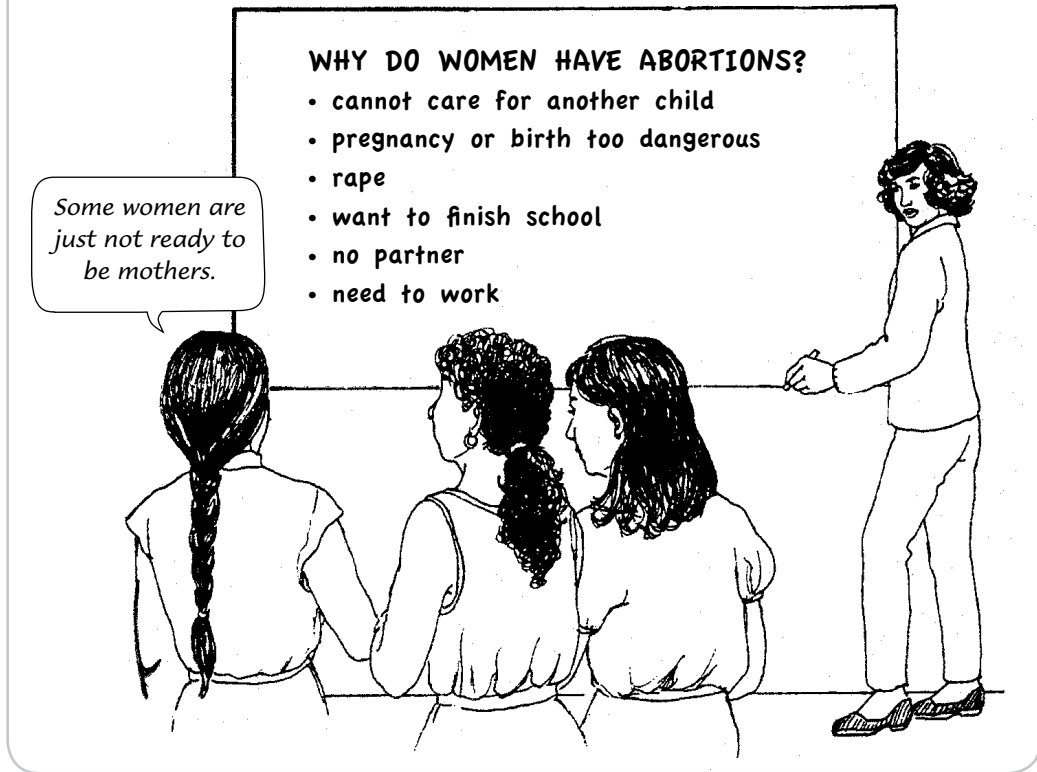


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Preventing Deaths from Unsafe Abortion



Around the world, most people agree that a woman should not have to die because of being pregnant.

Health workers often witness the difficulty or desperation a woman faces when she is pregnant and does not want to be. Many women in this situation decide to end the pregnancy. When a woman or another person does something to end a pregnancy or restore monthly bleeding, this is called "abortion."

A pregnancy can also end naturally, or because of serious illness or other problems, such as trauma or exposure to toxic chemicals. When a pregnancy ends for one of these reasons, it is called "miscarriage" or "spontaneous abortion." The danger signs after an abortion and after a miscarriage are the same. See page 266.

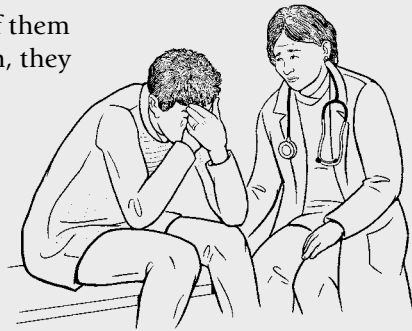
Women have always known about ways to end pregnancy. Today, women in every country in the world — young and old, married and unmarried, with and without children — have abortions, even where abortion is restricted or prohibited by law.

Abortion can be safe for women, but often the abortions available to most women are not safe. Doctor Aruna Uprety, who helped us write this chapter, has spent much of her life working to end unsafe abortion in Nepal. Here is part of her story:

A mother's death in Nepal

When I first became a doctor, I worked at a maternity hospital in Nepal. One day, a very sick woman lay on the examining table in front of me. She and her husband had walked for 3 hours from her village to get to the hospital. Her pulse was weak and she was very pale. As a new doctor just out of medical school, I was so sure I could save her. But she died in front of my eyes. Later, her husband told me their story:

They already had 5 children and neither of them wanted more. When she became pregnant again, they visited a healer in a nearby village. People said that the healer could end the pregnancy for very little money. The healer put herbs in his wife's vagina with a stick. By the next day, the pregnancy had ended, but she continued to bleed, and she developed a fever. Three days later, she was very sick, and she fainted. Her husband decided to take her to the hospital.



I could not stop thinking about this woman's story. Nothing in my training had prepared me for this. Abortion was illegal in Nepal, and women who had abortions could be put in prison. Later that night, I stopped a senior doctor in the hallway to ask her advice. She said, "Aruna, this is not unusual. We see 3 or 4 cases each month." She explained that most women with an infection from unsafe abortion recover in the hospital, but "in other cases, there is little we can do. Sometimes they die within the hour. Sometimes, they arrive here already dead."

I thought, "There must be something I can do to change this!"

For the rest of Aruna's story, see *The long struggle for legal and safe abortion in Nepal* (page 270).

Many health workers like Aruna have become supporters of safe, legal abortion because they were unable to save the lives or health of women in their care who were harmed by unsafe abortions.

Each day, about 58,000 women around the world have unsafe abortions, and more than 150 of them die as a result.

Every day? More people need to know that so many women are dying needlessly.



Access to family planning prevents unsafe abortion

If **all** women have access to family planning methods that work for them, fewer women will have unintended pregnancies or unsafe abortions. There would be fewer abortions if:

- family planning methods were freely available to anyone who wants them.
- each woman could choose the family planning method she prefers.
- both men and women took responsibility for using family planning.

Adolescents and young unmarried women are especially at risk for unintended pregnancy and unsafe abortion. They may have greater difficulty getting access to birth control, or do not try to get it because they don't want anyone to know they are having sex. Or they may not have the power to insist that the men they are with use condoms. If they become pregnant, they may wait too long to get help because they are afraid to tell anyone or because they do not know the signs of pregnancy.

