

## **Developing a strategy to improve key aspects of induced abortion care in Turkey: learning lessons from Scotland**

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**Objective:** To develop a strategy to improve key aspects of abortion care in Turkey.

**Methods:** This study set out to determine transferable lessons from the experience elsewhere (Scotland) of action to improve abortion care. Following a literature review, an interview survey of people involved in different levels of abortion care focused on barriers to and promoters of evidence-based abortion care. A framework of potential barriers and promoters was developed to inform an evidence-based, preliminary implementation strategy for Turkey.

**Results:** Abortion care in Scotland is generally good – but important inappropriate variations in care, which require further action are recognised. Some barriers and promoters are specific to abortion care or unique to Scotland whilst others are relevant to other change proposals. Social factors, such as the positive influence of peers, and organisational steps – mainly the centralisation of the service in some localities – made significant contributions to improved abortion care in Scotland. Factors at the individual level, such as the negative attitudes of some gynaecologists towards providing abortions, still appear to represent major barriers to improved care. The preliminary assessment of the barriers to and promoters of evidence-based abortion care in Turkey suggests that deficits in knowledge and motivation among health care professionals represent the main barriers to improved care. Evidence on the effectiveness of potential intervention strategies indicates that no “magic bullets” exist which could assure the desired change in Turkey. The effectiveness of many interventions to change professional and organisational practice is often context-dependent. Available evidence and theoretical models of change suggest that approaches to changing professional behaviour based upon empirically identified needs and barriers offer most potential for success.

**Conclusion:** The experience with of improving abortion care in Scotland guided the development of a strategy to improve abortion care in Turkey. However, any definitive strategy should be tailored according to systematically identified barriers and will require rigorous evaluation.