



DST-NRF Centre of Excellence  
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# Sexual Realities: A Case Study of rights, values and services The Abortion debacle

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# Please take a step forward

1. If you think that a woman who had a *one-night stand* should have an abortion on request
2. If you think that a married woman should have an abortion on request
3. If you think that a woman who was on contraception and had a 'fall' could have an abortion on request
4. If you think that a woman who was raped and left pregnant should have an abortion on request
5. If you think that a woman who is carrying a child who is at risk of disability should have an abortion on request

# Presentation outline

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- Methods
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  - II. Acceptability of abortion- Pro-choice
    - a) Policing eligibility for abortion
    - b) *Undeserving* → conditional → can help → should help *deserving*
  - III. Stigma against abortion
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- Conclusions
- Recommendations for interventions
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# Introduction

- In an event that unprotected sex results in pregnancy; a woman has an option to
  - i. carry the pregnancy to term and keep the baby
  - ii. carry the pregnancy to term and give the baby up for adoption, if she is over 18 years
  - iii. choose termination of pregnancy (in SA and Moz)

(AFSA report, 2016; Nduna& Jewkes, 2012)

# Policing women's reproductive choices



- **No child**= childless
  - Suspicion of previous abortion
  - *women's gendered identities as mothers-childfree*
  - **HETERONORMATIVITY MATRIX**
- **Teenage pregnancy**
  - *modern women not willing to wait to have children*
  - **DEVELOPMENT AGENDAS**: health, educating, economic risks
- **Child(ren) before marriage**
  - *Consider the burden when getting married*
  - **THE STABLE UNION FRAMEWORK**
- **Many children**
  - *lack of wisdom, does not learn from her 'mistakes'*
  - **POPULATION AND DEVELOPMENT THEORIES**

# Abortion globally

- An estimated 19 million women globally have an unsafe abortion each year
  - resulting in 68,000 deaths, largely among the poorest and most vulnerable women, especially young women
- Many more suffer injury and complications and an estimated 5 million women per year are hospitalized for complications of unsafe abortion

- (The Medical Abortion Consortium, 2010)



TABLE 1: NUMBERS AND RATES

## Regional and subregional estimates of induced abortion, Africa, 1990–1994 and 2010–2014

Region and subregion	No. of abortions (millions)		Abortion rate <sup>†</sup>		% of pregnancies ending in abortion
	1990–1994	2010–2014	1990–1994	2010–2014	2010–2014
<b>Africa</b>	<b>4.6</b>	<b>8.3*</b>	<b>33</b>	<b>34</b>	<b>15</b>
Eastern Africa	1.4	2.7*	32	34	14
Middle Africa	0.5	1.0*	32	35	13
Northern Africa	1.3	1.9	40	38	23
Southern Africa	0.3 → 0.5		32 → 35		24
Western Africa	1.1	2.2*	28	31	12

\*Difference between 2010–2014 and 1990–1994 is statistically significant. †Abortions per 1,000 women aged 15–44.

SOURCE: Sedgh G et al., Abortion incidence between 1990 and 2014: global, regional, and subregional levels and trends, *The Lancet*, 2016, [http://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(16\)30380-4/abstract](http://www.thelancet.com/journals/lancet/article/PIIS0140-6736(16)30380-4/abstract).



TABLE 2: LEGALITY OF ABORTION, 2016

## Countries in Africa can be classified into six categories, according to the reasons for which abortion is legally permitted.

Reason	Countries
Prohibited altogether, or no explicit legal exception to save the life of a woman	Angola, Central African Republic, Congo (Brazzaville), Democratic Republic of the Congo, Egypt, Gabon, Guinea-Bissau, Madagascar, Mauritania, São Tomé and Príncipe, Senegal
To save the life of a woman	Côte d'Ivoire, Libya (e), Malawi, Mali (a,b), Nigeria, South Sudan, Sudan (a), Tanzania, Uganda
To preserve physical health (and to save a woman's life)*	Benin (a,b,c), Burkina Faso (a,b,c), Burundi, Cameroon (a), Chad (c), Comoros, Djibouti, Equatorial Guinea (e,f), Eritrea (a,b), Ethiopia (a,b,c,d), Guinea (a,b,c), Kenya, Lesotho (a,b,c), Morocco (f), Niger (c), Rwanda (a,b,d), Togo (a,b,c), Zimbabwe (a,b,c)
To preserve mental health (and all of the above reasons)	Algeria, Botswana (a,b,c), The Gambia, Ghana (a,b,c,d), Liberia (a,b,c), Mauritius (a,b,c,e), Namibia (a,b,c), Seychelles (a,b,c,d), Sierra Leone, Swaziland (a,b,c)
Socioeconomic reasons (and all of the above reasons)	Zambia (c)
Without restriction as to reason	Cape Verde, Mozambique, South Africa, Tunisia