For more information about how to address these issues and make family planning methods available to all women who want to use them, please see Chapter 4: Sexuality and Sexual Health, and Chapter 7: Protecting Women's Health with Family Planning.

An unintended pregnancy can be very different for poor and rich women. In my country, El Salvador, abortion is illegal in all cases. But rich women can fly to the US to have a safe abortion. Poor women do not have many options, and many women die or become infertile from unsafe abortions.



What makes an abortion safe or unsafe?

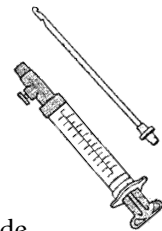
In places where abortion is illegal, almost all abortions are unsafe. Even where abortion is legal, women may not be able to find a clinic that provides safe abortions. Or safe abortions may cost more than women can afford to pay. Many women who are unable to get a safe abortion will use harmful methods to end an unintended pregnancy. Unsafe methods can kill women or leave them unable to get pregnant again. Helping women learn the difference between safe and unsafe abortion saves lives and also helps women protect their reproductive health.

Safe abortion

A safe abortion is usually much safer than giving birth, especially for a girl who has not grown enough to give birth safely, or for a woman with serious health problems such as high blood pressure or diabetes. Safe abortions do not make women infertile (unable to have a baby later) and they do not cause cancer. These are myths, not facts.

To use either of the following 2 abortion methods safely, the woman and a trained health worker need to know how long she has been pregnant. To do this, start counting after the first day of your last regular monthly bleeding.

Vacuum aspiration or suction. When vacuum aspiration is done by hand (**manual vacuum aspiration or MVA**), the contents of the womb are removed with a special syringe. Otherwise, a small electric machine is used.



MVA is simple and safe up to 12 weeks after day 1 of the last regular bleeding, when done by a person with training and experience using proper instruments under very clean conditions. Anything put inside the womb must be sterilized to remove any germs on it. A trained health worker should know how to watch for problems (see page 266) and be able to respond quickly and appropriately with medicines and care.

Abortion using medicine. Misoprostol and mifepristone are medicines that can be taken by a woman herself, if she understands when to take them, how much to take, and what to expect after she takes them. She also needs to know how to watch for danger signs, such as an incomplete abortion. If possible, she should talk with a health worker before taking these medicines.

Abortion using medicine is safe up to 9 weeks (63 days) after day 1 of the last regular monthly bleeding.

See *Where Women Have No Doctor* for more information about medicines for abortion (page 508) and sterilizing tools and equipment (pages 526 to 529).

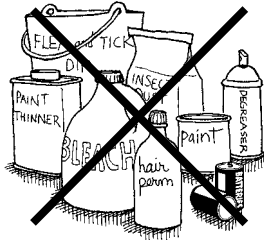
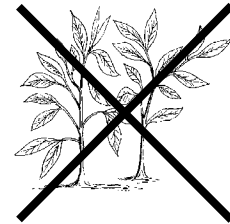


Unsafe abortion

Abortions are unsafe when they are done in unclean conditions by someone who has not been properly trained. Abortions are especially dangerous when unsterilized instruments are put inside a woman’s womb. The following methods are all unsafe and should never be used.

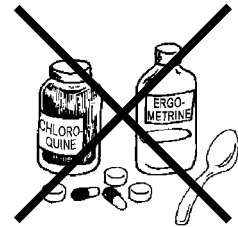
- Do not put sharp objects such as sticks, wire, or hard plastic tubing into the vagina or womb. These can tear the womb and cause dangerous bleeding and infection.

- Do not put herbs, plants or toxic chemicals in the vagina or womb. These can burn or irritate badly, causing damage, infection, and bleeding.



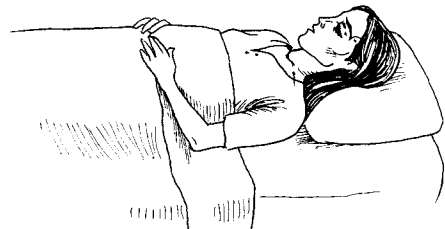
- Do not put substances such as bleach, lye, ashes, soaps, kerosene, or solvents into the womb. Also do not drink them.

- Do not take the medicines chloroquine (for malaria) or ergometrine (to stop bleeding after childbirth). They can kill before they cause an abortion. Use only the medicines misoprostol and mifepristone, see Abortion using medicine (page 250).



- Do not hit the abdomen (belly) or throw the woman down stairs. This can cause injury and bleeding outside her body, but may not cause abortion.

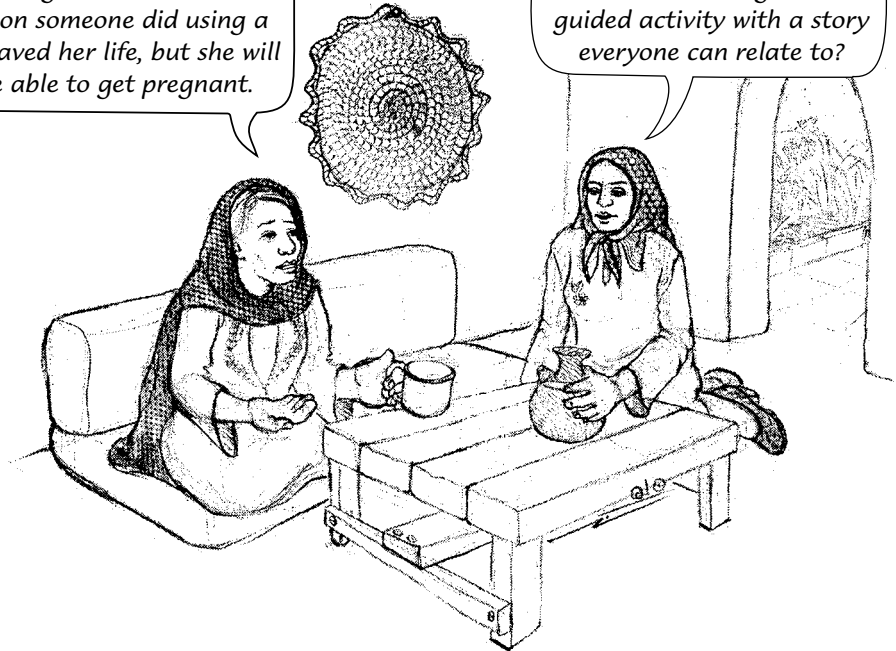
These unsafe methods can kill a woman or cause serious injury or illness before they cause abortion. If the woman survives these traumas, she may have long-term or permanent damage to her body, including injured genitals, infertility, and urinary and bowel problems.



