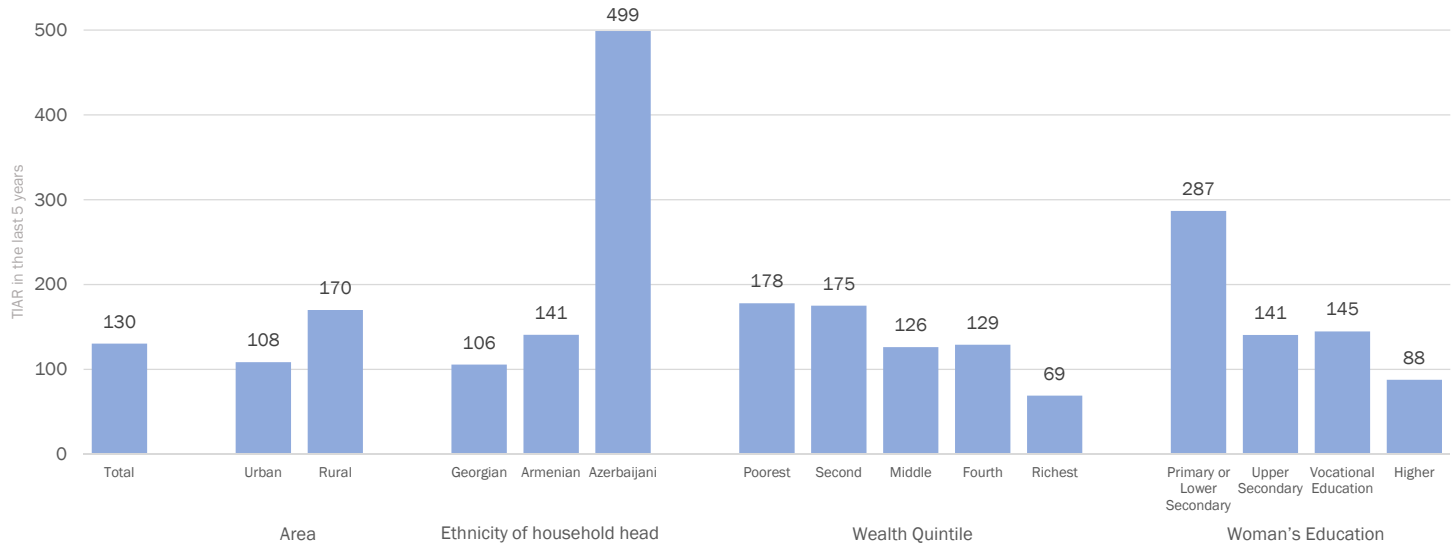
Georgia 2018

Interrupted Pregnancy

Multiple Indicator Cluster Surveys

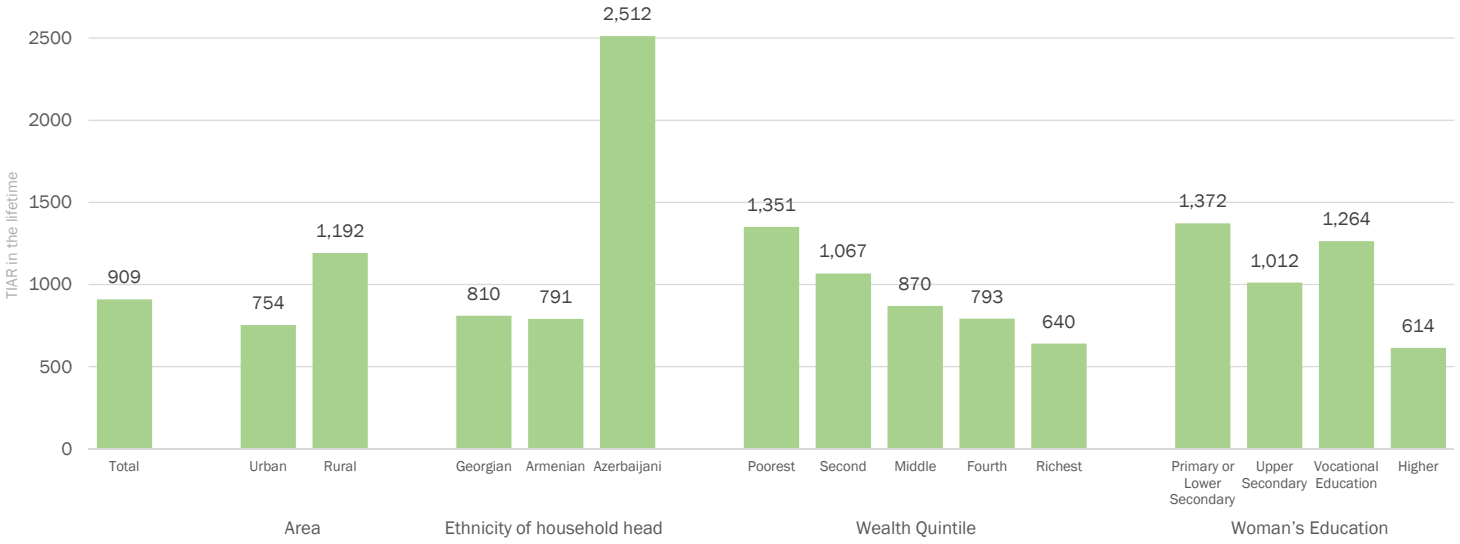
Stillbirth & Induced Abortion

Total Induced Abortion Rate (TIAR) in the Last 5 Years



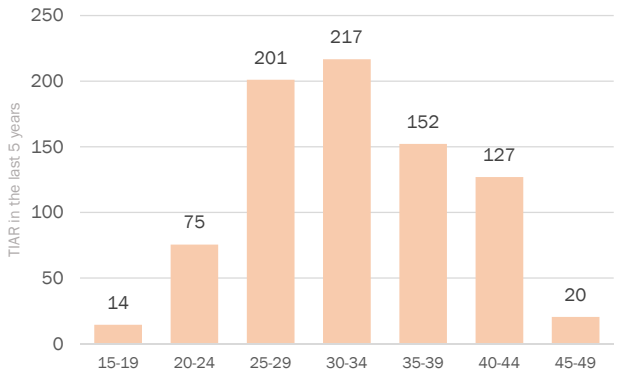
TIAR in the last 5 years: Number of abortions in the last five years per 1,000 women of reproductive age (15-49)

