From the Classroom to the Clinic: A Qualitative Review of Abortion Care Quality in Bogotá, Colombia

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Project Background

• **Decision C-355/2006:** Penal code allowing abortion procedures in cases of threat to a woman’s life or health, fetal abnormality incompatible with life, and rape or incest.
• An estimated **400,400 induced abortions** were performed in Colombia in 2008, of which only 322 were reported as legal procedures¹.
• **2014 GHI Team:** Working off previous research and findings of a mixed methods study exploring barriers and facilitators to seeking abortion services in Bogotá.
• **Partnership:** We worked with Fundacion Orientame, a multidisciplinary team of professionals that provide services and consultation around sexual and reproductive health.

Research Goals

• Explore professional perspectives on what quality of abortion care means and how people are taught to provide abortion care by...
• Understanding provider perspectives on quality of care provided to patients seeking abortion care services in Bogotá.
• Understanding how quality of abortion care is taught in medical training programs available in Bogotá.

Methodology

• **Study Design:** Qualitative semi-structured interviews.
• **Study Population:** Doctors, nurses, and medical educators at hospitals, clinics, and universities in Bogotá, Colombia.
• **Data Collection:**
  • Developed and validated separate interview guides for nurses, doctors, and medical educators.
  • Conducted 30 minute semi-structured interviews at informant’s work site or other location identified by the participant. Interviews were recorded with permission of informant.
  • Snowball referral based sampling used to identify informants.

Preliminary Findings

• Thus far, we have completed preliminary thematic analysis
• Presented here are characteristics of our sample. Below are overarching themes we found in each of our study groups...

Nurses

Professionalism
For all healthcare professionals. Includes respect of patients, avoidance of patient judgment, and following all requirements of the abortion decision.

Information
Accurate information about abortion taught to patients while seeking services and included in nursing and medical education.

Integrated Service
Having an interdisciplinary team assisting women seeking abortion care service with both psychological services and follow-up visits being included as part of patient service.

Empathy and Precaution
All healthcare professionals should provide empathetic and humanistic service to the patient. Extra precautions should be taken to ensure patient anonymity and comfort, including separate waiting rooms and guaranteed pain management services.

Doctors

Medical Training
Most participants received their training to perform abortion care services outside of their medical degree program either with the Secretaria de Salud or on the job.

Support at Work
All doctors expressed feeling supported while at work among their colleagues and coworkers. However, their definition of support was that others did not directly impede their work.

Fundamental Right
8 out of 9 doctors believed that abortion and other reproductive healthcare is a fundamental right of the woman and carried out this passion into upholding high standards of care in their own work.

Knowledge of the Law
All doctors were familiar with the provisions of the law, however they felt that there were providers out there who provide services without such familiarity of the law and subsequently impart incorrect information unto their patients.

Participants

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<th>Public Institute</th>
<th>Private Institute</th>
<th>Religious Affiliation of Private Institute</th>
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<tbody>
<tr>
<td>Doctors</td>
<td>5</td>
<td>4</td>
<td>4 Non Sectorial</td>
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<tr>
<td>Nurses</td>
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<td>5 Non Sectorial</td>
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<tr>
<td>Medical Professors</td>
<td>4</td>
<td>9</td>
<td>1 Jesuit, 1 Catholic, 7 Non Sectorial</td>
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Medical Educators

Curriculum Across Programs:
• Taught on providing high quality patient care.
• Covered law C-355 and abortion methods/techniques (at least the theory).
• Discussed conscientious objection-the right of a doctor to not perform an abortion for personal religious, moral, or philosophical reasons.

Autonomy
Universities can independently decide the content of their abortion and quality of care curriculum.

Patient-Doctor Confidentiality
The ethics of doctor-patient confidentiality should keep doctors from reporting women who solicit abortion care. In reality, some doctors will report women.

Flexibility of the Law
Some doctors that there should be more guidance on how to determine whether an abortion can be performed under the conditions laid out in the law (ex: how to evaluate an abortion is a threat to the woman’s mental health).

Humanistic Care
Doctors must be supported when they perform or are deciding to perform an abortion. Patients must be provided treatment that considers their physical, emotional, and social well-being.

Next Steps

• Continue data analysis
• Synthesize findings to report to Orientame and participants
• Prepare pamphlet in Spanish for Orientame
• Present findings at local conferences
• Prepare manuscripts for publication

Project Partners

• Emory Global Health Institute
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• Cristina Villarreal