Guide community discussions on abortion

My talk about abortion was a disaster! I asked for their thoughts and people ended up yelling at each other. And last week in the clinic another girl almost died from an abortion someone did using a stick. We saved her life, but she will never be able to get pregnant.

People have strong feelings and opinions about abortion but no practice talking about it. What about using a more guided activity with a story everyone can relate to?



There are many reasons it can be challenging to talk about abortion. Some cultures and religions believe that a fetus is a human being, so for them abortion is simply murder. Even if the woman's life is at risk, or her pregnancy is a result of rape or incest, they still believe the fetus should be protected. Others believe that it should be the woman's right to choose whether she delivers a baby or not, and that all women should always have access to safe and affordable abortions.

Also, talking about unintended pregnancy means talking about people having sex, which is uncomfortable for many people, and even more so if discussing young or unmarried women being sexually active.

It is easy to see why it can be difficult to have a community discussion about abortion! But as long as women are dying from unsafe abortions, we need to find ways to talk about this problem.

Before leading a discussion about abortion, it is important to reflect on your own attitudes and get support if you are uncomfortable with this issue. See Preparing to lead discussions about sex and sexuality (page 82) and the activities in Appendix B for some ideas about how to help yourself prepare to talk about a topic you are not comfortable with.

Use stories like the ones on page 255 and the activities on pages 254 to 261 to help people discuss why abortion is not a simple question of right or wrong.

Involve men in discussing abortion

While it is important for women of all ages to talk about abortion with each other, it is also important to reach out to men, either in community meetings or with activities just for them. Men are affected by unintended pregnancies too!

Any conversation about abortion will raise questions about gender roles. Encourage men to listen to women's stories to understand how women feel. They can also learn by sharing stories with each other about what has happened, or might happen, to their wives, mothers, and daughters. Many men support women's access to safe abortion services, and they can be important allies in participating in community dialogues, as well as providing practical help, such as transportation for women who must travel to get a safe abortion.

You can do most of the activities in this chapter with groups of men to help make them more comfortable talking about abortion and women's health.



I was angry with my daughter. I never expected her to do such a thing. But now I regret that. She needed my support, and I should have been most concerned about her health.



Would you be willing to share your story at the community meeting next week? It might help other fathers think better about their daughters.

Stories can help start discussion

Stories can be good ways to start a discussion about unintended pregnancies, the reasons why some women choose to end a pregnancy, and the risks they face when unsafe abortions are the only means available. Telling a story can help people to imagine a woman they know — a sister, friend, or daughter — facing the same situation. And stories can also help people see more clearly how abortion is a women’s health issue.

Activity

A walk in her shoes

- 1 Tell a story about a woman who is pregnant and does not want to be. You can use one of the sample stories on the next page or prepare a story that could happen to a woman in your community.
- 2 Ask everyone to close their eyes and imagine themselves as the woman in the story. To help people “walk in the woman’s shoes,” ask questions such as these:
 - If you were the woman in the story:
 - How would you feel if you found out you were pregnant?
 - Would you tell anyone? Who? Who would you definitely not tell? Why would you tell someone or why not?
 - What would you be afraid of or worried about?
 - What might you do about the pregnancy?
- 3 Take a few minutes for people to share with the whole group what they thought or felt during this exercise. Remind the group about sharing ideas respectfully by taking turns. Everyone should listen more than they talk.

Tips for creating discussion stories about unintended pregnancies:

- Try to create stories that do not have simple solutions. Show the real difficulties of an unintended pregnancy. Include the hopes and future plans of the woman, people who support the woman, and people who pressure her to make a certain decision.
- Do not use names of real people or examples that seem to be about a real person in the community. This could cause painful gossip and misunderstandings.
- It is very common for people to think only certain types of women have abortions or become pregnant without wanting to. So make sure to tell stories about women of different ages, from different backgrounds, and from different social classes.

Four sample stories about unintended pregnancy



Dorica has 4 children. Just after her husband left to work in another country, Dorica discovered she was pregnant. Because her husband could not find work in their country, she is not sure he will ever return, and she feels she cannot care for another child. She knows a woman who does abortions with herbs, but she is afraid people will find out. A few years ago, a friend of Dorica's almost bled to death after an unsafe abortion. When her friend went to the hospital, the police questioned her and now everyone in the community talks about her.

Amina's mother died when she was 8 years old. Her father sent her to live in a rural village with his older sister and her husband. For 5 years, her uncle has sexually abused her and threatened her so she would not tell anyone. Amina never went to school. She sells flowers at the market and has to give all of her money to her uncle. At 13, Amina has just learned she is pregnant. She cannot endure carrying her uncle's child, but she fears telling anyone about the abuse or pregnancy because she thinks she will be thrown out of the house.



Zanzele is a mother of 2 young children. Her husband left her 2 months ago when she tested HIV positive. He accused her of being with someone else and refused to be tested himself. Zanzele has not told anyone else she has HIV because she is afraid of the way people treat those with HIV. Zanzele just found out she is 10 weeks pregnant. She knows she cannot support another child and she feels alone and scared.

Ranya was 16 when she got pregnant. The condom that her boyfriend was using broke. They love each other and are planning to get married, but they both had hoped to finish school first. They do not feel ready to have a baby. Ranya's parents were angry at first, but they have now forgiven her and have offered to support her during the pregnancy. They both work, however, and will not be able to help with childcare after the baby is born.



Causes and consequences of unintended pregnancy

Before a group is ready to discuss actions to prevent unsafe abortion, it helps to explore more deeply the causes of unintended pregnancy, the options a woman who is pregnant may have, and what each option might mean for her. Many activities in this book can be useful for doing this. Here is an example of how to adapt the Problem Tree to guide a discussion on these issues. For more information about the Problem Tree, see page 202.

