, or in-person clinic appointments.

Ensure privacy and affordability

- ✓ Ensure privacy for clients at all points of care, from registration, to consultation and procedure, and keep all client information confidential in a secure location.
- ✓ Limit the number of non-essential staff present during care in order to protect women's privacy and comfort.
- ✓ Train clinic staff on the systematic implementation of non-refusal policies and subsidization schemes.
- ✓ Assess how the cost of service impacts access to care and review pricing policies to ensure affordability and access to poor and marginalized clients.

* <https://www.ippf.org/resource/how-talk-about-abortion-guide-rights-based-messaging>