Abortion: An Innocent Choice?

Hello my name is Katie Aitken. I am in my fifth year at school and this is my first time chairing at an MUN Conference. I’m glad to have this opportunity because one of the most important things at MUN is to speak and make sure that your country’s points of views are valued and shared whether it’s through speeches, amendments or points of information. Don’t worry if it’s your first time here. It is for many people. As a school, we hope to provide a supportive environment where everyone feels comfortable representing their countries. The debate becomes a lot more interesting if everyone gets involved so just remember that the most important thing is to be supportive of others and to have fun.

Abortion is the artificial ending of the life of a foetus in the womb (uterus). A natural abortion is called a miscarriage. This is a very controversial and emotionally-charged issue. This is because many people believe that the rights of women are in direct conflict with the rights of the unborn child. Anti-abortion groups, who often describe themselves as ‘pro-life’, argue that a foetus is a human being from the point of conception with a right to life. Therefore, any intervention which destroys that foetus is murder. On the other hand, ‘Pro-choice’ groups emphasise that a woman should have control over her own body and should be able to choose whether to continue with an unwanted pregnancy.

Different countries take different stances on abortion. This can depend on the importance of religion within a country. For example, the Roman Catholic Church views abortion as a sin. Attitudes towards the role of women within a country can also influence how abortion is viewed as well as how good contraceptive services are in a country. In some countries, abortion is viewed as another method of birth control. From 1978 until last year, China operated a ‘one child policy’. It has the highest abortion rate in the world. Russia has the second highest.

‘Medical’ abortions, using pills can administered up until the tenth week of a pregnancy. (A ‘full term’ pregnancy is around 40 weeks.) ‘Surgical’ abortions involving suction, extraction and induced labour can be administered until later on in the pregnancy. Where countries’ abortions laws stipulate an upper time limit for abortions, this is often set at the point where doctors consider that a foetus would not be viable to live independently if it was born. However, recent improvements in the care and survival of very premature babies has meant that these upper time limits have been brought into question.
Examples of Legislation:

**UK**
Abortion has been legal in England, Scotland and Wales since 1967 when The Abortion Act was passed. A new upper time limit of 24 weeks was introduced in 1990 under The Human Fertilisation and Embryology Act.

An abortion may be carried out if one of the following conditions applies:
- the life or physical health of the mother is at risk
- the mental health of the mother is at risk
- the mother’s existing family will suffer
- there is a reasonable chance that the child will be born seriously disabled

Where the mental health of the mother is at risk, or her family will suffer if the pregnancy continues, the latest termination date is 24 weeks. There is no upper limit if the life or physical health of the mother is at risk, or if there is a reasonable chance of a seriously disabled child being born.

**USA**
The current judicial interpretation of the U.S. Constitution regarding abortion in the United States, following the Supreme Court of the United States' 1973 landmark decision, 'Roe v. Wade', and subsequent companion decisions, is that abortion is legal but may be restricted by the states to varying degrees.

**Ireland**
Abortion is legal in Ireland only when a pregnant woman’s life is at risk. This includes the risk of suicide. Access to abortion in such cases is governed by the Protection of Life During Pregnancy Act 2013.

**Spain**
Mariano Rajoy, the Prime Minister of Spain has dropped plans to limit abortion to cases of rape or where the mother's health is at serious risk. Abortion is legal in Spain in the first 14 weeks of a woman’s pregnancy. It was first legalised in 1985 in cases of rape or physical damage to the mother or child. Spain is a predominantly Roman Catholic country.

**Poland**
Abortion is legal until the twelfth week of pregnancy if the woman's health or life is endangered, if the pregnancy results from a crime, or if the foetus is irreparably damaged. In October 2016, thousands demonstrated against proposed legislation that would have made abortion illegal in all cases, except where there was a direct danger to the mother's life. It would also have made abortion punishable with a five-year prison term. The Polish government withdrew the proposed legislation.

**El Salvador**
Since 1998, abortion has been illegal in El Salvador, even when pregnancy is the result of rape or incest, or puts the woman’s life at risk.
The U.N.’s stance on abortion

The UN tries to maintain its neutral status in relation to abortion, leaving it up to individual countries’ governments to decide on their own laws about the subject. However, the U.N is concerned with the human rights of women and has intervened when the lives of the women are negatively affected by not being able to have an abortion. An example of this is the case of Amanda Mellet in Ireland in 2011. Mellet was told by her doctors that the foetus she was carrying had congenital defects that meant it would die in the womb or shortly after birth. Under Irish law, she could not have an abortion and instead she travelled to the UK to have the procedure. Mellet took her case to the U.N. Committee on Human Rights which ruled that ‘Ireland’s prohibition and criminalisation of abortion services subjected Amanda Mellet to severe emotional and mental pain and suffering’ as she had had to ‘travel to the UK while carrying a dying foetus, at her own personal expense, and was separated from the support of her family, and to return while not fully recovered’. This violated her right to freedom from cruel, inhuman and degrading treatment.

