

## **CIVIL SOCIETY ORGANIZATIONS' STATEMENT DURING THE COMMEMORATION OF THE INTERNATIONAL SAFE ABORTION DAY (ISAD) 2023**

We, organizations working on Women's Rights and Sexual and Reproductive Health & Rights including access to safe abortion in Africa, specifically in Nigeria, Zambia, Malawi, Rwanda, Tanzania, Uganda, and Kenya in commemorating International Safe Abortion Day (ISAD) 2023, acknowledge the efforts made by duty bearers at regional and national level in securing the sexual and reproductive rights of women and girls including their right to access safe abortion care. These include the various international and regional commitments that African countries have adopted, ratified, and are implementing including the Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa (Maputo Protocol) and the Convention on the Elimination of All forms of Discrimination Against Women (CEDAW) that set standards for states regarding the protection of women's and girls' rights.

ISAD presents us with an opportunity to celebrate the progress made in securing the rights of girls and women to access safe and legal abortion but also reflect on the gaps and barriers that hinder the full realization of these rights and how best the same can be addressed.

We would like to highlight the impact that criminalization of abortion, as is the case in Tanzania, Uganda, Kenya, Malawi, and Nigeria, continues to have including reinforcing stigma on abortion, preventing girls and women from seeking services and preventing qualified health providers from providing abortion care resulting in women and girls resorting to backstreet abortions from unqualified persons leading to preventable injuries and deaths. This sets countries back from achieving the targets under the Sustainable Development Goals (SDGs) including on SDG target 3.1 on the reduction of maternal mortality.

Other legal and policy barriers presenting in Rwanda and Zambia for example, include the requirement for 3<sup>rd</sup> party authorizations from parents, guardians or spouses and requirements for multiple doctor authorizations for abortions. Unjustified bans for example in Rwanda, on qualified health providers in certain cadres from providing safe abortion care with only medical doctors authorized despite the low medical doctor numbers in country. This is compounded by the steps taken by governments to arbitrarily withdraw standards and guidelines that offer health providers guidance on how they can provide safe abortion and post abortion care as witnessed in Uganda, Nigeria, and Kenya.

We would also like to highlight that failure to appreciate multiple and intersecting forms of discrimination that girls and women face due to their identities and circumstances, prevents States such as Uganda, Nigeria, Kenya, Tanzania and Malawi from adequately planning and providing for access to safe abortion care for vulnerable girls and women including survivors of sexual violence, women and girls in humanitarian settings, adolescents who are out of schools, women and girls with disabilities, and girls and women from low socio-economic backgrounds, leaving these groups more vulnerable to and at risk of seeking unsafe abortions.

All these barriers exist in an environment where there are limited efforts by governments to disseminate accurate, timely, complete, and non-judgmental information on sexual and reproductive health services, in order to enable access to these services, including safe abortion. In addition, they also exist in an environment where there is an onslaught on provision of critical SRHR services and information from conservative and anti-gender groups and where misinformation and disinformation on SRHR and safe abortion care is rampant. This directly impacts the capacity and fortitude of States to put in place progressive laws, policies, and administrative actions to secure access to safe abortion care, health providers to offer services, and women and girls to seek safe abortion services.

We therefore call on all actors to prioritize and take positive actions to address the issues that we have highlighted specifically:

1. We call on African Union Member states that have not ratified the Maputo protocol to prioritize ratification. Further we urge the States that have ratified but placed reservations on Article 14 (2) (c) of the Maputo Protocol to lift reservations and fully implement the provisions under the protocol.
2. Acknowledging that criminalization of abortion only forces women and girls to seek unsafe abortions, we call on countries that continue to broadly criminalize access to abortion under their penal laws including Nigeria, Kenya, Uganda, Tanzania, and Malawi to undertake the necessary legislative reforms to remove the blanket criminalization and legalize access to safe abortion in line with the Maputo Protocol.
3. We ask States to fast-track removal of policy and administrative barriers including those that arbitrarily limit the cadres of health providers and levels of health facilities that can provide Safe Abortion Care without regard to the burden that such limitations place on a majority of girls and women.
4. We call on Legislatures and the Executive arms of government to put in place and implement laws and policies that secure access to safe abortion care especially for most vulnerable women and girls including out of school adolescents, girls and women from lower socio-economic backgrounds, women and girls with disabilities, survivors of sexual violence and women and girls in humanitarian settings including refugees and those who are internally displaced.

5. We urge states to prioritize addressing abortion stigma through the provision of accurate information and education on safe abortion care as an essential health service, its legality and availability.
6. We call on Judiciaries to continue to be bold and guard their independence as they develop national and regional jurisprudence that protects the rights of girls and women to access safe abortion care. We further urge Judicial training institutes to incorporate information and education on sexual and reproductive health and rights including safe abortion in their training curriculums and programs.
7. We ask the brave women and girls and fellow civil society organizations that advocate for the full realization of abortion care rights for all girls and women in Africa to remain steadfast in their efforts as we continue to work together to advocate for access and enjoyment of comprehensive sexual and reproductive health and rights.

