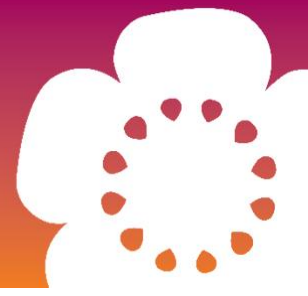


Understanding Young People's Expectations about and Experiences with Abortion Care Access in Benin



Country Context

Girls and women aged 10 to 24 represent nearly one-third of the population (31.7%) in Benin and there is a significant unmet need for sexual and reproductive health (SRH) information and services across the country (UNFPA n.d.). According to the most recent Demographic and Health Survey, 20% of girls ages 15 to 19 have engaged in sexual activity, 15% have given birth, and 5% are pregnant with their first child (INSAE and ICF 2019). Further, the proportion of women who have engaged sexual activities increases rapidly with age, from 15% at age 15 to 59% at age 18, the age at which 25% of girls have already given birth (INSAE and ICF 2019). Stigma related to abortion, especially for young people, and limited access to safe abortion care, create situations in which young people resort to seeking unsafe abortion care, which is a leading cause of maternal mortality. In Benin, unsafe abortions result in approximately 15% to 20% of maternal deaths, which are estimated at 397 deaths per 100,000 live births (IPAS 2020). In 2021, to reduce unsafe abortions and related maternal deaths, the government of Benin amended the national SRH law (Law No. 2003-04) to increase access to legal, safe abortion care and to regulate the practice of voluntary termination of pregnancy (SGG Benin 2021). This progressive amendment authorizes an abortion for up to 12 weeks, at the request of the pregnant person, when the pregnancy is likely to aggravate or cause educational, material, moral, or professional distress—thereby expanding access to legal, safe abortion care. Building upon this policy shift, SRH stakeholders have begun mobilizing to support increased access to high-quality abortion care, including by conducting values clarification and attitude transformation sessions, training healthcare providers, and facilitating access to critical abortion equipment and medications.

Project Approach

With funding from the William and Flora Hewlett Foundation, EngenderHealth is implementing the [Accelerating Progress Toward Making Safe Abortion Care Accessible program](#) in collaboration with the Ministry of Health in Benin and local organizations. Through these partnerships, we are strengthening the SRH knowledge and decision-making power of girls and women, raising community awareness and acceptance of safe abortion care, and supporting the development of training and communication tools that are critical to effectively expanding access to safe abortion care. Key project interventions include organizing values clarification and attitude transformation sessions to help healthcare workers overcome personal biases related to abortion, providing technical and financial support to local partners (including youth-led and feminist organizations) to support advocacy efforts related to safe abortion, advocating for evidence-based national SRH guidelines and standards, and continuously monitoring and evaluating the impact of project activities on abortion access and acceptance to inform improved approaches.



SRH Camp: Young People Learn about and Assess Quality of Care

In August 2023, in alignment with International Youth Day, EngenderHealth collaborated with the Beninese Association for the Promotion of the Family (the national member of the International Planned Parenthood Federation) to support 300 young people from local youth- and women-led organizations in Natitingou (a city in northwestern Benin) in gathering for a week-long life skills and SRH camp. At the camp, the project worked to strengthen the autonomy and capacity of young people to ask for and access health services (including safe abortion care), while also ensuring that local health facilities and pharmacies were able to offer services and products responsive to the SRH needs of young people. As part of this activity, we facilitated a group discussion around SRH care, including particularly youth-friendly services, and identified four key aspects of high-quality care (see Table 1). Then, we identified 12 volunteers (6 young women, 6 young men—ages 15 to 24) to visit five local pharmacies and the area hospital in pairs and record their experiences accessing contraceptives and abortion-related services.

Table 1: Aspects of High-Quality SRH Care Identified by Young People

Topic	Explanation
Attitudes and professionalism	General attitudes of providers and auxiliaries and the level of professionalism, including how sensitive issues are managed and the respect given during the interaction
Customer service and reception	Respect from providers and auxiliaries, promptness in identifying client needs, and willingness and ability to provide information about products and services requested
Knowledge of products and services	Awareness of providers and auxiliaries about available products (including medications) and services, as well as the competence, availability, and willingness of staff to provide useful information
Privacy	The extent to which providers and auxiliaries manage client confidentiality and privacy

After completing the site visits, the 12 volunteers shared their experiences and assessments of the quality of care (based on the aspects outlined above) via WhatsApp voice and through a plenary presentation attended by the rest of the young people participating in the camp as well as select health facility and pharmacy managers from the area. In addition, three camp participants with a passion for art volunteered to illustrate the stories shared to capture the experiences visually (see Figure 1). Using the WhatsApp voice recordings, the illustrators drafted initial designs, presented the drafts to the group who completed the site visits for review, and then adjusted and finalized the illustrations. We then shared these illustrations with city authorities and health institutions and facilitated dialogues around the challenges that the young people experienced during the site visits to improve the quality of care for young people in the future. Participants expressed that using art in this way facilitated awareness-raising, improved interpersonal communication, and encouraged transparency and accountability in their conversations with healthcare workers.



