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The Stigma of Abortion among Adolescent Girls in the Community: A Qualitative Study in North Lampung District, Indonesia

Stigma Abortus pada Remaja Putri di Komunitas: Studi Kualitatif di Kabupaten Lampung Utara, Indonesia

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Keyword:
Abortion stigma; adolescent girls; SABAS; unwanted pregnancy.

Abstract

Introduction: Adolescent abortion remains a contentious moral dilemma in Indonesia. The choice to have an abortion is due to enduring an unwanted pregnancy, despite the stigma of abortion from society. **Purpose:** The study focused on assessing abortion stigma information and attitudes toward abortion among adolescent girls. Methods: Descriptive qualitative study using survey method was the research design. 450 participants from junior high school, high school and university students were recruited. Data were collected by survey technique using a questionnaire adapted from the Stigma Attitude, Believe of Absortion Scale (SABAS). Data were analyzed quantitatively using frequency distribution and qualitatively to evaluate young women's attitudes towards abortion by grouping data and problem trees. **Results:** Participant characteristics 100% had no abortion experience and 88% were not dating, 98% of adolescent girls had a high stigma scale. Stigma content identified included cruelty, stupidity, sin, sad, risk of psychosocial and health problems. Adolescents also expressed positive sentiments related to concern and empathy for women experiencing unfortunate situations, either due to rape or health emergencies. **Conclusion:** Adolescent girls stigmatized the act of abortion and also cared about victims in unfortunate situations. Efforts are needed to make the community understand the stigma of abortion which has a psychological and social impact on adolescents by increasing socialization. It is important for adolescent girls to be educated through sexual education and to prevent unwanted pregnancies and abortions. Family and community empathy for adolescents by providing affection, especially for adolescent girls to have reproductive readiness or safe pregnancy.

Kata kunci:
Kehamilan tidak diinginkan; remaja putri; SABAS; stigma abortus.

Abstrak

Latar Belakang: Aborsi pada remaja masih menjadi dilema moral yang terus diperdebatkan di Indonesia. Pilihan melakukan aborsi disebabkan menanggung kehamilan tidak diinginkan, walaupun ada stigma abortus dari masyarakat. **Tujuan:** Penelitian berfokus pada mengkaji informasi stigma abortus dan sikap menghadapi aborsi pada remaja putri. **Metode:** Studi kualitatif deskriptif menggunakan metode survey meru[akan desain penelitian ini. Merekrut 450 partisipan dari Siswa Sekolah Menengah Pertama, Sekolah Menengah Atas dan Mahasiswa Perguruan Tinggi. Data dikumpulkan dengan teknik survei menggunakan kuesioner diadaptasi dari *Stigma Attitude, Believe of Absortion Scale* (SABAS). Data dianalisis secara kuantitatif menggunakan distribusi frekuensi dan kualitatif untuk mengevaluasi sikap remaja putri terhadap abortus dengan mengelompokkan data dan pohon masalah. **Hasil:** karakteristik partisipan 100% tidak memiliki pengalaman aborsi dan 88% tidak pacaran, 98% remaja putri memiliki skala stigma tinggi. Isi stigma yang teridentifikasi meliputi kekejaman, kebodohan, dosa, menyedihkan, berisiko terjadi masalah psikososial dan kesehatan. Remaja juga mengungkapkan sentimen positif terkait keprihatinan dan rasa empati terhadap perempuan yang mengalami situasi yang tidak menguntungkan, baik karena pemerkosaan maupun kegawatan kesehatan. **Simpulan:** Remaja Putri memberikan stigma terhadap tindakan aborsi dan juga sikap peduli terhadap korban yang berada pada situasi tidak menguntungkan. Perlu upaya memahamkan kepada komunitas tentang stigma abortus yang berdampak psikologis dan social kepada remaja dengan peningkatan sosialisasi. Remaja putri penting diberikan edukasi melalui pendidikan mengenai sexual dan untuk mencegah kehamilan yang tidak diinginkan, melakukan abortus. Keluarga dan komunitas empati pada remaja dengan memberikan kasih sayang, khususnya pada remaja putri untuk memiliki kesiapan reproduktif atau hamil yang aman.

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Introduction

Abortion is a public health issue and a human rights issue. Unsafe abortion results in damage to reproductive organs and even death. The perpetrator may experience mental health and social complications. This is often the case for pregnant teenagers who lack support and even rejection, influencing them to make the decision for unsafe abortion. The majority of unsafe abortions are due to unwanted pregnancies (60%) and 97% occur in developing countries with more than half in Asia, mostly South Asian and Central Asian (WHO, 2021). Abortion has devastating complications for the perpetrator. Abortion contributes to 10-18% of maternal mortality or 330 per 100,000 births, still far above the 2030 SDG goal of 70 per 100,000 (WHO, 2023; Say et al., 2014).

