

# [The teenage pregnancy dilemma in indonesia philosophy essay](https://assignbuster.com/the-teenage-pregnancy-dilemma-in-indonesia-philosophy-essay/)

One of the biggest dilemma in Indonesia is abortion. Why it is become one of the biggest dilemma in this country? The reason is it is against the law of humanity. Fetus in mother’s womb has right to stay alive, they have right to see the world. But if it is unplanned pregnancy in teenage age or in very young age what should we do? We are not talking about taking sides, we are all talking about the best way out for the teenager to continue their live to save their future without having any responsibilities to take care of a baby or even babies because they are not plan about having a baby or babies in young age. Lets see the fact about our country, lets see deeper to the Indonesian culture. Can you imagine if you having a baby before legal marriage? What will your neighborhood talking about you? They will be a backstabber and always insult you. Do you have a heart to see them live a life in pressure. We have to remember we are live in Indonesia. As an eastern people we are not accustomed with free sex, or sex before married. But we cannot close our heart, close your eyes, or close your ear if there are many cases related to free sex or sex before married. In a young age they have big anxiety about a new thing like sex. They try to get the information and after they have got the information they have intention to have their own experience. Some teenager think about free sex but not every teenager know about save sex.

For the teenager who knows save sex they will use prevention for example they will use condom. Although you have used condom you still cannot escape from accident. If the condom is blobby it means that the prevention is failed. What will happen if the prevention is failed?

The more dangerous is when teenager doesn’t know what is save sex? In this essay I will not say that sex before married is good. But we can save them from the worst possibility. If you are a teacher or a person who work in educational division you can expound to them about sex activity. The bad impact itself. We have to fully realized teenager has a lot of questions about it.

In a modern era like this we can not 100 percents guard our children from bad influence especially from the internet. Internet can provides them any informations, from the small thing until the big thing. Therefore as a parents you cannot sleep with two eyes closed.

Everything could happen in this world. You can have sex and got the sensation from it but you have to think twice if you still want your future. Using condom is one of the prevention from “ accident”. What if the prevention fails? The most common way out that first came out from teenagers mind is abortion. They are not ready having a baby, they have not the job yet, they can not earn the money, they still want to play, the world is too big to be wondered, they don’t want have any responsibilities related whit take care of a baby. The most common reasons why “ I” wanted abortion :

I can’t let my parents know, they will kill me!

I want to finish my school! Baby is such a distraction for me!

In some countries it is legal.

My boyfriend will break up with me if I don’t have an abortion.

My pregnancy is an accident, I don’t want it.

My mother pressuring me to have an abortion.

I don’t like pregnancy change my body. I don’t want see my body is changing.

I’m pregnant because a rape!

I have to have an abortion there’s no other way!

It’s not a baby!

Therefore they thing that abortion is the best way out to save their life. Are you sure that abortion become the best way out to cover this problem from people around you? In this essay I would like to talk about some alternatives to face unplanned pregnancy.

If you think harder to face unplanned crisis pregnancy and use your logic there are some alternatives that you can choose.

The first is you can continue the pregnancy and raise your child (either on your own or with your partner)

The second you can continue the pregnancy and the place your child up for adoption,

The third is you can terminate the pregnancy by having an abortion.

Before you decide your decision you have to explore each of these options. Don’t be at hurry, make yourself relax in this crazy time. You have been crazy manner before, therefore don’t be crazy people and regret your decision.

You can take a piece of paper to write what you want and what you need. You have to think logically, try to imagine the possible outcomes as well as the practical and the emotional impact of each options may happen on you. I know this is not as easy as we think. More than anything else you are facing the massive consequency to your life. Now, think about what your ideal situation looks like, both in terms of being pregnant and in terms of parenting a child. When would you like to become a mother? Where would you be living? What role would your partner have? What would you be like? What role would your family take? And the most basic question is are you ready to live your new life?

Once you thing about those questions, imagine that you are in a real life with actual situation at this time. What decision satisfy you the most? Lets have a mind walk, back to previous year ago, before you became pregnant. What were your goals and dreams at that time? What were your views on unplanned pregnancy? How did you feel about each of the options? After you remember all the things you want to reach in this shortlife, consider your life now, what are your goals and dreams now? Have they changed? What’s important to you? What are you involved with now? Have your views changed with respect to unplanned pregnancy?

