



ISSUE DESCRIPTION



COMMITTEE United Nations Women

ISSUE Reassessing Abortion Rights

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Introduction

Abortion or to have abortion means the termination of pregnancy. Approximately 30% - 40% of pregnancies end with “spontaneous abortion”, or more commonly called miscarriage. Another course of action is called induced abortion, or less frequently “induced miscarriage”. It is possible to trace the origins of induced abortion to cultures as diverse as ancient China, ancient India, ancient Egypt, and the Roman Empire.

The foetus is not regarded as having a human soul in Judaism until it is viable, securely outside of the mother, and has taken its first breath. While in the womb, the foetus is not seen as a human life but rather as the woman's valued property. Contrary to Judaism's encouragement of procreation, when a pregnant woman's life is in danger, abortion is both legal and regarded as necessary.

On the seriousness of abortion, there was disagreement within the Catholic Church. The formalised summary of the teachings of the Church pleads for the prohibition of legal abortion and views abortion from the moment of conception as homicide. They regard anything to be alive if it has a heartbeat and blood circulation.

Abortion is a frequent medical procedure. When done by a qualified individual, according to a procedure specified by the WHO, and with consideration for the length of the pregnancy, it is safe. Maternal fatalities and morbidities are primarily caused by unsafe abortion, which is also a preventable cause. It may result in issues with women's physical and mental health as well as social and financial obligations on communities and healthcare systems. A serious problem for both public health and human rights is the lack of access to abortion treatment that is quick, safe, inexpensive, and respectful.

Definition of Key Terms

Abortion - A procedure to end pregnancy.

Miscarriage / “spontaneous abortion”- When the abortion occurs without outside intervention, spontaneously.

Induced abortion / “induced miscarriage” - When deliberate, conscious actions are taken to end pregnancy.

Embryo / foetus (or fetus in the USA) - An unborn offspring, “child”.

Conception - The start of pregnancy.

Gestational age - A phrase used to describe the pregnancy's stage throughout.

Comprehensive abortion care (CAC)- An intervention proven to prevent maternal death or injury.

Anencephalic- A serious birth defect when the baby is born without parts of the skull or brain.

General Overview

Abortions have historically been tried using herbal remedies, cutting implements, or other conventional techniques. Distinct countries have different abortion legislation and cultural or religious perspectives on the procedure. In certain places, abortion is only permitted under particular circumstances such as rape, fetal abnormalities, poverty, health risks to the mother, or incest. The moral, ethical, and legal implications of abortion are up for debate. People who oppose abortion frequently claim that an embryo or foetus has a right to life and therefore compare abortion to murder. Abortion advocates frequently make the case that a woman has the right to make decisions about her own body. Others support abortion as a public health policy that is accessible and lawful.

Abortion-related legislation currently in force vary widely. Abortion regulations continue to be influenced by religious, moral, and cultural considerations all across the world. Major human rights problems that sometimes determine whether abortion regulations are present or absent include the right to life, the right to liberty, the right to personal safety, and the right to reproductive health.

In many cases, abortion is permitted only up to a certain gestational age.

In practically every country, abortions are permitted at least in certain circumstances, but these circumstances vary greatly. Abortion is legal in 98% of nations to save a woman's life, according to a United Nations (UN) assessment based on data acquired up to 2019. Preserving bodily (72%) or mental (69%) health, in circumstances of rape or incest (61%), and in cases of fetal impairment (61%), are additional generally recognized justifications. In 37% of nations, having an abortion for financial or social reasons is acceptable. Only performing abortions at a woman's

request is permitted in 34% of nations, including Canada, the majority of European nations, and China.

The WHO has produced a list of essential health services in 2020 that includes comprehensive abortion care. A variety of healthcare professionals can successfully manage abortion as a straightforward medical intervention by administering medication or doing surgery. A medical abortion can also be safely self-managed by the pregnant person outside of a healthcare facility (such as at home), in whole or in part, within the first 12 weeks of pregnancy. This calls for the woman to have access to reliable information, high-quality medications, and assistance from a qualified health professional (if she needs or wants it during the process).

Major Parties Involved

The United States: In 2022 the Women's Health Organisation overturned the previous law, with this ending the protection of abortion rights by the United States Constitution and allowing individual states to regulate any aspect of abortion not pre-empted by federal law.

Madagascar: Madagascar's law prohibits abortion even in cases allowed in other countries. Abortion is punishable by 10 years in prison in this Christian nation, even for victims of rape.

