

Opinion about Women's Right to Abortion after Rape, and Willingness to Provide Safe Abortion Services by Brazilian Obstetricians and Gynecologists

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Research Article

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Abstract

Most Brazilian gynecologists agreed that abortion should be permitted after rape, but only half of them are willing to provide such services in public hospitals

Keywords: Legal Abortion; Rape; Opinion on Legal Abortion; Willingness to Provide Abortion

A KAP survey self responded by mail by 3,337 Brazilian obstetricians and gynecologists were carried out in 2005 and the main results were published in a Brazilian journal [1]. Respondents' opinion whether women who get pregnant after rape should have access to legal pregnancy termination was included in the questionnaire, as well as respondents' willingness to provide safe abortion services if requested by women's pregnant after rape in the public hospitals where they work. The research protocol was approved by the IRB of the State University of Campinas, Brazil. The results of that aspect of the study were not published until now, although they are highly relevant to orient policies in countries with restrictive laws similar to those in Brazil.

Almost 85% of respondents (84.8%) agreed that pregnancy termination should be allowed for women who got pregnant after rape, but only about half of those agreeing with the pregnancy termination in those cases, (44.4% of respondents), were willing to provide safe abortion services to raped women who get pregnant and request termination in the public hospital where they worked. Moreover, only 31.0% of the total would carry out a uterine evacuation to a woman with that condition. An additional 15.1% declared to be willing to prescribe misoprostol, which was the only drug registered and available in Brazilian hospitals for medical abortion.

The table1 shows that 40% of the respondents (84.8 less 44.4) did not have objection to pregnancy interruption after rape, but were not willing to provide such services.

	N	(%)	Total
Abortion should be allowed after rape	2,802	(84.8)	3.304*
Willing to carry out uterine evacuation after rape	976	(31.0)	3.151**
Willing only to prescribe misoprostol after rape	421	(13.4)	3.151**
Not willing to perform abortions after rape	1,754	(55.6)	3.151**

Table 1: Percentage of respondents who believe abortion should be allowed after rape and who are willing to evacuate the uterus or only prescribe misoprostol in a public hospital to raped women who get pregnant.

* 33 physicians did not respond; **147 physicians did not worked in public hospitals and 39 did not respond.

Refusal to provide safe, legal abortion care is well documented [2], but is usually attributed to conscientious objection of physicians who had moral or religious reasons to oppose to pregnancy termination. What is documented by this study is that among those who are in favor of pregnancy termination in a given condition (rape), about half would refuse to provide care. It suggests that for many physicians the objection is not to the abortion itself, but to a personal involvement in the procedure. That may be due to a genuine objection or to fear of the stigma, particularly if the procedure is broadly known as it happened when carried out in a public hospital [3].

This information reinforces the need to increase efforts to praise and stimulate the commitments of those who give priority to provide services to women in need, as well as to remove the stigma surrounding legal abortion services.

Conflict of interest

The authors have no conflicts of interest.

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