

Forum: World Health Organization (WHO)

Issue: Measures to address the legality and safety of abortions

Written by: Clara Crystal and Felipe Da Paixão

Chairs: Clara Crystal and Felipe Da Paixão



"Abortion as a Human Right" Harvard International Review, February 7th, 2022

Guiding Questions as you read!

- What are the further implications of **NOT** having accessible, safe and legal abortion services in your country?
- What happens when more powerful countries deny the right to abortions? How does that affect your country's stance?
 - (Ex: Roe v. Wade being overturned in the U.S)
- When discussing abortion access, how do you debate the **religious and moral beliefs between science**?

Introduction

Key Terms

Abortion
Stigma
Marginalized
Healthcare
system

Abortion is a medical procedure that ends a pregnancy. It is an imperative healthcare need for millions of women, girls, and others who can become pregnant. Everyone has the right to accessible, high-quality abortion care, and no one should be criminalized for seeking abortion services. Abortion has been practiced since ancient times, but its legality and safety have constantly been threatened by powers that would decrease women's fundamental rights. While the need for abortion is constant and common, access to safe and legal abortion services is far from certain for those who may need it.

One of the most hotly contested global topics is access to abortion. The debate is clouded by misinformation about the ramifications of restricting access to this basic healthcare service. Preventing women and girls from ensuring an abortion does not mean they stop needing one. That is why attempts to restrict or ban abortions do nothing to lower the number of abortions; it only limits people to seek unsafe abortions. They compel women to risk their lives and health by seeking unsafe abortion care. However, the question of abortion is also often **centered around the issue of when life begins**, and adjacent religious and moral questions.

Restrictive abortion laws and policies **worsen social inequality** by disproportionately hurting low-income and **marginalized** communities. This further exacerbates their historical discrimination and places these women at greater risk of preventable maternal death and disability. The legal status of abortion also defines whether girls can complete their educations and whether women can participate in the workforce and public and political life. (Amy Roeder, Harvard)

Legalizing abortion does not aim to increase the number of procedures performed but to ensure access to safe, comprehensive, and affordable reproductive healthcare for women. The **lack of qualified medical providers**, the **stigma** following illegal abortion, **poor healthcare systems**, and **poverty** add to the health risks and social and financial costs of unsafe abortion.

Comprehension Question:

What are the **factors** that worsen the current debate on abortions' legality and safety?

Definition of Key Terms

Abortion: Abortion is a medical procedure that ends a pregnancy.

Stigma: In regards to abortion, stigma is a shared understanding that abortion is morally wrong and/or socially unacceptable. Stigma creates discomfort around abortion, which leads to misinformation and lack of knowledge about abortion.

Marginalized: Marginalized people are groups that experience discrimination and exclusion (*on a social, political and economic level*) because of unequal power relationships.

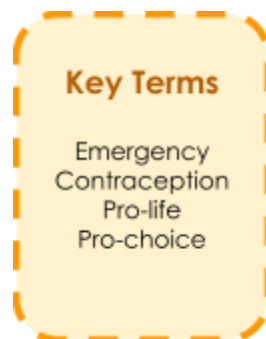
Healthcare system: Healthcare system consists of all organizations, people and actions whose goal is to promote, restore or maintain the health of a population.

Emergency Contraception: Emergency contraception are the methods of contraception that can be used to prevent pregnancy after sexual intercourse.

Misinformation: Misinformation is the false information that is spread, regardless of whether there is intent to mislead.

Quickening: Quickening is the moment during pregnancy when a pregnant person first notices the fetus moving in their uterus. In the past, the quickening was a significant turning point in a pregnancy. It had both philosophical and practical significance for women, and it marked the legal dividing line for when an abortion could be performed.

Current Situation



The right to access an abortion has long been threatened and that many people are struggling with the multifaceted injustices in poverty, health care and stability. Denial of access to abortion services **jeopardizes a person's physical and mental health** and takes away their autonomy and agency. It unjustly denies them the freedom to live with dignity and on equal terms with other human beings while exposing them to various forms of violence and oppression. Some of the worst physical and mental injuries, forms of violence, and deprivations of liberty faced by women and girls worldwide are linked to unintended

pregnancy and unsafe abortion. 25 million unsafe abortions take place annually, resulting in approximately 47,000 deaths every year, primarily in developing countries and among members of socioeconomically disadvantaged and marginalized populations. The current situation in regards to abortion is marked by multiple factors throughout the course of a woman and her families life. The political arena of abortions is also surrounded by multiple perspectives that also must be addressed when discussing the issue.

