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(RESEARCH ARTICLE)



Assessing the knowledge and attitude towards abortion practices amongst female tertiary students: A cross-sectional study

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Abstract

Background: Ghana despite having liberal abortion laws, many women, regardless of their socio-economic status, still choose to practice unsafe abortion practices. This study assesses the knowledge and attitude of female University Students towards abortion practices in the University for Development Studies Tamale campus.

Methods: The study was a descriptive cross-sectional study at the University for Development Studies Tamale campus in which self-administered questionnaires were used to assess the knowledge of the female university students on safe abortion, and their attitude towards safe abortion and services. Female university students were recruited for this study through a web-based survey and data analysis was done using Microsoft excel.

Results: From the survey conducted, 91% of respondents had sufficient knowledge on abortion and its unsafe dimensions. All respondents also seemed to have been able to identify at least one complication of unsafe abortion practices. 90% were also abreast with the stipulations on the laws of abortion which provide circumstances under which abortion may be deemed illegal. 86% thought religious beliefs posed the major hindrance against abortion in Ghana.

Conclusion: The study showed that respondents had adequate knowledge about safe abortion services and the abortion law of Ghana. The study also showed that an individual's attitude and perception towards abortion is influenced largely by the religious beliefs of the individual.

Keywords: Abortion; Knowledge; Attitude; female Students; Post Abortion Care

1. Introduction

The World Health Organization (WHO) explained dangerous termination of pregnancy as a procedure for abruptly ending a pregnancy undertaken by individuals lacking the necessary skillset or in a setting, which is not in consonance with standard medical practice, or both (1). Spanning the years 2010 and 2014, low-income countries made up for over 97% of all global termination of pregnancies. When compared to nations with much more liberal regulations on abortion, the percentage of dangerous abortions was significantly higher in countries with more punitive abortion rules and stipulations(2).

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Nonetheless, even in nations with lax abortion rules, some women persistently rely on riskier abortion methods due to additional obstacles like long waiting periods, poor facility standards, and parental consent regulations. In 1995, 2003, and 2008, almost all terminations of pregnancies within the West African subregion were deemed risky (3–5). Many abortion-related issues are currently plaguing Africa. In countries with limited resources, maternal mortality is an ever-increasing problem (6). Precarious termination of pregnancy has been found to be responsible for fourteen percent of all maternal mortalities within the African continent. Aside contributing to maternal death, improper abortion methods also cause additional health issues. Every year, an extrapolated 5 million women in developing nations are admitted to hospitals due to unsafe abortion complications include bleeding, infections, and perforations. Unsafe abortions have disproportionately unfavorable consequences in the African continent (7). In Ghana, illicit termination of pregnancy is a leading maternal death cause. A countrywide survey shows, 15% of all reproductively capable women (15-49) years of age were reported to have sought illicit abortion procedures. The rate of abortion in Ghana varies by region. An investigation into a survey by Mote et al., the Volta Region has a rate of 21.3 percent, whereas the Brong Ahafo Region has a rate of 22.6 percent (8).

Unsafe abortion complications have major implications on public health in the country, since they upend maternal death with morbidity while diverting scarce health resources. The government of Ghana has made steps to mitigate the negative impacts of illicit termination of pregnancies by enacting a harmless abortion legislation. However, the anticipated reduction in maternal mortality has yet to materialize (6). Ghana's laws on abortion have improved significantly since 1985. Abortion is now legal in the United States if it is performed by licensed medical professionals in licensed facilities when the pregnancy results from rape, incest, or the foetus has a significant risk of serious abnormalities. Although some prior scholars have labeled Ghana's abortion law as progressive when juxtaposing it to other neighbouring nations like Mali Nigeria and Côte d'Ivoire, it is restricted in comparison to Canada, Uruguay and the United States of America (9–12).

Several Ghanaian scholars have found roadblocks to the implementation of the abortion policy and regulations which are targeted towards minimizing dangerous abortion practices in Ghana. Several Ghanaian scholars have highlighted roadblocks to the implementation of an abortion law and policy targeted at reducing unsafe abortions in the country. Earlier studies in Ghana concluded that there was inadequate qualitative research regarding unsafe abortions. Other researchers also concluded in their studies that there was a dearth of relevant information existing on the current practices of unsafe abortion and operations of unsafe abortion services (12). A review of abortion care in Ghana by Rominski and Lori recommended that there was a need to gather information from women regarding their experiences in securing safe and legal abortions as well as reasons for resorting to unsafe methods (13). (13) indicated that these experiences of women will enable policymakers to pinpoint interventions that will prevent maternal mortality and other life-threatening complications that occur as a result of unsafe abortions.

