



## Second Trimester Abortion in Viet Nam: Changing to Recommended Methods and Improving Service Delivery

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**Abstract:** *In Viet Nam, abortion has been legal up to 22 weeks of pregnancy since the 1960s. There are about one million induced abortions every year. First trimester abortion is provided at central, provincial, district and commune level, while second trimester abortion is provided only at central and provincial level. For second trimester abortion, dilatation and evacuation (D&E) has been introduced at some central and provincial hospitals, and medical abortion protocols have been included in the draft National Standards and Guidelines currently being updated. However, Kovac's, an unsafe method, is still often used at many provincial hospitals. While access to first trimester abortion services is not difficult, there are still many barriers to second trimester abortion, especially for young, unmarried women. In order to prevent unwanted pregnancies, increase access to safe abortion and improve quality of care, the Vietnamese Ministry of Health is working with others to establish national policies and developing effective models for women-friendly comprehensive abortion care, including post-abortion family planning. This paper, based on published information, interviews and observations by the second author of service delivery in 2006–2008, provides an overview of second trimester abortion services in Viet Nam and ongoing plans for improving them.*  
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**A**BORTION has been legal in Viet Nam since the 1960s. Historically, together with contraception, abortion was considered as a means to control population growth in Viet Nam. Now the law allows each couple or individual to decide the number and spacing of their children. People also have the right to choose which contraceptive method to use and are obligated to use contraception.<sup>1</sup> Viet Nam is considered to have one of the highest abortion rates in the world – about 500,000 abortions were reported from the public sector in 2006<sup>2</sup> and at least the same number have been provided in the private health sector (Interviews

with gynaecologists at Ha tay, February 2006; Hai phong & Lao cai, March 2006; and Bac ninh, August 2006). The ratio of abortions to live births is high: 45.1 abortions per 100 live births.<sup>3</sup> In spite of a liberal law, unsafe abortion is still a common cause of maternal death, estimated at 11.5% of direct causes of maternal mortality in Viet Nam in 2002.<sup>4</sup>

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There are no official data on second trimester abortion in Viet Nam. The proportion of second trimester terminations differs widely between hospitals, from 3% of abortions at the National Obstetrics and Gynecology Hospital to 19–20% at Tu Du Obstetrics and Gynecology Hospital.<sup>5,6</sup> About 53% of those having a second trimester abortion are young unmarried women.<sup>7</sup> According to the Ministry of Health's National Reproductive Health Standards and Guidelines, abortion is legal up to 22 weeks, though depending on the capacity at each level of hospital. At the central hospitals, abortions can be done up to (and in a few cases above) 22 weeks, especially for unmarried women. At the district level, abortion is allowed up to 12 weeks, and at the commune level it is limited to six weeks only. Access to second trimester abortion is therefore more restricted in comparison to first trimester abortion, because second trimester procedures carry more risk and require more skilled providers and specific instruments.

### **Why Vietnamese women have second trimester abortions**

Women access abortion services late for the following reasons. Many are not aware they are pregnant. Since the Family Planning Program in Viet Nam focuses only on married couples, young people do not receive sexuality education, and do not know where to get contraceptive methods or where to go if they are pregnant. A qualitative study of why women delay abortion until the second trimester, conducted in May–August 2005, interviewed 60 women in eight health facilities in Viet Nam. It found that 80% of those interviewed had failed to recognise they were pregnant before 12 weeks of gestation.<sup>7</sup> Some women did not notice that their period had not come, and some who were not using any contraception did not think they would get pregnant because of irregular sexual intercourse.

In about 20% of the cases in that same study, the women had needed a month or more to make the decision, due to difficulties reconciling conflicting social norms or their socio-economic situation with their desires regarding the pregnancy. This happens commonly among young and unmarried women, especially adolescents. One adolescent said that she would not be able to return to her family in her homeland if her

pregnancy was discovered, and another young woman said her parents would kill her if they knew that she had had sexual intercourse and become pregnant. Some women described negative consequences for their educational or employment opportunities. Some had waited to try and convince their partner to get married but failed. In some cases, women come to the health sector early, but pregnancy detection is delayed due to the poor quality of early pregnancy tests, and this can push the abortion into the second trimester.<sup>7</sup>

As in a number of other Asian countries, son preference exists in Viet Nam. Sex selective abortion is becoming an issue in the country, which the government is concerned about and has made policies to try and prevent it.<sup>7,8</sup> According to estimated population data by age and sex in 2006, the male population under 20 years of age is somewhat higher than the female population in the same age group.<sup>2</sup> A lot of Vietnamese consider that one boy child is better than a dozen girls. Nowadays, ultrasound scans have become very popular in Vietnam.<sup>9</sup> They are used both to screen for fetal anomalies and sometimes for sex determination. Many pregnant women learn their child's sex by their 15th week. With abortion possible up to 22 weeks, some women seek abortion for sex selection.

Antenatal screening for detecting abnormalities in pregnancy has become more and more popular in Viet Nam, especially at the tertiary level. Most tests can only be used in the late first trimester or second trimester, which also leads to second trimester terminations in some cases.<sup>10</sup>

### **Second trimester abortion methods: phasing out outdated methods**

At the central and provincial hospitals providing second trimester abortion, three methods are being used: Kovac's, D&E and medical abortion. Traditionally, over many years, many hospitals have used the Kovac's method, whereas D&E and second trimester medical abortion have not yet been applied broadly. So far, staff in only two central hospitals – National Obstetrics & Gynecology Hospital and Tu Du Obstetrics & Gynecology Hospital – and in seven provincial hospitals have been trained and provide D&E. Second trimester medical abortion is provided at central level in NOGH and Tu Du hospitals and

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