### **Abortion Worldwide**

### **Uneven Progress and Unequal Access**

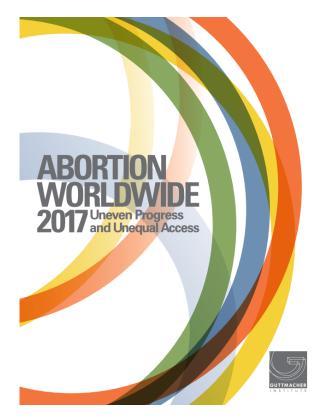
Gilda Sedgh

FIAPAC September 2018

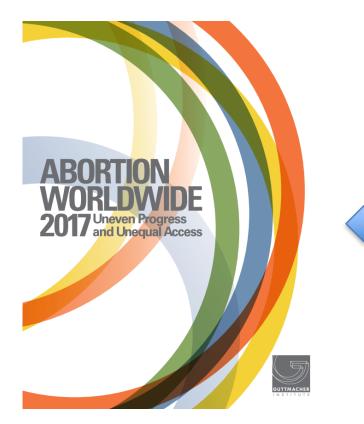


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#### **ABORTION WORLDWIDE:** 20 YEARS OF REFOR



#### Articles

#### Belic Gurutes, Galler-Gerde, Chimerine Resele, Boole Rendd Juhnsen), dage Turquly, Inisa Assily, Galla Seigh, Sasheeli-Singh, Aliminali Bankak, Anne Papinchek, Sanchen Resele, Cheming Kang, Leantine Akano.

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- Methods: We used all available required data on abortion methods; providers, and ortings, and addry as eventuation within a Bereich Schröder model continue the global, angeines), and antenging and 2010 global control of the schröder schröder and schröder schröder schröder into the comparison of these such activation schröder and schröder schröder into the comparison of these such activation schröder and schröder schröder into the comparison of these such activation schröder and schröder schröder into the comparison of these such activations are schröder and schröder schröder into the comparison of these such activation schröder activation and schröder schröder into the comparison of the schröder activation of the schröder schröder activation of the schröder schröder activation of the schröder activation of the schröder schröder activation activation of the schröder activation of the schröder schröder schröder activation of the schröder schröder activation of the schröder schröder activation of the schröder schröder schröder activation of the schröder schröde
- In the comparison that and and mark and the second workholds each sure between 2005-14, we estimated that the second structure of the second structur Research Training in Person Reproduction (HEP), Naville Tradit Dissociation Contra
- httpspetizion increased offarts are needed, especially in developing countries, to ensure access to cafe abortion. The possely of empirical data in a limitation of these findengs, lengerood increasity data for health services and increasity ensures in address theme sums are researed to instruct relation relations.
- Funding UND/JUNFPA/UNICIP/#HO/World Rask Special Programme of Research, Development and Research Training in Human Reproduction: David and Lacie Packad Foundation; UK Aid from the UK Government; David Minister of Parameter Refer. Special Control of the Control of Control of
- Enpyright © 2017 World Health Organization; Korno CC WANC-ND 1.0 IGO Korner which permits serve b

Introduction Despite scientific advances that enable the provision of safe abortion at the primary care level, smalle abortions presist and versal in a kipb hashes of complications; maternal deats; and substantial costs to werses, families, and health workers it	guidelines, which are updated periodically. <sup>46</sup> In the 25 years since somale abortion was defined, evidence has evolved and simple technologies, such as maximal vacuum appication and medical abortions pitth miliperiolines an minoproteit, or minoproteit alone if miliperiotee in sumanilables, how much the provision of and shortion
WHO defines unsufe abortion as a procedure for termination of a programy done by an individual who does not have the necessary training or in an environment not coefforming to minimal medical standards. However,	pussible at the primary care level and by health worker other than disclore. <sup>30</sup> The conditions leading to a sal



#### Articles

#### Global, regional, and subregional trends in unintended pregnancy and its outcomes from 1990 to 2014: estimates from a Bayesian hierarchical model @`**\** 🖲 oa

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invested pregnancy rate remains substantially higher in developing regions than in developed productive health services are needed to help women avoid unintended pregnancies, and to use for those who do experiences used pregnancies. unders Datab Minister of Foreign Alfairs and UK Aid from the UK Government.

