

# Medical Students' Intentions to Seek Abortion Training and to Provide Abortion Services in Future Practice

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## Abstract

**Objectives:** Lack of providers is a barrier to accessing abortion in Canada. The factors influencing the number of abortion providers are poorly understood. In this study, we assessed the attitudes and intentions of medical students towards abortion training and provision to gain insight into the future supply of abortion providers.

**Methods:** We surveyed first, second, and third year medical students at an Ontario university to determine their intentions to train in and provide abortion services during different stages of training and in future practice. We assessed students' attitudes and intentions towards training in and providing abortions, their perceptions of social support, their perceived ability to receive training in and to provide abortion services, and their attitudes towards the legality of abortion.

**Results:** Surveys were completed by 337 of 508 potential respondents (66.7%). The responses indicated that the students in the survey held relatively positive attitudes towards the legality and availability of abortion in Canada. Respondents had significantly more positive attitudes towards first trimester medical abortions (and a greater intention to provide them) than towards second trimester surgical abortions. Thirty-five percent of students planned to enter a specialty in which they could perform abortions, but fewer than 30% of these students planned to provide any type of abortion. Intentions to provide abortions were correlated with positive attitudes toward abortion in general and greater perceived social support for abortion provision.

**Conclusion:** A small proportion of students sampled intended both to enter a specialty in which abortion would be within the scope of practice and to provide abortion services. Lack of perceived social

support for providing abortions and the perceived inability to obtain abortion training or to logistically provide abortions were identified as two potentially modifiable barriers to abortion provision. We propose increasing education on abortion provision and creating policies to promote medical abortion as a method of improving access to abortion across Canada.

## Résumé

**Objectifs :** Au Canada, l'accès à des services d'avortement est entravé par le manque de fournisseurs de soins étant en mesure d'offrir de tels services. Les facteurs qui influencent le nombre de fournisseurs de services d'avortement sont mal compris. Dans le cadre de cette étude, nous avons évalué les attitudes et les intentions des étudiants de médecine en ce qui concerne la formation en matière d'avortement et l'offre de tels services dans le cadre de leur future pratique, et ce, pour en connaître davantage au sujet de nos futurs effectifs dans ce domaine.

**Méthodes :** Nous avons sondé les étudiants de médecine de première, de deuxième et de troisième année d'une université ontarienne, à différents stades de leur formation (et en leur demandant de remplir un questionnaire traitant de la future pratique qu'ils envisageaient), en vue de déterminer leurs intentions en ce qui concerne l'obtention d'une formation en matière d'avortement et l'offre de services d'avortement. Nous avons évalué les attitudes et les intentions de ces étudiants en ce qui concerne l'obtention d'une formation en matière d'avortement et l'offre de services d'avortement, leurs perceptions en ce qui a trait au soutien social, leur capacité subjective de recevoir une formation en matière d'avortement et d'offrir des services d'avortement, et leurs attitudes envers la légalité de l'avortement.

**Résultats :** Trois cent trente-sept des 508 répondants potentiels (66,7 %) ont répondu aux questionnaires. Les réponses indiquent que les répondants adoptaient des attitudes relativement positives envers la légalité et la disponibilité de l'avortement au Canada. Les répondants adoptaient des attitudes considérablement plus positives envers les avortements médicaux au premier trimestre (et un plus grand nombre d'entre eux avaient l'intention d'offrir de tels services) qu'envers les avortements chirurgicaux menés au deuxième trimestre. Trente-cinq pour cent des étudiants avaient l'intention de choisir une spécialité dans le cadre de laquelle la

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tendue d'avortements serait possible; toutefois, moins de 30 % de ces étudiants avaient l'intention d'offrir quelque type de services d'avortement que ce soit. Les intentions d'offrir des services d'avortement étaient en corrélation avec les attitudes positives envers l'avortement en général et avec la perception d'un soutien social accru envers l'offre de services d'avortement.

