

## Abortion: A Concept Analysis

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**Abstract:** *The term abortion is vaguely used. There is no clear definition of abortion. Improper use of the term results in inadequate management of abortion as a condition. The major focus of this paper was to clarify, explain and define the concept of abortion, its defining attributes, antecedents and consequences. A concept analysis of abortion was done using the eight steps of Walker and Avant's strategic method. Initially 36 articles from 1990 to 2017 were reviewed. Fourteen (14) articles were later dropped due to their irrelevant information, and twenty-two (22) articles were finally reviewed to deduce the definition of abortion. The main antecedents of abortion were a positive pregnancy test; incompetent cervix; illnesses (like HIV-related infections, chromosomal defects, syphilis, toxoplasmosis); malnutrition; abdominal trauma; and excessive work during pregnancy. The attributes identified in literature include a history of amenorrhea, vaginal bleeding, cramping or lower abdominal pain which progress to labour pains, dilated cervical os, and expulsion of the products of conception. The resultant consequences of abortion include loss of the fetus, anaemia, sepsis, guilt feeling, sadness and anxiety, nightmares, and depression. The empirical referents fundamental to abortion include assessing the amount of bleeding, performing speculum vaginal examination to check for cervical dilatation, and checking for products of conception coming out of the vagina. The definition of abortion in this concept analysis will enable proper interpretation and detection of abortion, and standardisation of tools used to diagnose abortion. This ultimately leads to proper management of abortion.*

**Keywords:** *Abortion; miscarriage; spontaneous; concept analysis; Walker and Avant.*

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### I. Introduction And Background

Abortion is the ending of pregnancy by removing a fetus or embryo before it can survive outside the uterus (Grimes, 2010). Maternal morbidity and mortality related to complications of unsafe abortion have been identified as major public health problems. Around 56 million abortions are performed each year in the world with a little under half done unsafely (WHO, 2012). Since ancient times, abortions have been done using herbal medicines, sharp tools, or through other traditional methods. Abortion laws and cultural or religious views of abortions are different around the world. In some areas abortion is legal only in specific cases such as rape, problems with the fetus, poverty, risk to a woman's health, or incest (Culwell et al, 2010). In many places there is much debate over the moral, ethical, and legal issues of abortion. Those who oppose abortion often maintain that an embryo or fetus is a human with a right to life and may compare abortion to murder. Those who favour legality of abortion often hold that a woman has a right to make decisions about her own body (Mahowald, 2017). In many places where abortion is illegal or carries a heavy social stigma, medical reporting of abortion is not reliable. The reasons why women have abortion are diverse and vary across the world. Some of the most common reasons are to postpone child bearing to a more suitable time or to focus energies and resources on existing children (Culwell et al, 2010). Other reasons include being unable to afford a child either in terms of the direct costs of raising a child or the loss of income while caring for the child, lack of support from the father, inability to afford additional children, desire to provide schooling for existing children, disruption of one's own education, relationship problems with their partner, a perception of being too young to have a child, unemployment, and not being willing to raise a child conceived as a result of rape or incest (Culwell et al, 2010). Some abortions are done as a result of societal problems. These might include the preference for children of a specific sex, disapproval of single or early motherhood, stigmatisation of people with disabilities, insufficient economic support for families, lack of access to or rejection of contraceptive methods, or efforts towards population control (such as China's one-child policy).

Spontaneous abortion has been identified as a complication associated with early pregnancy. According to the World Health Organisation (WHO), expulsion of fetus weighing 500g or less or at 20-22 weeks gestation is termed spontaneous abortion (Regan, 2000). It was reported that most causes of spontaneous abortion are of maternal origin (Goddijn, 2000). Of the total pregnancies, 15-20% will result in spontaneous abortion (Linda,

2011). A study conducted by Lubna et al. (1994) reported that older age at menarche, husbands older than 50 years, consanguineous marriage, and family history of abortion, was significantly associated with spontaneous abortion whereas age of the mother, parity, socioeconomic status, use of spacing method, and diabetes or obesity were not associated with spontaneous abortion.

Brenda et al. (1994) reported that certain physical activities, duration of physical activities and frequency of physical activities were the factors associated with spontaneous abortion. Direct and indirect exposures of pregnant mothers to environmental and occupational chemicals have a negative outcome on pregnancy. According to a WHO (2012) report, an overall ratio of 15-20 spontaneous abortions occur per 100 pregnancies. Other factors such as substance use, excess caffeine consumption, tobacco use, and alcohol consumption have been regarded as factors attributable to occurrence of spontaneous abortion (Wood, 1994). Some researchers have reported that environmental factors, socioeconomic level, psychosocial factors, and area of residence can contribute to the occurrence of spontaneous abortion (Ellet, 1992). Studies have shown that spontaneous abortions increase with parity as well as maternal and paternal age, with frequency doubling from 12% in women before age 20 years to 26% in those older than 40 years (Barbara, 2010).