Brazil: In Brazil, having an abortion is illegal and punishable by up to three years in prison for the pregnant woman and up to four years for the doctor or anyone else who performs the procedure on another person. In Brazil, induced abortion is not illegal in three specific circumstances: when the woman's life is in danger; when the pregnancy is the consequence of rape; and when the fetus is anencephalic.

Bangladesh: Most of the time, abortion is prohibited in Bangladesh, however menstruation control is frequently used as an alternative. Induced abortion is banned too, unless the woman is in danger.

Hungary: Since 1953, abortion has been permitted in Hungary, with the most recent amendment to the abortion legislation focusing on the preservation of foetus life. Abortions may be performed up to 12 weeks per the present legislation, however under specific conditions they may be prolonged up to 24 weeks. In order to access an abortion, a woman must first obtain a certificate from a gynaecologist attesting to her pregnancy. She must then

have at least two sessions of counselling from a midwife at the Family Protection Service and wait 72 hours before the procedure can be carried out.

Egypt: All types of abortion are illegal in Egypt. Any person who induces an abortion may be imprisoned, and physicians who do so may be sentenced to prison.

Timeline of Events

1920- Vladimir Lenin made abortion on demand legal in the Soviet Union, making it the first nation to do so. The law was initially implemented in the Russian SFSR and then the rest of the nation in 1922.

1932 - The first nation outside of the Soviet Union in Europe to legalize abortion in rape and maternal health emergencies was Poland.

1964 - The first abortion-legalisation law was approved in Norway. It permitted abortion in situations where the mother was in danger, and two doctors made the abortion decision.

1967 - Colorado became the first state to decriminalize abortion in cases of rape, incest, or in which pregnancy would lead to permanent physical disability of the woman. Similar laws were passed in both California and North Carolina.

1969 - NARAL, is officially established.

2009 - In Spain, a bill decriminalised abortion, making it legally accessible to women in the first 14 weeks of pregnancy.

27th March 2020 - The United States Congress passes the Coronavirus Aid, Relief and Economic Security Act to help Americans who were negatively affected by the coronavirus

The second half of the 20th century - Abortion was legalised in a greater number of countries.

Previous Attempts to Solve the Issue

In the previous years, and decades there have been many attempts to make abortion as accessible for every woman as possible all around the world.

One of them is the Center for Reproductive Rights. It promotes measures to increase access to safe and legal abortions, fights against attempts to restrict access to abortion care, and removes restrictive laws and regulations as part of its mission to safeguard and advance abortion rights globally.

Since 1999, Women on Waves has been educating people about medical abortions. The NGO (non-profit organisation) built a portable medical facility inside a shipping container that travels to nations with severe abortion regulations aboard rented ships. Since the ships are registered in the Netherlands, when they are in international waters, Dutch law is in effect. The group offers free courses and information when in port; while in international waters, medical professionals are legally permitted to recommend medical abortion medications and counselling.

WRRAP (Women's Reproductive Rights Assistance Project) is a non-partisan, nonprofit organisation assisting women who are financially unable to pay for safe, legal abortions or emergency contraceptives in the USA.

NARAL (National Association for the Repeal of Abortion Laws) has been at the forefront of the struggle for access to abortion and other forms of reproductive freedom for more than 50 years. Their 4 million members in every state and congressional district fuel NARAL. They stand in for the 8 out of 10 Americans who think everyone should be allowed to choose for themselves whether, when, and how to establish or develop a family without political interference.

Mireille Raberono, an incredible feminist and an icon of human rights, was one of the rare people of her generation in Madagascar who openly and relentlessly demanded the decriminalisation of abortion.

Possible Solutions and Approaches

To start with, for states the most convenient way would be preserving abortion care. It is safe to say that to craft proactive policies that protect abortion care is critical. Countries must also realise that for many women, access to abortion care is still out of reach because of insurance restrictions that prohibit coverage.

In addition to pre-emptive defensive action, countries and member states can also forge ahead with progressive policies and laws that expand access to abortion. A possible way to do so could be to expand the availability of medication abortion. Within the first 10 weeks of pregnancy, women typically utilise medication to induce abortions, which is thought to be very safe and less expensive than surgical abortion. Additionally, there are other approaches for nations to increase access to medical abortion. For instance, they can remove administrative and financial obstacles like the need for doctors to maintain stockpiles of the pharmaceutical mifepristone, one of two used for medication abortion, and they can also allow pharmacists to dispense the pill with a prescription.

Another solution could be to support Abortion Funds. Abortion funds directly support people seeking abortion care—including financial and practical support like transportation, lodging and language translation—and are a critical part of ensuring abortion access.

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