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## Perceived Determinants and Preferred Method of Induced Abortion among Undergraduate Female Students in Lagos State Tertiary Institutions, Nigeria

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### **Abstract:**

*Abortion is a serious concern and topic of discussion that poses threat to a woman's health but at the same time when performed by medical specialist (i.e. abortion specialist) might be safe for the woman, especially if it is medically recommended. Abortion is the cessation of pregnancy by ejecting an embryo or foetus from the uterus before it reaches the stage of existence. An abortion otherwise known as miscarriage could be unexpected. However, it may be instigated or brought on purposely in which it is regularly called an induced abortion. This study therefore examined the perceived determinants and preferred method of induced abortion among female undergraduate students in Lagos State tertiary institutions. The population for the study comprised all female undergraduate students in the tertiary institutions located in Lagos State. The purposive sampling technique was used in selecting a total of two thousand, two hundred and thirty-six (2236) participants aged 18-35 (years) for the study. The self-constructed questionnaire ( $r=0.78$ ) was used for data collection while the descriptive statistics of mean, percentages and charts were used for data presentation. The study concludes that majority (83.8%) of the participants have had sexual experience before while 71.2% of this group had unwanted pregnancies. Some of the reasons responsible for abortion among this group include; education (30%), shame (20%), pressure from partner (17%) while others are pressure from family members/parents, health reason, rape and lack of finance to support the baby. The preferred methods of abortion as indicated by the participants were: D&C (62.5%), use of pills and injection (23.8%), use of local herbs and concoctions (11%) and participation in vigorous physical activities (25). Recommendations were made based on the findings of this study which include providing health education for ladies and women on a regular basis.*

**Keywords:** Abortion, induced abortion, foetus, unwanted pregnancy, undergraduates

### **1. Introduction**

Abortion was a common practice in the primeval world and evidence suggests that abortions were performed in several cultures. Historically, abortion dates back to the beginning of medicine and herbalism. As soon as humans figured out that avoiding some foods (specifically, herbs, roots, seeds, etc., with strong medicinal value) helped strengthen a pregnancy, women realized that consuming those foods might end an undesired pregnancy or induce the pregnancy. The first recorded evidence of induced abortion is from the Egyptian Ebers Papyrus in 1550 BC and a range of non-medical or physical activities in ancient world suggested mundane solutions like intense rubbing or massage on the uterus, riding a horse, or heavy lifting, diving as means of inducing abortion. Others included the use of irritant leaves, fasting, pouring hot water onto the abdomen, and lying on a heated coconut shell which led to miscarriages and could be assumed to be intentional (John, 1997). In the primeval days in Rome and Greece, abortion was practiced regularly, often used to control family size but there was also criticism in those days. The early philosophers argued that a foetus did not become formed and begin to live until at least 40 days after conception for a male, and around 80 days for a female. In the Roman Republic and early Roman Empire there were no laws against abortion, as Roman law did not regard a foetus as distinct from the mother's body, and abortion was usually done to maintain one's physical appearance, or for reason of infidelity.

All over the world, women experience unwanted pregnancy and some of them seek to terminate the pregnancy and undergo induced abortion. Premarital sex is one of the main causes for induced abortion for many adolescents which cause maternal death in our society today (Guttmacher Institute, 2012). Abortion is thus regarded as the cessation of pregnancy by ejecting an embryo or foetus from the uterus before it reaches the stage of existence. An abortion that is unexpected is also known as miscarriage.

World Health Organisation (2008), estimated globally, a total of 43.8 million induced abortions in 2008, out of which 38 million (86.76%) occurred in the developing countries. The report stated further that one in five pregnancies end in an induced abortion, while Gemzell-Danielsson, Kallner, and Faúndes (2014), reported that in the African region, over 40% of total death rate of maternal mortality was caused by unsafe abortion.

The emotion and confusion associated with the choice to induce or end pregnancy has been researched among adult women. The report suggests that if an inquiry or research is performed on people that indulge in abortion, the outcome will always point to adolescents and youths while the lesser group will be older women above the child bearing age. An induced abortion can be categorized as therapeutic (done for health condition of the woman or foetus) or elective (done for other reasons). Induced abortion, if not done by a skilled health-care worker, can lead to incomplete abortion where parts of foetus remain in the uterus which could lead to septic abortion when complication occurs in the course of abortion and infection sets in (Elder 1998). Approximately 205 million pregnancies occur each year worldwide, with over a third been unintended and about a fifth ending in induced abortion. (Finer, Frohwirth, Dauphinee, Singh, & Moore, 2005; Akinrinola, Singh, & Haas, 1998).