As Ireland has signed the international covenant on civil and political rights (ICCPR), which is part of the international bill of human rights, it is obliged to prevent similar violations from occurring in the future. The UN’s ruling went on to state that Ireland ‘should amend its law on voluntary termination of pregnancy, including if necessary its constitution, to ensure compliance with the covenant, including effective, timely and accessible procedures for pregnancy termination in Ireland’.

This judgement could trigger changes in other countries which have similar laws on abortion to Ireland.

Of all the UN Millennium Development Goals, Goal 5 most closely relates to this subject.

The specific aims of Goal 5 were to

a) ‘achieve universal access to reproductive healthcare.’

b) ‘reduce maternal mortality by three-quarters’

The phrases ‘reproductive healthcare’ and ‘reproductive rights’ have become controversial. Most member countries would agree that they refer to sex education, information about contraception, pregnancy, birth and postnatal care of mothers and babies. Some countries would include abortion. Others would not.

By 2015, ‘universal access to reproductive healthcare’ had not been achieved with the UN calculating that at least 220 million women globally still had an unmet need for contraception.

In May 2016, a report published in ‘The Lancet’ showed that the abortion rate has declined significantly in more developed countries between 1990 and 2014, but not in developing countries. It was estimated that, worldwide, during the period 2010-2014, there were 35 abortions per 1000 women aged 15-44. This translates to over 56 million abortions per year.
In developed regions (Europe, North America, Australia, New Zealand, Japan) the abortion rate has declined by 41% since 1990-94 to a current rate of 27 abortions per 1000 women. However, in developing regions. The abortion rate has remained virtually unchanged for the past 25 years at a rate of 37 abortions per 1000 women. Nearly 88% of all abortions take place in developing regions. The continuing high rates of abortion, particularly in developing regions, indicates the need to improve and expand access to effective contraceptive services. Would investing in modern contraceptive methods be far less costly to women and society than the costs of managing the outcomes of unintended pregnancies?

WHO is also very concerned about women, particularly in developing countries resorting to ‘unsafe abortions’ performed by unskilled individuals, with hazardous equipment or in unsanitary facilities. These women put themselves at risk of severe complications and possibly death.

- 21.6 million women experience an unsafe abortion worldwide each year; 18.5 million of these occur in developing countries.
- 47 000 women die from complications of unsafe abortion each year.
- Deaths due to unsafe abortion remain close to 13% of all maternal deaths.

Some questions that we will need to consider.

- Should abortion be considered part of ‘reproductive health care’ or not?
- What are the effects on women and their families of not having access to reliable contraception?
- Is there are rise in the abortion rate in countries where reliable contraception is not readily available?
- Should the UN encourage developing countries to adopt safe abortion services, even to the extent of putting pressure on governments to change the law?

Some developing countries would argue that they face pressure to change their anti-abortion laws in return for aid from rich donor countries in order to improve development. This issue is perhaps one of the most divisive issues to be discussed. Some people, often from a particular faith background, firmly believe that human life begins at conception, and that by allowing abortion, most developed societies permit one human to intentionally harm or take the life of another human without punishment. Abortion punishes the unborn child who committed no crime; instead, it is the perpetrator who should be punished. In other countries, abortion has been used by the state for population control. ‘Sex selective’
abortions, although illegal in most countries must be taking place where the disparity between live births of baby boys and girls is so extreme. The rights of and attitudes towards women also play a very significant part in this issue.

If you would like to be considered for an award it is vital that you submit a Position Paper. A Position Paper is roughly 50 words long (about a short paragraph) indicating your country’s perspective on the topic. This is useful to do even if you are not aiming for an award and you never know!! It is important there is a Position Paper for each of the four Health topics. It is due by 24 February 2017. When you have finished your Position Paper you should email it to kaitken12@gwc.org.uk

To find out more about this issue:
http://www.soc.ucsb.edu/sexinfo/article/arguments-and-against-abortion
http://www.bbc.co.uk/news/world-europe-293225
www.bbc.co.uk/ethnics/abortion/mother/against_1.shtml
http://www.bbc.co.uk/news/world-europe-2932256
http://www.theguardian.com/world/2016/Jun/09/Ireland-abortion-laws-

For issues of current international debate:
Http://www.newint.org/
Http://www.idebate.org/
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violated-human-rights-says-un