CHAPTER 8

SUMMARY, CONCLUSIONS AND RECOMMENDATIONS

8.1 INTRODUCTION

Termination of pregnancy is a very sensitive issue, especially that not every person is in favour thereof. In all the countries, the abortion controversy is never-ending, because of the two ends of the continuum, namely, those who are for it and those who are against it. In a given country, the legislation on termination of pregnancy depends on the ruling party's opinion. If the ruling party is for termination of pregnancy, then it will be legalised, despite the opposition from the other parties.

In South Africa, the legalisation of termination of pregnancy in 1996 was not without opposition, and this opposition is still evident even now. The religious movements are totally against termination of pregnancy and are vocal about this through the media.

Termination of pregnancy is accompanied by psychosocial implications. The aim of this study was to explore these implications, so that the guidelines for appropriate social work intervention could be formulated.

The focus of this chapter is on the summary, conclusions drawn from the study, as well as the recommendations. The central focus of each chapter in this thesis will be highlighted by means of a summary, conclusions and recommendations, according to the following themes:

- General introduction
- The medical aspects of abortion
- The psychosocial aspects of abortion
- The legal aspects of abortion
- The empirical findings from the quantitative approach
- The empirical findings from the qualitative approach
- The guidelines for social work intervention regarding pre-abortion counselling
8.2 GENERAL INTRODUCTION OF THE STUDY

8.2.1 SUMMARY

Chapter one provided a general introduction and orientation to the study. It commences with the motivation for the choice of the topic, the problem formulation, the aim and objectives of the study and the assumptions for the study. Then followed the research methodology which includes, the research approach, the type of research, the research design, research procedure and strategy, as well as the pilot study. Subsequently, the research population and sampling method were described, the key concepts for this study were defined, followed by the problems and limitations. The chapter ended with the delineation of the thesis.

The aim of this study was to explore the psychosocial aspects related to termination of pregnancy on the woman, whilst the objectives were:

• To investigate termination of pregnancy as a phenomenon
• To describe the psychosocial aspects related to termination of pregnancy on the woman
• To describe the legal aspects of abortion
• To determine the psychosocial aspects related to having an abortion on the woman, after the enactment of the Choice on Termination of Pregnancy Act (92/1996)
• To provide the guidelines for social work intervention with female patients who opt for termination of pregnancy.
• To make recommendations for an improved social work service delivery, with regard to termination of pregnancy.

The aim and objectives were met by means of this study, except the determining of the psychosocial implications of termination of pregnancy after the procedure, through an empirical study, as the respondents were not available. The objectives will be referred to under the specific themes.

The assumptions and a hypothesis for the study were formulated were as follows:

• Giving women a chance to make an informed decision with regard to termination of pregnancy, that is, providing them with pre- and post-abortion counselling, would make the experience less traumatic.
Women who opt for termination of pregnancy need to be provided with social work intervention, that is, pre- and post abortion counselling, to enable them to deal with the long-term implications of their choice.

Although termination of pregnancy is each woman’s choice, it does have negative psychosocial implications.

Women who are not provided with a comprehensive service at the TOP Clinics could regret their decision later in life.

If women who request termination of pregnancy could be provided with a comprehensive service then their social functioning could be improved.

How the assumptions and hypothesis were met will be discussed at the end of this chapter.

8.2.2 CONCLUSIONS

Literature from the fields of medicine and psychology were mostly used in this study because there is limited social work literature.

Women who request termination of pregnancy at the state facilities are provided with a medical service only, without any consideration of their psychosocial needs. The service is solely provided by the medical practitioners and nurses, which means that a multi-disciplinary team approach is not used.

Termination of pregnancy is accompanied by psychosocial implications, hence the need for a multi-disciplinary team approach at the TOP Clinic.

It is difficult to get women as respondents after the abortion procedure, to determine the actual implications on them.

This study makes an important contribution in terms of the provision of the abortion service in South Africa, especially at the state abortion facilities.
8.2.3 RECOMMENDATIONS

- Termination of pregnancy is not a medical problem alone, as it is accompanied by emotional, psychological, religious and social implications that have an impact on the woman’s life. It is therefore recommended that a holistic approach be adopted when rendering the abortion service.

