

Policy Brief

Unintended Pregnancies, Unsafe Abortion and its Implications on Women of Reproductive Age in Malawi

Context

In Malawi, each year, large numbers of women die from illegally induced abortions, contributing to high rates of maternal mortality. Magnitude-wise, data compiled by Ipas Malawi reveals that in 2022 alone, 3,395 women and girls induced unsafe abortions and sought treatment at post-abortion clinics in district health facilities. The increase in the number of those seeking post-abortion treatment was observed in both Blantyre and Lilongwe. While health facilities in Blantyre provided post-abortion care to 665 women in 2020, the number rose to 1,144 in 2021 and further to 3,395 in 2022. A similar trend is observed in Lilongwe, which recorded 1,098 cases in 2020, 4,711 cases in 2021, and 7,851 cases in 2022. The trend is also present in rural districts such as Rumphi, which recorded 327 post-abortion cases in 2020, 448 cases in 2021, and 569 cases in 2022.

At the national level, research conducted by the Guttmacher Institute and Malawi's College of Medicine revealed that between 2015 and 2019, there were 866,000 pregnancies annually. Of these, 491,000 pregnancies were unintended, and 134,000 ended in abortion. The same study showed that the unintended pregnancy rate increased by 7% between 1990–1994 and 2000–2004 and decreased by 13% by 2015–2019. During the same period, the abortion rate increased by 61%. The study further revealed that most induced abortion procedures in Malawi are performed under clandestine and unsafe conditions. Complications from abortion have been estimated to account for between 6% and 18% of maternal deaths. Abortion is currently legal only to save the life of a pregnant woman in Malawi. Obtaining an abortion for any other reason is punishable by 7–14 years in prison. In 2021, attempts to legalize abortion failed, as the Malawian parliament unanimously rejected the proposed Termination of Pregnancy bill, and later, the sponsor withdrew the bill. Anti-abortion groups strongly opposed the bill, which urged lawmakers not to debate the issue. The draft abortion bill, if enacted, would allow women and girls access to safe abortion to prevent harm to their physical and mental health and in cases of severe fetal malformation, rape, incest, and defilement.

The Malawi government has demonstrated the political will necessary to implement the post-abortion care program by declaring the National Post-Abortion Care Strategy. The strategy aims to promote positive reproductive health practices, including the use of quality, accessible reproductive health services. It also calls for the management of complications with high-quality post-abortion care (PAC), including counseling and family planning. However, with the failure of members of parliament to pass the abortion bill, women and girls will continue to die from unsafe abortion, yet these deaths are preventable. In addition, abortion is highly stigmatized with health providers' negative attitudes and behavior and low levels of awareness and knowledge among women. Without quality PAC services, women will likely have repeated unplanned pregnancies and unsafe abortion.

Key Findings



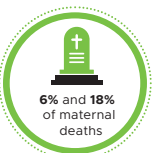
the abortion rate increased by 61%

In Malawi, the unintended pregnancy rate increased by 7% between 1990–1994 and 2000–2004 and decreased by 13% by 2015–2019. During the same period, the abortion rate increased by 61%.



491,000 pregnancies were unintended

Between 2015 and 2019, there were a total of 866,000 pregnancies annually. Of these, 491,000 pregnancies were unintended, and 134,000 ended in abortion.



6% and 18% of maternal deaths

In Malawi, complications from abortion have been estimated to account for between 6% and 18% of maternal deaths.



there was an increase of those seeking post-abortion treatment

Data compiled in 2022 reveals there was an increase in the number of those seeking post-abortion treatment in both Blantyre and Lilongwe.



If all needs were met for contraceptive, maternal and newborn, and abortion care in Malawi, the sexual and reproductive health outcomes for women aged 15–49 and their newborns would decrease dramatically.


Policy Recommendations





Full implementation of existing policies on sexual and reproductive health services: The Ministry of Health should fully implement policies that allow women of reproductive age, adolescents, and vulnerable populations to access sexual and reproductive health services and information.



Improve access to sexual and reproductive health services: There is a need for the government to ensure that women of reproductive age, adolescent boys and girls, as well as vulnerable populations have access to quality reproductive health services without being stigmatized.

 **Increased awareness in the community:** National-level CSOs should work jointly with grassroots organizations together with the media to educate and provide accurate information to the community and engage religious leaders on the right for women to access sexual and reproductive health services, including post-abortion care.

 **Capacity strengthening for the media:** Civil society needs to continuously strengthen the capacity of journalists through workshops to equip the media with the right information on access to reproductive health services such as abortion and post-abortion care.

 **Expanding data availability:** Academia and research institutions need to continuously work with the relative ministries such as the ministries of health and education to generate and avail more data and evidence on safe and unsafe abortion in Malawi.

Call to Action



The Ministry of Health should fully implement the sexual and reproductive health policy that allows women of reproductive age, adolescents, and vulnerable populations to access sexual and reproductive health services and information without discrimination. Further, the civil society and other actors such as academia need to continuously engage religious and traditional leaders on sexual and reproductive health issues such as post-abortion care and the implication on women of reproductive age.

ACKNOWLEDGEMENTS

The Unintended Pregnancies and Abortion Dissemination (UPAD) studies project was designed to give an opportunity for researchers from APHRC and Guttmacher Institute to share their research findings on unintended pregnancies and abortion in Kenya and Malawi. The project aims to accomplish this through deliberate, strategic, and planned engagement with key stakeholders such as the policymakers, civil society organizations, media, and SRHR advocates in Kenya and Malawi. The one-year project was funded by the Guttmacher Institute.

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CREDITS

The content for this brief was primarily drawn from secondary data on unintended pregnancy and abortion in Malawi, and developed jointly by the African Population and Health Research Center and SRHR Africa Trust Malawi.

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