Activity

A Problem Tree to discuss unintended pregnancy

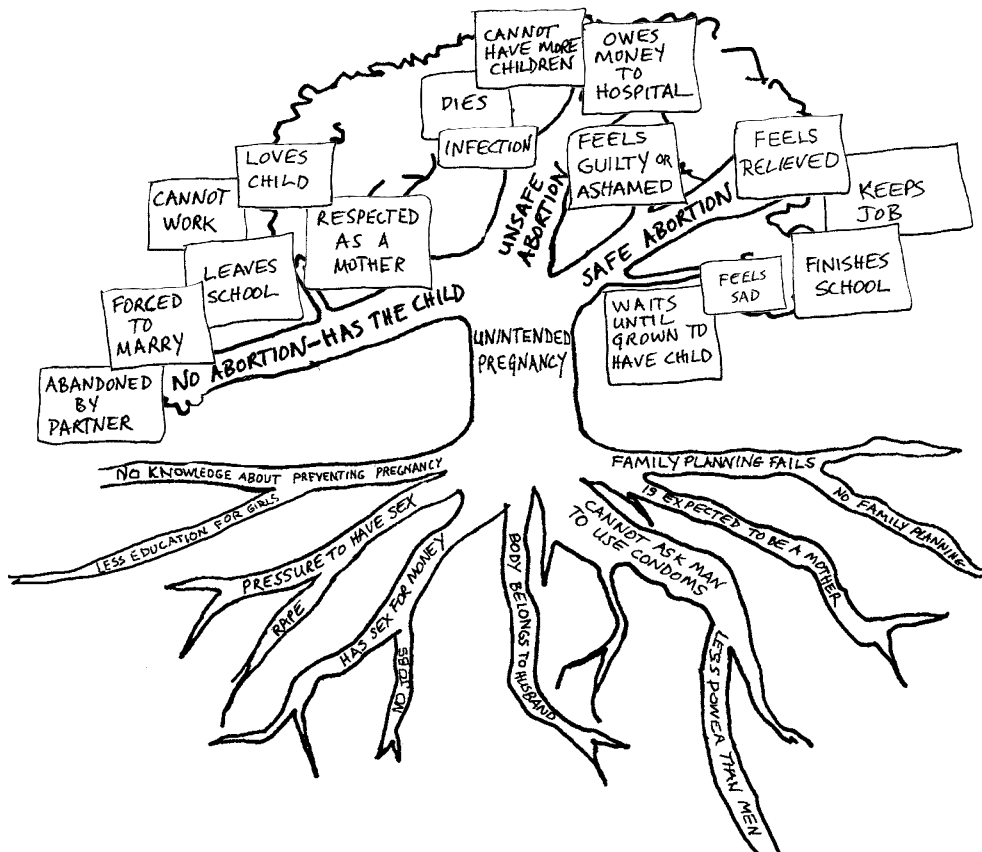
Prepare a story about a woman who became pregnant without wanting to, like those on the previous page. Prepare a Problem Tree and write “unintended pregnancy” on the trunk, and “unsafe abortion,” “safe abortion,” and “no abortion” on the branches.

- 1 Introduce the activity and tell the story you have prepared.
- 2 Then ask the group, “Why did the woman become pregnant without intending to?” As people say different causes, write them on pieces of paper and stick them next to the roots. Help the group think of ideas that relate to the different root causes. (If necessary, tell more than one story.) Remember: put the “causes” papers that are similar on the same root to make it easier to see the different causes of unintended pregnancy.
- 3 Mention that the woman in the story had 3 options, which are on the branches of the tree: unsafe abortion, safe abortion, or no abortion.
- 4 Ask the group to discuss what might happen to the woman with each option. Some questions to ask:
 - How do you think the woman’s life will change if she does not have an abortion and gives birth to the child?
 - What could happen to the woman if she has an unsafe abortion?
 - What could happen to the woman if she has a safe abortion?

Write the answers on pieces of paper and put these “leaves” on the option branches.

People may name good and bad things that could result from each option. If you have paper of different colors, you can make 2 different kinds of leaves, one color for the good things and another color for the bad things.

Activity A Problem Tree to discuss unintended pregnancy *(continued)*



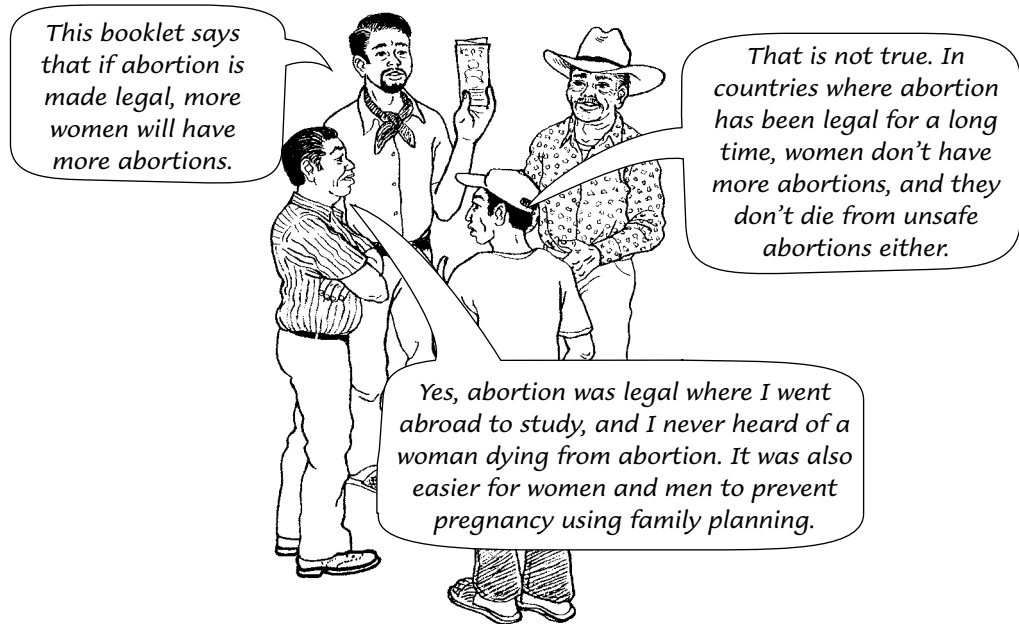
5 To conclude, ask the group to think of ways that things could change. For example, you could ask, "What could be done so that the tree would have healthier, more positive leaves on all of the branches?" or ask the group how to address the root causes of unintended pregnancy.



Remember that unintended pregnancy is not always a problem. Many women accept it and never think about having an abortion. Many women who do not want to be pregnant also do not want to have an abortion, no matter how much having the child will change their plans and their lives.

Separating facts from misinformation

It is very common to find inaccurate information about abortion on signs, in brochures, and on websites. People sometimes have such strong feelings against abortion that they will lie or distort the truth, hoping to talk others out of having an abortion. Lies about abortion also weaken community support for the legal right to safe abortion. People who are against abortion may not even know they are saying things that are not true. They are simply repeating untrue things they have heard.