- A comprehensive abortion service by a multi-disciplinary team at all the state abortion facilities, to enable the women to live with their decisions is highly recommended.

- Social workers have to be part of the multi-disciplinary team at the TOP Clinic, for them to deal with the psychosocial aspects of abortion.

- Follow-up as part of the TOP service needs to be established at all TOP facilities in South Africa, so as to determine all the implications of termination of pregnancy on the women after the procedure. This would lead to the provision of an appropriate service that is responsive to the needs of the women.

8.3 THE MEDICAL ASPECTS OF ABORTION

8.3.1 SUMMARY

Chapter 2 focussed on the medical aspects of termination of pregnancy and the following aspects were included: definition of the key concepts (medical concepts), classification of abortion, methods of termination of pregnancy at different periods of gestation, abortion-related risks and complications, management of the abortion-related complications, prevention of complications as well as the post-abortion family planning.

This chapter fulfilled the first objective of the study: To investigate termination of pregnancy as a phenomenon. An in-depth description of the medical aspects of termination of pregnancy was provided.
8.3.2 CONCLUSIONS

- The method of termination of pregnancy used when the woman requests it, is determined by the period of gestation.

- Termination of pregnancy during the first trimester is a simple procedure and is not accompanied by complications, as compared to termination of pregnancy during the second trimester.

- It would be beneficial if all women who are faced by an unplanned and unwanted pregnancies could request termination of pregnancy during the first trimester.

- Due to the lack of follow-up service for the women who undergo termination of pregnancy, it is not easy to have a full record of what the women go through after the procedure.

- Improved abortion service is needed for a better management of the abortion-related complications.

- The prevention of abortion-related complications needs to be the focus of the abortion service.

- Family planning after the abortion procedure must be presented to women in a way that they are given a chance to choose a method that they feel is suitable for their circumstances, in an effort to improve compliance, hence prevent unplanned pregnancies.

8.3.3 RECOMMENDATIONS

- The abortion services need to be accessible for all the women to utilise during the first trimester, to prevent the complications that could occur during the second trimester.

- It is important to have a follow-up service for the women who undergo termination of pregnancy, for the complications to be observed and treated as early as possible.
• Family planning services need to be provided in a manner that they are readily accessible and appealing, for the women not to hesitate to use them, so that the incidence of unplanned pregnancies could be eliminated.

8.4 THE PSYCHOSOCIAL ASPECTS RELATED TO ABORTION ON THE WOMAN

8.4.1 SUMMARY

Chapter 3 dealt with the psychosocial aspects related to termination of pregnancy on the woman and consisted of the following: factors leading to unwanted pregnancies, emotional reactions, including reactions to pregnancy as well as to abortion, the defence mechanisms used by the women after abortion, social aspects of abortion on the woman, the psychological aspects of abortion on the woman, adolescents and abortion, as well as counselling.

This chapter fulfilled the second objective of the study: To describe the psychosocial aspects related to termination of pregnancy on the women. An in-depth description of the psychosocial aspects related to termination of pregnancy are provided after an intensive literature study.

8.4.2 CONCLUSIONS

• Termination of pregnancy is accompanied by a variety of psychosocial aspects on the women, which makes counselling an important aspect of the abortion service.

• There are various factors in the woman’s life, that could lead to an unwanted pregnancy.

• An unwanted and unplanned pregnancy evokes a variety of feelings on a woman and her reactions largely depend on her personal circumstances.

• Undergoing abortion is accompanied by a variety of emotions, both on a short- and long-term basis.

• Deciding on terminating an unwanted and unplanned pregnancy could have devastating psychological effects on the woman’s life.
8.5 THE LEGAL ASPECTS OF ABORTION

- In trying to cope with the emotional burden of undergoing an abortion, women use a variety of defence mechanisms. Over-utilisation of these defence mechanisms could delay the woman’s process of recovery.