This study therefore; examined the determinants of induced abortion as perceived by female undergraduate students, determined the occurrence of unwanted pregnancies among the participants and sought the most preferred method of abortion among the participants.

## 2. Methods

A descriptive research design was considered most appropriate for this study. The population for this study were female undergraduates' students from the various tertiary institutions in Lagos metropolis (University of Lagos, Lagos State University, Adeniran Ogunsanya College of Education, and Yaba College of Technology). The purposive sampling technique was used in selecting two thousand, two hundred and thirty-six (2236) participants as sample for the study. The researchers personally administered the self-constructed questionnaire ( $r=0.78$ ) to participants who consented to responding to take part in the study. The descriptive statistics of frequency count, simple percentages, pie charts and bar charts were used in presenting the results.

## 3. Results

Age Range (years)	Frequency	Percentage (%)
18-22	580	33.89
23-27	720	50.84
28-31	526	11.01
32-35	510	4.23
Total	2236	100

Table 1: Age Distribution of Participants (N=2236)

Table 1 showed that all the respondents were youths in the age of 18-35 years; of the participants 580 (33.89%) were between 18-22 years; 720 (50.84%) were between 23-27 years of age; 526 (11.01%) were between the 28 and 31 years and 510 (4.23%) between 32-35 years of age.

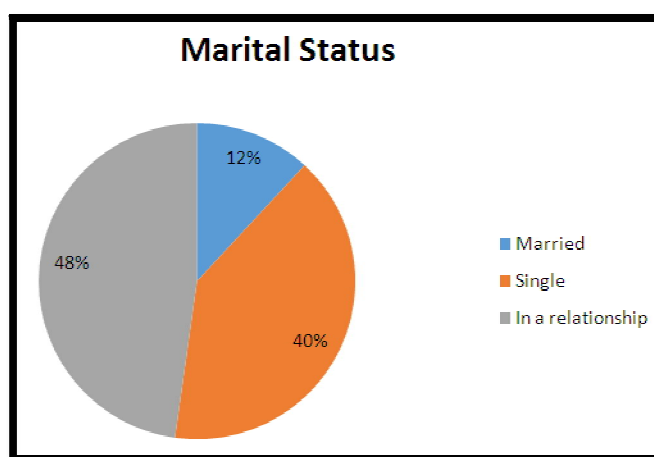


Figure 1: Marital Status of Respondents (N=2236)

Figure 1 above shows that 40% (894) of the participants were single, while 12% (268) were married. However, 48% (1074) indicated that they were in a relationship.

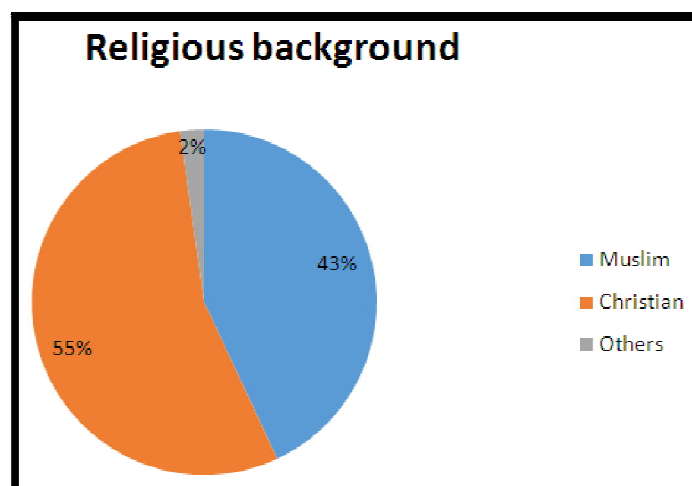


Figure 2: Religious Background of Participants

Figure 2 above shows that 55% (1230) of the participants were Christians while 43% (961) were Muslims and the remaining 2%(45) were of other religious faith.

