



IPPF International
Planned Parenthood
Federation

European Network

Reproductive
Health Alliance
Kyrgyzstan



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Young people and abortion

Case study from Kyrgyzstan

Galina Chirkina, Reproductive Health Alliance Kyrgyzstan

Tatiana Popovitskaya, Reproductive Health Alliance Kyrgyzstan

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Abortion and adolescents (official statistics)

7 out of 10 pregnancies end in an abortion

One in 10 abortion clients is a young person
(up to 19 years)

More than 200 abortion clients were
younger than or 14 years of age

Abortion and adolescents (official statistics)

During the last 5 years the use of
contraceptives by adolescents
decreased by 1.8 times



Abortion and adolescents (official statistics)

The official abortion rate in the age group from 13 to 19:

in 2005 - 2,9 abortions per 1000 girls

in 2008 –3.0 abortions per 1000 girls

in 2009 –3.6 abortions per 1000 girls

The number of abortions is increasing especially in the age groups 15 -17 and 18-19 years of age.

The age group from 12 to 24 takes 36% of all abortion done in all age groups

Independent statistics

The independent statistics shows much higher rates (at least 10 times higher than official statistics)

Only one in 8 abortions in government clinics is registered.

Abortions performed in private clinics are not registered and not included in government statistics.

Main challenges for YP in accessing SRHR info & services

- Legal and traditional barriers for adolescents to access abortion and contraceptive services
- Limited access to information about abortion and contraceptive services for adolescents
- Limited access to resources on contraception
- Limited access to quality information on RH and the absence of sexual education

Main challenges in preventing unwanted pregnancies amongst YP

- Sexual violence in families and communities
- Violence based on traditions - bride kidnapping
- Violence during conflicts – ethnic clashes in Osh city, June, 2010

Main challenges in Quality of abortion care

- 70% of all abortions is performed by D&C
- Unsafe abortion procedures (lacking infection prevention, use of D&C, etc.)
- Legal barriers faced when trying to introduce new methods of abortion
- Lack of post abortion counseling (only 10% of abortion clients receive pre- and post- abortion counseling)
- The absence of Integration of RH services for young people into the primary level of health care system, into Youth Friendly Services and into the educational system

Main challenges in Quality of abortion care

- Lack of specialization for doctors and other health personal on working with adolescents in RH
- Lack of governmental financing for health programs focused on adolescents
- Adolescents are not seen as a “special” group or group with special needs in service provision system

RHAK

SA and FP clinics

- Youth friendly services
- Well trained doctors, consultants and medical personnel
- Safe abortion only - Methods: MVA and MA (pilot clinic for introducing MA)
- Quality control: environment, equipment and supplies, techniques of procedures, counseling
- Pre- and -post counseling – an integral part of abortion services
- Access to contraceptives

RHAK

SA and FP clinics

- Work with vulnerable groups:
 - Street children
 - Sex workers
 - Ex- prisoners
 - Refugees
 - Migrants etc.
- Quality services for low – income people, for youth
- Informational campaigns and activities (including media) for young people: open – door days, group consultations , “Open door to a clinic” for students and schoolchildren

RHAK

SA and FP clinics

- Partnership with different types of organizations
 - Ministry of Health
 - Ministry of Youth
 - NGOs working with vulnerable groups, including young people
 - Governmental health organizations – clinics, maternities, RH Centers
 - Local authorities
 - International agencies: UNFPA, GTZ
 - National coalition of safe abortion
 - Ombudsmen and its team







