

Unintended Pregnancy: More than a Medical Issue

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Unintended pregnancy is a wide-spread problem which is considered a silent pandemic throughout both developed and developing countries. Of the estimated 210 million pregnancies that occur throughout the world each year, about 38% are unplanned, and 22% end in abortion according to a new report by The Alan Guttmacher Institute (AGI) ¹. There are a myriad of determinants for unintended pregnancy which should be considered, such as: adolescent pregnancy, unsafe abortion and the lack of access to contraception, not forgetting the social stigma which women have to endure with unplanned pregnancies.

An unintended pregnancy is one which is mistimed or unwanted at the time of conception, and is associated with an increased risk of health problems for both the mother and the baby. Complications which are common in these pregnancies include acute trauma, shock, organ failure, and infection, as well as possible future reproductive problems². As a consequence of this, for every 100,000 births 137 women die³ from wholly preventable problems which put women and children's health at risk unnecessarily. Behind Africa and Asia, Latin America and the Caribbean have the highest rates of unintended pregnancies with more than one-half of pregnancies being unplanned ⁴.

Inequalities in this region of the world are stark; most of the women who are affected by unintended pregnancy are often young girls who are living in poverty, with 18% of the world's teenage pregnancies occurring in Latin American and the Caribbean ⁵. Adolescent pregnancy is an important subject when considering the progress of the Millennium Development Goals, primarily because it occurs in the girls of poor families and therefore tends to perpetuate poverty and the lack of opportunities. Secondly, it leads to an increased incidence of infant morbidity and mortality, as well as complications during birth and the postpartum period. Finally, it is intrinsically linked to early school dropouts among teenage girls ⁶. The context of adolescent pregnancies is not always the same however, for instance: having a child outside marriage is not uncommon in many countries. Latin America and the Caribbean have higher rates of adolescent pregnancy outside marriage than other regions such as Asia; these pregnancies are much more likely to be unplanned ⁶. This high index of unplanned pregnancies suggests that the reproductive rights of teenagers are not being used. This connection could be considered a gender inequality, as it is mainly the women who are suffering in this situation. Men shirk their responsibilities when it comes to contraception leaving that responsibility unjustly placed on women alone, when it should be at least equal. What's more is that the adolescent girls who are using protection are often stigmatised and insulted by their male peers and other women, making the

situation worse. Additionally, these unplanned pregnancies of teenage girls will often end in unsafe or self-induced abortions.

Unsafe abortion has been described as ‘one of the most neglected sexual and reproductive health problems in the world today’ and is a major public health crisis throughout many developing countries ⁷. The World Health Organization defines unsafe abortion as ‘a procedure for terminating a pregnancy performed by persons lacking the necessary skills or in an environment not in conformity with minimal medical standards, or both’ ⁸. An estimated 20 million unsafe abortions are performed each year, resulting in the deaths of 47 000 women and causing hospital admission in approximately 5 million women worldwide ⁹. These statistics should be treated with an index of suspicion however, as there may be many more cases which are not reported due to the legal and social stigma surrounding the controversial issue.

Unsafe abortion is a serious public health issue in Latin America and the Caribbean where contraceptive use remains low and there is restrictive legal framework. Twenty percent of all unsafe abortions occur in this region and the risk of death is estimated at 30 per 100, 000 unsafe abortion procedures ¹⁰. Termination practises, when carried out by a trained professional in an appropriate setting, carry a low risk of complication and death. However in