Figure 1: Illustrations of Young People's Health Service Experiences



Highlights from the Experiences of Young People

The 12 young people who visited the pharmacies and the area hospital interacted with a mix of female providers—including pharmacy assistants, midwives, and nurses—and provided feedback on the previously identified areas of quality of care based on those interactions.

Attitude, Professionalism, and Privacy

Young people reported that few health professionals demonstrated confidentiality and that they experienced a lack of professionalism at some of the pharmacies. For example, one pharmacy assistant was dismissive when a young person asked for a condom. Further, when the pharmacy worker repeated the request, the young person sensed that other customers in the pharmacy overheard the request and negatively judged the young person. “When we asked for a condom, the assistant called out her colleague’s name, saying loudly, ‘Bring here a condom!’” The youth also cited challenges paying for the condom, with the cashier stating that they would not receive any change. However, other young people recalled positive experiences with staff who behaved professionally, including by directing them to a special designated area within the pharmacy to ensure confidentiality and for providing advice discreetly.

Customer Service and Reception

The young people reported experiencing varying reactions from healthcare professionals when seeking SRH care. Most felt that the pharmacy assistants demonstrated disapproval when asked for condoms, emergency contraceptives, or Miso-Fem® (medication for abortion). The young people also reported sometimes feeling misunderstood and judged. “When we entered the pharmacy, an auxiliary greeted us and asked what we wanted. I said we wanted a Miso-Fem. She was silent for a moment... Then she said: we don’t sell this kind of medicine without a prescription! When we presented her with the prescription, she read it and went back to show it to her colleague, and they both laughed.” Yet, some of the young people noted that some of the health professionals welcomed them warmly.

Knowledge of Products and Services

The young visitors shared that all the healthcare workers they encountered were generally aware of the products and services requested. One pair of young people noted that the pharmacy auxiliary who helped them demonstrated a thorough knowledge of emergency contraception and provided a clear explanation of how to use the method. Another pharmacy assistant took the time to discuss emergency contraceptive options, offering and explaining the different choices available. “Once at the pharmacy, we asked for an emergency contraceptive. The auxiliary asked us if we wanted a 24- or 72-hour pill. She listened to us calmly and explained how to use the product and provided advice as well.” At one pharmacy, a young pair described that staff expressed their inability to provide Miso-Fem without a prescription (in compliance with the legal requirement for this type of medication) but provided a referral to the nearest health center where the pair could access care, including a prescription. However, there were also negative experiences. As noted above, in one pharmacy, the staff initially refused to sell Miso-Fem, asserting that the product was not sold there, yet, when pressed, the staff reluctantly said that it is available with a prescription.

Conclusions and Next Steps

The varying experiences of young people during the pharmacy and hospital visits underscores the importance of training healthcare workers in providing youth-friendly SRH services, including confidential, comprehensive, respectful, and unbiased contraception and abortion care. Ensuring high-quality, youth-friendly care is critical for ensuring access to and uptake of safe abortion care in line with the recent SRH legal amendment.

When young people shared reflections from their experiences with healthcare workers, using the illustrations to facilitate conversations, the latter was able to recognize the importance of welcoming young customers and providing confidential access to SRH information and products, including abortion medication. Through this activity, we identified a need to foster a culture of customer feedback to support high-quality health service provision and demonstrated the value of using art as a medium to initiate conversations with healthcare officials and staff and to advocate for youth-friendly SRH care.

Although this exercise was conducted in the small municipality of Natitingou, it reflects the challenges faced by many girls and young women seeking SRH information and services, including safe abortion care. This exercise thus highlights the need to ensure providers, especially pharmacy assistants, are sensitized to needs of adolescents, as well as the need for adolescents to be able to provide feedback to healthcare workers and managers to promote high-quality care for young people.

As a result of this activity, to address the identified challenges faced by young people and to increase young people's access to SRH information and services, EngenderHealth supported the National Order of Pharmacists of Benin in identifying and sensitizing 169 auxiliaries from 84 pharmacies from across the country on the rights of young people to access safe abortion care in the context of new amendment to the SRH law. Next, the project plans to strengthen this partnership by sensitizing additional pharmacy workers and identifying SRH focal points within allied pharmacies to be trained to welcome and guide young people seeking SRH services, including safe abortion care.

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Acknowledgements

EngenderHealth is grateful for the partnership of the Benin Ministry of Health, the Benin Feminists' Network, the National Order of Pharmacists of Benin, the National College of Obstetricians and Gynecologists of Benin, and the Beninese Association for the Promotion of Family Planning for their collaboration through this project. EngenderHealth deeply appreciates the participation of the 300 young people from local youth- and women-led organizations, without which this brief would not be possible. We also thank our colleague Hermine Bokossa for her efforts in planning this activity and Murielle Sekloka for documenting the WhatsApp audios recordings. Finally, we also wish to thank the William and Flora Hewlett Foundation for supporting implementation of the project.

Suggested Citation

Nassirou, M., Aguilera, A., Garfinkel, D., O'Connell, K. Ly, M., and Agarwal, A. 2024. *Understanding Young People's Expectations about and Experiences with Abortion Care Access in Benin*. Washington, DC: EngenderHealth.