## ABORTION IN WAR AFFECTED, MARGINALIZED WOMEN IN SRI LANKA:

## A Case Study Analysis with Special Rreference to Trincomalee

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Abortion is illegal in Sri Lanka. The law governing abortion is very restrictive, only permitted for cases where pregnancy/child birth is life threatening to the mother. However, despite legal restrictions, abortions are performed in large numbers, mostly by untrained persons in secret, under very unhygienic conditions. As many developing countries, a significantly large number of married women of reproductive age in Sri Lanka are faced with unwanted pregnancies. Although abortion is illegal in Sri Lanka, it is said that there are around 1000 abortions a day performed here. That is at least 300,000 deaths per year. Since abortion is not in principle allowed, only very limited studies have been conducted in Sri Lanka on any aspect of the abortion issue. This was mainly due to the secretive nature of providing such services and mostly due to the legal barrier. In such background, the present study provides a cross cultural investigation on incidents of abortion among married women's in war affected communities in three selected village in Trincomalee district. There are three major researched variables discovered in the study; the socio-cultural facts influencing abortion, the methods used to abort and the health issues of abortion in unhygienic situation.

According to the findings of the study, abortion was occurring due to the increasing number of unwanted pregnancies among married women. It was due to lack of knowledge on reproductive and sexual health, lack of knowledge on contraceptive methods and issues of accessing to such services; lack of negotiation skills and bargaining power within men dominated sexual relationships, alcoholism, rape and socio cultural practices. Health complication such as bleeding, hemorrhage, irregular infant, laceration of the cervix, menstrual disturbance, inflammation of the reproductive organs, bladder or bowel perforation, and serious infection are several health issues of abortion and there is a high incidence of self practiced abortions. It is necessary to improve the knowledge on contraceptive methods and sex education. This study was carried out in Muthur, Keliweddi and Serunuwara of Trincomalee district. Key informant approach was the prime data collection tool of the study. Qualitative data on 15 abortion incidents were gathered through key informants. In addition, 10 case studies were conducted to collect qualitative data

Key words: abortion, unwanted pregnancy, war affected women, heath issues of abortion

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