

Abortion Incidence & Severity of Complications in Sierra Leone

The information in this fact sheet is based on findings from a study conducted in Sierra Leone by the Ministry of Health and Sanitation, Statistics Sierra Leone, the African Population and Health Research Center, and Guttmacher Institute to estimate the incidence of induced abortions, the characteristics of women who seek abortion-related care in health facilities, the nature of abortion-related complications that women present with, and the care they receive in Sierra Leone.

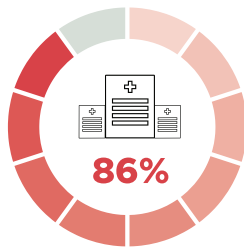
Key findings

Incidence of induced abortion



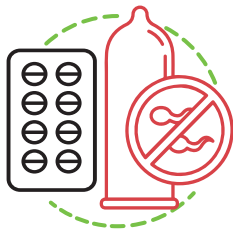
The estimated induced abortions in Sierra Leone in 2021 is 91,494. The abortion rate for Sierra Leone is 44.2 per 1000 women of reproductive age. This is equivalent to a PAC treatment rate of 13.3 per 1,000 women of reproductive age.

Majority of women presenting for post-abortion care (PAC) were treated at primary facilities (86%) and in public health facilities (81%).



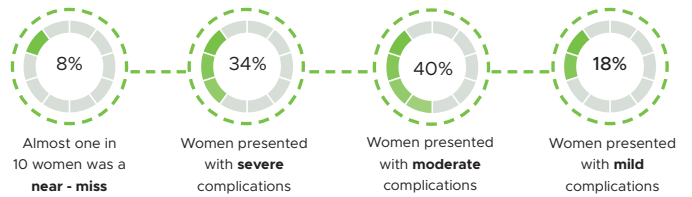
Induced abortion & unintended pregnancy rates

The national unintended pregnancy rate was **70** per 1000 women, with the highest unintended pregnancy rates being in the Southern and Northern regions (110 and **86** per 1000 women, respectively).



Severity of abortion complications

Based on the categorization of complications for women who presented for PAC during the 30 days of facility observation, about 18% of the women presented with mild complications, 40% with moderately severe, and 34% with severe complications. Almost one in 10 women (8%) was a near-miss.



Of the five regions, North West (48%), Southern (38%), and Western regions (35%) had the highest proportions of women with severe abortion-related complications. Eastern (29%) and Northern regions (25%) had the least proportion of women with severe complications.

Outcomes of all pregnancies in Sierra Leone in 2021. Of all pregnancies in the country in 2021, 38% were unintended, and of all these unintended pregnancies, 63% ended in abortions. Abortions constituted 21% of all pregnancy outcomes, miscarriages (15%), and unplanned births (12%)

The evidence derived from the study will contribute to strengthening programs targeted at reducing unsafe abortions, improving the availability and quality of comprehensive abortion care services, bolstering policy engagement, and informing campaigns and advocacy around the abortion discourse in Sierra Leone.

Key recommendations

There is a need for legal and policy reforms to address the causes of unsafe abortions and unintended pregnancies and move towards domesticating the Maputo Protocol.

The government should increase access to quality family planning services and effective modern methods for all women and men.

Expanding access to quality post-abortion care, including post-abortion contraception counseling and method provision at all health system levels.

Conducting community education and awareness on the dangers of unsafe abortion, legal provisions on abortion, stigma reduction, and contraception and family planning to prevent unintended pregnancies.

Acknowledgments

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African Population and Health Research Center