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Specifying a model for the study of reproductive choice

Especificación de un modelo para el estudio de la elección reproductiva

Especificação de um modelo para o estudo da escolha reprodutiva

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REVIEW ARTICLE

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Abstract

Objetive: The objective of this paper was to discuss and specify a model for the study of freedom of choice about termination of pregnancy.
Materials and Method: A documentary study was carried out with an intentional selection of indexed sources to Dialnet, Latindex, Publindex, Redalyc and Scielo from 1961 to 2019.
Results: Research design limited the results to the literature consulted, suggested the extension of the work based on the information published in Copernicus, Ebsco, Scopus and WoS.
Conclusions: The research design limited the findings to the research scenario, suggesting the inclusion of the State as financing and facilitator of safe abortion.

Keywords: Sexual health, Reproductive health, Rational choice, Interruption of pregnancy

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Resumen

Objetivo: El objetivo de este documento fue la discusión y especificación de un modelo para el estudio de la libertad de elección con respecto a la interrupción del embarazo.
Materiales y método: Se realizó un estudio documental con una selección intencional de fuentes indexadas a Dialnet, Latindex, Publindex, Redalyc y Scielo desde 1961 hasta 2019.
Resultados: El diseño de la investigación limitó los resultados a la literatura consultada, sugirió la extensión del trabajo en base a la información publicada en Copernicus, Ebsco, Scopus y WoS.
Conclusiones: El diseño de la investigación limitó los hallazgos al escenario de investigación, sugiriendo la inclusión del Estado como financiamiento y facilitador del aborto seguro.

Palabras clave: Salud sexual; Salud reproductiva; Elección racional; interrupción del embarazo.

Resumo

Objetivo: O objetivo deste documento foi a discussão e especificação de um modelo para o estudo da liberdade de escolha em relação à interrupção da gravidez.
Materiais e método: Um estudo documental foi realizado com uma seleção intencional de fontes indexadas a Dialnet, Latindex, Publindex, Redalyc e Scielo de 1961 a 2019.
Resultados: O desenho da pesquisa limitou os resultados à literatura consultada, sugeriu a extensão do trabalho com base nas informações publicadas em Copernicus, Ebsco, Scopus e WoS.
Conclusões: O desenho da pesquisa limitou os achados ao cenário da pesquisa, sugerindo a inclusão do Estado como financiador e facilitador do aborto seguro.

Palavras chave: Saúde sexual, Saúde reprodutiva, Escolha racional, Interrupção da gravidez.

Introduction

The objective of this document is to discuss the theoretical, conceptual and empirical frameworks around the freedom of choice and with respect to sexual and reproductive rights.

During the period between 2010 and 2019, a documentary study was carried out with a sample of sources indexed to repositories in Latin America: Dialnet, Publindex, Latindex, Scielo and Redalyc, following the information of the keyword search criteria. Freedom of choice, sexual and reproductive rights and interruption of pregnancy.

The document will serve to establish the topics and axes of discussion in the agenda, as well as to discuss the scope and achievements in order to specify a model for the systematic investigation of the problem and the balance and the prospective scenarios.

History of reproductive sexual rights

At the international level, since 1973, the policies of interruption of pregnancy have been increasingly restricted, as is the case in the United States policy that gives greater probability of exercising the right to termination of pregnancy for white women than for women of color. The relationship between reproductive rights, centered on the decriminalization of abortion and the freedom of choice over one's own body, with respect to self-management and the administration of financial resources destined for the service of termination of pregnancy is demonstrated. 1

Since the 1970s, rape as an aggravating circumstance of abortion was a probable cause in the decriminalization of those who requested assisted abortion; however, public health policies in general and reproductive health in particular did not allocate sufficient funds for equipment, promotion and medical care in the majority of the population until well into the 1980s. 2

The concept of reproductive autonomy is crystallized in 130,824 cases of assisted interruption, 7,653 in minors, 73% of cases were requested by residents of Mexico City, 24% of the State of Mexico and 3% of other entities. Regarding the cases in which the request was made, but they did not attend the assisted interruption session, they only represented 13.5%. 83% of requests and interruptions were made by people whose age ranges between 18 and 35 years and only 4% of cases have been made more than once. Regarding the levels of instruction, 8.3% finished only the primary, 32.9% finished high school, 17.2% studied a higher level, 0.4% a technical level and 1.7% did not mention any level of studies. [3]

Theories of freedom of choice

The theory of happiness suggests that there is a close link between happiness and rationality. In this sense, the search for happiness through the calculation of its objectives, achievements and expectations are formed in a virtuous circle of continuous learning and knowledge, as well as a constant review of the scope and limits of the capacities of thinking, reasoning, planning and systematization. [4]

