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# The availability of abortion at state hospitals in Turkey: A national study \*\*, \*\*\*

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#### Abstract

**Introduction:** Abortion in Turkey has been legal since 1983 and remains so today. Despite this, in 2012 the Prime Minister declared that, in his opinion, abortion was murder. Since then, there has been growing evidence that abortion access particularly in state hospitals is being restricted, although no new legislation has been offered.

Objectives: The study aimed to determine the number of state hospitals in Turkey that provide abortions.

**Study design:** The study employed a telephone survey in 2015–2016 where 431 state hospitals were contacted and asked a set of questions by a mystery patient. If possible, information was obtained directly from the obstetrics/gynecology department. I removed specialist hospitals from the data set and the remaining data were analyzed for frequency and cross-tabulations were performed.

**Results:** Only 7.8% of state hospitals provide abortion services without regard to reason which is provided for by the current law, while 78% provide abortions when there is a medical necessity. Of the 58 teaching and research hospitals in Turkey, 9 (15.5%) provide abortion care without restriction to reason, 38 (65.5%) will do the procedure if there is a medical necessity and 11 (11.4%) of these hospitals refuse to provide abortion services under any circumstances. There are two regions, encompassing 1.5 million women of childbearing age, where no state hospital provides for abortion without restriction as to reason.

Conclusion: The vast majority of state hospitals only provide abortions in the narrow context of a medical necessity, and thus are not implementing the law to its full extent. It is clear that although no new legislation restricting abortion has been enacted, state hospitals are reducing the provision of abortion services without restriction as to reason.

Implications: This is the only nationwide study to focus on abortion provision at state hospitals.

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Keywords: Abortion; Turkey; State hospitals; Access

#### 1. Introduction

The Turkish Republic, founded in 1923, implemented its first law on population planning in 1926 and it embodied an extreme pronatalist stance [1]. World War I and the Turkish War of Independence, which quickly followed, decimated Turkey's population. Seeking to repopulate, the state banned all information on contraception, devices and outlawed abortion. In 1965, facing population growth that promised to

outpace economic development, and reports that as many as 12,000 women per year were dying from complications due to illegal abortions [2], Turkey implemented the Law on Population Planning No. 557, which legalized contraceptive devices and information and established a robust family planning program [3]. Finally, in 1983 Turkey legalized abortion and that law remains in effect today [4].

As of September 2016, abortion is legal without restriction to reason through 10 weeks of pregnancy and 20 weeks if the pregnancy is the result of a crime. Spousal consent is required as is that of a parent or judge for those under the age of 18. If a pregnancy presents a threat to the woman's life or there is substantial fetal abnormality, the law states no gestational time limit. However, in such instances, the doctor must notify health authorities of the women's identity, the procedure to be performed and the rationale

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before the procedure is performed if possible, and in cases of emergency within 24 h. Interestingly, the law makes no mention or provision for abortion in the case of a threat to the woman's physical health. Aspiration abortion as opposed to medication abortion is the norm in Turkey and is covered by state health insurance. Until 2012, misoprostol was available without prescription; however, the state has since banned the sale of the drug [5].

Unlike in many other countries, until recently, abortion in Turkey has not been a substantial political issue. Several generations of women have matured under a liberal abortion law and 14% of Turkish women report having had at least one abortion in their lifetime [6]. However, in 2012 then Prime Minister Erdoğan declared that "abortion is murder" and that his government would draft legislation to restrict abortion [7]. While no actual legislation been introduced, there is growing evidence that it is more and more difficult to obtain an abortion [8]. Single women report being denied access to abortion [9], while other women have suffered humiliating treatment or been refused anesthetic during the procedure [10]. Additionally, women's organizations assert that relatively few state hospitals are willing to perform abortions on request [11,12]. However, to date, there has been no nationwide scientific survey of abortion services at state hospitals. Thus, this study surveyed state hospitals in Turkey to determine whether or not they performed abortions and for which indications.

#### 2. Methods

#### 2.1. Study design

The original design of the study sought to use the freedom of information act in Turkey which binds all public institutions. The law, implemented in 2003, purports to ensure the equality, neutrality and openness that is necessary for a democratic and transparent administration [13]. The law provides a relatively simple application procedure using an electronic petition. Notwithstanding, the statute also contains several important grounds for rejection of a request. If the information request is for the purposes of research, examination or analysis, the request can be rejected.

I sent a single request for information regarding the provision of abortion services at state hospitals to each of the 712 state hospitals in Turkey. Despite a provision in the law that requires a response within 15 days, only 44 hospitals responded, including one outright rejection due to the fact that the purpose of the request was research.

Given that the freedom of information act did not allow for the collection of the necessary data, I then employed a phone survey. This aspect of the study received approval from the Ethics Committee of Kadir Has University (Doc. No. 23370156-4475). All 44 of the hospitals that provided freedom of information responses were also included in the phone survey to ensure the integrity of those results. The list of hospitals was the latest available from the Turkish

Ministry of Health as of October 2015. The list of all hospitals in Turkey totaled 712, but once specialist hospitals were removed (n=67), the remaining 645 hospitals constituted the initial sample. This sample was then further refined to exclude hospitals that do not have a department of obstetrics and gynecology, which is required for the provision of abortion services.

Using a prepared script, the survey was conducted between October 2015 and April 2016. The survey took the form of a mystery patient seeking information. No personal information was provided to the hospital unless specifically requested. The most commonly asked question concerned marital status (unmarried) and gestational age of the fetus to which I answered less than 10 weeks to avoid any difficulties with legality. Once contact with the hospitals was made, I asked to be directed to the department of obstetrics and gynecology where the survey began with question of whether or not abortions were performed at the hospital. For clarification, the next question focused on the indications for the provision of abortion. The first being whether abortions are performed without restriction as to the reason, and the second asked if they were provided in case of medical necessity. If the answer was negative for each of these questions, I asked for confirmation of the statement, so abortions are not performed at all. I have provided a profile of the mystery client as well as the script in Fig. 1. To ensure standardization of data, the same script was followed with each hospital. Although the script was quite limited, some hospital personnel felt free to add their own commentary which took different forms including misinformation and refusal to provide information. At no point, however, did I engage with these comments other than to reiterate the need for information in a further attempt to elicit answers to the scripted questions.

## 2.2. Data analysis

Using SPSS, the data were coded so that the survey responses could be analyzed according to hospital type and region, as well as the answer regarding the provision of abortion. Each answer provided in the survey was coded and accounted for in the data set. The data set was then analyzed for frequency and cross-tabulations were performed. For further analysis, teaching hospitals with departments of obstetrics and gynecology (n=58) were extracted from the sample and examined to determine whether or not they offered abortions services and whether or not the results proved statistically significant.

### 3. Results

The final sample comprised 431 hospitals for contact. Of the 431 hospitals which constituted the sample, I contacted 428. Despite repeated attempts to reach the remaining three hospitals, I was unable to obtain a response either due to a lack of up to date contact information or no answer to calls.

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