

The Psychological Situation of Young Women With Abortion

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Abstract

According to the World Health Organization (WHO), unsafe abortion due to unwanted pregnancy, performed by someone who does not have the skills or does not meet medical standards has an adverse effect on the physical and psychological health of adolescent women. Psychological problems can also occur in adolescent women who have unsafe abortions such as psychological disorders in the form of depression and anxiety. Method: In reviewing the article using the Arksey and O'Malley methods. Overall, the researchers showed that unsafe adolescent abortion practices significantly affected adolescent psychology after having an abortion. The majority of young women experience psychological problems after having had an illegal abortion.

Keywords: *depression; anxiety; stress; support*

INTRODUCTION

Adolescence is a transitional period marked by physical, emotional and psychological changes. Adolescence, which is between the ages of 10-19 years, is a period of maturation of the human reproductive organs, and is often called puberty. Adolescence is a transitional period from childhood to adulthood (Animaw & Bogale, 2014). In Indonesia in 2013, the number of free sex among adolescents aged 10-14 years reached 4.38%, while at the age of 14-19 free sex reached 41.8% and less than 800 thousand adolescents had abortions every 5 years (Dewinur, 2018). The adolescent women who had unsafe abortion in this study were aged (15-24 years), this causes the most major health problems for their reproductive systems. Worldwide, 25 million unsafe abortions (45% of all abortions) occurred annually between 2010 and 2014 and the prevalence in low- and middle-income countries is 97%. According to the World Health Organization (WHO), unsafe abortion due to unwanted pregnancy, performed by someone who does not have the skills or does not meet medical standards has an adverse effect on the physical and psychological health of adolescent women (Boah *et al.*, 2019).

In addition to physical complications and death, psychological problems may also occur after the abortion, from a psychological perspective, especially adolescent

women will feel guilty which can harm themselves, such as psychological disorders in the form of depression and anxiety (Shahbazi, 2012). The adolescent women in the study who had had unsafe abortions showed more psychological distress after several months of having the abortion. This shows that individuals who have an intentional abortion have an adverse effect on their psychological development (Jacob et al., 2017). According to research by Sham et al. (2010) found that about 10% of patients had depression and 1% had anxiety disorders several months after having an abortion. The risk factor for depression is young age. Research by Farren et al. (2016) corroborated these findings, because depression and anxiety were very high one month after having an unsafe abortion. The adolescent women in the study who had had unsafe abortions showed more psychological distress after several months of having the abortion. This shows that individuals who have an intentional abortion have an adverse effect on their psychological development (Jacob et al., 2017). According to research by Sham et al. (2010) found that about 10% of patients had depression and 1% had anxiety disorders several months after having an abortion. The risk factor for depression is young age. Research by Farren et al. (2016) corroborated these findings, because depression and anxiety were very high one month after having an unsafe abortion.

Pre-abortion mental health affects coping with the abortion experience (Steinberg et al., 2016). Abortion outside the medical standard is associated with the risk of moderate to severe psychological problems such as depression, alcohol use, anxiety and suicidal thoughts because of feelings of guilt (Kulathilaka et al., 2016). Abortions that are not performed by medical indications cause physical, psychological, social and economic problems in a woman's life. Physical problems include bleeding, cervical laceration, uterine perforation, infection, endometritis, endoparametritis, and thrombophlebitis. Depression, anxiety, hopelessness, and guilt can be experienced as psychological problems by women after an abortion. Anxiety and depression are among the psychological problems experienced by women after abortion and are the most common symptoms (Akdag et al., 2019).

RESEARCH METHODS

This review uses a methodology for clustering reviews as suggested by Arksey and O'Malley'. The stages carried out in a scoping review consist of: (1) identifying the scoping review question, (2) identifying relevant articles, (3) selecting articles, (4) charting data, (5) compiling, summarizing and reporting the results (Arksey & Malley, 2005).

1. Identify the scoping review question

a. General purpose

- 1) What is the psychological condition of young women who have had abortions?

The scoping review question is based on the phenomenon to be studied. To compile scoping review questions, you can use the PEOS framework.

