

The Global Magnitude and Consequences of Unsafe Abortion

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Summary

- The magnitude of unsafe abortion
- Link between safety and legality
- How unsafe abortions occur
- Consequences of unsafe abortion
- Policy and program needs

Definition of unsafe abortion

WHO defines unsafe abortion as:

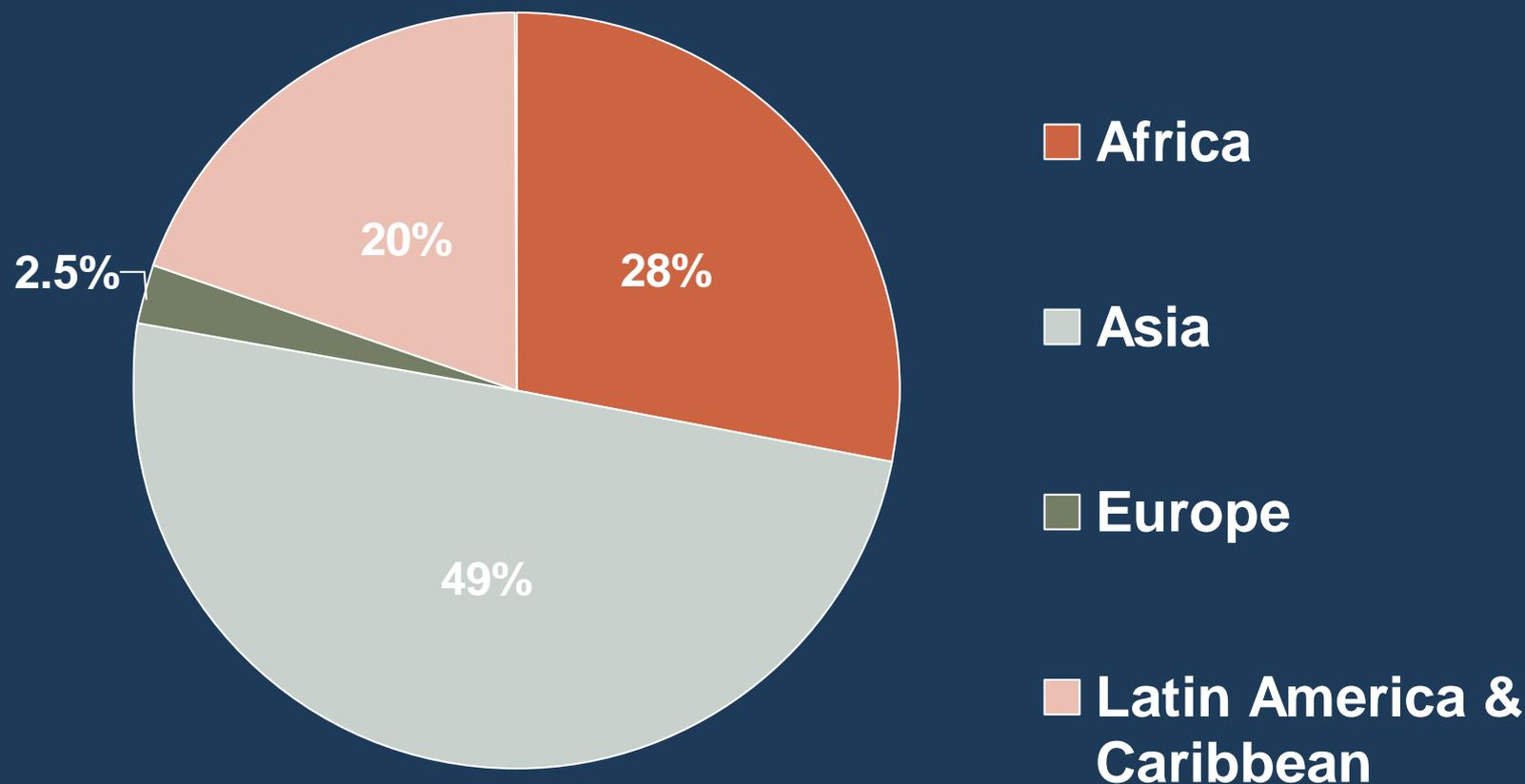
A procedure for terminating an unintended pregnancy carried out either

