

Age limit for parental consent (years)

# Abortion laws and policies, 2017

### **Afghanistan**

| LAWS ON ABORTION                                 |                                      |   |  |
|--|--------------------------------------|---|--|
| Legal grounds for induced abortion               | Currently permissible in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                  | <del>-</del>                                    |  |
| To preserve health                               | No                                   | _   |  |
| To preserve physical health                      | No                                   | <u> </u>  |  |
| To preserve mental health                        | No                                   | _   |  |
| In cases of intellectual or cognitive disability | No                                   | _   |  |
| In cases of incest                               | No                                   | _   |  |
| In cases of rape                                 | No                                   | _   |  |
| In cases of foetal impairment                    | No                                   | _   |  |
| For economic or social reason                    | No                                   | _   |  |
| On request                                       | No                                   | _   |  |
| For other reason(s)                              | _                                    | _   |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |   |  |   |
|--|---|--|---|
| Authorizations required                      |   | Consent required                             |   |
| Authorization of health care professional(s) | _ | Spousal consent                              | _ |
| Number of authorizations                     | _ | Parental consent for minors                  | _ |
| Cadre of health care professional            |   | Consent by another adult                     | _ |
| Doctor (specialty not specified)             | _ |  |   |
| Specialist doctor, including OB/GYN          | _ | Other requirements                           |   |
| Nurse  | _ | Gestational age limits                       | _ |
| Midwife/nurse-midwife                        | _ | Compulsory counselling                       | _ |
| Other providers                              | _ | Compulsory waiting period                    | _ |
| Authorized in specially licensed facilities  | _ | Length of waiting period (days)              | _ |
| Judicial authorization                       |   | Mandatory screening test                     |   |
| For minors                                   | _ | HIV test                                     | _ |
| In case of rape                              | _ | Other STI test(s)                            | _ |
| Police report in case of rape                | _ | Ultrasound viewing or listening to heartbeat | _ |

|                                       | Sex-selective abortion |   |
|---------------------------------------|------------------------|---|
| Prohibition of sex-selective abortion | _                      | Restrictions on the methods to detect the sex of the foetus |

Age limit for judicial consent (years)

Age when a woman can obtain an abortion without parental or judicial consent

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | <del>-</del>                     | _   |  |
| Dilatation and evacuation             | <del>-</del>                     | _   |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | _   |  |
| Misoprostol only                      | _                                | _   |  |
| Other method(s)                       | <del>-</del>                     | <del>-</del>                              |  |



### **Afghanistan**

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |  |
| Misoprostol  | Yes 1   | <del>-</del>   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | Yes                |
| Secondary (district-level) health-care facilities | _                | Yes                |
| Specialized abortion care public facilities       | _                | _                  |
| Private health-care centres or clinics            | _                | <del>-</del>       |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | _                | _                  |

| Health care personnel allowed to provide legal abortions |   |  |
|--|---|--|
| Doctors (speciality not specified)                       | _ |  |
| Specialist doctor, including OB/GYN                      | _ |  |
| Nurse  | _ |  |
| Midwife/nurse-midwife                                    | _ |  |
| Other provider(s)  | _ |  |
|  |   |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | _   |
| National guidelines on clinical and service delivery of post-abortion care | Yes |
| Restrictions on public information on legal abortion services              | _   |
| Counselling for contraceptive methods during<br>post-abortion care         | Yes |
|  |     |

| Service delivery requirements for providers or facilities |   |  |
|---|---|--|
| Referral linkage to a higher-level facility               | _ |  |
| Availability of a specialist doctor                       | _ |  |
| Minimum number of beds                                    | _ |  |
| Other facility/provider requirements                      | _ |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to<br>alternative provider or facility |
|--|-------------------|--|
| Health-care facilities   | _                 | _  |
| Health-care providers  | _                 | _  |

#### Notes:

- Indicates that data are not available, not applicable or not specified
- 1. For gynaecological indications.