- Termination of pregnancy has serious social implications on the woman as it is an emotive issue, and the decision to go through with it is made based on a variety of factors.

- Adolescents react in a different way to unplanned pregnancy, as well as to termination of pregnancy. Their level of maturation plays an important role in how they react.

- Counselling is very important as part of the abortion service, for the women to be assisted through the whole process, starting from the period of discovering the pregnancy, decision-making period, going through the procedure and dealing with the loss, after the procedure.

- It is only through counselling that women could be assisted to go on with their lives after termination of pregnancy.

8.4.3 RECOMMENDATIONS

- Counselling needs to be included as an integral part of the abortion service, to make sure that the psychosocial needs of the women who request termination of pregnancy are attended to.

- Sexuality education needs to be provided to young girls as early as possible, to ensure that they are empowered to make informed choices concerning their bodies.

- With sexuality education the young girls will be equipped to prevent teenage pregnancies, as this interferes with their education progress and career building.
8.5 THE LEGAL ASPECTS OF ABORTION

8.5.1 SUMMARY

Chapter 4 focussed on the legal aspects of abortion. And consisted of the following: the international abortion policies with reference to USA, Canada, Netherlands, Israel, Ireland and Great Britain. Regarding the South African abortion legislation the focus was on the period before the legalisation of abortion as well as thereafter, as well as the provisions of the Choice on Termination of Pregnancy Act (92/1996).

This chapter fulfilled part of the third objective of this study: To describe the legal aspects of termination of pregnancy. This objective was fulfilled by an in-depth discussion of the circumstances prior to the legalisation of abortion as well as the provisions of the act. A comparison of the South African abortion legislation with the international abortion legislation was also provided in this chapter.

8.5.2 CONCLUSIONS

Many countries had to legalise abortion due to the pressure that was coming from the people. The women’s groups formed part of the protest, as they felt strong that it was time for them to have a choice regarding their bodies.

- Although abortion was legalised there are some restrictions imposed on how it has to be practised in all the countries.

- Up to this stage Great Britain has not yet legalised abortion, mainly because of the influence of the Catholic belief that it is a sin.

- In all the countries the woman’s consent is the only one that is required, for the woman to undergo termination of pregnancy. This gives the women responsibility over their bodies.

- The legalisation of abortion in South Africa has reduced the incidence of unsafe abortions, which was having devastating results on the women and sometimes claiming their lives.
The South African abortion legislation is in line with the international policies, although it has some loopholes, namely, lack of social work intervention and a non-mandatory counselling service. Unlike in Israel, where the social worker forms part of the team that provides the abortion service. The women’s psychosocial needs are attended to before they could undergo the procedure.

Providing women with safe abortions, without any counselling could result in emotional problems later in their lives.

The issue of the minors being able to consent for their termination of pregnancy, where they are not provided with counselling could result in their future lives being negatively affected. Specifically that they always try to keep this experience to themselves, without receiving any support from their families.

8.5.3 RECOMMENDATIONS

Although the women are given a chance to make a choice regarding their bodies, it is recommended that the involvement of the parents be seriously considered when it comes to the minors.

It is recommended that a mandatory counselling be part of the abortion service at all the TOP facilities, for the women to be provided with a comprehensive service.

The social worker must be part of the team that provides the abortion service at all the TOP facilities.

It is not beneficial for the women to receive an incomplete abortion service at the state TOP facilities, as a result it is recommended that these facilities be provided with the necessary resources, namely, staff and equipment.

The abortion service provided at state facilities must be responsive to the needs of the women, seeing that the majority of the women receive this service.
8.6 THE QUANTITATIVE EMPIRICAL FINDINGS

8.6.1 SUMMARY

Chapter 5 focussed on the quantitative empirical findings regarding the psychosocial implications of abortion prior to the procedure, and it consisted of the following: a brief discussion of the research methodology, followed by the presentation and interpretation of the research findings.

This chapter fulfilled objective three of this study: To determine the psychosocial aspects related to having abortion on the woman, after the enactment of the Choice on Termination of Pregnancy Act (92/1996).