(a) by persons lacking the necessary skills or

(b) in an environment that does not conform to minimal medical standards, or

(c) both conditions apply

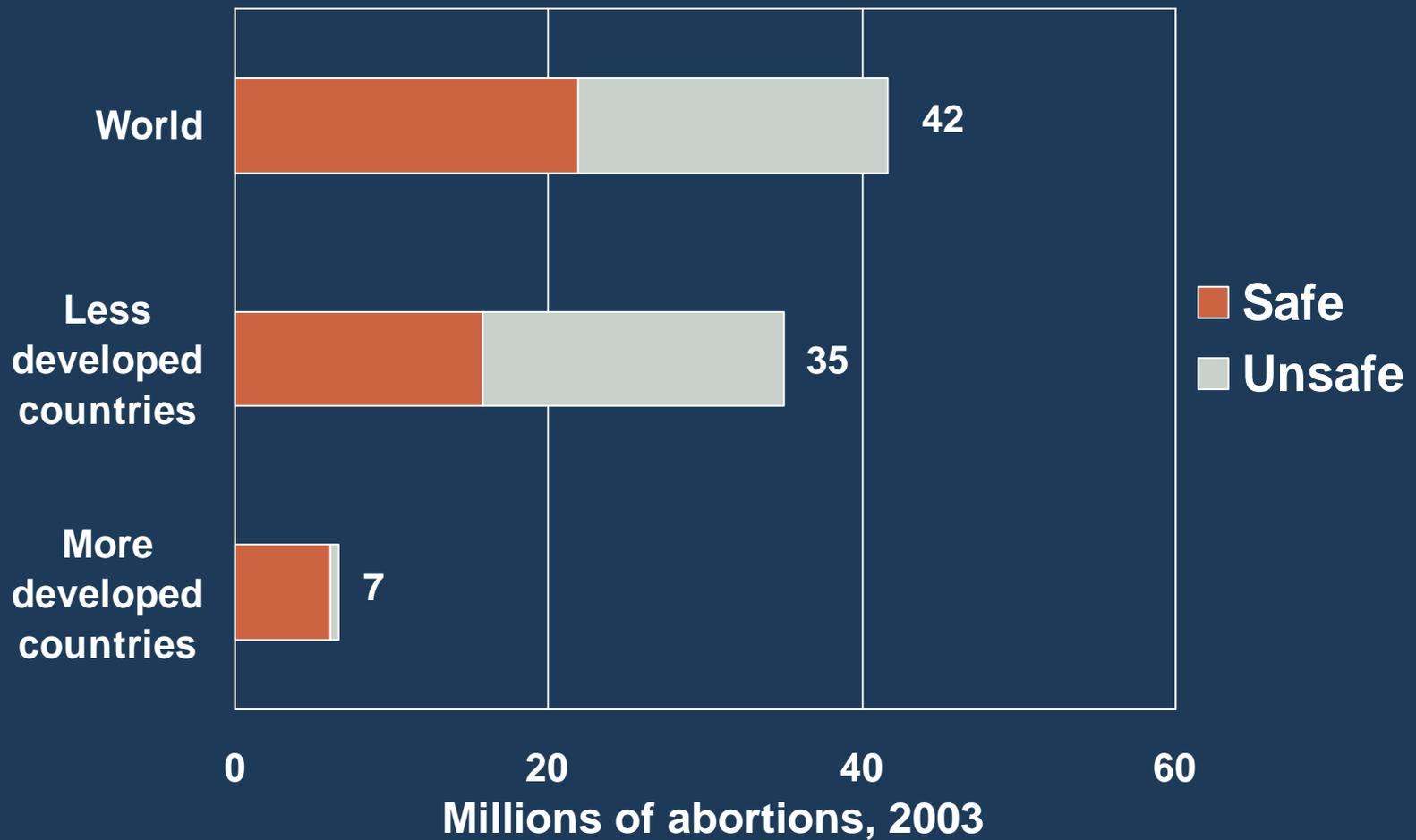
Half of the world's unsafe abortions occur in Asia and more than a quarter occur in Africa



19.7 million unsafe abortions, 2003

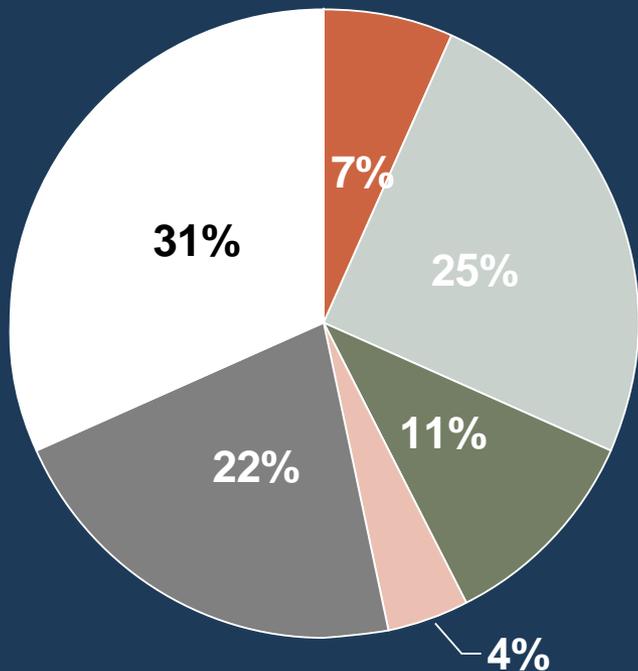
Note: Less than 1% of unsafe abortions occur in Oceania

Almost all unsafe abortions occur in the developing world



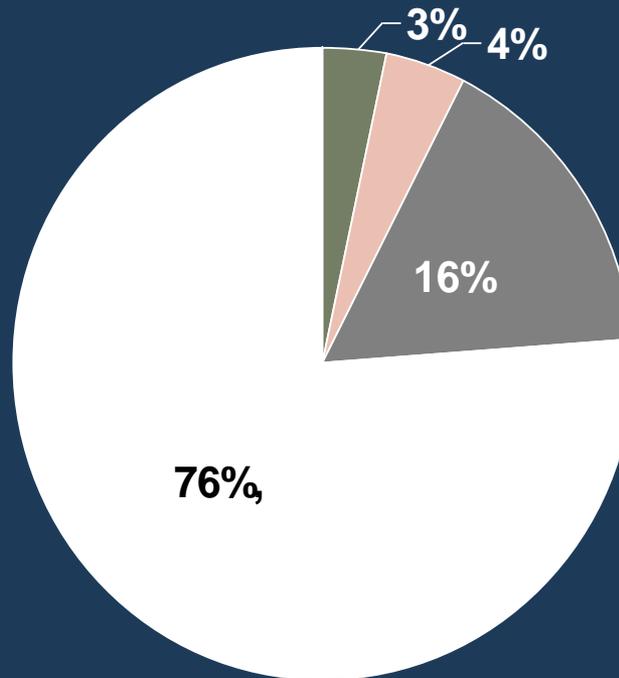
About half of women in the developing world live under highly restrictive abortion laws

