

Effect of Post Abortion Counseling on Woman Lifestyle

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Abstract: The present study was a descriptive study that aimed to study effect of post abortion counseling on woman life style. A Qausi-expermental sample that consisted of 116 post-aborted women, the study was conducted at postnatal room in AIN Shams University, maternity hospital. Data collected using Arabic structured interviewing questionnaire sheet includes characteristics of the studied women, women knowledge regards abortion and management, lifestyle assessment tool, physiological and psychological needs sheet, Supportive in structural booklet for aborted women, follow up after post abortion counseling, follow up after using of session booklet, scoring system tool. The results of this study revealed that more than half of women do not have knowledge regards abortion and its management, more over there was more than half of women had unhealthy lifestyle during pregnancy. In addition, there was more than tow third of them had positive impact regards post abortion counseling on lifestyle. It was concluded that the majority of the studied women had negative attitude toward the lifestyle meanwhile, there were many factors as age, work, family history, no. of abortion, unhealthy lifestyle behavior that effect on post aborted woman. It was recommended that study recommended that Counseling program for women with abortion problems and life style modification. Educational programs and messages through the counseling session, counseling booklet, brochures, to increase women awareness about effect of unhealthy lifestyle.

Keywords: abortion, post abortion counseling, lifestyle.

1. INTRODUCTION

Abortion is a medical term for the disruption of a pregnancy before the fetus reaches its viable age of more than 20 to 24 weeks of gestation or weighs at least 500g (*Stuart, 2017*).

International incidence rate of Abortion in the developed world is one of the safest procedures in medicine. Modern methods use medication or surgery for abortions. Unsafe abortions (those performed by unskilled individuals, with hazardous equipment, or in unsanitary facilities) cause 47,000 deaths and 5 million hospital admissions each year. The World Health Organization recommends safe and legal abortions are available to all women.

National incidence rate despite legal restrictions, abortions are common. In a 2016 study of 1025 women from six villages in Upper Egypt, 416 were found to have had at least one abortion; among this group, there were 265 abortions per 1000 live births. Incidence and socioeconomic determinants of abortion in rural Upper Egypt. Abortions are carried out by indigenous methods, at clinics, or at great expense by private gynecologists.

There is several types of abortion are used to classify every case for a pregnant woman. Once a thorough assessment is done, that would be the time that the type of abortion that occurred could be established. **Women at risk of repeat abortion in** previous studies conclude the risk of repeat abortion is associated with immigrant status, low education, weak social network, poverty, and unemployment. Older age and previous children are more common among women experiencing repeat abortions. However, as older women have more years to experience having children and/or an

abortion, age and previous children may be considered more as confounders than true risk factors. A history of physical or sexual abuse, substance abuse, and daily smoking are more common among women experiencing repeat abortion than among women without these experiences.

Life style is a way of living of individuals, families (households), and societies, which they manifest in coping with their physical, psychological, social, and economic environments on a day to-day basis. Moreover, is formed in specific geographical, economic, political, cultural and religious text. Lifestyle is referred to the characteristics of inhabitants of a region in special time and place (*Mozaffarian, 2016*)

After abortion lifestyle, is a very difficult decision for every woman. No matter under what circumstances she is deliberated to take such decisions, it is never a happy feeling. Sometimes, it may be give you a sense of relief in case of unwanted pregnancy, but in most of the time, a sense of emotional loss, sadness, guilt and anger overpowers you. Whatever the feeling may be, or even if you do not have any feeling at all, you must take care of yourself after you have gone through the abortion procedure (*Dunn, 2016*)

Lifestyle-Associated Factors to abortion that are many factors related lifestyle that's leads to abortion, it is known that smoking during pregnancy is harmful not only to smokers but also to the fetus. A number of studies have reported that active smoking and passive smoking among pregnant women is a major cause of abortion, premature births, stillbirths, and many other complications such as placenta Previa, placental abruption, and a shorter gestation period. (*Dunn, 2016*)