**Conclusion :** Une faible proportion de l'échantillon d'étudiants analysé avait l'intention de choisir une spécialité dont le champ d'activité englobe la tenue d'avortements et d'offrir des services d'avortement. L'absence subjective de soutien social envers l'offre de services d'avortement et l'incapacité subjective d'obtenir une formation en matière d'avortement ou d'offrir des services d'avortement au plan logistique ont été identifiés comme étant deux obstacles potentiellement modifiables pour ce qui est de l'offre de services d'avortement. Pour assurer l'amélioration de l'accès à l'avortement d'un bout à l'autre du Canada, nous proposons l'augmentation des efforts d'éducation au sujet de l'offre de services d'avortement et la création de politiques visant la promotion de l'avortement médical.

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## INTRODUCTION

Abortion in Canada has not been subject to legal regulation since the 1988 *R. v. Morgentaler* Supreme Court decision.<sup>1</sup> Canadian women's access to abortion, however, remains variable and is frequently constrained.<sup>2–4</sup> Although national Canadian data are not available, the number of abortion providers is thought to be in decline.<sup>2</sup> The number of physicians providing abortion services in rural British Columbia dropped by over 60% between 1998 and 2005.<sup>5,6</sup> The number of abortion providers in the United States is known to have declined steadily across recent decades. In 1992, there were 2380 abortion providers in the United States, a number that decreased by 24.9% to 1787 by 2005.<sup>7</sup> In addition, a significant number of abortion providers in the United States have retired or are nearing the age of retirement.<sup>8</sup> Studies from the United States and the United Kingdom have found that medical students and recent medical graduates appear to be less willing than more experienced physicians to provide abortion services.<sup>9,10</sup> These trends suggest both a current and a future shortage of abortion providers, with the potential to further decrease women's access to abortion.

A 2006 survey of Canadian residency programs in obstetrics and gynaecology found that all programs provided either mandatory or elective opportunities to obtain training in abortion.<sup>11</sup> Studies of obstetrics and gynaecology residents in Canada and the United States have found that the most significant predictors of providing abortions in practice include personal beliefs about abortion, having an intention before entering residency to provide abortions, and the number of abortions performed during residency.<sup>12,13</sup> Medical students' attitudes towards abortion provision

and the amount of exposure to abortion they receive during training are potentially important influences on their intention and capacity to provide abortion services.<sup>10</sup> Attitudes towards an action, perceived social norms favouring or opposing the action, and perceived ability to carry out the action have been extensively validated as strong predictors of future behaviour, in research based upon the theory of reasoned action (TRA) and theory of planned behaviour (TPB).<sup>14–16</sup> These theoretical models of the determinants of health behaviour may be applied to understand factors that contribute to medical students' intentions to train in abortion practices and provide abortion services in future practice.

In this study we assessed medical students' interest in acquiring undergraduate and postgraduate training to provide medical and surgical abortion and their intentions to provide these services in future practice settings. We assessed students' attitudes towards abortion, their perceptions of social support, and perceived behavioural control (perceptions of their ability to actually provide abortion services in the future) as correlates of their intentions to train in and to provide abortion services in future practice. Motivating factors that students identified as pivotal to their plans to provide or not provide abortion services in their future practice were also identified.

## METHODS

To better understand factors that may influence medical students' intentions to provide abortions, we developed a survey instrument following the structure specified in two theoretical models for the prediction of health behaviour.<sup>14–16</sup> The theory of reasoned action and the theory of planned behaviour assert that an individual's intention to engage in a health behaviour is the strongest predictor of actually engaging in this behaviour subsequently.<sup>14–16</sup> Intention, in turn, is a function of an individual's attitude towards performing that behaviour, the individual's perception of social support or opposition in relation to the behaviour, and the individual's perception of his or her capability to actually carry out the behaviour. The TRA and the TPB have been well validated in multiple areas of health behaviour and related research,<sup>14–16</sup> but the theories have not been employed in research to explore influences on intentions to provide abortion services.

To identify concerns specific to medical students, a preliminary survey was conducted with 20 medical students studying at an Ontario university. The students were asked 10 open-ended questions about positive and negative aspects of abortion provision, their perception of social support or

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