

Abortion counselling from the providers point of view

Data from a qualitative study in the Lisbon metropolitan area, Portugal,
three to ten months after the legalization of abortion on request

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Context: Abortion in Portugal

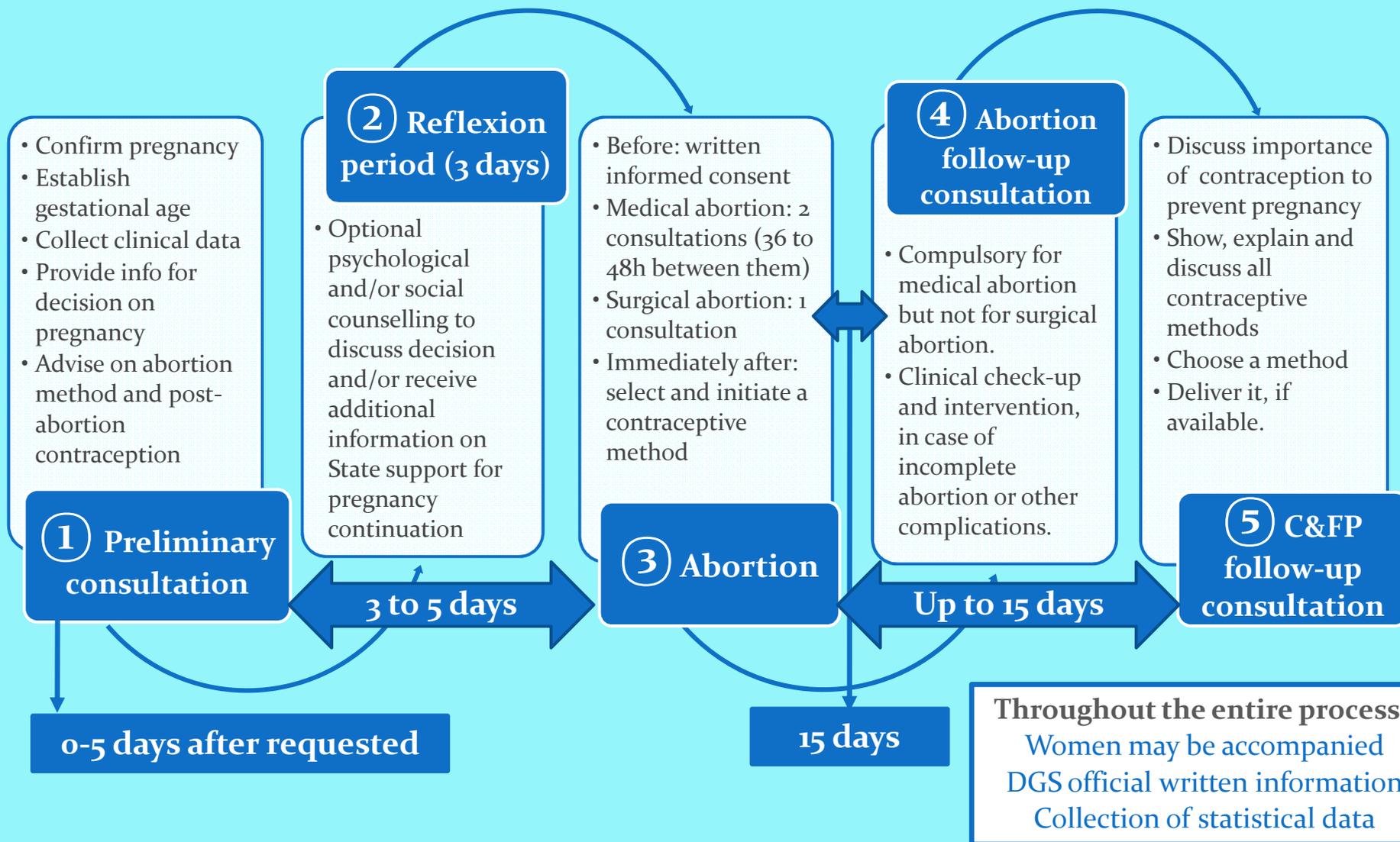
Grounds for legal abortion up to 2007:

