

## **Voices of Thai Physicians on Abortion**

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### **Background:**

Induced Abortion is a very sensitive issue and it is illegal in Thailand. Currently, a physician may perform an abortion under only two circumstances. First, when the pregnancy harms woman's (physical) health and second when the pregnancy was the result of raped or incest. To make the matter worse, the ratio of Obstetricians and Gynecologists (OBGYNs) to the population of women of reproductive age is disproportionate. The number of women of reproductive health age in Thailand was 16 million but there are only about 1,700 OBGYNs out of 26,000 Physicians available to serve the entire country. Many of them are not willing to provide abortion services due to the restrictive existing law, personal beliefs or religious reasons. The lack of OBGYNs experts and the reluctance of these physicians to perform the procedure, has caused severe complications and deaths of women from unsafe abortion by non health personnel or quacks.

A nationwide survey on induced abortion in Thailand which was carried out by the Reproductive Health Division (RHD), Department of Health (DOH), Ministry of Public Health (MOPH) and funded by WHO from 1998 to 1999 found that 29 percent of women who had undergone an abortion had severe complications and 0.1 percent died from unsafe abortion. The results of the survey serve as very strong evidence to inform public opinion on these problems. The DOH submitted the findings and recommendations to the MOPH and the Thai Medical Council and called for immediate action. In response, the Medical Council drafted a revised Abortion Law and Regulation on Ethics of Medical Profession regarding Termination of Pregnancy under Article 305 of the Criminal Law in accordance with the recommendations. The drafted Law is now about to be considered by the Decree Committee in order to be passed. Once passed by the committee, the Medical Regulation will be promulgated and enforced in the near future.

Before promulgating and enforcing the Regulation, the Council needed to assess the opinions of physicians on the issue of abortion and gain their support of the drafted Law and the drafted Regulation. Therefore, the Council and the DOH conducted the survey.

### **Objectives :**

1. To study perception, attitude and concern of providers on induced abortion problem.
2. To study perception, attitude and concern of providers on unsafe abortion problem and a draft of "A Regulation on Ethics of Medical Profession regarding Pregnancy Termination under Article 305 of the Criminal Law of the Thai Medical Council".

### **Research Methodology :**

The DOH conducted both quantitative and qualitative study among Thai physicians in 12 regions of Thailand including the capital, Bangkok, from July to October 2003. The survey's tools were developed from the drafts. A Quantitative data was collected by 34 co-investigators from 3,324 physicians and the principal investigator in depth interviewed 40 high-level physician administrators for qualitative data.

**Findings :**

Of the total 3,324 physicians, 57.20% were male doctors. Mostly still practice at hospitals/clinics. 13% were OBGYNs, 30% were General Practitioners and 57% were other specialists. 90.3% of those sampled agreed that unsafe abortion is a major health problem in Thailand that urgently requires a solution. The survey found that one of the causes of unsafe abortion was the existing restrictive law. 86.70% thought that the law was not appropriate to the current social situation and advance of medical technologies. Strict enforcement of the law did not decrease the number of abortions. On the contrary, it led to a reluctance on the part of doctors to provide safe abortion services and forced women to seek unsafe abortions. 73.3% of the doctors said that amendment of the law would solve the problem.

The majority of the doctors agreed with the drafted Law and the drafted Regulation. 82.8% agreed that a definition of the MOTHER'S HEALTH should be clarified to follow WHO's definition which includes both PHYSICAL and MENTAL HEALTH of pregnant women. A good counseling technique is needed for pre and post abortion procedure. More than half of those interviewed (65.1%) agreed that termination of pregnancy could be performed by a doctor following the Law and the Regulation at any week of gestation with consent of the woman and/or her husband. A majority of respondents asserted that informed consent of pregnant women's parents or their husband are needed before terminating the pregnancy if the woman is a minor or legally married (85.4% and 84.2% respectively). For a single adult or unmarried adult, the procedure should require only her decision and consent (82.8%).

80.4% of the doctors agreed that women who were pregnant as a result of rape or incest and have police notification can access to safe, legal abortion without a court process. 85.8% agreed with termination of pregnancy if the fetus has severe disorder(s) or heredity disease(s) after prenatal diagnosis by a specialist with reliable technologies. More than half of those interviewed samples would allow pregnant women access to safe abortion if they have HIV/AIDS, first trimester German-Measles or severe handicaps/mental retardation (58.1%, 62.7% and 68.8% respectively). The respondents were divided as to whether women should be able to terminate a pregnancy in the case of failed permanent contraceptive, undergraduate adolescents and for socioeconomic reasons +(41%, 52.6% and 57% respectively).

However, 80.3% of the doctors said that they should have the right to refuse to perform abortion services if they don't want to do so. To ensure high quality of abortion services, 84.% of the doctors agreed that the services should be performed only by OBGYNs or well trained doctors at public or private hospitals and that private out-patient clinics should not be allowed to provide the services. 25% said that abortion could be safe if it was done at the proper places. 81.3% asserted that abortion services should be registered by the Ministry of Public Health and the providers should report cases to the Medical Council in order to control the quality of the services and to record the number of safe abortion procedures.

**Conclusions :**

The Regulation will shortly be promulgated. The Council needs to advocate public concern on unsafe abortion problem and follow up implementation of the Regulation. The Division is launching a project on safe abortion and post abortion care and counseling in order to enhance the skills of doctors and nurses on the services, to solve problem of inadequate of OBGYN doctors and to increase Thai women's access to safe abortion.

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