ORIGINAL RESEARCH

Perceptions and Practices of Medical Abortion among Pregnant Women: A Study in Urban Raipur

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ABSTRACT

Background: Medical abortion is defined as the termination of pregnancy through the use of pharmacological agents. Despite its safety and effectiveness, its acceptance and utilization are influenced by various factors, including knowledge, attitudes, and practices among pregnant women. In India, where abortion is legally permissible under certain conditions, understanding these factors is crucial for improving reproductive health services. Objective: To assess the knowledge, attitude, and practice of medical abortion among pregnant women attending the Urban Health Centre at Shri Rawatpura Sarkar Institute of Medical Sciences and Research Centre, Raipur. Methods: This single-centered cross-sectional study was conducted among 220 women of reproductive age who visited the health center for medical termination of pregnancy or regular antenatal check-ups. Data were collected through interviews using a pre-tested structured questionnaire. The data were entered and analyzed using SPSS version 25. Results: A substantial 93% of the participants had heard about medical abortion. The primary sources of information were family members (25.8%) and media (23.3%). Only 50% of the participants knew that abortion is legally allowed in India, while 46% were unsure. The most commonly perceived causes of abortion were infections (41.3%), drugs (32%), and trauma (26.7%). Additionally, 63% of the participants preferred to continue their pregnancies, and 37% were open to abortion. The preferred place for abortion was a health institution for 43.7% of participants, with 41% opting for home, and 15.3% for traditional healers. Conclusion: The study revealed significant gaps in the knowledge and attitudes towards medical abortion, with a considerable reliance on family and media for information. There is a pressing need for enhanced educational initiatives led by healthcare providers to improve knowledge and correct misconceptions about medical abortion. Such efforts are essential to support women's reproductive choices and ensure safer decision-making processes.

Keywords: Medical abortion, pregnancy, reproductive health, contraception.

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INTRODUCTION

Medical abortion, the use of pharmacological agents to terminate a pregnancy, has been recognized as a safe and effective alternative to surgical abortion, especially in the early stages of pregnancy. The World Health Organization (WHO) highlights its importance in providing women with more options for reproductive health care¹. Despite its benefits, the acceptance and utilization of medical abortion are influenced by various factors, including knowledge, attitudes, and practices among pregnant women.

Understanding the knowledge, attitudes, and practices (KAP) regarding medical abortion is crucial for enhancing reproductive health services, particularly in urban areas where access to healthcare facilities is

relatively better. Previous studies have shown that misconceptions and lack of awareness about medical abortion are prevalent among women in different settings, affecting their willingness to opt for this method².

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In India, where abortion has been legally permissible under various circumstances since the Medical Termination of Pregnancy Act of 1971, there is still a significant gap in the dissemination of accurate information about medical abortion³. Urban primary health centers (PHCs) play a pivotal role in educating and providing healthcare services to pregnant women. Therefore, assessing the KAP of medical abortion among women attending these centers can provide valuable insights for public health interventions.

This study aims to evaluate the knowledge, attitude, and practice of medical abortion among pregnant women attending an urban primary health center in Raipur. By identifying gaps and barriers, the findings can inform strategies to improve awareness and acceptance of medical abortion, ultimately contributing to better reproductive health outcomes.

The purpose of this study was to measure the knowledge, attitude, and practice of medical abortion among pregnant women attending an urban health center at Shri Rawatpura Sarkar Institute of Medical Sciences and Research Centre, Raipur.By identifying gaps and barriers, the findings can inform strategies to improve awareness and acceptance of medical abortion, ultimately contributing to better reproductive health outcomes.

MATERIAL & METHODS

This cross-sectional study was conducted at an Urban Health Centre associated with Shri Rawatpura Sarkar Institute of Medical Sciences and Research Centre in Raipur, from April 1, 2024, to April 30, 2024. The study targeted the urban population served by this health center, specifically focusing on women of reproductive age who visited for medical termination of pregnancy or regular antenatal check-ups. The inclusion criteria encompassed women reproductive age seeking medical termination of pregnancy or regular antenatal care, while the exclusion criteria included pregnant women unwilling to participate and those with a history of psychological disorders.

The study aimed to enroll a sample size of 196 females, calculated with a 95% confidence level and a 7% margin of error, assuming 50% of the participants would have knowledge about medical abortion. However, a total of 220 females were ultimately enrolled using a purposive sampling technique considering attrition of 10%.

Ethical clearance was obtained from the Institutional

Ethics Committee of Shri Rawatpura Sarkar Institute of Medical Sciences and Research Centre. The study was conducted after receiving informed written consent from all participants who met the inclusion and exclusion criteria. Data collection involved interviews conducted using a pre-tested, structured questionnaire designed to gather demographic information and assess knowledge, attitudes, and practices regarding medical abortion. The questionnaire was explained to participants in simple, understandable language to ensure clarity and accuracy of responses.

