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# Effects of Overturning Rœ Vs Wade on Unsafe Abortion in sub-Saharan Region and the way forward for the Region

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Unsafe abortion and its complications remain a major contributor to maternal mortality which is still very high worldwide, especially in the sub-Saharan. The legalization of abortion remains the most impactful way of minimizing the mortality and morbidity from unsafe abortion and its complications.

The legalization of abortion remains one of the most contentious issues in modern medicine with great emotional, religious, cultural, legal, political and medical discourse.

## Historical Background

Before 1967, abortion was generally illegal in the United States of America except to save the patient's life [1]. From 1967 to 1973, some states like New York, Washington, Alaska, Hawaii and California liberalized abortion laws. The landmark US Supreme Court judgement of Roe and Wade in Jan 1973 legalized abortion nationwide [1] Despite this, opposition across the US led to the camps of abortionists and the Pro–life. This had a great impact on the political dynamics of the country and also globally. The abortionist camp through advocacy, sponsorship, education and NGOs campaign against unsafe abortion and its implications led to the adoption of abortion laws or modified forms in different counties.

Despite the obvious positive effects of Abortion laws in reducing maternal mortality and morbidity, the Pro-life in the US continued its efforts to repeal the laws through legislation and the Courts. In 1992 the Supreme Court almost overturned the Roe decision, (Planned Parenthood of Southeastern Pennsylvania v Casey, 505 US 833) [1].

About fifty years after the Roe decision that legalized abortion was overturned on June 2022 by the US Supreme Court and individual states in the US were empowered to decide the legal parameters for abortion [2]. The effects of this decision will not only affect women in the US but globally, considering the global impact of US policies. The US is the leading donor globally to family planning and abortion care and has a rule that prohibits the use of its funds for a program that conflicts with its policies. The "global gag rule" will affect reproductive rights services in other countries especially the Sub –Saharan Africa which depends heavily on donor-funded program [2].

#### Unsafe Abortion and abortion laws in Sub-Saharan Africa

Globally there were about 6.8 million unsafe abortions annually with the majority occurring in sub-Saharan Africa. Evidence has shown that the incidence of abortions is the same worldwide whether abortion law is liberalized or restricted. Thirty-five per cent of abortions are unsafe in regions where the abortion laws are restrictive while only 1% of abortions are unsafe in counties where the abortion laws have been liberalized [3]. In Sub-Saharan Africa, 77% of abortions are unsafe due to restrictive laws on abortions [3].

According to 2019 figures, sub-Saharan Africa has the highest case fatality of 185/100,000 unsafe abortions resulting in over 15,000 avoidable deaths [3]. This was a remarkable improvement from the 2000 figure of 315 / 100,000 which was due to the availability of abortion care / post-abortion care services and the improvement of abortion law in the region [3].

Extensive work was done on unsafe abortions and abortion laws in the last two-three decades by Bankole et al of the Guttmacher Institute and published in 2020 titled "From unsafe to safe abortion in Sub-Saharan Africa: Slow but steady progress". From the study, great progress has been made. The African Union Maputo agreement of 2003 stipulated the legal criteria of allowing abortion when the woman's life or physical or mental health is threatened and in cases of rape, incest and grave fetal anomaly. Some countries have gone beyond the Maputo agreement and have liberalized abortion laws (Category 6) including South Africa, Cape Verde, Guinea-Bissau, and Sao Tome & Principe. Zambia also has broadly liberalized abortion law - Category 5. Twenty-seven of the 48 – sub-Saharan African countries have moderately restrictive abortion laws (abortions to save the woman's life and to preserve her physical or mental health).

The majority of the countries in the Sub-African have either liberalized or moderately restrictive laws on abortion. Despite the above statement majority of the populace live within the highly restrictive due to the high population of countries like Nigeria in this category.

Other countries in the region have highly restrictive abortion laws which are to save the life of the mother (Category 2) except for six with total restriction on abortion – Category 1(Madagascar, Angola, DRC, Mauritania, Seria-Leone & Senegal).

Most of the progress in ensuring safe abortions in this region through legal and political means was hinged on the Roe and Wade case, the global funding for safe abortion and NGO partnership. The question of whether this overturning will have effects on reproductive rights and the safety of our women in the reproductive age is not in doubt.

## The effects and the way forward

The effect of restrictive abortion laws is not limited to the termination of unwanted pregnancy but may affect adequate post-abortion care after miscarriages, and those with a significant maternal or fetal condition that requires interventions [2]. All these will hinder the achievement of the United Nations Sustainable Development goals of reducing maternal mortality to 70 per 100,000 live births by 2030.

One of the main drives to liberalize abortion law in this region was the US bio-political pressure emanating from Roe and Wade's decision for the last half a century [2]. Reversal of this decision and the anti–abortion policy at the Federal level, may lead to counter bio-political pressure in the opposite direction.

Most of the abortion care and family planning materials were donor-driven and subsidized. This reversal may lead to reduced funding and an increase in cost even when available, coupled with the current economic downturn worldwide will harm SDG -Goal 3 3.

The decision to restrict abortion at the federal level in the US may resonate in African countries with more countries becoming more restrictive too. As it had been shown restrictive abortion law does not reduce the incidence of abortion but rather increases the incidence of unsafe abortions [1.3]. This will further increase the maternal mortality rate thereby making SDG 2030 unrealistic.

This decision will also have negative implications for medical education funding in abortion care and will influence the knowledge, skills, and quality of care provided by medical practitioners as documented by Traub and co-workers. This will be more pronounced since most funds for reproductive health education and training were from International NGOs and Partners of which the US accounts

for the bulk of the donation.

## Conclusion

There is no doubt the Overturning Roe and Wade decision will adversely affect the African policy on Safe abortion practices and with the likelihood of increased unsafe abortion with associated mortality and morbidity.

Africans need to meet to take their destiny into their hand by ensuring local funding for reproductive health services and post–abortion care to manage complications from unsafe abortions.

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