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
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## Asia and Oceania Federation of Obstetrics & Gynaecology

# POSITION STATEMENT ON PREVENTING UNSAFE ABORTIONS

## The Tokyo Declaration

Adopted at the XXth AOCOG, 21-25 September 2007, Tokyo, Japan

## Background

More than 90 million *abortions* and 198,000 *maternal abortion deaths* were reported in the 23 AOFOG member countries over a period of five years from 1995 to 2000.<sup>(1)</sup>

The World Health Organization (WHO) defines an unsafe abortion as "*a procedure for terminating an unwanted pregnancy either by persons lacking the necessary skills or in an environment lacking the minimal medical standards, or both,*" and notes that *almost all abortion-related deaths are preventable and that when abortion is performed by qualified people using correct techniques in sanitary conditions, it is one of the safest medical procedures.*<sup>(2)</sup>

In the year 2000, there were 10.5 million estimated *unsafe abortions* in Asia, which is more than half of the 19 million estimated unsafe abortions occurring globally.<sup>(3)</sup>

More than 50% of all *maternal deaths due to unsafe abortion* globally, occur in the region<sup>(3)</sup>, and such deaths and injuries disproportionately affect adolescents, poor women, and other socially at-risk groups of women.

To achieve The U.N. Millennium Development Goal (MDG) 5 on maternal health the issue of unsafe abortion must be addressed.<sup>(4-6)</sup>

Numerous inter-governmental conferences and human rights conventions have acknowledged the rights of women to personal autonomy and to have access to health care, including the right to make personal decisions about whether and when to have children.<sup>(7-13)</sup>

Several U.N. conferences / documents including the ICPD 1994, and the ICPD +5 recognize women's sexual and reproductive rights, have expressed commitments to address unsafe abortion, and have urged governments to ensure that women have access to high quality reproductive health services, including assuring that safe abortion services are available where legally permitted.<sup>(4, 7-19)</sup>

The laws in *all* AOFOG member countries *permit abortion on some grounds*, whether to save a woman's life, to preserve her physical or mental health, in cases of rape and incest, for socio-economic reasons, or on request.<sup>(20)</sup>





## POSITION STATEMENT ON PREVENTING UNSAFE ABORTIONS

### The Tokyo Declaration

The AOFOG recognizes the magnitude of the problem of unsafe abortion and the need to address this issue. To this end the Obstetrics and Gynaecology Societies in the Asia Oceania region and their members will work proactively to accomplish the following objectives:

1. To encourage governments and other concerned organizations to **make every effort to improve women's rights, status and health**
2. To prevent unwanted pregnancies by **educating men and women on sexual matters and contraception**, about the dangers of unsafe abortions, about the availability of safe **abortion services** where legally available, and **dispelling myths about the adverse effects of temporary, permanent and emergency methods of contraception**.
3. To ensure that after non-directive counseling **every woman is able to obtain an abortion in accordance with the laws of the country in which she lives**, and emphasize that health-care services have an obligation to provide such legal services as safely as possible.
4. To ensure that in all situations, but particularly where abortion is permitted only to protect a woman's life or health, the **woman's own decision about how much risk she is willing to accept is the determining factor** in obtaining an abortion or in continuing the pregnancy.
5. To ensure that members of the health-care team responsible for counseling or treating women do not impose their **religious, cultural, or other convictions** regarding abortion on clients whose attitudes are different, and that counseling should never involve pressure on a woman to have an abortion, for example, if she is HIV-positive.
6. To ensure that **full informed consent** is obtained from every woman who has an abortion, and that her individual decision is supported.
7. To consider the evolving capacity of the **minor** to make decisions about her own health care when a minor seeks abortion-related care. When a minor is not considered competent to give consent for treatment, the advice of the parents or guardians, and when appropriate the courts, should be considered before determining management.
8. To ensure that no **physician** (or other member of the medical team directly involved in performing an abortion) is **required to perform an elective procedure** against his or her personal convictions, and to ensure that their careers are not prejudiced as a result. Such a physician would however, have an **obligation to inform** the woman of her right to an abortion within the legal framework **and to refer** the woman to a colleague willing to perform one.
9. To ensure that no physician would withhold treatment when a woman's life is at risk from

*To achieve these objectives, individual obstetrician/ gynaecologists and Obstetrics and Gynaecology Societies are encouraged to take the following actions:*

1. **Establish a working group on Sexual and Reproductive Rights** in each Obstetrics and Gynecology Society or Federation with the participation of professionals from other disciplines in order to promote these rights and these recommendations.
2. **Sponsor/Support comprehensive family planning programs** for all women and men of reproductive age and dispel myths about temporary, permanent and emergency methods of contraception.
3. Take a leadership role in promoting official government interventions at all levels to **promote access to safe abortion services for all legal indications** and to control mortality caused by unsafe abortion.
4. Work with government health authorities to **prepare and implement norms and guidelines** that define the minimal level of quality in abortion care, the steps to assure sufficient public sector services, and the staffing and supplies needed for the promotion and protection of sexual and reproductive rights, including access to safe abortion services for all legal indications. The use of WHO-endorsed technologies should be recommended and added to essential drugs and equipment lists.
5. Work with authorities governing medical curricula and schools responsible for **training of professionals** from health and related sciences, including midlevel providers, to include content related to gender, sexual and reproductive rights, unwanted pregnancy and abortion, respect for diversity, and the importance of providers not imposing their own personal values on women seeking their care.
6. Promote **continuing education of health professionals** in the area of women's reproductive and sexual rights in each country, and stimulate medical professionals to **promote interdisciplinary debates** on abortion care, including the fields of epidemiology, nursing, psychology, social work, and other disciplines which could have a bearing on the problem of unwanted pregnancy and abortion.
7. Serve as a **source of information to the media** in order to disseminate correct information related to women's sexual and reproductive rights including abortion and the dangers of unsafe abortion.
8. Support efforts to prevent sex selective abortion by **addressing the underlying causes that perpetuate discrimination against women and girls**, including discriminatory laws, patriarchal structures, unfair dowry systems, etc. No physician should perform a sex selective abortion on social grounds.
9. Give special attention to **adolescents** seeking care for unwanted pregnancy or abortion.
10. **Establish alliances** with public and private institutions and with national and international NGOs concerned with these issues, including women's groups in order to strengthen mutual efforts.
11. **Study, analyze and understand national laws and policies in order** to encourage provision of abortion services to the fullest extent permissible.
12. **Advocate for laws which recognize the rights of women to obtain a safe abortion.**
13. Advise service providers to **honor the code of professional ethics** which safeguards confidentiality, whilst working within the laws of the country.
14. **Question laws and regulations which require physicians to report women** suspected of obtaining abortion services or require police presence in obstetric clinics and emergency services.