#### Albania

| LAWS ON ABORTION                                 |   |   |  |
|--|---|---|--|
| Legal grounds for induced abortion               | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | 22  |  |
| To preserve health                               | Yes                                     | 22  |  |
| To preserve physical health                      | <del>-</del>                            | <del>-</del>                                    |  |
| To preserve mental health                        | <del>-</del>                            | <del>-</del>                                    |  |
| In cases of intellectual or cognitive disability | <del>-</del>                            | <del>-</del>                                    |  |
| In cases of incest                               | Yes                                     | 22  |  |
| In cases of rape                                 | Yes                                     | 22  |  |
| In cases of foetal impairment                    | Yes                                     | No limit  |  |
| For economic or social reason                    | Yes                                     | 22  |  |
| On request                                       | Yes                                     | 12  |  |
| For other reason(s)                              | _                                       | _   |  |

|         | Persons who can be crimina | ally charged for an | illegal abortion                   |   |
|---------|----------------------------|---------------------|------------------------------------|---|
| Woman - | — Provider                 | Yes                 | Other person who assists the woman | _ |

| REQUIREMENTS FOR INDUCED ABORTION            |     |  |     |
|--|-----|--|-----|
| uthorizations required                       |     | Consent required                             |     |
| Authorization of health care professional(s) | Yes | Spousal consent                              | No  |
| Number of authorizations                     | 3 1 | Parental consent for minors                  | Yes |
| Cadre of health care professional            |     | Consent by another adult                     | Yes |
| Doctor (specialty not specified)             | Yes |  |     |
| Specialist doctor, including OB/GYN          | _   | Other requirements                           |     |
| Nurse  | _   | Gestational age limits                       | Yes |
| Midwife/nurse-midwife                        | _   | Compulsory counselling                       | Yes |
| Other providers                              | _   | Compulsory waiting period                    | Yes |
| Authorized in specially licensed facilities  | Yes | Length of waiting period (days)              | 7 2 |
| Judicial authorization                       |     | Mandatory screening test                     |     |
| For minors                                   | Yes | HIV test                                     | _   |
| In case of rape                              | _   | Other STI test(s)                            | _   |
| Police report in case of rape                | _   | Ultrasound viewing or listening to heartbeat | _   |

| Age limit for parental consent (years) | 16           | Age limit for judicial consent (years) | _ |  |
|--|--------------|--|---|--|
|  | Can aslastin |  |   |  |

Age when a woman can obtain an abortion without parental or judicial consent

| Prohibition of sex-selective abortion  Yes  Restrictions on the methods to detect the sex  of the foetus |                                       | Sex-selective abo | ortion   |
|--|---------------------------------------|-------------------|----------|
|  | Prohibition of sex-selective abortion | Yes               | <u> </u> |

| ACCESS TO ABORTION SERVICES           |                                  |   |
|---------------------------------------|----------------------------------|---|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |
| Vacuum aspiration                     | _                                | _   |
| Dilatation and evacuation             | <del>-</del>                     | <del>-</del>                              |
| Combination mifepristone- misoprostol | <del>-</del>                     | <del>-</del>                              |
| Misoprostol only                      | _                                | <del>-</del>                              |
| Other method(s)                       | _                                | _   |



#### Albania

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |
|--|---|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |
| Mifepristone and/or combination mifepristone-misoprostol | No  | <del>-</del>   |
| Misoprostol  | No  | <u> </u>   |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | _                  |
| Specialized abortion care public facilities       | <del>-</del>     | _                  |
| Private health-care centres or clinics            | <del>-</del>     | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | _                  |
| Other settings or facilities                      | _                | _                  |

| ealth care personnel allowed to provide legal abortions |     |
|---|-----|
| Doctors (speciality not specified)                      | No  |
| Specialist doctor, including OB/GYN                     | Yes |
| Nurse   | No  |
| Midwife/nurse-midwife                                   | No  |
| Other provider(s)                                       | _   |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | _   |
| National guidelines on clinical and service delivery of post-abortion care | _   |
| Restrictions on public information on legal abortion services              | Yes |
| Counselling for contraceptive methods during<br>post-abortion care         | Yes |
|  |     |

| Service delivery requirements for providers or | facilities       |
|--|------------------|
| Referral linkage to a higher-level facility    | _                |
| Availability of a specialist doctor            | <del>-</del>     |
| Minimum number of beds                         | _                |
| Other facility/provider requirements           | Yes <sup>3</sup> |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | Yes <sup>4</sup>  | _   |

