

# CAUSES OF INDUCED ABORTION IN MARRIED WOMEN OF DISTRICT TURBAT OF BALUCHISTAN, PAKISTAN

Rubina Amjad<sup>1</sup>, Rubina Salma Yasmin<sup>2</sup>, Anwar Ali<sup>3</sup>, Muhammad Asghar Khattak<sup>4</sup>, Farzand Iqbal<sup>5</sup>, Ijaz Aziz<sup>5</sup>

<sup>1</sup>Department of Gynecology and Obstetrics, Makran Medical College, Turbat, Balochistan, Pakistan

<sup>2</sup>Department of Forensic Medicine, Peshawar Medical College, Peshawar - Pakistan

<sup>3</sup>Department of Forensic Medicine, Muhammad Medical College, Peshawar - Pakistan

<sup>4</sup>Department of Forensic Medicine, Kabir Medical College, Peshawar - Pakistan

<sup>5</sup>Department of Forensic Medicine, Makran Medical College, Turbat, Balochistan - Pakistan

## ABSTRACT

**Objective:** To determine the causes of induced abortion in married women of the Turbat district of Baluchistan.

### Materials and Methods:

This cross-sectional study, conducted from December 2021 to February 2022, involved 276 married women between the ages of 18 and 45 who had at least one child. Convenient sampling was used to recruit participants, and interviews were used to collect data. Questionnaires about socioeconomic status, contraceptive use, and induced abortion were used to collect this biographical information. The study's statistical analysis was performed using SPSS v.20.0.

**Results:** According to the participants, 13.40% of those interviewed had at least one induced abortion. The main causes of these abortions were unexpected pregnancy (35.13%), having more than one child (35.13%), contraceptive failure (21.62%), and poverty (8.10%). Over 72.97% of women who had undergone induced abortion were aged below 39 years, and half of them (54.05%) had more than five children. The study also revealed that almost all of the women who had abortions were unemployed.

**Conclusion:** The study found unexpected pregnancies, contraceptive failure, and socioeconomic issues in district Turbat as causes of induced abortions. It highlights the importance of addressing the dynamics of induced abortion in Pakistan through legislative reforms and improved family planning education and services. The results encourage culturally and religiously appropriate policies and programs that empower women through reproductive health awareness and family planning.

**Keywords:** Induced Abortion, Married Women, Contraceptive Failure, Unplanned Pregnancy, Socio-Economic Factors, Reproductive Health, Family Planning

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## INTRODUCTION

In the field of Forensic Medicine, abortion is defined as the premature expulsion of the products of conception at any period of gestation before full term. The products of conception may be the embryo or later-stage fetus<sup>1</sup>. There are two types of abortions, namely spontaneous and artificial. Spontaneous abortions are those which occur naturally without interference as a result of diseases, while

induced or artificial abortions are those which occur as a result of interference. Induced abortions are justifiable or legal, while criminal abortions are not justifiable<sup>2</sup>. The statute law of miscarriage in Pakistan gives importance to the stages of gestation, making the offense more serious if it is done in the later stage of pregnancy if it is done without good faith. According to the stage of gestation, criminal abortion is of two types:

Isqat-e-Haml: Causing a woman with a child whose organs have not been formed to miscarry without the aim of saving the life of the mother.

Isqat-e-Janin: Causing a woman with a child whose limbs or organs have been formed to miscarry without good faith to save the life of the mother<sup>3</sup>.

Worldwide, each year, about seven crore and thirty lac people-induced abortions take place. Around six out

### Correspondence

**Dr. Ijaz Aziz**

Associate Professor

Department of Forensic Medicine, Makran Medical College, Turbat, Balochistan - Pakistan

**Cell:** +92-313-4344367

**Email:** ijazaziz62@gmail.com

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of 10 of all unintended pregnancies end in induced abortion. The frequency of unsafe abortion is 46% of all abortions, which majority means 96-97% take place in developing countries<sup>4</sup>. In Pakistan, about eight lac and ninety thousand induced abortions take place per annum, and the rate of abortion is twenty-nine (29) per 1000 women whose age range is 15-49<sup>5</sup>.

