

Despite overall expansion in the legal grounds for abortion, policies remain restrictive in many countries

The Programme of Action of the 1994 International Conference on Population and Development (ICPD)¹ underscored the importance of preventing and managing unsafe abortions² and providing services for safe abortion where it is not against the law. It also urged Governments to prioritize the prevention of unwanted pregnancies, so as to eliminate the need for abortion. The Programme of Action called upon all Governments and relevant organizations to “deal with the health impact of unsafe abortion as a major public health concern” and stated that “[i]n all cases, women should have access to quality services for the management of complications arising from abortion”.

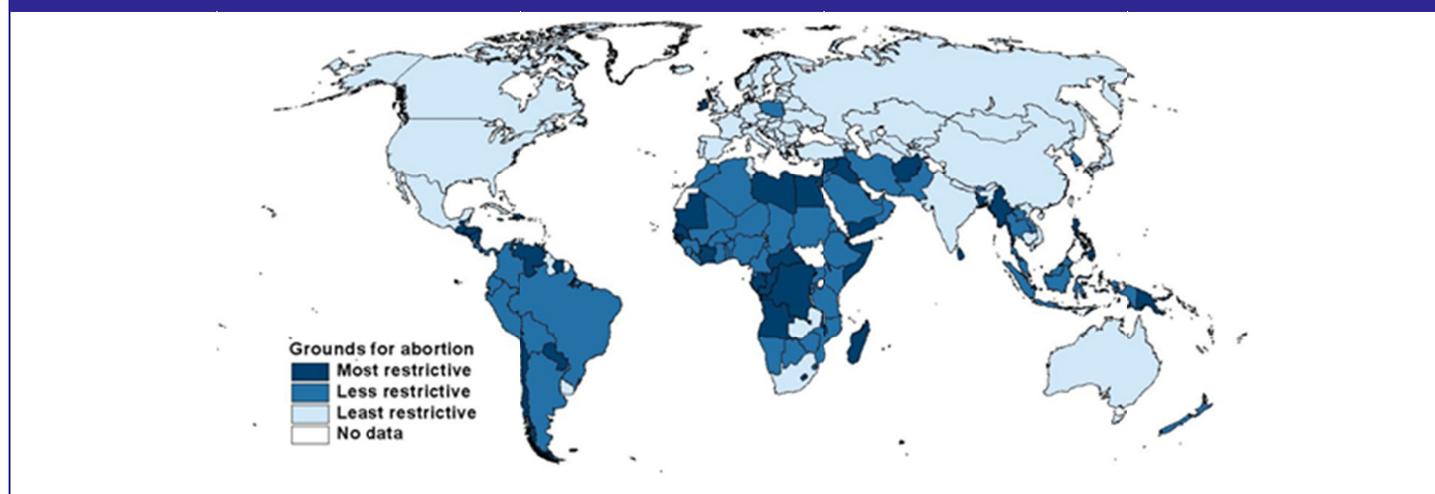
Since the ICPD, many Governments have modified legal provisions for abortion and strengthened programmes to provide safe abortion services and post-abortion care. These actions, together with improved access to modern contraceptives, have contributed to declines in both the rate of abortion and the number of abortion-related deaths. Yet, according to the latest available data, about half of the estimated 44 million abortions worldwide in 2008 were carried out using unsafe procedures.

Almost all unsafe abortions occur in countries of the developing regions, and an estimated 47,000 women die each year from complications associated with unsafe abortion.³

Using information gathered in the 2013 revision of the *World Population Policies Database*,⁴ this brief summarizes changes between 1996 and 2013 in the legal grounds under which abortion is permitted for all Member and non-member States of the United Nations, and how abortion policies are associated with key reproductive health outcomes, including fertility, unsafe abortion and maternal mortality.

Information was gathered on seven legal grounds for abortion for each country, namely: (1) to save the life of a woman; (2) to preserve a woman’s physical health; (3) to preserve a woman’s mental health; (4) in case of rape or incest; (5) because of foetal impairment; (6) for economic or social reasons; and (7) on request. Countries allowing abortion “for economic or social reasons” or “on request” are categorized as having “liberal” or “least restrictive” abortion policies. All other countries are considered as having “restrictive” abortion policies.