Total Induced Abortion Rate (TIAR) in the Lifetime



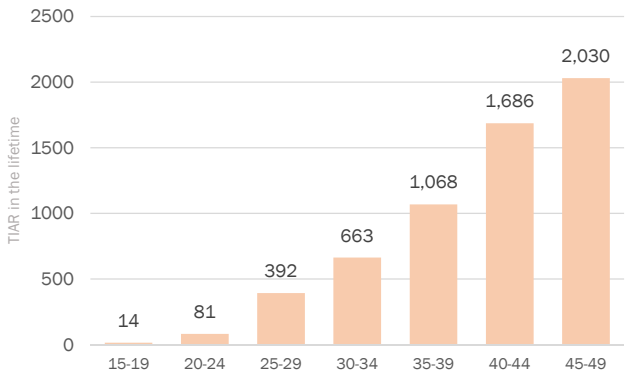
TIAR in the lifetime: Number of abortions in the lifetime per 1,000 women of reproductive age (15-49)

Total Induced Abortion Rate (TIAR) in the Last 5 Years by Age of Women



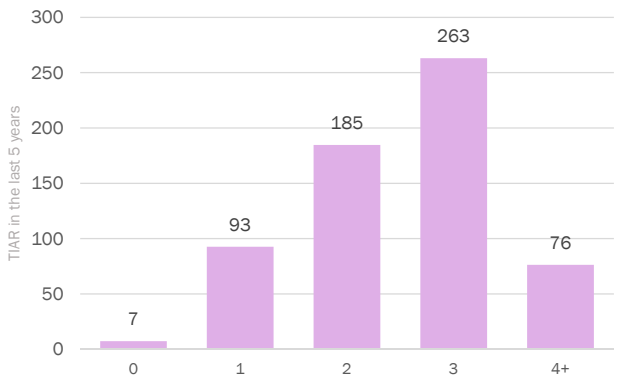
TIAR in the last 5 years: Number of abortions in the last five years per 1,000 women of reproductive age (15-49)

