Commission on the Status of Women
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Item 3 (a) of the provisional agenda*
Follow-up to the Fourth World Conference on Women and to the twenty-third special session of the General Assembly, entitled “Women 2000: gender equality, development and peace for the twenty-first century”: implementation of strategic objectives and action in critical areas of concern and further actions and initiatives: review of the implementation of the Beijing Declaration and Platform for Action and the outcome of the twenty-third special session and its contribution to shaping a gender perspective in the realization of the Millennium Development Goals

Statement submitted by IPAS, a non-governmental organization in consultative status with the Economic and Social Council

The Secretary-General has received the following statement, which is being circulated in accordance with paragraphs 36 and 37 of Economic and Social Council resolution 1996/31.
Statement

1. This year the Economic and Social Council will review the implementation of the Beijing Platform for Action and how it can contribute to meeting the Millennium Development Goals. In this context, we would like to highlight progress made and actions needed to implement the Platform recommendations concerning unwanted pregnancies and access to abortion.

2. The Platform for Action calls attention to the health consequences of unwanted pregnancies and unsafe abortions and calls for action to address this critical public health issue. Specifically, paragraph 106 (k) states that:
   
   (a) Prevention of unwanted pregnancies must always be given the highest priority;
   
   (b) Women who have unwanted pregnancies should have ready access to reliable information and compassionate counselling;
   
   (c) All women should have access to treatment for complications arising from abortion;
   
   (d) Abortions permitted by law should be safe;
   
   (e) States should consider reviewing laws containing punitive measures against women who have undergone illegal abortions.

Prevention and management of unwanted pregnancies

3. The past several decades have seen a dramatic overall increase in the use of modern family planning methods around the world. Between 1960 and 2000, the proportion of married women in developing countries using contraception to prevent unintended pregnancies rose from less than 10 to 60 per cent. The Guttmacher Institute found that increases in global contraceptive use contributed to fewer unwanted pregnancies and, in turn, a decline in the number of abortions. Such improvements have been uneven, however, with many developing countries still reporting very low contraceptive prevalence rates. In addition, while emergency contraception pills are now available in 140 countries, many women still do not know about this option, and neither emergency contraception pills nor intrauterine devices are available in a timely and affordable manner to poor, rural and young women. Emergency contraception is also being made illegal or less easily available in some countries, so that women’s chances of using this option are severely curtailed.

Increasing access to safe abortion

4. In October 2009, Government ministers at the High-Level Meeting on Maternal Health held in Addis Ababa issued a call to action urging Presidents and ministers to provide effective and comprehensive voluntary family planning, safe abortion and post-abortion care, in line with the Programme of Action of the International Conference on Population and Development. Over 400 legislators and ministers at the Fourth Global Parliamentarians’ Conference on Population and Development reiterated this call to action and further called for a review of “all laws and practices that still restrict access to sexual and reproductive health services”.

5. The 15 years since the Beijing Platform for Action was issued have brought some improvements in access to safe legal abortion. In 2003, the World Health
Organization (WHO) issued *Safe Abortion: Technical and Policy Guidance for Health Systems*, a groundbreaking resource that paved the way for a number of countries to develop and disseminate national standards and guidelines on the scope and quality of abortion care.

6. Health-care organizations and professional medical groups have issued clinical and ethical guidance on abortion, including the International Planned Parenthood Federation and the International Federation of Gynecology and Obstetrics (FIGO). FIGO’s guidelines state that women have the right to access legal, safe, effective, acceptable and affordable methods of contraception and safe abortion services. The International Confederation of Midwives has stated that the education of midwives should include training to prepare them for their role in providing abortion-related services that ensure women’s safety and well-being. The Asia and Oceania Federation of Obstetrics and Gynaecology has urged obstetricians, gynaecologists and their professional associations to play a leadership role in promoting governmental action to promote access to safe abortion services for all indications permitted by law. The Committee for Women’s Sexual and Reproductive Rights of the Latin American Federation of Obstetric and Gynecological Societies (FLASOG) urged Latin American and Caribbean Ministries of Health to formulate regulations that will facilitate women’s access to legal abortion, to preserve their health and lives and reduce maternal mortality.