Adolescent girls account for the majority of annual abortion deaths worldwide, with 15% of all unsafe abortions occurring under the age of 20. Adolescence, an important stage in human development, is characterized by significant physical, emotional, and cognitive changes, which can have a profound impact on individuals' decision-making processes, including their views and behaviors regarding sensitive topics such as abortion (Espinoza et al., 2020) Abortion stigma influences adolescents in expressing their decisions regarding abortion and limits social support for them (Minahan et al., 2020). Stigma is a negative social attitude that implies social disapproval and can lead to unfair discrimination and exclusion of individuals (American Psychology Association, 2018). These social attitudes and labels can negatively impact mental health and general well-being (Olivine, 2024). Phenomenological study conducted by Rini (2022) in Indonesia on women who had abortions, found that 10% of adolescents had unsafe abortions by seeking help from illegal doctors/midwives and taking abortifacient drugs/medicine. Komnas Perempuan reported the criminalization of women victims of rape who access abortion services, and recorded 147 cases of forced abortion from 2016-2020 committed by parents, husbands or boyfriends. This reflects that Indonesian society's stigma towards abortion can be a barrier for adolescents to access safe abortion (Komnas Perempuan, 2021).

Studies related to abortion have been conducted previously. The focus of the quantitative study was conducted by (Byrne et al., 2021) on the determinants of preferred and actual location of abortion services, by (Kebede et al., 2021) on the magnitude and determinants of delayed demand for safe abortion services among women seeking abortion services at a tertiary referral hospital in Ethiopia, by (Frederico et al., 2018) on Factors influencing the abortion decision-making process among young women. Another study by (Bazié et al., 2022) on a typology of women's abortion trajectories in Burkina Faso, by (Jayaweera et al., 2018) on women's experiences with unplanned pregnancy and abortion in Kenya, by (Rehnström Loi et al., 2018) on decision-making before induced abortion: a qualitative study of women's experiences in Kisumu, Kenya focused on qualitative studies. This study also focuses on qualitative studies, but takes the phenomena of the problem of abortion stigma in adolescent girls related quantitatively and qualitatively, namely adolescents' attitudes towards abortion stigma in the community. This study is expected to contribute to the evaluation for Health Supervisors to develop Health promotion plans to reduce and change the stigma of abortion in the Community. Therefore, this study aimed to assess stigma and attitudes towards abortion among rural adolescent girls in North Lampung district, Indonesia.

Methods

This study used a descriptive research design. Data were collected using survey method. Data were analyzed using quantitative and qualitative approaches, to find strong relationships between the variables studied. The research was conducted for four months in junior high school, high school, and college educational institutions in a district. The number of samples was calculated using the Slovin

formula with a degree of error (α) of 5%, with the total population plus calculations using the drop out formula, the total sample size amounted to 450 people. Proportional sampling technique was chosen for sampling the study, consisting of 200 Junior High School students, 200 High School students and 50 students from Universities in North Lampung district in Lampung Province Indonesia. Samples that meet the research requirements with the criteria of female students aged 12 - 18 years who have been exposed to the problem of abortion.

The research instrument used 4 sets of questionnaires, namely questions on demographic characteristics, dating experience and abortion experience. The first questionnaire related to the demographic characteristics of the participants, including religion, ethnicity, dating experience, sexual experience, history of unwanted pregnancy, history of abortion, and participating in religious activities. The second questionnaire to measure abortion stigma used an instrument developed by IPAS (2013). The Stigmatizing Attitudes, Beliefs, and Action Scale (SABAS) contains a list of questions that are translated into Indonesian. The SABAS instrument is a questionnaire designed to measure abortion stigma in communities and individuals using a Likert scale with answers of strongly disagree, disagree, agree, and strongly agree. It has three subscales including negative stereotyping (eight items), discrimination and exclusion (seven items), and potential transmission (three items). The scale has been tested and measured which showed alpha coefficients of 0.85, 0.80, and 0.80 for the three subscales, and 0.90 for the full 18-item instrument providing evidence of internal consistency reliability (Shellenberg et al., 2014). The results of the measurement with SABAS are done by giving each answer, the summed results are categorized as high and low stigma based on cutt off points using the median value. High scores as more stigmatizing attitudes and beliefs about women who have abortions.