Poor healthcare systems and lack of qualified medical providers

Few doctors in obstetrics and gynaecology enter the specialty with any enthusiasm for performing abortions. Because of the stigma following abortions, there is a **domino effect on the medical field** of their knowledge of the procedure and aftercare. There are very few qualified medical providers that know how to properly carry out the procedures, but a larger number of of unlicensed people willing to perform abortions “behind closed doors”. Many of these are followed with injuries or even so, fatalities.

Stigma following abortions

Stigma occurs when people are looked down upon by others who, through a system of negative and unfair beliefs, pass judgment on that individual. Even though abortions have become very common, it remains highly stigmatized. The stigma can manifest through social, legal, religious, and cultural contexts. Stigma creates discomfort around abortion, which leads to misinformation and a lack of knowledge about abortion—these attitudes and beliefs surrounding abortion act as barriers to accessing safe services. Abortion stigma has long-term consequences on women's mental health, internalized by women who have had an abortion and women who have not. (UCSF)

Poverty and women of color

Abortion is increasingly concentrated among low-income women. Moreover, **income inequality affects the poorest and most vulnerable populations across generations**. Most abortion patients say they cannot afford a child or another child, and most say that having a baby would interfere with their work, school, or ability to

care for their other children. Access to affordable abortions is currently limited for many poor women. Abortion is a difficult choice. However, it should not be influenced by financial status.

Major Parties Involved and Their Views

The United States of America



On June 24, 2022, the **U.S Supreme Court overturned Roe v. Wade**, the landmark 1973 Supreme Court decision that affirmed the constitutional right to abortion. This decision has caused international chaos and uncertainty, with the abortion landscape becoming increasingly fragmented by each

state. Ever since this decision, there have been two leading mindsets when it comes to abortion. One is **pro-life**, which deems abortion murder and considers life starting at conception. The other is **pro-choice**, which focuses on the well-being of the mother and insists that the woman alone should decide if she wants to keep a baby. The U.S is a powerful country, both culturally and economically, that has been important in the shaping of abortion laws internationally. Many of the decisions they take on contested subjects, like abortion, can be echoed and reflected on other countries.

People's Republic of China

China has one of **highest abortion rates in the world**. Women's reproductive rights have historically been a polarizing issue in China, but abortions are viewed through a completely different cultural lens. They have been legal for more than half a century since 1953, making China one of the first developing countries in the world to make abortion legal and easily accessible. (*South China Morning Post*) Traditional Chinese values perceive that the right to life begins at childbirth. Hence, abortions to terminate unwanted pregnancies are hardly seen as "murder" or something to be guilty about. However, for all its widespread acceptance, abortion has been controversial in China.

With reports of women forced to undergo the procedure, as well as the practice of sex-selective abortions. Sex-selective abortion is the practice of terminating a pregnancy based upon the predicted sex of the infant. And more recently, unmarried young women have been refused an abortion for “non-medical” reasons.

The continued population crisis fight with birth rates showing no sign of reversing even after the one-child policy was relaxed in 2016, national policy has shifted towards encouraging births.

Poland

Poland has **one of Europe's most repressive abortion regulations**. In Poland, the procedure is only permitted if the mother's health is at risk, fetal abnormality, or the pregnancy results from rape or incest. Even then, women say it is extremely hard to find a doctor who will perform the procedure. Polish women, particularly those in difficult socio-economic situations, have to depend on the crucial help from civil society organizations with little resources.

On 22 October 2020, Poland's discredited Constitutional Tribunal ruled that abortion on the grounds of “*severe and irreversible fetal defect or incurable illness that threatens the fetus' life*” was unconstitutional. In response, women human rights defenders and civil society organizations advocate for the ruling to be overturned but face prosecution and violence threats.