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#### 🛞 🎾 Abortion incidence between 1990 and 2014: global, regional, and subregional levels and trends

Colda Sedigh, Janushan Brannis, Sandwella Simgh, Adaminadar Randado, Anna Papina halli, Bala Garante Onar Sannada. Bandar Randal Manuan In Sold, Bart Johannan, Laundon All----and global levels and trends in abortion incidence for 191 use the results to extinue the proportion of programmer vary in countries grouped by the legal status of abortion. Napa, and Manufacture (C.C.M. Salah Anglo (C.C.M.

Continuation Institute, New York, NY, Marine Continue, New York, NY, Marine Continue, Na Nethods We requested abortion data from government agencies and en veloce-liv representative studies. With data for 1969 country-years, runnes of repode subgroups.

dage We estim apd 15–44 years workboars in 2019–16, remote an symmetry of the former workboard incremental by Beccause of population garwerk, the around matchine of absentions workboard in 2019–16 (1) and 2019–16 (2) an

Interpretation Alection rates have declined significantly since 1996 in the developed world lost out in the developing world. Executing access to scenal and reproductive health care could help millions of women around unsistended memory and memory memory in and scenario. D-186-Celyl, Selfred

Funding UK Government, Dutch Ministry of Foreign Affairs, Norvegian Agency for Development Cooperation, The David and Lacib Packard Foundation, UNEPUINTPA/UNICE/WINF/World Back Special Programme of Research, Development and Research Taining in Human Reportantion.

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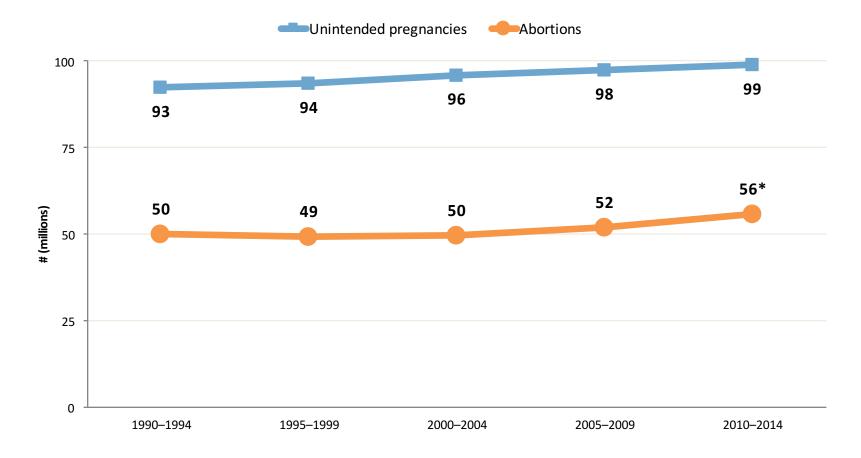


### **Key topics**

- Global trends in the incidence of abortion and unintended pregnancy
- Abortion laws around the world
- The safety of abortions obtained
- Consequences of unsafe abortion
- Characteristics of women who have abortions

