

DOI: <http://dx.doi.org/10.18203/2320-1770.ijrcog20193792>

Original Research Article

Health seeking behaviour of women with unwanted pregnancies: a tertiary care centre based study of eastern Uttar Pradesh, India

Sudhir Kumar Gupta¹, Harish Chandra Tiwari^{2*}, Reena Srivastav¹

¹Department of Obstetrics and Gynecology, BRD Medical College, Gorakhpur, Uttar Pradesh, India

²Departemnt of Community Medicine, BRD Medical College, Gorakhpur, Uttar Pradesh, India

Received: 18 June 2019

Accepted: 31 July 2019

*Correspondence:

Dr. Harish Chandra Tiwari,

E-mail: dr.harishchandratiwari@gmail.com

Copyright: © the author(s), publisher and licensee Medip Academy. This is an open-access article distributed under the terms of the Creative Commons Attribution Non-Commercial License, which permits unrestricted non-commercial use, distribution, and reproduction in any medium, provided the original work is properly cited.

ABSTRACT

Background: Termination of an unwanted pregnancy is legal in India. Many women in this region are still not aware about safe abortion services and its consequences. Especially young, economically deprived and those without a supportive male partner are at higher risk of unsafe abortion. There is no clear and established evidence on this issue in our region. In the study, the aim was to explore the health seeking behaviour of women with unwanted pregnancies.

Methods: Present cross-sectional study was conducted among 303 patients visiting to obstetrics and gynecology ward of BRD Medical College, Gorakhpur from April 2018 to September 2018. Their socio demographic profile, reasons for current termination of pregnancy and health seeking behaviour was explored.

Results: Most common reason given for terminating the current pregnancy was completed family size 65.3%. Unmarried girls with pregnancy were 5.6 % who wanted termination of pregnancy. Majority (67.0%) took medication for termination of pregnancy from nearby medical store without an expert consultation 15.8% of women consulted to a local quack or local dai for termination of pregnancy. 12.9% of women tried a method as advised by family/friends for termination of pregnancy. About 4% of women 1st tried traditional and herbal medicines, drinking tea or juice for termination of pregnancy. Majority of women (84.5%) visited to medical college for management of complications of earlier tried method of termination of pregnancy.

Conclusions: Completed family size was found most common reason for termination of pregnancy. Self medication without consultation of authorised doctor was found most common practice of abortion leading to complications.

Keywords: Fertility, Health seeking behavior, Maternal death, Missed period, Unsafe Abortion, Unwanted pregnancy

INTRODUCTION

In India, nationwide FP program was introduced in 1952. Currently, Oral Contraceptive Pills (OCP), condoms, Intra Uterine Device (IUD), male and female sterilization are provided through the public sector. Despite six decades of family planning promotion, contraceptive prevalence rate (CPR) in India remains unsatisfactory leading to unwanted pregnancies. Unwanted pregnancies

are usually being terminated intentionally. Globally, one in five pregnancies is estimated to end in abortion. Induced abortion may be either safe or unsafe. Abortion (especially unsafe) may have serious health consequences and cause complications such as haemorrhage, sepsis and uterine perforation.^{1,2} The rate of unsafe abortion is quite high in South-Asia (1/3 of the globe) due to strict anti-abortion legislation in many South-Asian countries. While termination of an unwanted pregnancy is legal in

India, women belonging to eastern Uttar Pradesh, where fertility and maternal mortality are higher than the Indian average, often encounter numerous challenges when trying to access safe abortion services. Sex-selective abortion is also high in this region due to the preference for a male child. Many women in this region are still not aware about safe abortion services and its consequences. Especially young, economically deprived and those without a supportive male partner are at higher risk of unsafe abortion.

There is no clear and established evidence on this issue in our region. In the study, the aim was to explore the decision-making, experiences and preferences of women for abortion services. The objective of the study was to study the socio-demographic profile and health seeking behaviour of women with unwanted pregnancies.

METHODS

Present study was cross sectional hospital based study conducted among patients visiting to obstetrics and gynecology ward of BRD Medical College, Gorakhpur from April 2018 to September 2018.

A pregnant lady willing for termination of pregnancy was a study unit.

A total of 626 patients visited to department for availing abortion services. Only 303 patients were interviewed by convenient sampling.

