

Findings of a Household Survey of Abortion Knowledge, Skills and Experiences among Young Women in Rupendehi, Nepal

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Abortion has been legal in Nepal since 2002, and while it gives all women the right to abortion up to 12 weeks of pregnancy; parental consent is required for girls younger than 16 years. As a result, adolescents rarely utilize the official health sector for legal terminations of unwanted pregnancies where adolescents (between the ages of 10-19) comprise more than one fifth of the total population, a majority of adolescents (64 %) have their first sexual intercourse between 15 to 17 years of age, and only 4.5 percent of adolescent women use a modern form of contraception (WHO, 2007). Barriers to reproductive health care are even more insurmountable for young, unmarried women. Overall, unsafe abortion remains a leading cause of maternal morbidity and mortality in Nepal, accounting for an estimated 54% of gynecological and obstetric hospital admissions (Government of Nepal, Ministry of Health, 1998) and 20% of maternal deaths in health sites (Government of Nepal and UNICEF, 2000).

Findings of a recent situation assessment (SOLID NEPAL, 2011) indicate a need to improve knowledge, attitudes and skills around reproductive health and abortion care among young women in Nepal, including unmarried women. To better understand young women's needs, we conducted a study designed to obtain community-level information on young women's knowledge, attitudes and skills concerning reproductive health care.

METHODS

Study Design

The study design used a probability-based community sample in Rupendehi district. Survey respondents were comprised of 600 girls in selected households between the ages of 16 and 24. The minimum age of 16 has been identified because it is the legal age of adulthood in Nepal. Two-stage cluster sampling was used to select the required sample, where first stage of sampling identified the clusters (wards) using the probability proportional to size (PPS) method, and then the required number of girls was randomly selected within each ward (second stage). The final sample was conducted in 37 of Rupendehi's 71 main socio-political units (including 69 Village Development Committees (VDCs) and two municipalities (MNCs). The VDCs/MNCs are subdivided into approximately nine wards each based on population. For the purpose of this study, the primary sampling unit was wards within the intervention areas; 30 clusters (wards) were selected using the PPS method based on 2001 census data.

Sample Selection

All households in each sampled cluster (ward) formed the sampling unit in the final stage of selection. A list of household heads was prepared in consultation with key informants of the selected wards. An associated sketched map of each cluster (ward) delineating the public places, village/settlement pattern, etc. was prepared by the study field team to aid locating sampled households. Twenty households were randomly selected from each of the previously identified clusters such that each household had an equal chance of inclusion in the sample (simple random sampling). For this purpose, all the households from each of the selected clusters were listed separately and the required number of households was selected from each cluster by using random start and a sampling interval.

After selection of sampled households, interviewers administered a screening questionnaire to the head or knowledgeable person of the sampled household to determine whether or not there was a young woman aged 16-

24 living in that household. The screening questionnaire contained information such as name of household head, name of village, and the number and names of young women between 16-24 years of age residing in the household. Only one young woman was selected for participation from each of the sampled households. If there was more than one eligible young woman in a sampled household, one was selected randomly for interview. In case of unavailability of the eligible respondent in the sampled household, an immediate neighbouring household was substituted.

The interviews collected information on participant demographics, media habits and sources of reproductive health information (including contraception and abortion), reproductive history (including any past attempts to terminate an unwanted pregnancy); abortion knowledge, attitudes and skills; and reproductive health experiences of friends and younger sister-cousins.

The study protocol, data collection instruments, and associated interview guides will be reviewed for adherence to ethical standards both by the National Health Research Council (NHRC) in Nepal and by Allendale IRB in the United States.

Data Analysis and Preliminary Results

Completed questionnaires were coded and entered using FoxPro, then validated by a computer processing team who checked for consistency and completeness; data analysis will be completed using Stata 11.1. Descriptive statistics of the study sample (Table 1) and preliminary bivariate analysis for knowledge of abortion law by marital status (Table 2) are presented here. Additional analyses will consider media habits and current/preferred sources of reproductive health information, attitudes toward abortion and reproductive health history. Adjusted models for the dependent variables of knowledge and attitudes will be considered.