Counseling is a face-to-face communication by which you help the person to make decision or solve a problem and act on them (*Davis, 2017*)

Counseling aims to help you deal with and overcome issues that are causing emotional pain or making you feel uncomfortable. It can provide a safe and regular space for you to talk and explore difficult feelings. The counselor is there to support you and respect your views. They will not usually give advice, but will help you find your own insights into and understanding of your problems (*Krasner, 2016*)

A woman seeking an abortion may be in dire psychosocial straits, including ignorance, financial hardship, lack of contraception, strained relationships, physical or sexual abuse, immaturity, impulsivity, and social isolation. She may be highly ambivalent about the pregnancy, failing to explore adequately her attitudes toward herself, her unborn child, and her partner

Lifestyle counseling is a serious aspect of post abortion because aborted women have an increased risk of severe complications Fears about the impact of nutrition style upon aborted women, blood loss, smoking, sleep disturbance, inappropriate family planning methods and the emotional status are generating alarm and serious complications plus, the evidence is mounting that a high fear after abortion increases mothers risk of developing post abortion trauma so performing proper counseling regard nutrition, sleeping, family planning methods, sexual changes, exercise and regular daily activities the main key for reducing post abortion complications and enhance the women life (*Nazario, 2017*).

Maternity nurse is a core stone for woman and fetus health services from primary to tertiary level of prevention. Nurses interact daily with aborted woman to offer accurate information about abortion and its effect on lifestyle. counseling for abortion information, health and unhealthy lifestyle through post abortion time; decision making to promote and participate in successful interventions during post abortion which promote positive health behaviors and reduce health risks through multiple roles as (a counselor, educator, manager, care provider and researcher) (*Cherie, 2017*).

Significance of the study:

Post abortion counseling is the nursing concern because nurses played a multi-disciplinary role during post abortion as a direct care providers, manager, educator, counselor, and as researcher to promote post abortion woman health which sequentially had reflected bone minimizing mortality and morbidity, correcting misconceptions and ill health behaviors post abortion among patient.

As well as improving woman lifestyle post abortion. (*Ferreira, 2018*).

Aim of the Study: -

To study effect of post abortion counseling on woman life style through:

Assessing post abortion women knowledge about abortion & its management, Assessment of woman health needs and problems for post abortion women, Implementing post abortion counseling session, Evaluating the effect of counseling on woman life style.

2. SUBJECTS AND METHODS

Technical design

The technical design includes research design, setting, subject and tools of data collection.

Research design

Quasi-expermntal research was conducted for this study.

Research setting

The study was conducted at post natal room in AIN Shams University, maternity hospital.

Research subjects

Purposive simple random sample was obtained from the previous mentioned setting; the sample size was calculated by power analysis, which based on statistical flow rate for aborted women in 2016-2017 year who is attended in theater room at Ain Shams University maternity hospital. The size was 116 aborted women that represented 10 % of total number (1160).

Tools and technique of data collection

Data required for the current study were collected using the following tools:

(I) Pre-designed Questionnaire Sheet:
1. Arabic Structured interviewing questionnaire sheet: (Appendix II)

Constructed by the researcher after reviewing advanced of literature related to study topic, putting into considerations the aim of the study and the data needed to be collected from the study subjects. It consists of 35 questions (open and closed questions) divided into Three parts:

Part (A): General Characteristic of the study sample which included (questions 1-4):

This part was concerned with general characteristics such as age, marital status, and educational level, type of occupation and area of resident.

Part (B): Which included (5-10 question):

It was concerned related to past history as any chronic disease, allergy from any medication, and presence of fibroid tumor, etc.

Part (C): (11-12 questions):

It was concerned with family history as complaining from any chronic disease, complaining from autoimmune diseases.

- Tool (II) Woman's knowledge regards abortion and management involved (7 questions): (Appendix III).