Total Induced Abortion Rate (TIAR) in the Lifetime by Age of Women



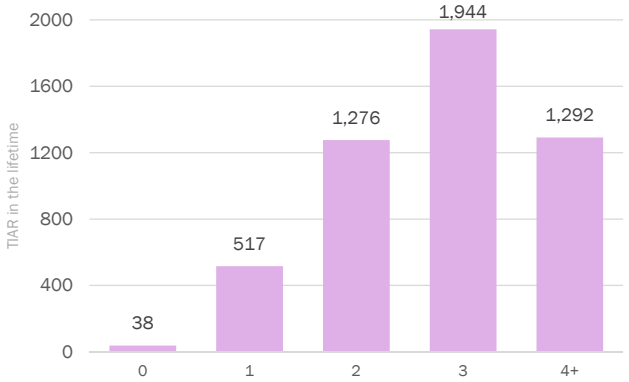
TIAR in the lifetime: Number of abortions in the lifetime per 1,000 women of reproductive age (15-49)

Total Induced Abortion Rate (TIAR) in the Last 5 Years by Number of Living Children



TIAR in the last 5 years: Number of abortions in the last five years per 1,000 women of reproductive age (15-49)

Total Induced Abortion Rate (TIAR) in the Lifetime by Number of Living Children

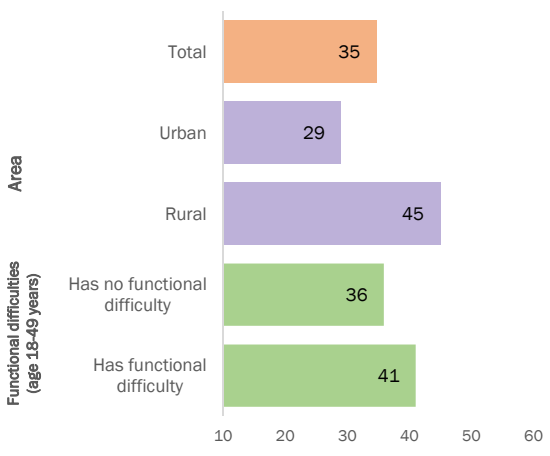


TIAR in the lifetime: Number of abortions in the lifetime per 1,000 women of reproductive age (15-49)

Stillbirth Rate

Stillbirth rate: Number of stillbirths per 1000 births (live births and stillbirths) among women age 15-49 years

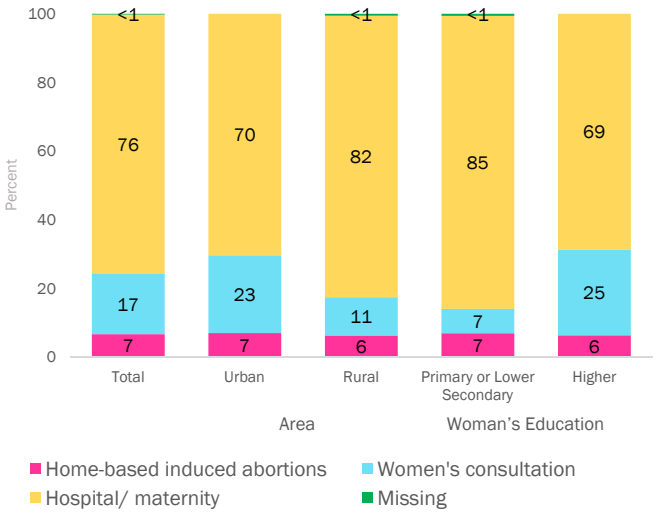
Average Number of Stillbirths Per 1000 Women



Average number of stillbirth per 1000 women age 15-49 years

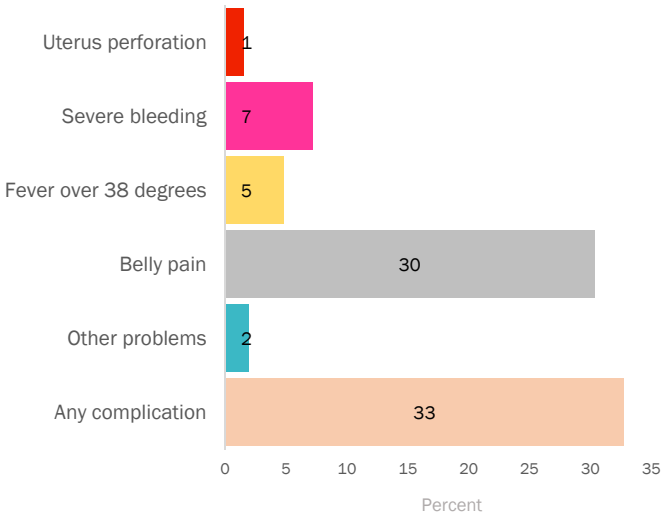
Last Induced Abortion in the Last 5 Years

