

# 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



Contribution ID: 55

Type: Oral Presentation Only

## Magnitude and determinants of women's satisfaction with induced abortion care services in selected public hospitals in Lusaka, Zambia: Implications for better maternal outcomes

Thursday, September 18, 2025 2:05 PM (10 minutes)

**Background:** Induced abortion is termination of pregnancy intentionally and estimated 44 million induced abortions take place annually globally. Abortion-related complications contribute to preventable maternal mortality and morbidity especially if it is unsafe, accounting for 9.8% of maternal deaths globally, and 15.6% of maternal mortality in sub-Saharan Africa. Women should have access, safe and legal abortion to reduce maternal morbidity and mortality. To achieve these goals, care and treatment of induced abortion services must be responsive to the needs of women and reduce barriers to care and services. To increase responsiveness to induced abortion care, one factor that is important is satisfaction with the service which is a critical indicator evaluate healthcare service quality, yet the magnitude and determinants of women's satisfaction with induced abortion in Zambia is not known. Therefore, this study was set out to assess magnitude and determinants of women's satisfaction with induced abortion care services in selected public hospitals in Lusaka, Zambia.

**Methods:** A cross-sectional study was conducted and we randomly selected three public health hospitals in Lusaka, Zambia. We consecutively enrolled participants and probability proportional to size was conducted according to the total number of women seeking induced abortion in each hospital during the study period, resulting in fractions from Levy Mwanawasa, Kanyama and Chawama hospitals of 25.1%, 37.0%, and 37.8% respectively. Data was collected using an interviewer-administered structured, and pretested questionnaire from 1st September to 31st December 2024. The outcome variable was satisfaction which was measured using multiple indicators (confidentiality, privacy, information provision, physical environment and technical quality of the provider). If a woman satisfied with all these indicators it was considered as satisfied otherwise unsatisfied. Multiple regression model was used to assess determinants of women's satisfaction with induced abortion.

**Results:** Out of 343 women enrolled, majority 205 (59.8%) were not married and unemployed 265 (77.3%). The magnitude of women's satisfaction with induced abortion care was 208 (60.6% [95% CI: 56.4 - 64.2%]). Tertiary education (AOR = 2.98; 95% CI: 1.82 - 4.99), being employed (AOR=1.97; 95% CI: 1.16 - 2.28), richest quintile (AOR = 2.05; 95% CI: 1.33 - 2.45), medical abortion (AOR = 4.41; 95% CI: 2.59 - 7.48), previous abortion (AOR = 2.94; 95% CI: 1.02 - 8.48), 7.51) were significantly associated with women's satisfaction with induced abortion care while those who reported planned pregnancy were less likely to be satisfied (AOR = 0.65; 95% CI: 0.46 - 0.86).

**Conclusion:** This study found low women's satisfaction with induced abortion care services. Education, employment, wealth quintile, abortion type, previous abortion and planned abortion were determinants of women's satisfaction with abortion care services. The Zambian government should strictly monitor the quality of induced abortion care services and interventions to understand women's expectations and perspectives are recommended to improve satisfaction and for better maternal outcomes.

**Author:** Dr KAONGA, Patrick (University of Zambia)

**Co-authors:** Dr HAZEMBA, Alice (University of Zambia); Prof. VWALIKA, Bellington (University of Zambia); Dr JACOBS, Choolwe (University of Zambia); Mr CHAVULA, Malizgani Paul (University of Zambia); Mr MATENGA, Tulani Francis (University of Zambia)

**Presenter:** Dr KAONGA, Patrick (University of Zambia)

**Session Classification:** Oral CAC

**Track Classification:** Comprehensive Abortion Care