

INTRODUCTION

Generation Initiative for Women and Youth Network (GIWYN) is a community-based organization aimed at empowering and educating women and youth to lead healthy sexual and reproductive lives in Nigeria. GIWYN also supports the Ms. Rosy safe abortion hotline, which provides information and counselling to those seeking to safely terminate their pregnancies. GIWYN has recently focused their efforts on reaching ‘high-priority communities’ (HPCs), defined broadly as communities that face the greatest barriers to accessing sexual and reproductive health services. These include sex workers; lesbian, gay, bisexual, transgender, and queer (LGBTQ+) people; adolescents; and internally displaced people (IDP) and refugees. To expand access to information and support on abortion to these communities, GIWYN has trained a variety of community members and healthcare workers on the topic of safe abortion. In 2022 and 2023, GIWYN trained 16 pharmacists, 16 community health workers (CHWs), and 9 HPC peer educators. We conducted in-depth interviews with a subset of training attendees (n = 12), as well as with individuals from high-priority communities who received support and care from the Ms. Rosy hotline and/or individuals who participated in the training (n = 10). The aim of the interviews was to understand participants’ experiences with the trainings and identify ways to strengthen the trainings and improve service provision for HPC members. Interviews were coded and analyzed thematically, and findings are presented below.

SAFE ABORTION TRAININGS

Overall, all training participants reported having a positive experience and trusted the content of the training; they expressed meaningful changes in their knowledge, attitudes, and willingness to counsel others on safe abortion after the training. One CHW described the training as an ‘eye opening’ experience that helped them become more confident when talking about abortion:

“The training is kind of an eye opener, and the training kind of makes you bolder to talk about things you couldn’t talk about earlier, that’s what I see it as. Because, like something like my eyes are opened to new ideas which I have come to realize that it is a fact and it’s helpful and its needed. So, when you talk about such things now, you say it with a lot of guts.”

(Age 35, Community Health Worker Training Attendee)

Participants noted learning about abortion pills for the first time, or learning something new about them, including: how to prescribe them, better understanding their safety, effectiveness, and side effects, and learning about self-management as an option:

“You know when I go around, I see some pharmacies that... I see most people sell drugs they don’t know more about the drugs, and **this training has actually helped me to understand and explain to the individuals the side effects, what the result and how to confirm that this abortion was successful.**”

(Age 33, Pharmacist Training Attendee)



After the training, most reported having shared the information they learned with peers, clients, and members of their community. One CHW described having had one-on-one conversations with sex workers about safe abortion as a result of the training, and highlighted the importance of sharing this information by word of mouth:

“For me knowing that you are helping to save the life of women and knowing that you don’t know who exactly this information will save. It feels very good because knowledge is made available and the person you even shared the knowledge, probably may not be the one that may benefit from it but because you have shared knowledge to somebody, who definitely one way or the other would have shared to another person, and it is going on, **it is a thing of joy. That the lives of women will be saved through the knowledge that you have shared.**”

(Age 45, Community Health Worker Training Attendee)

Similarly, peer educators from the sex worker community expressed feeling prepared for the conversations they had with other sex workers after the training, and were also able to refer their peers to Ms. Rosy when needed:

“I was surprised that they even, like they were eager to know what we discussed in the training and everything... I told them about what we learnt in the training, and everything concerning the safe abortion.”

(Age 25, Peer Educator Training Attendee)

Training participants suggested that the training should be offered to more people, particularly in rural areas; they also expressed a desire for additional training and practice on counselling in larger group settings, versus one on one. Participants also were interested in learning more about abortion in later gestations, as well as ways to offer abortion pills to clients for free.

Providing safe abortion information and support to high priority communities (HPC) through the Ms. Rosy Hotline

Members of high-priority communities reported finding out about the Ms. Rosy hotline from a variety of sources, including through a pharmacist (n=3), a friend/peer educator (n=5), or via an online search (n=2); most (n=7) went on to contact the Ms. Rosy hotline directly. All the participants who interacted with Ms. Rosy reported the hotline as a trustworthy source of information that felt safe because of the anonymity and privacy provided by the hotline.

“Actually, **the fact that she’s anonymous to me**, like someone I don’t know, we are just speaking over the phone, she just knows my name, **she doesn’t know where I come from, she doesn’t know ... she doesn’t know me facially, so that, that’s safe.**”

(Age 28, High-Priority Community Member)

All participants who interacted with the hotline reported having a positive experience and were appreciative of the comprehensive information they received, which covered not only medication abortion but also other sexual and reproductive health (SRH) topics. In particular, they expressed how the information and support they received was non-judgmental and helped shift some of their expectations about abortion being painful or dangerous, and made them less anxious about the process:

“**It was very easy to talk to her, it’s just as if I was talking to therapist.** Of course, immediately I told her everything, she was supportive, her words, **not someone that you will just talk to, and will start judging you**, like why do have up to sex, sex, and all that [...] So, Ms. Rosy was pretty supportive, and it was very easy to talk to her and I’m grateful I did.”

(Age 28, High-Priority Community Member)

“They are very good. **They helped me at least the difference between what I heard about doing abortion is different from what I experienced [...]** So, what they advised, and **the drugs they told me to use was good. I didn’t experience that pain. So, it was smooth and safe.**”

(Age 31, High-Priority Community Member)

Some (n=6) received financial support from Ms. Rosy’s abortion fund to help pay for their abortion costs. These participants were deeply appreciative of the funds they received which they used to help cover a variety of needs including buying abortion pills, transportation, food, and other supplies, such as pads or antibiotics. Participants expressed they were surprised to receive these funds in addition to the information they were given, and that this had added to their general feeling of being supported and accompanied by Ms. Rosy.