Developing countries



1.3 billion women, 15-44

Developed countries



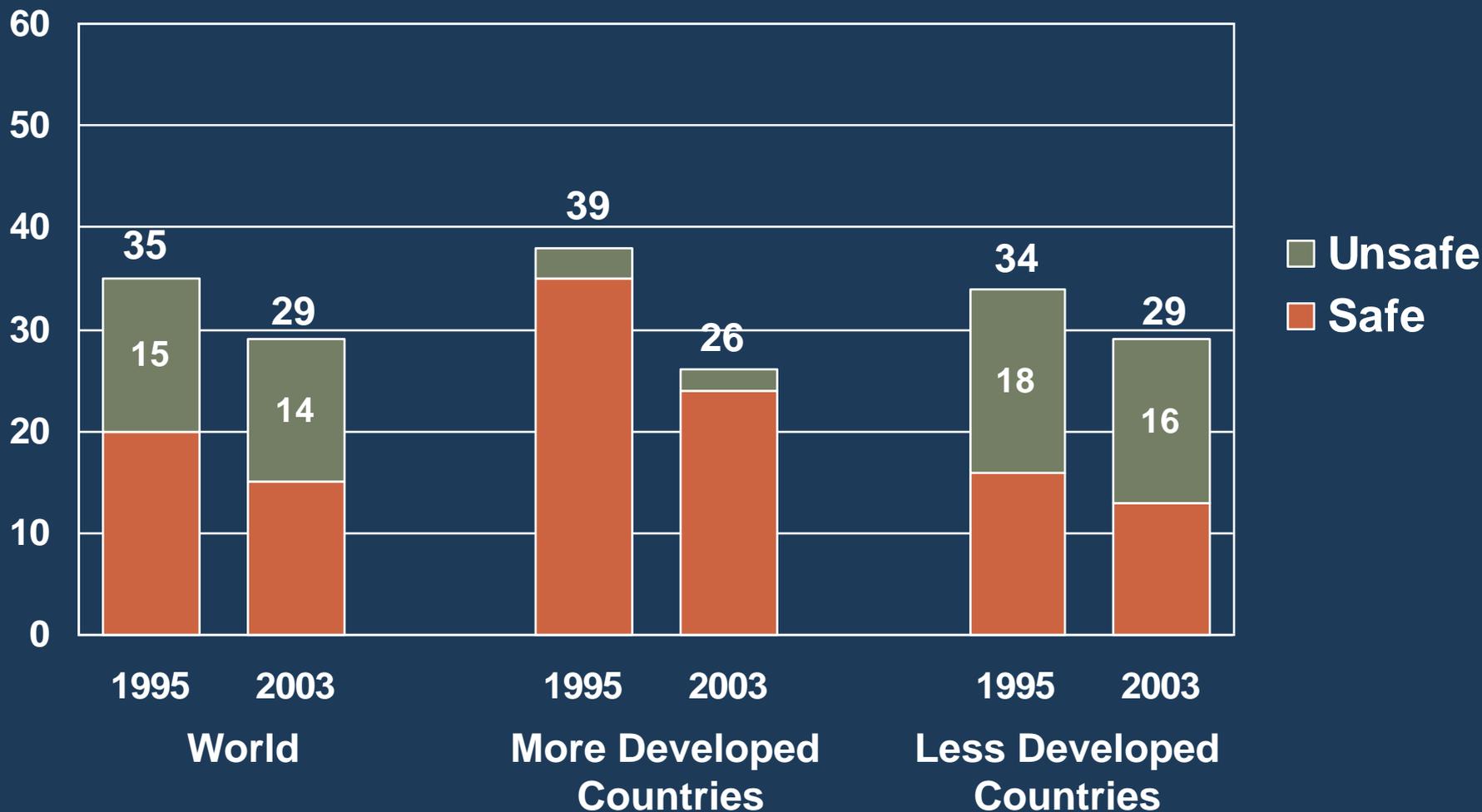
253 million women, 15-44

Grounds on which abortion is permitted

- None
- Only to save woman's life
- Also to protect woman's physical health
- Also to protect woman's mental health
- Also on socioeconomic grounds
- Without restriction as to reason