Figure 1. Legal grounds on which abortion is permitted, 2013



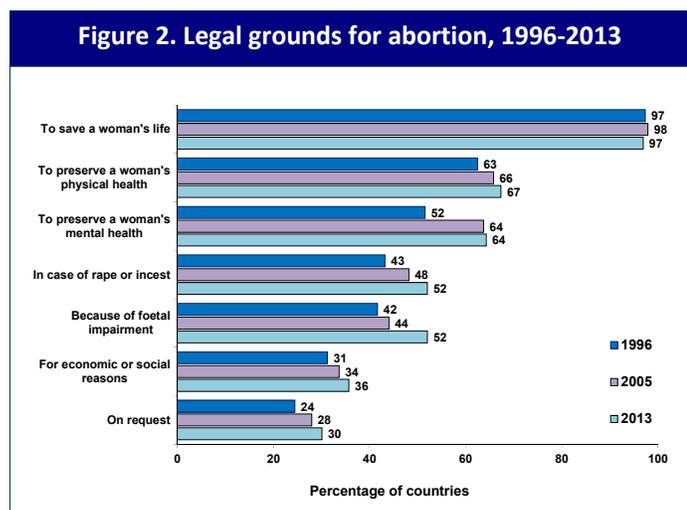
The boundaries on this map do not imply official endorsement or acceptance by the United Nations.

Most restrictive: Abortion not permitted or permitted only to save a woman’s life; *Less restrictive:* To preserve a woman’s physical or mental health, in case of rape or incest, or because of foetal impairment; *Least restrictive or liberal:* For economic or social reasons or on request.

1. Abortion is permitted by almost all countries to save the life of a pregnant woman.

In 2013, 97 per cent of Governments permitted abortion to save a woman's life. In most countries, the laws and regulations do not specify the complications that are considered life-threatening, leaving it to the judgement of the medical professionals performing the abortion.

In about two thirds of countries in 2013, abortion was permitted when the physical or mental health of the mother was endangered, and only in half of the countries when the pregnancy resulted from rape or incest or in cases of foetal impairment. Only about one third of countries permitted abortion for economic or social reasons or on request.



The proportion of the world's population living in countries with certain legal grounds for abortion differs considerably from the corresponding proportion of countries. For example, in 2013, just 36 per cent of countries allowed abortion for economic or social reasons, but those countries contained 61 per cent of the world's population. The difference reflects the inclusion of some countries with large populations (such as China and India) that permitted abortion on this legal ground.

Chile, the Dominican Republic, El Salvador, the Holy See, Malta and Nicaragua did not permit abortion under any circumstances.

2. While a growing number of countries have expanded the legal grounds for abortion, many have maintained restrictive policies.

Between 1996 and 2013, the percentage of Governments permitting abortion increased gradually for all legal grounds except to save a woman's life, which remained at 97 per cent.

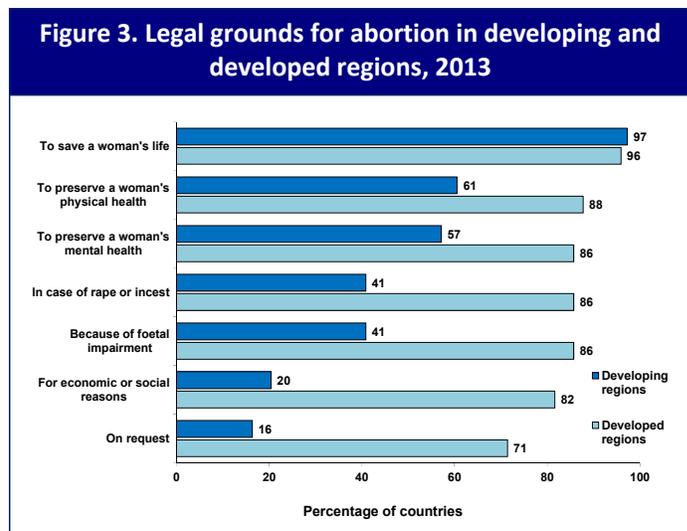
Between 1996 and 2013, 56 countries (20 in Africa, 12 in Asia, 12 in Latin America and the Caribbean, 8 in Europe and 4 in Oceania) increased the number of legal grounds on which abortion is permitted. During this time, eight

countries (3 in Latin America and the Caribbean, 2 in Africa, 2 in Asia and 1 in Oceania) reduced the number of legal grounds.

3. Abortion policies continue to be more restrictive in countries in developing regions.

Since 1996, legal grounds for abortion have expanded in a growing number of countries in both developing and developed regions, but abortion policies remain much more restrictive in countries of the developing regions.

In 2013, only 48 out of 148 countries in developing regions allowed abortion on five grounds or more, compared with 41 out of 49 countries in developed regions.



Governments in developing regions were more than four times as likely to have restrictive abortion policies as those in developed regions. In 2013, 82 per cent of Governments in developed regions permitted abortion for economic or social reasons and 71 per cent allowed abortion on request. In contrast, only 20 per cent of Governments in developing regions permitted abortion for economic and social reasons and only 16 per cent allowed it on request.