“**I felt good (receiving the funds), I know it’s kind of weird, I didn’t see it coming,** because obviously she is not the one that impregnate me, so it’s just ... (laughs) sorry, sorry about that. So, it’s just like she trying to help and make life more ... **because the money came in and I was very happy because I really needed the cash.**”

(Age 27, High-Priority Community Member)

“**The funds were one of the things that made me feel supported,** yes because, yes, because that moment the financial capacity was not there, but she came through.”

(Age 25, High-Priority Community Member)

Providing safe abortion information and support to HPCs through peer educators and pharmacists

Some (n=3) did not contact the Ms. Rosy Hotline directly but rather received the information and support they needed via a pharmacist or peer educator trained by

GIWYN. These participants shared how the person assisting them made them feel comfortable, was always available to answer their questions, and in some cases, accompanied them throughout their entire abortion process:

“**She made it a really comfortable space for me, and I was able to trust her....** she kept calling me to check up, and even as at when I started the menstruation I was able to reach her because it was in the night, so I was still able to reach her, even the times when I was scared, I would randomly text her and she was always like replying me as soon as possible, **I would say she was basically with me throughout because anytime I texted her she will respond, anytime I was scared I will just let her know and she will calm me down.**”

(Age 25, High-Priority Community Member)

Almost all (n=8) felt they received sufficient support throughout their abortion experience, either from the Ms. Rosy hotline or from the pharmacist or peer educator who connected them to care.



Experience obtaining abortion pills

Participants shared challenges they experienced when trying to obtain abortion pills. Almost all (n=9) reported obtaining abortion pills from a pharmacy. These participants reported challenges such as requirements to show a doctor’s prescription, pharmacists’ refusal to dispense pills, and stigma and fear of judgment. Some (n=3) reported going to three or more pharmacies before obtaining all the pills they needed, while others had to ask a friend to assist with purchasing pills.

“I visited like 3 pharmacists. The first one I went for; they asked me to do a pregnancy test to be sure if I'm pregnant before I start going about looking for abortion drugs. And then they gave me a, a pregnancy strip for me to how I do the urine test, there in their pharmacy, and then, **they said they don't do abortion and they advised me to keep the baby and all of that, so I left that pharmacy and I went somewhere else and they say they don't give information on that, they don't know, that I should go to the hospital. Then before I could get to that my friend, and then she led me to the pharmacy that gave me the information on misoprostol.”**

(Age 30, High-Priority Community Member)

While many experienced challenges, one participant who interacted with a pharmacist trained by GIWYN shared a positive experience, and even received pills free of charge:

“Okay, she said, she told me how to use the pills ... And also told me that she, she even ... she told me about the contraceptive. And also, and told me the effects like side effects of the pills. I was treated nice, good. And I liked it. I was treated nice, yes, she didn't let me feel like you have committed the worst thing To tell you the truth, I did not go to any other pharmacy, like to discuss this particular, particular case. It was only that pharmacy the support ... she gave me support like giving me the pills they want. Even, do you know that the pills she gave me ... I was intended to buy with money, like the small money I have, do you know that she gave it to me free. She gave it to me free, that is ... is a huge support.”

(Age 23, High-Priority Community Member)

New information learnt from / referring others to Ms. Rosy

When asked whether they had learned anything new when interacting with either Ms. Rosy's hotline or pharmacists and peer educators trained by GIWYN, all participants shared they had learned about medication abortion and self-managed abortion for the

first time. Additionally, participants described receiving advice on how their bodies would react to the medication, how to manage symptoms, how to take care of themselves during the abortion process, and how to talk to others about abortion. Almost all (n=9) were willing to recommend Ms. Rosy to a friend or share the information they learned with someone else; most (n=7) had already shared this information with their friends or neighbours.

“Okay, I learnt that I could use pills, you know to terminate pregnancy without having to go to the hospital or having to announce it to anyone, just carefully on my own, maybe I should tell a trusted friend who could stay around me, you know while I'm doing it and then told me all the side effects and erhh things to expect and also what to expect if the abortion goes wrong, but thank God it never did, so everything went perfectly well.”

(Age 34, High-Priority Community Member)

“Yes, even in the market here, I tell my neighbor about Ms. Rosy ... I started talking, I spoke about my own experience, and told them what was involved, I did not just start talking about it immediately.”

(Age 34, High-Priority Community Member)

Generally, participants expressed that their communities would be open to receiving abortion and SRH related information via community training to target the lack of information:

“If a training is organized for them, I think they are going to welcome it, because a lot of them lack this information and they really need it. They grab it with full hand if the information should reach them through training or dissemination or sensitization.”

(Age 34, High-Priority Community Member)

CONCLUSION

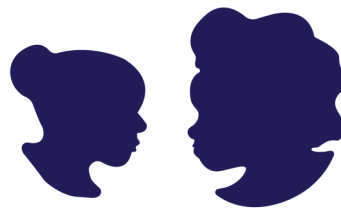
Through trainings and community outreach, GIWYN has made key contributions to expanding the abortion access network in Nigeria, particularly among high-priority communities. Training attendees were able to counsel others in their communities and beyond on safe abortion, and many expressed an interest in continuing to learn. People in high-priority communities recounted how they trusted and felt supported by the Ms. Rosy hotline and/or trained peer educators, and how this helped them overcome barriers to obtaining safe abortion care. Furthermore, all participants said they would be willing to share information about Ms. Rosy and safe abortion with others, thus signalling the importance of community-based efforts in advancing safe abortion access.



For more information, contact the study team at jmethazia@ibisreproductivehealth.org

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GIWYN

Generation Initiative For
Women And Youth Network

(617) 349-0040

admin@ibisreproductivehealth.org

www.ibisreproductivehealth.org

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