8.6.2 CONCLUSIONS

- The majority of women who request termination of pregnancy fall in the age category of 21-30yrs.

- A considerable number of women who request termination of pregnancy are single.

- The majority of women in the sample had no other children, which indicates that they were not yet ready to raise children.

- A large number of women could be said to be literate, because they had an educational level of grade 8-tertiary level.

- The majority of women belonged to the Christian religion, although women from other religions requested termination of pregnancy as well.

- Most women who requested abortion were economically dependent on someone, as they were students and others unemployed.

- It has been evident that TOP clinic at Kalafong Hospital serves women from a variety of areas, with Mamelodi and Atteridgeville being the mostly served areas.
• Most women discovered that they were pregnant before the 8th week of gestation.

• It takes women sometime to decide on abortion, as it is not an easy decision to make.

• A large number of women were not influenced to make the decision to terminate their pregnancies.

• The findings reveal that the main reason for the women to decide on termination of pregnancy is economic circumstances.

• The majority of women did not consider adoption as an alternative, because of the emotional attachment to the foetus, if they carry the pregnancy to term, which could make it impossible to let go.

• It is evident that the clinic is known and the private practitioners and local clinics are instrumental in referring women to Kalafong hospital.

• It has been shown by the findings that women who request termination of pregnancy experience a variety of negative feelings, hence a remarkable number of women do not inform anybody about their decision, which could affect them emotionally in future.

• The fathers to these unborn babies also experience a variety of feelings, which have a role to play in the women’s decision to have termination of the pregnancy.

• As the majority of women were single, students and staying with their parents, the parents would be disappointed if they could know about the pregnancy and the decision to terminate it, hence they were not informed.

• The decision to terminate the pregnancy affected various aspects of the women’s lives in a variety of fashions. The majority of Christians’ relationship with God was positively affected, as these women believe that God will forgive them because He understands their circumstances.

• Due to the emotional implications of abortion, women would rather forget about it and not share the experience with someone. This was
revealed when the majority of women indicated that they were going to work hard, so that they could forget about what has happened.

- The majority of women did not receive any information prior to the procedure, due to the lack of counselling service at the clinic.

- It has been evident that women need to be provided with counselling prior to the procedure because it is not easy for them to come back for post-abortion counselling, as all their efforts are centred around forgetting about what they have done.

- The majority of women believed that counselling prior to the procedure would help them deal better with their decision.

- A large number of women were not satisfied with the service that they received at the clinic, and felt that the service ranged between poor and average. The quality of the service at the clinic is affected by the shortage of staff.

- It is interesting to note that the majority of women who decided to terminate their pregnancies were determined not to do it again, but take the contraceptives more seriously, to prevent other unplanned pregnancies. This indicates that deciding on termination of pregnancy and going through the procedure is not a pleasant experience.

- Due to the shortage of an appropriate team composition at the clinic, women do not see the role of other team members, like the role of the social worker. There is a need to have the necessary team members involved at the TOP clinic, for the women to receive a comprehensive service.

- The need for counselling prior to the procedure, specifically during the decision-making period was indicated by the women, for them to be helped to deal better with their decision.
8.6.3 RECOMMENDATIONS

- Seeing that the majority of the women who request termination of pregnancy are single, it is recommended that they be provided with counselling, to equip them to deal better with the situation.

- It is recommended that the information on the implications of termination of pregnancy be provided to girls as early as possible, to instil the spirit of preventing unwanted and unplanned pregnancies, that are ended by abortions. That must also be focussed at tertiary institutions, because the majority of the women who request termination of pregnancy are the students at tertiary institutions.

- There has to be an emphasis on the utilisation of contraceptives, but of importance is to make the family planning service to be user-friendly to improve compliance on the women, to prevent unwanted and unplanned pregnancies.

- Regarding the minors, it is recommended that the sexuality education be provided at primary schools on a continuous basis, to prevent unwanted and unplanned pregnancies on these minors.

- It is important to have abortion services to be responsive to the women’s needs.