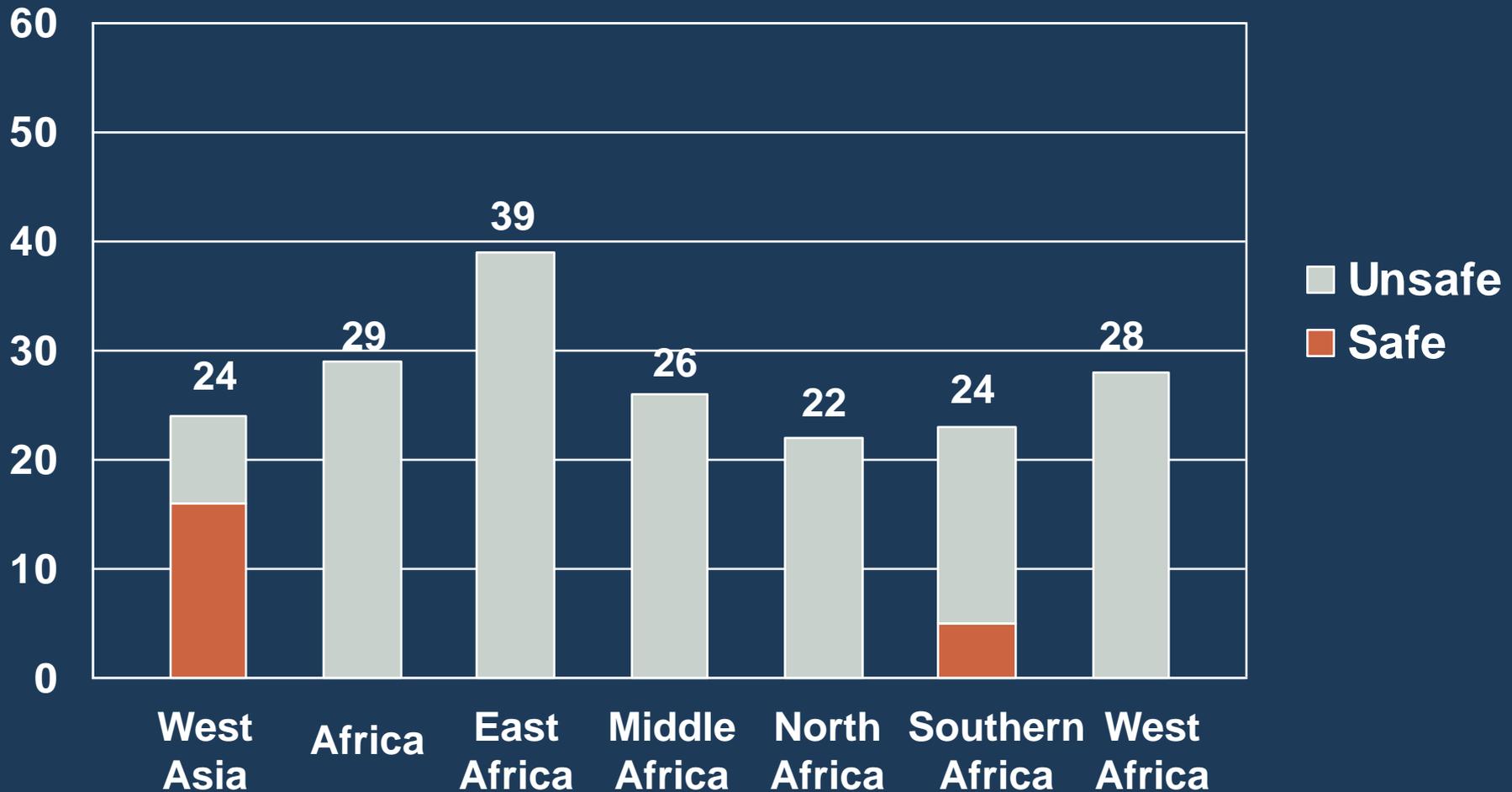
Overall abortion rates declined worldwide between 1995 and 2003, but not the unsafe abortion rate