Designed by (Walsh et al.,2016) this tool was translated into simple Arabic language to assess woman's knowledge regards abortion meaning, signs and symptoms, causes of abortion, types of abortion, predisposing factors, complications, management of abortion. Each question was evaluated as complete answer score 2, average answer score 1, incomplete answer score zero. as while total correct answer was more 70%, while average answer from 50 to 69, while the total incorrect less than 50%. This tool was utilized pre intervention, four weeks and 8 wks. Post intervention.

3- Lifestyle assessment tool: (Appendix IV)

It was included (12- statements) it designed by the researchers and was used to assess the lifestyle during pregnancy and post abortion. The tool which included all lifestyle during pregnancy as junk food style, smoking, addiction to caffeine or alcohol, hard worker, obesity during pregnancy high temperature, using of creams or herbal methods during intercourse, exposure to radiation, sleeping hours, gym exercises. Each question was as each statement evaluated as yes or no yeas for health and no for un healthy lifestyle.

4- Supportive in structural booklet for aborted women: (Appendix IV)

The researcher hand a designed booklet about abortion and its management a simple, clear, Arabic language to enhance woman knowledge and health behaviors post abortion. It was designed for aborted women to enhance women knowledge. And this booklet includes the important elements of which meaning of counseling, important of counseling, meaning of abortion, signs and symptoms, predisposing factor of abortion, types of abortion complication of abortion, management of abortion, and healthy life style after abortion.

5- Follow up after post abortion counseling tool: (Appendix IV)

It was designed by the researchers after. The tool included the Follow up of aborted woman after post abortion counseling as efficiency of counseling session, advantages, degree of satisfaction, expiration about the counselor etc.

6- Follow up after using of session booklet tool: (Appendix IV)

It was designed by the researchers after. The tool will included the feeling changes, internal feeling expression, fear and needs discussed, wrong knowledge correction, decision support, obstacles or complication etc.

Scoring system for the knowledge questions:

Each knowledge assessment item (7questions) was given:

Complete correct answer 3 grades, Incomplete answer 2 grade, Incorrect answer 1 grade

Total score as follows:

- Satisfied knowledge indicated above (70%).
- Average knowledge indicated from (50-70%).
- Unsatisfied knowledge indicated less than (50%).

Validity and Reliability:-

Tools of data collection used in the study are standardized tool with no modifications or translation.

Ethical Consideration

An official approval was carried out from The Scientific Research Ethics Committee Faculty of Nursing, Aim Shams University before conducting of the study. A written consent was obtained from the studied women. The researcher explained the aim of the study to the studied students who accepted to be enrolled in the study. Each woman was informed that she has the right to drop out / withdraw at any time without any restrictions. Anonymity, confidentiality, beneficence, research purpose only, respect and justice all of these ethical consideration principles taking into consideration while conducting this research study.

Statistical design

The collected data were organized, revised, tabulated, and analyzed. Computer using statistical package of social science (SPSS 20) did statistical analysis. The suitable statistical tests were used to determine whether there was a significant statistical difference between study variables or not.

3. RESULTS

Table 1: Characteristics of the studied subjects (N= 116).

Item	N	%
Age		
• 20 < 25 years old	38	32.7
• 25 < 30 years old	15	13
• 30 < 35 years old	19	16.4
• 35 ≤ 40 years old	44	37.9
$\bar{x} \pm SD 30.5 \pm 7.5$		
Education		
• Illiterate	40	34.5
• Primary	20	16.2
• Secondary	30	25.9
• University	26	22.4
Income		
• 1000 < 1500	59	50.8
• 1500 < 2000	21	18.2
• 2000 < 2500	19	16.4
• 2500 ≤ 3000	17	14.6
$\bar{x} \pm SD 1666.3 \pm 591.3$		
Work		
• Work	83	71.6
• Not work	33	28.4
Type of work		
• Office work	10	8.6
• Practical Work	60	51.7
• Technical Work	46	39.7

Regarding the characteristics of the studied subjects

Table (1) showed that (37.9%) of the studied subject were aged from (35-40 y.). and (34.5%) of them illiterate, while half of studied subject, (50.8%) had low income, almost three quarters (71.6%) of them worked.