2. Methods

2.1. Study design

The study used was a cross-sectional design.

2.2. Setting

The study was conducted within the Tamale Metropolis of the Northern region of Ghana.

2.3. Target Population

The preferred population for the study was female university students of the University for Development Studies at the Tamale campus located within the Tamale Metropolis.

2.4. Inclusion Criteria

Female students from the University for Development Studies within the reproductive age of 15 to 30-year group in the University for Development Studies Tamale Campus.

2.5. Exclusion Criteria

Female students in the university who met the criteria for inclusion but refuse to consent to participation in the study and female students who did not meet the inclusion criteria.

2.6. Sampling Technique and Size

A convenience sampling method was used. Also, a sample size of 100 respondents were used.

2.7. Data Collection Instrument

The data was collected using a structured questionnaire.

2.8. Data Collection Procedure

A structured online questionnaire was sent to students via the internet and the purpose of the study was explained in details. Individuals who were not interested in participating in the study had the option of declining. Confidentiality was assured and consent was obtained.

2.9. Ethical Consideration

Participation in the study was voluntary and participants were made to understand that the research is purely for academic purposes and their confidentiality would be strictly ensured.

3. Results

3.1. Socio-demographic characteristics of respondents

In this study most of the respondents were within the age group of 21-25 with a frequency of 74 (74%) and 97 (97%) of them were unmarried. 64 (64%) of the participants were Muslim and 32 (32%) were Akans. In terms of residence most of the participants (78%) came from an urban setting.

3.2. Knowledge of respondents about abortion and safe abortion practice

From the tables below, the researchers assessed participants knowledge about abortion and abortion practices. It was found that majority 87(87%) consider abortion as not being illegal in Ghana and 56 (56%) of them said abortion is only considered a good thing if it is done based on a justifiable indicator by a qualified medical provider. Moreover, more than half of them 77 (77%) believe that religion has influenced their perception and attitudes towards abortion. Also, 63 (63%) of them believed that their area of upbringing has also impacted their perception and attitudes.

Table 1 All Forms of Abortion Are Illegal In Ghana

	Frequency	Percentage (%)
YES	12	12.0
NO	88	88.0
TOTAL	100	100.0

Table 2 What Perception Do You Have About Abortion

	Frequency	Percentage (%)
It is a terrible thing and should not be encouraged	9	9
It is equivalent to murder	3	3
It is only considered a good thing when it is done based on a justifiable indication	20	20.0
It is only considered a good thing when it is done based on a justifiable indication by a qualified medical Doctor	59	59.0
Indifferent	10	10.0

Table 3 Has Your Religion in Any Way Had an Impact on Your Perception and Attitude Towards Abortion

	Frequency	Percent (%)
Yes	77	77.0
No	23	23.0
Total	100	100.0

Table 4 Has Your Area of Upbringing in Any Way Affected Your Perception and Attitude Towards Abortion

	Frequency	Percent (%)
Yes	68	68.0
No	32	32.0
Total	100	100.0

Table 5 Do You Think Unplanned Pregnancy Is Common Amongst Female University Students

	Frequency	Percentage (%)
Yes	76	76.0
No	24	24.0
Total	100	100.0

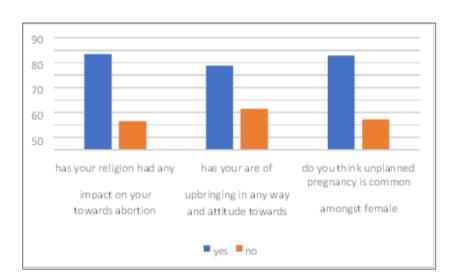


Figure 1 Influences on Knowledge and Attitudes Towards Abortion

3.3. Common methods of termination of pregnancy known by participants

The table 6 below depicts the common methods of termination of pregnancy known to participants. From the results, it was found that pills were the commonest methods known amongst them 58(58%) as method of terminating pregnancy. Surgical methods came second with 31(31%) claiming to know certain surgical methods were employed in terminating a pregnancy. 10% of respondents claim to know Herbal medication as a means through which pregnancies are aborted whilst a trifling 1% claimed to know all options in the questionnaire.

Table 6 What Are Some Common Methods of Termination You Know?

	Frequency	Percent ((%)
Pills	58	58.0
Surgical Methods	31	31.0
Herbal Medication	10	10.0
All The above	1	1.0

3.4. Participants knowledge about unsafe/illegal abortion

According to the study findings, 91(91%) of the respondents claim to have knowledge about unsafe/illegal abortion. Among these sampled participants, only 13 (13%) of them incorrectly identified the definition for unsafe/illegal abortion.