Women who had received an abortion or post-abortion care service at B.R.D. Medical College, Gorakhpur were interviewed using a structured questionnaire on the day of procedure. During the informed consent process for this interview, respondents were asked about their socio demographic profile, reasons for current termination of pregnancy and health seeking behaviour of women with unwanted pregnancies.

Statistical analysis

Data collected was entered in the Microsoft-excel and analysis was done.

RESULTS

A total of three hundred and three women who sought termination of pregnancy in the hospital during the study period were included in the study. Out of 219, 72.3% of women were below the age of 30. 59.4 % of women resided in urban area. 95.0% of women were Hindu by religion, 94.3% were married and 91.8% women belonged to nuclear family. Majority 71.6% of women belonged to SES class IV and V.

As shown in Table 2, most common reason given for terminating the current pregnancy was completed family size 198 (65.3%) followed by a very young previous

baby (10.6%). Medical reasons (2.0%) and family/husband not wanting child was (5.6%). Unmarried girls with pregnancy were 5.6 % who wanted termination of pregnancy.

Table 1: Socio demographic characteristics of women seeking termination of pregnancy (N =303).

Characteristics	N	Percentage
Age		
≤30years	219	72.3
>30years	84	27.7
Residence		
Urban	180	59.4
Rural	123	40.6
Religion		
Hindu	288	95.0
Muslim	8	2.6
Christian	7	2.3
Marital status		
Married	286	94.3
Unmarried	17	5.6
Education of women		
Illiterate	84	27.7
Primary	135	44.6
Middle	49	16.2
High school	23	7.6
Secondary	5	1.7
Graduate	7	2.3
Socio economic class*		
I	3	1.0
II	12	4.0
III	71	23.4
IV and V	217	71.6
Family type		
Nuclear	208	68.6
Joint	77	25.4
Three generation	18	5.9

* B. G. Prasad classification

Table2: Reason of current termination of pregnancy (N= 303).

Characteristics	Total	
	N	%
Family completed	198	65.3
Previous baby too young	32	10.6
Contraceptive failure	3	1.0
Medical/Eugenic	6	2.0
Economic	30	9.9
Family/herself/husband not willing for child at present	17	5.6
Unmarried	17	5.6

Table 3: Health seeking behaviour of women who underwent abortion for unwanted pregnancies (Multiple Response Table).

Characteristics	N	%
UPT done within 28 days of missed period	181	59.9%
1 st consulted to a health facility/qualified doctor for safe abortion other than BRD MC GKP.	86	28.4%
1 st Took medication for termination of pregnancy from nearby medical store	203	67.0%
1 st Tried traditional and herbal medicines, drinking tea or juice for abortion by herself.	12	4.0%
1 st Tried a method for termination of pregnancy as advised by family members/friends	39	12.9%
1 st Consulted to a unskilled provider (Quack/Local Dai) for termination of pregnancy	48	15.8%
Consulted to medical college after referral	47	15.5%
Consulted to medical college after having complications by her self	256	84.5%

Out of 303 women visited to medical college for seeking abortion care, majority 59.9% did their UPT test within 28 days of missed period. Majority (67.0%) took medication for termination of pregnancy from nearby medical store without an expert consultation. Less than one third i.e. 28.4% of women consulted to a health facility or a qualified medical practitioners for termination of pregnancy initially. 15.8% of women consulted to a local quack or local dai for termination of pregnancy. 12.9% of women tried a method as advised by family/friends for termination of pregnancy. About 4% of women 1st tried traditional and herbal medicines, drinking tea or juice for termination of pregnancy. Majority of women (84.5%) visited to medical college for management of complications of earlier tried method of termination of pregnancy.

DISCUSSION

In the present study, 72.3% MTP seekers were below 30 years. A similar study done in Chennai where 70.3% of women and Jamnagar where 68.42% of women who obtain termination of pregnancy care were in the age group of 20-29 years.^{3,4} This shows that younger women seek termination of pregnancy more frequently rather than the older women, which may be attributed to sexually active young couple with lack of awareness for accepting contraceptive measures. Decision at earlier ages is also influenced by family and friends. Inability to take decision by themselves either to postpone pregnancy or to complete the family leads to pregnancy and abortions.

In the study, 40.6% women were from rural area which is higher to a study done in Chandigarh which found that 30% of the women seeking abortion were from rural set

up.⁵ This may be because our institution is tertiary care institution which offers quality health care services and receives referrals from all hospital in the city and as well as from rural areas.