The third questionnaire to measure dating experiences consisted of open-ended questions to obtain information on experiences in romantic relationships (dating) and participants' opinions about women who have abortions. Participants wrote related to dating experiences, namely expressing feelings related to affection, dead love, and monkey love, dating methods include: joking, sitting close together, kissing, leaning on the shoulder, dating places on social media, school, or at home. The fourth questionnaire instrument to measure participants' experiences related to abortion with answers to write openly, the experience of having an abortion (to whom to ask for help, on whose advice, what you feel) and participants' opinions about a woman who has an abortion.

Data collection was carried out by distributing questionnaires to participants in a private room to maintain confidentiality. Before filling out the questionnaire, participants were given information on how to fill out the questionnaire and had agreed to participate in the study by signing an informed consent form. The completed questionnaire was checked for data completeness to maintain data validity. The data were analyzed using a univariate quantitative approach and presented using a frequency distribution table for the measurement results of the abortion stigma variable. Data on dating experience variables were analyzed qualitatively using mixed explanatory design by Cresswell and Clark (Bandur, 2019). Furthermore, data reduction was carried out, namely removing words that did not have meaning related to the research objectives, coding inductively by grouping phrases that had similar meanings, thus forming a sub-theme and theme. Data grouping was described using a table containing sub-theme and theme categories, while the relationship between interrelated sub-themes and themes was described using a mindmap diagram (Bandur, 2019).

The study has obtained ethical approval from the Health Research Ethics Committee of Poltekkes Kemenkes Tanjung Karang with No.: 312/kepk-tjk/xi/2020: 312/KEPK-TJK/XI/2020. Participants were given an explanation regarding the purpose, potential physical or psychological harm, participant

rights, including refusing to become a participant. The security of data and participant information was maintained by the Research Team. All participants gave informed consent for this study.

Results

Participant Characteristics

The youngest participant was 12 years old and the oldest was 21 years old (mean 14.81 years). The dominant characteristics of participants were junior and senior high school education, place of education in urban areas, general education base, Islamic religion, Javanese ethnicity, not dating, and all participants had never had an abortion (Table 1).

Table 1.
Frequency Distribution Characteristics of Participant Demographics, Dating, and Abortion Experience

Variables	Categorical	Frequency (n=450)	Percentage (n=100%)
Education Level	Yunior High School	200	44,4
	Senior High School	200	44,4
	Higher Education	50	11,2
Education Institution Demographics	Urban	250	55,5
	Rural	200	44,5
Education Institution Base	General	300	66,6
	Religion	150	33,3
Religion	Islam	392	87,1
	Catholic	27	6,0
	Kristen	17	3,8
	Hindu	8	1,8
	Buddhism	6	1,3
Tribe	Java	297	66,0
	Lampung	101	22,4
	South Sumatra	19	4,2
	Sunda	22	4,9
	Batak	10	2,2
	More	1	2,0
Dating	No	398	88,4
	Yes	52	11,6
Abortion experience	No	450	100,0
	Yes	0	0

More in-depth information was obtained from the open-ended questions about experiences and attitudes towards romantic relationships (dating) and the question about attitudes towards women who have had abortions was completed by almost all participants. Almost all participants answered both questions.

The results of the qualitative analysis of the characteristics of the research subjects related to romantic relationships with the opposite sex, termed dating. Two main themes were obtained, namely ways of dating and attitudes towards dating. The theme of how to date consists of sub-themes of risky, medium-risk and low-risk dating. Meanwhile, the theme of attitudes towards romantic dating relationships obtained positive sentiments and negative sentiments. Themes and sub-themes were constructed with regard to the relevance to the possibility of promiscuous sex with the risk of

unwanted pregnancies. There are intersections in the ways of dating among junior high school, high school and university students, namely the use of social media (low risk), going out to eat together (medium risk), and thinking that dating is an encouragement to study (positive sentiment in the attitude theme). These themes are described in Table 3.

Abortion Stigma in Adolescents

Adolescent stigma was calculated and categorized using the SABAS scale. Stigma, which is a negative view of abortion, showed the majority of abortion stigma was negative with a high category (98%) (Table 2).