Table 7 Do You Know Anything About Unsafe/ Illegal Abortion?

	Frequency	Percent (%)
Yes	91	91.0
No	9	9.0
Total	100	100.0

Table 8 What Is Your Understanding of Illegal/Unsafe Abortion

Option	Frequency of selected	Percent of selected (%)
Abortion done by a qualified doctor	5	5.0
Abortion done by an unqualified doctor	89	89.0
Abortion done at a place that lacks the necessary facilities	76	76.0
Taking medications or chemicals to cause an abortion	63	63.0
Inserting substances and objects into the vagina to terminate pregnancy	64	64.0

3.5. Participants knowledge and experiences about possible complications of unsafe abortion

From the findings of this study, participants shared their knowledge and experiences about unsafe abortion. About 89 (89%) of them mentioned excessive bleeding (89%), damage or perforation of the uterus (80%), removal of the uterus (63%), abdominal/pelvic pain (70%), genital tract infection (66%), psychological and emotional guilt (74%), infertility (82%), death (87%) and others (2%).

Table 9 What Are Some of The Complications You Have Heard About or Experienced After an Unsafe Abortion

Options	Frequency of selected options	Percent (%)
Excessive bleeding	98	98.0
Damage or perforation of the uterus	88	88.0
Removal of the uterus	62	62.0
Abdominal/pelvic pain	79	79.0
Genital tract infection	67	67.0
Psychological and emotional guilt (fear etc)	75	75.0
Infertility	81	81.0
Death	84	84.0

3.6. Participants knowledge of safe abortion practices and sources of information

From tables 10 and 11, it was found that 92 (92%) of the participants have heard of safe abortion practices. Majority of them had the information from lectures 40(40%), followed by a social media 30(30%) and from the friends 17(17%).

Table 10 Have You Heard Anything About Safe Abortion Practice

	FREQUENCY	PERCENT (%)
YES	92	92.0
NO	8	8.0
TOTAL	100	100.0

Table 11 What Was the Source of Information?

Option	Frequency	Percent (%)
Lectures	40	40.0
Social media	30	30.0
Friends	17	17.0
Others (health providers, newspaper, radio)	13	13.0
Total	100	100.0

3.7. Preferred termination period and when termination of pregnancy is clinically done in Ghana

Again, it was found that 51 (51%) of the participants had knowledge of hospitals and clinics in Tamale where safe abortion services are offered. With regards to their knowledge on the period within which abortions are clinically done in Ghana 19 (19%) of them chose the option of "less than a month", 48 (48%) of them chose the option of "less than 3 months", 9 (9%) of them chose the option of "up to 6 months", 3 (3%) chose any time from conception to 9 months however and a significant 21 (2%) of them had no idea. Again, participants were interviewed concerning their preferred period for abortion and a significant percentage of them (80%) of them preferring to have their pregnancies aborted no later than the second trimester of pregnancy with 56 (56%) of them opting for to abort within the first month and 24% of them choosing to do so within the first 3 months. 17 (17%) however, had no idea.

Table 12 Do You Know Any Hospitals or Clinics in Tamale Where Safe Abortion Services Are Offered

	FREQUENCY	PERCENT (%)
YES	51	51.0
NO	49	49.0
TOTAL	100	100.00

Table 13 At What Stage of The Pregnancy Can Safe Abortion Be Done Clinically in Ghana

	Frequency	Percent (%)
Less than a month	19	19.0
Less than 3 months	48	48.0
Up to 6 months	9	9.0
Anytime from conception to 9 months	3	3.0
No idea	22	22.0
Total	100	100

Table 14 If you were to undergo a safe abortion, when would be your preferred period of termination

	Frequency	Percent (%)
Less than a month	56	56.0
Less than 3 months	24	24.0
Up to 6 months	2	2.0
Anytime from conception to 9 months	1	1.0
No idea	17	17.0
Total	100	100

3.8. Health Providers who are qualified to offer safe abortion services

In this study, respondent's knowledge on health providers who are qualified to offer safe abortion was assessed. About (77%) of them chose a gynecologist and 16 (16%) of them selected midwives. A negligible percentage (7%) chose physician assistant, general nurse, pharmacist and medical laboratory scientist as being qualified to carry out safe abortions.