\*Includes countries with laws that refer simply to "health" or "therapeutic" indications, which may be interpreted more broadly than physical health. NOTES: Some countries also allow abortion in cases of (a) rape, (b) incest, (c) fetal impairment or (d) other grounds. Some restrict abortion by requiring (e) parental or (f) spousal authorization. Countries that allow abortion on socioeconomic grounds or without restriction as to reason have gestational age limits (generally the first trimester); abortions may be permissible after the specified gestational age, but only on prescribed grounds. SOURCE: Center for Reproductive Rights (CRR), *The World's Abortion Laws 2016*, New York: CRR, 2016.



# The 1996 Choice on Termination of Pregnancy Act

- allows for the provision of abortion upon request up to 12 weeks of gestation- to be performed by a trained midwife
  - **only her consent** is required for the termination of pregnancy;
- **2(1)(b) of the Act**, pregnancy **may be terminated from the 13th up to and including the 20th week of the gestation period;**
- TOP is met with challenges as it is a delicate sensitive issue that is confronted by political, religious and social implications (Hodes, 2016, Sibuyi, 2004)

# cTOP in South Africa

- Prior to the implementation of the CoTP law, approximately 425 women died annually as a result of illegal abortion-related complications (Dickson-Tetteh and Res, 1999; Braam & Hessini, 2004 )
  - with poor and marginalised black women affected the most (Orner et al., 2011)
  - Apart from women who die as a result of unsafe abortion complications, others are left with debilitating conditions such as infertility (Brookman-Amissah, 2012; Gabriel, 2008)
- Death and ill-health complications could potentially be avoided if women have access to safe abortions
  - Despite freely available abortion services in selected hospitals, South Africa continues to battle with backstreet abortions affecting millions of, especially, young women
    - (Jewkes et al., 2005; Hodes, 2016)

# Study aim and objectives

- To explore the communities views on abortion within the framework of SRHR
  - To rehash the reasons women seek abortion
  - To provide further analysis of the prolife-prochoice debate
  - To explore the influences behind the discourse around choice of termination of pregnancy
  - To make recommendations for community-based interventions for aligning SRHR with cultural and religious systems

# Methods

- ▶ Qualitative research
- ▶ Seven research sites: 5 districts in KZN, Gert Sibande district in Mpumalanga & Flagstaff in the Eastern Cape
- ▶ Use of local & trained fieldworkers
- ▶ Critical Thematic Analysis
- ▶ Ethics approval obtained from WITS University

# Participants



KII

- **KIIS WITH DUTY BEARERS:**
  - Nurses
  - Education officials
  - Justice services cluster officials
- **Community leaders:**
  - Induna (Chief)
  - Pastors
  - Youth leaders



FGD

- **SAME SEX-AGE PEER FDGS**
  - Older Men
  - Older Women
  - Younger Men
  - Younger women

# Overview of findings

I. Reasons for ToP

II. Acceptability of abortion- Pro-choice

a) Policing eligibility for abortion

b) *Undeserving* → conditional → can help →  
should help *deserving*

III. Stigma against abortion

# Abortion



- *Scelo: whoever came up with this abortion idea really thought it carefully. The fact that it was legalized was a very wise idea because it was done before but it was illegal...*
- *“...I don’t blame the legalization of abortion...It’s safe with no high risk in comparison as before. (male, Underberg)*
- The Induna in Estcourt suggested that *“...We have not engaged the community on this matter but; we need to and inform them about abortion as this can save the life of other people. There are instances whereby some babies are unplanned and this can lead to animosity within the family...So when the pregnancy amounts to the discomfort of the family then abortion can be done...” (KII, Estcourt )*
- Some participants believed that *“...abortion does not sound well and I do not think that is something that should be celebrated to a point where law is promulgated and encouraged...” (KII, Eshowe)*