It was clarified from this figure that more than half (55%) of studied subject delivered more than one before.

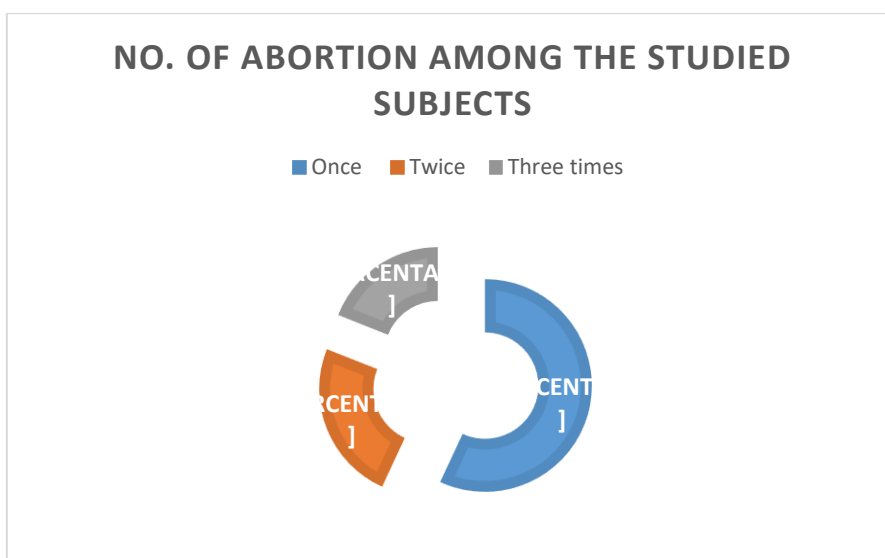


Figure 1: No. of Abortion among the studied subjects (N= 116).

This figure clarified that more than half of studied subject aborted three times before.

Table 2: Knowledge of the studied subjects related to abortion (N= 116).

Item	Satisfied		Average		Dissatisfied	
	N	%	N	%	N	%
Abortion definition	16	13.8	40	34.5	60	51.7
Causes of abortion	30	25.9	20	17.2	66	56.9
Types of abortion	24	20.7	4	3.4	88	75.9
Abortion risk factors	24	20.7	37	32.9	55	47.4
Complications of abortion	4	3.4	10	8.6	102	87.9
Treatment regimen of abortion	24	20.7	40	34.5	52	44.8
Guidance and supporting for abortion	20	17.2	26	22.4	70	60.4
Total	20	17.2	26	22.4	70	60.4

Concerning to the studied subject knowledge about abortion and its management table (2) clarified that more than half of women (51.7%) don't know abortion definition, more than two thirds (87.9%) don't know the complications of abortion, In addition more half don't know the guidance and supporting of abortion.