Table 15 Which Of These Health Professionals Is/Are Qualified to Offer Safe Abortion Services

PROFESSIONALS	FREQUENCY	PERCENT (%)
GYNAECOLOGIST	77	77.0
MIDWIFE	16	16.0
PHYSICIAN ASS.	3	3.0
GENERAL NURSE	2	2.0
PHARMACIST	1	1.0
MEDICAL LAB	1	1.0

SCIENTIST		
TOTAL	100	100.0

3.9. Educating the public about safe abortion service

Regarding educating the public about safe abortion practices, a staggering 98 (98%) of them believe that it is right to educate the public about safe abortion practices. Of the participants in this study 85 (85%) of them believed that there is adequate public education on safe abortion practices. About 81(81%) of them know about the abortion law in Ghana.

Concerning the sources of information about the abortion law, 31% of them learnt through lectures, 22% through television, 15% got to know about the law through friends and a paltry 5% through radio.

Table 16 Do You Think It Is Right to Educate the Public About Safe Abortion Services

	FREQUENCY	PERCENT (%)
YES	98	98.0
NO	2	2.0
TOTAL	100	100.0

Table 17 Is there adequate public education on safe abortion practices

	FREQUENCY	PERCENT (%)
YES	85	85.0
NO	15	15.0
TOTAL	100	100.0

Table 18 Do you know if there is a law in Ghana concerning abortion

	frequency	percent
Yes	81	81.0
No	19	19.0
Total	100	100.0

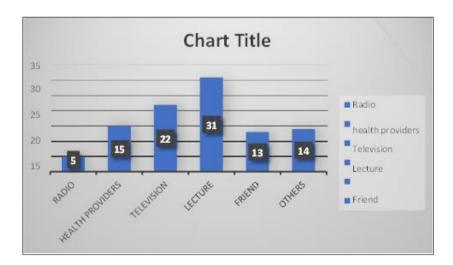


Figure 2 If Yes, How Did You Get To Know About The Law

3.10. What the abortion law seeks to achieve

Concerning respondents' knowledge on abortion law in Ghana, 88 (88%) of them agreed that abortion law gives circumstances under which abortion is illegal. Also, 22 (22%) of them agreed that abortion law makes abortion the right of every woman. Moreover, 7(7%) of them agreed that abortion law seeks to punish any woman who undergoes any form of abortion.

Table 19 Which Of the Following Do You Think Is/Are True

	Frequency	Percent (%)
The abortion law gives circumstances under which it is legal/illegal	90	90.0
Abortion law makes abortion the right of every woman	9	9.0
Only seeks to punish any woman who undergoes any form of abortion	1	1.0
Total	100	100.0

3.10.1. Statements that are true concerning the abortion law

With regards to the abortion law, 50 (50%) of them agreed that a woman should have a right to decide whether or not to have an abortion in all circumstances. About 39 (39%) of them agreed that abortion should be allowed only under certain circumstances. However, 10 (10%) of them agreed that spousal approval should be a requirement prior to undertaking safe abortion and only 1% of them agreed that abortion should not be allowed under any circumstances.

Table 20 Which Of the Following Do You Agree with The Most

	FREQUENCY	PERCENT (%)
By law a woman should have the right to decide whether or not to have an abortion	50	50.0
By law abortion should be permitted under only certain circumstances	39	39.0
By law spousal approval is needed before safe abortion	10	10.0
By law abortion should not be permitted under any circumstances	1	1.0
TOTAL		100.0

3.10.2 Circumstances under which safe abortion is permissible by the abortion law

In this section, participants knowledge on circumstances under which safe abortion is permissible by law was assessed. About (76%) of them chose rape/incest, (87%) of them chose foetus which has abnormalities that are incompatible with life, about (81%) of them chose mothers whose lives are endangered, a few of them (18%), (14%) and (9%) chose teenage pregnancy, low socioeconomic status and single motherhood respectively.

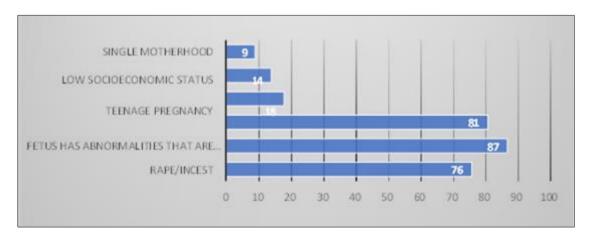


Figure 3 In Your Opinion the Circumstances Under Which Someone Can Undergo an Abortion as Per The Current Abortion Law Are

3.10. Should the current abortion law be revised?

Participants were asked whether the current law on abortion should be revised or not, 65% of them affirmed that it should be revised and 35% of them disagreed.