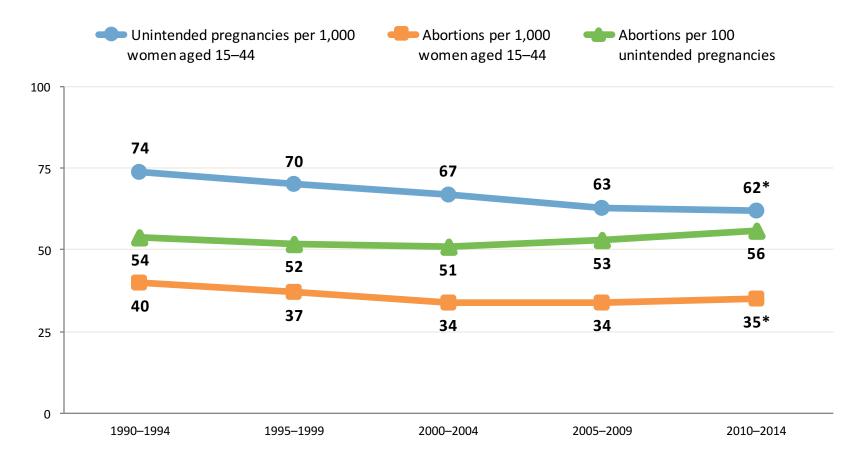


# About 99 million unintended pregnancies and 56 million abortions take place each year



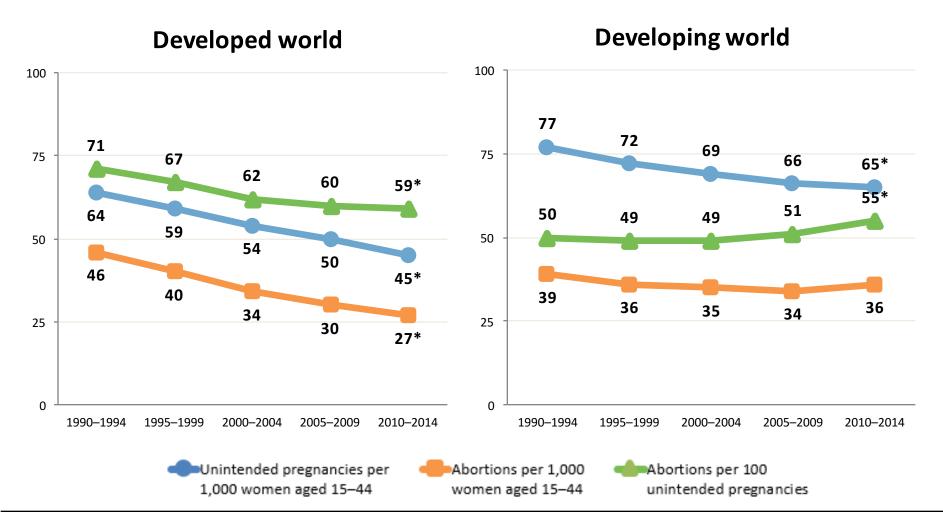


# Unintended pregnancy and abortion rates declined globally



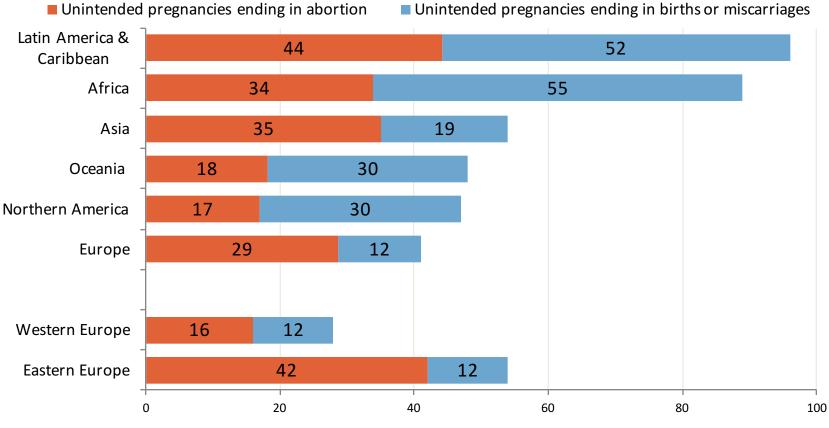


## Unintended pregnancy rates remain higher in the developing world than in the developed world





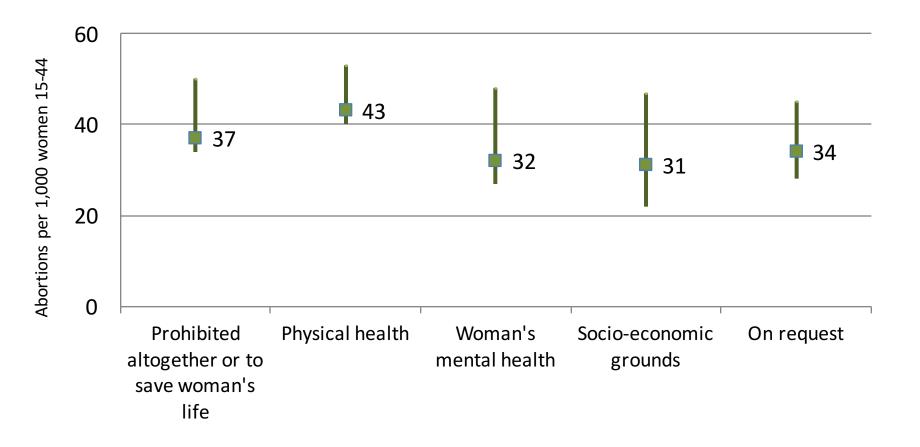
## Unintended pregnancy and abortion rates are highest in Latin America and the Caribbean and in Africa