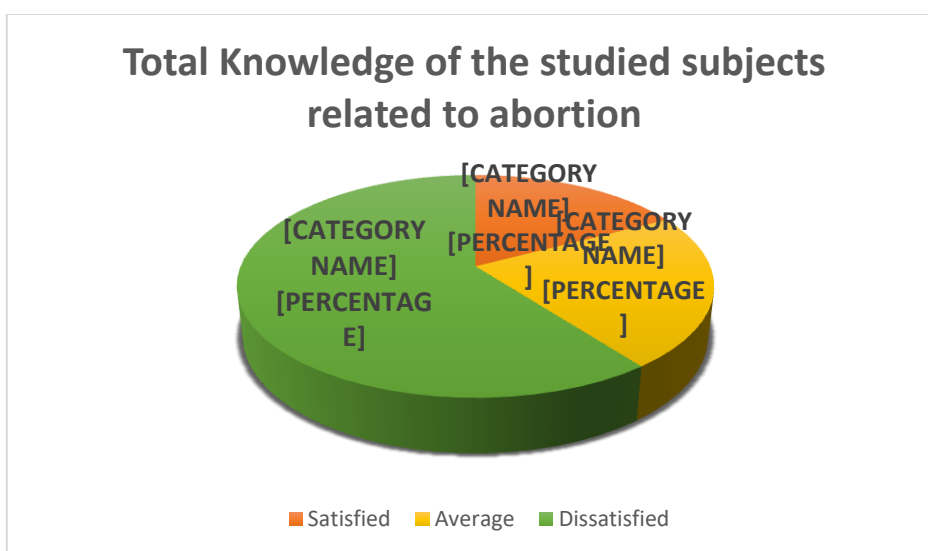


Figure 2: Total of studied subjects' knowledge related to abortion (N= 116).

Presented that more than half (60%) of studied subject had total dissatisfied knowledge related to abortion.

Table 3: Studied subjects' life style (N= 116).

Item	Healthy life style		Unhealthy life style	
	N	%	N	%
Smoking	36	31	80	69
Drinking Alcohol	116	100	0	0
Drinking \ consuming caffeine	32	27.6	84	72.4
Hard working life style	38	32.8	78	67.2
Over weight	61	52.6	55	47.4
Exposing to high temperature	112	96.6	4	3.4
Eating junk food	30	25.9	86	74.1
Practicing exercises	10	8.6	106	91.4
Sleeping enough	42	36.2	74	63.8
Total	53	45.7	63	54.3

Table (3) clarifies that, there were more than half of women (69%) smoking during pregnancy, (72%) consuming caffeine, In addition more than half of women (67%) hard workers. There were more than half of studied subject (54%) had unhealthy lifestyle during pregnancy.

Table 4: Physical and Psychological needs of the studied subjects (N= 116).

Item	N	%
Physical needs		
• Diet regimenting	16	13.8
• Practicing exercise	10	8.6
• Exposure to physical problems	74	63.8
• Using of Family Planning Methods	56	48.3
• Need to know about danger signs of abortion	92	79.3
• Wearing suitable clothes	104	89.7
Psychological needs		
• Psychological support	30	25.9
• Ignoring anxiety	48	41.4
• Busy about abortion questions	82	70.7
• Need to know more about abortion	111	95.7
• Travelling	64	55.2
• Thinking about children	74	63.8
• Need to read more about abortion	76	65.5

Regarding the studied subjects physical and psychological needs **table (4)** revealed to (79.3%) of women needs to know about danger signs of abortion, it was more than half (65.5%) need to read more about abortion and its managements, in addition (25.9%) need to psychological support after abortion.

Table 5: Impact of post abortion counseling session on studied subjects' lifestyle.

Item	Positive impact		Neutral impact		Negative impact	
	N	%	N	%	N	%
Smoking	80	68.9	20	17.2	16	13.8
Drinking Alcohol	70	60.3	16	13.8	30	25.9
Drinking \ consuming caffeine	60	51.7	16	13.8	40	34.5
Hard working life style	80	68.9	20	17.2	16	13.8
Over weight	70	60.3	16	13.8	30	25.9
Eating junk food	60	51.7	16	13.8	40	34.5
Practicing exercises	80	68.9	20	17.2	16	13.8
Sleeping enough	60	51.7	16	13.8	40	34.5
Total	70	60.3	18	15.6	28	24.1

By investigating the study subject regards the impact of post abortion counseling on lifestyle **table (5)** represented that, more than half (60.3%) had positive impact of counseling session on lifestyle as (68.9%) for smoking, (51.7%) for consuming caffeine, (68.9%) for hard working, in addition, (24%) had negative impact as (25.9%) for over weighting, (34.5) for sleeping hours.

4. DISCUSSION

Counseling is a serious aspect after abortion because post aborted women have an increased risk of severe problems (*Nazario, 2017*). Fears about the impact of abortion and their family are generating alarm and serious complications plus, the evidence is mounting that a high problems during post abortion period increases risk of emotional, physical, psychological problems so performing proper counseling regard lifestyle especially exercise, nutrition, sleeping, care, addiction, family planning is the main keys for reducing post abortion complications.

