

Improving the quality of sexual and reproductive health and rights (SRHR)
through pre-service training, research, and evidence-based clinical care
delivery in Sub-Saharan Africa



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Perspectives of adolescents and key stakeholders on safe abortion practices among adolescent girls in Rwanda

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Abstract

Background: An estimated 25 million unsafe abortions take place every year, resulting in about 47,000 maternal deaths around the world. Unsafe abortions lead to an estimated 7 million complications; That number rises to 220 deaths per 100 000 unsafe abortions in developing regions and 520 deaths per 100 000 unsafe abortions in sub-Saharan Africa. Rwanda has made significant changes in Ministerial Order No.002/MoH/2019 on 8 April 2019, which outlines the conditions to be satisfied for a medical doctor to be able to approve and provide safe abortion care –a major step forward legally. But still unsafe abortion cases from traditional herbal are being reported.

Methods: A descriptive phenomenological study was conducted from 2022 to 2024. Twelve focus group discussions among in-school and out-of-school adolescents aged between 12 to 19 years within 10 districts of Rwanda and 36 key informant interviews were conducted among various stakeholders involved in SRHR service delivery. Data were collected using a semi-structured interview and discussion guide, supported by audio-recordings and field notes. The data were analyzed using thematic content analysis guided by social ecological model with Atlas ti. Version 8.

Results: The results revealed two primary themes: perceptions on abortion practices and perceived barriers to safe abortion care services. While adolescents are aware about safe abortion practices at the district hospital but results revealed that most of them are still using traditional herbal as results of fear of being judged. Key barriers identified include a lack of awareness about availability of safe abortion care, religious and cultural taboos which hinder them to access safe abortion services and avoiding parental disappointment and resentment.

Conclusion: The study highlights perception on safe abortion services and contextual factors limiting adolescents' access to safe abortion services in Rwanda. Individual level barriers such as lack of awareness about safe abortion services at the district hospital, cultural and religious factors are of these significant barriers hinder them accessing to safe abortion services. These findings highlight the need to provide comprehensive information to adolescents about safe abortion services. This will help adolescents and young people to know when and where to receive the services as well as cultural and religious taboos changes to move out stigma and make them confident during service request.

Key words: Safe Abortion; Perceptions; Adolescents, barriers; Rwanda

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