#### Notes:

<sup>1.</sup> The number and cadre of professionals authorizing an abortion depends on the ground on which an abortion is sought. For abortions after 12 weeks and for medical reasons, the authorization of three doctors is needed. For abortions in case of rape below 22 weeks of gestation, the authorization of a doctor, a social worker and a jurist is needed. A doctor, a social worker and a jurist, after examination and consultation, judges that the pregnancy is the result of rape or another sexual crime.

2. At time of first request. The waiting period may be shortened to two days by the doctor if otherwise the time periods in the law pertaining to gestational ages would be exceeded. After the 7 day waiting period, a woman must submit a written confirmation of request to the physician who will be doing procedure.

3. A facility must be a state or private health institution that meets the conditions set in the respective guidelines of the minister of Health and Environmental Protection.

4. Provider type not specified.



### Algeria

| LAWS ON ABORTION                                 |                                      |   |  |
|--|--------------------------------------|---|--|
| egal grounds for induced abortion                | Currently permissible in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                  | No limit  |  |
| To preserve health                               | Yes                                  | No limit  |  |
| To preserve physical health                      | Yes                                  | No limit  |  |
| To preserve mental health                        | Yes                                  | No limit  |  |
| In cases of intellectual or cognitive disability | No                                   | _   |  |
| In cases of incest                               | No                                   | <del>-</del>                                    |  |
| In cases of rape                                 | No                                   | _   |  |
| In cases of foetal impairment                    | No                                   | _   |  |
| For economic or social reason                    | No                                   | _   |  |
| On request                                       | No                                   | _   |  |
| For other reason(s)                              | _                                    | _   |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

|  | REQUIREMENTS FOR INDUCED ABORTION |  |  |
|--|-----------------------------------|--|--|
| thorizations required                        |                                   | Consent required                             |  |
| Authorization of health care professional(s) | Yes                               | Spousal consent                              |  |
| Number of authorizations                     | 2                                 | Parental consent for minors                  |  |
| Cadre of health care professional            |                                   | Consent by another adult                     |  |
| Doctor (specialty not specified)             | Yes                               |  |  |
| Specialist doctor, including OB/GYN          | Yes                               | Other requirements                           |  |
| Nurse  | _                                 | Gestational age limits                       |  |
| Midwife/nurse-midwife                        | _                                 | Compulsory counselling                       |  |
| Other providers                              | _                                 | Compulsory waiting period                    |  |
| Authorized in specially licensed facilities  | _                                 | Length of waiting period (days)              |  |
| Judicial authorization                       |                                   | Mandatory screening test                     |  |
| For minors                                   | _                                 | HIV test                                     |  |
| In case of rape                              | _                                 | Other STI test(s)                            |  |
| Police report in case of rape                | _                                 | Ultrasound viewing or listening to heartbeat |  |

| Age when a woman can obtain an abortion without parental or judicial consent |   |  |   |
|--|---|--|---|
| Age limit for parental consent (years)                                       | _ | Age limit for judicial consent (years) | _ |
|  |   |  |   |

|                                       | Sex-selective abortion                                      |  |
|---------------------------------------|---|--|
| Prohibition of sex-selective abortion | Restrictions on the methods to detect the sex of the foetus |  |

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | _                                | _   |  |
| Dilatation and evacuation             | <del>-</del>                     | _   |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | _   |  |
| Misoprostol only                      | _                                | _   |  |
| Other method(s)                       | <del>-</del>                     | _   |  |