Honduras

A high rate of sexual violence in Honduras contributes to a high rate of unwanted pregnancy, forcing women and girls to carry pregnancies against their will or seek clandestine and often unsafe abortions that put their health and lives at risk. Honduras is **one of the few countries that prohibits abortion in all cases**, including in cases of rape or incest, where the mother's health is at risk, and fetal abnormality. The government also bans **emergency contraception**, preventing pregnancy after unprotected sex or a contraceptive failure. Pressure from Honduran religious groups is widely seen as the dominant political force in maintaining such strict laws on abortion.

Sweden

Everyone has a legal right to abortion in Sweden! There is no age restriction for having an abortion, and it is always the pregnant woman's individual right to decide if they want to follow through with an abortion. The Swedish Abortion Act came into force in 1974, giving women the right to decide whether they wanted to end a pregnancy in the first eighteen weeks. Since then, abortion procedures have become more effective, safe, accepted, and accessible.

"All restrictions of abortion rights entail a risk of guilt and shaming women... For this reason, restricting women's right to free abortion can have incredibly serious consequences," said Kristina Ljungros, Secretary-General of the Swedish Association for Sexuality Education (RFSU)

Benin

Benin's parliament has voted to legalize abortion in most cases, becoming one of a small handful of African countries. Benin's new law will provide women with access to safe abortion in instances that they may not want, or be able, to continue with a pregnancy. The new law makes it legal to terminate a pregnancy if it would *"aggravate or cause a situation of material, educational, professional or moral distress incompatible with the interest of the woman or the unborn child."* Regardless of the country's conservative and Catholic nature, the law was passed by parliament to prevent a wave of clandestine abortions that have resulted in deaths. Researches and Benin people believe that the real reason women, especially teenagers, need abortions are often ignored. **Conversations around sex and sexual health are taboo** in Benin, which leaves many young people struggling to navigate their sexual and reproductive health.

The United Kingdom

The 1967 Abortion Act permitted doctors to provide an abortion if two clinicians choose that the pregnancy would hurt the pregnant person or their family's physical or mental health more than if the pregnancy were terminated. Otherwise, **abortion remains a crime in the UK**. Abortions in England, Wales, and Scotland are allowed until 24 weeks of pregnancy under strict and specific conditions. This legal framework is more restrictive than most European countries. Consequently, the **criminalization of abortion**

has a "chilling effect" on clinicians' willingness to be involved in abortion care. The criminalization of abortion reflects a broader culture of regulating and monitoring women's reproductive health.

The most worrisome part of the law is that terminations can be allowed, at any time, if there is "a substantial risk that if the child were born, it would suffer from such physical or mental abnormalities as to be seriously handicapped," **including Down syndrome.**



Heidi Carter protesting outside the Royal Courts of Justice

UN Involvement

International Conference on Population and Development (ICPD) Programme of Action



The Programme of Action of the International Conference on Population and Development (ICPD) in 1994 was the first major international agreement to make recommendations on unsafe abortion. It presented a positive step toward legitimising abortion as a part of basic reproductive health services.

The programme envisioned that **"every sexual interaction should be free of coercion and infection, every pregnancy should be intended, and every delivery and childbirth should be healthy"**. (National Academy Press) A valuable aspect of the ICPD is that it recognized that reproductive health and women's empowerment are intertwined, and that both are necessary. Most governments agreed to address the global health impact of unsafe abortion, but the problem of unsafe abortion continues. "The ICPD Programme of Action reflected a new consensus about response to population growth. It firmly established that the rights and dignity of individuals, rather

than numerical population targets, were the best way for individuals to realize their own fertility goals." (United Nations Population Fund)

Timeline of Events

Date	Description of Event	Effect
Early 19th Century	The phenomenon of the quickening	<p>For most of Western history, aborting an early pregnancy was <u>considered a private matter</u> controlled by women and was not a crime.</p> <p>At the turn of the nineteenth century most people in Western EU and the United States did not believe human life was present until a pregnant woman felt the first fetal movements, a phenomenon referred to as quickening.</p> <p>At this time, the pregnant woman had <u>significant power in defining pregnancy</u> and the law was based on her bodily experience.</p>
Late 19th Century	Emerging actors into the issue of abortions	<p>In the late nineteenth century, American and European doctors, social reformers, clergy members, and politicians made abortion into a social, and religious issue. Women's experiences of quickening were <u>discredited as unscientific</u>.</p> <p>Abortion had been culturally and politically redefined as the taking of a human life. The shift in attitudes toward pregnancy and abortion that had been championed by doctors and church officials.</p>
1965	Griswold v. Connecticut	The Supreme Court's ruling in Griswold v. Connecticut marked the beginning of an era of change for reproductive and sexual rights in the US. The Supreme Court ruled that <u>married women in every state had the right to</u>

