Commission on the Status of Women
Sixtieth session
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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”

Statement submitted by Minnesota Citizens Concerned for Life
Education Fund, 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.

* The present statement is issued without formal editing.
Statement

The Minnesota Citizens Concerned for Life Education Fund welcomes the opportunity to participate in the 60th session of the Commission on the Status of Women. The session will, in part, review implementation of the agreed conclusions from the 57th session regarding the elimination and prevention of all forms of violence against women and girls. We urge Member States to pursue gender equality and women’s empowerment without promoting or expanding access to abortion, which is not advocated in the agreed conclusions from the 57th session or in the Beijing Declaration and Platform for Action. We also call on Member States to recognize and combat sex-selective abortion and forced abortion, which are acts of violence against women.

Women’s empowerment does not require legalized abortion

The agreed conclusions from the 57th session reaffirm the Beijing Declaration and Platform for Action, which never advocate the legalization or promotion of abortion. The Platform quotes from paragraph 8.25 (it is also affirmed in paragraph 7.24) of the Programme of Action of the International Conference on Population and Development: “In no case should abortion be promoted as a method of family planning. ... Any measures or changes related to abortion within the health system can only be determined at the national or local level according to the national legislative process” (paragraph 106-k).

On the contrary, various international human rights instruments — such as the Universal Declaration of Human Rights, the International Covenant on Civil and Political Rights, and the Convention on the Rights of the Child — provide support for the equal protection of human beings at all developmental stages and in all conditions, which should include human beings in utero. The Declaration of the Rights of the Child states that “the child … needs special safeguards and care, including appropriate legal protection, before as well as after birth.” The 57th session of the Commission agreed that “all human rights are universal” and “it is the duty of States … to promote and protect all human rights” (paragraph 15). If human rights are universal, then they belong to all members of the human species, including those in the embryonic and fetal stages of their lives. Abortion is a human rights violation and a form of violence — often against female children.

Maternal health and safety do not require legalized abortion. Maternal health depends far more on the quality of medical care (and related factors) than on the legal status or availability of abortion. After Chile prohibited abortion in 1989, for example, its maternal mortality ratio continued to decline significantly and at about the same rate, dropping 69.2 per cent over the next 14 years, according to a 2012 study published in PLOS ONE. Even maternal deaths due specifically to abortion declined — from 10.78 abortion deaths per 100,000 live births in 1989 to 0.83 in 2007, a reduction of 92.3 per cent after abortion was made illegal. Legalizing abortion, the study’s authors conclude, is demonstrably unnecessary to improve maternal health. Instead, women’s lives can be saved by providing adequate nutrition, prenatal care, skilled birth attendants, emergency obstetric care, clean water, and sanitation. Improvements in women’s education and the overall health care infrastructure are also tied to substantial reductions in maternal mortality. These measures (and others) empower women and contribute greatly to sustainable development.
Abortion inherently poses some risks to women’s health. The Beijing Platform for Action states, “[R]esearch to understand and better address the determinants and consequences of induced abortion, including its effects on subsequent fertility, reproductive and mental health … should be promoted” (paragraph 109-i). But the international community has neglected important research on the health risks of abortion. For example, a wealth of worldwide evidence has established that induced abortion substantially increases the risk of preterm birth in subsequent pregnancies; preterm birth is the leading cause of newborn mortality. In addition, a 2011 meta-analysis published in the British Journal of Psychiatry found an 81 per cent increased risk of mental health problems among women who had undergone abortions. And a 2013 meta-analysis of 36 different Chinese studies published in Cancer Causes and Control determined that abortion increased the risk of breast cancer by 44 per cent. The medical risks of abortion are exacerbated in countries where basic health care is lacking. These dangers to the health of women should be acknowledged, and information about them should be disseminated (consistent with strategic objective C4 of the Platform for Action).

Sex-selective and forced abortion are acts of violence against women

In the 57th session, the Commission agreed that it “strongly condemns all forms of violence against women and girls” (paragraph 12). It called on States to “devote particular attention to abolishing practices and legislation that discriminate against women and girls, or perpetuate and condone violence against them” (18). It also called on governments to “condemn and take action to prevent violence against women and girls in health-care settings, including … forced medical procedures … such as … forced abortion” (paragraph aaa).

The Beijing Platform for Action describes forced abortion, forced sterilization, sex-selective abortion, and female infanticide as acts of violence against women (paragraph 115). It calls for the elimination of “all forms of discrimination against the girl child and the root causes of son preference, which result in harmful and unethical practices such as prenatal sex selection and female infanticide; this is often compounded by the increasing use of technologies to determine foetal sex, resulting in abortion of female foetuses” (277-c). It also calls for governments to “enact and enforce legislation protecting girls from all forms of violence, including female infanticide and prenatal sex selection” (283-d).

This goal has simply not been met. Sex-selective feticide — when abortion is performed solely on the basis of the unborn child’s sex — is a massive problem in areas where culture and tradition favour boys over girls, including parts of Asia, Southeast Europe and the Caucasus. One United Nations estimate indicates that as many as 200 million females are “missing,” and this gender imbalance has contributed to devastating social and demographic problems, including sex trafficking and further violence against women. In addition, many women are coerced into choosing abortion; many have even been violently and forcibly subjected to it. The Platform for Action affirms that violence and coercion violate basic human rights (paragraph 96) and calls on governments to “eliminate coercive laws and practices” (107-d). But these ongoing assaults on human dignity and women’s rights demand greater attention from the international community. Legal and educational initiatives to protect the girl child and to safeguard mothers from violence and coercion must be more vigorously pursued.