Table 2.
Categorization of Themes and Sub Themes on Romantic Relationships (Courtship)

Theme	Sub Theme	Junior high school students	High school students	Student
How to Date	Low Risk	Through social media	Through social media	Through social media
			Been introduced to your lover's parents	Always supervised by parents
			Play together and support each other	
			Dropped off at school	
	Medium Risk	Go out to eat together	Go out to eat together	Go out to eat together
		Utilize school hours	Visiting girlfriend's house	Visiting girlfriend's house
		Joke		
	High Risk	Hold hands	Handrails	
		Leaning on the shoulder	Pinching her lover	
		Walk together	Sitting close together	
		Like a brother and sister	Touch	
			Kissing	
Attitude	Positive sentiment	Study encouragement	Study encouragement	College encouragement
		Affection Needs	A mix of sadness, joy and disappointment	Happy to have a girlfriend
			Openness	Being shy to meet your boyfriend
			Honesty	
	Negative sentiment		Wasted experience	Experience is wasted
		Deadly love for your partner	A mix of sadness, joy and disappointment	discomfort due to jealousy/suspicion

Table 2.
Frequency Distribution of Abortion Stigma Categories using the SABAS Questionnaire

Variables	Categorical	Frequency (n=450)	Percentage (n=100%)
Abortion Stigma	High	441	98,0
	Low	9	2,0

The attitudes of the research subjects towards abortion all showed negative sentiments. The main themes obtained were condemnation, suggestions and solutions. Condemnation advice can be seen from the use of the word "should". Researchers found attitudes that showed knowledge related to physical and psychosocial health consequences. In addition, knowledge related to regulations that favor and protect reproductive rights for women was also identified.

The subjects stigmatized abortion as an act that violates religious law, including cruelty, ignorance, and deplorable conditions. They believed that abortion is caused by unwanted pregnancy due to dating, adultery, unpreparedness, and rape. Some of the high school students understood that abortion can also occur in certain health conditions. Furthermore, they also made some condemning suggestions, including behaviors to prevent unwanted pregnancies and behaviors to take responsibility without sacrificing the baby. In addition, abortion is permitted in certain situations such as rape victims and emergency situations (according to religious law).

In addition to the theme of stigma, there are other themes that are interrelated and show cause and effect. To make it easier to understand, the scheme is outlined in the form of a problem tree (Figure 1). The red line shows the negative sentiment, while the green line shows the positive sentiment shown by the teenagers.

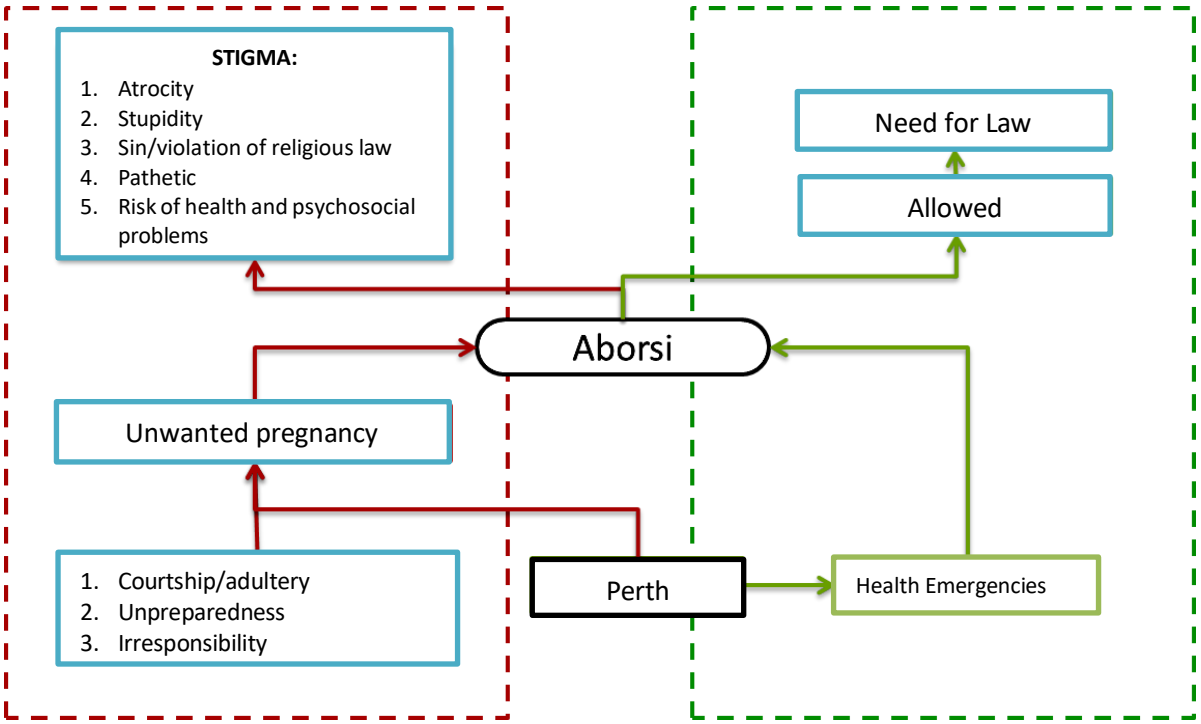

Figure 1. Schematic Interrelationship between Themes on Attitudes toward Abortion