However, the Aristotelian approach ignores the factors of necessity and motivation as drivers of human relations between the subjects that have the objectives and synchronizes the capacities to reach their expectations. The humanistic theory explains the objectives, objectives and tasks or collaborations between those who show a legitimate interest in mutual benefit. In this way, the humanist theory, unlike Aristotelian thought, raises the progress of the sum of the wills and the most significant efforts that has the high capacity of reasoning of an individual. 5 One aspect of humanism is found in the Maslow pyramid of the hierarchy of needs and motivations, which indicates that the basis of any personal relationship are the needs of scarcity or deficit, which are derived from lack of training and lack of motivation. [6]

The physiological needs allude to the feeding and maintenance of the organisms and, consequently, the characteristics of prevention of diseases and accidents, performance enhancers and productivity. If good nutrition and maintenance of brain cells determine efficiency, performance and response, then safety needs allude to the perceptions of individuals. In this sense, risks and threats are expected before an immeasurable and unpredictable event in its consequences, a system of constant monitoring of strategies and styles for the prevention of risks.[7]

Therefore, security opens the expectation of belonging or categorization and identity towards a reference group or towards another group that wishes or belongs.

Once people come together and have interpersonal relationships, they will consider the need to encourage their emotions and emotions. This is the case of the relationship between governors and governors with respect to a security project. In this way, recognition emerges as a need of the first order. Transcendence, according to Maslow's theory, is the objective of the needs and the maximum achievement of the capacities promoted by the motivational systems. [8]

However, the freedom of choice to be present in each of the needs, at the time of carrying out the actions and implement the capabilities, seems to be determined by a social and ideological structure that would determine the hierarchy of these. Therefore, the freedom of choice seems to be rather

transitory and applicable in the moments and circumstances in which a decision is made that is not entirely deliberate or completely convincing. [9]

In the case of the full exercise of sexual and reproductive rights, the theories of freedom of choice only contextualize the possibilities based on the priorities of the individuals. The theory of rational choice considers that individuals behave as agents that compete in an economic system for resources, or they are actors that a political system defines action strategies with the intention of carrying out a social conflict such as decriminalization of abortion. [10]

Reproductive rights are, in the first instance, represented by a sector of the population as a management tool for the termination of pregnancy. [11] It is freedom of choice delimited by the rights of third parties. Freedom is the determinant of choice, but if it involves third parties, then it is the choice that affects freedom. In the opposite case, when freedom generates choices that inhibit the rights of third parties, progress is asymmetric. If there are more freedoms of consensus and elections, then freedom is divided into that of thought and action or instrumental. [12] The freedom of choice supposes ethical principles in which it is tried to regulate the human relations, the establishment of its objectives and the instrumentation of its capacities.

Studies of freedom of choice

In this section we review the studies related to the freedom of choice regarding the process of choosing a partner that would end with the interruption of pregnancy and the intervention of the state in the area of financing, the main determinant of effective and safe abortion practice.

The studies related to the process from unwanted pregnancy to post-mortem rituals of women or fetuses that went through unwanted pregnancies and high-risk abortions due to lack of funding. They found that the consulted literature identifies in the concept of "spiritual" right or obligation not to abort, the determining and justifying factor of state financing to promote and impose procreation, appealing to the distinction between freedom of choice and action proposed by Stuart Mill for explain the limits of the freedom of choice before the rights of third parties, even when they are fetuses, in Islamic contexts they are granted the status of spiritual soul with the right to life and in case of death carry out the ordinary rituals.[13]

That is, the freedom of choice is removed from its rational, aspirational and motivational process of achievement of personal well-being to conform to a cultural, social and religious norm relative to the spiritual, existential and sepulchral right that a fetus can achieve in a context defined by customs and habits. The initiatives and proposals, as well as the laws regarding abortion, to identify freedom of choice as opposed to the achievements of pro-life groups, such as the prohibition of public funds and the intervention of civil organizations in the interruption of pregnancy, delay the request for abortion, condition it by information about the process and the product, limit the abortion due to genetic cases, or the use of emergency contraception medications. The research is relevant because it reveals the limits to the freedom of choice in view of the fact that it is now considered freedom of action with effects to third parties that focus the debate on the status of the fetus as a depository of rights. It is a freedom adjusted to laws that assume the fetus agent of rights and therefore promote and impose procreation in a direct and indirect way. [14]

In a direct sense, the prohibition of the use of public funds and indirectly the orientation of the decision of procreation from fetal images or data of deaths in clandestine abortions that would be a consequence of the absence of state financing and the low level of development of sectors marginalized, violated and excluded.

