

SELF-ESTEEM AMONG PRIMIGRAVID WOMEN AFTER ABORTION: A DESCRIPTIVE ANALYSIS

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ABSTRACT

Background: Self-esteem is a key determinant of emotional well-being. Pregnancy loss can significantly diminish self-esteem, especially among primigravida women who may internalize the loss as personal failure. Understanding their psychological needs is essential for effective post-abortion care.

Objectives:

1. To assess the level of self-esteem among primigravida women following abortion.
2. To find out the association between self-esteem and selected demographic variables.

Methods: A quantitative exploratory design was used. A total of 280 primigravid post-abortion women were selected through purposive sampling from hospitals in Dadra and Nagar Haveli. Data were collected using a demographic data sheet and Rosenberg Self-Esteem Scale. Ethical approval and informed consent were obtained.

Results: The mean self-esteem score was 15.03 ± 2.80 . Among 280 participants, 38.93% had low self-esteem and 61.07% fell within the normal range. Significant associations were found with age, education, and occupation.

Conclusion: Post-abortion primigravid women show notable psychological vulnerability, underscoring the need for individualized counselling and supportive care to enhance self-esteem.

Key words: Self-esteem, Post abortion, Primigravid

INTRODUCTION

Self-esteem, the fundamental sense of personal worth, plays a vital role in mental well-being and overall success. It shapes an individual's thoughts, emotions, and behaviours. While healthy self-esteem fosters confidence, resilience, and positive relationships, low self-esteem can result in self-doubt, anxiety, withdrawal, and increased susceptibility to depression. Building strong self-esteem is therefore essential for motivation, happiness, and a meaningful life. Pregnancy often enhances a married woman's self-esteem, as motherhood is viewed as a highly significant life event. However, unexpected complications such as bleeding or the absence of fetal heart sounds can arise during pregnancy. Experiencing a pregnancy loss is deeply traumatic, affecting women both physically and emotionally, often leading to stress and diminished self-esteem. During such vulnerable moments, providing both physical and psychological support is crucial. Unfortunately, many women receive limited attention from family and society, and while physical care may be available, their emotional and mental health needs are frequently overlooked.

Most women experience a decline in self-esteem after a miscarriage, but this effect is often more pronounced among primigravida women. Because it was their first attempt at motherhood, they may interpret the loss as a personal or biological failure, leading to feelings of inadequacy and identity disruption. Qualitative research on first-time miscarriage shows that several interconnected factors contribute to diminished self-esteem in primigravida women. Many interpret the experience as a sign of biological inadequacy, often feeling that their bodies have failed them. The findings by Sabit and Fadhil (2022), states that women frequently experience shame and a sense of not fulfilling their roles as wives or women after abortion. Without any previous successful pregnancy to reassure them, primigravid women also tend to internalize the loss through guilt and self-blame, questioning their own actions or habits and turning grief into personal fault. Additionally, in cultural contexts where motherhood represents a key social milestone, the inability to transition into this role after a first pregnancy loss can create a sense of disrupted identity and social inferiority, further undermining their self-esteem. Studies shows a significant relationship between reproductive history (number of abortions/living children) and psychological quality of life. Women with no living children reported lower scores in psychological domains. The current study aims to assess the level of self-esteem of primigravid post abortion women and to identify association between self-esteem score and selected demographic variables.

OBJECTIVES

- To assess the level of self-esteem among primigravid women who had undergone abortion.
- To find out the association between level of self-esteem and selected demographic variables.

RESEARCH METHODOLOGY

The study employed a quantitative research approach using an exploratory design. It was carried out in selected hospitals across Dadra and Nagar Haveli, where a total of 280 post-abortion women admitted to these facilities were recruited as the study sample.

Sampling Technique: The study utilized a non-probability purposive sampling method.

Description of Tool: The tool consists of a Structured Data Sheet which includes the demographic variables and Structured Interview Schedule related to self-esteem by Rosenberg Self-Esteem Scale

Ethical Considerations: Ethical approval was obtained from Institutional Ethical Committee of Dadra Nagar Haveli, India. Participants were informed about the study's objectives, the voluntary nature of their involvement, and their freedom to withdraw whenever they wished. Written informed consent was obtained prior to their inclusion, and strict measures were taken to ensure confidentiality and anonymity throughout the research.