Many people think that all religions and religious people are against abortion, because some religious leaders teach that abortion is always wrong. But this is not true. Religious people from many faiths believe women have the right to safe abortion.



I belong to an organization called Catholics for Choice. The Catholic Church teaches that abortion is morally wrong. But it also teaches that a person's conscience determines if a certain action is a sin. We believe that if a woman carefully examines her conscience and decides an abortion is the most ethical thing she can do in her situation, she is not committing a sin.

Activity**Many points of view!**

This activity can help a group explore different points of view about a difficult topic and look carefully at how information is presented differently depending on the point of view.

To prepare: collect news articles, pamphlets, and quotes from people who either believe abortion is wrong, or think a woman should be able to decide for herself.

- 1 Read out loud the different materials (or sections from them) that have been collected.
- 2 For each item, ask the group to share their feelings and responses. For example, does it seem like it is trying to worry, frighten, or shame people? Is it using words or pictures to play on people's emotions?
- 3 Compare the arguments or opinions stated, and look at the source of information used to support the argument.
- 4 To conclude, you can ask the group to compare the different points of view about abortion. Ask: Are these points of view common? Are some more common than others? How does the information available affect the points of view among our friends, family, and neighbors? Which sources of information seem most reliable or trustworthy?



It is your right to decide
if you need an abortion.

Games to discuss facts and myths about abortion

When people believe things about abortion that are not true, it makes discussing abortion even more difficult. And health decisions based on wrong information can be harmful. Games can help people learn the difference between facts about abortion and myths or other types of wrong information.

Here is an example of how to adapt a board game to help a small group learn and discuss facts about abortion. This is a variation of the games described on pages 124 to 125, and pages 197 to 199.

Activity

A board game about safe abortion

To prepare: Make “fact questions” for the board game. Include misunderstandings about abortion that are common in your community and include the facts too! For more facts about abortion, see *Where Women Have No Doctor*. Try to find the answers to:

- When can a woman legally have an abortion in our country?
- Who can decide if a woman can have a safe, legal abortion?
- Are abortion laws the same for married and unmarried women and for adolescent girls?
- Where can women get safe abortions or correct information about abortion?
- Where can women get emergency care if there is a problem after an abortion?

Make “discussion questions.” You can use the stories on page 255, and ask the group what each woman should do and why. Here are a few examples of other questions you might use:

- What are some things women think about when trying to decide whether to continue an unintended pregnancy?
- How might a man influence a woman’s decision about abortion? What difference does it make if their relationship is more equal, or if the man has more power?
- What makes it difficult for adolescent girls to get an abortion?

After the game: Ask group members which questions were particularly hard to answer. Was this because the facts were unclear or because the opinions in the group were different? Note topics and concerns that can be addressed in future trainings.



Sometimes it can be a challenge just to get people to state their opinions out loud, or even ask questions about such a controversial topic as abortion! It can also be difficult for people to listen to different points of view without some structure and help.

The following activity helps a group begin to express their opinions, ideas, and questions. This can then create the opportunity for you to share more information, and to clarify ideas that may be based on wrong information.

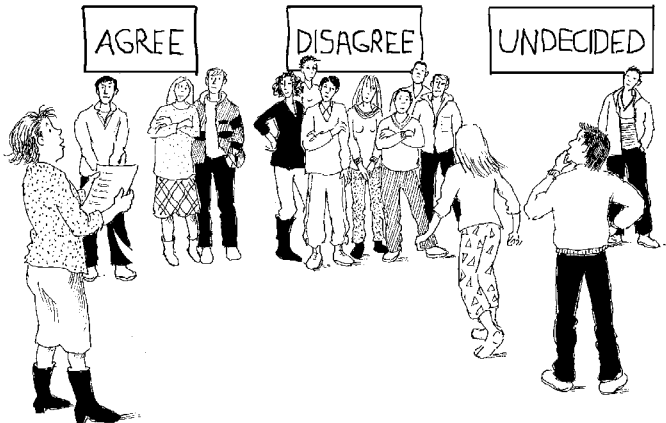
Activity

Taking a stand

To prepare: Make a list of statements that reflect common ideas, myths, and attitudes both for and against safe abortion. Take care to have an equal number of statements for and against. Mark 3 large pieces of paper: AGREE, DISAGREE, and UNDECIDED. You can also draw a face smiling, frowning, or looking uncertain on the paper for people who cannot read. Place the 3 large pieces of paper in 3 separate places in the room.

- 1 Explain to the group that after you read each statement aloud they should walk to the sign that best represents their opinion about the statement. Read the first statement and ask people to stand near the sign that reflects their opinion on that statement.

- 2 After groups have formed around each of the signs, ask people to share their ideas and help them discuss the 3 different points of view. Let people know they can move to a different sign if they change their opinion as they listen to others.



- 3 Continue this activity until you have completed the list of statements.
- 4 To conclude, ask the group if there are questions they would like more information about or if they have learned something by listening to people with different points of view talk about abortion. (You might invite a health worker with knowledge about abortion to attend, to help answer questions at the end of the activity.)

Challenging the way people talk about abortion

People say a lot of untrue and unkind things about women who have abortions. When no one questions these comments, it encourages people to judge and blame women instead of seeing them as human beings in a difficult situation. The next activity can help a group think about ways to respond to common but unfair ideas about women who have abortions and to change community attitudes and stigma about it.

Activity

Saying no to blaming and shaming

To prepare: Before the activity, prepare some harmful opinions or judgments that are commonly heard in your community. Some common statements that blame or shame women are:

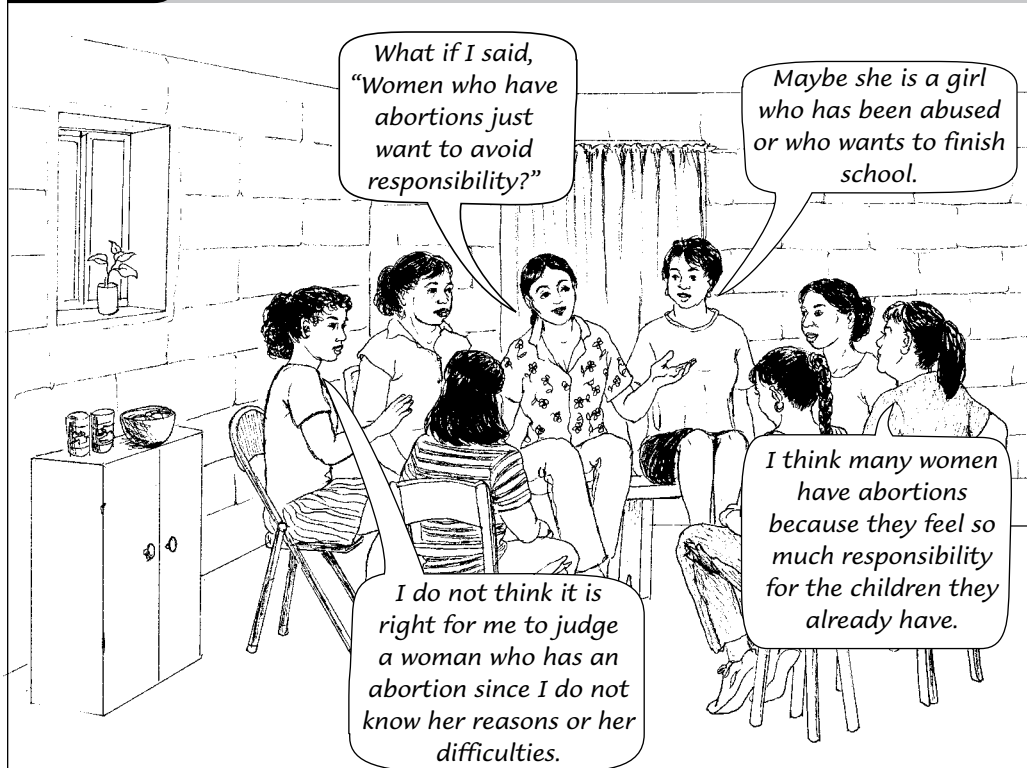
Only women with no morals have abortions.

A woman who becomes pregnant without being married should have to live with the consequences.

Abortion is murder.

- 1 Explain the activity to the group, making clear that the only reason you will be sharing hurtful, blaming statements about women and abortion is in order to learn how to respond to them by showing more understanding, open-mindedness, and tolerance.
- 2 Pick one of the statements you prepared and ask the group to talk about it. Ask:
 - Who might say this sort of thing?
 - How does this statement keep women ashamed, afraid, or quiet?
- 3 Ask questions like these to help the group think about what they could say that would be kinder, more compassionate, or open-minded:
 - How does it help to think about why women find themselves in this situation?
 - How can we help others see things from the pregnant woman's point of view?

Activity

Saying no to blaming and shaming *(continued)*

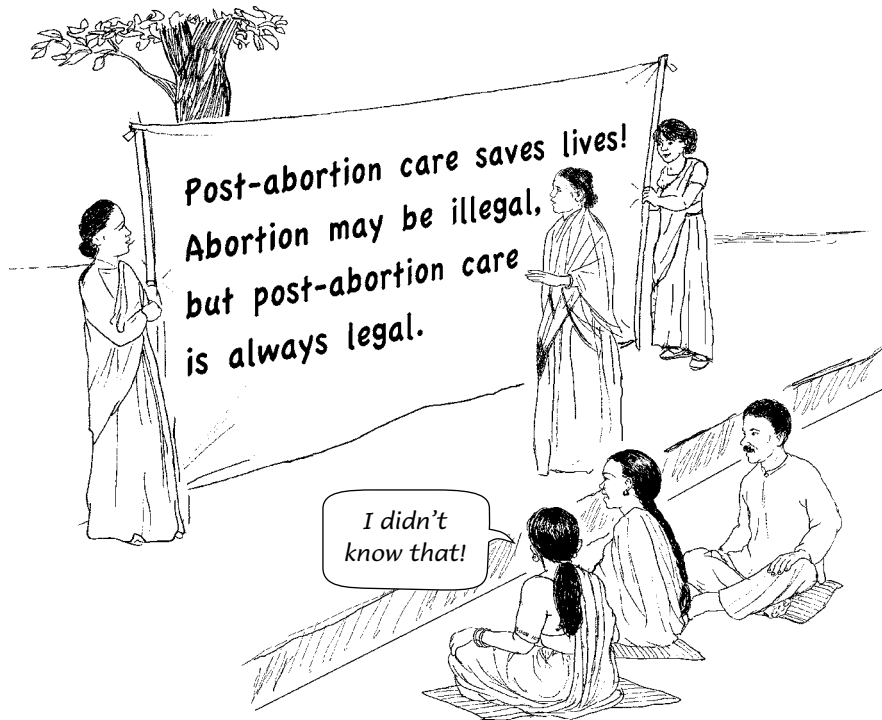
- 4** Then ask the group to think of ways they can share their ideas in the community so women who have abortions are treated with respect and compassion. What can they do to promote more tolerance and understanding in the way people think and talk about abortion?

For some, this may mean sharing their personal story in a public way so that it reaches other women. Some groups have made radio programs or videos that share the whole truth about women who choose to have abortions. (See Doctor Aruna Uprety's story on page 270.)

Others may turn to political actions, such as participating in marches or lobbying the government. Some use art, such as creating public murals or poems about women's right to safe abortion. It may also simply mean speaking up when you hear an unkind, hurtful comment about women in these situations.

Saving lives with post-abortion care

Abortion done safely by a skilled person rarely causes harm (see page 250 for more about making abortion safe). But many abortions are unsafe and lead to serious injuries, infections, and dangerous bleeding. Post-abortion care, also called PAC, is emergency care for these problems.



Women need emergency care without delay

One of the reasons women die after unsafe abortions is that they or their families wait too long to get help. There are many things a community can do to help or encourage people to seek care without delay.

To learn all the reasons why people in your community are delayed in receiving help for problems after an unsafe abortion, try adapting the discussion guide about the 4 delays on page 227.

The following activity, using dramatic stories, can help a group learn about the importance of getting a woman the care she needs quickly if she has any signs of a health problem after an unsafe abortion. It is also a good way for a group to learn more about the danger signs for problems after an abortion and how to help. This is called a “replay drama” because the story is replayed a second time to ask the audience how to save the woman. Also see the activity, “Happy ending” role plays to think about change (page 153).

Activity

Replay drama: Saving lives after an abortion

To prepare: Create a dramatic situation for each of the danger signs: bleeding, signs of infection, shock, and injury. Make up situations realistic for your community, but do not use names of real people or examples that seem to be about a real person in the community.

