



MEC launches campaign against backstreet abortions

Sharika Regchand

IN AN effort to counteract the intensive promotion of illegal abortions, which posed health risks, Health MEC Dr Si-bongiseni Dhlomo launched a campaign against illegal abortions yesterday.

He said it was alarming to see illegal abortion pamphlets, professing “safe”, “pain-free”, “quick” and “cheap” abortions, being given to the public and plastered on street walls and lamp-posts.

Even worse, adverts were put up in places such as taxi ranks and shopping centres, making women believe they had access to a legitimate service.

To launch the campaign, a march was held from the Masukwane to the Market Square taxi ranks in Pietermaritzburg.

En route, Dhlomo tore down illegal abortion posters from street poles.

He said he was concerned that despite the country’s having one of the most progressive abortion laws in the world, women still chose backstreet providers instead of government-sanctioned abortion centres.

“It is actually disappointing that 18 years after the promulgation of The Choice of Termination of Pregnancy Act, introduced in 1996, we still have women being maimed and

dying as a result of illegal and unsafe abortions.”

The dangers of illegal abortions included severe bleeding, uterine perforation, tearing of the cervix, an increased risk of infertility, severe damage to the genitals and abdomen, internal infection of the abdomen and blood poisoning.

Incomplete

In the past financial year, 12 031 patients were admitted to health facilities around the province because of incomplete abortions and 1 455 for septic abortions. He said that according to the 2012 Saving Mothers report, 186 women died in the country of a septic

miscarriage in public health facilities, of which 23% were caused by unsafe or illegal abortions.

A 2010 study by the South African Medical Research Council found that 49% of abortions were undergone by women aged 13 to 19 and these had taken place outside a hospital or clinic.

Circumstances that led to abortion included rape or coerced intercourse, unsupported pregnancy, pregnancy which might threaten the woman’s health or survival and an abnormal foetus.

He added there were also personal, socio-economic or cultural reasons for unwanted pregnancies.

Despite a law legalising abortion, there were still obstacles to safe legal abortions. The stigma was as much an obstacle to women seeking access to the services as it was to the doctors and nurses providing it.

“Many health-care workers who should be providing the services do not always fully understand the ethos. They often impose their own beliefs on the clients, thus limiting access to appropriate health services.”

Thus, women needing the service often felt ostracised, isolated and stigmatised.

“We have to work together to change all this. Failure to do so drives young women needing the services to the quack ‘doctors’.”