Let’s use your imagination again, imagine yourself a year or two year from now. Have you find the biggest fears surrounding each option? After you use your imagination lets back to the real, how will each option impact your life?

By now, you have realized, it should be obvious to you now, each option have its own pros and cons. That’s way you need complete and accurate information before making the choice that’s best for you.

Write what is on your mind to your blank paper. Just write what you want to say. After you have finished it you can start recap it. How we recap it?

When considering these options, you may reflect on many aspects of your life, including:

your spiritual, cultural, religious, and cultural beliefs and those of others in your life

your relationship with your family, friends, and partner

your financial and social realities

your living conditions and life circumstances

your feelings about parenting and about becoming a mother

possible reactions to your decision

Eventually, your decision will reflect the based what is the best to you at the moment. At another time in your lifetime maybe your decision will be different. That’s okay it is natural. Embedded to you mind that because every woman is different, the time and effort needed to reach the best decisions for their self is different as well. It will be very natural and very human to have various kinds of emotional reactions to unplanned pregnancy, especially when weighing and forecasting the pros and cons. Since you are the person who will live with this decision, be sure you’re making it for yourself. Dealing effectively with your feelings is a key part of making a decision you can live with. This is about you, your decisions is your future. This not easy because you have to responsible to what you have done and you have to thing what will happen to your entire life, and you know you have to consider many people involved in your life.

After you recapped it, you must need a person whom you can talk to. You may want advise from another people or their solutions to face this problem to chose whether to continue unplanned pregnancy. Not everybody can be good advisor to your problem and not everybody capable to give you advise without giving the judgment. It is so natural and so human. Because each of us has our own need for privacy and for emotional, spiritual, economic, and physical support, women facing an unplanned pregnancy may not all choose to talk to the same person or people. For instance, some women may feel comfortable talking only to health providers while others may wish to include a friend, family member, partner, religious teacher or member of the clergy. Just find the right person to help you share you paradigm.

Whomever you choose, be cautious and be alert when involving another people to your decision. First time you met them you have to ask whether they have a particular viewpoint about abortion, anti-abortion or pro life, pro choice, anti-adoption, or anti-parenting. It’s important to keep you in your own track, it means you still have liberty to make your own decision. You should never feel under pressure, coerced, or forced to make decision that is not into you or represent yourself. The based of this decision is your own choice not someone else’s choice. If you feel manipulated, insulted, and intimidated you should stop your consultations with that person and look for somebody new.

When you looking people to help you with decision making process, consider people who are :

knowledgeable and able to provide accurate information and referrals

non-judgmental

able to provide unconditional support, no matter what your decision

respectful of your privacy and your well-being

Information

Before you make your own decision you have to know each definitions, pros, cons, and the impact that may happen to you.

So know let’s see further to abortion. What is abortion? Abortion is the termination of a pregnancy, either through the use of drugs or through a surgical procedure. There are a lot of discussions on a problem of abortion in this country and abroad. The discussion include is it legal or not? Is it morally justified or not? Or is it the best way to save my children’s future from his or her sin? I will not talk about abortion from the religion side. Because we know that abortion is forbidden. Moreover it is not relevant to put the religion paradigm in this essay.

Whenever you chose abortion you have to know the effects to your body. Especially the negative effects. You have to talk with your parents, family, doctor, or public local clinic.

Let’s go deeper to abortion. There are two ways in abortion : medical abortion and surgical abortion. Medical abortions use drugs to empty the uterus, while surgical procedures use instruments to remove the contents of the uterus. Many factors come into the operation table when deciding which procedure is best for you. You may want to consider:

whether you want to be awake or asleep during the procedure

where you would be most comfortable having the procedure (in an abortion clinic or at a hospital)

whether you want to undergo surgery or whether you’d prefer a drug option

You can choose one of those methods. But there are some factors you have to considered before choosing the methods. Other factors will influence your decisions :

the number of weeks since your last menstrual period (some procedures can only be performed early in pregnancy)

your overall health (some health conditions may limit your options)

the procedures available (not all procedures may be available-or legal-in your area)

whether you are willing to travel to have an abortion

your preferences, beliefs, and values

To choose the methods you can also ask your family, your friends , or the doctor in your region. Abortion is a choice, although the methods are differ but the goals are the same. The goal is dead baby.