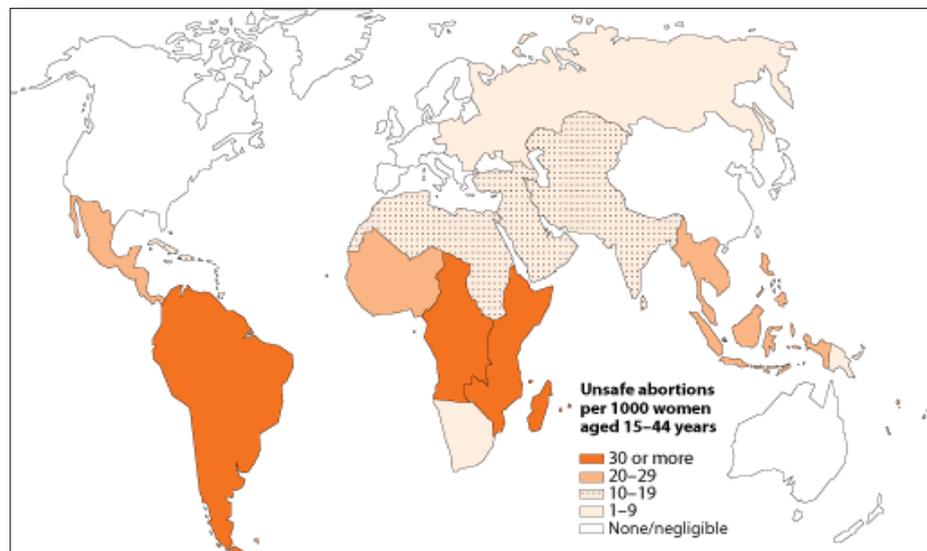


Figure: Prevalence of unsafe abortions per 1000 women aged 15-44, adapted from WHO⁹ not to scale

many developing countries where abortion is criminalized, women often resort to unsafe conditions and practises leading to high rates of maternal death ⁷. Around one million women in Latin America and the Caribbean are hospitalized annually for treatment of complications from unsafe abortion ⁴.

The majority of countries in Latin America and the Caribbean maintain highly restrictive law surrounding abortion. Termination of pregnancy is not permitted for any reason in 7 of the 34 countries and territories in this part of the World. It is allowed only to save the woman’s life in eight others, and a few countries permit termination in cases of rape, such as Brazil and Panama, or foetal impairment such as some states of Mexico ⁴. This legal framework surrounding abortion, as well as the

religious beliefs behind the issue, drive these women towards the least safe methods of termination through untrained providers resulting in severe complications; or self-induced abortion. The legal status of abortion needs to be reconsidered for the reproductive and sexual health rights of these women. Guatemala and Costa Rica have recently worked towards clarifying the medical conditions under which pregnancy termination is legally permitted, as a means of improving access when these conditions are met ¹⁰. One of the biggest issues is that legislation is unclear and healthcare workers are often afraid of misinterpreting it and being accused of breaking the law, consequently this leads to women being deterred from going to doctors for help. This is a reproductive injustice which needs to be addressed for the women in the future who are in need of an abortion.

One of the main issues which needs to be addressed with consideration of unintended pregnancy is the lack of contraception, family planning and sex education available to these women. Meeting women's needs for modern family planning and the recommended standards of maternal and new born care would result in immediate health benefits without increasing the total cost of services³. Unintended pregnancies would be estimated to drop by 67%, from almost 10 million to 3 million annually, while unsafe abortions would decline from 3.6 million to 1.2 million - assuming that there is no change in abortion laws - and the number of women needing medical care for complications of these unsafe procedures would decline from 1.5 million to fewer than 0.5 million, in Latin America and the Caribbean ³.

Recent research has found that on average 60-80% of women of reproductive age use modern contraceptives ³; however this does not translate to a reduction in unplanned pregnancies. Female sterilization and injectable contraceptives are the most popular methods of contraception, whereas long-acting reversible contraceptive (LARC) methods such as the intrauterine device and implants are the least commonly used. The use of LARCs could be argued as negligible in the public health system of Latin America and the Caribbean since they are the most effective contraception available which is reversible. A primary prevention method which also needs to be improved is sex education for adolescents, however there has been minimal progress reported due to the lack of collaboration between the Ministries of Education and the judicial system ¹⁰.

In Latin America and the Caribbean, the cost of providing family planning services to women who currently use modern methods is US\$600 million and the cost of providing current levels of maternal and new born care is \$1.8 billion³. However, the care that many women receive still falls short of recommended standards. Family planning costs would increase to \$880 million if contraception was provided to all the women who need them, however this would substantially reduce the number of unplanned pregnancies, thereby making improvements in maternal and new born care more

affordable. Providing these services together is easier for users and is generally more cost-effective than stand-alone approaches. Providing modern contraceptives to all women who need them pays for itself, saving \$2.50 in maternal and new born care costs for each dollar invested³. Moreover the increase in barrier contraception would decrease the incidence of HIV/AIDs as well as other STIs which are prevalent in Latin America and the Caribbean.

Reducing unintended pregnancies should be one of the top priorities for public health in developing countries, particularly Latin America and the Caribbean. A decrease in unplanned pregnancies would save on Government spending for health, education, water and sanitation as well as other services. It would also decrease the burden on limited natural resources, making social and economic development targets easier to achieve³. Additionally a reduction in unintended births, particularly in young women would improve education and employment opportunities for the future, which in turn, would contribute to gains in productivity, gender equity, poverty reduction and economic growth.

Word Count: 1,463

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