

# Abortion in Humanitarian Settings

Sharing results from a qualitative study on healthcare providers' experiences of providing comprehensive abortion care in the humanitarian setting in Cox's Bazar, Bangladesh

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# Background

- A humanitarian setting is “one in which an event or series of events has resulted in a critical threat to the health, safety, security, or well-being of a community or other large group of people.” (IAWG, 2018)
- In humanitarian settings women and girls face increased risk of unsafe abortion → maternal mortality and morbidity
- Barriers to comprehensive abortion care (CAC) in humanitarian settings:
  - lack of prioritisation, lack of training, lack of equipment and supplies, restrictive abortion laws and policies and lack of knowledge on laws and policies, stigma and negative attitudes ...

# Abortion in Bangladesh

- Abortions are restricted unless necessary to save the mother's life
- Menstrual Regulation (MR), a procedure to regulate the menstrual cycle to ensure a non-pregnancy is permitted up to week 10–12 following LMP
  - MVA
  - Medical MR (mifepristone & misoprostol)

# Cox Bazar, Bangladesh

- Over 900 000 Rohingya refugees from Myanmar
- Large-scale incidences of rape and sexual violence by the Myanmar military
- Following displacement, Rohingya women and girls continue to face different forms of sexual and gender-based violence
- MR, PAC and FP services are provided at facilities managed by GoB or NGOs

## Study objective

- To explore healthcare providers' perception and experience of providing comprehensive abortion care in the humanitarian setting in Cox's Bazar, Bangladesh and to identify barriers and facilitators in service provision

# Method

- **Study design:** qualitative study
- **Sampling:** purposeful sampling with assistance from Ipas
- **Data collection:** 24 in-depth interviews (IDI)
  - 19 IDI with HCP in Cox's Bazar (March 2019)
  - 5 IDI with key informants
- **Data analysis:** content analysis with an inductive approach

# Organisation, collaborations and policies influencing provision of CAC

- The MR policy provided a favorable legal environment
- Good collaboration among humanitarian actors and the GoB
- Supportive work environment
- Supply and equipment was available and adequate
- However, implants and IUDs were not readily accessible
- The Mexico City policy affected service provision

# Influence of confidence, competence and pride on HCPs' provision of CAC

- HCPs felt confident that they were providing good services
- HCPs took pride in their work and created a positive identity

*“... she cried a lot and told me that she is not ready to bear the child [...] she was so sacred of the matter being exposed to her neighbours.[...] I feel happy that from a worst-case scenario I helped a girl to live a new life. I love these things about the job, to help and to protect people from danger.”*

- HCPs felt adequately trained in MR, PAC and FP and had received training from NGOs before deployment
- However, there was limited knowledge on the abortion law among HCP and the knowledge on the MR policy varied



# Influence of HCPs' understanding of Rohingya women's needs on CAC provision

- HCPs perceived the Rohingya community as patriarchal and Rohingya women as religious and conservative

→ Affected counselling and provision of care: some required the husbands' permissions before providing care, some used religion and motherhood to increase acceptance

*“We tell them it [MR] is not a sin. Because it will save your family, it will make you and your newborn child happy. You already have a child. If you have another baby now, you will get bad impact on your health. You cannot give your children enough care. So, take the MR and care for your family.”*

- HCPs perceived the humanitarian setting to affect Rohingya women's SRH outcome and decision-making

# Conclusion

- Access to and availability of CAC in Cox's Bazar can be improved by (amongst other...)
  - integrating the full package of CAC services
  - ensuring providers have knowledge of abortion policies
  - ensuring care is woman-centred and non-judgmental
  - understanding women's needs from their own perspective