Induced Abortion Performance Place



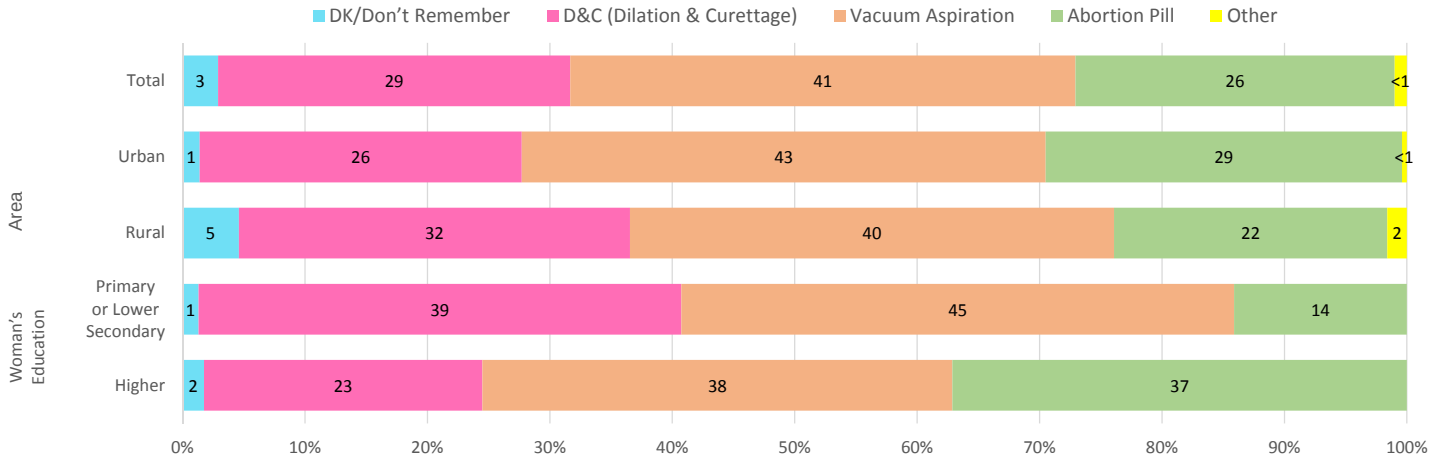
Percent distribution of women age 15-49 years with at least one induced abortion in the last 5 years by performance place of the last abortion

Early Post Abortion Complications



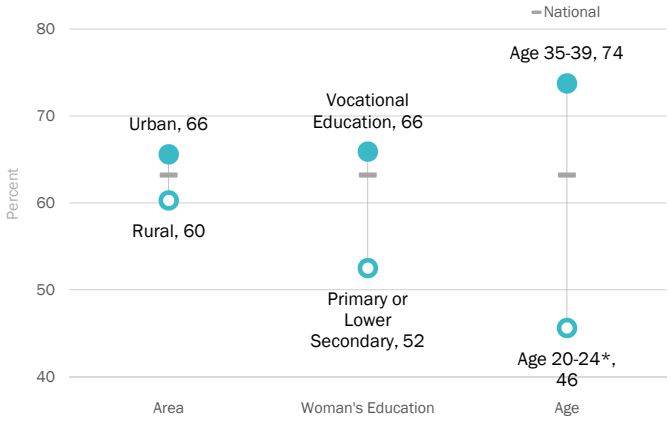
Percentage of women age 15-49 years with at least one induced abortion in the last 5 years, who experienced any complications in the last abortion

Induced Abortion Methods



Percent distribution of women age 15-49 years with at least one induced abortion in the last 5 years by method used for the last abortion

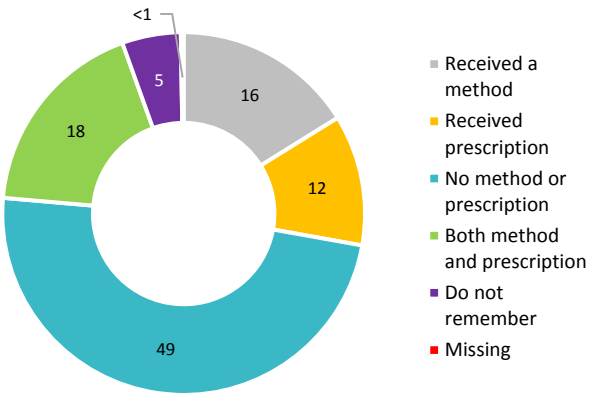
Contraception Counseling During Abortion Procedure



Percentage of women age 15-49 years with at least one induced abortion in the last 5 years, who received a medical counseling on contraception either before or after the most recent abortion

*Data for age category "Age 20-24" is based on 25-49 unweighted cases.