# 1.1 Parents are central to the decision to have an abortion



- *‘strict parents...it is because a person is scared of parents...she does not know what they will say about the trouble that she is in so she cannot carry that child...’(Mpophomeni, Pietermaritzburg, females, young adult)*
- *THEMBI: sometimes we have an abortion because of the parents...you find that maybe you are still at school you haven’t finished yet and then you fall pregnant...maybe your parents had their hopes on you...and now you have to drop out of school but you still like to carry on with school and they throw you out... so then you resort to abortion(FGD, Pietermaritzburg)*
- *‘poor family background’ (Sbahle, FGD Umsinga, Greytown, Younger women)*
- *...sometimes our parents have a problem about what will the neighbors think whereas the child was undergoing umhlolo ((virginity test))...what will they say now...so now the option is that a child has an*

# 1.2 the genitor is central to the decision to have an abortion



- ANDILE said that abortion “...happens if a person **cannot identify the child’s father...**
- ‘she didn’t know the biological father of the baby’ ‘relationships **break up**’ “the biological father of the child left her’ (Buhle & Sbahle, FGD Umsinga, Greytown Younger women)
- ...some people only get to know about abortion a minute their child is **denied** by the father... (Makhotha: FGD, Underberg)
- ...I think it is because when she told her partner he may have **ran away**...so for a girl to have an abortion it is because the boy distanced himself (. ) (Zandi, Mpophomeni, Pietermaritzburg, females, young adult)

## • Men’s input on women’s decisions

- and sometimes you tell the father of the child, and he says **he doesn’t want a child** and that if you carry on with that child, then it’s the end of your relationship, and then you end up aborting to make your love last...(Mbali, FGD, Pietermaritzburg)
- “....Others have abortion because of someone who **forced her** to, in most cases it’s their baby daddies. Others decide for themselves. (Male, FGD, Underberg)
- **MIGUEL:** Of course you have a say you the father of the baby, **if you don’t want the baby tell the woman or girlfriend that you don’t want the baby, and she must have an abortion finish...**Not command her you tell her, if she doesn’t listen she’ll see for herself!!



# 1.3 Pro choice: sympathy

- More reasons were offered for the pursuit of abortions by youth here. For instance,
  - *... Some get pregnant and realise late that they DON'T have enough **resources** to take care of the baby...So there you **have a right** to do abortion* (Makhotha, FGD, Underberg)
  - *‘they DO NOT have the money to support their babies’* (Buhle, FGD Umsinga, Greytown, Younger women)
    - *Another person thinks the child will set them back; life goes on so they cannot sit and care for a child whilst they want to live the life, so they cannot have a child* (Mpophomeni, Pietermaritzburg, females, young adult)
  - *“...abortion is happening and happens for different reasons. Some do abortion because of their health that doesn't allow them to carry the baby to term...(Male, FGD, Underberg)*

## 2.1 (un)Deserving abortions

- Pregnancies as a result of a one night stand should not be terminated
  - **MIGUEL:** *Why wasn't the woman preventing?* (Ermelo, Gert Sibande District)
  - **WOMAN 2:** *Accept and raise your child, you look for a job and take care of your child, he will come back later when he sees that this child looks like him, take care of yourself, look good its not because you had a one night stand life is over even if he denies...* (Gert Sibande District)
- **Demo:** *some people do abortion even when they are married. That person doesn't have **A REASON** to abort* (FGD, Underberg)
- *'raped' 'bad luck'* (Zikhona, FGD, Younger women, Umsinga, Greytown)

## 2.2 'conditional' Deserve abortion

- who should have an abortion and when?
- Contraceptive use failure – no agency
  - *“if you had this injection that lasts for three years, because they say you cannot fall pregnant if you have it on...so when you go to the clinic and find out that you are pregnant but you still on this injection, so then you make a decision of having an abortion...because you didn't plan on that...”* (ZANDI)