In the study majority of women seeking abortion care were either illiterate (27 %) or educated up to primary level (44.6%). Similarly Uma Maheshwari and Ganguli et al in their study found that 44.4% MTP seekers were illiterate and 48.2% cases were educated up to primary school.^{3,6} 94% of the women seeking termination of pregnancy care were of the lower socio economic class (IV and V). Low level of education and poor socioeconomic status makes women more vulnerable to unwanted pregnancies and risks of morbidity and mortality due to abortions.

Majority of couples opted termination of pregnancy as a method to limit their family size as in the study the most common reason for seeking abortion was completed family (85.9%). Medical conditions leading to termination of pregnancy was only (4.9%). These finding was consistent with the studies done in Chennai, Jamnagar and Rajasthan.^{3,4,7} About 40% of women with unwanted pregnancies have not done their UPT test within 28 days.

This shows that couples are ignorant in the period of early pregnancy as they do not know the medical method of termination of pregnancy (method with easy access and low post abortion complications) and the fact that as pregnancy advances success of medical abortion becomes doubtful.⁸ Majority (67.0%) took medication for termination of pregnancy from nearby medical store without an expert consultation. It may lead to use of medical abortion method in advanced pregnancy or in inadequate dose leading to no/incomplete abortion and complications.

84.5% of women visited to medical college for consultation regarding complication of earlier tried method of termination of pregnancy. Factors like lack of awareness about the need to seek abortion in early pregnancy, poor availability of abortion services in rural areas, high abortion cost in the cities, may be the reasons for abortion outside the accredited hospitals leading to unsafe abortion and complications.⁹

CONCLUSION

Completed family size was found most common reason for termination of pregnancy. Self medication without consultation of authorised doctor was found most common practice of abortion leading to complications.

Funding: No funding sources

Conflict of interest: None declared

Ethical approval: The study was approved by the Institutional Ethics Committee

REFERENCES

1. Alam I, Perin Z, Haque M. Intestinal perforation as a complication of induced abortion a case report review of literature. *Faridapur Med Coll J.* 2012;7:46-9.
2. Bhattacharya S, Saha S, Bhattacharya S, Pal R. Consequences of unsafe abortions in India a case report *pract. Obstet Gynecol.* 2011;2:4.
3. Maheswari UR, Jayanthi TP. Abortion seeking behaviour: a study from tertiary care hospital. *Int J Community Med Public Health.* 2017;4:2303-7.
4. Gupta S, Dave V, Sochaliya K, Yadav S. A Study on socio-demographic and obstetric profile of MTP seekers at Guru Govind Singh Hospital, Jamnagar. *Age.* 2012;3(1):50-4.
5. Mehra R, Goel P, Dua D, Huria A. Knowledge of emergency contraception among women coming for induced abortion. *J Obstet Gynaecol India.* 2006;56(3):233-5.
6. Ganguly G, Biswas A, Sharma GD. Profile of women undergoing medical termination of pregnancy in hospital. *J Indian Med Association.* 1993;91(11):286-7.
7. Elul BS, Barge S. Unintended pregnancy and abortion: a community-based study in Rajasthan - summary report. New Delhi: population council; 2003. Available at: [https:// pdfs. semanticscholar. org/ 88a5/d14af2a3e434d6e7d19ec05d37f9f26ed .pdf](https://pdfs.semanticscholar.org/88a5/d14af2a3e434d6e7d19ec05d37f9f26ed.pdf). Accessed on 19th June 2018.
8. IIPS and Macro international. National Family Health Survey (NFHS-3) 2005-06: India Volume 1. IIPS and Macro International, Mumbai India, 2007. Available at: [https:// dhsprogram. com/ pubs/ pdf/ frind3/ frind3 -vol1andvol2.pdf](https://dhsprogram.com/pubs/pdf/frind3/frind3-vol1andvol2.pdf). Accessed on 9th April 2019.
9. Office of the Registrar General and Census commissioner. Annual Health Survey, 2011-12: Fact Sheet, Odisha, Available at: 2012-13. http://www.censusindia.gov.in/vital_statistics/AHSBuletins/AHS_Factsheets_2012-13/FACTSHEET-Odisha.pdf. Accessed on 21st September 2018.

Cite this article as: Gupta SK, Tiwari HC, Srivastav R. Health seeking behaviour of women with unwanted pregnancies: a tertiary care centre based study of eastern Uttar Pradesh, India. *Int J Reprod Contracept Obstet Gynecol* 2019;8:3654-7.