Abortions per 1,000 women aged 15-44



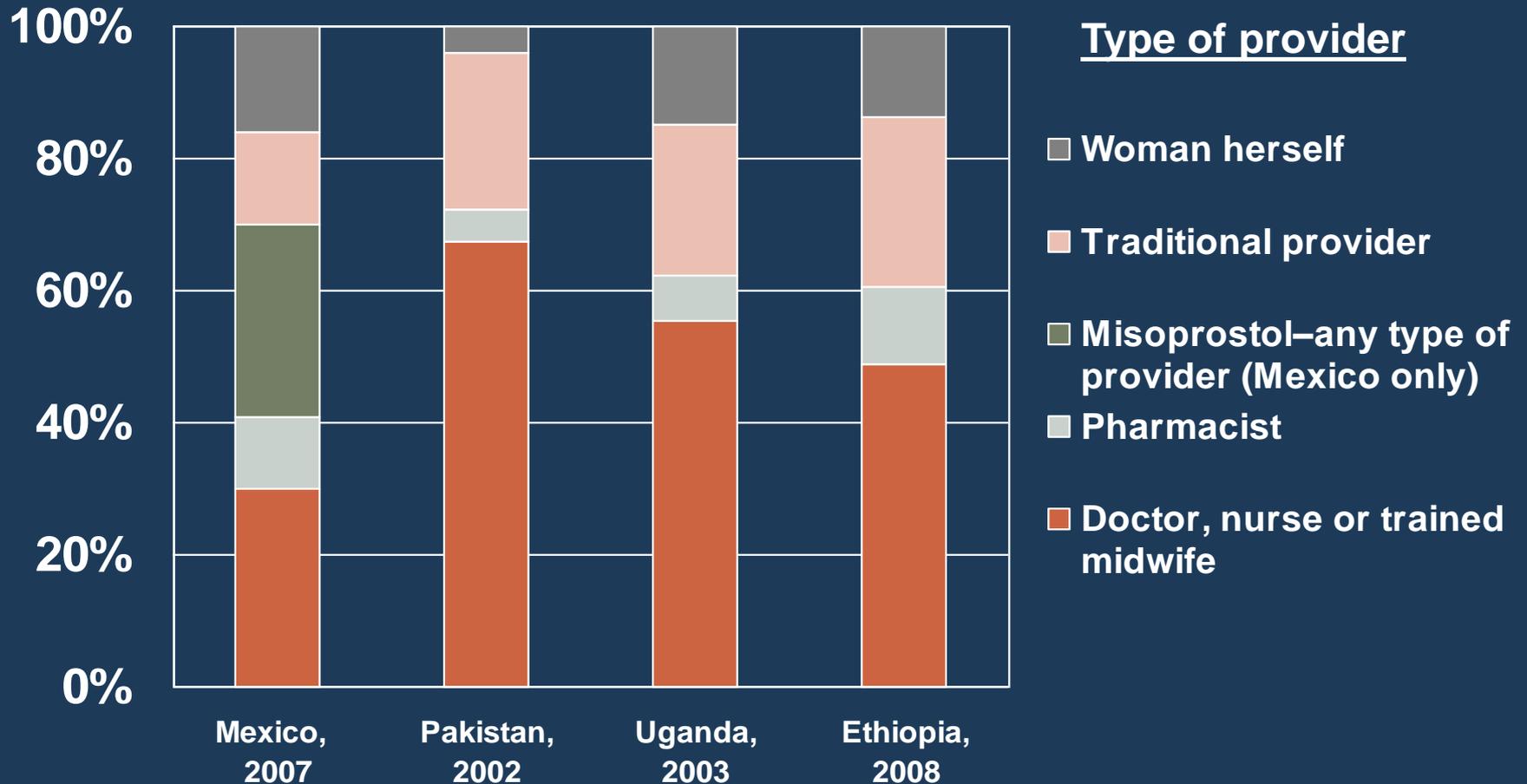
Safe abortion is rare in Africa

Abortions per 1,000 women aged 15-44 in 2003



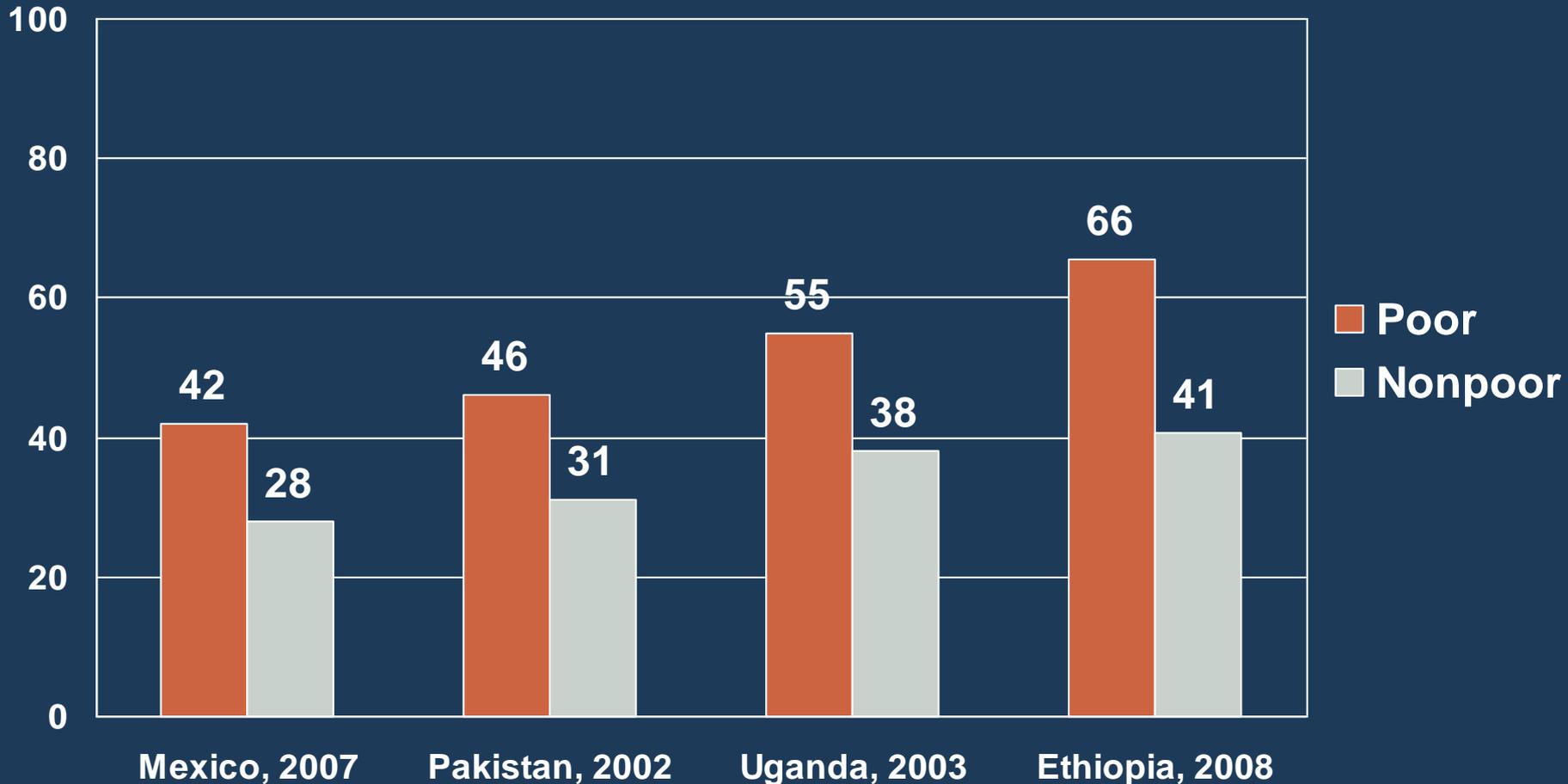
In countries with restrictive abortion laws, providers of abortion are often untrained

Percentage of women having abortions



Poor women are more likely than non-poor women to experience serious abortion complications