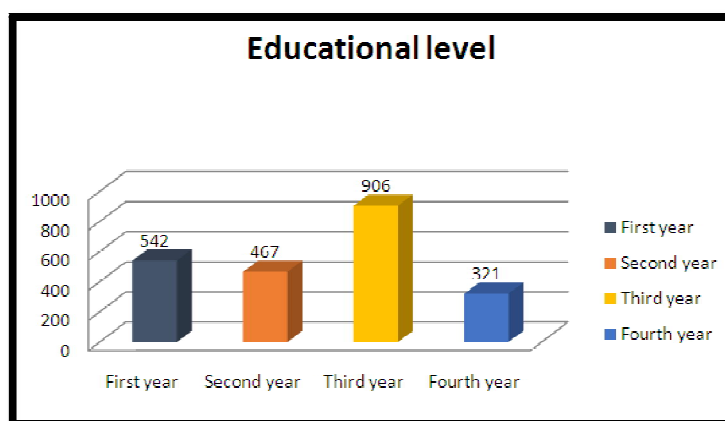


Figure 3: Level of Study of Participants

Figure 3 above shows that 542 (24.2%) of the participants were in the first year while 467 (29.9%) and 906 (49.52%) of the participants were in second and third year respectively, the remaining 321 (14.4%) were in their fourth year.

Practice Indicator	Frequency	% Response
Do you have history of sexual practice?(N=2236)		
Yes	1874	83.8
No	362	16.2
Do you have history of pregnancy?(N=1874)		
Yes	1334	71.2
No	540	28.8
Was the pregnancy planned? (N=1874)		
Yes	332	17.7
No	1542	82.3
Outcome of the pregnancy(N=1874)		
Has been delivered	198	10.56
Safe abortion	1224	65.3
Unsafe abortion	452	24.1

Table 2: Sexual Practice among Respondents

Table 2 presents sexual experience and practices of participants. The table shows that 1874 (83.8%) have had sexual experience while 16.2% had no sexual experience. Of the 1874 (83.8%) that have had sexual experience, only 540 (28.8%) have not had history of pregnancy before, the remaining 1334 (71.2%) had history of pregnancy. Majority (82.3%) of the 71.2% with history of pregnancy were unplanned. Out of the 1894 (83.3%) of the total participants that have experienced pregnancy before, only 198 (10.56%) delivered the baby while the remaining 1676 (89.4%) aborted the pregnancy. However, 1224 (65.3%) and 452 (24.1%) engaged in both safe and unsafe abortion respectively.

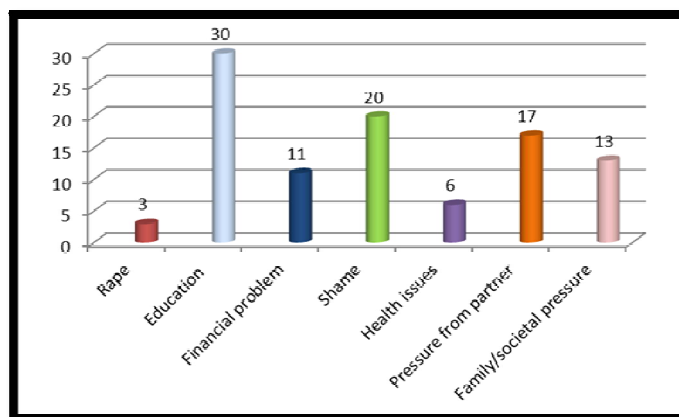


Figure 4: Chart Indicating the Causes of Induced Abortion among Participants

Figure 4 above shows that of all the respondents 30% indicated education as the cause of induced abortion, 20% submitted that it was because of shame, while 17% and 13% indicated pressure from partner and shame respectively as the cause of abortion. 11% however, indicated financial problem, 3% and 6% indicated rape and health issues respectively as the main reason for abortion.

Preferred Method of Induced Abortion	Percentage (%)
Dilatation and Curettage (D&C)	62.5
Use of local herbs (concoctions including lime)	11
Take pills or injections to induce pregnancy	23.8
Engaging in rigorous activities to induce abortion	2.7