### Algeria

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |  |
| Misoprostol  | No  | <del>-</del>   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | _                  |
| Specialized abortion care public facilities       | <del>-</del>     | _                  |
| Private health-care centres or clinics            | <del>-</del>     | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | _                  |
| Other settings or facilities                      | _                | _                  |

| lealth care personnel allowed to provide legal abortions |          |  |
|--|----------|--|
| Doctors (speciality not specified)                       | Yes      |  |
| Specialist doctor, including OB/GYN                      | Yes      |  |
| Nurse  | _        |  |
| Midwife/nurse-midwife                                    | _        |  |
| Other provider(s)  | _        |  |
| Other provider(s)  | <u> </u> |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | _   |
| National guidelines on clinical and service delivery of post-abortion care | _   |
| Restrictions on public information on legal abortion services              | Yes |
| Counselling for contraceptive methods during post-abortion care            | _   |

| Service delivery requirements for providers or facilities |   |  |
|---|---|--|
| Referral linkage to a higher-level facility               | _ |  |
| Availability of a specialist doctor                       | _ |  |
| Minimum number of beds                                    | _ |  |
| Other facility/provider requirements                      | _ |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to<br>alternative provider or facility |
|--|-------------------|--|
| Health-care facilities   | _                 | _  |
| Health-care providers  | _                 | _  |

#### Notes:

- Indicates that data are not available, not applicable or not specified.
- 1. Abortion is permitted for therapeutic purposes.



### Andorra

| LAWS ON ABORTION                                 |   |   |
|--|---|---|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |
| To save life                                     | Yes                                     | <del>-</del>                                    |
| To preserve health                               | No                                      | <del>-</del>                                    |
| To preserve physical health                      | No                                      | <del>-</del>                                    |
| To preserve mental health                        | No                                      | <del>-</del>                                    |
| In cases of intellectual or cognitive disability | No                                      | <del>-</del>                                    |
| In cases of incest                               | No                                      | _   |
| In cases of rape                                 | No                                      | _   |
| In cases of foetal impairment                    | No                                      | _   |
| For economic or social reason                    | No                                      | _   |
| On request                                       | No                                      | _   |
| For other reason(s)                              | _                                       | _   |

| Persons who can be criminally charged for an illegal abortion |      |        |     |                                    |     |
|---|------|--------|-----|------------------------------------|-----|
| Woman   | — Pr | ovider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |  |   |
|--|--|---|
| Authorizations required                      | Consent required                             |   |
| Authorization of health care professional(s) | Spousal consent —                            | - |
| Number of authorizations                     | Parental consent for minors                  | - |
| Cadre of health care professional            | Consent by another adult                     | _ |
| Doctor (specialty not specified)             |  |   |
| Specialist doctor, including OB/GYN          | Other requirements                           |   |
| Nurse  | — Gestational age limits —                   | - |
| Midwife/nurse-midwife                        | Compulsory counselling                       | - |
| Other providers                              | Compulsory waiting period                    | - |
| Authorized in specially licensed facilities  | Length of waiting period (days)              | - |
| Judicial authorization                       | Mandatory screening test                     |   |
| For minors                                   | — HIV test —                                 | - |
| In case of rape                              | — Other STI test(s) —                        | - |
| Police report in case of rape                | Ultrasound viewing or listening to heartbeat | _ |

| Age when a woman can obtain an abortion without parental or judicial consent |  |   |  |
|--|--|---|--|
| Age limit for parental consent (years)                                       | <ul> <li>Age limit for judicial consent (years)</li> </ul> | _ |  |
|  |  |   |  |
|  |  |   |  |

|                                       | Sex-selective abortion |   |
|---------------------------------------|------------------------|---|
| Prohibition of sex-selective abortion | _                      | Restrictions on the methods to detect the sex of the foetus |
|                                       |                        |   |

| ACCESS TO ABORTION SERVICES           |                                  |   |
|---------------------------------------|----------------------------------|---|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |
| Vacuum aspiration                     | _                                | <del>-</del>                              |
| Dilatation and evacuation             | <del>-</del>                     | <del>-</del>                              |
| Combination mifepristone- misoprostol | <del>-</del>                     | <del>-</del>                              |
| Misoprostol only                      | <del>-</del>                     | _   |
| Other method(s)                       | <del>-</del>                     | <del>-</del>                              |