		<u>access birth control</u> .
1973	Roe v. Wade	In a 7-2 decision, the Supreme Court granted women <u>the right to terminate pregnancies</u> under the 14th Amendment with Roe v. Wade.
1976	Hyde Amendment	<p>The Hyde Amendment does not allow federal funding for abortion, preventing people enrolled in Medicaid and other public programs from using their health insurance to cover abortion care.</p> <p>The Hyde Amendment <u>disproportionately affects people already facing systemic barriers to care</u>, particularly Black, Indigenous and other people of color.</p>
1994	International Conference on Population and Development in Cairo	The conference confronted the question of abortion for the first time in a international setting. The international debate has focused on the health consequences of unsafe abortions. However, the right to abortion has explicitly been said to depend on national authorities, which calls to question, <u>How much international aid can be given?</u> . (Ouattara and Storeng, 2014, p. 111)
1995	Fourth World Conference on Women in Beijing	The conference <u>placed emphasis on social discrimination</u> , where the women most affected by unsafe abortions tend to be young and poor. While the conferences promoted the recognition of sexual and reproductive rights as human rights, they continued to treat abortion mainly as a public health problem.
2000	FDA approved the drug mifepristone	The FDA approved mifepristone, the first pill available to end a pregnancy early in gestation. In the coming decades, the drug proved extremely safe and effective, and was used by

		millions. However, it also became the target of attacks and disinformation.
2020	COVID-19 Pandemic	The access to abortion care in many countries is already severely restricted, but with the recent global pandemic, access to safe abortion and contraception care was even more difficult.
2022	Roe v. Wade is overturned	On June 24, the Supreme Court overturned Roe v. Wade leaving abortion decisions up to states, and no longer a constitutional right.

When discussing the timeline of events...

When discussing and exploring the timeline of events in relation to the safety and legality of abortion, there are a few things we must keep in mind!

Abortion and contraception are not new. They are not products of modern technology or the “collapse” of the traditional family. Throughout time, women have chosen to limit their families conducive of their health, happiness, and economic stability. Whether abortion and contraception were legal often had nothing to do with a society's piety. Instead, the legal status of abortion was a reflection of society's view regarding sex and gender.

Sexual values surrounding abortion changed with time, and everyone on the political spectrum must recognize that. If an honest discussion about abortion and contraceptives is to take place, we must appreciate their progressive position in our history and make sure we are not moving backwards.

Past International Action

The Center for Reproductive Rights

The Center for Reproductive Rights is an organization of lawyers and advocates who make sure **reproductive rights are protected in law as fundamental human rights** for the well-being of every person (CPR). They have been able to win groundbreaking

cases before national courts, UN committees, and regional human rights bodies. They have also actively participated in every major U.S. Supreme Court abortion case since their founding.

September 28, Day of Action for Access to Safe and Legal Abortion

September 28 is a campaign that has its origin in Latin America and the Caribbean, where women's groups have been mobilizing around September 28 the last two decades to demand their governments to decriminalize abortion, to provide safe access to abortion services and to end stigma towards abortion. Their website records the actions of individuals, organizations and governments worldwide are taking to protect and fulfil women's right to accessible, safe and legal abortion. September 28 offers many resources on reproductive health rights advocacy as well as equips activists with hands-on materials towards taking action. With this campaign, National and world leaders have begun making statements in support of the event, and a growing number of media outlets report national and international events and write articles on the theme.

The Safe Abortion Action Fund

The Safe Abortion Action Fund is currently the only international fund focused only on the right to safe and legal abortion. It was established in 2006 in part to meet the pressing need for funding that arose upon the re-imposition of the "Global Gag Rule". SAAF provides funding and support to organizations in middle and low income countries to work



on abortion advocacy campaigns, research, cultural paradigm shifts, and the provision of safe abortion services. When the financial help for abortion campaigns is scarce, in particular for organisations that cannot easily access large international funding systems, they provide a medium that can effectively support and grow the capacity of these groups.