The Zimbabwe Reproductive Health Delivery Guidelines (...year...) identified the following clinical types of abortion: Threatened abortion where there is bleeding and/or cramping without cervical dilatation. Inevitable abortion has bleeding and/or cramping in pregnancy with cervical dilatation. Incomplete abortion has bleeding and/or cramping in pregnancy with cervical dilatation and expulsion of part, but not all, of the pregnancy tissue. Complete abortion is the complete expulsion of all products of conception from the uterus. Missed abortion occurs when the fetus dies with delayed expulsion of the products of conception.

**Significance and uses of the concept**The nature of abortion and the decision making process it involves can be particularly sensitive issues for all involved. The abortion debate is not a simple one and is not reducible to simplistic pro-choice or pro-life standpoints. It is essential that health professionals understand the issues behind the arguments and are able to support and inform their patients when required (Chaloner, 2007).

**Purposes of analysis**The purpose of this concept analysis is to explore and develop a better understanding of the concept of abortion through examination and analysis of previous research, defining attributes and case studies. Secondly the purpose is to investigate the key components of abortion, distinguish similarities and differences among abortion, and to identify the inner structure of abortion (Walker & Avant, 2011). Thirdly, the purpose is to distinguish between the defining attributes of abortion and its relevant structure.

#### METHOD

Walker and Avant's (2011) strategic eight step method of concept analysis was used in analysing the concept of abortion. The steps include selection of a concept, determining the purpose of analysis, identifying all uses of the concept, determining the defining attributes of the concept, identifying antecedents of the concept, identifying the consequences of the concept, constructing a model case, and identifying the empirical referents of the concept. Different definitions of abortion were extracted from literature. Literature was sought from dictionaries, Google Scholar, textbooks, and from Reference Manager. The terms abortion, miscarriage, spontaneous, and concept analysis were used in search for relevant literature. Articles from 1990 to 2017 were reviewed. We reviewed papers as far back as 1990 so as to capture the meaning of abortion in the past two decades. Initially thirty-six articles were systematically reviewed. Fourteen articles were later dropped due to irrelevant information, and twenty-two articles were finally reviewed to deduce the definition of abortion.

**Definitions**Miller-Keane Encyclopedia and Dictionary of Medicine define abortion as the termination of pregnancy before the fetus is viable. Abortion is an expulsion from the uterus of an embryo or fetus before viability-20 weeks gestation or fetal weight less than 500g (Farlex Partner Medical Dictionary, 2012) According to the Dorland's Medical Dictionary for Health Consumers (2007), abortion is an expulsion from the uterus of the products of conception before the fetus is viable. The American Heritage Medical dictionary (2003) defines abortion as induced termination of pregnancy with destruction of the embryo or fetus. Other definitions see abortion as the spontaneous or induced termination of pregnancy before the fetus has developed the stage of viability (Mosby's Medical Dictionary, 2012). Segen's Medical Dictionary (2012), defines abortion as the premature expulsion of the products of conception from the uterus, of the embryo or a nonviable fetus. Collins Dictionary of Medicine (2005) defines abortion as the loss of the fetus before it is able to survive outside the womb. The Zimbabwe Reproductive Health Service Delivery Guidelines (2005) defines abortion as the spontaneous or induced termination of pregnancy before 22 weeks gestation or less than 500g fetal weight.

**Defining attributes**After a comprehensive review of the literature, we have identified the following defining attributes of abortion. **History of amenorrhoea.** Amenorrhoea is the absence of menses. This is one of the indicators that a woman might be pregnant. During pregnancy the menses stop. Bleeding in early pregnancy is not expected and is considered abnormal. **Vaginal bleeding.** Vaginal bleeding in early pregnancy is a strong indication of the loss of pregnancy. This is due to detachment of the placenta from the uterine wall and breakage of the blood vessels leading to bleeding. **Cramping or lower abdominal pain which progress to labour**

**pains** Cramping and pain occur due to uterine contractions. Contractions get stronger and stronger and more sustained in an effort to expel the products of conception. **Cervical os is dilated** Hormonal influence and uterine contractions will cause the cervical os to dilate and open up so as to allow the products of conception to come out. **Expulsion of the products of conception** Uterine contractions will push the products of conception out through the dilated cervix. The fetal parts can be identified on examination.