#### Andorra

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |
|--|---|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |
| Mifepristone and/or combination mifepristone-misoprostol | Yes   | _  |
| Misoprostol  | Yes <sup>2</sup>                                  | Yes <sup>3</sup>   |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | _                | <del>-</del>       |
| Specialized abortion care public facilities       | <del>-</del>     | <del>-</del>       |
| Private health-care centres or clinics            | <del>-</del>     | <del>-</del>       |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | _                | _                  |

| Health care personnel allowed to provide legal abortions |   |
|--|---|
| Doctors (speciality not specified)                       | _ |
| Specialist doctor, including OB/GYN                      | _ |
| Nurse  | _ |
| Midwife/nurse-midwife                                    | _ |
| Other provider(s)  | _ |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Info | rmation and guidelines on abortion services                                |
|------|--|
|      | National guidelines on clinical and service delivery of induced abortion   |
|      | National guidelines on clinical and service delivery of post-abortion care |
|      | Restrictions on public information on legal abortion services              |
|      | Counselling for contraceptive methods during post-abortion care            |

| Service delivery requirements for providers or facilities |   |  |  |
|---|---|--|--|
| Referral linkage to a higher-level facility               | _ |  |  |
| Availability of a specialist doctor                       | _ |  |  |
| Minimum number of beds                                    | _ |  |  |
| Other facility/provider requirements                      | _ |  |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | _                 | _   |

#### Notes:

- Abortion is generally illegal in the country. However, under the general criminal law principles of necessity, it is allowed to be performed to save the life of the pregnant woman.
   For gynaecological indications.
   With prescription only.



### Angola

| LAWS ON ABORTION                                 |   |   |  |
|--|---|---|--|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | _   |  |
| To preserve health                               | Yes                                     | 16  |  |
| To preserve physical health                      | Yes                                     | 16  |  |
| To preserve mental health                        | Yes                                     | 16  |  |
| In cases of intellectual or cognitive disability | <del>-</del>                            | _   |  |
| In cases of incest                               | <del>-</del>                            | _   |  |
| In cases of rape                                 | Yes                                     | _   |  |
| In cases of foetal impairment                    | Yes                                     | 24  |  |
| For economic or social reason                    | _                                       | _   |  |
| On request                                       | Yes                                     | 10  |  |
| For other reason(s)                              | Yes 1                                   | _   |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |  |
|---|-----|----------|-----|------------------------------------|-----|--|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |  |

| REQUIREMENTS FOR INDUCED ABORTION            |     |  |                       |  |  |
|--|-----|--|-----------------------|--|--|
| Authorizations required                      |     | Consent required                             |                       |  |  |
| Authorization of health care professional(s) | Yes | Spousal consent                              | Yes                   |  |  |
| Number of authorizations                     | _   | Parental consent for minors                  | Yes                   |  |  |
| Cadre of health care professional            |     | Consent by another adult                     | Yes                   |  |  |
| Doctor (specialty not specified)             | _   |  |                       |  |  |
| Specialist doctor, including OB/GYN          | _   | Other requirements                           |                       |  |  |
| Nurse  | _   | Gestational age limits                       | Yes                   |  |  |
| Midwife/nurse-midwife                        | _   | Compulsory counselling                       | Yes                   |  |  |
| Other providers                              | _   | Compulsory waiting period                    | Yes                   |  |  |
| Authorized in specially licensed facilities  | Yes | Length of waiting period (days)              | <b>3</b> <sup>2</sup> |  |  |
| Judicial authorization                       |     | Mandatory screening test                     |                       |  |  |
| For minors                                   | Yes | HIV test                                     | _                     |  |  |
| In case of rape                              | _   | Other STI test(s)                            | _                     |  |  |
| Police report in case of rape                | _   | Ultrasound viewing or listening to heartbeat | _                     |  |  |

| Age when a woman can obtain an abortion without parental or judicial consent |    |  |   |  |  |  |
|--|----|--|---|--|--|--|
| Age limit for parental consent (years)                                       | 18 | Age limit for judicial consent (years) | _ |  |  |  |
|  |    |  |   |  |  |  |

|                                       | Sex-selective abortion |   |
|---------------------------------------|------------------------|---|
| Prohibition of sex-selective abortion | No                     | Restrictions on the methods to detect the sex of the foetus |

| ACCESS TO ABORTION SERVICES           |                                  |   |  |  |
|---------------------------------------|----------------------------------|---|--|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |  |
| Vacuum aspiration                     | _                                | _   |  |  |
| Dilatation and evacuation             | <del>-</del>                     | _   |  |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | _   |  |  |
| Misoprostol only                      | _                                | _   |  |  |
| Other method(s)                       | <del>-</del>                     | _   |  |  |