Possible Solutions

When trying to find possible solutions to the legality and safety of abortions, it is important to take a **comprehensive** and **holistic approach**, that covers cultural, religious, economic, political, and systemic barriers prevent many women from accessing abortion care even where it's legal!

Firstly, there are ways to safely reduce the number of abortions without removing its access:

- Addressing the need to **invest in comprehensive sex education**. Either by using the UN or creating an individual organization that advocates for policies and champion curriculums that recognize young people's rights to honest sexual health resources.
- **Improving access to contraception!** Similarly how we use sunscreen to protect ourselves from skin cancer, people use contraceptives to prevent pregnancy, and ultimately, prevent abortion. In public health, introducing **preventative measures instead of curative measures** is a key approach to tackling issues like abortions. However, while **LARC** options are effective, their expense poses a challenge to low-income women.
- **Reinforcing paid family leads** to countries that do not have it is crucial for their populations' reproductive healthcare. This allows parents to heal from childbirth, whilst offering monetary stability, and being able to develop nurturing relationships and environments for their children! Paid family leave is inextricably linked to economic opportunity. When parents are forced to abandon caring for their children or relatives for a paycheck, the whole family suffers.

Keep in mind that there is no way to completely eradicate this issue but we must look at the bigger picture, even the smallest act can have a positive impact. **Think about how abortions affect other parts of a woman's life**, and tackle those issues.

Sustainable Development Goal (SDG)

The Sustainable Development Goals (SDGs) lay out a new roadmap to improve the lives

of people throughout the world over the next 15 years. Sexual and reproductive health and reproductive rights issues are currently featured on the SDG agenda!

Goal 5: Achieve gender equality and empower all women and girls

Goal #5 calls on governments to achieve gender equality and empowerment of all girls, highlighting the importance of sexual and reproductive health. It is important to recognize that gender equality includes the **recognition of women's autonomy** and **capacity to make decisions about their health** through laws and policies. This relates to the issue abortion because governments have the responsibility to respect a woman's human right to make decisions regarding her reproductive life. A woman who decides to have an abortion must have access to the facilities and care that will enable her to terminate her pregnancy safely.

Goal 3. Ensure healthy lives and promote well-being for all at all ages

Goal #3 calls for achieving **universal access to sexual and reproductive healthcare**, reducing global maternal death rates, and ending the AIDS epidemic by 2030. Women and men have different health-care needs, but an equal right to live healthily. For many women and girls, however, gender discrimination systematically undermines their access to healthcare. In the context of abortion, this right to health can be interpreted to require governments to take appropriate measures to ensure that women are not exposed to the risks of unsafe abortion. It is important to remember that a person's health and well-being are affected not only by disease and treatment, but also by social and economic factors such as housing, poverty and education. Health targets can therefore also be found across the other SDGs.

Bibliography

Useful Links for Research

While carrying out research can be fun and rewarding, there are also other challenges that could surface. Some of you might not picture research as an interesting activity. Many people, who want to learn more about a topic and want a deeper understanding of it do not consider themselves "researchers." Even students who are determined to find out more information might not know where to start.

Here is a list of tips from your very own chairs to help you out in the process of learning about the issue, your country, and your countries stance.

In researching...

- Popular search engines are easy to use when you're looking for everyday information, but when conducting research in MUN, [use Google Advanced Search](#). (Click here to learn more about it)
- **Frame your topic:** Break down your topic into smaller issues. Choose the ones that matter most to your country or position. Match solutions to those issues.
- **You do not need to read it all!** Besides this Issue Bulletin, you should not need to read 30 page long documents. Instead, look for keywords using Command+F, or find specific headers that are interesting to you.
- **Write it all down on a document!** Keep all of your relevant information on a document, binder, notebook. It is vital that you keep the research you collect during the conference in order to make strong points in your speeches.
- **Talk to other people!** PANAMUN is all about having good conversations with others so, we encourage you to explore these topics alongside your family, friends, teachers, no matter how much they know about the issue! Feel free to always email your chairs, we are here to help you!

With your country...