No. of unintended pregnancies per 1,000 women aged 15–44



# The abortion rate is similar in countries with restrictive and liberal abortion laws



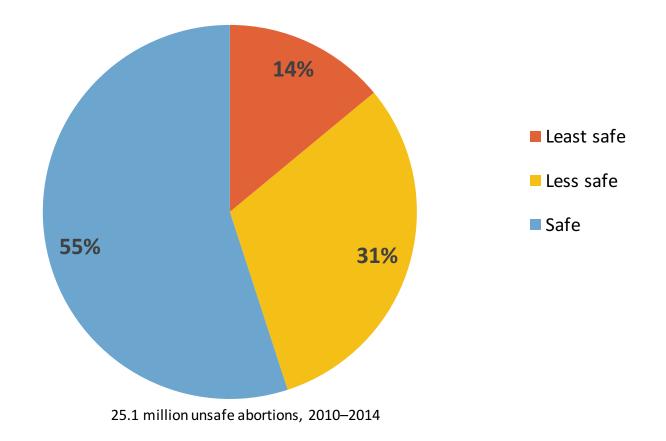


### What is an unsafe abortion?

- WHO and Guttmacher recently developed three categories of safety:
  - Safe abortions are those done (a) by a trained person and (b) using a WHO-approved method
  - Less safe abortions are those that meet only one of the above criteria
  - Least safe abortions meet neither criterion.

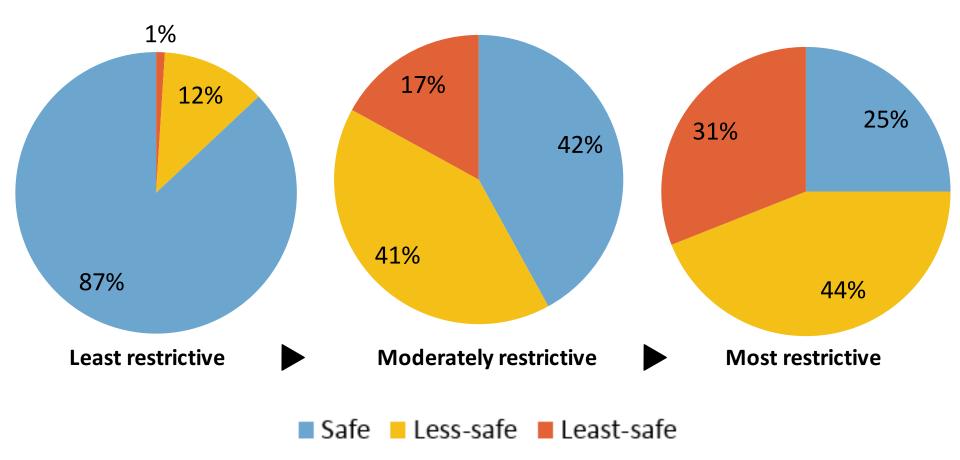


# 25 million unsafe abortions are done under unsafe conditions each year





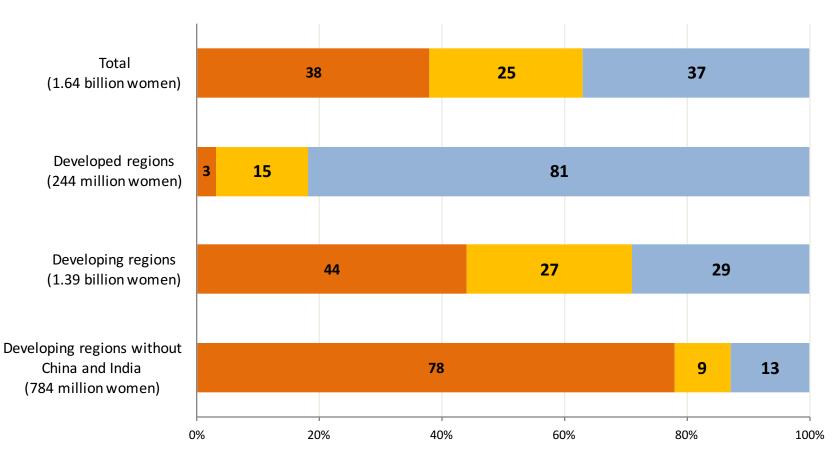
# Abortions in countries with restrictive abortion laws are more likely to be unsafe