### **Angola**

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |  |
| Misoprostol  | No  | _  |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | _                | <del>-</del>       |
| Secondary (district-level) health-care facilities | _                | <del>-</del>       |
| Specialized abortion care public facilities       | _                | <del>-</del>       |
| Private health-care centres or clinics            | _                | <del>-</del>       |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | Yes <sup>3</sup> | _                  |

| Health care personnel allowed to provide legal abortions |                  |  |
|--|------------------|--|
| Doctors (speciality not specified)                       | Yes              |  |
| Specialist doctor, including OB/GYN                      | _                |  |
| Nurse  | _                |  |
| Midwife/nurse-midwife                                    | _                |  |
| Other provider(s)  | Yes <sup>4</sup> |  |
|  |                  |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | _   |
| National guidelines on clinical and service delivery of post-abortion care | _   |
| Restrictions on public information on legal abortion services              | Yes |
| Counselling for contraceptive methods during<br>post-abortion care         | _   |

| Service delivery requirements for providers or fa | acilities        |  |
|---|------------------|--|
| Referral linkage to a higher-level facility       | _                |  |
| Availability of a specialist doctor               | _                |  |
| Minimum number of beds                            | _                |  |
| Other facility/provider requirements              | Yes <sup>5</sup> |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | _                 | _   |

#### Notes:

- Indicates that data are not available, not applicable or not specified.

- Pregnancy which is the result of a crime against freedom and sexual self-determination.
   From the day the woman requests an abortion.
   Official or authorized health facility.
   Provider acting under the direction or supervision of a physician.



### **Antigua and Barbuda**

| LAWS ON ABORTION                                 |   |   |  |
|--|---|---|--|
| Legal grounds for induced abortion               | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | <del>-</del>                                    |  |
| To preserve health                               | No                                      | _   |  |
| To preserve physical health                      | No                                      | <del>_</del>                                    |  |
| To preserve mental health                        | No                                      | _   |  |
| In cases of intellectual or cognitive disability | No                                      | <del>-</del>                                    |  |
| In cases of incest                               | No                                      | _   |  |
| In cases of rape                                 | No                                      | <del>-</del>                                    |  |
| In cases of foetal impairment                    | No                                      | <del>-</del>                                    |  |
| For economic or social reason                    | No                                      | <del>-</del>                                    |  |
| On request                                       | No                                      | <del>-</del>                                    |  |
| For other reason(s)                              | _                                       | _   |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |     |  |   |  |
|--|-----|--|---|--|
| Authorizations required                      |     | Consent required                             |   |  |
| Authorization of health care professional(s) | Yes | Spousal consent                              | _ |  |
| Number of authorizations                     | 2   | Parental consent for minors                  | _ |  |
| Cadre of health care professional            |     | Consent by another adult                     | _ |  |
| Doctor (specialty not specified)             | Yes |  |   |  |
| Specialist doctor, including OB/GYN          | _   | Other requirements                           |   |  |
| Nurse  | _   | Gestational age limits                       | _ |  |
| Midwife/nurse-midwife                        | _   | Compulsory counselling                       | _ |  |
| Other providers                              | _   | Compulsory waiting period                    | _ |  |
| Authorized in specially licensed facilities  | _   | Length of waiting period (days)              | _ |  |
| Judicial authorization                       |     | Mandatory screening test                     |   |  |
| For minors                                   | _   | HIV test                                     | _ |  |
| In case of rape                              | _   | Other STI test(s)                            | _ |  |
| Police report in case of rape                | _   | Ultrasound viewing or listening to heartbeat | _ |  |