- Counselling prior to the procedure is a need that was expressed by the respondents, as a result it is recommended that it be provided by having social workers as part of the team that renders the abortion service.

8.7 THE QUALITATIVE EMPIRICAL FINDINGS

8.7.1 SUMMARY

Chapter 6 focussed on the qualitative empirical findings and it consisted of the following: a brief presentation of the research methodology, the process after the disappointment with the follow-up of respondents, profiles of the women who request termination of pregnancy, information from the files that were reviewed and case studies to illustrate the psychosocial implications of termination of pregnancy on the women.
This chapter fulfilled the fourth objective of this study: To determine the psychosocial aspects related to termination of pregnancy on the women, specifically after the enactment of the Choice on termination of Pregnancy Act (92/1996).

8.7.2 CONCLUSIONS

- Termination of pregnancy is accompanied by psychosocial implications and women try to deal with these implications on their own.

- Women try their level best to forget about their experience of termination of pregnancy, hence did not come back to the researcher for follow-up.

- Women from all racial groups do request termination of pregnancy at private clinics, depending on their financial background.

- The majority of the women who requested termination of pregnancy at the private clinic were still young and without children.

- Other options were not considered by the women.

- The shock of dealing with an unplanned and unwanted pregnancy motivates the women to be more serious about the utilisation of contraceptives, after the procedure.

- Pre-abortion counselling equip the women to deal with their situation and move on with their lives after the procedure.

8.7.3 RECOMMENDATIONS

- Sexuality education is needed for all the girls as early as possible, to prevent unplanned and unwanted pregnancies in young women.

- Counselling as part of the abortion service needs to be introduced, to assist the women to deal constructively with their situations and be able to move on after the procedure.
8.8 THE GUIDELINES FOR SOCIAL WORK INTERVENTION REGARDING THE ABORTION SERVICE

8.8.1 SUMMARY

Chapter 7 focussed on the guidelines for social work intervention regarding the abortion service, and it consisted of the following: the nature of social work in health care, the role of the social worker in health care, the social worker as a member of the multi-disciplinary team, the bio-psychosocial model, the utilisation of the bio-psychosocial model in abortion counselling and the guidelines for social work intervention at the TOP Clinic.

This chapter fulfilled the fifth objective of this study: To provide guidelines for social work intervention with female patients who opt for termination of pregnancy.

8.8.2 CONCLUSIONS

- The social worker in health care has a variety of roles to play, for the benefit of the patients, and these roles are performed within the multi-disciplinary team context.

- As a team member the social worker has to collaborate with the other members, so that the patients could receive a service that is responsive to their needs.

- The adoption of the bio-psychosocial model at the TOP Clinic will ensure that the women are provided with a comprehensive service, that is responsive to their needs.

- The social worker as the provider of the psychosocial service has to be a full time member of the multi-disciplinary team that renders the abortion service, because no other member could render this service.

- When providing pre-abortion counselling there are specific aspects that the social worker has to focus on, namely, the woman's feelings, the woman's reactions to the pregnancy, the woman's reasons for the decision, other available options, the woman's feelings regarding the decision, providing information regarding the procedure, the woman's
religious background, the woman’s cultural background, the woman’s perception of self, the woman’s relationship with the partner, future planning, family planning, as well as the sharing of the experience in future.

8.8.3 RECOMMENDATIONS

- It is recommended that termination of pregnancy be seen not only as a medical problem, but the bio-psychosocial model be used to provide the abortion service.

- The social worker must be a member of the multi-disciplinary team that renders the abortion service, for the women’s psychosocial needs to be attended to.

- Pre-abortion counselling is strongly recommended to enable the women to go on with their lives after the procedure.

8.9 COMPARISON OF THE FINDINGS FROM THE QUANTITATIVE AND THE QUALITATIVE PHASES OF THE STUDY.

8.9.1 SUMMARY

Both quantitative and qualitative approaches were used in this study, with the quantitative approach dominant and the qualitative one less dominant.

The findings from both approaches were presented in chapters five and six respectively and the comparisons are now presented.