Of women having abortions, percentage experiencing serious complications

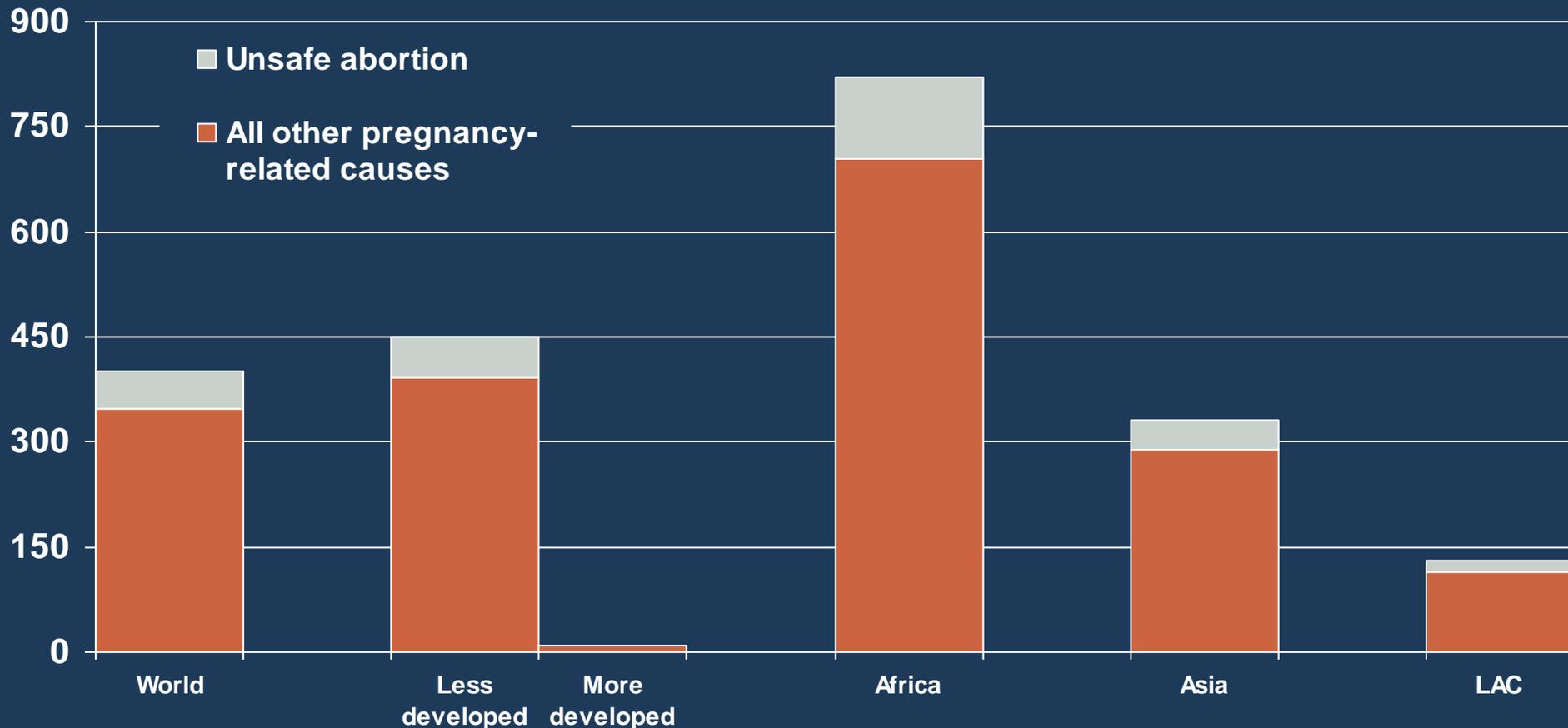


Consequences of Unsafe Abortion

- Death, ill health, economic and social costs
- Substantial body of research on mortality and morbidity, but still large gaps
- Progress during past five years in research on economic and social costs
 - Pilot study in Ethiopia, Mexico and Pakistan
 - National study beginning in Uganda

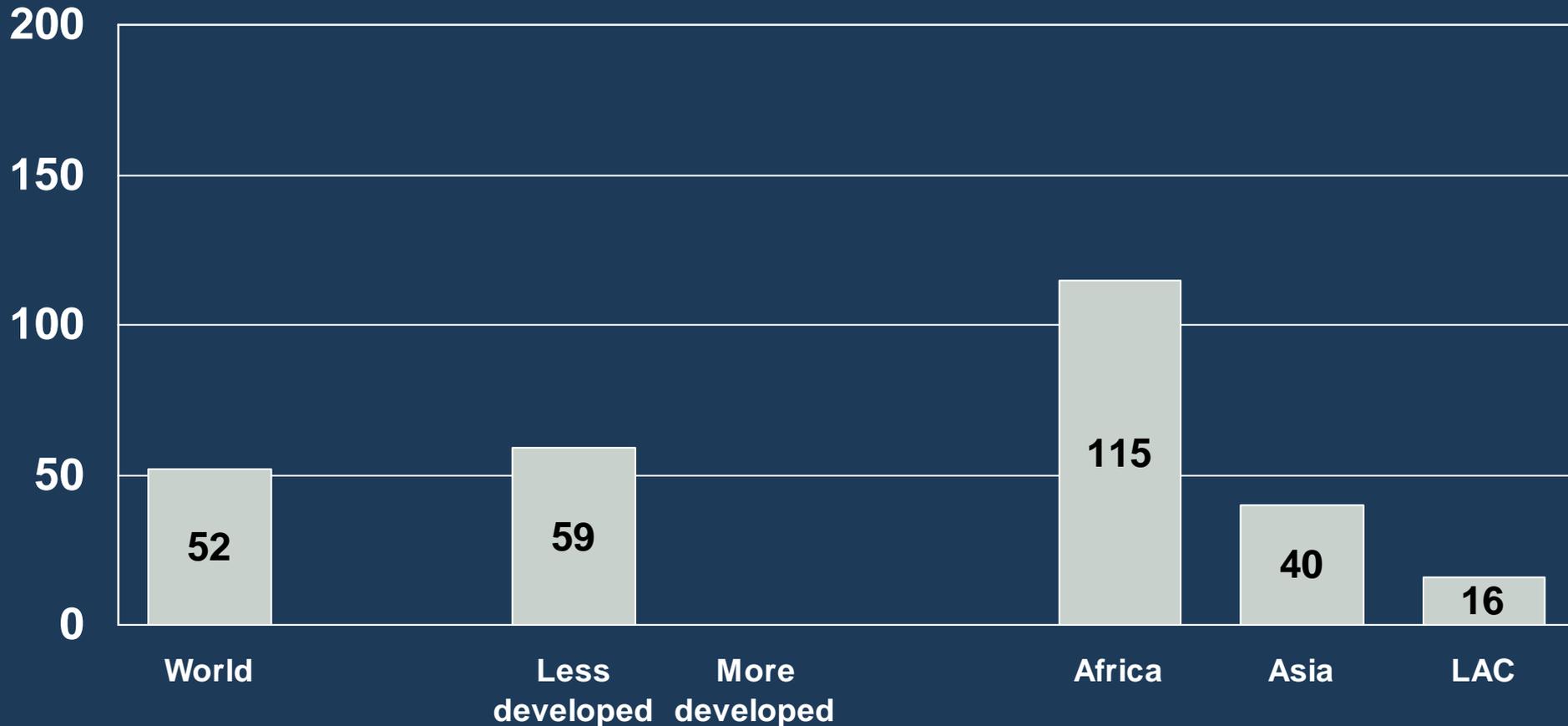
Unsafe abortion accounts for one in eight maternal deaths

