

#ICFP2018

Women's Experiences and Perspectives on Postabortion Care and Voluntary Postabortion Family Planning at Public Facilities in Dakar, Senegal

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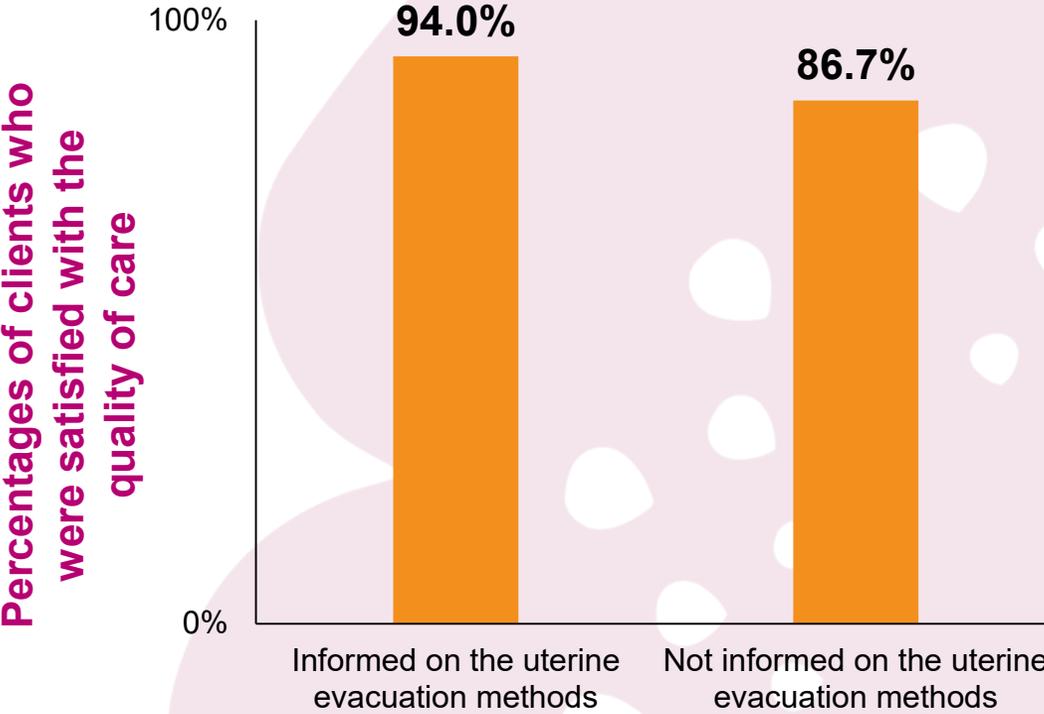
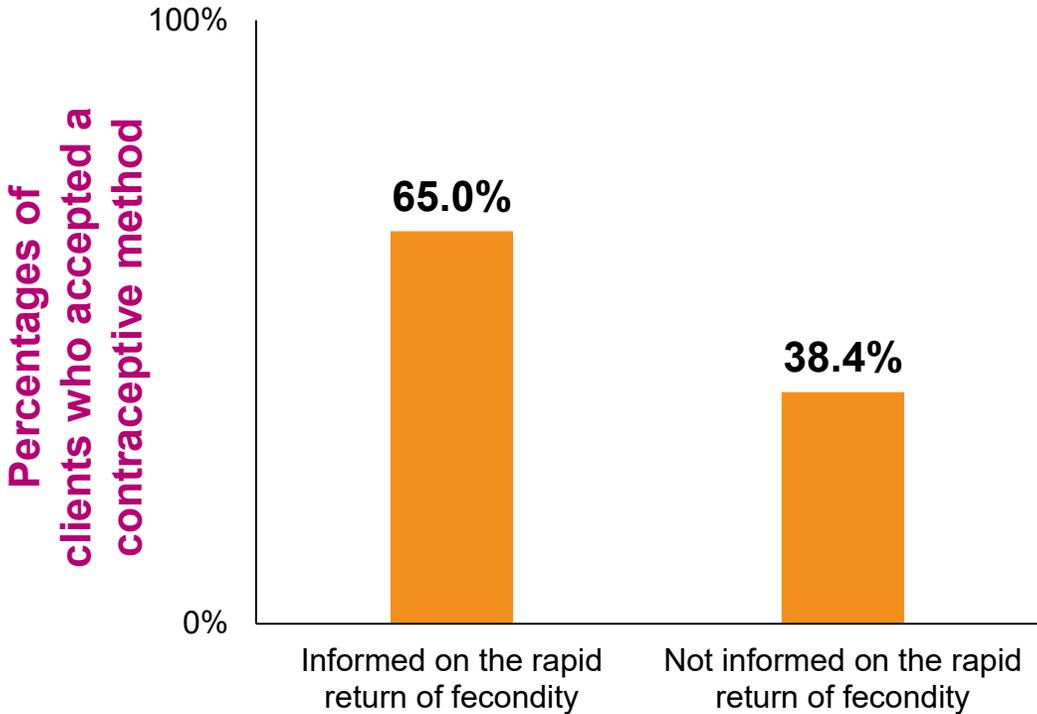


Significance & Methodology

Client Perspectives on Quality

The maternal mortality rate in Senegal is 315 of every 100,000 births. While annual estimates of abortions and related complications are as high as 16 per 1,000 women in Senegal, they are even higher in Dakar, at 22 per 1,000 women. Postabortion care (PAC) was introduced in Senegal in 1998 and integration of voluntary family planning (FP) into PAC service delivery has been expanded in recent years to address maternal mortality rates. This project sought to examine clients' experiences and perspectives to improve PAC, including FP. The project employed quantitative exit interview questionnaires and qualitative in-depth interviews at eight facilities in Dakar to obtain this information.

Results/Key Findings



Program Implications/ Lessons Learned

- Voluntary contraceptive uptake among PAC clients in Senegal remains low, at 48.5%.
- Clients' perceptions regarding quality of care for PAC is directly related to:
 - Client experiences and aspirations, including prior use of voluntary FP methods and interest in becoming pregnant
 - The context of the abortion, including the client's age and occurrence of complications
 - Provider-client interactions, including information provided on uterine evacuation methods, return of fertility, and voluntary FP methods as well pain management support, waiting time for services, and opportunities to ask questions
- Improving quality of care is critical to increasing voluntary postabortion FP uptake in Senegal.