Legalization of Abortion in Mozambique: How will it impact and influence the discourse on abortion in the African continent?

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In December 2014, Mozambique passed a groundbreaking law permitting women to terminate unwanted pregnancies under specified conditions without risking punishment. The law specifies that abortion shall be carried out in recognised and designated health centers by qualified practitioners; and that abortion is permitted within the first 12 weeks when the pregnancy can subject the woman to physical, psychological, or mental harm, or place her life at risk. In cases of rape or incest, abortion can be performed up to 16 weeks into in the pregnancy and up to 24 weeks in cases of severe fetal malformation.¹

This decision testifies to a progressive state that genuinely takes the welfare of its people and respect for their human rights into concern, especially that of women and girls; a significant step towards the realization of Mozambicans' sexual and reproductive health and rights. Mozambique's legalization of abortion represents a departure from the conservatism of many African countries, where women and girls are effectively prevented from exercising any of their human rights or fundamental freedoms on a basis of equality with men.

Worldwide and in Africa in particular, maternal mortality is still a major hindrance to sustainable development. Largely because of restrictive laws hindering access to safe and legal abortion, unsafe abortion remains a leading cause of maternal mortality and morbidity, where an estimated 47,000 women die each year, accounting for approximately 13% of maternal deaths worldwide,² and an additional 5 million women are annually hospitalized for abortion-related complications.³ Moreover, women and girls who are young, poor, unmarried, and/or in other vulnerable situations are disproportionately affected by the criminalization of abortion. They are more likely to terminate a pregnancy in higher risk situations than women who are able to access and afford private healthcare services, highlighting the impact of restrictive abortion laws in perpetuating social injustice and inequality.

Patriarchal norms within African and other societies often make abortion a taboo, entailing that abortion never becomes a topic let alone a priority in the development agenda of many countries, despite its negative impact on numbers of individuals' health and lives. That many African States choose to be silent about abortion as a public health concern and sustainable development issue indicates the high level of abortion-related stigma on this continent.

However, the courageous decision taken by Mozambique to join the handful of African countries (South Africa, Cape Verde, Kenya, Tunisia) that have lessened restrictions in their abortion laws is a laudable step in the efforts to meaningfully curb the continent's high maternal mortality and morbidity rates, and realize individuals' sexual and reproductive health and rights. It also demonstrates that safe abortion advocacy is not an "**Un-African**" import but a genuine health concern and human right of our people.

The new Mozambican legislation in and of itself will not be enough to reduce maternal mortality and morbidity rates, as it may have challenges ahead in terms of implementation. In South Africa, for example, the implementation of the 1996 Choice on Termination of Pregnancy Act faced many challenges, including the pro-natalist views of conservative South Africans; limited access to health

¹ The Daily Maverick, October 2014, <u>"Op-ed: Progressive New Abortion Law Shows Mozambique's Commitment to Women's</u> <u>Reproductive Rights."</u>

²World Health Organization (2011), <u>Unsafe abortion: Global and regional estimates of the incidence of unsafe abortion and associated</u> <u>mortality in 2008</u>, Sixth Edition.

³Cohen, Susan A. *Facts and Consequences: Legality, Incidence and Safety of Abortion Worldwide*. - Guttmacher Policy Review, Fall 2009, Volume 12, Number 4.

care for medically underserved populations; and limited access in hospitals due to staff resistance and lack of resources. As such, considerable effort will be needed on the part of supporters of the new law in Mozambique to ensure that its commendable provisions translate into meaningful service accessibility on the ground. Nevertheless, the passage of this law should be considered a fundamental shift towards developing an enabling policy environment, opening the floor to further efforts aiming at addressing maternal mortality and morbidity due to unsafe abortions, and improving women's health in the country. It can also serve as an inspiration for the sexual and reproductive health and rights movements in other African countries, such as Ghana and Burundi, both showing promising developments. In Ghana, for example, discussions on abortion rights were elevated during mobilizations for this past September 28 Global Day of Action for Access to Safe and Legal Abortion,⁴ and Burundi produced a comprehensive study on unsafe abortion.⁵

It is our view that ongoing Mozambican civil society advocacy, networking, and mobilization efforts, such as those surrounding September 28, played a laudable and crucial role in developing a favorable environment for this groundbreaking success. It is our hope that similar mobilization efforts currently underway in many other countries will play the same pivotal role, and enable other African countries to follow in Mozambique's footsteps.

Studies have shown time and again that the criminalization of abortion pushes individuals to resort to unsafe abortion services, where individuals are forced to compromise their health and often risk their lives,⁶ thereby violating their rights to life, health, physical and psychological integrity, and bodily autonomy.⁷ Any political leadership that is concerned with the health and wellbeing of its people must take the bold step like Mozambique to uphold the human rights agreements enshrined in African Constitutions, as well as international and regional human rights treaties such as CEDAW and the Maputo Protocol, and commit itself to respect, protect, and fulfill women's sexual and reproductive health and rights, including the right to safe and legal abortion. **To do otherwise and deny women their rights is what would be "Un-African."**

⁴September 28 Global Day of Action for Access to Safe and Legal Abortion forms part of the campaign activities undertaken by the International Campaign for Women's Right to Safe Abortion, that aims to build an international movement to promote universal access to safe, legal abortion as a women's health and human rights issue. As part of the International Campaign Advisory Group, the Women's Global Network for Reproductive Rights (WGNRR) leads the coordination of September 28 annual campaigning activities, conducted by Campaign and WGNRR members, as well as allies around the world. September 28 has been a regional campaign for the decriminalization of abortion in Latin America and Caribbean for nearly twenty years before being taken on by SRHR activists all over the world as a Global Day of Action in 2011.

⁵Further details will be included in the 2014 September 28 Annual Report, which will soon be made available at <u>www.september28.org</u> ⁶Guttmacher Institute (2012), <u>Facts on induced abortion worldwide</u>.

⁷Center for Reproductive Rights (2011), Briefing Paper: Safe and Legal Abortion is a Woman's Human Right.