

The profile of women seeking induced abortion

Little is known about the profile of abortion seekers in Sri Lanka where drawing of direct information from women is difficult. This paper reports the results of a self-administered questionnaire survey filled by a group of health professionals involved with cases of abortion.

The survey was undertaken in Colombo district. 247 health professionals in eight categories were selected and 119 respondents, with a response rate of 48.2%, returned the questionnaire mailed to them in 1998-99. The categories were: obstetrician/gynaecologists, psychiatrists, judicial medical officers, district medical officers, medical officers of health, general practitioners, senior nursing sisters in gynaecological wards and senior family health workers in MOH areas. The six characteristics of the abortion seekers investigated were marital status, age, working status, income, educational attainment, and living status.

A majority of the respondents had seen induced abortions among women who were married, non-working, aged between 21-30 years, having a middle income, had some schooling and living in urban areas. All unmarried abortion seekers were found to be younger than married women. Among married women, the largest proportions were in the age groups of 21-30 and 31-40 years. A majority of abortion cases in both unmarried and married groups was not working, living in urban areas and had some level of schooling. The medium level of income is associated with married women than unmarried women. Also, over 90% level of income is associated with married women than unmarried women. Also, over 90% of obstetricians/gynaecologists and medical officers of health had found abortions among married women. Family health workers had seen abortions among non-working women. Many abortion cases referred to the judicial medical officers were in the low-income category. Psychiatrists had seen higher proportion of abortion cases among unmarried and younger women. General practitioners had seen a large proportion of abortion cases in urban areas. A sizeable proportion of abortion cases handled by obstetricians/gynaecologists and psychiatrists belonged to the upper income category.

The differences in the characteristics of abortion cases are evident in categories of health professionals. It can be concluded that this methodology may be employed as a better alternative to the direct survey of women in assessing the profile of abortion seekers. Since characteristics were not derived directly from the abortion seekers, minimizing

any error can be made by directing respondents to examine diagnosis reports before completing questionnaire.