The use of PEOS helps to identify key concepts in the focus of the question, develop appropriate search terms to describe problems and define inclusion and exclusion criteria. PEOs are used to identify elements of qualitative research questions (Simon, 2013).

P (Population)	E (Exposure)	O (Outcomes)/T (Themes)	Study Design
Young lady	Abortion	- Depression - Stress - Worried - Support	All research / research designs related to adolescent women with abortion

- a. Special purpose
 - 1) This is to determine the psychological problems experienced by young women with abortion
 - 2) To find out the form of support needed by young women who perform abortion
- 2. Identify relevant articles**

After identifying the scoping review questions the researcher will identify the relevant articles.

 - a. inclusion and exclusion criteria

Inclusion criteria:

 - 1) Published in Indonesian and English
 - 2) Published from 2010 to 2020
 - 3) The article discusses psychological support and symptoms affecting young women who have abortions
 - 4) The article discusses the form of support needed by adolescent women who have had an abortion
 - 5) Original article
 - b. Exclusion criteria:
 - 1) Opinion articles
 - 2) Review articles
 - 3) Publication Manuscripts
 - 4) An article that examines the impact of abortion on reproductive health
 - c. Literature search

Literature searches from Pubmed, Wiley, Sciencedirect and ProQuest. The MEDLINE database, which can be accessed via the internet, Pubmed, Wiley, Sciencedirect and ProQuest, adopts a strategy that involves searching research evidence through a variety of relevant sources (Arksey & O'Malley, 2005).
 - d. Literature search strategy

The strategy for achieving this is to adopt a strategy that involves searching research evidence through a variety of sources from electronic data to search for existing articles, relevant organizations and conferences. The search strategy for electronic databases is developed from research questions and defines relevant key concepts (Arksey & O'Malley, 2005).

3. Article selection and article selection

The following is the Prism Flowchart in this scoping review:

a. Prism Flowchart

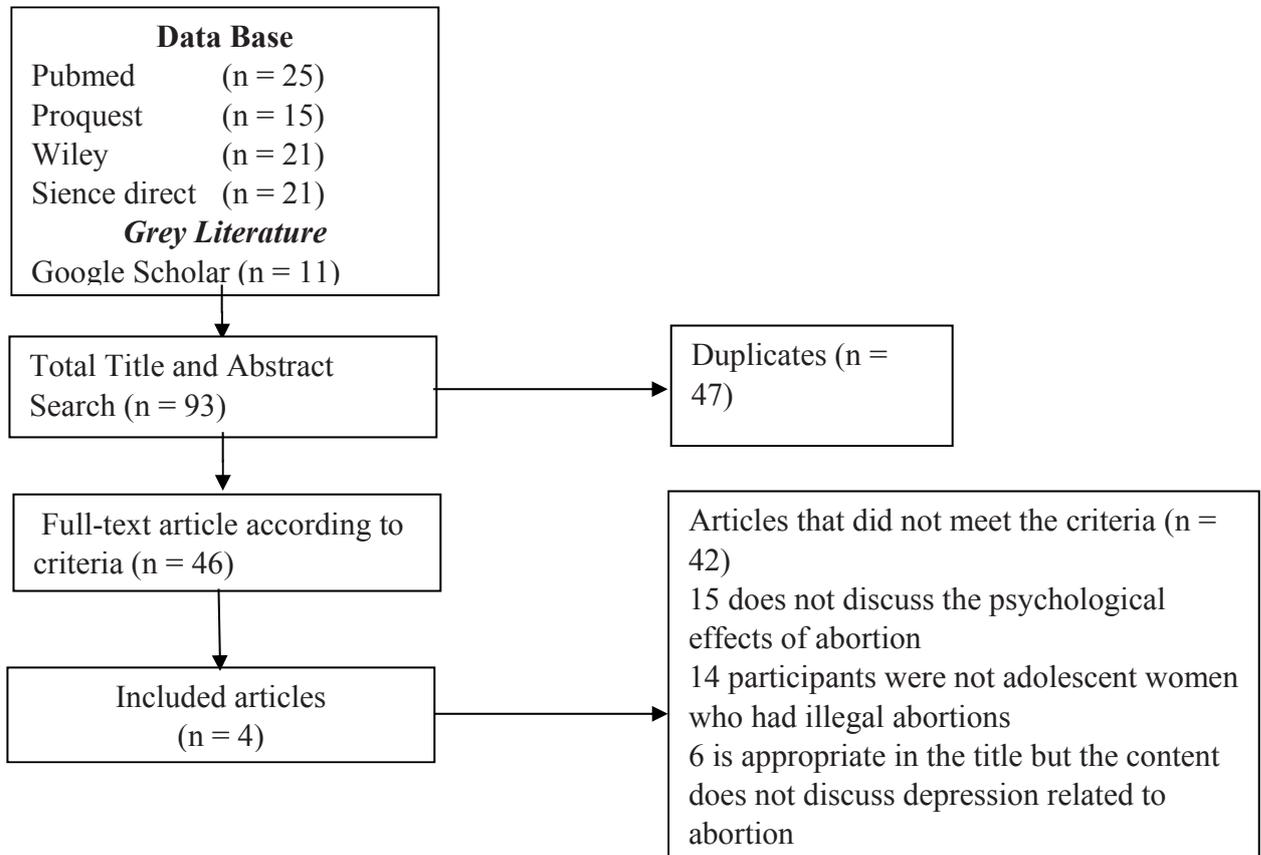


Figure 1. PRISMA diagram

1. Data Charting menggunakan freamework MMAT

a. Ekstrasi Data

Tabel 1.1 Ekstrasi Data

No.	Title / name of researcher / year	Research sites	Destination	Research design	Data Collection	Collection and Sample Researchers	Research result	Comments About Article Ratings	Skor
1.	<i>Women's demand for late-term abortion – A social or psychiatric issue?</i> (Nikolić, Samardžić, & Krstić, 2014).	Serbia	In order to compare sociodemographics, psycho logical characteristics and reasons were claimed for abortion	Qualitative study	Semi-structured interview	62 pregnant women	The results obtained are the low education of young women so that they tend to perform abortion, besides that young women who do abortion experience nightmares, depression, stress, hopelessness, helplessness, fear and anxiety, and lack of support from family.	The limitation of this research is that the data collection method is not clearly explained, so that the data sources, data collection and interpretation are incomplete.	20/28
2.	<i>The consequences of unsafe abortion</i> (Shahbazi, 2012)	Iran	To illustrate the consequences of illegal abortion	Qualitative study	Semi-structured interview	27 participants who performed illegal abortion	The results obtained were the lack of knowledge of young women about the consequences of abortion, besides that young women who performed abortion experienced nightmares, were more often angry, and did not get support from their families and	This study is appropriate because it has explained the data collection method, the findings of the researchers have been good, but the limitations of this article on how to recruit participants are not explained and the interview guidelines are not well structured.	22/28

3.	<i>Abortion, substance abuse and mental health in early adulthood: Thirteen-year longitudinal evidence from the United States/</i> (Sullins, 2016)	USA	To determine the relationship between unwanted pregnancy and mental health problems in adolescent women in the United States, as well as to determine the risk in adolescent women who have unsafe abortions.	Kohort	Indept Interview	8005 women	a teenage woman has an abortion. Abortions performed outside of medical standards have consistently been associated with an increased risk of mental health problems.	In this study, the researcher did not explain non-experimental research to give questions to respondents about the consequences of abortion.	18/28
4.	<i>Psychological Problems Sequelae in Adolescents after Artificial Abortion/</i> (Vesna,2012)	Bosnia and Herzegovin a	To assess the psychological health of young women who have abortions.	Case control study	Questionnaire	120 adolescent women aged 17 years	1. The majority of young women experience trauma after having an abortion 2. In this study, it was found that adolescent women experience anxiety, depression, experience nightmares after they have had unsafe abortions and even feel guilty and sad.	A limitation in this study is the absence of information about previous psychological states.	26/28

b. Article Assessment Tool

After the article selection process, all the articles that have been selected are then reviewed and critical to find out the quality of the selected articles. The critical assessment tool that researchers used was the 2018 version of the Mixed Methods Appraisal Tools (MMAT). Researchers used the most common types of study methodology and design (Hong et al., 2018).

