Author's response to reviews

**Title:** An exploratory study of what happens to women who are denied abortions in Cape Town, South Africa

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**Author's response to reviews:** see over
Response to reviewers:

MS: 1006471937144408: Title: An exploratory study of what happens to women who are denied abortions in Cape Town, South Africa

Thank you for the helpful responses of the reviewers. We have altered the manuscript accordingly, as detailed below. We feel that these revisions have strengthened the manuscript, and hope that it is now suitable for publication in Reproductive Health.

Thank you

Jane Harries

Iqbal Shah

Major compulsory revisions

1. The title has been revised as requested to: An exploratory study of what happens to women who are denied abortions in Cape Town, South Africa.

2. NGO facilities were chosen as they provide abortion services on a daily basis, the limited time period for the exploratory research and women were being referred from public sector facilities to the NGO facilities due to provider shortages and thus felt these women would be representative of many women accessing the public sector. This has been expanded on see Page 2 Methods.

3. During the study time period and during recruitment – 18 women were denied an abortion on the day they sought an abortion. Of these 18 women, 2 refused participation due to time constraints and one woman was under 18 years of age and thus ineligible. This has been clarified in the methods section see page 3

4. Women were provided R 50 at the baseline interview for time spent obtaining baseline information and R 100 for the lengthier in depth interview. This has been clarified on page 3

5. Information obtained at the baseline interview was willingness to be contacted in 2-3 months’ time, contact details, preferred method of contact and reasons for being turned away on the day they sought an abortion. See page 3

6. Socio-demographic characteristics were obtained from the 8 women successfully followed up. This has been highlighted on page 5
7. Minor essential revisions: 5/8 women had used a contraceptive method (3 oral contraceptives, 1 injectable and one condoms). The percentage has been changed to 5 out of 8 women as suggested by the reviewer.

8. Some of the women who were part of the study had accessed the public sector in the past or had other negative experiences of the public sector linked to family and friends. Women are often referred from the public sector to the NGO sector if the public sector is not able to offer the service notably second trimester services.

Response to reviewer Carrie Purcell

**Methods**

All attempts have been made to make the methods section clearer by providing more detailed information and explanations about the number of women recruited and turned away and ultimately out of those turned away how many sought an illegal provider.

1. Selection of recruitment sites has been expanded on in the methods section under study sites.

2. Some of the women self-refer but most have been referred from another health care provider or facility. As most women expect to obtain an abortion on the day they visit the clinic. It has been made more explicit what women were denied an abortion on the day that they sought an abortion. This has been made more explicit throughout the methods section and paper in general.

3. More detail has been provided on data analysis and the key research questions from which the key themes were drawn. Conventional thematic analysis was conducted on interview data to identify key themes. The categories in the interview guide were linked to the key research question i.e. what happens to women who are turned away after seeking a legal abortion, do they continue with the pregnancy or seek assistance elsewhere including illegal providers.

4. Data collection has been made more explicit and clarified. This was also requested by the second reviewer. During the study time period and during recruitment – 18 women were denied an abortion on the day they sought an abortion. Of these 18 women, 2 refused participation due to time constraints and one woman was under 18 years of age and thus ineligible. This has been clarified in the methods section on page 3.

5. Of the 15 women who consented to participate, 8 were successfully followed up and 7 were lost to follow up. However we were able to review clinic records of 2 of the women lost to follow up. Two of the 7 lost to follow up did return to the
clinic for an abortion. While some women were not denied an abortion outright some did resort to accessing illegal abortion providers prior to returning to receive an abortion. However we do not know what happened to those women who we were not able to follow up. Women do make contact with abortion facilities prior to their first visit or might have been referred by a health care provider who was not able to assist them and these delays have often led to women presenting in their second trimester as has been reported elsewhere (Harries et al 2007; Harries et al, 2012).

6. The final sample has been made more explicit in the beginning of the results section and who and how many were turned away and the reasons for being turned away.

7. The terms “discrepancies and inconsistencies” for the woman who was 22 weeks GA has been removed from the text as is confusing and not intended to discredit the participant’s claim but to ensure that we had accurate information and try to ascertain what occurred.

8. The lengthy quote on page 10 has been edited down but does highlight some key issues related to the research questions and that this woman was still desperate enough to access an illegal abortion provider knowing it was not a safe and legitimate provider.

9. At this stage we do not have more data than what is presented on women knowingly accessing illegal abortion providers and something that needs further research.

Minor essential revisions

1. Further explanation of the Global Turnaway study has been provided and the most recent publication has been cited. Gerdts C, De Pineres T, Hajri S, Harries J, Hossain H, Puri M, Greene Foster D. Denial of abortions in legal settings. Journal of Family Planning and Reproductive Health Care 2014; 0:1–3.

2. Two participants travelled long distances to seek an abortion and has been added on page 7.

3. Data on the proportion of women who presented at the clinic during the time period women were recruited has been added see page 3 as requested by the other reviewer. Out of the 18 women who presented, 15 were recruited, 2 declined to participate and one was below 18 years.

4. Yes, the vignette is a verbatim quote from the in depth interview – however the word vignette has been changed to extract.
5. The sub heading, reasons for seeking an abortion has been removed and included as part of the response to being turned away – as reasons informed women’s responses to being turned away.

6. All reasons for being turned away have been specified as per second reviewers comments as well and clarified in the socio demographic section to read: Reasons for being turned away included beyond the legal limit (2 women); in the second trimester and insufficient funds (4) and too early to determine gestational age (2).

7. I have checked the section referred to and in both cases states that 3 of the 8 women turned away accessed an illegal provider.

8. The paragraph on page 9 beginning with In contrast has been changed to read: Whilst some women who were turned away sought illegal providers another woman who had to return for a second trimester procedure decided to continue with the pregnancy after viewing the ultrasound image.

9. The proportion of second trimesters in SA is relevant here as this study showed that women are often turned away who are in their second trimester due to a shortage of second trimester abortion providers.

10. We have reflected on the comment about whether this small study is generalizable and whether this is the aim of a qualitative study and would agree with the reviewer’s comments. The section has been rephrased to “The results of this study may not reflect women who do not present at legal abortion facilities but go directly to illegal, unlicensed providers, or who successfully self-induce abortion outside of legal facilities.”