- **Understand your country's basic information.**
 - Look out for your country's population, ethnic population, dominant ideologies, and religions that currently influence public opinion, as well as your country's stance on particular topics.
- **Understand its geography, economy and natural resources.**
 - You do not need to know exact numbers to be good at MUN, but **know their impact!** (Ex, *How does China's growing population change its opinion on abortions?*) You want to be able to know your country like it is YOU!
- **Immerse yourself in the history and past actions.**
 - Looking for the reasoning behind your country's history and values is

pivotal to understanding its viewpoints.

- **If your country has little information regarding the topic, look to see what its allies think about the issue!** Be critical and go outside of the box while researching.

I. Key Facts on Abortion!

- A. "Key Facts on Abortion." Amnesty International, 15 June 2022,
<https://www.amnesty.org/en/what-we-do/sexual-and-reproductive-rights/abortion-facts/>
- B. Cohen, Susan A. "Facts and Consequences: Legality, Incidence and Safety of Abortion Worldwide." Guttmacher Institute, 6 Dec. 2016,
<https://www.guttmacher.org/gpr/2009/11/facts-and-consequences-legality-incidence-and-safety-abortion-worldwide#:~:text=The%20United%20States%20legalized%20abortion,or%20pay%20for%20safe%20services>
- C. https://www.guttmacher.org/sites/default/files/factsheet/fb_induced_abortion.pdf

II. Getting to know other countries stance on Abortion!

- A. Check out this super cool map!
"Abortion Law: Global Comparisons." Council on Foreign Relations,
Council on Foreign Relations,
<https://www.cfr.org/article/abortion-law-global-comparisons>
- B. "The World's Abortion Laws." Center for Reproductive Rights, 19 May 2022,
<https://reproductiverights.org/maps/worlds-abortion-laws/>

Kissling, Frances. "Abortion: The Link between Legality and Safety." Reproductive Health Matters, vol. 1, no. 2, 1993, pp. 65–67. JSTOR, <http://www.jstor.org/stable/3775010>.

Hovey, G. "Abortion: a history." Planned parenthood review vol. 5,2 (1985): 18-21.
<https://pubmed.ncbi.nlm.nih.gov/12340403/>. Accessed 8 Jul. 2022.

Deutsche, Welle. "Benin Liberalizes Abortion Law: DW: 10.11.2021." DW.COM,
<https://www.dw.com/en/benin-liberalizes-abortion-law/a-59778601>.

"Abortion in Sweden." 1177,
<https://www.1177.se/en/other-languages/other-languages/graviditet---andra-spr>

[ak/abort--andra-sprak/](#).

"Abortion Is a Crime in the UK." *Novara Media*, 10 May 2022,

<https://novaramedia.com/2022/05/10/abortion-is-a-crime-in-the-uk/>.

Arias, Tatiana. "How Lawmakers Made It Nearly Impossible to Legalize Abortion in Honduras." *CNN*, Cable News Network, 31 Jan. 2021,

<https://edition.cnn.com/2021/01/31/americas/honduras-abortion-ban-ratified-intl/index.html>.

"'Down's Syndrome Abortion Law Doesn't Respect My Life'." *BBC News*, BBC, 6 July 2021,

<https://www.bbc.com/news/uk-england-57734572>.

"From Commonplace to Controversial: The Different Histories of Abortion in Europe and the United States." *Origins*,

https://origins.osu.edu/article/commonplace-controversial-different-histories-abortion-europe-and-united-states?language_content_entity=en.

Galli, Beatriz. "Challenges and Opportunities for Access to Legal and Safe Abortion in Latin America Based on the Scenarios in Brazil, Argentina, and Uruguay." *Cadernos De Saúde Pública*, Escola Nacional De Saúde Pública Sergio Arouca, Fundação Oswaldo Cruz, 6 Apr. 2020,

<https://www.scielo.br/j/csp/a/N9MnGX8cfgmzb6NVNm4BWyR/?lang=en>.

Hananel Director, Sam, et al. "Scarlet Letters: Getting the History of Abortion and Contraception Right." *Center for American Progress*, 27 June 2022,

<https://www.americanprogress.org/article/scarlet-letters-getting-the-history-of-abortion-and-contraception-right/>.

