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Title:

Changes in the prevalence of induced abortion in the Philippines

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Sessions chosen for submission

Choice 1

Session 101: Abortion

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Choice 2

Session 113: Contraception

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CHANGES IN THE PREVALENCE OF INDUCED ABORTION IN THE PHILIPPINES

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ABSTRACT

JUSTIFICATION

Illegal or clandestine abortion has been a neglected issue until the present in spite of the fact that reproductive health rights have been on the agenda since the ICPD conference in 1994 and reaffirmed at the ICPD+5 worldwide conference. Despite that an estimated 19 million unsafe abortions take place worldwide each year, insufficient information at the country level perpetuates the invisibility of the problem of unsafe abortion and results in governments giving it little priority in policy decisions to improve services for post-abortion care and to expand contraceptive services to reduce unplanned pregnancy.

In countries like Philippines where induced abortion is against the law, women nevertheless seek an abortion rather than give birth to children they cannot care for or do not want to face because of possible disgrace in the eyes of society. So induced abortion, often unsafe, is one method that Filipino women use to meet their reproductive goals.

The general secrecy surrounding induced abortion because of its illegality does not mean, however, that it is not possible to study the subject or that there have not been efforts to measure the magnitude of the problem (Singh et al., 1997), or to document the various aspects of the practice of induced abortion (Ramosa-Jalbuena et al., 1978 and 1988; Raymundo et al., 1996 and 2001; Perez et al. 1997). We know from previous studies that Filipino women who decide not to continue a pregnancy are not unique, special or different from the average woman in other countries. Recent evidence indicates that Filipino women of all social classes and backgrounds are having induced abortions (Raymundo et al., 2001). They are doing so under varying circumstances that ranges from safe medical procedures performed by medical personnel to back street abortion in extremely unsafe conditions. Nationally, the estimated annual abortion rate in the mid-1990s was 25 per 1,000 women of reproductive age, a rate that corresponds to 400,000 induced abortions per year. The rate varies by region, with Metro Manila having the highest prevalence with 41 per 1000 (Singh et al., 1997). With the restrictive position

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taken by the Catholic Church and the government, many women had little choice but to resort to an unsafe abortion when faced with an unwanted pregnancy.

Information of the 1998 Demographic and Health Surveys (DHS) of Philippines indicates that about half of married women use contraceptives, and four in 10 users rely on traditional methods. While the Church has always been pro-life and against modern methods, the previous Ramos administration departed from the traditional Catholic position and promoted modern contraceptive methods. However, under President Macapagal-Arroyo administration, the position of the government has changed. The national population and reproductive health program of the country now endorse “natural” family planning (traditional methods). The negative effect of a government and Church against modern methods is already felt. Comparison of the 1993 and 1998 Demographic and Health Surveys of Philippines shows a switch from modern methods to traditional methods. The most unexpected finding is that of Metro Manila where family planning services would be expected to be fairly available and accessible. It is the region that has one of the highest levels of unmet need for contraception and are increasingly using traditional methods. If the prevalence of induced abortion used to be high in the Philippines, now with the recent trend towards increased use of traditional methods of contraception, and a decrease in use of modern methods, it is possible that an even larger number of unplanned pregnancies and consequently of induced abortions, would occur (Alan Guttmacher Institute, 2003).

OBJECTIVES

The aim of the study is to estimate: a) the number of women who have been hospitalized each year during the period 1999-2001 for the treatment of complications following unsafe induced abortions, b) the total number of women having induced abortions each year, including both women who experience no complication for the procedure and those who do, and c) the incidence of induced abortion (rate and ratio) at national and regional levels. These new estimates will be compared with those of a comparable study carried out in 1994 to assess change in the level of induced abortion over the past decade.

DATA AND METHODOLOGY

Underreporting and misreporting of abortion in surveys and health statistics is widespread throughout the world because of the illegal nature of abortion in many countries of the developing world. However, the methodology used in the study, developed by one of the co-authors and documented elsewhere (Singh et al, 1997), provides more precise estimates of induced abortion and unplanned pregnancies than small-scale studies and applies indirect estimation techniques as an alternative approach for obtaining estimates of the incidence of induced abortion. This study applies indirect estimation techniques to the average annual number of women treated in hospital for induced abortion complications over the period 1999-2001 to estimate the rate of induced abortion at the country level and regionally. The main source of data for the measurements is the hospital reports of the Department of Health. All hospitals in the Philippines are required to complete an annual reporting form that reports the number of patients treated for each of the 10 leading causes of admission; abortion complications are often one of the top 10 causes. We have obtained all available hospital reports of the

country, both from private and public hospitals. Reports were collected over the period May to October 2003 and are currently being processed and analysis will begin shortly.

By applying statistical adjustments to allow for missing or incomplete reports, it is possible to estimate the number of Filipino women treated each year for abortion complications. Women who had a miscarriage are eliminated from the calculations of the prevalence of induced abortion. As some women who have had an abortions either do not need or do not obtain hospital treatment, estimates on the number of women hospitalized for the treatment of induced abortion complications do not represent the total number of induced abortions in the country. A multiplier developed is used to adjust for induced abortion occurring without hospitalization. Finally, the total number of women having induced abortion, and the rate and ratio of induced abortion are estimated. The estimates obtained for 1999-2001 will be compared with 1994 estimates that used a similar methodology, to assess changes in abortion incidence, 1994-2001.

IMPLICATIONS FOR POLICY

The new estimates will allow us to verify if the level of induced abortion has changed in a context where the Catholic Church has a strong influence on the provision of contraceptive services, proactively opposing to modern contraceptive methods, and where a conservative administration of President Macapagal-Arroyo has modified the national population and reproductive health program from previously promoting modern methods to one that endorses natural family planning. Given recent increases in use of traditional methods and declines in modern method use, and the increased barriers to contraceptive access, assessing abortion trends has great policy relevance.

Through the findings of the study, the project aims at raising awareness and knowledge among key stakeholders on the extent and social consequences of unmet reproductive health care needs, including unsafe abortion. This awareness may result in increased access to comprehensive contraceptive services to prevent unplanned pregnancy and reduce unsafe abortion, thus, improving the reproductive health of women.

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