A Qausi-expermental study is done; the aim of the study was to study effect of post abortion counseling on woman life style.

Study will be conducted at post delivery room in AIN Shams University, maternity hospital. All cases will be collected through six months according to total ratio through two years ago in the hospital for abortion cases, the previous hospital statistics in last year is (1160), (116 case out of 1160 aborted women attend in year 2017).

Different age group, education level and socio-economic levels, Free from any problems or medical complications. Further- more, as pointed out by (Murphy. 2017). it draws a dividing line between a 'selfish' choice and a 'responsible' one, emphasizing the unacceptability of abortion for women financially capable of supporting a child and ignoring the fact that they might not want to become mothers ever or they feel unprepared to raise a child at that particular time of their lives. These arguments and the results of our study suggest the need to conduct research on women's thoughts and feelings towards this dimension of counselling in order to determine whether it should remain compulsory.

Fears about the impact of abortion and their family are generating alarm and serious complications plus, the evidence is mounting that a high problems during post abortion period increases risk of emotional, physical, psychological problems so performing proper counseling regard lifestyle especially exercise, nutrition, sleeping, care, addiction, family planning is the main keys for reducing post abortion complications. (Nazario, 2017).

So the researcher suggested the present study to assess the effect of post abortion counseling and its effect on woman lifestyle has many challenges regarding aborted women and has few statistics regard it.

Eat healthy, good rest, good hygiene, prober management, prober emotional support and lifestyle healthy' is the essential requirements for long life. Unfortunately, today's world has been adapted to a system of counseling which has several effects on health. Lifestyle changes has compelled us so much that one has so little time to really think what we are eating, sleeping, hygiene, working is right! National and international have greatly affected ones counseling and forced many governmental and privet hospital to implement post abortion counseling. (Wilson, 2017).

As per Montgomery (2016) Instead of following an outdated approach focused on the prevention of post-abortion emotional sequel and the provision of decision-making support that used to be more common until the early, Research has shown that most women do not exhibit post-abortion emotional sequel, except in specific situations related either to individual characteristics or particular life circumstances.

Mothers who can be addicted to drugs, cigarettes, alcohol, caffeine, and many other things. When somebody is addicted to something, they can become sick if they do not get the thing they are addicted to. But taking more of the thing they are addicted to can also hurt their health and make problems such as pregnancy loss (Oken et al., 2017).

Obesity has increased dramatically over the last few years and needs to be tackled urgently," says Dr Pat Goodwin, (2017). Head of Pathogens, Immunology and Population Health at the Wellcome Trust. "This study supports the idea that there are many different risk factors that can lead to someone being overweight and developing related health problems such as abortion. Pregnancy can be a difficult time for many mothers, but it is important that they are aware that what they eat may affect negatively.

This study partially depicts what the assessment of post abortion women lifestyle. It would be interesting to replicate the investigation in other regions of the country, especially rural areas, where things may be different. Given the fact that the study is based on an account of what abortion, post abortion is and not on its direct observation, the results may not reflect the reality. (Wilson, 2016).

The present study that revealed the prevalence of smoking increased between women with high standard, workers and urban neighborhoods this result disagree with study done by (Michael and Brown et al., 20017). He found the Prevalence of smoking in low-income urban neighborhoods.

The present study that revealed the expansion of the chemical industry is accompanied by growing concerns over associated health hazards. Purposive sample studies show a positive association between the abortion and with state-level of work finding was on the same line with a study done by (Maddock, 2016).

If the unhealthy part of the lifestyle space represents the more 'risky' space then why is it generally occupied by As a final rejoinder to those who doubt the prevalence of class oriented culture and assume that the working classes lead unhealthy lives more frequently because of ignorance and a lack of education (Ely, 2014)

Investigating knowledge level about lifestyle counseling for post abortion woman, the present study showed that more than half of women had incorrect knowledge level regarding health lifestyle. Moreover, these results were in accordance with a study done by (Majane et al, 2017). He found that level were mostly affected of low educated mother Furthermore, it showed increase health impact in relation to education rather than women with correct knowledge about lifestyle.