# Shift from the foetus to the woman as a victim that needs help



- “...maybe in cases where a person has been raped...” these are sympathetic cases and on whose grounds a woman can access her rights (FGD, Eshowe)
- **Male** ...*Only those raped can do it and we accept. Otherwise I don't see why people could engage on an unprotected sex and don't expect pregnancy as a result.* (FGD, Underberg)
- **WOMAN 5:** ...*why didn't they protect themselves when having sex or use contraceptives, abortion is wrong, it is right for rape victims...*(Gert Sibande District)
  - **WOMAN 5:** *I am saying when you are raped you can get an abortion because you might not even know the father of the child* (FGD, Gert Sibande District)
  - **Mfeniyabhoka:** “*Because **she is raped**, she is innocent, because she has been forced, so she is not guilty because she has been forced, a forced person is innocent. The perpetrator is guilty.*” (Eshowe, older men, FGD)
  - **Mr S.F.:** “*firstly maybe the victim is also a minor and doctors say the victim is too young and cannot keep the baby. My point here is that the child is raped, she never gave her consent...since she was raped ...My opinion is, this young girl **must be helped**, you may call it killing but she is raped and she never agreed to it. (.)” (FGD, older men, Eshowe)*



## 2.3 Pro-help: unconsented sex



- Even rape victims were not excused for having abortions- other participants argued that a rapist might acknowledge pregnancy
  - **WOMAN 6:** *Yes some come and take responsibility...a child is not a sin, okay you were raped but a child is not a sin*...(FGD, Gert Sibande District)
  - **WOMAN 2:** *Some as time goes on, when they see that you are pregnant, they come back and apologise* (FGD, Gert Sibande District)
  - Auto-correction
  - The child might look like him



## 2.4 Anti choice: should have an abortion?

There were instances where a woman was considered to be deserving of the right to abortion:

- **WOMAN 3:** *am going to talk according to my beliefs I don't think abortion is right, I think it should be banished in South Africa but for young children I think it should be compulsory because when you are a 14 your future has been destroyed, there is no way that you will be able to go back to school but when you are 21 you can make means, you finished school ...you can go get a job...but for children **they must do** it because it is a mistake and you are not ready (Gert Sibande District)*
- “...maybe the child **will be disabled...**” these are sympathetic cases and on whose grounds a woman can access her rights (FGD, Eshowe)
- **WOMAN 5:** *...abortion is wrong, it is right for rape victims, I think it should be compulsory for that...(Gert Sibande District)*



# Discussion

- There are enough reasons for women to want to have an abortion
  - We cannot wish abortion away
- Parent-child communication was described as important so that young people don't feel the need to get abortions behind their parents backs because of fears of being rejected by them
  - parents may force their children to keep unwanted pregnancies, which still goes against their rights
  - Practices such as *umhlolo/inkciyo* may drive young women to have backstreet abortions due to embarrassment and fear of being shamed
- This discourse of deserving vs. innocent victims is not new and continues to demonstrate that women's sexuality is controlled and when women (mis)behave [by having consented out-of-wedlock sex] they shall be punished by being made to face the (un)desirable consequences of their stray behaviour



# Discussion

- Culpability influences views on abortion
  - Careless woman → responsible woman failed by method → innocent woman with no control over her circumstances → desperate woman
- **Contraceptive Method failure** takes away the responsibility from the 'doer' of abortion to a 'circumstance'
- **Rape** takes away the responsibility from the 'doer' to the perpetrator of rape and the 'circumstance' of rape
- The '*best interest*' reasons morally cleanses the sin in the eyes of the community judges

# Conclusion

- Rights, as enshrined in the Constitution are deployed for exceptional cases, local duty bearers and communities act as gate keepers for access to health rights
  - They decide who and under what circumstances the health rights will be enjoyed
- work is needed to educate the community about
  - Rights are rights and not privileges
  - Universality of access to Sexual Reproductive health Rights
  - No need to community police access to rights
    - Intervention as prevention on provision of cToP

# Implications for regional work

- Need for research to be conducted
  - Collect data on backstreet abortions
  - Collect data on medical abortion upon request
  - To understand the link between unacknowledged/denied paternity and abortion choices
- The tension between the pro-help/sympathetic dispensation of the right to cToP and RHR
  - Could increase access for women
    - But only a subset of women-it is subjective
  - It does not offer a major shift from the status quo

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