



**ASAP IFMSA meeting in Chulalongkorn University,
Bangkok, Thailand
Sat 26th Nov 2016**



A one day meeting was organized by Tunchanok Chutumstid on behalf of IFMSA and ASAP to discuss prevention of unwanted pregnancy.

Dr Buniyarit, Dr Orawee, Dr Unnop, Tussnai Kantayaporn, Prof Kritaya, along with 15 medical students from year 1-4 of the University.

The meeting started with a brief welcome by Tunchanok. She said that we are holding this meeting to provide a forum for discussion on unsafe abortion and she expressed the hope that the exchange of ideas will bring a transformation in analysing SRHR issues.



Dr Buniyarit from the Ministry of Public Health gave the keynote address. He spoke about the law in Thailand which allows abortion for saving the life of the woman, fetal abnormality and also mental and physical health. The gestation age limit is 24-26 weeks. Although the mental health indication does not require 2 doctors to sign as per the law, medical regulation have created this additional. While this law can allow doctors to perform safe abortions, the reality is that due to the stigma and providers' attitudes, many women are denied safe abortions, especially in public sector facilities. He spoke of the various methods of safe abortion that are available at present and that unfortunately many doctors are still using D&C. The negative attitude towards abortion prevents the doctors from learning about updated techniques.

Mortality due to unsafe abortion is not recorded and official data is under reported. (The issue got much coverage in the media when a huge number of aborted foetuses from some unknown provider were brought to a temple for burial.)

Medabon has been registered for use by the Thai FDA in Dec 2014 for upto 63 days gestation and is available only from hospitals pharmacies. However, the problem is that not all hospitals are obtaining the indent and providing these pills due to the general negative perception of abortion. Thus out of the many 1000s of hospitals only 70 have registered for this.

He further clarified that despite the media and common belief that it is mostly teenagers who are having abortions, the country data clearly shows that the highest numbers are among age 20-35 years and that most of them are married and have children already. The data also shows that the

vast majority of the cases are in the 1st trimester and OPD cases. He spoke about the causes and consequences of unwanted pregnancies and said that the official data probably represents the tip of the ice berg.

He shared the hotline number 1663 that anyone in Thailand can call and receive help with an unwanted pregnancy.



He mentioned that 68.9% were unintended pregnancies and 46.2% don't use contraception. There is a government programme to prevent repeat unwanted births and this includes the use of LARCS and implants for teenagers and young women. However, repeat pregnancies are not more than 10% as per the data and we need to do more to create awareness about sex and contraception among young people.



He ended by emphasizing that the Dept. of Health supports safe abortion services under law and medical council regulation.

It was amazing to hear such a supportive speech from the Ministry of Public Health and the students gave a very positive response. They did however ask why safe abortion services and the law is not more openly spoken about and signs displayed at all public health facilities.

After tea break we had a panel discussion on RSA—referral system for safe abortion.



Tussnai asked all the participants to share the reasons they chose to attend this meeting. These are some that were shared:

Abortion is one of the main problems in our society. There are many unsafe abortions and we want to know what we can do to help. The law is unfair so how can we change things. Would like to know more about advocacy. To support the cause. To know more about the problem and how to solve it. Topic is not spoken about much. Is it right or not, is it good or not. We don't learn much about this in teaching and training. We don't talk about this openly and I want to change that. Unsafe abortion causes so many problems and I want to help women get more knowledge about it and understand how they can be safe.

Tunchanok shared that there are so many projects on SRH but none on safe abortion. We are afraid of what others will think of us if we want to talk about this topic. But as medical students who are going to be doctors, we should not judge

It is a safe abortion volunteer based referral network gathering physicians from Government, private sector and relevant NGOs. Women can call or be referred to for help. These physicians provide safe medical and surgical abortions to women who need them. The services are professionally standardized, national policy responsive and have a nationwide network that aims at reducing unsafe abortions and the MMR.

They then informed the students about how they can join and support the RSA.

Although most of the discussion took place in Thai, some of the queries were translated.



After lunch Dr Suchitra Dalvie took a session on Regional and Global Advocacy. She started with giving the students a small group work to define sex and gender, Sexual health and rights, reproductive health and rights and human rights. They presented their thoughts and we had a short discussion on the concepts. This was followed by screening the ASAP animated film From Unwanted Pregnancies to Safe Abortion.

After the film screening Dr Dalvie shared some information about ASAP and the work it's doing for safe abortion advocacy with young people and healthcare providers. She encouraged all of them to join ASAP on FB, Twitter and follow the blog.



Dr Randhir Sagar Yadav, member YouthCANN then shared the story of the abortion law in Nepal and how the case of Min Min Lama caused high level advocacy which finally brought about a law change. He also explained how the law was very restrictive earlier but now is one of the most liberal. Before legalisation, of all imprisoned women 20% were behind bars for the charges of abortion. Now the woman does not need to give any reason or need any approval for a termination up to 12 weeks. Only trained doctors and nurses are allowed to perform abortion. Supreme Court has ordered the government to ensure that these are provided for free at all public health centres and the new constitution has implemented that. He explained how the maternal mortality in Nepal has dropped by 50% after this law was implemented. He also mentioned that despite all the success difficult topography is still a hurdle for easy accessibility and more advocacy is needed to make this available at primary care level. He also gave an overview of the activities of Youth CANN activities till date and encouraged students to start advocacy work.



Dr Dalvie then conducted a short values clarification session using certain statements and asking them to move to agree or disagree with them and present their arguments. We spoke of the sex worker also has a right to say no, poor and vulnerable women also have reproductive rights and how human rights are universal and it is not that rich people should have them and the poor be denied. The students were very interested and interactive in this session where they shared their values and clarified those.



As the last session, we did a group work with one local mentor in each group to help discuss the key problems and offer 3-5 actions that were feasible to be done by the students themselves.

The discussions were as follows:

Problems

- Lack of knowledge for prevention of unwanted pregnancy
 - Lack of knowledge on the use of contraceptives
 - After pregnancy they don't know about safe abortion services.
 - Doctors send you away and the woman ends up with an unsafe providers.
 - Attitude of Thai people is that there is bad karma.
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- Very few hospitals provide service making the services poorly accessible.
 - No one much aware of 1663.
 - Attitudes, values, social stigma
 - Women don't know about SRHR and because it is so stigmatized they think it is illegal
 - Healthcare providers also don't know enough on existing laws and services
 - Providers' associated stigmas.
 - Social norms say you must study, marry, have children and look after [parents. Anything different and you are a bad person.

Actions

- Tell faculty to share about RSA and contact hospitals
- Group discussion with friends in university
- Brochure about safe abortion to be kept in open house programmes
- Group of students come together and share about hotline
- Go back to old schools and colleges and hold similar meetings
- School speaking peer education
- University students network and social media networking
- Short movie shows
- Debunking myths talk programs
- Videos on success stories of legalization of abortion
- Younger generation should be aware that safe abortion is a right before they have any biases towards this.
- Current activities: training seminar, create a 101 class for all students as part of sex ed or orientation for medical students.

The program was successful in sensitizing the students where they actively participated, interacted and put their queries and came with their ideas as a change agent of future. The meeting ended with vote of thanks for Tunchanok for organizing the meeting and to all the senior advocates who participated and supported the meeting.