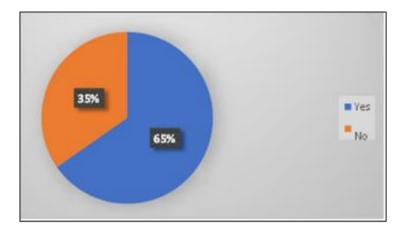


Figure 4 Do You Think the Current Abortion Law Should Be Revised

3.11. Factors that hinder access to safe abortion services

Concerning the factors that hinder access to safe abortion services (87%) of them chose religious beliefs, (86%) of them attributed it to lack of knowledge about abortion services, (77%) of them mentioned fear of stigma and (71%) of them attributed it to the cost of services.

Table 21 Some Factors That Hinder Access To Safe Abortion Services Include

	Frequency	Percent (%)
Lack of knowledge about where these services are available	86	86.0
Religious beliefs	87	87.0
Fear of stigmatisation	77	77.0
Cost of service	71	71.0

3.12. Should abortion services be covered by the NHIS

Table 22 Do You Think Abortion Services Should Be Covered By The NHIS

	Frequency	Percent (%)
Yes	73	73.0
No	27	27.0

Participants were also asked about whether abortion services be covered by the NHIS, 73 (73%) of them affirmed that it should be covered by the NHIS and 27(2%) of them did not agree.

4. Discussion

Comparisons are being made between the results of the study and that of similar studies conducted in different settings.

4.1. Knowledge about abortion and safe abortion services

The findings of this study indicate that many of the respondents had high knowledge regarding abortion and acknowledged that not all forms of abortion are illegal in Ghana. Moreover, participants were able to identify circumstances where abortion is considered safe. In a previous study conducted at the University of Cape Coast in Ghana

on the attitudes of university students towards abortion, it was revealed that, some of the students 480(46%) held conservative views towards abortion (14). Likewise, another study showed the same results 58 (53.21%) where the participants laid some criticisms about the practices of abortion as a result of religious beliefs (15). The findings of this study do not seem to be distinct from previous studies (16–18) in terms of percentage of the respondents whose religious beliefs make them against Abortion. And evidenced by the fact that most of the respondents 87 (87%) in this study also indicated religion as a factor that affects their perception of abortion.

Furthermore, the findings of this study revealed that participants had good knowledge about legal abortion services in Ghana. It was revealed that, the sources of their information were from health providers and lectures in school. This is an indication that their source of information is reliable and authentic. About 59% of the respondents correctly identified that abortion is considered a good thing if it is done on justifiable indication by qualified medical providers.

4.2. Knowledge on the abortion law

The findings of this study demonstrated that about (81%) of the participants knew about the existence of law regarding abortion in Ghana and the lecture hall was the major source of information which is basically reliable and less likely to misinform participants. According to this present finding, participants' level of knowledge on where safe abortion could be done is good 59% and it is higher than previous studies in Nepal (19) where only 40% of the participants even knew about the Abortion Law in Nepal, and South Ethiopia (20,21) where participants who knew where safe abortion could be done was 15(38.46%). The reason for this could be attributed to the variation in the duration of existence of this law in these countries.

About (90%) of the study participants agreed that abortion law spells out circumstances under which abortion is unsafe and illegal. Almost half of the respondents indicated that a woman should have a right to decide whether or not to have an abortion in all circumstances. On the other hand, only few of the participants thought that spousal approval is a requirement prior to safe abortion. This is consistent with the study of (22). Furthermore, about 3% of respondents also suggested that abortion law should not be allowed under any circumstances and 39% of them correctly showed that abortion should be permitted under certain circumstances.

In addition, the study revealed that majority of the participants had knowledge about the main situations where abortion is allowed by the Abortion Law. Few of the respondents indicated that teenage pregnancy, single motherhood and poor socioeconomic status were some of the reasons/circumstances for abortion.

4.3. Factors that hinder access to safe abortion services

Concerning the factors which hinder access to the services of abortion, fear of stigmatization was commonly mentioned by participants. Also, lack of knowledge about where the services are delivered and religious beliefs were other barriers to safe abortion services. This finding is corroborating the findings of another study conducted in Ashanti region of Ghana (6).

5. Conclusion

Respondents in this study exhibited adequate knowledge concerning abortion as well as the law governing abortion in Ghana. The findings of this study also showed that participants had reliable source of information about abortion including health providers and through lectures in class. It was also found that religious beliefs of participants had influences on their perception on abortion. Concerning the hindering factors to accessing safe abortion services, religious beliefs and lack of knowledge on where these services could be rendered topped the list.

Compliance with ethical standards

Disclosure of conflict of interest

No conflict of interest to be disclosed.

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