

# Abortion Survey Questions

Patient name: \_\_\_\_\_

## SECTION 1: DEMOGRAPHIC INFORMATION

Instructions: Please answer the following questions about yourself. Your responses will help us understand the background of our participants and how it may influence their views on abortion. Select the option that best describes you.

1. Age:

- Under 18
- 18-24
- 25-34
- 35-44
- 45-54
- 55-64
- 65 and over

2. Gender:

- Male
- Female
- Non-binary
- Prefer not to say

3. Location:

- Urban
- Suburban
- Rural

4. Education level:

- High school
- Some college
- Bachelor's degree
- Graduate degree

5. Occupation: \_\_\_\_\_

6. Religious affiliation:

- Christian
- Muslim
- Jewish
- Hindu
- Atheist
- Agnostic
- Prefer not to say
- Other

7. Ethnicity:

- White/Caucasian
- Black/African American
- Hispanic/Latino
- Asian/Pacific Islander
- Native American
- Other

## SECTION 2: KNOWLEDGE AND AWARENESS

Instructions: This section aims to gauge your knowledge and awareness of abortion-related information and laws. Please select the option that best reflects your knowledge.

1. How familiar are you with abortion laws in your area?

- Very familiar
- Somewhat familiar
- Not familiar

2. Are you aware of the different types of abortion procedures?

- Yes
- No

### 3. Where do you typically get information about abortion?

- Healthcare providers
- Internet
- Social media
- Friends/Family
- News outlets
- Religious organizations

4. Do you know the legal status of abortion in your country/region?

- Yes    No    Unsure

## SECTION 3: ATTITUDES AND BELIEFS

Instructions: This section explores your personal attitudes and beliefs about abortion. Please select the option that best represents your views.

1. What is your general stance on abortion?

- Pro-choice    Pro-life    Neutral    Unsure

2. Do you believe abortion should be legal under certain circumstances?

- Yes    No    Unsure

3. If yes, under what circumstances should abortion be legal? (Select all that apply)

- Health risk to mother
- Cases of rape or incest
- Severe fetal anomalies
- Financial instability
- Other

4. Do you believe that access to abortion services should be expanded or restricted in your area?

- Expanded    Restricted    Stay the same    Unsure

5. How do your religious or cultural beliefs influence your views on abortion?

## SECTION 4: PERSONAL EXPERIENCE

Instructions: This section asks about personal experiences with abortion, whether your own or someone you know. Your answers will help us understand the personal impact of abortion. Please answer honestly and select the options that apply.

1. Have you or someone you know ever had an abortion?

- Yes    No    Prefer not to say

2. If yes, what was the experience like?

3. Did you or the person you know receive adequate support during the process?

- Yes    No    Unsure

4. What were the most significant factors that influenced the decision to have an abortion? (Select all that apply)

- Health concerns
- Financial reasons
- Personal choice
- Family pressure
- Other

## SECTION 5: ACCESS TO SERVICES

Instructions: In this section, we are interested in your experiences and opinions regarding access to abortion services. Please select the options that

1. Do you know where to access safe abortion services in your area?

Yes  No  Unsure

2. Have you ever faced difficulties in accessing abortion services?

Yes  No  Not applicable

3. If yes, what were the barriers? (Select all that apply)

- Legal restrictions
- Financial costs
- Social stigma
- Lack of information
- Distance to clinic
- Other

4. Do you think abortion services are accessible to everyone in your community?

Yes  No  Unsure

5. What improvements, if any, would you suggest for making abortion services more accessible?

## SECTION 6: HEALTH AND SAFETY CONCERNS

Instructions: This section focuses on health and safety concerns related to abortion. Please answer based on your knowledge or opinions.

1. How concerned are you about the safety of abortion procedures?

Very concerned  Somewhat concerned  Not concerned

2. Do you believe that abortion is safer than childbirth?

Yes  No  Unsure

3. Are you aware of the potential health risks associated with abortion?

Yes  No  Unsure

4. Would you seek counseling or support before or after an abortion?

Yes  No  Unsure

5. Do you think there should be more public education on the health aspects of abortion?

Yes  No  Unsure

## SECTION 7: ETHICAL AND LEGAL CONSIDERATIONS

Instructions: This section addresses ethical and legal considerations surrounding abortion. Please answer according to your beliefs and opinions.

1. Do you think the government should have a say in a woman's decision to have an abortion?

Yes  No  Unsure

2. Do you believe that a father should have the right to be involved in the decision to have an abortion?

Yes  No  Unsure

3. What are your thoughts on mandatory waiting periods before an abortion can be performed?

Support  Oppose  Unsure

4. Do you believe that minors should have parental consent to get an abortion?

Yes  No  Unsure

5. What role do you think healthcare providers should play in the decision-making process for an abortion?

## SECTION 8: PUBLIC POLICY AND ADVOCACY

1. Are you aware of any organizations in your area that provide support for women seeking an abortion?

Yes  No  Unsure

2. Do you think more should be done to protect the rights of women seeking an abortion?

Yes  No  Unsure

3. Would you support policies that expand access to abortion services?

Yes  No  Unsure

4. How likely are you to participate in advocacy efforts related to abortion rights?

Very likely  Somewhat likely  Unlikely  Not interested

5. What do you believe is the most important issue related to abortion in your area?

## SECTION 9: ADDITIONAL COMMENTS

Instructions: If you have any additional thoughts, suggestions, or comments about abortion that you would like to share, please use the space provided below.

1. Is there anything else you would like to share about your views on abortion?

2. Do you have any suggestions for improving abortion-related services in your community?

Disclaimer: This survey is for informational purposes only and does not constitute medical advice. Please consult with a healthcare provider for any personal questions or concerns related to abortion.