- 1 Introduce the activity and review with the group the danger signs after an abortion and what to do about them (see the next pages for this information).
- 2 Form small groups of 3 or 4 people and give each group a situation to dramatize. Explain that they will dramatize the story twice. The first time, the woman will not get help and will die. The second time, the audience will step in to save her. Remind everyone to treat the women in the dramas with kindness and not to use judgmental or hurtful language.
- 3 After the drama about each situation, the actors stop and ask the audience, “What should we have done to save her life?”
- 4 Perform the dramas a second time but use the group’s suggestions to save the women’s lives. People in the audience who have ideas can become actors who help carry or treat the woman.
- 5 To conclude, ask people what they learned about how to help women with problems after an abortion. You can also ask the group to think about how this could be done in their community.



Our group of health promoters performed the dramas for a group of men because when a woman has an emergency, often it’s the men in her family who have the money or make the decision to take her to the hospital.

Danger signs after abortion or miscarriage

The 2 most dangerous problems a woman can have after an abortion or miscarriage are **bleeding too much** and **infection**. Both of these problems can happen when tissue from the pregnancy is still inside the womb, or when the womb has been torn or punctured by a sharp tool. Infection of the womb can also be caused when something is put in the woman's vagina that was not clean enough (sterilized). A woman with signs of these problems can die quickly if she does not get medical help right away. When people know the danger signs, they will be more ready to help women get the care they need.

What to do

When you know the danger signs for each health problem, there are some things you can do while transporting the woman to get medical care.

Heavy bleeding from the vagina: bleeding that soaks more than 2 pads in one hour, and lasts for 2 hours. A slow, steady trickle of bright red blood is also dangerous.

What to do: Help the woman squat and bear down like passing stool. This may help to finish emptying the womb. While transporting the woman, rub her lower belly very hard, just above the pubic bone, while she is lying down or squatting. This may help the womb squeeze itself (contract) and bleed less. See page 251 of *Where Women Have No Doctor*.



Take a woman with any of these danger signs to a clinic or hospital right away!

Signs of infection: fever over 38°C (100.4°F), chills, pain in the belly, bad-smelling discharge from vagina, or weakness.

What to do: Give medicines for womb infection. See page 256 of *Where Women Have No Doctor*.

Miscarriage and safe abortion usually do not cause health problems, but after a pregnancy ends for any reason, the danger signs are the same.



Signs of shock: cold, pale, or damp skin; fast breathing (more than 30 breaths a minute); a very fast heartbeat (more than 100 beats a minute); unusual weakness, dizziness or lightheadedness, and even confusion or unconsciousness (fainting).

What to do: Help the woman lie down with her feet higher than her head, cover her with a blanket or clothes, and help her stay calm. If she can drink, give her sips of water or rehydration drink. If she is unconscious, lay her on her side with her head low, tilted back and to one side. Make sure her feet are higher than her head.

Signs of injury inside the body: very bad pain in the belly, especially with movement; belly feels stiff or hard, and you can hear no sounds or gurgles inside; fever, nausea, and vomiting; pain in one or both shoulders.

What to do: Do not give the woman anything by mouth — no food, no drink, not even water — if it will take less than 2 hours to get to a health center, where she might need an operation. If a health center is more than 2 hours away, give water or hydration solution, but do not give solid food, because food in the stomach makes surgery riskier.

The sooner a woman gets help for any of these problems, the greater the possibility of saving her life. To learn more about complications of abortion and what to do, see *Where Women Have No Doctor* or *A Book for Midwives*. You can also see pages 336 to 337 in *Where* to get more information.



Young women are especially likely to have problems that become serious after an abortion, but we are less likely to know about post-abortion care. We need information and support and to be treated with kindness and respect.

In community meetings to gain support for post-abortion care we discussed the dangers of unsafe abortions, and how this care is not the same as abortion. It took many meetings and discussions to gain the trust of local religious leaders.

We began by discussing the benefits of family planning for married couples, and then contraceptive use outside of marriage. This opened the door to discussing unintended pregnancy and the need for emergency care.



Supporting a woman after an abortion

A woman may have strong feelings after an abortion, even if she knows she made the right decision for herself and her family. Some women feel a mixture of relief, sadness, grief, guilt, shame, anger, and even love. It is also common for women to feel sad and grieve when a pregnancy ends because of miscarriage. These feelings are normal, but having to hide them and pretend nothing has happened can make them worse. Many women find it helpful to talk with other women who have had the same experience.



Creating a ritual to reflect on what happened can also help a woman let go of the experience and move on with life. For example, burying or burning an object related to the abortion can symbolize closure. In some communities, a woman may plant a tree or visit a sacred place and make offerings.

Organizing to make safe abortion available

Changing laws about abortion can take years. When abortion is illegal or very restricted, and many powerful groups are against legalizing it, change can seem impossible. But laws do change and, in fact, women can get safe, legal abortions now in places where it was completely illegal not very long ago.

Many people want to stop the harm caused by unsafe abortions. The way they organize to do this usually depends on what seems possible to change in their communities. Some people start by helping women get post-abortion care. Others learn about ways to help women have safe abortions. And many people work to make sure women and men know how to prevent unintended pregnancies.



Telephone hotlines for safe abortions

Women have set up hotlines in some countries — including Pakistan, Indonesia, Ecuador, and Peru — to give information over the telephone to women who want to know how to safely use medicines for abortion.

Young women lead the way — the Maria Fund

In 2007, a law was passed in Mexico City making it the only place in Mexico where a woman could get a safe and legal abortion up to 12 weeks of pregnancy. This was an important step in the right direction. In other parts of Mexico many women were dying or being sentenced to long jail terms because of receiving illegal abortions. But poor women in Mexico City could still not afford the cost of safe abortion, and women in the rest of the country could only take advantage of the law by traveling to the capital and paying a doctor's fee.

Because of this injustice, in 2009, two young women started the MARIA Abortion Fund for Social Justice to help make safe abortion available to all women. The services MARIA offers include:

- payment for some or all costs of the abortion
- lodging in Mexico City
- staying with women before, during, and after the abortion
- an information hotline to help women evaluate their options

Since it started, the fund has supported over 1,500 women through a network of volunteers all over Mexico. Aside from making abortion services more accessible to women, the MARIA fund is trying to make abortion a more visible and widely supported issue. And the MARIA fund has been successful. Some of the funding for the program comes from religious organizations that understand that anti-abortion laws are fatal for women.