"Honduras: UN Experts Deplore Further Attacks against Right to Safe Abortion." *OHCHR*, 19 Jan. 2021,

<https://www.ohchr.org/en/press-releases/2021/01/honduras-un-experts-deplore-further-attacks-against-right-safe-abortion>.

Kiernan, Samantha. "Legal, Safe, and Affordable: Think Global Health." *Council on Foreign Relations*,

<https://www.thinkglobalhealth.org/article/legal-safe-and-affordable>.

"Life or Death Choices for Women Living under Honduras' Abortion Ban." *Human Rights Watch*, 28 Oct. 2020,

<https://www.hrw.org/news/2019/06/06/life-or-death-choices-women-living-under-honduras-abortion-ban>.

"Making Abortion Safe, Legal, and Accessible: A Tool Kit for Action." *Health and Education Resource Centre Main Navigation*, UNESCO,

<https://healtheducationresources.unesco.org/library/documents/making-abortion-safe-legal-and-accessible-tool-kit-action>.

Neumeyer, Joy. "Poland's Abortion Ban Protests Changed the Country Forever." *Foreign Policy*, 8 Nov. 2021,

<https://foreignpolicy.com/2021/11/08/poland-abortion-ban-women-strike-catholic-religion-progressive-politics/>.

"Polish Women Fight Back against Restrictive Abortion Laws." *Time*, Time,

<https://time.com/poland-abortion-laws-protest/>.

Ramatou Ouedraogo Associate Research Scientist. "Benin's Groundbreaking New Abortion Law Will Save the Lives of Many Women." *The Conversation*, 20 Apr. 2022,

<https://theconversation.com/benins-groundbreaking-new-abortion-law-will-save-the-lives-of-many-women-170901>.

The Safety of Legal Abortion and the Hazards of Illegal Abortion. NARAL Pro Choice America, 1 Jan. 2017,

<https://www.prochoiceamerica.org/wp-content/uploads/2016/12/2.-The-Safety-of-Legal-Abortion-and-the-Hazards-of-Illegal-Abortion.pdf>.

"Poland: Regression on Abortion Access Harms Women." *Amnesty International*, 17 Feb. 2022,

<https://www.amnesty.org/en/latest/news/2022/01/poland-regression-on-abortion-access-harms-women/>.

Sternudd Katarina Sternudd 13-01-2022 Content owner: Katarina. "Safe Abortion Saves Women's Lives." RSS, <https://ki.se/en/research/safe-abortion-saves-womens-lives>.

"Timeline of Important Reproductive Freedom Cases Decided by the Supreme Court." *American Civil Liberties Union*, 2 Feb. 2009, <https://www.aclu.org/other/timeline-important-reproductive-freedom-cases-decided-supreme-court>.

"Center for Reproductive Rights | About Us." *Center for Reproductive Rights*, 1 Sept. 2021, <https://reproductiverights.org/about-us/>.

"China's Controversial History of Abortion Needs Different Cultural Lens." *South China Morning Post*, 24 June 2022, <https://www.scmp.com/news/china/politics/article/3182106/abortion-legal-china-how-common-it-and-why-it-controversial>.

"Explainer: What Is the ICPD and Why Does It Matter?" *United Nations Population Fund*, <https://www.unfpa.org/news/explainer-what-icpd-and-why-does-it-matter>.

"Global Progress in Abortion Advocacy and Policy: An Assessment of the Decade since ICPD." *Taylor & Francis*, <https://www.tandfonline.com/doi/full/10.1016/S0968-8080%2805%2925168-6>.

"Herstory." *Herstory – September 28 Campaign*, <http://www.september28.org/about-us/herstory/>.

"The Hyde Amendment: A Discriminatory Ban on Insurance Coverage of Abortion." *Guttmacher Institute*, 18 May 2021, <https://www.guttmacher.org/fact-sheet/hyde-amendment>.

"The Negative Health Implications of Restricting Abortion Access." *News*, 13 Dec. 2021, <https://www.hsph.harvard.edu/news/features/abortion-restrictions-health-implications/>.

"Perceived Abortion Stigma and Psychological Well-Being over Five Years after Receiving or Being Denied an Abortion." *ANSIRH*,

<https://www.ansirh.org/research/research/perceived-abortion-stigma-and-psychological-well-being-over-five-years-after>.