After you know the methods of the abortion, now you should know the side effect of abortion.

SIDE EFFECT of ABORTION

Before you choose abortion as your decision you must know the consequences that may happen to you.

Bladder Injury : If your uterus is perforated, your urinary bladder can be perforated, too. This can also cause peritonitis (an inflamed, infected lining of the abdomen) with all of its pain, dangers and necessary reparative surgery.

Bowel Injury : If your uterus is perforated, your intestines can be perforated, too. This will cause nausea, vomiting, abdominal pain, fever, blood in stool, peritonitis (an inflamed, infected lining of the abdomen) and death if not treated quickly enough. A portion of the intestine may have to be taken out, and a temporary or permanent colostomy may be put in your abdomen.

Breast Cancer : Women who have aborted have significantly higher rates of breast cancer later in life. Breast cancer has risen by 50% in America since abortion became legal in 1973.

Ectopic (tubal) Pregnancy : An ectopic pregnancy is any pregnancy that occurs outside the uterus. After an abortion, you are 8 to 20 times more likely to have an ectopic pregnancy. If not discovered soon enough, an ectopic pregnancy ruptures, and you can bleed to death if you do not have emergency surgery. Statistics show a 30% increased risk of ectopic pregnancy after one abortion and a 160% increased risk of ectopic pregnancy after two or more abortions. There has been a threefold increase in ectopic pregnancies in the U. S. since abortion was legalized. In 1970, the incidence was 4. 8 per 1, 000 live births. By 1980 it was 14. 5 per 1, 000 births.

Failed Abortion : Failure to successfully abort the unborn younger than 6 weeks is relatively common. Sometimes, an abortionist fails to evacuate the placenta from the uterus. This means the pregnancy continues even though mother has endured the dangers and cost of an abortion.

Bleeding (Hemorrhage) : One to fourteen percent of women require a blood transfusion due to bleeding from an abortion.

Hepatitis : This can occur if you have to have a blood transfusion after an abortion.

Infection : Mild fever and sometimes death occurs when there is an infection from an abortion. This happens in anywhere from 1 in 4 women to 1 in 50 women.

Laceration of the cervix : About 1 out of 20 women suffer this during an abortion. This causes you to have nearly a 50/50 chance of miscarrying in your next pregnancy if it is not treated properly during that pregnancy. A high incidence of cervical damage from the abortion procedure has raised the incidence of miscarriage 30-40% in women who have had abortions.

Perforation of Uterus : Women suffer a perforated uterus in between 1 out of 40 and 1 out of 400 abortions. This almost always causes peritonitis (an inflamed, infected lining of the abdomen), similar to having a ruptured appendix.

Placenta Previa : Placenta previa occurs 6 to 15 times more often after a woman has had an abortion. In this condition your baby’s placenta lies over the exit from the uterus so that the placenta has to be delivered before the baby can get out. This causes the mother to bleed severely while the baby almost always dies, unless your obstetrician recognizes this condition and removes the baby by Caesarean section at just the right time in the pregnancy.

Post Abortion Syndrome : may rob the woman of her joy as she carries the burden of unresolved grief. This burden weighs her down and imprisons her in pain. The 12 week program opens to the door to allow healing to begin. It is a disorder which is manifested by some of the following symptoms:

Depression

Increased Numbing

Emotional Numbing

Anxiety/Fearfulness

Nightmares or Flashbacks

Suicidal Thoughts

Avoidance of reminders of the abortion, or of anything having to do with babies

Anger or Rage Reactions

Alcohol or other Substance Abuse

Eating Disorders

Chaotic Relationships

Deterioration of Self-concept

Anniversary Syndrome-mood or behavior changes each year near the time of the abortion, or the baby’s due date

Problems bonding with children or overprotecting future children

Sexual Disorders

Retained Products of Conception : If your doctor leaves pieces of the baby, placenta, umbilical cord, or amniotic sac in your body, you may develop pain, bleeding, or a low grade fever. Besides antibiotics and possible hospitalization, you may require additional surgery to remove these remaining pieces.