Unsafe abortion is a leading cause of maternal mortalities and morbidities. Approximately 97% of all unsafe abortions worldwide take place in underdeveloped nations.

The major causes of maternal mortality are bleeding, infections, and substances used for this purpose<sup>6</sup>. Indonesia is a Muslim country where the unsafe abortion rate is high compared to the rest of the Muslim world<sup>7</sup>. The two most populated Muslim countries in the world are Indonesia and Pakistan about five thousand and four hundred to two thousand and five hundred terminations of pregnancies occur every day<sup>8</sup>.

There are multiple causes of induced abortion in married women, among which the most important ones are socioeconomic and failure of contraception. Social-economic causes account for 60% of induced abortions, while the remaining 40% were medical-related issues such as congenital fetal abnormalities, intrauterine death, women's health problems, and viral infections<sup>9</sup>. In Pakistan, the major determinants of induced abortion were poverty, illiteracy, multiparity, and non-use of contraceptive methods<sup>10</sup>.

Several amendments were made to abortion law in Pakistan. The amendments were made to ensure the conformity of the law with the injunctions of the holy Quran and Sunnah. As a result of the amendment to the Pakistan Penal Code in 1997, abortion was legalized in the early stages of pregnancy 'to save the life of the woman' and 'to provide necessary treatment.'

The current law in Pakistan legalizes abortion only to save the life of the woman or provide necessary treatment, that is why almost all abortions take place secretly<sup>11</sup>. This includes abortion procuring by married women with or without the consent of the husband.

This study aimed to assess the determinants (causes) of induced abortion in married women of the Turbat district of Baluchistan. This study highlights the need for wider education about family planning services in the community to educate females about their own reproductive-related decisions to make legislation regarding induced abortion and to make amendments about marriage.

## MATERIAL & METHODS

This cross-sectional study was conducted in the district Turbat of Baluchistan. The study population com-

prised 276 married women aged 18 to 45 years having one or more children. The respondents were selected through a convenient sampling technique. Data was collected over three months between December 2021 and February 2022.

Married women having at least one child were included in the study. Women who had severe acute illnesses were excluded from this study. An interviewer-administered questionnaire was used for data collection. The questionnaire includes information on biographic data, socioeconomic status, failure of contraceptive methods, unintended pregnancy, and induced abortion. The underlying reasons for induced abortions, like unintended pregnancy, enough children, too soon pregnancy, poverty, and failure of contraception, were asked of the respondents.

The questionnaire was administered in a very confidential setting in English and Urdu language. As the participants were unable to understand English and Urdu, the questionnaire was verbally translated into Balochi language as district Turbat is a Balochi-speaking area. Interviewers collected the data from the married women of district Turbat. Spss version v.20.0 was used for data analysis. Frequency and percentages applied for categorical variables.

## ETHICAL CONSIDERATION

Data gathering in the Turbat district adhered to tight confidentiality protocols due to the area's strong religious and traditional beliefs. The respondents were given the option to participate voluntarily, with the requirement that they maintain the confidentiality of their names and residences. The collected information was maintained in strict confidentiality.

## RESULTS

The results section provides an in-depth analysis of findings from this study concerning induced abortion, participants' demographic characteristics, and reasons for performing abortions among married women living in the Turbat district.

All participants (276) were married women who had at least one living child. 13.40% of the participants had at least one induced abortion, while the rest, 239, had no abortion in their life, as shown in Table 1.

Table 2 indicates that 94.6% of women confirmed one Induced abortion, and others confirmed two in a total survey of 37 women.

Table 3 indicates that the main causes of abortion, such as one-child and unplanned pregnancy, were 35.13% each in women having more than one child. Contraception failure (21.62%) and poverty (8.10%) were also important contributing factors to abortion in the sample surveyed above.