The State in two non-democratic countries (Poland and South Africa) implemented policies in favor of abortion, but once these nations were democratized they limited access to the service of termination of pregnancy. Even, clandestine abortions were dismantled when providers were efficient and otherwise permissive policies were applied. It is about the implementation of the process of hiding, risk and death due to the abortive practice to demonstrate the non-viability of the decision in low-income sectors. [15]

The freedom of choice was again limited by political strategies prohibiting the service of interruption of pregnancy or limitations to the abortion system in marginalized, violated and excluded sectors. The freedom of choice transformed into freedom of action not only legitimizes the clandestinely and risk of abortions, but also the deaths of practitioners are used to reduce cases of pregnancy termination. [16]

A review of the literature on social rights to the protection of the State for the woman in childbirth and by extension to the family of which she is head shows that the demands have focused on the demands of maternity and paternity leave, but not the interference of the State with respect to this right of protection has been discussed when abortions are carried out for economic reasons or low probabilities of maintenance by those requesting the interruption of pregnancy. The State would have the obligation to avoid abortions for economic reasons and to promote its non-clandestinely in order to guarantee the social protection it is obliged to carry out. [17]

In these cases, freedom of choice is also disrupted by the guarantee of social rights and the protection of women and the family for their well-being, since it is reduced to a passive voice. That is, marginalized, excluded and violated

sectors can choose the protection of the state, but limited to their decisions to terminate pregnancy for economic reasons. Even, the State should try to provide medications and devices to those who have an active sex life, but do not have enough income to carry out the abortion practice. The dilemma of freedom of choice versus protection rights and state welfare can initiate a debate about state intervention to regulate the population. That is to say, the social right of protection is instrumented as a mechanism of birth control coupled with the official propaganda of a small family for a better well-being. [18]

Specification of the chosen reproduction model

The study of reproductive choice, defined as the balance of environmental requirements with respect to freedoms, needs, motivations and management capabilities and consensus, can be carried out following the logical trajectories of the relationships between the variables used in the theoretical framework and conceptual management.

In the model, the freedoms of choice are determinants of the reasons that each individual develops in his desire to establish differences with respect needs. The link between freedoms and happiness is in the capacities, but it is the needs that mediate the relationship between freedoms and choices.

Therefore, an election will be defined by the hierarchy of human needs, although the reasons are inherent to the needs, the freedoms of choice separate the needs of the motives to establish the limits of the individual process with respect to a process.

Consequently, capabilities are factors that define the rational choices of actors and agents instead of individuals or groups. It is assumed that the election process reflects a context of scarcity and competition for resources. Therefore, a greater capacity to process and assimilate liberties, supposes the hierarchy of needs and the delimitation of the reasons for carrying out an election.

Table 1. Descriptive of the informative sample.

	Freedom of Choice	***Interruption of Pregnancy***
Dialnet	*35*	*27*
Latindex	*26*	*21*
Publindex	*18*	*17*
Redalyc	*10*	*11*
Scielo	*6*	*7*

Source: Elaborated with data study

Table 2. Delphi technique.

Concept	Definition	Indicators	Codification	Estimation
Freedom of Choice	It refers to the ability to deliberate, process and select data related to the termination of pregnancy based on the information available in the media, the reference community and accessible literature in order to make a decision that favors their economic situation and Social.	Data related to the dissemination of the subject in the media, as well as the number of applications for termination of pregnancy and the expression of applicants in electronic networks	-1 for negative data, 0 for unlinked data and +1 for positive data to the freedom process choice and interruption of pregnancy	High scores refer to freedom without restriction and low scores suggest sensibility or self-censorship
Interruption of Pregnancy	It refers to the request for legally interrupted pregnancy and the intake of emergency contraception pills.	Data related to visits to the doctor for the purpose of terminating pregnancy, the intake of emergency contraception drugs and admission to hospitals for abortion...	-1 for negative data, 0 for unlinked data and +1 for positive data to the freedom process choice and interruption of pregnancy	High scores refer to a system interruption of pregnancy and low scores suggest a restriction to public funds for the practice of abortion.

Source: Elaborated with data study.

Table 3. Descriptive content analysis based on the mining of expert opinions.

