

*Implementing ICPD
Recommendations for Safe
Abortion Services:
Experiences from Eastern and
Central Europe*

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Objective of this presentation

- To review implementation of the ICPD recommendations related to abortion in Eastern and Central Europe

Study Methodology

- Reviewed published and unpublished literature; and
- Surveyed 12 key stakeholders in Albania, Poland, Romania, Russia and Slovakia

The ICPD and Safe Abortion Care

- “... All Governments and relevant intergovernmental and non-governmental organizations are urged to strengthen their commitment to women's health, to deal with the health impact of unsafe abortion as a major public health concern and to reduce the recourse to abortion through expanded and improved family planning services...In circumstances in which abortion is not against the law, such abortion should be safe. In all cases women should have access to quality services for the management of complications arising from abortion. Post-abortion counseling, education and family planning services should be offered promptly which will also help to avoid repeat abortions.” ICPD paragraph 8.25

ICPD + 5

- “.... In circumstances where abortion is not against the law, health systems should train and equip health service providers and should take other measures to ensure that such abortion is safe and accessible. Additional measures should be taken to safeguard women’s health.” Paragraph 63iii

Unsafe abortion in the world

- 46 million women have abortions globally; close to half of these - or 20 million - are unsafe
- 68 000 women die every year from unsafe abortions, and countless others are permanently injured

Source: WHO. 2003. *Safe abortion: Technical and policy guidance for health systems.*



Factors that influence implementation of the ICPD recommendations in Eastern and Central Europe

- Transitioning from the Soviet model of health care;
- Declining populations;
- Widespread availability of abortion;
- Increasing conservative trends; and
- Restrictive US government policies

Transitioning from the Soviet Model

- Centralized hospital care was emphasized;
- Since the transition to market economies the health care system in many countries has deteriorated;
- Hospitals often lack equipment and supplies; and
- The introduction of user fees has made contraception and reproductive health services prohibitive for some

Declining populations

- Romania and Slovakia: TFR = 1.2
- Poland and Russia: TFR = 1.3
- Albania: TFR = 2.0

- Myth: RH is unnecessary
- Fact: RH is a basic human right

Widespread availability of abortion

- In most countries abortion is available on broad legal grounds;
- The region has some of the highest abortion rates in the world; and
- Unintended pregnancies and abortions performed under unsafe conditions continue to represent major public health problems

Increasing conservative trends

- The Catholic and Orthodox Churches influence public debates on abortion and contraception
- In addition, they influence the availability of reproductive health services

Restrictive US government policies

- Unlike in other countries, the global gag rule has not had a major impact on the availability of contraceptive methods as most family planning organizations have signed on to that policy
- However, the U.S. government's decisions have affected these countries by providing encouragement to conservative factions that oppose women's reproductive rights

Country profiles

- Russia
- Poland
- Romania
- Slovakia
- Albania

Russia

- Government decided to cease supply of contraceptive methods in 1997;
- New restrictions have been placed on second trimester abortions; and
- A proposed amendment to the family code and children's rights law was issued in 2003 granting fetuses the right to life

Poland

- Near total ban on abortion in 1993 after decades of legal abortion;
- 60% of public supports abortion for social-economic reasons; and
- PAC services are compromised

Romania

- 1st trimester abortion legal since 1989;
- Drastic decrease in maternal mortality following legalization. Rates dropped from 145/100,000 in 1989 to 9/100,000 in 2002; and
- Services are not accessible to all women; rural women in particular experience unsafe abortions

Slovakia

- 1st trimester abortion legal since 1986 provided there are no medical contraindications;
- Number of abortion providers has decreased since the ICPD; and
- The Catholic Church has proposed a treaty between the government and the Holy See

Albania

- 1st trimester abortion legal on request, but limited to urban areas;
- Although contraceptive use is increasing, abortion is still the main method of fertility control;
- D&C is the main abortion method; and
- PAFP does not exist in many settings

Moving forward

- Improve public awareness of women's reproductive health needs;
- Increase access to abortion care and training in line with the WHO Guidance;
- Advocate for policy change; and
- Work against conservative forces that serve to limit women's options

Access to care, training and public awareness

- Increase availability and diversity of modern contraceptive methods, including emergency contraception;
- Ensure that the safest methods of abortion are used;
- Register and approve drugs needed for medical abortion;
- Expand access to reproductive-health services at the primary-care level;
- Incorporate training in comprehensive reproductive-health care, into pre-service and in-service training programs; and
- Educate the public regarding where they can access contraceptive and abortion services

Advocacy for policy change

- Identify new models for delivering reproductive-health services so that all women, regardless of their socio-economic status, have access to high-quality care and the means to manage their fertility;
- Organize to counter conservative forces that are attempting to curtail women's access to family planning and abortion care; and
- Encourage governments to avoid pro-natalist policies that could impede women's access to family-planning and abortion services

Until women's
sexual and
reproductive
rights are truly
fulfilled, they
won't be unable
to fully exercise
their basic
human rights!