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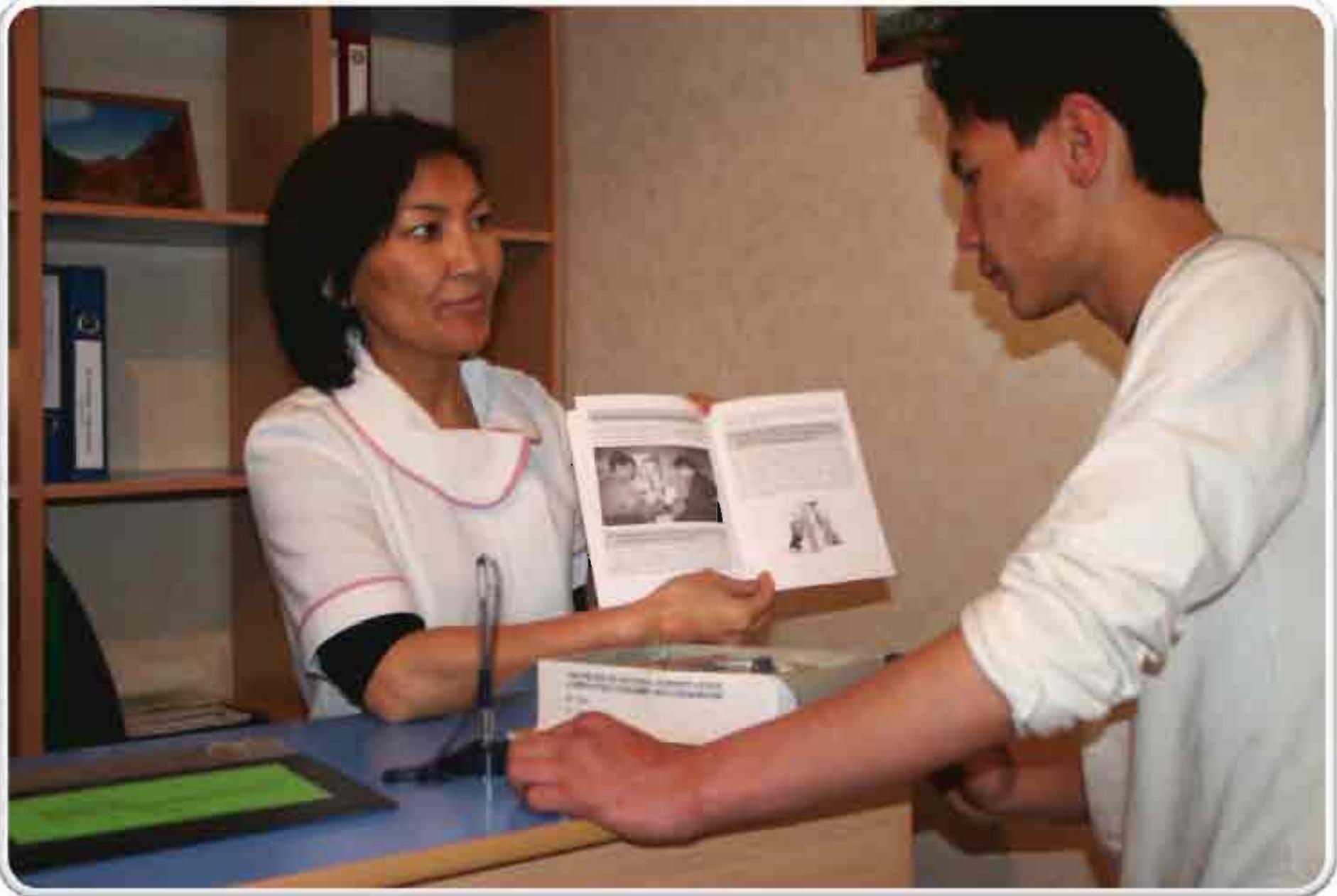












What can a NGO do?

- Trainings: on new technologies, pre- and post – abortion counseling, focusing on specific of counseling for young people.
- Increase their knowledge on youth friendly services (incl. abortion) and facilitate exchange of information/ experiences between NGOs, business and the medical community
- Coordinate and join forces with the medical and business communities for trainings and the introduction of new technologies and provision the services to young people

What can a NGO do?

- Assessment of Quality of Care internally and externally
- Support the development of pilot projects and pilot clinics, share achievements with a broad audience and their partners
- Increase the knowledge on SRHR of young people, and increase their access to quality services and counseling
- Joining forces for advocacy