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Data collected were compiled in an MS Excel sheet and analyzed using SPSS (Statistical Package for Social Sciences) Version 25. Qualitative data were presented as frequencies and percentages, while quantitative data were expressed as means and standard deviations.

OBSERVATIONS & RESULTS

The study included 220 female patients with varying demographic characteristics. The age distribution showed that the majority of participants (46.3%) were in the 25-35 years age group, followed by 42.7% in the 18-25 years age group, 9% in the 35-45 years age group, and 2% above 45 years. Most of the participants were married (96.3%), with small proportions being single (1%), divorced (1.7%), or separated (1%).

Regarding occupation, 66% of the participants were housewives, 15.7% were day labourers, 9.7% were private employees, 5% were self-employed in business, 4% were government employees, and 2% were merchants. Monthly income varied, with the largest group earning between 7000-12000 INR (42%), followed by those earning 12000-17000 INR (21%), 2000-7000 INR (16%), 17000-23000 INR (10%), 23000-47000 INR (9%), and over 47000 INR (2%).

Table 1: Demographic Profile of Female Patients		
Age-Group (in years)	No. of patients	Percentage
18-25	94	42.7
25-35	102	46.3
35-45	20	9
Above 45	4	2
Marital Status	No. of patients	Percentage
Single	2	1
Divorced	4	1.7
Married	212	96.3
Separated	2	1
Occupation	No. of patients	Percentage
Day Labourer	34	15.7
Government Employee	9	4
Housewife	145	66
Private Employee	21	9.7
Self Business	11	5
Merchant	4	2

Monthly Income (INR)	No. of patients	Percentage
2000-7000	35	16
7000-12000	92	42
12000-17000	46	21
17000-23000	22	10
23000-47000	20	9
47000>	4	2

The obstetric profile revealed that 41.3% of the participants had no children, 31% had one child, 21.3% had two children, and 3% had more than two children. Among those with children, the age distribution of the previous child showed that 40.4% had children less than 1 year old, 41.6% had children aged 1-2 years, and 18% had children aged 3 years or older.

Table 2: Obstetric Profile of Female Patients			
No. of children	No. of patients	Percentage	
None	91	41.3	
One	68	31	
Two	47	21.3	
More than two	7	3	
Previous Child Age (in years)	No. of patients	Percentage	
<1 Year	49	40.4	
1-2 Years	51	41.6	
≥ 3 Years	22	18	

A significant majority of the participants (93%) had heard about abortion, with 7% reporting they had not. Information about abortion was most commonly obtained from family (25.8%), followed by media (23.3%), friends (21.8%), health personnel (21.5%), and other sources (7.5%). When asked about the legality of abortion in India, 50% of the participants knew it was legal, 4% believed it was not, and 46% were unsure.

Regarding the perceived causes of abortion, 41.3% attributed it to infections, 32% to drugs, and 26.7% to trauma. A high percentage (87%) were knowledgeable

about how to prevent pregnancy, while 13% were not. Among those who knew how to prevent pregnancy, 41.3% mentioned contraceptives, 28.7% cited health education, 18% referred to traditional methods, 4% suggested giving birth once pregnant, and 8% mentioned other methods. Awareness of complications due to unsafe abortion was high, with bleeding being the most recognized complication (59.7%), followed by infection (29%), pelvic pain (34.3%), death (18%), and psychological trauma (12.7%).

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Table 3: Knowledge of Female Patients on Abortion		
Particular	No. of patients	Percentage
Have you ever heard about abortion?		
Yes	205	93
No	15	7
If yes, from whom did you get the information?	No. of patients	Percentage
Friends	45	21.8
Media	48	23.3
Family	53	25.8
Health Personnel	44	21.5
Other Source	15	7.5
Is abortion legally allowed in India?	No. of patients	Percentage
Yes	110	50
No	9	4
Don't know	101	46
What do you think is the cause of abortion?	No. of patients	Percentage
Infectious	91	41.3
Drugs	70	32
Trauma	59	26.7
Known about how to prevent pregnancy	No. of patients	Percentage
Known	191	87

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Not Known	29	13
Possible solution on preventing pregnancy	No. of patients	Percentage
Contraceptives	91	41.3
Health Education	63	28.7
Use of Traditional Methods	40	18
Give Birth Once Pregnant	9	4
Other	18	8
Complications due to unsafe abortion	No. of patients	Percentage
Bleeding	131	59.7
Infection	64	29
D .1		1.0
Death	40	18
Pelvic Pain	40 76	34.3

When considering the possible outcomes of pregnancy, 63% preferred to continue with the pregnancy, while 37% opted for abortion. The preferred place for abortion was a health institution for 43.7% of participants, home for 41%, and traditional healers for 15.3%. Regarding the right to decide on abortion, 36.3% of participants believed it

was their own right, 32.3% thought it was the government's right, 25.3% felt it was a family decision, and 6% mentioned other authorities.

In terms of prevention of unintended pregnancy through effective contraception, including emergency contraception, 80% agreed, 7% strongly agreed, and 13% disagreed.