## About 3% of women in developed countries live under restrictive abortion laws

None, to save woman's life, physical health To preserve mental health, socioeconomic grounds Without restriction



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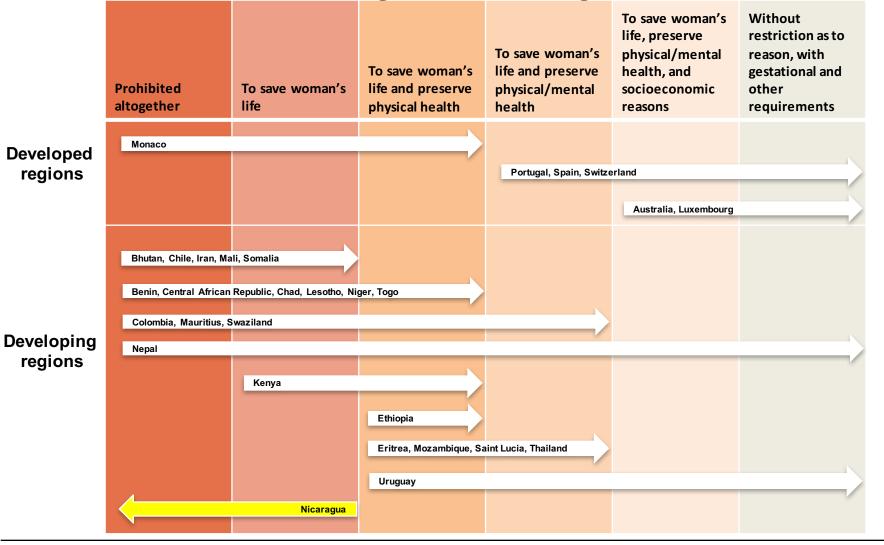


### **Changes in legal status of abortion**

- Of the 28 countries that substantially changed their abortion laws since 2000, 27 expanded the grounds for legal abortion.
- Another six countries made narrow expansions to the grounds under which abortion is legal, to include cases of rape, incest or fetal anomaly.
- In all, 33 countries expanded legal criteria for abortion between 2000 and 2017.