Table 3: Respondents' Preferred Method to Induced Abortion

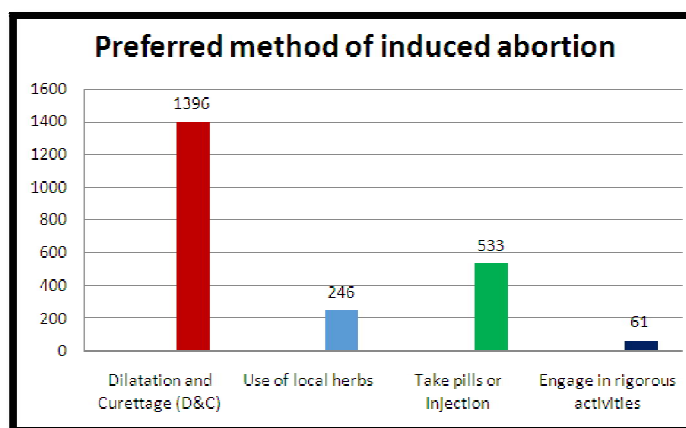


Figure 5: Preferred Method of Abortion

Table 3 and figure 5 above present participants' preferred methods of getting an abortion done. The results revealed that 62.5% (1396) preferred having a dilatation and curettage (D & C); while 11% (246) will prefer to take concoctions and local herbs. 23.8% (533) of the respondents will rather go for pills and injections and surprisingly, 2.7% (61) will prefer to engage in rigorous physical activities in other to induce abortion.

**4. Discussion**

The current study revealed that 83.8% of the participants have had sexual experience before while 71.2% of these group had unwanted pregnancies. The results in table 2 above showed that for those who have been pregnant before, only 17.7% planned for it while the remaining 82.3% did not really plan to have the pregnancy. Among this group of participants, only 10.56% delivered the baby safely while the remaining 89.49% terminated the pregnancy out of which only 24.1% had safe abortion and the remaining 65.3% had unsafe abortion. The result of this finding is however higher than the 14.4% reported in Wolaita Sodo University in Harare, Ethiopia and a 12.3% from a facility-based study done at Gurage zone, Ethiopia in 2014 (Gelaye, Taye, & Makonen, 2014; Tesfaye, Hambisa & Semahegn, 2014). Though, Sedgh, Singh, Shah, Ahman, Henshaw, & Bankole, (1998) earlier established incidence of abortion globally.

The study further revealed that 30% indicated education as the cause of induced abortion while 20% attributed it to shame. 17% attributed abortion to pressure from partner while some (13%) attributed it to pressure from family and friends. 3% of the students aborted due to pregnancies arising from rape while 6% did it on health grounds. 11% went for abortion due to lack of funds to take care of both the baby and the mother. This finding is therefore in line with Hlalele

(2008), who earlier identified culture, religion, marital status and education as some of the reasons for induced abortion. Hlalele (2008) stated further that parents and partners often respond to pregnancy with anger and violence which may cause the feeling of shame that influence the decision to abort the pregnancy. It also corroborates the studies done both in Nigeria and Ghana which identified fear of social stigma and bad timing of pregnancy as the next most common reason for induced abortion. (Okonofua, Odimegwu, & Ajobor, 1999). Realistically, a female student may choose to abort as a way of hiding her sexual activity and pregnancy from her parents, such a decision may be influenced by religiosity of the parents, fear of rejection by parents or peers, pressure from partners and disturbed education.

As revealed in table 3, majority (62.5 %) of the students carried out abortions in the hospital, going through the dilatation and curettage (D&C), while 28% used pills and injections. However, only 11% of the students will rather use local herbs and concoctions which is contrary to the findings of Grimes, Benson, Singh, Romero, Ganatra and Okonofua (2006) who earlier reported that a lot of young ladies still resort to traditional methods to induce abortion.

## 5. Conclusion and Recommendations

The study concludes that majority (83.8%) of the participants have had sexual experience before while 71.2% of this group had unwanted pregnancies. Some of the reasons responsible for abortion among this group include; education (30%), shame (20%), pressure from partner (17%) while others are pressure from family members/parents, health reason, rape and lack of finance to support the baby. The preferred methods of abortion as indicated by the participants were: D&C (62.5%), use of pills and injection (23.8%), use of local herbs and concoctions (11%) and participation in vigorous physical activities (2.7%).

Based on the findings, the researchers recommend the following:

- Continuous public awareness and education about the adverse effects of abortion
- Health care providers should be trained in communication skills to promote and provide adequate and smooth communication, good relationship and counselling to our youths on the negative effects of induced abortion.
- Researches could be carried on to determine induced abortion behaviour among undergraduate students and youths in general. Such research would help to provide intervention on dangerous ways and method of aborting pregnancy.
- There should be a collaborated effort between service providers, health institutions, government agencies, non-governmental organisations and universities on ensuring good health services on abortion
- The media should enthusiastically participate in the broadcasting of programmes on abortion and the use of contraception, also create a specific programme on radio to educate female students for example on Unilag FM, LASU radio, Eko FM and other radio stations based in Lagos.

## 6. Acknowledgement

The researchers wish to appreciate the enthusiasm and co-operation of all the participants.

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