Table 4: Attitude towards Medical Abortion in Female Patients		
Particular	No. of patients	Percentage
Possible Outcome of Pregnancy		
Continue Pregnancy	139	63
Abortion	81	37
Preferable Place of Abortion	No. of patients	Percentage
Health Institution	96	43.7
Home	90	41
Traditional Healer	34	15.3
Attitude towards the right of abortion	No. of patients	Percentage
Myself	80	36.3
Government	71	32.3
Family	56	25.3
Other	13	6
Prevention of unintended pregnancy through use of effective	No. of patients	Percentage
contraception, including emergency contraception		
Agreed	176	80
Strongly Agree	15	7
Disagree	29	13

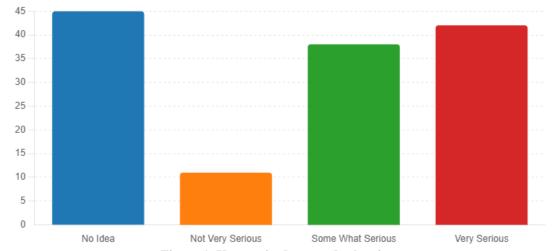


Figure 1: Your attitude towards abortion

The graph illustrates the perceived seriousness of medical abortion among female patients, with 45% having no idea about its seriousness, 11% considering it not very serious, 38% finding it somewhat serious, and 42% viewing it as very serious. This distribution highlights a significant variation in understanding and concern about medical abortion, indicating a need for enhanced education and awareness among the study population. The diverse perceptions underscore the importance of targeted informational campaigns to address misconceptions and provide accurate information regarding the risks and implications of medical abortion.

DISCUSSION

Our results showed that 93% of the participants had heard about abortion, which aligns closely with the findings of Kumar et al. $(2020)^2$, who reported that 90% of women in urban India were aware of abortion services. However, the source of information varied significantly; while our study found family to be the most common source (25.8%), Kumar et al. noted healthcare professionals as the primary source (30%). This discrepancy suggests the importance of healthcare providers in disseminating accurate information, which may not be as emphasized in our study population.

In terms of knowledge about the legality of abortion in India, only 50% of our participants knew that abortion is legally permitted, compared to 65% in the study by Singh et al. (2018)³. This gap highlights the need for more comprehensive legal education regarding reproductive rights in our study area.

Our study found that 41.3% of participants believed infections were a primary cause of abortion, whereas Patel et al. (2019)⁴ reported a lower percentage (30%) attributing infections as a cause in their research conducted in rural settings. This difference might be due to varying health education levels and access to information between urban and rural populations.

Regarding the attitude towards medical abortion, 63% of our participants preferred to continue their pregnancies, while 37% were open to abortion. These findings are somewhat consistent with the study by Chhabra et al. (2021)⁵, which found that 40% of women in semi-urban areas supported the idea of abortion for unintended. This suggests a growing acceptance of medical abortion, although a significant proportion still prefers to avoid it.

A study by Puri et al. (2021)⁶ in a similar urban setting found that only 30% of women had correct knowledge about the complications associated with unsafe abortions, compared to 59.7% in our study who recognized bleeding as a major complication. This higher awareness in our population might reflect better access to health information or recent public health campaigns.

In contrast, a study conducted by Sood et al. (2019)⁷ in a rural context reported a much lower awareness (40%) about the legality of abortion compared to our

findings (50%). This highlights the urban-rural divide in the dissemination of legal knowledge regarding abortion.

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Additionally, research conducted by Mishra et al. (2020)⁸ observed that 70% of urban women believed that abortion should be a woman's right, which is slightly higher than the 36.3% in our study who felt it was their right to decide on abortion. This suggests that while there is a significant support for reproductive rights, cultural and societal factors might still influence personal beliefs.

Finally, a study by Sharma et al. (2018)⁹ highlighted that 60% of women preferred health institutions for abortion, closely matching our finding of 43.7%. This preference underscores the importance of ensuring that healthcare facilities are equipped and accessible for safe abortion services.

CONCLUSION

This study highlights significant gaps in the knowledge, attitudes, and practices related to medical abortion among pregnant women attending an urban health center in Raipur. Despite high awareness levels, there is substantial misinformation regarding the causes and complications of abortion. Additionally, a significant portion of the population is unaware of the legal status of abortion in India, indicating a need for targeted educational interventions.

The findings underscore the crucial role of healthcare providers in disseminating accurate information about medical abortion. Reliance on family members as primary sources of information points to potential avenues for misinformation, which can be mitigated through improved health literacy programs and stronger engagement from healthcare professionals.

The mixed attitudes towards medical abortion, with a considerable number of women preferring to continue pregnancies despite unintended circumstances, reflect underlying cultural and societal influences. This cautious attitude towards abortion emphasizes the importance of culturally sensitive educational campaigns that respect and address these influences while promoting informed decision-making.

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