

THE LONG WALK TO FREEDOM  
OF CHOICE IN SOUTH AFRICA  
A COUNTRY CASE STUDY

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BY: NIKKI NAYLOR  
WOMEN'S LEGAL CENTRE  
CAPE TOWN, SOUTH AFRICA

# THE CONTEXT

- *“If women’s lives are to be saved, women’s right to appropriate reproductive health services, including abortion care, must be secured...”*
- 1994 : making the personal political
- South African Constitution entrenches the right of all women to make decisions concerning reproduction and to security and control over their bodies

# THE CHOICE ON TERMINATION OF PREGNANCY ACT, 92 OF 1996

- Hailed as most progressive, liberal law;
- Holistic approach: universal access to reproductive health care includes family planning, contraception, termination of pregnancy (TOP) as well as education and counselling;
- State has responsibility to provide safe conditions under which right of choice can be exercised.

# WHEN PREGNANCY MAY BE TERMINATED

- Abortion on request within first 12 weeks by registered midwife / medical practitioner with prescribed training;
- From 13-20 weeks a medical practitioner is of opinion that :
  - risk of injury to mother or foetus (physical / mental);
  - rape / incest
  - Socio-economic circumstances significantly affected
- +20 weeks: woman's life endangered; severe malformation of fetus or risk of injury to fetus

# DEFINING A TERMINATION

- “Termination of pregnancy: the separation and expulsion, by **medical or surgical** means, of the contents of the uterus of a pregnant woman.”
- Section 3 sets out where “surgical” terminations can take place – only at facilities “designated” by Minister of Health
- Distinction between surgical and medical abortion

# IMPLEMENTATION HURDLES

- Liberal law does not in itself guarantee the creation of adequate and accessible abortion services
- 1999 – 2000 Rep. Health Research Unit research into accessibility
- Women still resorting to backstreet, illegal
- Women still presenting with incomplete abortion
- WHY?

# IMPLEMENTATION HURDLES

(2)

- Lack of knowledge of the the law was found to be a significant barrier
- Important deterrent was fear of staff rudeness
- Delays in accessing service (waiting period)
- So what do women do in these situations?

# IMPLEMENTATION HURDLES (3)

- Doctors deliberately selected who are helpful, no waiting period and privacy perceived better
- Misoprostol prescribed and then told to go for surgical evacuation when bleeding starts
- A third of women had obtained misoprostol from pharmacist, doctor / nurse
- Doctor acting legally in terms of law but pharmacist / nurse?
- A quarter of women acted alone in inducing abortion – self-medication

# ICPD +10 COUNTRY REPORT

- Stark regional disparities in provision of services (resourced provinces performing most of abortions, no service in other areas)
- Inequities and barriers in access to services remain
- In 2000 out of 292 designated facilities only 32% were functioning (70% private and 30% public)
- What then of poor, rural women in South Africa?

# THE STRUGGLE CONTINUES...

*“Greater efforts should be made to provide services to women in rural areas [and] more services should be established at primary care level. Greater efforts are needed to overcome barriers to service provision...”*

Dr Rachel Jewkes et al (2003)

# THE ROLE OF MEDICAL ABORTION

- Choice Act : medical abortion can be performed at facility not designated.  
Mifepristone & Misoprostol approved in 2001
- *"Misoprostol is an important drug in the management of women requesting termination of pregnancy. Its use enhances the ease, and, therefore safety of the procedure and reduces the cost...Misoprostol is a very useful and safe drug if used properly, however, like most drugs it is dangerous if abused."* Jewkes et al  
2000

# THE WAY FORWARD

- Amendment Bill to Choice Act (debated Aug 2004);
- Distinction between medical and surgical no longer apparent
- All terminations to be at “designated” facilities, wording open-ended
- Process of designating not as cumbersome anymore – streamlined
- Will allow for registered nurses (Midlevel service)
- National Guideline / policy on medical abortion?

# CONCLUDING REMARKS

- what women don't know does hurt them!
- law & policy are not determinative of social reality!