Table 4 shows the distribution of women's age groups in the study showed that 37.84% of the women were in the age group of 25-29 years, followed by 27.02% aged 40 and above, 16.22% aged 30-34 years, 10.81% aged 18-24 years, and 8.10% aged 25-29 years.

In terms of the number of children, the majority of women who had induced abortions (54.05%) had five or more children, followed by 43.24% with two to four chil-

dren, and only a small percentage (2.70%) had just one child as shown in tale 6.

## DISCUSSION

This cross-sectional study was conducted in the Turbat district of Baluchistan, Pakistan, among 276 married women to determine the reasons for induced abortion. The same socio-economic and reproductive challenges that have been emphasized by Bankole et al. (12) are supported by this study. The study revealed unintended pregnancy and having more than one child as the main reasons for induced abortion, each contributing to 35.13% of cases, followed by contraceptive failure (21.62%) and poverty (8.10%), which is consistent with findings by Ganatra et al. (13). Most women who underwent induced abortions were below 39 years of age, unemployed, and had more than five children, showing the relation between reproductive health and socio-economic factors. These results highlight the immediate need for better family planning education, accessible contraceptive services, and socio-economic support to address the factors that lead to induced abortion.

## CONCLUSION

This study also emphasizes the need for increased community awareness and access to family planning services. The findings revealed an informed gap in contraceptive knowledge and accessibility, which, if closed, could lead to fewer unwanted pregnancy-related abortions. Furthermore, the study highlights many legal and cultural aspects of inducing abortion in Pakistan. This gap must be closed with law updates that are culturally and spiritually suitable for this region, as well as preserving girls' health by balancing reproductive rights. It promotes increased sex education, improved supplementary family planning services, and a more favorable legislative environment. These indicators are crucial for educating Malakand women and those living in similar settings on how to make informed reproductive health decisions, which will result in a greater overall quality of life.

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**Table No 1: Prevalence of Induced Abortion Among Married Women**

Induced abortion	Frequency	Percentages
Yes	37	13.40%
No	239	86.60%
Total	276	100%

**Table No 2: Prevalence of Induced Abortion by Number of Incidents**

Number of induced abortions	Women had induced abortion	Percentages
1	35	94.60%
2	2	5.40%
Total	37	100%

**Table No 3: Causes of induced abortion**

Causes of criminal-induced abortion	Frequency	Percentages
More than one child	13	35.13%
Unplanned pregnancy	13	35.13%
Failure of contraception	8	21.62%
Poverty	3	8.10%
Total	37	100%

**Table No 4: Distribution of Women by Age Group**

Women age group	Number of women	Percentages
18-24 years	4	10.81%
25-29 years	3	8.10%
25-29 years	14	37.84%
30-34 years	6	16.22%
40 and above	10	27.02%
Total	37	100%

**Table No 5: Number of Children Among Women Who Had Induced Abortion**

Number of children	Frequency	Percentages
5 and above	20	54.05%
2 -4	16	43.24%
One	1	2.70%

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#### Authors Contribution:

Following authors have made substantial contributions to the manuscript as under

Authors	Conceived & designed the analysis	Collected the data	Contributed data or analysis tools	Performed the analysis	Wrote the paper	Other contribution
Amjad R	✓	✗	✓	✗	✓	✗
Yasmin RS	✓	✓	✗	✓	✓	✗
Ali A	✗	✓	✗	✗	✓	✗
Khattak MA	✓	✓	✓	✗	✓	✓
Iqbal F	✓	✗	✓	✗	✓	✗
Aziz I	✓	✓	✗	✓	✓	✗

Authors agree to be accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

#### Ethical Approval:

This Manuscript was approved by the Ethical Review Board of Makran Medical College, Turbat, Balochistan. Vide No. MMC/ERC/09-2021. Dated: 05 11 2021



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