Discussion

Characteristics of Research Study Subjects

This study obtained the stigma of abortion by exposure to the characteristics of the research subjects belonging to adolescent girls. According to Berman & Snyder (2018) that in this period a human being becomes physically and psychologically mature and acquires a personal identity. It can be said, that adolescents are mature enough to express their perspectives by considering based on the knowledge they have acquired. Nurhafni (2022) explained that the higher the knowledge of adolescent girls about abortion, the better the understanding of the meaning, causes, prevention, and impact of abortion. Makleff et al. (2019) revealed that experience can shape or change stigma. Knowledge gained from school, the cultivation of religious values by the family will shape the perspective of adolescents (Savitri & Ramadhana, 2020; Kusumawati, 2021).

The results of this study show that most of the participants attended non-religious-based educational institutions. However, they still received religious lessons in accordance with the religion of the learners. Islamic religious law through the Indonesian Ulema Council stipulates that abortion is prohibited since nidation, but it is allowed in case of emergency and must be carried out in health facilities designated by the government, and is prohibited in pregnancies that occur as a result of adultery (Tama & Ihya, 2023). From a Christian perspective, the Bible prohibits abortion for any reason, including the possibility of birth defects. Abortion is seen as the killing of a human being which is expressly forbidden in the Bible (Sinaga, 2023). The act of abortion is viewed by the Church as criminal, immoral and sinful (Dozier et al.,2020). Hinduism classifies abortion as a sin on par with killing, harming and torturing (Untara, 2020). Buddhism teaches that the act of ending the life of another being, including a baby in the womb, will bring bad consequences to the perpetrator (Sari et al., 2023). Thus, religion makes a major contribution to efforts to prevent abortion and early pregnancy in adolescent girls.

Abortion Stigma in Adolescents

This study revealed that adolescents are highly stigmatized towards abortion, which is a strong label attached to women who have abortions. The content of the stigma included values related to religion and concern. The content of this stigma is similar to that of adolescents in Western Kenya, where 89.9% of participants agreed that a woman who has an abortion has committed a sin (Loi et al., 2018). In accordance with Wijono's explanation that stigma in Indonesia is related to moral, cultural, social, and religious issues. This study shows that adolescents also have the view that stigma has a psychological impact that is felt not only by the abortionist, but also by the family (Yulfianto & Jumaynah, 2016). Stigma and social norms are necessary to control safe abortion (Makleff et al., 2019). This study shows that the existence of stigma about abortion allows adolescents to control their relationships. This can be seen from the absence of expressions about dating behavior that is not too free, such as visiting homes and introducing parents.

The study also identified that younger adolescents expressed a high need for love, physical interaction and were at high risk of premarital sex. Research Qomariah (2020) shows that dating in adolescence has a relationship with premarital sex behavior. Whereas pregnancy outside of marriage is an internal factor that encourages a person to make abortion decisions (Rini, 2022). In addition, information was obtained that adolescents also understand that abortion can be done in certain conditions where pregnant women need health assistance or the threat of psychological problems. This reflects that some adolescents have insight into health and psychosocial impacts. They also suggested the need for government regulation in the form of a law on abortion. In principle, adolescents showed concern for abortion cases as well as empathy for women who had the misfortune of experiencing pregnancy under unfavorable conditions, such as rape and health emergencies. In these circumstances, society also tolerates safe and responsible abortion (Yulfianto & Jumaynah, 2016). The importance of efforts to instill correct knowledge about reproductive health, especially an understanding of sexual development. As the opinion of (Arsalna & Susila, 2021) that lack of sex education and lack of responsibility will increase the tendency of abortion among adolescents. Knowledge needs to be accompanied by religious knowledge so that adolescents have a straight view and create a strong personality (Kusumawati, 2021). The family also makes a major contribution, in the form of sufficient attention, control and affection for adolescents (Savitri & Ramadhana, 2020). Thus, adolescents have a strong fortress so that pre-marital pregnancy can be avoided and adolescents do not need to have abortions.

Conclusion

Adolescents have a high negative stigma towards abortion. In addition to stigma, concern and empathy for women in unfortunate situations, whether due to rape or health emergencies, was expressed. Sex education is important in early adolescent girls, so that they can control their relationships, especially with the opposite sex, and improve their reproductive readiness in carrying out their role as mothers in the future. Thus, unwanted pregnancies can be avoided and abortions prevented. Further research is needed to identify family support or coping for adolescents who experience pregnancy outside of marriage.

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