Maternal deaths per 100,000 live births, 2003



Abortion-related mortality is highest in regions with restrictive laws and weak health systems

Maternal deaths from unsafe abortion per 100,000 live births, 2003



Unsafe abortion represents a major public health crisis

- Almost 70,000 preventable deaths per year, more than half in Africa
- 5 million women hospitalized per year globally
- 3 million women do not get the postabortion care they need each year
- Delay in obtaining care is common and leads to worse health outcomes

Health consequences are often severe and can be long-term

- Kenya: 28% of post-abortion patients experienced severe complications
- Nigeria: among hospitalized patients:
 - 1 in 3 had hemorrhage, 1 in 4 sepsis,
 - 1 in 10 had injury.
- 1/3 of hospitalized cases in Ethiopia and Kenya and 1/5 in Nigeria were in the second trimester
- Long-term consequences include infertility and chronic infections

Economic cost of unsafe abortion to countries and households are large

- Postabortion care cost about US \$100 per patient in Africa (2006)
- Direct cost to health systems in Africa was an estimated \$170 million in 2006
- Impact on households – lost productivity, out-of-pocket expenses and debt – are beginning to be researched
- Postabortion care is many times the cost of a safe abortion

Contraception is part of the solution: Preventing unintended pregnancy is cost effective – Nigeria

- Estimated \$19 million spent annually in treating unsafe abortion complications in Nigeria
- It would cost only \$4.8 million to provide the contraceptive services needed to prevent the pregnancies resulting in these abortions
- This is a cost-benefit ratio of about 4:1

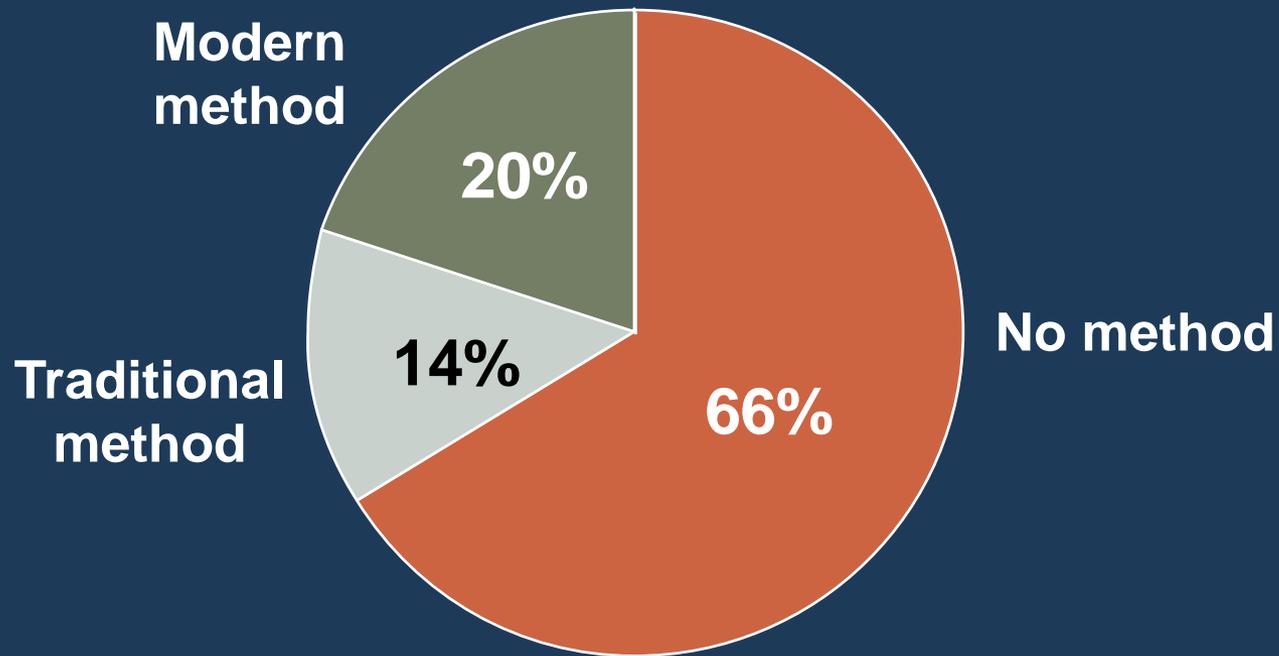
The social costs of unsafe abortion are widespread and damaging

