

Learning Abortion Care

Working with women who elect to have an abortion poses difficulties for the nurse—professionally and psychologically. One student describes the patients' and her own needs.

ALICE GOLDMANN

Abortion in India has been legalized. The new Law on Medical Termination of Pregnancy came into force on April 1.

State Medical Boards are being formed and private hospitals are being registered to handle abortion cases.

A rough estimate shows that 20,000 additional hospital beds will be required in the country to handle immediate cases. Hospitals in Delhi have a long waiting list, it is reported. Where are the beds and the staff in the already over-crowded hospitals?

Nurses have a great role to play in dealing with abortion cases. In this article Miss Goldmann speaks of her experience when a similar law came into force in New York.

—Editor

WHAT are some of the problems faced by women who choose to terminate their pregnancies by abortion? And how can nurses help them to cope with these problems? I found some answers to these questions when I worked in a municipal hospital as a licensed practical nurse during the summer between my third and fourth year of my baccalaureate nursing program.*

The New York State legislature had just passed its new, permissive abortion law, and women were flocking to the hospital's recently created abortion service. Here in a clinic setting, each patient received

a physical examination, a Pap smear, blood tests, and had a family and medical history taken. A nurse then explained to each the specific procedure that had been prescribed for her—either a D and C or a saline induction, depending on the length of pregnancy—and she encouraged each patient to talk about her feelings toward the pregnancy, the prospective abortion, the baby's father, sex, and her concept of herself as a woman.

Patients with obvious ambivalence about the abortion or those who had serious other problems were referred to a social worker or psychiatrist in the unit, or to the protestant chaplain. For the rest, a date was set for admission, usually within days of this visit and sometimes immediately. An average of 75 abortions were completed each week through this service.

The women came in all sizes and shapes; they were young and middleaged, black and white, poor and well-to-do, married and unmarried, selfconfident, and scared. Some requested an abortion in a clear, calm manner; others were hesitant and afraid, glancing furtively about, their eyes pleading for some warm understanding person. "Hi, you look kind of lost. Can I do something to help you?" was the greeting on my lips constantly that summer.

They came at all hours, alone or with friends, from within or outside the state, from the city, or the local neighborhood. Some brought suitcases, others did not even have a toothbrush. Many, afraid that their families or others close to them would discover their secret, had "gone away for the weekend" and urged haste—to get home Monday.

A few patients came after visits to other hospitals or offices of private physicians, where they had been saline induced and sent home with instructions to bring the fetus and placenta back in a plastic bag "to insure that everything had been expelled." After labor had begun at home, they had come to our hospital in a panic, not knowing what to expect, and afraid of dying or becoming very sick.

Some patients appeared carefree and self-assured; others retreated to an inner world that was difficult to reach. The younger ones were often fearful—frightened of the hospital, the procedure and its physical consequences, and perhaps of their own thoughts. The older women sometimes seemed to be in a state of controlled despair. One of them whispered to me, "I thought my life was settled, my goals set, my children almost grown, and my life in order. How do I explain this, now?"

As I watched these women come and go, some with astonishing psychological strength, others foundering under crushing burdens. I wondered where they found the strength for this traumatic event? How they could "bear with unbearable sorrow" and "run where the

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*The New York City Department of Hospitals accepts 1-year permits granted by the New York State Education Department to baccalaureate nursing students, who have completed three years of study, to function in the job description and pay scale of a practical nurse under the supervision of an R.N.