c. Article Quality Assessment

Based on the results of the quality assessment of articles using Mixed Methods Appraisal Tools (MMAT), there are [4] articles with the best quality, namely articles [4] with a score of 26/28, the average score in articles [2] with a score of 22/26 and the lowest article [3] with a score of 18/26.

d. Compile, summarize and report results

Arksey and O'malley (2005) state that there are 2 ways to present the results of the scoping review, namely, first to make a basic numerical analysis of the level, nature and distribution of the studies included in the review which results in mapping tables and graphs in the form of geographic distribution of studies and recipient groups. the different treatments, the various interventions included in the review, the research methods adopted and the effectiveness measures used. This section of the analysis describes the dominant research areas in terms of types of intervention, research methods and geographic location. In the second way, the literature is organized thematically, according to the different types of intervention. This is another difficult and time-consuming activity because there is great variability and / or overlap between reports such as the descriptions of some interventions are insufficient and author definitions are not always consistent. The type of intervention is the main unit of analysis and the final literature review report

RESULTS AND DISCUSSION

Based on the 4 articles included, there are 3 syntheses in the form of grouped themes, namely, psychological disorders, symptoms and factors that influence the decision to take abortion.

1. Psychological Disorders (n = 4)

Based on articles [1,2,3 and 4], it was found that young women who had abortions experienced stress, depression with their lives and trauma.

a. Depression (n = 3)

Depression is a mental disorder that generally often occurs in someone who has mental disorders. Symptoms that often appear in someone who is depressed are loss of pleasure or unhappiness, frequent feelings of guilt, difficulty sleeping, decreased appetite and always feel less concentrated in doing various things (Dianovinina, 2018).

The level of depression and grief among adolescents who have abortions outside of marriage is higher than that of married adolescents. This is because they are emotionally immature [2]. The chances of developing depression in adolescents increased 17 times compared to adult women. lack of support from the closest people who must always provide physical and psychological support [3]. The risk of depression among adolescents who have abortions is very consistent. Abortion has a big point and is detrimental to the mental health of adolescents, abortion allows stress and life trauma for some adolescents. Even depression affects teenage lifestyle such as drug abuse and alcohol consumption [4].

This statement is in line with (Coleman, 2011) that young women experience psychological disorders after having an abortion. Meanwhile, according to (Belton, et al 2010), it shows that psychological problems such as depression occur in some women and most girls.

b. Stress (n = 2)

Adolescent women who have an abortion experience significant stress. Symptoms that usually appear are nightmares, feeling that they are isolated from the social environment, reduced closeness to those closest to them, difficulty concentrating in doing various things and often feeling overly alert [3]. This study states that adolescent women who experience stress are caused by fear if the authorities know what they are doing [1]. This research is supported by (Fauziah, 2016) that there are several symptoms that can be seen to determine the stress being experienced by adolescents, namely (1) Physical symptoms, including headaches, high blood pressure, heart disease or heart palpitations, difficulty sleeping, gastric pain and so on; and (2) Psychological symptoms, namely, among others, restlessness or anxiety, inability to concentrate on studying, frequent daydreaming, indifference, pessimism, always gloom and so on.

2. Symptoms experienced by young women with abortion (n = 4)

symptoms that arise suddenly in them after having an abortion because they don't want the baby they are carrying. Not only that, they feel often haunted by guilt and never forget the actions they have done. [1,2,3,4]

a. Anxiety (n = 3)

The anxiety that adolescents feel is a feeling of constant fear of the dangers that seem to threaten them, which is not real but only in their feelings [1]. Their sadness and moral burden always think that what they have done will be obeyed by the people around them and think their friends will stay away from it [3]. Adolescents who had an abortion had a significantly higher significance of anxiety than adolescents who did not have an abortion [4]. Most abortion aborters will experience levels of anxiety above normal, because they have a moral burden and find it difficult to get along again, because they always think that the actions they have taken by the people around them will stay away from them (Curley & Johnston, 2013).

b. Nightmare (n = 3)

Apart from adverse physical conditions, adolescent girls who have abortions also face psychological problems, they usually need time to forget the bitter memories of the abortion and overcome their guilt [1,2,3].

c. Phobia (feeling scared) (n = 1)

Another symptom that appears in post-abortion adolescent girls is phobia, which is fear of people. Those who have had an abortion tend to be more closed off to people around them, they prefer to be alone than having to hang out with their peers [2].