**Antecedents** These are events that must occur prior to the occurrence of an abortion. They include a positive pregnancy test. A positive pregnancy test is confirmation that a woman is pregnant as there are some conditions that might mimic pregnancy. Secondly, the client might have illnesses like malaria, HIV-related infections, chromosomal defects of the fetus, syphilis, toxoplasmosis, and malnutrition. Linked to this is advanced maternal age where incidences of fetal malformations and spontaneous abortions were reported (Cohen-Overbeek et al. 1990). These are some of the common conditions or ailments that contribute to abortion. Thirdly, a woman might be subjected to excessive work during pregnancy. Literature has revealed that too much work during pregnancy can cause abortion. Fourthly, the woman might have an incompetent cervix. This is a condition of the cervix that cannot sustain pregnancy. It cannot contain the products of conception of a particular weight of the fetus, the cervix fails to close and opens and allows the conceptus out of the uterus.

**Consequences** The consequences include the expulsion of the products of conception; this is the loss of the fetus as some fetal parts can be identified from the expelled products of conception. There are some physical effects like anaemia. This comes about due to profuse bleeding associated with an abortion. The woman can also develop sepsis if some products of conception remain in the uterus, or if abortion was done in an unclean environment. There are some psychosocial effects of abortion which include a feeling of guilt, stigma, sadness and anxiety that can haunt a woman for the rest of her life (Norris et al., 2011). Some women think they have done murder, and some think they are responsible for the abortion. They may experience nightmares and some even develop depression. They grieve for the loss of the fetus and the grieving process might take longer with some women. In a study on the economic consequences of abortion, Ilboudo, Greco, Sundby and Torsvik (2015) found that women and their households experienced short-term economic repercussions of payments associated with abortions.

**Empirical Indicators** These are classes or categories of actual phenomenon that by their existence or presence demonstrated the occurrence of an abortion. Abortion is associated with profuse bleeding that might have clots that can be seen on vaginal examination. The women who has had an abortion may report excessive bleeding compared to her normal menstrual bleeding. A vaginal speculum examination will reveal cervical dilatation. The open cervical os on speculum examination is an indication of an impending or that an abortion has occurred. Some or all fetal parts can be seen and identified from the expelled products of conception. These indicators provide a good measure of the occurrence of abortion.

**Operational definition** Abortion is the complete expulsion from the uterus of the products of conception before 20 weeks gestation or less than 500g fetal weight.

**Cases** Both Chinn & Kramer (2011) and Walker & Avant (2011) emphasise the importance of identifying critical attributes for synthesis of a concept analysis. Incorporating diverse cases, consisting of model, related, borderline, contrary, and invented cases, allows for pertinent validation of the analysed concept.

**Model case** Buhle is a 21 year old lady who presents at a clinic with first pregnancy. A pregnancy test done at her local clinic showed positive results. She is 19 weeks pregnant. She presents with a history of vaginal bleeding and abdominal cramping. On examination bleeding is noted and the pad is heavily soaked. Speculum examination reveals an open cervical os, and the products of conception brought by the woman were complete showing distinct fetal parts. **Analysis** The above model case shows all the attributes of abortion. These include vaginal bleeding, abdominal cramping, dilated cervical os, and presence of products of conception. It is a true case of abortion.

**Related case** Nomsa is a 24 year old woman pregnant for the second time with one child. She is now 18 weeks pregnant. She comes to the clinic complaining of lower abdominal pain and dysuria. On examination there is no vaginal bleeding. Speculum examination shows the cervical os is closed. **Analysis** This case does not have all the attributes of abortion. It is related to abortion. The possible diagnosis here is Urinary Tract Infection.

**Contrary case** Chipso is 18 years old. She presents at the clinic complaining of abdominal discomfort and vomiting. She is still a virgin. **Analysis** This is a contrary case. It is not abortion. Chipso is not even pregnant. The possible diagnosis is Gastritis.

#### SUMMARY

Abortion is the termination of pregnancy as early as before 20 weeks gestation. It can be spontaneous or induced. This concept paper covered spontaneous abortion. Several factors can lead to abortion, such as infections, congenital abnormalities, stress, trauma, and occupational chemicals, among others factors. Abortion

impacts negatively on the psychosocial aspect of life of women and nurses need to understand this concept and the debate surrounding it so as to give necessary information and support to women when needed.

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