Unrecognized Ectopic Pregnancy : Your doctor may try to abort the baby but be unsuccessful because it is developing in your fallopian tube. Unfortunately this tubal pregnancy ruptures later and emergency surgery must be done to save your life. All women in their first trimester should have an ultrasound to make sure they do not have an ectopic pregnancy.

Sterility : it means that your ovaries being took off from your body. This happens in 1 out of 20 to 1 out of 50 women. The risk of secondary infertility among women with at least one abortion is 3 to 4 times greater than that among women who have not aborted.

## The abortion process

Suction-Aspiration

In this method, the cervical muscle ring must be paralyzed and stretched open. The abortionist then inserts a hollow plastic tube with a knife-like edge into the uterus. The suction tears the baby’s body into pieces. The placenta is cut from the uterine wall and everything is sucked into a bottle.

Dilation and Curettage (D and C)

This is similar to a suction procedure except a curette, a loop-shaped steel knife is inserted into the uterus. The baby and placenta are cut into pieces and scraped out into a basin. Bleeding is usually very heavy with this method.

Dilation and Evacuation (D and E)

This type of abortion is done after the third month of pregnancy. The cervix must be dilated before the abortion. Usually Laminaria sticks are inserted into the cervix. These are made of sterilized seaweed that is compressed into thin sticks. When inserted, they absorb moisture and expand, thus enlarging the cervix. A pliers-like instrument is inserted through the cervix into the uterus. The abortionist then seizes a leg, arm or other part of the baby and, with a twisting motion, tears it from the body. This continues until only the head remains. Finally the skull is crushed and pulled out. The nurse must then reassemble the body parts to be sure that all of them were removed.

Prostaglandin Abortion

Prostaglandin is a hormone that induces labor. The baby usually dies from the trauma of the delivery. However, if the baby is old enough, it will be born alive. This is called a “ complication.” To prevent this, some abortionists use ultrasound to guide them as they inject a “ feticide” (a drug that kills the fetus) into the unborn baby’s heart. They then administer prostaglandin and a dead baby is delivered. This type of abortion is used in mid and late term pregnancies.

Dilation and Extraction (D and X)

This abortion is also used on mid and late term babies, from 4 to 9 months gestation. Ultrasound is used to identify how the unborn baby is facing in the womb. The abortionist inserts forceps through the cervical canal into the uterus and grasps one of the baby’s legs, positioning the baby feet first, face down (breech position). The child’s body is then pulled out of the birth canal except for the head which is too large to pass through the cervix. The baby is alive, and probably kicking and flailing his legs and arms. The abortionist hooks his fingers over the baby’s shoulders, holding the woman’s cervix away from the baby’s neck. He then jams blunt tipped surgical scissors into the base of the skull and spreads the tips apart to enlarge the wound. A suction catheter is inserted into the baby’s skull and the brain is sucked out. The skull collapses and the baby’s head passes easily through the cervix. 9312ha\_c9312ha\_d

## State’s Policy towards Abortion

In Indonesia abortion is still illegal. But there are some exception to make it legal. In 2003, a parliamentary commission submitted a draft bill to legalize abortion, but this never made it to parliament. In Indonesia constitution number 23 year 1992 specifies that “ in the case of emergency and with the purpose of saving the life of a pregnant woman or her foetus, it is permissible to carry out certain medical procedures”. The abortion must be based on the guidance of a team of experts, must have the consent of the pregnant woman or of her husband or family, and must be performed by health workers with the expertise in a “ certain structure.” I think it is better for Indonesia to update the health law to make sure that abortion can be done safely. The rigid regulation lead woman prefer illegal abortion. Sometimes illegal abortion is dangerous, if the abortion is failed it will not kill the baby, but it can make a baby birth in handicap situation.

This situation has led to a flourishing underground practice of birth termination that heavily penalizes the poor. Abortions are carried out by midwifes or doctors, all illegal. The fee for the procedure is said to vary greatly but to be in the region of 500, 000 to 1. 8 million rupiah (50 to 180 dollars) – out of the reach of a majority of people. Forty percent of the 240 million Indonesians live on less than 2 dollars a day, according to the World Bank.