Contraception Provision After Abortion



Percent distribution of women age 15-49 years with at least one induced abortion in the last 5 years, who received a method of contraception or prescription for a method from the doctor after most recent abortion

Regional Data on Interrupted Pregnancy

Region	Total induced abortion rate (TIAR) in the lifetime	Total induced abortion rate (TIAR) in the last five years	Stillbirth rate	Home-based induced abortions	Pill induced abortion	Early post abortion complications	Contraception counseling during abortion procedure	Contraception provision after abortion
National	**909**	**130**	**22**	**7**	**26**	**33**	**63**	**46**
Tbilisi	775	111	22	6	33	28	66	47
Adjara A.R	460	71	17	9	25	29	76	54
Guria	1,180	139	28	7	18	60	74	55
Imereti, Racha-Lechkhumi and Kvemo Svaneti	679	79	24	(5)	(26)	(28)	(80)	(60)
Khakheti	1,360	153	25	7	37	53	62	44
Mtkheta-Mtianeti	1,093	170	18	3	27	32	56	36
Samegrelo-Zemo Svaneti	614	82	15	(6)	(12)	(38)	(73)	(55)
Samtskhe-Javakheti	755	130	25	0	17	22	41	27
Kvemo Kartli	1,681	298	19	7	14	39	46	32
Shida Kartli	1,335	155	32	11	34	19	75	62

( ) Figures that are based on 25-49 unweighted cases

Key Messages

- The TIARs in the lifetime are significantly higher among women aged 30 or older, suggesting that most women in Georgia achieve their desired family size before age 30 after which, in the event of having unplanned pregnancies, they are more likely to end them in induced abortions.
- Both TIAR (in the lifetime and in the last 5 years) are highest among residents of Kvemo Kartli (1681 & 298 abortions per 1000 woman) and the lowest TIARs are documented in Adjara (460 & 71).
- The TIARs (in the lifetime and in the last 5 years) are highly correlated with the wealth of the households, education of the women, number of living children and type of residence. Less abortions are experienced by women living in urban areas, who are better educated and wealthier.
- Abortion rates are the highest among women of the Azerbaijani ethnic group in comparison with all the other ethnic groups.
- Stillbirth rates are somewhat higher in rural areas, and is the highest in Shida Kartli (32), followed by Guria.
- Most induced abortions are performed in hospitals (76%); 17% are performed in ambulatory clinics, such as women's consultation clinics (WCCs).
- Almost 7% of pregnancy termination is reported to have taken place outside the health system; with the highest rates in Shida Kartli (11%).
- Abortions performed in ambulatory clinics were more prevalent in Tbilisi and other urban areas (23%) than in rural areas (11%); the proportion of abortions performed in ambulatory clinics increased with education.
- The proportion of abortions classified as "mini-abortion" (Vacuum aspiration (41%) & Abortion pill (26%)), in average 67%, increased somewhat with woman's education.
- Use of the surgical D&C procedure, which is no longer recommended by WHO, is still common in Georgia – 29%.
- Out of all early post abortion complication in the last abortions, 7% was related to severe bleeding; and 1% with Uterus perforation, which in turns is related D&G abortion procedure.
- Women living in rural areas experience early post abortion complications (41%) more frequently than those living in urban settings (26%); less educated and poor women are more affected, around 44%.
- Nearly 37% of women do not receive any family planning counseling services around the time of having an abortion (last case) in the last 5 years.
- From all respondents with an abortion in the last 5 years, only 46% reported receiving a contraceptive method and/or prescription from the doctor after most recent abortion, to prevent future unintended pregnancies.

The Georgia Multiple Indicator Cluster Survey (MICS) was carried out in 2018 by National Statistics Office of Georgia as part of the global MICS programme. Technical support was provided by the United Nations Children's Fund (UNICEF). UNICEF, NCDC, USAID, WB, UNFPA, SIDA, AFD, SCD, ISS, UNDP and WHO provided financial support.

The objective of this snapshot is to disseminate selected findings from the Georgia MICS 2018 related to Interrupted Pregnancy. Data from this snapshot can be found in table TM15.1CS, TM15.2CS, TM15.3CS and TM15.4CS.

Further statistical snapshots and the Survey Findings Report for this and other surveys are available on mics.unicef.org/surveys.