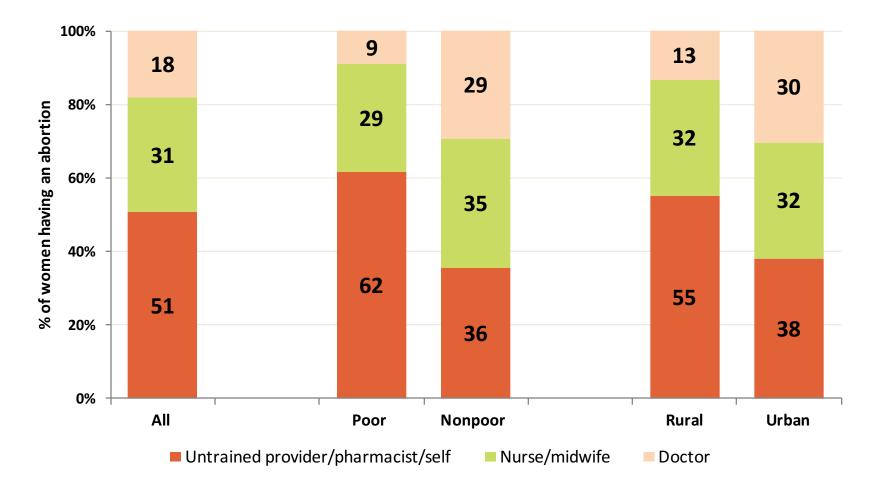


## Almost all countries that changed their abortion laws since 2000 broadened grounds for legal abortion



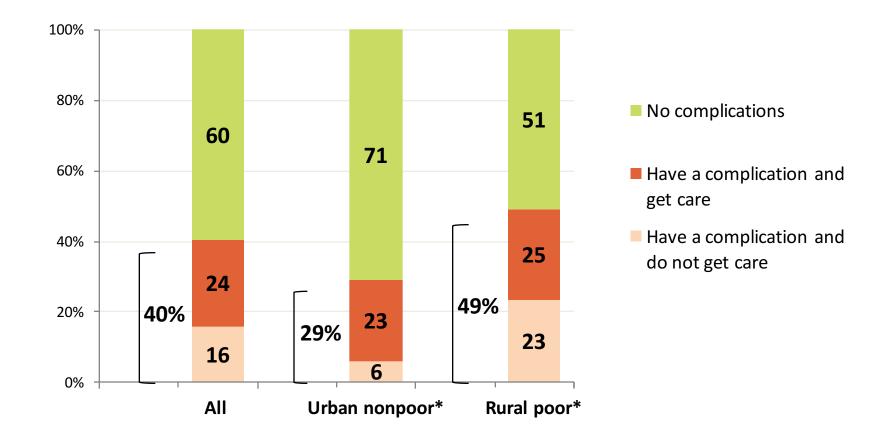


#### In 10 legally restrictive countries, poor and rural women were particularly likely to use an untrained provider



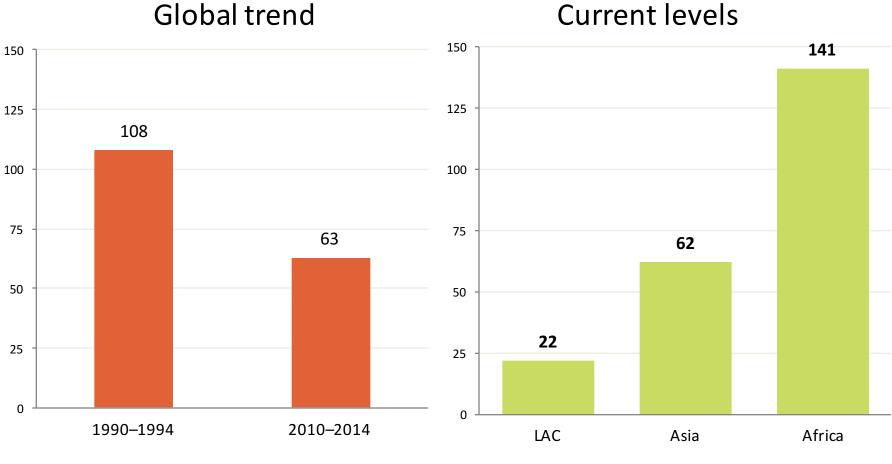


## In 14 countries where unsafe abortion is prevalent, rural poor women are most likely to experience complications





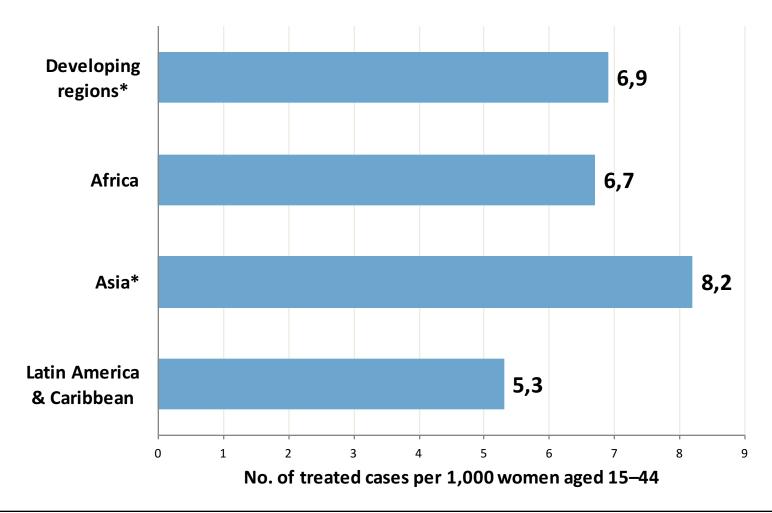
## Women are still at risk of dying from an unsafe abortion