Protecting women and health workers

The best way to protect both women who have abortions and health workers who support them is to build a network of people who share the same commitment.

People who organize to help women have safe abortions often face a choice between following the law and doing what they believe is right. In most countries, there are situations where abortion is legal and situations where it is not. It is important to know exactly what the law says about abortion in your community and to understand the consequences of breaking the law — for the woman and for anyone who helps her.



In the Philippines, abortion is illegal and it is very difficult to organize for safe abortion. So we advocate secretly among friends and network organizations, and we tell people how to get reliable information through the Internet.

At the beginning of this chapter, on page 248, we shared part of Doctor Aruna Uprety's story. She became an activist for safe abortion in Nepal when she could not save the life of a young mother who was injured by an unsafe illegal abortion. Here is the rest of Aruna Uprety's story.

The long struggle for legal and safe abortion in Nepal

The death of that young mother made me realize that poor women with unintended pregnancies had very few options. I decided to share the story of that woman and work to change the law so women could have safe and legal abortions when they needed them. I wrote an article for a small newspaper and received many angry letters in reply. But I kept writing, telling stories of women who died and opposing the injustices poor women faced.

In 1990, the democracy movement in Nepal changed things. After many protests in the streets, we had a new parliament and constitution. Before, newspapers and radio stations were all controlled by the government. Now, there were many new newspapers and radio programs, and some were willing to talk about abortion. The time was right for changing the law.

During that time, I met a journalist, a man named Gujraj, who became an important ally. He not only printed my articles but sent reporters to villages when he heard of abortion-related deaths. Men who had lost their wives began to tell their stories in public. Another ally was a politician named Sunil who spoke in favor of women's rights and abortion. This support from men helped more people learn about unsafe abortion and see that it was not just a women's issue. Men, too, suffered from the loss of their wives, daughters, sisters, and friends.

I also began speaking on the radio. One day, after I shared stories of women who had died, I also told my own story. I described the abortion I had when I discovered I was pregnant 6 months after giving birth to my first child. And I said, "If the government has the courage to arrest me, I will be glad to go. If it will not arrest a woman who is a doctor for having an abortion or performing abortions, why arrest women from villages and spoil their lives?"



I thought people needed to see the faces of women who had died or had gone to prison, and I began to collect photographs of women along with their stories. Of course, I asked permission from them or their families first. Other activists found out how many women had died, and some surveyed people's changing attitudes about abortion. We presented this information at a gathering of politicians and health experts, saying that if they cared about stopping women from dying in childbirth, then they also needed to end unsafe, illegal abortion. Their opinions began to change, but the law did not.

For a long time, I worked with a group of people to draft a law that would make abortion legal. The first time we proposed the new law, it did not pass. In 1999, we tried again. We proposed that all women could have a safe abortion up to 12 weeks of pregnancy. If a woman had been raped, or if she had mental or physical reasons that made the pregnancy dangerous, she could have an abortion up to 18 weeks. After one powerful member of parliament changed his position, the law finally passed.



Today abortion is safe and legal in Nepal, but there is still work to do. When I visit villages far from cities, some doctors still think abortion is allowed only in the case of rape or with a husband's permission. Our work now is to spread the word that women have a legal right to safe abortions. We pressed the government to open training centers so doctors and nurses would learn how to provide safe abortion. At the same time, we need to teach young people about family planning, so they will not need abortions.

Ways to advocate for safe and legal abortion

Usually there is no single way to organize that will succeed. Here are a variety of efforts that groups have used in their struggles to make abortion safe and legal:

Talk about maternal mortality — women dying because of being pregnant — not abortion.

Share stories of real women who died or went to prison because of an abortion.

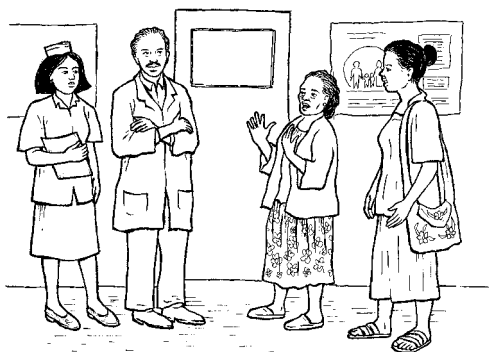


Work with others who share your vision. You will give each other encouragement and support, and together you can build a movement.

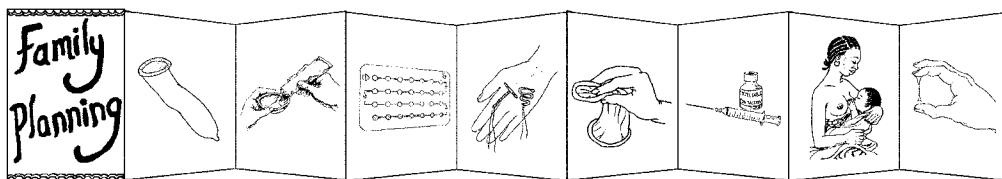
Involve men. They play an important role in opening up the conversation about abortion.

Use language that unites, not language that will spark disagreement. In Nepal, people were much more ready to “end unsafe, illegal abortion” than they were to “legalize safe abortion.” In some countries, people who might oppose the word “abortion” are not opposed to “menstrual regulation.” When a woman misses her period, she can go to her doctor to “make her monthly bleeding return.”

Timing is everything. There are moments in politics, such as a strong pro-democracy movement, when much progress can be made.

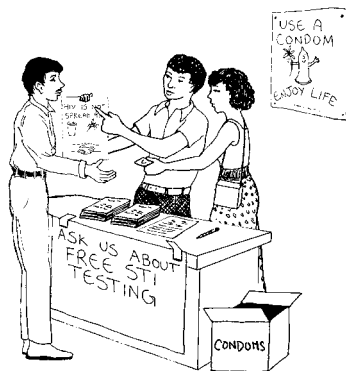


Make abortion available after it is made legal. Doctors and other health workers need to be trained, funding must be found, and women need to know where to get safe abortion care.



Make family planning more available so women will need fewer abortions. Work to change community attitudes that deny women the right to make decisions about their own health.

Use medicines for abortion and for emergency post-abortion care. Learn about how these medicines are used, and where they are available. Advocate to make this information available to women and to community health workers.



Work to make sexual health information available to girls and boys so they will know how to make good choices as adults.



Don't give up! If your first attempt fails, try a different approach. Eventually you will win!