E	**M**	**S**	**A**		**C1**			**C2**	
R1				X2	df	p	X2	df	p
e1	,783	,124	,157	13,25	13	<,05			
e2	,609	,126	,180						
e3	,783	,189	,183				12,21	14	<,05
e4	,659	,105	,134						
e5	,731	,147	,136	12,34	16	<,05			
R2									
e1	,653	,154	,143				16,12	10	<,05
e2	,667	,167	,154				17,41	15	<,05
e3	,698	,189	,186	14,36	13	<,05			
e4	,683	,173	,157						
e5	,562	,154	,124	15,46	12	<,05			
R3									
e1	,653	,146	,195	14,21	15	<,05			
e2	,662	,121	,160	15,29	14	<,05			
e3	,612	,190	,135	18,29	10	<,05			
e4	,783	,174	,165				12,45	15	<,05
e5	,629	,145	,186				16,52	14	<,05

E = Extract, R = Round, C = Category, M = Medium, S = Standard Deviation, A = Asymmetry, X2 = chi square, df = Degrees of Freedom, p = Level of Significance

Source: Elaborated with data study.

However, the observation and anticipation of the reproductive choice is different from a rational choice based on costs and benefits or different from a consensual choice based on the availability of information, deliberation and agreements or co-responsibility. It is, above all, the result of the influence of liberties and their regulation on needs, motives and capabilities. That is, freedom of thought and freedom of action are two factors that can be integrated into the model to explain a choice of reproductive type.

Method

Given that the objective of this paper is to model a model based on a systematic and meta-analytical review of the literature, a non-experimental, cross-sectional and exploratory study was carried out with a selection of sources indexed to leading repositories in Latin America in terms of freedom of choice and abortion (Table 1).

The stolen information was processed using the Delphi technique in three rounds of analysis, qualification, discussion and complementation of the data in five extracts, considering: -1 for negative data, 0 for unlinked data and +1 for positive data to the freedom process choice and interruption of pregnancy (Table 2).

The information was processed in the qualitative data analysis package, version 4.0, considering the distribution and the non-parametric relationships between the two categories and the extracts subtracted from the technique of content analysis and opinion mining.

Results

Table 3 shows the characteristics of the non-parametric distribution and the relationships between the categories of freedom of choice with respect to the interruption of pregnancy, considering three rounds of qualification by expert judges in the subject areas.

It is possible to observe that the relationships between categories and subcategories become significant as the qualification rounds continue, as well as the prevalence of freedom of choice with respect to the interruption of pregnancy. In order to establish the structure of trajectories of relations between categories and informative extracts, we proceeded to estimate the corresponding model (Figure 1).

A structure of trajectories of relationships tending towards spuriousness is appreciated, which translates into the interference of other categories in the process that goes from the freedom of choice to the interruption of pregnancy and that was qualified by experts as a barely significant link.

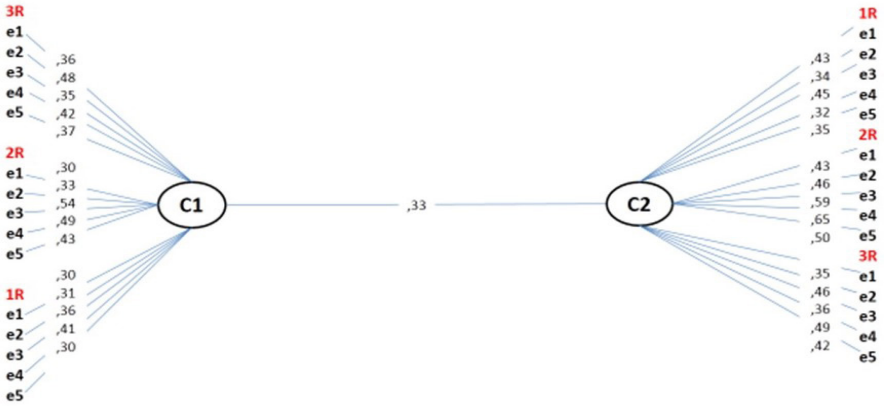

Figure 1. Structure of the trajectories between categories and informative extracts the freedom of choice and the interruption of pregnancy

Discussion

The contribution of the present work to the state of the question lies in the discussion and specification of a model for the study of reproductive choice, although the design of the documentary research suggests the extension of the model from the literature search in repositories such as Copernicus, Ebsco, Scopus and WoS.

The choice and partner, sexual and reproductive depends on the expectation of relationship whenever the couple succeeds in establishing their decisions based on the degree of commitment to the relationship, but if not, then the choice will depend on people close to the couple, such as the mother.19 In the present work it has been highlighted that the choice of couple follows the guidelines of rational decision making in which costs and benefits establish a criterion to be followed.

