



# Unsafe abortion as a risk factor for maternal mortality in Liberia

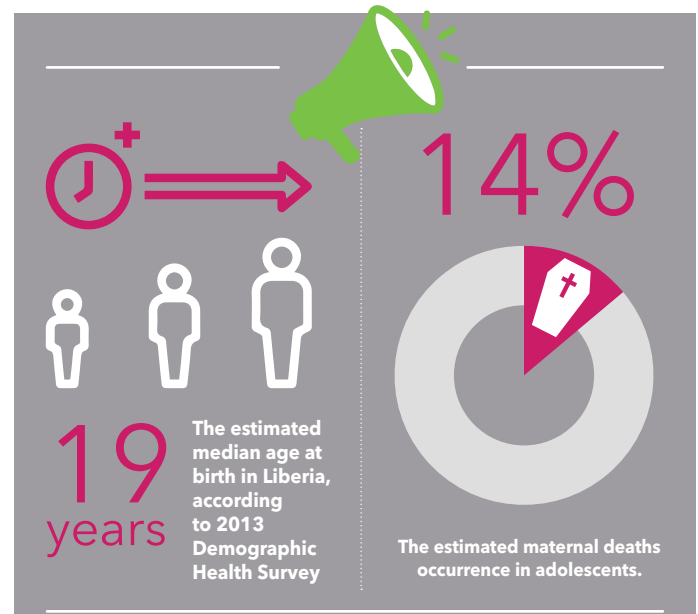
## Context

Unsafe abortion is one of the main causes of maternal mortality and morbidity globally. Liberia has one of the world's highest maternal mortality rates. Despite these existing challenges, a drop in maternal mortality trend has been observed from 1500 for every 100,000 live births in 1990 to 1072 for every 100,000 live births in 2013 and 725 deaths for every 100,000 live births in 2015. However, the current estimate of 725 deaths per 100,000 live births is still far from 70 deaths per 100,000 births, which is the Sustainable Development Goal (SDG) 3 target. The 2013 Liberia Demographic Health Survey also estimated that Liberia's median age at birth is 19 years. In Liberia, the adolescent birth rate is one of the highest in Sub-Saharan Africa and stands at 177/1000. It is estimated that 14% of maternal deaths occur in adolescents.

In Liberia, abortion is prohibited except when the mother's life is in danger or when there is a risk to her physical or mental health. This makes data on abortion, even under the context of the law, virtually impossible to access and document. Therefore, there is a high probability of a correlation between maternal mortality and unsafe abortion within the country. So far, no publicly known study has been conducted in Liberia to understand the relationship between unsafe abortion and maternal death. Due to the data unavailability within the national health system, it is difficult to determine the impact of unsafe abortion on maternal mortality, the age groups most affected, the trimester in which unsafe abortions occur, and the specific complications and outcomes. These factors make unsafe abortion a potentially hidden epidemic and a public health problem.

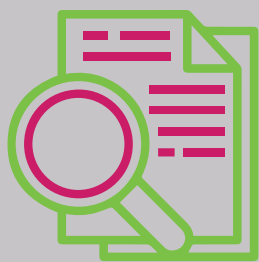
In Liberia, strict laws and stigma prevent women of reproductive age from accessing safe abortion and post-abortion care services. Many pregnant women and girls seek abortions from untrained practitioners and in unclean surroundings. While the enforcement of abortion laws varies, from police harassment to imprisonment, the laws build upon abortion stigma and opposition from religious leaders present a challenge for women of reproductive age in accessing reproductive health services.

Liberia has developed different strategies to reduce maternal mortalities as part of its commitment to international agreements. The strategies include a strategic roadmap, every woman, every child strategy, and compulsory reporting of maternal deaths by health workers. This strategic roadmap- Reproductive, Maternal, Newborn, Child and Adolescent Health (RMNCAH) 2011-2021 ensures the delivery of obstetric emergency care at the appropriate level of care and the strengthening of community-based interventions. However, this is not enough, as women still die from unsafe abortions, yet it is preventable.



Currently, Liberian lawmakers are preparing a bill to expand access to abortion, which is subject to tight restrictions that many women evade through clandestine and dangerous means. The existing law allows abortion only in cases of rape, incest, fetal abnormality, danger to the mother's life, or risk to her physical or mental health. Medical exemptions require written approval by at least two doctors. In cases of rape or incest, proof must be provided in court.

## Key findings:



**1.** Liberia has one of the highest maternal mortality rates in Africa. It is estimated that 14% of maternal deaths occur among the adolescent age group.

**2.** There are gaps in the evidence on understanding the relationship between unsafe abortion and maternal health in Liberia.

**3.** There are no clear policies and laws that specifically address access to abortion and post-abortion care services.

**4.** The government of Liberia is keen to support the amendment in the 1976 Public Health Law to reflect current day health realities.

## Policy Recommendations:

1. The government of Liberia should decriminalize abortion by allowing and supporting women to access the sexual and reproductive health services including access to safe abortion and post-abortion care services.

2. The Ministry of Health & Social Welfare should implement existing sexual and reproductive health policies where applicable and where not, develop clear policies that will be used to guide health providers on managing and handling post-abortion care. Particularly, the Ministry should enact and implement the Public Health Law.

3. There is need for more coordinated advocacy efforts on access to SRHR services and information, including post-abortion care, among SRHR partners, campaigners and women's rights activists. The advocacy efforts are useful in demystifying any misinformation around safe abortion with stakeholders and the community on the ground.

4. There is need for more research and studies on the impact of unsafe abortions, particularly to understand the relationship between unsafe abortion and maternal mortality in Liberia, to generate data for use and engagement with policymakers.

## Call to action:

**Liberia should fast-track the enactment of the Public Health Law to allow women of reproductive age access to SRHR services such as safe abortion and post-abortion care. In addition, beyond the enactment of the bill, the Ministry of Health should ensure the implementation and increase investment into SRHR as well as the teaching of comprehensive sexual education (CSE) in schools.**



## Acknowledgements:

The APHRC/Guttmacher Institute capacity strengthening for CSOs project was designed to deliver policy advocacy knowledge, tools, and skills into the hands of CSOs, safe abortion advocates and practitioners in Liberia and Sierra Leone to enable them to effectively engage with policymakers. The project aims to accomplish this through bespoke and custom-made policy advocacy training to SRHR advocates on using evidence to strategically engage with policymakers.

## Credits:

The content for this policy brief was developed jointly by the African Population and Health Research Center (APHRC), Paramount Young Women Initiative (PAYOWI), Liberia and Community Healthcare Initiative (CHI) Liberia.

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