Poor women are forced to seek the help of unlicensed doctors or traditional healers, who use a variety of methods. Their practices are quite dangerous and have contributed to Indonesia having the highest mortality rate from pregnancy-related causes in the region. (IPS, Sunday, 13 December 2009).

Lancet had made the rank of abortion in four continents. This is the table of safe and unsafe abortion. Lancet had made it’s ratio.

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## Adoption

if you are choose abortion you have to make an adoption plan to your child. You can find the doctor to give you some advice or maybe a lawyer to make you understand about abortion procedures and regulations. Your decision may involve various adoption agencies to learn how their operation or how they find the suitable parents to your child.

There are to choices of adoption : public adoption and private adoption. If you choose public adoption you can call a placement organization to speak with a pregnancy counsellor or social worker. This individual will help you by discussing your pregnancy options, supporting your decision, and providing information about the adoption process. In other words, your social worker is your advocate; he or she advocates for birth parents’ choices and will help you in selecting adoptive parents for your baby. The final decision, however, is always yours.

If you choose private adoption is an arrangement between the birth parents and the potential adoptive parents. This arrangement is facilitated by licensed lawyer or social worker. I realized if there are some people who don’t want to involve in this process. Because they try to get rid from responsibilities to place their own child. They can give this responsibilities to their parents, but I think that’s not a good idea. You have to grow up and consider this is the way you make your life back to normal without take care of children. You have to think this your own fault, you don’t want to make situation getting worst.

Give your time to talk with a doctor or the person who can help you. Find the best agencies in your region to place your child. Think about their future, I know you don’t want this situation, but the baby inside you doesn’t have responsibilities to bearing weight of your sin. These are some reasons why “ I” don’t want to place my baby for adoption (www. abortionfacts. com) :

It would make me feel so sad. This is a natural reaction if you feel sad. Carrying baby for nine months involves your feeling of love. Separation can become a painful circumstances. This situation will not continue for a long time, you can be proud of the power you have, by placing your child in an adoption agencies, it can make the adoptive parents come true. Some studies show that teenage mothers who place their baby for adoption have overall satisfaction. It will not give you a long-term grief. They are also more optimistic to face their new life.

I should take responsibility for my own actions. You have to accept the consequences of your own actions. It will not be easy, but as time goes by you will learn more. To avoid the guilty feeling you can try your best to find a home for your child. You can make sure that the adoptive parents can give a real home and love to your child.

I want someone to love me. You think that your child can love you. It will be hard for advisor to convince you that you can find “ another” love someday. Parenting is about sacrifice and fulfill the need of your baby. If you don’t have resources to do that your baby will be suffering.

My friends think I should keep that baby. You have to make your own choice, this your life. Your friend can give that advise easily, but be logic who will be bearing the weight of taking care a child? Does your friend will always live near you, or share their money with you to fulfill the needs of your child, does she willing to baby-sit so you can have a date with your boyfriend? Advise from your friends even your very best friend are not very influential. They haven’t educated about adoption and they are not committed to helping you raise the child.

I’m afraid my baby will be abused. If you think that the adoptive parents will abuse your child in a future, you may get wrong. This is not typically the adoptive parents abuse the child. More often the boyfriend of the child’s mother abuse their unwanted child. That’s way you have to make an adoption plan to your child.

I have no guarantee that my baby will be happy. Life is never flat, life cannot give a guarantee for you or for anyone who life in this world. You have to make comparison between you and the adoptive parents. Who will give the best life to your child?

The baby’s father doesn’t like the idea of adoption. Of course the father’s feeling must be considered. You have to consider their fears and concerns. Now, let’s see to the father’s baby, can he fulfill the requirement to create a home to the baby? If he is not prepared to provide this, he should know that adoption is a excellent choice.

I would rather have a abortion. You have to think the effect of abortion although it is legal. The physical effect and emotion will be long lasting. You cannot pretend the baby never existed.

## Adoption rule in Indonesia

Adoption (pengangkatan anak) is governed by Law :

No. 23 of 2002 dated 22nd of Oct. 2002 concerning Child Protection.

