

## **The Global Health Conference, University of Oslo, 10-11 April 2018**

Abortion and post abortion care: Politics, religion, public health, health care and legal systems

**Background:** The maternal death rate is still high globally, and unsafe abortion is a major cause in countries with a restrictive abortion law. There are ongoing debates to legalize abortion in some countries, and several NGOs are working with this topic. We want to share experiences from different countries, and stimulate to a debate about: what happens when abortion is legalized, how do international actors affect the ongoing discussions on abortion law, and how can we deal with the ongoing burden of unsafe abortion as it continues to happen.

**Moderators:** Berit Austveg, MD, Independent Consultant, Oslo, Norway  
Elisabeth Darj, Norwegian University of Science and Technology, Trondheim, Norway

### **Introduction: An overview on abortion and post abortion care (10 minutes)**

Specially invited speaker Berit Austveg

### **The use of manual vacuum aspiration and post abortion care in Malawi (15 minutes)**

Maria Lisa Odland, PhD-student, Norwegian University of Science and Technology, Trondheim, Norway

In Malawi, the maternal mortality rate is still high, and unsafe abortion is a major cause. Incomplete abortion is a common complication that should be treated as safe and cheap as possible to avoid further injury. This presentation will give an overview of the treatment of incomplete abortions in selected hospitals in Malawi.

### **Political Priority for Abortion Law Reform in Malawi: Transnational and National Influences (15 minutes)**

Maren Kloster, University of Oslo, Oslo, Norway

In July 2015, Malawi's Special Law Commission on the Review of the Law on Abortion released a draft Termination of Pregnancy bill. If approved by Parliament, it will liberalize Malawi's strict abortion law, expanding the grounds for safe abortion and representing an important step toward safer abortion in Malawi. This study examines the role of national and international pro-choice actors in changing Malawi's strict abortion law. Although these efforts have generated substantial support for abortion law reform, an ongoing backlash from the international anti-choice movement has gained momentum by appealing to religious and nationalist values.

### **Misoprostol as a game changer: Changing access and meaning in the abortion dilemma in Ouagadougou. (15 minutes)**

Drago Seydou, University of Oslo, Oslo, Norway

Induced abortion in Burkina Faso is legally restricted and socially considered reprobate behavior. Because of that, there is a restriction on the use of abortion drugs such as misoprostol. However, women are able to access it and use it for illegal abortions. This study examines the use of misoprostol with regards to abortion in Burkina Faso.

### **Working on the edge: Ambiguity, responsibility and ethical dilemmas faced by abortion providers in Ethiopia (15 minutes)**

Emily McLean, University of Bergen, Bergen, Norway,

In 2005 Ethiopia changed its abortion law. This has reduced complications from abortions, but many still struggle to access safe services. The law allows abortions on grounds of rape/incest, woman's life endangered, foetal deformity and for minors. Health care workers play a crucial role in giving access to safe abortion services. This study explores reflections, perceptions and ethical challenges faced by Ethiopian abortion provider.

**Questions will be taken after each presentation.**