**Introduction**

Unsafe abortion refers to the termination of an unintended pregnancy either by persons lacking the necessary skills or in an environment lacking the minimal medical standards, or both.

Every eight minutes a woman dies somewhere in a developing country due to complications from an unsafe abortion. She most likely had little money or support to obtain safe services. She probably first tried to induce a termination herself. Failing that she would have turned to an unskilled, but relatively inexpensive, provider.

Unsafe abortion accounts for an estimated 13% of maternal deaths. It leaves many more women unwell and disabled. Complications from unsafe abortions include: severe bleeding, uterine perforation, tearing of the cervix, severe damage to the genitals and abdomen, internal infection of the abdomen and blood poisoning. Medium and long-term complications range from reproductive tract infections and pelvic inflammatory disease to chronic pain and infertility. Complications also include increased risk of ectopic pregnancy, miscarriage or premature delivery in subsequent pregnancies.

**How can we prevent unsafe abortion?**

The Programme of Action of the 1994 International Conference on Population and Development called for safe abortion where it is legal and access to services to manage the complications of unsafe abortion everywhere. More recently the new target under Millennium Development Goal 5 (improve maternal health) called for universal access to reproductive health by 2015.

There is evidence that improving access to contraceptive and safe abortion services is cost effective in comparison with dealing with the after effects of unsafe abortions.

Despite this some countries’ legal frameworks do not allow or restrict access to abortion. However, most countries allow abortion to save the woman’s life, many if pregnancy endangers the woman’s health, some in cases of pregnancy as a result of sexual assault or where there are foetal abnormalities.

Even where safe abortion is available poor and vulnerable women may find it more difficult to access services due to cost, geographical location, lack of information and other factors. Unequal gender norms that construct women’s key role as bearing many children and religious norms that abortion is sinful are difficult barriers for women to overcome.

Measures that would reduce the incidence of unsafe abortion include:

- The creation of policy and legislative frameworks that are less restrictive
- The scale up of sexual and reproductive health services to reduce unwanted pregnancies
- The provision of safe abortion services to the fullest extent of the law
- Education on safe abortion
- Training and services to manage and prevent unsafe abortion
- Reduction in the financial barriers that prevent women using sexual and reproductive health and safe abortion services
- Work at community level to challenge negative gender norms that prevent women accessing safe abortion services.
Areas for action

✓ Provide comprehensive sexual and reproductive health services
Once legal or available, abortion and menstrual regulation services need to be provided as part of a quality assured sexual and reproductive health package. Safe abortion services are an essential part of the service package needed to reach targets for universal access to reproductive health.

✓ Make the links between unsafe abortion and maternal health
There is a tendency to separate the issue of unsafe abortion from maternal health policy and debate due to political sensitivities. The de-linking of the two issues ignores the evidence that many women undergoing unsafe abortion are already mothers whose health is then seriously at risk.

✓ Make the economic argument for access to safe abortion services
The costs of treating complications from unsafe abortion are a burden on already fragile health systems in developing countries. Contraceptive services and safe abortion services are very cost effective.

✓ Involve men
To overcome familial, community and political barriers to accessing safe abortion services men need to be engaged as champions for women’s sexual and reproductive rights.

Useful resources


Who are we?
The Realising Rights Research Programme Consortium is a partnership of five organisations. The consortium brings together epidemiologists, demographers, clinicians, social scientists, development specialists and service delivery organisations. You can find out more about our work by visiting our website www.realising-rights.org. You can contact us through our coordinator J.Vaghadia@ids.ac.uk. This factsheet was prepared by Kate Hawkins at the Institute of Development Studies.

Our partners:
African Population and Health Research Center (Kenya), BRAC (Bangladesh), INDEPTH Network (Ghana), Institute of Development Studies (UK) and London School of Hygiene and Tropical Medicine (UK).

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