Data Collection: Data collection for study was done from the post abortion women who were admitted at selected hospitals of Dadra & Nagar Haveli from the period of January 2024 to February 2025.

RESULTS

All the demographic and self-esteem parameters were analysed using descriptive statistics i.e., frequencies & percentages and proportions were calculated.

PART – I: The Mean and Standard Deviation of items in Self-Esteem score of post abortion women (Rosenberg Self-Esteem Scale (RSES))

N= 280

Sr. No.	Item	Mean	STD DEV
1	On the whole, I am satisfied with myself.	0.89	0.75
2	At times, I think I am no good at all.	1.63	0.86
3	I feel that I have a number of good qualities.	1.78	0.81
4	I am able to do things as much as most other people.	1.60	0.79
5	I feel I do not have much to be proud of.	1.41	0.80
6	I certainly feel useless at times.	1.43	0.78
7	I feel that I'm a person of worth, at least on an equal plane with others.	1.70	0.78
8	I wish I could have more respect for others.	1.47	0.78
9	All in all, I am inclined to feel that I am a failure.	1.35	0.79
10	I take a positive attitude toward myself.	1.78	0.80
	OVERALL SCORE	15.03	2.80

PART – II: Frequency & Percentage Distribution of Self Esteem Among Post Abortion Women

N= 280

SELF ESTEEM	PRETEST	
	Frequency	%
1. Low Self esteem	109	38.92857
2. Within Normal Range	171	61.07143
Total	280	100.00

PART – III: Statistical Associations

Chi-square tests revealed significant associations between the level of self-esteem and selected socio-demographic variables:

- Age ($p < 0.01$)

- Religion ($p < 0.09$)
- Education of respondent ($p < 0.01$)
- Education of spouse ($p < 0.7$)
- Occupation of respondent ($p < 0.011$)
- Occupation of spouse ($p < 0.38$)
- Area of residence ($p < 0.21$)

These findings suggest that age, educational status of the participants and their occupation have significant association with their self-esteem status in the post abortion period.

DISCUSSION

The findings show the frequency and percentage distribution of self-esteem among 280 post-abortion women during the pre-test. Out of the total participants, 109 women (38.93%) exhibited low self-esteem, indicating that a considerable proportion faced reduced self-confidence and emotional vulnerability following abortion. Meanwhile, 171 women (61.07%) had self-esteem within the normal range, suggesting that the majority were coping adequately with their psychological well-being. These results emphasize the importance of identifying women with low self-esteem and providing appropriate psychological support and interventions to enhance their emotional health.

A comparable study titled Psychological Consequences of Abortion among Post-Abortion Care Seeking Women in Tehran (2012) conducted among 278 women aged 15–49 who sought post-abortion care for either medical or illegal abortions, reported that approximately 43.7% experienced a decline in self-esteem. The study also identified several other psychological concerns, including feelings of guilt and regret, anxiety about future fertility, and noticeable changes in eating patterns.

CONCLUSION

The finding of the study results highlights the importance of recognizing the psychological impact of abortion and emphasize the need for timely emotional support, counselling, and appropriate post-abortion care interventions to promote overall mental health and enhance women's self-esteem during recovery. One to one attention and individual counselling of all post abortion women during the particular period plays a crucial role in the mental wellbeing of such victims.

RECOMMENDATIONS

The study findings highlight the need for multiple measures to enhance the psychological well-being of post-abortion women. Strengthening post-abortion counselling through structured programs can help address emotional distress, build self-confidence, develop coping skills, and support future reproductive health. Enhancing social support systems by involving families and encouraging peer support groups can provide emotional reassurance and reduce feelings of isolation. Integrating mental health services into post-abortion care is essential, and routine screening for low self-esteem and other psychological issues should be included as a standard practice. Additionally, awareness and education campaigns at the community level can help reduce stigma related to abortion and promote understanding of women's emotional needs. Follow-up care should extend beyond physical recovery to include periodic assessments of psychological well-being. Finally, policy development is necessary to ensure access to comprehensive, compassionate, and stigma-free post-abortion care services for all women.

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