- Foetal anomalies (≥ 24 weeks)
- Risk for the woman's health (≥ 12 weeks)
- Suspicion of rape (≥ 16 weeks)

Grounds for legal abortion since 2007:

- All of the above + **on the woman's request** regardless of her reasons (≥ 10 weeks)

Context: Abortion in Portugal



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Throughout the abortion process, health professionals (doctors, nurses, psychologists, social workers) are required to provide women with **information on**:

- Gestational age
- Medical and surgical abortion
- Legal and administrative requirements
- Psychological and social counselling
- State support to continue pregnancy
- Family planning and contraception

We consider **abortion counselling** to be the **interaction** occurring throughout the entire abortion process and involving the provision of this information **between providers and women** seeking abortion (as well as those who accompany them).

Objectives

To examine the **perception of healthcare providers**, who counsel women requesting abortion, on various abortion related issues, including:

- **What** the counselling they provide consists of
- **How useful** they find it
- And, if so, **why** do they find it useful

Method

Design

- Qualitative, descriptive and exploratory study

Participants

- 16 abortion care providers
- Lisbon metropolitan area
- Wide sample variety (\neq professions, healthcare institutions, type of counselling, counselling setting)

Data collection and analysis

- From Oct 2007 to May 2008 = 3 to 10 months post-legalisation
- Individual face-to-face in-depth interviews
- Content analysis

Results

Description of abortion counselling

- Receiving the woman and understanding the abortion request
- Providing information
- Supporting abortion decision-making
- Managing emotional and psychological issues
- Addressing contraception issues
- Managing third-party involvement
- Offering psychological counselling
- Informing about State support and offering social counselling

Results

Usefulness of abortion counselling

All participants described the counselling they provided as **useful, relevant or important** but valued it **different aspects** of it:

- Information provision
- Addressing contraception issues to prevent unplanned pregnancy/abortion
- Emotional support
- Decision-making support
- Addressing emotional issues beyond abortion
- Enticing women to seek healthcare in the future
- Prevention of poor emotional post-abortion adjustment

Results

Desired providers' behaviours/attitudes

In order to insure **good quality abortion care**, participants pointed out the importance of the following **behaviours/attitudes from providers**:

- Being impartial/avoiding a judge mental attitude
- Ensuring confidentiality
- Acting according to the specific needs/features of each woman
- Avoiding subjects that may be painful to women
- Following the Law and official regulations

Results

Ways to improve abortion care

Participants identified the following as **aspects** that could **improve** their own **intervention** and abortion providers' intervention in general:

- Obtaining specific training on abortion care and sharing/discussing experiences with other abortion providers
- Research on abortion care
- Feeling comfortable/confident about providing abortion care
- Being aware of the paramount importance of the provision of abortion care

Conclusions

- The abortion counselling conducted in Portugal is **in tune with the current literature** and follows a **client-centred approach** focused on the **provision of information and emotional support**.
- Abortion counselling is perceived by providers as a **useful** service in **various ways**.
- However, it can be **improved**, especially, with regard to the **providers' communication and counselling skills**.



Provider- client interaction

Empathy and effective
client-centred communication

Conclusions

- However, it can be **improved**, especially, with regard to the **providers' communication and counselling skills**.



- Mastering basic communication and counselling skills
- Feeling comfortable and drawing pleasure from their role as counsellors
- Being aware of prejudice or personal beliefs that might affect the way they act towards women

Conclusions

Limitations

- We used a **small non-probability sample** that included only providers working in the Lisbon metropolitan area.
- It is **not possible to generalize** the results since no statistical analysis was conducted.
- It is **based on an account** of what abortion counselling is and not on its direct observation, hence, the results may not accurately reflect reality.

Contacts

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