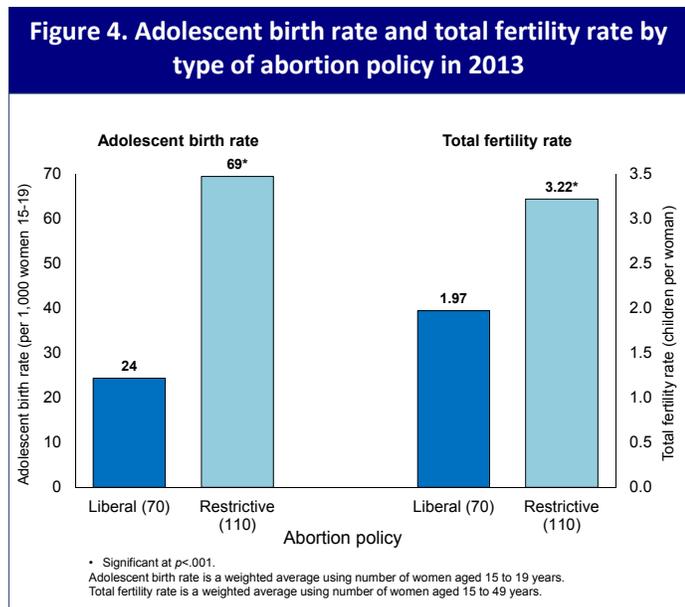
In 2013, 86 per cent of Governments in developed regions allowed abortion when the pregnancy resulted from rape or incest or in cases of foetal impairment, compared with only 41 per cent in developing regions.

The legal grounds for abortion were even more restrictive in the least developed countries, where only 6 per cent of Governments permitted abortion for economic and social reasons and only 4 per cent allowed it on request in 2013.

4. Fertility rates are significantly higher in countries with restrictive abortion policies.

The average adolescent birth rate in 2013 for countries with restrictive abortion policies was about three times greater (69 births per 1,000 women aged 15 to 19 years) than for countries with liberal abortion policies (24 births per 1,000 women aged 15 to 19 years).

The average total fertility rate in 2013 for countries with restrictive abortion policies was also significantly higher (3.22 children per woman) than for countries with liberal abortion policies (1.97 children per woman).



The positive association between restrictive abortion policies and fertility reflects the negative association between levels of development and fertility, since countries in developing regions tend to have both higher fertility levels and more restrictive abortion policies. In addition, restrictive abortion policies may contribute directly to higher fertility levels by reducing the probability of terminating an unwanted pregnancy.

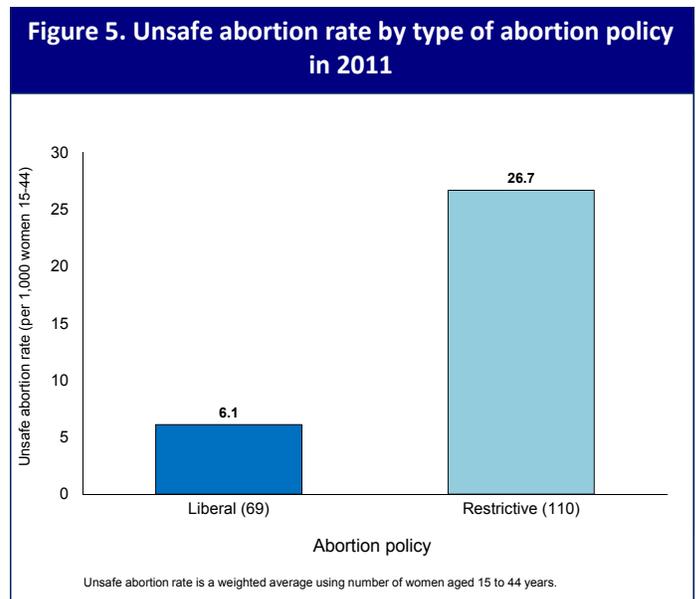
5. Countries with restrictive abortion policies have much higher unsafe abortion rates.

The average unsafe abortion rate was more than four times greater in countries with restrictive abortion policies in 2011 (26.7 unsafe abortions per 1,000 women aged 15 to 44 years) than in countries with liberal abortion policies (6.1 unsafe abortions per 1,000 women aged 15 to 44 years).

In developing regions, where a vast majority of unsafe abortions occur, a similar strong association between the type of abortion policy and the unsafe abortion rate was observed. Within developing regions, the average unsafe abortion rate was 26.9 per 1,000 women aged 15 to 44 years among countries with restrictive abortion policies, compared to 7.8 per 1,000 women aged 15 to 44 years among countries with liberal abortion policies.

