SAFE ABORTION

What is it and what does it mean in the Ethiopian context?

MVA KIT
MEDICATION ABORTION
Women’s healthcare providers in Ethiopia can often encapsulate the effects of unsafe abortion in a few words.

The septic room. The ward at Black Lion.

They easily recall stories of women injured or lost from self-induced abortion. A trail of blood on the clinic floor. A beautiful woman dying shortly after arrival at care. Most can also speculate how the absence of safe abortion services, legalized in 2005, would lead to harmful consequences for women in the country.

Background
Unsafe abortion is defined by the World Health Organization (WHO) as, “a procedure for terminating a pregnancy performed by persons lacking the necessary skills or in an environment not in conformity with minimal medical standards, or both”[1]. Safe abortion, it stands to reason, must be performed by a capable person in a medically conducive environment.

In 2005, the Ethiopian Government amended the country’s Penal Code to expand instances in which a woman could legally obtain an abortion (see right). Prior to this time, (con’t on back)
Article 551 of the Criminal Code of Ethiopia

(1) Termination of pregnancy by a recognized medical institution within the period permitted by the profession is not punishable where:
   a) the pregnancy is the result of rape or incest; or
   b) the continuance of the pregnancy endangers the life of the mother or the child or the health of the mother or where the birth of the child is a risk to the life or health of the mother; or
   c) where the child has an incurable and serious deformity; or
   d) where the pregnant woman, owing to a physical or mental deficiency she suffers from or her minority, is physically as well as mentally unfit to bring up the child.

(2) In the case of grave and imminent danger, which can be averted only by an immediate intervention, an act of terminating pregnancy in accordance with the provision of Article 75 of this Code is not punishable.

Definition

Abortion is the termination of pregnancy before fetal viability, which is conventionally taken to be less than 28 weeks from last normal menstrual period (LNMP); and if the LNMP is not known a birth weight of 1000 gm.

Medication Abortion

MVA Kit

The MVA or manual vacuum aspiration kit is a device used to manually suction uterine contents. In Ethiopia, MVA can be administered for pregnancies up to 12 weeks completed. Unlike MA, which requires a return visit to healthcare following initial regimen, the MVA procedure can be completed in a single session.

Safe-t-Kit, DKT Ethiopia’s medication abortion (MA) product, is a combination treatment containing mifepristone and misoprostol and is effective through 9 weeks of pregnancy. Alternative MA regimens are available for later-term pregnancies.

Access is DKT Ethiopia’s quarterly publication. All Access publications are available at www.dktethiopia.org. For media and other inquiries, please contact Fitih Tola, DKT Ethiopia’s Public Relations Officer, at +251 116 632222 or fitih.t@dktethiopia.org.
(con’t from 2)

abortion was only allowed in cases, “done to save the pregnant woman from grave and permanent danger to life or health, which it is impossible to avert in any other way”.

This determination had to be made by two physicians, “qualified as specialist[s] in the alleged defect of health from which the pregnant woman [was] suffering”, compounding the risk to pregnant women in a country that had just one physician for every 50,000 Ethiopians in 2000[2].

At the time Ethiopia amended its Penal Code, the country’s maternal mortality ratio (MMR) was 743 per 100,000 live births, among the highest in the world, though decreasing thanks to the introduction and uptake of modern contraceptive methods and expanding healthcare infrastructure. It was estimated that abortion-related complications accounted for 32% of all maternal deaths[3]. The cost of care associated with abortion was also suggested to be “enormous”[3].

Abortion today

Ethiopia has shown considerable progress decreasing abortion-related mortality. In 2014, abortion accounted for 6-9% of maternal mortality, a roughly three-quarters’ reduction from 2005[5].

According to the Federal Ministry of Health, an estimated 420,000 induced abortions occurred in 2016 out of 4.2 million pregnancies (FMoH Internal Document). A 2014 study put this figure at 620,300[6], (con’t www.dktethiopia.org)

New Sensation variants will be released in 2018. Check a pharmacy near you!

DKT receives funding from an anonymous donor as well as non-abortion funding from the Gates Foundation.