Previous studies have found that social behaviors can be primed by environmental cause. For example,

Exposure to radiation of an worker woman in medical field led to pregnancy loss (*Aarts & Dijksterhuis, 2015*).

Another important aspect is that there were some Socio-demographic variables that include gender, age, level of education, employment status, profession he house and living arrangements. The last three variables were used as potential measures of prevalence on abortion (*By Kumarapeli et al., 2016*).

According to (*Mary and Juli, 2015*) counseling needs increase during post abortion period. Prober counseling is has positive effect on woman lifestyle and required to support woman and their family to beginning new life with healthy lifestyle.

This study partially depicts what the effect of post abortion counseling's on women lifestyle. It would be interesting to replicate the investigation in other regions of the country, especially rural areas, where things may be different. Given the fact that the study is based on an account of what abortion, counselling is and not on its direct observation, the results may not reflect the reality. (*Wilson, 2016*).

For most measures, remote lifestyle counseling rates were also associated with faster time to target, but hazard ratios were smaller than those for face-to- face lifestyle counseling. A combined face-to-face and remote lifestyle counseling rate analysis was also conducted; results for this multivariable analysis are provided in Supplementary Appendix an are more likely to have had no counseling episodes. However, this bias would have predisposed against the strong inverse association between lifestyle counseling and the length of uncontrolled periods that we have found. Furthermore, most uncontrolled periods in our study were substantially longer than the average observed rate of lifestyle counseling, making an artefactual association between lifestyle counseling rate and the length of uncontrolled period unlikely (*Johnson, 2017*).

Limitation of the study

Limitation of this study has similar limitations with other studies in this field: generalization of the study findings is limited because of convenient sampling methods. Hesitancy by participants to disclose the truth in fear of repercussions or in attempts to make oneself look good contributes to response bias. In an attempt to minimize the response bias limitation, the researcher emphasized to participants that the purpose of the study was for exploration of the topic, and understanding the nature of academic dishonesty among postgraduate nursing students as a whole, was the focus of the study.

5. CONCLUSION

Based on the findings of the present study, it is concluded that:

More than half of the studied sample developed poor knowledge regarding to abortion and its management, More than half of the studied sample aborted three time before, More than half of the studied sample had a family history disease, More than two third of studied subject had satisfied knowledge after post abortion counseling session More than two third of the studied sample had physiological and psychological needs.

More than one third of the studied sample developed in complete knowledge regarding to healthy lifestyle, One third of aborted women of the studied sample developed health problems for mother and her family, Half of the studied sample developed health problems in relation to lifestyle, More than half of the studied sample in relation to Abortion counseling can have a profound impact on a woman's life, The majority of studied subjects had satisfactory opinion related to booklet

6. RECOMMENDATIONS

Based on the study findings the following recommendations are suggested:

- Counseling program for women with abortion problems and life style modification.
- Educational programs and messages through the counseling session, counseling booklet, brochures, to increase women awareness about effect of unhealthy lifestyle.
- The government could also take an active role in litigation against Corporations responsible for illegal pregnancy.

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- Further research through studying the effect of life style modification on post abortion out come
- Services most often recommended included psycho education about the emotional component of abortion and referrals to counseling, support groups, and other resources for obtaining emotional support and connecting to others who have experienced abortion.
- There is a clear need for increased research on the efficacy of interventions and programs that seek to post-abortion woman in order to inform the establishment of best practices for post-abortion care.
- Consideration should also be given to the commissioning of a new programme of research involving major stakeholder groups, including national and international non-governmental organizations.
- Conduct rigorous evaluations with research designs that can provide conclusive evidence about the impact of post-abortion counseling and services in low income countries and measure outcomes of importance, such as repeated abortions, unplanned pregnancies, use and type of contraceptive and unhealthy lifestyle.

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