# STIGMATISATION

# OF TERMINATION-OF-PREGNANCY PROVIDERS IN

# STATE HOSPITALS By Cheryl-Ann Potgieter

n paper, the liberal laws in South Africa are providing women with greater reproductive freedom than ever before. The reality is that the lack of trained professionals, especially in the termination of pregnancies, takes this freedom away from the majority of South African women.

The successful implementation of the Choice on Termination of Pregnancy Act (72 of 1996) is critically dependent on ensuring that there are enough trained termination-of-pregnancy (TOP) providers in state hospitals. Yet, health care providers are reluctant to be trained in this area. Those who choose to be trained experience stigma in the workplace, in their homes, and in their communities.

By the year 2000, only 90 midwives countrywide had completed theoretical TOP training. Of the 90 trainees, only 45 completed their clinical training, and only 31 were active providers of TOP services in 2000. By the end of 2001, less than 50% of designated facilities in the country were providing TOP services because of a lack of service providers.

Why the resistance to training? A recent study involving a small group of men and women (22 black African and coloured TOP providers in state hospitals) who had chosen to be trained, provided

### Reasons given for choosing to be TOP providers were:

- Facilitating access to safe terminations would reduce the number of backstreet abortions;
- The high mortality and morbidity rates associated with unsafe abortions; and
- The consequences of an unwanted pregnancy.

Some saw themselves as "lifesavers", or said that "...no woman can be blamed for a pregnancy" and that "...contraception fails". This

is very different from arguments put forward by anti-termination groups who generally blame women for unplanned pregnancies and believe that women could prevent falling pregnant.

Many of the participants strongly believed that by providing TOP procedures they were assisting women in exercising a fundamental "human right". Some participants said they were providing women with choices and opportunities they themselves never had because of the

stringent abortion laws of the past.

Participants pointed out that terminations were not against their culture, or their religion. All participants identified themselves as Christian and argued that providing access to a safe termination was "what God would have wanted them to do". In their view "Culture changes... Before we used traditional medicine to help women; now we use the modern way".

Experiences in the workplace, however, made their work difficult. They had to endure derogatory labelling by colleagues, such as "serial killers" or "baby killers". Pressure to stop rendering TOPs negatively affected their relationships with colleagues, and the work overload led to burnout and absenteeism, and made it difficult to perform optimally. They complained that they did not get support from top management.

Workplace stress, in turn, affected family relationships. Few had any family support. Young people also feel the burden of secrecy. Some did not want to be seen visiting TOP clinics, and came to visit TOP providers at their homes at night.

### TOP providers recommended the following:

- All designated areas should provide TOP services;
- The Act should be reviewed to allow nurses and midwives to be trained (the Termination of Pregnancy Amendment Bill, 2003, tabled in Parliament in August, allows for this); and
- Hostile managers and staff should face disciplinary action.

### Training programmes should point out that:

- Sexual and reproductive health is a human right;
- Pro-choice argues from a woman's health perspective; and
- Illegal abortions in apartheid South Africa led to high death rates.



In addition, training should expose nurses to opinions of pro-choice church and religious leaders and others with prochoice views; supportive people from the community should assist in educating hostile community members; and traditional healers in favour of termination should assist in training. •

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