Decree of Minister of Social Affairs No. 44/HUK/1997 dated 31st of July 1997 concerning Fostering of Children Welfare through Adoption;

Decree of Minister of Social Affairs No. 2/HUK/1995 dated 25th of Jan. 1995 concerning Completion of Attachment of Decree of Minister of Social Affairs No. 13/HUK/1993 concerning Implementation of Adoption;

Supreme Court Circular Letter No. 2 of 1979 dated 7th of Apr. 1979 concerning Adoption;

Supreme Court Circular Letter No. 6 of 1983 dated 30th of Sept. 1983 concerning Completion of Supreme Court Circular Letter No. 2 of 1979 concerning Adoption.

This is the rules that adoptive parents must fulfill :

have been married for at least five years unless doctor’s letter certifying impossibility of having children is submitted with adoption application (Point 1(2) of Decree of Minister of Social Affairs No. 2/HUK/1995 amending Section V(A)(1)(a) of Attachment of Decree of Minister of Social Affairs No. 13/HUK/1993);

be between ages of 30 and 45 years (Section V(A)(1)(b) of Attachment of Decree of Minister of Social Affairs No. 13/HUK/1993);

have no more than one child (id. at Section V(A)(1)(c));

Be of sound financial, physical and spiritual condition (id. at Section V(A)(1)(d) and (f));

have good behaviour based on statement issued by Indonesian Police (id. at Section V(A)(1)(e));

provide written statement stating adoption is conducted for child’s welfare (id. at Section V(A)(1)(g));

provide social report (laporan sosial) (id. at Section V(A)(1)(h));

have taken care of adoptive child for at least six months based on permit from Area Office Head of Department of Social Affairs (id. at Section VI(1)); and additionally, foreign adoptive parent applicants must:

(a) obtain written agreement from state government of which they hold citizenship (id. at Section V(A)(2)(b)); and

(b) have been working and living legally in Indonesia for at least two consecutive years supported by statement issued by authorized official (Point 1(3) of Decree of Minister of Social Affairs No. 2/HUK/1995 amending Section V(A)(2)(c) of Attachment of Decree of Minister of Social Affairs No. 13/HUK/1993);

(c) provide periodical report on child’s development through Indonesian embassy in adoptive parent’s respective country (Section V(A)(2)(d) of Attachment of Decree of Minister of Social Affairs No. 13/HUK/1993).

In Indonesia there are some adoption agencies, in Jakarta there is Yayasan Sayap Ibu. There six steps in adopting a baby, every step needs special requirements. Below are the steps to adopt children in Yayasan Ibu Foundation :

The first step is you have to fulfill the requirements below, after you fulfill all of this requirements you can move to the next step.

Prospective adopting families must be between the ages of 25 and 45. (husband 45 years, wife 40 years).

The couple must have been married for at least 5 years.

The couple must have been residents of Indonesia for a minimum of 2 years and have a permit issued by the local regent and from their embassy in Jakarta.

Couples can be either childless, have their own natural children, or have previously adopted an Indonesian child.

If a child from another country has been adopted previously, the foundation will not agree to an Indonesian child being placed with the family.

The couple should believe in God. Both parents must be able to appear in Court.

If Yayasan Sayap Ibu consider that you are the suitable adoptive parents, you will have to submit a paper work, which will then be forwarded to the Department of Social Affairs. Below are the document that you have to prepare :

Marriage Certificate which has been authenticated by the Indonesian Embassy in the country of issuance.

Birth Certificate of both parents which has been authenticated as above.

B irth certificate of previous children, authenticated as above.

Letters from close relatives of both prospective adoptive parents stating that they approve of the prospective parents’ desire to adopt an Indonesian child.

Health statement for husband and wife by a medical practitioner at an Indonesian government hospital.

Statement from an Indonesian government hospital gynaecologist regarding involuntary childlessness

Income statement

Good condust certificates from the Indonesian police for both husband and wife

Family photos and photos of the home and surroundings

Three photos each of husband and wife

Statement from the adoptive parents that they will contact the Indonesian Embassy at future areas of residence (with meterai/official stamp)

Statement of motivation for adopting an Indonesian child (with meterai).

Statement of domicile from the local regent (RT/RW/Lurah/Camat).

Work Permit

NOTE: All documents in Englis