- About 200,000 children lose their mothers each year due to abortion-related deaths, globally
- Women's abortion-related ill-health affects their children and families
- Internalized stigma - guilt and shame – negatively affects women's well-being
- Perceived or actual stigma – e.g. suspicion of infidelity – weakens marital relationship
- Negative attitudes of providers harms women

Women often delay getting care

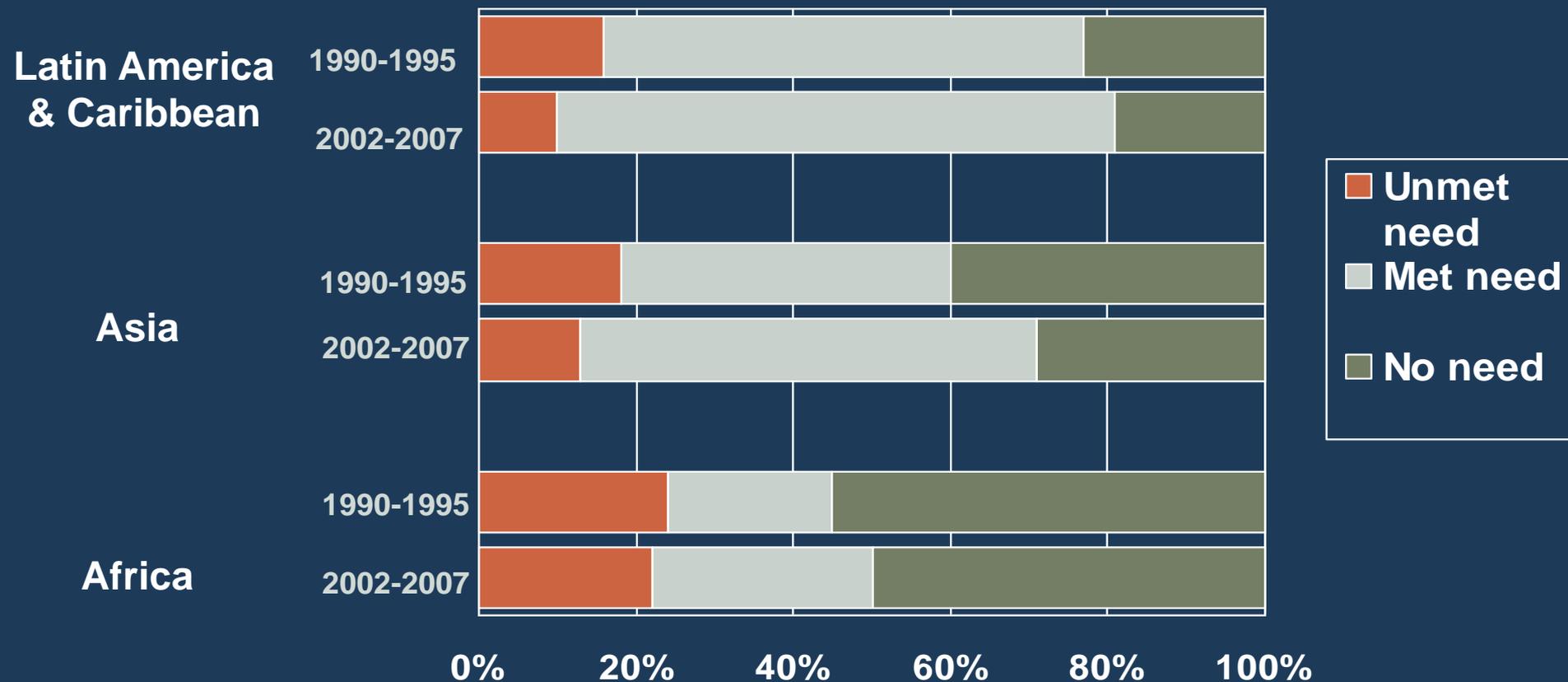
- In the words of a Ugandan woman, age 44:
- *"[Women] have the problem of fearing to tell the providers what happened.... They fear that they and the people who advised them can be arrested.. Women fear that if they go to hospital they can be arrested and asked to reveal the people who helped them stop the pregnancies."*

Most unintended pregnancies occur among women who were not using any contraceptive



Unintended pregnancies in developing countries,
by women's contraceptive use

Unmet need for contraception among married women is declining, but it is still high



Legalization saved lives: South Africa

- Between 1994-2000, severity of abortion related complications dropped:
 - Fewer post-abortion infections
 - Larger gains by young women
- Deaths due to unsafe abortion declined by at least 50%

Improvements in postabortion care would reduce health consequences

- Coverage should be expanded to reach women who need and do not get care
- Misoprostol can help to close this gap
- Improve quality of postabortion care
 - Increase use of MVA and medication abortion
 - Improve provision of contraception within PAC
- Reduce negative attitudes of providers

Key interventions to reduce unsafe abortion and its consequences

- Expand access to modern contraceptives and improve family planning services
- Expand access to legal abortion and ensure that safe services are available to women in need
- Improve the quality and coverage of postabortion care, which would reduce maternal death and disability due to unsafe abortion



For more information, visit www.guttmacher.org