8.9.2 CONCLUSION

- The majority of the women in the sample for the quantitative phase already had children, whilst from the qualitative phase the majority were not yet parents. For those who were not yet parents it could be said that they were still in the process of shaping their careers, and for those who were already having children, they were not ready for an additional responsibility.
• The major reason for having the unplanned pregnancy terminated was the economic circumstances and most women were dependent on someone for financial support.

• The other striking finding for both phases is that adoption was not considered as an option.

• Women from both phases decided to take contraceptives more seriously, to avoid another unplanned pregnancy. It could thus be said that the women were not proud about what they had done, therefore they decided to prevent its repeated occurrence.

• The quantitative phase was much easier to conduct because the respondents were available.

• The qualitative phase was very disappointing, time consuming and due to the topic studied, respondents were not at all willing to participate.

8.9.3 RECOMMENDATIONS

• It would be most beneficial if all the women who request termination of pregnancy are provided with pre-abortion counselling, as it is difficult or impossible to have them for post abortion counselling.

• It is also recommended that the study on the psychosocial implications of termination of pregnancy be undertaken, as this study could not accomplish this aim, as it has already been indicated.

• There is a need to explore the factors behind the high incidence of abortion in a country where the contraceptive devices are provided free by the government.

8.9.4 THE ASSUMPTIONS AND HYPOTHESIS FOR THE STUDY

The assumptions and hypothesis for the study will be subsequently discussed as follows:

• Giving women a chance to make an informed decision with regard to termination of pregnancy, that is, providing them with pre- and post-abortion counselling, would make the experience less traumatic. This assumption has been confirmed by the empirical findings, where the women indicated that they believe that being provided with information would help them deal better with the procedure. (Chapter 5)
Women who opt for termination of pregnancy need to be provided with social work intervention, that is, pre- and post-abortion counselling, to enable them to deal with the long-term implications of their choice. This has been confirmed by the findings where the women indicated that they needed social work intervention during the decision-making period, for them to be equipped to move on with their lives after the procedure. For post-abortion counselling it was not possible to determine its need amongst the women because the respondents could not be found. This emphasises the researcher’s opinion of the importance of pre-abortion counselling.

Although termination of pregnancy is each woman’s choice, it does have negative psychosocial implications. The findings from the qualitative data have confirmed that termination of pregnancy is having psychosocial implications on the women even if she decides on her own to have it. This is aggravated by the reasons that force the woman to decide on termination of pregnancy.

Women who are not provided with a comprehensive service at the TOP Clinic could regret their decision later in life. The literature has confirmed that providing women who request termination of pregnancy with the medical service only, could have devastating effects on their lives. It has also been confirmed by the empirical findings (chapter 6), in the case of a 16 years old woman who was unable to look herself in the mirror, because of what she has done. This indicates that she regretted what she had done, but could not do anything to change it.

If women who request termination of pregnancy could be provided with a comprehensive service then their social functioning could be improved. This hypothesis has been confirmed in chapter 6, through the case study of the 21 year old woman from the East Rand, who received pre-abortion counselling, and was emotionally well after the procedure, and did not regret her decision but was able to move on with her life. It shows that pre-abortion counselling equipped her to deal with her situation without any disruptions.

Based on the findings from this study the researcher strongly believe that there is still a need to have a study on the real psychosocial implications of abortion on the women, through follow-up interviews with the women after
the procedure. The hypotheses that are formulated for further investigation are:

- If the women who request termination of pregnancy are not provided with a comprehensive abortion service then they will end up experiencing emotional problems later in life.
- If termination of pregnancy could be accepted by everybody, then women would feel free to seek the service, without being afraid of any judgement from the family members and friends.

8.10 CONCLUDING REMARKS

Opting for a termination of pregnancy is accompanied by psychosocial aspects, that can destabilise the woman’s life. This calls for an adoption of the bio-psychosocial model by the team that renders the abortion service, for the women to be provided with a comprehensive service that is responsive to their needs. It is not beneficial for the women who opt for termination of pregnancy to be provided with an incomplete service, as this could lead to a situation where the future society would be full of women who are psychologically disturbed.