

Perception Towards Dilatation and Evacuation and Associated Factors Among Abortion Service Providers in Ethiopia: A Cross-Sectional Study

Background

- 42M abortions annually; 10–15% occur in the second trimester
- Unsafe abortions contribute significantly to maternal deaths
- In Ethiopia, medical abortion is widely used; D&E remains limited
- D&E is effective in certain clinical situations, but underutilized

Objective

- To assess the perception and associated factors related to D&E in second-trimester abortions among Ethiopian abortion service providers

Method

- Facility-based cross-sectional survey with qualitative triangulation
- Study population: gynecologists and obstetricians in Ethiopia
- Sample size: 165 participants
- Data collection: structured questionnaire + interviews
- Analysis: Descriptive stats and multivariable regression

Results

- **Training & Practice**
 - Only 23% received D&E training
 - 23.6% never performed second-trimester abortions
 - Among non-performers, 17.9% cited fear of complications
- **Barriers to D&E**
 - Inadequate pain management: 46.9%
 - Lack of instruments
 - Perceived as unsafe: 45.2%
 - Lack of experience: 46.4%
 - Described as “barbaric” by a few
- **Attitudes**
 - 72.1% had favorable perception (95% CI: 64.9%–81%)
 - No statistically significant factors in multivariate analysis
 - Qualitative insights: most see D&E as a backup when MA fails

Conclusion and Recommendation

- Majority view D&E positively, if introduced with care
- Training and logistical support are essential
- Cultural factors and provider misconceptions must be addressed
- Recommend cautious, phased integration into services