| Age when a woman can obtain an abortion without parental or judicial consent |               |  |   |  |
|--|---------------|--|---|--|
| Age limit for parental consent (years)                                       | _             | Age limit for judicial consent (years) | _ |  |
|  |               |  |   |  |
|  | Sex-selective | abortion                               |   |  |

|                                       | ACCESS TO ABORTION SERVICES                         |           |
|---------------------------------------|---|-----------|
| Prohibition of sex-selective abortion | Restrictions on the methods to detect of the foetus | t the sex |

| ACCESS TO ABORTION SERVICES           |                                  |   |
|---------------------------------------|----------------------------------|---|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |
| Vacuum aspiration                     | _                                | _   |
| Dilatation and evacuation             | _                                | <del>-</del>                              |
| Combination mifepristone- misoprostol | _                                | _   |
| Misoprostol only                      | <del>-</del>                     | <del>-</del>                              |
| Other method(s)                       | <del>-</del>                     | _   |



### **Antigua and Barbuda**

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |  |
| Misoprostol  | Yes <sup>3</sup>                                  | <del>-</del>   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | _                  |
| Specialized abortion care public facilities       | <del>-</del>     | _                  |
| Private health-care centres or clinics            | <del>-</del>     | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | <del>-</del>     | _                  |

| Doctors (speciality not specified)  | _ |
|-------------------------------------|---|
| Specialist doctor, including OB/GYN | _ |
| Nurse                               | _ |
| Midwife/nurse-midwife               | _ |
| Other provider(s)                   | _ |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                               |     |
|---|-----|
| National guidelines on clinical and service delivery of induced abortion      | _   |
| National guidelines on clinical and service<br>delivery of post-abortion care | _   |
| Restrictions on public information on legal abortion services                 | Yes |
| Counselling for contraceptive methods during<br>post-abortion care            | _   |

| Service delivery requirements for providers or facilities |   |  |
|---|---|--|
| Referral linkage to a higher-level facility               | _ |  |
| Availability of a specialist doctor                       | _ |  |
| Minimum number of beds                                    | _ |  |
| Other facility/provider requirements                      | _ |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | _                 | _   |

#### Notes:

- Indicates that data are not available, not applicable or not specified.
- 1. Abortion is generally illegal in the country. However, under the general criminal law principles of necessity, it is allowed to be performed to save the life of the pregnant woman. As a rule abortion must be performed within the first 16 weeks of gestation, although it can be performed later under exceptional circumstances.

  2. Abortion for therapeutic purposes requires the authorization of a panel of physicians.

  3. For non-gynaecological indications only.



Prohibition of sex-selective abortion

# Abortion laws and policies, 2017

### **Argentina**

| LAWS ON ABORTION 1                               |                                      |   |  |  |
|--|--------------------------------------|---|--|--|
| Legal grounds for induced abortion <sup>2</sup>  | Currently permissible in the country | Gestational limit for each legal ground (weeks) |  |  |
| To save life                                     | Yes                                  | _   |  |  |
| To preserve health                               | Yes                                  | _   |  |  |
| To preserve physical health                      | <del>-</del>                         | <del>-</del>                                    |  |  |
| To preserve mental health                        | <del>-</del>                         | _   |  |  |
| In cases of intellectual or cognitive disability | No                                   | _   |  |  |
| In cases of incest                               | No                                   | <del>-</del>                                    |  |  |
| In cases of rape                                 | Yes                                  | _   |  |  |
| In cases of foetal impairment                    | No                                   | _   |  |  |
| For economic or social reason                    | No                                   | _   |  |  |
| On request                                       | No                                   | _   |  |  |
| For other reason(s)                              | _                                    | _   |  |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |     |  |     |
|--|-----|--|-----|
| Authorizations required                      |     | Consent required                             |     |
| Authorization of health care professional(s) | Yes | Spousal consent                              | No  |
| Number of authorizations                     | 1   | Parental consent for minors                  | Yes |
| Cadre of health care professional            |     | Consent by another adult                     | Yes |
| Doctor (specialty not specified)             | Yes |  |     |
| Specialist doctor, including OB/GYN          | _   | Other requirements                           |     |
| Nurse  | _   | Gestational age limits                       | _   |
| Midwife/nurse-midwife                        | _   | Compulsory counselling                       | _   |
| Other providers                              | _   | Compulsory waiting period                    | _   |
| Authorized in specially licensed facilities  | _   | Length of waiting period (days)              | _   |
| Judicial authorization                       |     | Mandatory screening test                     |     |
| For minors                                   | Yes | HIV test                                     | _   |
| In case of rape                              | _   | Other STI test(s)                            | _   |
| Police report in case of rape                | Yes | Ultrasound viewing or listening to heartbeat | _   |