The reproductive choice is rather assessed by perceptions of aversion to the prevention of diseases, propensity to risk behaviors and aversion to a healthy future, suggesting that sexuality is an emergent phase of risky lifestyles.20 In the present study, a continuum is established that goes from the freedom of choice to the restorative action that supposes self-care itself that has been conceptualized as a reaction to contingencies and risks.

The interruption of pregnancy is not the result of a rational, deliberate, planned and systematic choice since it is rather the product of the combination of cultural and cognitive factors. 21 In the present work, reproductive choice has been discussed as part of a valuation and normative corpus focused on costs and benefits, but in relation to a reference and belonging group. It is a complex decision process in which the interpersonal relationships are conditioned by the subjective and intersubjective norms, as well as by the dispositions towards the relationship and the commitment of loyalty and fidelity.

Conclusion

The objective of this study was to specify a model based on a review of the literature regarding the relationship between freedom of choice and termination of pregnancy, but the research design limited the findings to the research scenario, suggesting the inclusion of the State as a funding and facilitator of safe abortion.

References

1. National Population Council Gender and abortion statistics. Mexico: CONAPO. 2014

2. National Institute of Women Statistics of the decriminalization of abortion. Mexico: Inmujeres. 2010

3. Amuchastegui A, Flores E, Aldaz E. Subjective dispute and social dispute. Religion, gender and social discourses in the legislation of abortion in Mexico. Journal of Gender Studies, 2015; 5 (41), 153-195

4. Hevla A, Villar M, Martínez F. A critical review of the debate on human needs from the focus on the person. Polis, 2006; 5 (15), 1-18

5. Quintero M, Valdés O, Delgado M, Garcia C. Evaluation of a model of the institutional self-care strategies. Condom use and prevention in university students. Health Problem, 2018; 12 (23). 56-68

6. Romero R. Theory of freedom of choice: Application in ethical praxis. Quipukamayoc, 2014; 22 (42), 149-167

7. Sandoval F, Garcia C, Bustos J. Exploratory factor structure of planned abortion in students of Xochimilco, Mexico City. Perspectives, 2016; 2 (2), 4050

8. Velez S, Rosas F, Garcia C. Reliability and validity of an instrument that measures perceptions of couple relationships. Eureka, 2018; 15 (2), 269-282

9. Zaratiegui J. John Stuart Mill: an economist who loves freedom. Cuadernos de Administración, 2001; 14 (23), 131-149

10. Boonstra H. Abortion in the lives of woman struggling financially: Why insurance coverage matters. Guttmacher Policy Review, 2016; 19, 46-52 https://www.guttmacher.org/sites/default/files/article_files/gpr1904616_0.pdf

11. Fatemeh G, Marzieh A. The rights of the fetus: ensoulment as the cut-off point legislation on abortion. Health Science Journal, 2015; 10, 1-5 http://www.hsj.gr/medicine/the-rights-of-the-fetus-ensoulment-as-the-cutoff-point-legislation-on-abortion.pdf

12. McDonagh E. Adding consent to choice in the abortion debate. Society, 2005; 1, 18-26 https://pdfs.semanticscholar.org/1a1f/2409cd7ff797c1471d750987eb99efd16aae.pdf

13. Mahierhofer W. Abortion democracy: sarahh Dielhl's advocacy documentary film for women rights in Poland and South Africa. Sexual health Issues, 2017; 1 81), 1-7 http://dx.doi.org/10.15761/SHI.1000106

14. Carreon J, Hernandez J, Morales M, Garcia C. Intentions of consensual sex and induced abortion in students of a public university in Mexico. Psychology, 2013; 13 (2), 24-38

15. Garcia C. Study of attitudes toward abortion in university students in Morelos, Mexico. Xhimai, 2011; 7 (13), 61-82

16. Garcia C. Attitudes towards assisted legal abortion. Social Work, 2012; 50, 269-279

17. Garcia C. Beliefs about induced abortion in a public hospital. Public Health, 2013; 22, 13-19

18. Garcia C, Carreon J, Aguilar J, Rosas F, Garcia E. Contrast of a model of reproductive sexuality. Psychology, 2014; 5 (1), 45-64

19. Garcia C, Carreon J, Hernández J, Bautista M, Méndez A. Socioeconomic and demographic determinants of attitudes towards abortion. Psychology, 2012; 15 (28), 262-270

20. Garcia C, Morales M, Méndez A, Delgado M, Vilchis F, López S, García C. Exploratory factorial structure around variables related to the interruption of pregnancy in students. Public Health, 2016; 12 (23), 15-28

21. Garcia C, Morales M, Mendez A, Delgado M, Vilchis F, López S. Reliability and validity of an instrument that measures perceptions of sexuality Rumbos, 2015; 10 (12), 87-93