7. Such policy guidance has contributed to notable, though still insufficient, progress in training physicians, midwives and other health providers and in making technologies for safe abortion available and affordable, including vacuum aspiration instruments and pharmacological, agents as recommended by WHO.

Reviewing laws with punitive measures against women who terminate pregnancies

8. Research shows that women have abortions just as frequently where abortion is legally restricted as where it is broadly permitted by law, but deaths and injuries from unsafe abortion occur at much higher rates in restrictive settings. Accordingly, one of the most important actions to reduce mortality and morbidity due to unsafe abortions is the liberalization of abortion laws, which was carried out in about two dozen countries between 1995 and 2008. Nevertheless, 40 per cent of women live in countries with highly restrictive abortion laws; this is the case for 92 per cent of women of reproductive age in Africa and 97 per cent in Latin America.

9. A number of national, state and provincial governments are now considering amending their laws to increase women’s access to legal termination of pregnancy. Twenty-seven countries have ratified the Protocol to the African Charter on Human and Peoples’ Rights on the Rights of Women in Africa, which states that State Parties should take all appropriate steps to “protect the reproductive rights of women by authorizing medical abortion in cases of sexual assault, rape, incest, and where the continued pregnancy endangers the mental and physical health of the mother or the life of the mother or the foetus”.

10. Within the United Nations human rights system, treaty monitoring committees periodically assess Governments’ compliance with the human rights conventions they have endorsed. Increasingly, these bodies have urged Governments to ensure women’s ability to access safe abortion and post-abortion care, in accordance with existing laws; they have also recommended that Governments review legal restrictions on abortion, in the light of evidence of the negative impact of unsafe abortion on women and girls and women’s rights to health care; privacy and
confidentiality; the benefits of scientific progress; and freedom from discrimination. In a number of cases, they have recommended that Governments remove punitive measures against women who terminate pregnancies and increase indications for legal abortion.

**Actions required**

11. In June 2009, the Human Rights Council adopted resolution 11/8 recognizing that maternal mortality is a health, development and human rights challenge. The Council asked all States to “renew their political commitment to eliminating preventable maternal mortality and morbidity at the local, national, regional and international levels, and to redouble their efforts to ensure the full and effective implementation of their human rights obligations [and] the Beijing Declaration and Platform for Action…”.

12. Despite progress achieved to date, much remains to be done if we are to stop women and girls from having unwanted pregnancies and suffering from unsafe abortions. Urgent needs include:

   (a) Changing the conditions that lead to unwanted pregnancies, including poverty, lack of gender equity, and sexual violence;

   (b) Establishing, preserving and fully implementing laws, norms and regulations that make modern contraceptive methods, including emergency contraception, accessible and available to every woman;

   (c) Ensuring that post-abortion care and safe abortion services are included in both public and private health services and that both vacuum aspiration and pharmaceutical methods can be provided by doctors and mid-level providers;

   (d) Using community-based approaches and the media to help women understand how to prevent unintended pregnancies, their legal rights to safe abortion, the dangers of unsafe abortion, and where to obtain safe abortion care;

   (e) Dedicating specific attention to the needs of adolescents, women with disabilities, women living with HIV and displaced women (refugees, asylum-seekers, etc.) in relation to unwanted pregnancies, contraception and abortion care;

   (f) Promoting constructive dialogues at the national and local levels about unwanted pregnancy and unsafe abortion;

   (g) Reforming policies and laws to increase access to safe abortion, in accordance with human rights principles; and

   (h) Ensuring that these efforts receive sufficient financial support.

13. Unwanted pregnancies continue and unsafe abortions account for approximately 13 per cent of global maternal deaths, with a much higher proportion in many developing countries. Unsafe abortion is one of the easiest causes of maternal mortality and morbidity to address, through improved access to family planning information and services, high-quality post-abortion care and safe, legal abortion. Meeting the Millennium Development Goal 5 targets of reducing maternal mortality and achieving universal access to reproductive health care can only be met if unsafe abortion is fully and effectively addressed, as outlined above.