3. Factors that influence the abortion decision.

There are many factors that help in the process of handling adolescents who experience unwanted pregnancies including support from people around them, previous self-concepts, personal strength and professional healing from the legal and medical systems (Dunmore et al in Handadari, 2011).

a. Support from closest people (n = 2)

Based on articles [1 and 2] it shows that the reason young women get pregnant outside of marriage to have an abortion is because there is no support from their families and their partners. In the same study also conducted by (Dakkak W, 2017), in her research, it was revealed that the lack of support from the closest people, especially family and sexual partners, has an impact on the achievement of abortions that are performed outside of medical standards in unmarried adolescent women. Meanwhile, they need both physical and psychological support.

b. Health worker support (n = 1)

The reason adolescent women do not want to have an abortion with health workers is because they are afraid that they will not be given good services by health workers in the hospital. However, one of the obstetricians in charge of the gynecology ward, denied this and said that such reactions were rare, if they did they were only to warn women to be more careful [2].

Therefore, adolescents tend to carry out the act of abortion by themselves, such as consuming certain drugs or ingredients that are not allowed for pregnant women, such as black sticky rice water, ground meica, herbs sprites, sprite mixed aspirin, etc. The teenager asks the shaman for help by performing a massage on the uterus so that the fetus is released with the effects of extreme pain. This action is usually modified with potions or in some cases with the help of magic (Wijayati, 2015).

The majority supported abortions that were performed 'when the woman and her health care team decided it was necessary'. This suggests that most societies accept that women and their health care providers are best placed to make these decisions, within the legal, policy and ethical frameworks that govern and govern health care. Overall, these results suggest that many communities agree that abortion is normalized as health care, with the protection and accountability required by this status (Cations et al., 2020).

c. Economics (n = 2)

Poor financial situation causes adolescents to be unprepared for having children because they are worried about caring for children with weak financial conditions [1]. The poverty status of the family is a factor triggering the decision to have an abortion [3]. Young people who are less well off economically and they have men who are not supportive with their pregnancies are at a higher risk of having unsafe abortions (Yogi, K.C, & Neupane, 2018). This study shows that teenage pregnancy can also have a negative impact on the socioeconomic effects of teenage fathers. Although there are several ways to avoid it. Being a parent during adolescence, the use of abortion to end pregnancy is one mechanism that has not been widely studied (Everett et al., 2019).

d. Education (n = 2)

Lack of knowledge about sex can lead to unwanted pregnancies at an early age, consequently can lead to unsafe abortions and lead to increased risk of death [1]. According to (Rinta, 2015) fundamental changes in sexual and reproductive attitudes and behavior among adolescents have become one of the social problems that trigger public concern. One result of these changes is the high rate of pregnancy outside of marriage among adolescents. These problems relate to the lack of support from teachers, inappropriate facilitators, and underdeveloped materials. This is the reason for teenagers to have an abortion, in addition to the lack of support from those closest to them, educational issues are also a major factor in having an abortion. [3]. Unwanted pregnancies are more common among unmarried adolescents, most of whom say they have never used contraceptives to prevent pregnancy in themselves. In general, adolescents who have an abortion without medical indication are those who have a low level of education to find out the bad effects of having an illegal abortion (Bellieni et al., 2012).

CONCLUSION

A. Conclusion

Based on a review of four papers, it was found that disorders that affect the psychological state of adolescent girls who undergo abortion, such as depression and trauma. Symptoms that arise in young women include nightmares, anxiety and fear. Meanwhile, factors that influence young women to have an abortion are the lack of support from their families and health workers.

B. Research gap

In the articles that have been reviewed, the role of teenage friends, health workers and families has not been found to provide support for young women who have had abortions. So it is necessary to research the role of teenage friends, family and health workers in the form of providing support both physically and psychologically

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