The strong positive association between restrictive abortion policies and unsafe abortion rates reflects the positive association between levels of development and the availability of safe abortion services, since countries in developing regions tend to have both weaker health-care systems (and thus less capacity to provide safe abortion

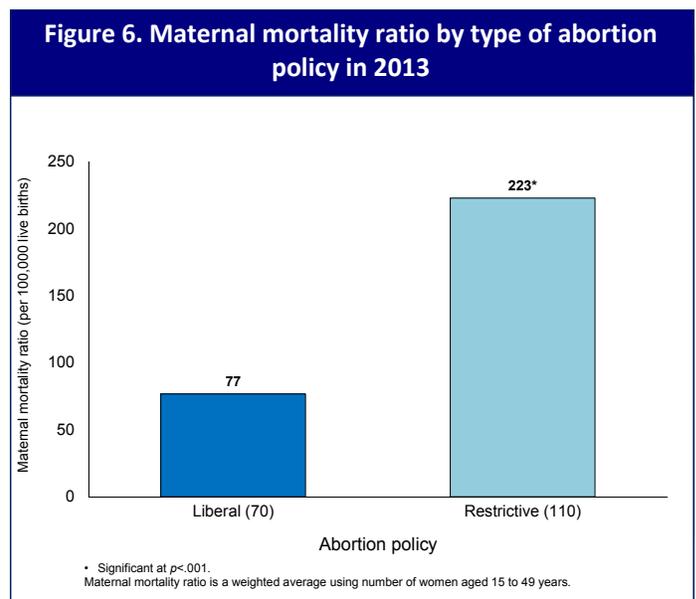
services) and more restrictive abortion policies. In addition, restrictive abortion policies may contribute directly to unsafe abortion rates by limiting the available options for safely terminating an unwanted pregnancy.



Tabulation for unsafe abortion rate by type of abortion policy was provided by the World Health Organization on special request.

6. Countries with restrictive abortion policies have much higher levels of maternal mortality.

The average maternal mortality ratio was three times greater in countries with restrictive abortion policies in 2013 (223 maternal deaths per 100,000 live births) than in countries with liberal abortion policies (77 maternal deaths per 100,000 live births).



In developing regions, the average maternal mortality ratio was significantly higher among countries with restrictive abortion policies in 2013 (227 maternal deaths per 100,000 live births) than among countries with liberal abortion policies (97 maternal deaths per 100,000 live births).

The strong positive association between restrictive abortion policies and the maternal mortality ratio reflects the positive association between levels of development and the availability and quality of maternal health-care services, since countries in developing regions tend to have both weaker health-care systems (especially for maternal health and obstetric care) and more restrictive abortion policies. In addition, restrictive abortion policies may contribute directly to the risk of maternal mortality by limiting the available options for safely terminating an unwanted pregnancy.

NOTES

¹ United Nations publication, sales No. E.95.XIII.18.

² Unsafe abortion is a procedure for terminating an unwanted pregnancy carried out by persons who lack the necessary skills, or conducted in an environment lacking minimal medical standards, or both.

³ World Health Organization, 2012. Safe and unsafe induced abortion. WHO/RHR/12.02.

⁴ Available at: http://esa.un.org/poppolicy/about_database.aspx.

This brief presents data for countries using a traditional classification by development group. The “developed regions” comprise all countries and areas of Europe plus Northern America, Australia, New Zealand and Japan. The “developing regions” comprise all countries and areas of Africa, Asia (excluding Japan), Latin America and the Caribbean plus Melanesia, Micronesia and Polynesia. The terms “developed” and “developing” are used for statistical convenience and do not express a judgement about the stage reached by a particular country or area in the development process. Within the developing regions, the 49 least developed countries include 34 countries in Africa, 9 in Asia, 5 in Oceania and 1 in Latin America and the Caribbean, as defined by the United Nations General Assembly resolutions 59/209, 59/210, 60/33, 62/97, 64/295 and 67/136.

Results presented in this brief are based on the 2013 revision of the World Population Policies Database. Additional information about the Database and related publications can be obtained from the United Nations Population Division website: www.unpopulation.org.



The World Population Policies Database



The World Population Policies Database provides comprehensive and up-to-date information available on the population policy situation and trends for all Member States and non-member States of the United Nations. The database shows the evolution of Government views and policies with respect to population size and growth, population age structure, fertility, reproductive health and family planning, health and mortality, spatial distribution and internal migration and international migration within the context of demographic, social and economic change. The Database is updated biennially by conducting a detailed country-by-country review of national plans and strategies, programme reports, legislative documents, official statements, and various international, inter-governmental and non-governmental sources, as well by using official responses to the United Nations Inquiry among Governments on Population and Development. A new web-interface for the Database allows users to run custom data queries on population policy and demographic indicators for all countries and selected time points since 1976, create graphs and maps, and download country profiles. The World Population Policies Database can be accessed here: http://esa.un.org/poppolicy/about_database.aspx.