#### Number of deaths for every 100,000 abortions

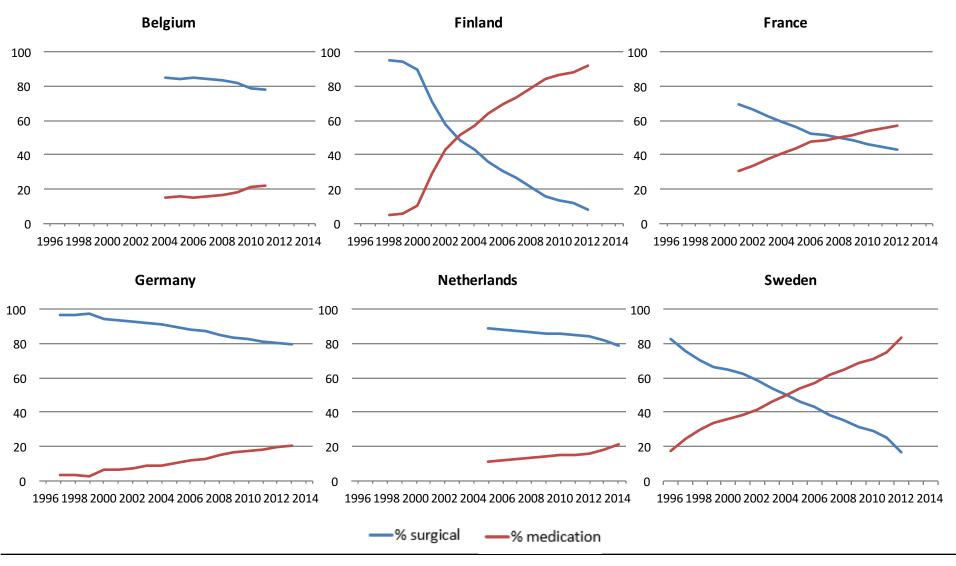


## Almost seven women per 1,000 in developing regions are treated annually for complications of induced abortion





#### Surgical and drug-induced abortion are both used in Europe





# Most women obtaining abortions are 20-39 years old



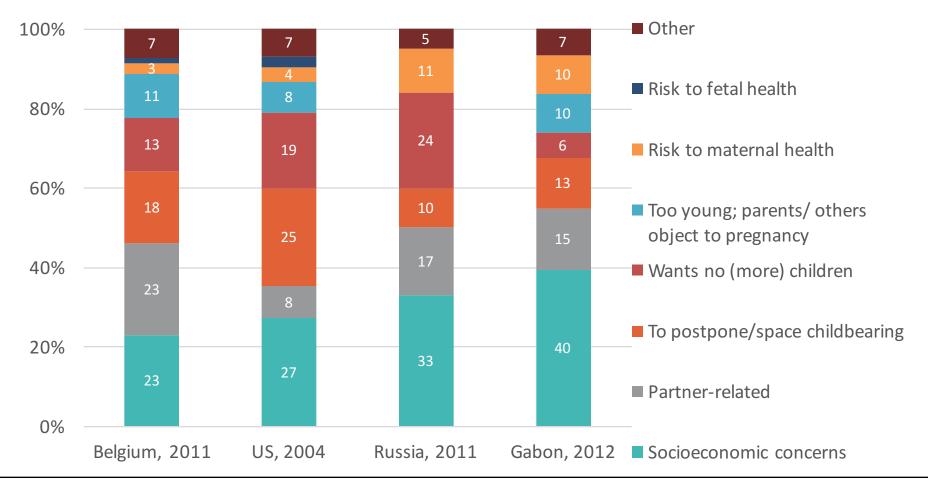


# Most women who have had an abortion have at least one child

Estonia	26			74			
Hungary	28			72			
Czech Republic	28			72			
Slovakia	31			69			
Germany	39	9		61			
Portugal	Ĺ	41		59			
United States	Ĺ	41		59			
Iceland		42		58			
New Zealand		44		56			
Spain		45		55			
England & Wales		46		54			
Belgium		47		53			
Scotland		48		52			
Netherlands		48		52			
Finland		51		49			
Sweden		52		48			
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# Women report a variety of reasons for obtaining an abortion





### Summary

- Unintended pregnancy rates have declined across the world, while abortion rates have held steady in the developing world
- Though many countries have broadened the grounds for legal abortion, almost half of women still live under restrictive laws
- Half of abortions are performed under unsafe conditions each year
- It appears that unsafe abortions are being done under less dangerous circumstances now in some countries
- Substantial inequities exist in the incidence of unintended pregnancy and access to safe abortion and postabortion care



### **Recommendations**

- Ensure that women have access to high quality contraceptive services
- Expand the grounds for legal abortion
- Implement policies that expand access to abortion services and post-abortion care
- Reduce the harm done by unsafe abortions in lowresource settings



### Thank you

### gsedgh@guttmacher.org

