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Using medical abortion in Madagascar: a trivialized practice?

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INTRODUCTION

- Madagascar: a context of recurrent political crises, weakened public health system and difficulties of access to healthcare
- Maternal mortality rate 2012: 478/100,000
- Restrictive legislation regarding abortion
- December 2017: law prohibiting therapeutic abortion
- **Complications of abortions:** 2nd and 4th leading cause of maternal mortality in 2010 and 2015, respectively

What does the informal use of Misoprostol (abortion drug) reveal about reproductive life control issues?

METHODS

Anthropological study (2015-16) on women's pathways leading to abortion complications and associated health care seeking in Madagascar

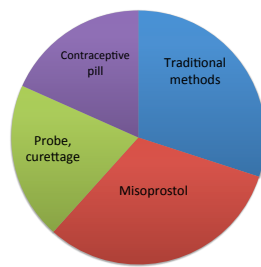
- Objective: analysing women's pathways leading to complication and identifying risk factors for abortion complications
- 2 study areas: Analamanga and Atsimo Andrefana, in urban and rural settings



- 100 semi-directive interviews:
 - 60 women with abortion complications
 - 20 health professionals (midwives, doctors, nurses)
 - 20 traditional birth attendants and traditional healers
- Recruitment of respondents in the general population (and hospital): screening and « snowball » methods

RESULTS

- Reluctance to use modern methods of contraception and difficulty in maintaining contraception over the long term
- **1/3 of women used Misoprostol or Cytotec®** through self-medication, or prescribed by health professionals (private sector) or by "matrons"



Abortive methods

- Misoprostol is **used in varying ways:** number of tablets, dosing intervals, routes of administration (oral, vaginal), stage of pregnancy, use alone or in combination with other methods



- Misoprostol: **high social visibility** and perceived as effective, easy to use, not requiring the intervention of a health actor and easily accessible:
 - Distributed by health professionals (private sector) or informal and formal drug vendors (pharmacies, drug depots), without prescription
 - Low cost

CONCLUSIONS

SOCIAL ISSUES

The occasional use of an accessible abortion drug perceived as safe, effective and banal, constitutes an attractive alternative for Malagasy women because it adapts to their social realities:

- trivialization of self-medication, trivialization of the use of the informal drug market
- women's lack of control and autonomy in managing their reproductive lives
- distrust of contraceptive methods and medication over the long term

HEALTH ISSUES

Risks of serious complications and deaths due to inappropriate use and lack of training/information of health professionals and women

POLITICAL ISSUES

Example of appropriation of a drug by women and professionals in the context of an illegal practice

How, in this context, can women and professionals be given access to information on the appropriate use of misoprostol to reduce risks?



Source: informal market in rural area (including the PiPlan - contraceptive pill)

REFERENCES

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