Anticipated key findings (based on preliminary analysis) include:

- 1) Although access to reproductive health information is high, knowledge of Nepal's abortion law is very low
- 2) Confidentiality and positive/supportive attitude is a key facilitator in seeking abortion care
- 3) Romantic activity outside marriage is a reality
- 4) Medical abortion and dilation & curettage dominate, little knowledge or use of manual vacuum aspiration
- 5) Young women can identify multiple sources for abortion care, but seem to prefer PHCCs, medical doctors and pharmacies
- 6) Attitudes towards abortion are mostly positive
- 7) There is a bias against unmarried women in need of reproductive health care
- 8) Partner support is high, but young women lack reproductive independence, confidence
- 9) Friends are a large source of support for abortion
- 10) Important sources of information include media, health providers and interpersonal relationships

References

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Table 1: Participants Demographics

	Unmarried* (n=325)		Currently or Ever Married** (n=275)		Total (n=600)	
	n	(%)	n	(%)	n	(%)
Age, in years						
Mean	17.8		20.9		19.2	
(SD)	1.98		2.45		2.68	
95% CI	(17.5, 18.0)		(20.6, 21.1)		p-value	<.01
Highest Class Completed						
None	14	4%	78	28%	92	15%
Grade 5 or below	44	14%	67	24%	111	19%
Grade 6 or above	145	45%	73	27%	218	36%
SLC	72	22%	32	12%	104	17%
Some higher education	50	15%	25	9%	75	13%
Literacy						
Neither	280	86%	192	70%	472	79%
Write only	13	4%	26	9%	39	7%
Both read and write	32	10%	57	21%	89	15%
Caste/Ethnicity						
Brahmin/Chhetri	68	21%	38	14%	106	18%
Tarai/Madhesi/Other	111	34%	130	47%	241	40%
Dalit	24	7%	31	11%	55	9%
Newar	3	1%	2	1%	5	1%
Janajati	100	31%	53	19%	153	26%
Muslim	19	6%	21	8%	40	7%
People in Household						
Husband	0	0%	192	70%	192	32%
Mother/Father	320	98%	30	11%	350	58%
Mother-in-law/Father-in-law	0	0%	197	72%	197	33%
Sister/Brother	308	95%	34	12%	342	57%
Sister-in-law/Brother-in-law	65	20%	152	55%	217	36%
Children	0	0%	175	64%	175	29%
Other	69	21%	24	9%	93	16%
Monthly Household Income						
<1000	10	3%	8	3%	18	3%
1001 - 2000	15	5%	12	4%	27	5%
2001 - 3000	14	4%	9	3%	23	4%
3001 - 4000	22	7%	19	7%	41	7%
4000+	256	79%	222	81%	478	80%
Don't know/refused	8	2%	5	2%	13	2%

*Unmarried=Unmarried + Guana only

**Currently or Ever Married=Currently married + Separated/Divorced/Widowed

Table 2: Knowledge on Legal Status of Abortion in Nepal among Young Women by Marital Status

	Unmarried* (n=325)		Currently or Ever Married* (n=275)		Total (n=600)		p-value
	n	(%)	n	(%)	n	(%)	
Induced termination of pregnancy is legal							0.011
Yes	165	51%	106	39%	271	45%	
No	35	11%	35	13%	70	12%	
Do not know	125	38%	134	49%	259	43%	
Legal up to weeks ¹							0.256
<12	12	7%	9	8%	21	8%	
12	115	70%	76	72%	191	70%	
>12	6	4%	8	8%	14	5%	
Do not know	32	19%	13	12%	45	17%	
Abortion is legal for only married women ²							0.516
Yes	16	10%	15	14%	31	11%	
No	126	76%	78	74%	204	75%	
Do not know	23	14%	13	12%	36	13%	
Legal for what age women ²							0.385
16	38	23%	35	33%	73	27%	
17-18	21	13%	11	10%	32	12%	
19-20	31	19%	14	13%	45	17%	
>20	12	7%	6	6%	18	7%	
Do not know	63	38%	40	38%	103	38%	
Consent required for young women ²							
From parents	91	55%	43	41%	134	49%	0.019
From guardian	50	30%	45	42%	95	35%	0.041
From anyone > 16	34	21%	26	25%	60	22%	0.448
From no one	0	0%	2	2%	2	1%	0.152
Health provider	7	4%	4	4%	11	4%	1.000
Husband/boyfriend	3	2%	10	9%	13	5%	0.007
Other	3	2%	1	1%	4	1%	1.000
Do not know	42	25%	23	22%	65	24%	0.48

¹P-value associated with chi-square tests of association.

²Among 271 women who think induced abortion is legal in Nepal.