|  | Sex-selective | aphortion                              |   |
|--|---------------|--|---|
|  |               |  |   |
| Age limit for parental consent (years) | 14            | Age limit for judicial consent (years) | _ |

Restrictions on the methods to detect the sex

Age when a woman can obtain an abortion without parental or judicial consent

| ACCESS TO ABORTION SERVICES           |                                  |   |  |  |
|---------------------------------------|----------------------------------|---|--|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |  |
| Vacuum aspiration                     | Yes                              | 12-14                                     |  |  |
| Dilatation and evacuation             | Yes                              | 22  |  |  |
| Combination mifepristone- misoprostol | Yes                              | 22  |  |  |
| Misoprostol only                      | Yes                              | 22  |  |  |
| Other method(s)                       | Yes <sup>4</sup>                 | 12-14                                     |  |  |



### **Argentina**

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |  |
| Misoprostol  | Yes <sup>5</sup>                                  | No   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | _                | Yes                |
| Secondary (district-level) health-care facilities | Yes              | Yes                |
| Specialized abortion care public facilities       | _                | _                  |
| Private health-care centres or clinics            | _                | Yes                |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | _                | <del>-</del>       |

| Health care personnel allowed to provide legal abortions |     |  |
|--|-----|--|
| Doctors (speciality not specified)                       | Yes |  |
| Specialist doctor, including OB/GYN                      | _   |  |
| Nurse  | _   |  |
| Midwife/nurse-midwife                                    | _   |  |
| Other provider(s)  | _   |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Yes |
|-----|
| Yes |
| _   |
| Yes |
|     |

| Service delivery requirements for providers or t | facilities   |
|--|--------------|
| Referral linkage to a higher-level facility      | _            |
| Availability of a specialist doctor              | <del>-</del> |
| Minimum number of beds                           | _            |
| Other facility/provider requirements             | _            |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to<br>alternative provider or facility |
|--|-------------------|--|
| Health-care facilities   | No                | _  |
| Health-care providers  | Yes <sup>6</sup>  | Yes  |

#### Notes:

- Indicates that data are not available, not applicable or not specified.
- 1. Varies by jurisdiction.
  2. When the pregnancy is the result of rape, the health professional treating women should request proof of the official complaint of rape or, where appropriate, an affidavit of the woman or her legal representative. When the pregnancy is the result of an indecent assault of a woman with a mental disability with or without judicial declaration, the person who legally represents her is asked for proof of the complaint of indecent assault or where appropriate, the official sworn declaration of her representative. It should not require any other evidence, documentation or information, or any involvement of other people or institutions
  3. In cases in which the parents of a girl under the age of 14 unjustifiably refuse to consent to the abortion she wishes to have, the Technical Guideline can make alternative provisions.
  4. Dilation and curettage.
  5. For gynaecological indications.
  6. Provider type not specified.



#### Armenia

| LAWS ON ABORTION                                 |   |   |  |
|--|---|---|--|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | <del>-</del>                                    |  |
| To preserve health                               | Yes                                     | <del>-</del>                                    |  |
| To preserve physical health                      | _                                       | <del>-</del>                                    |  |
| To preserve mental health                        | <del>-</del>                            | <del>-</del>                                    |  |
| In cases of intellectual or cognitive disability | <del>-</del>                            | <del>-</del>                                    |  |
| In cases of incest                               | <del>-</del>                            | <del>-</del>                                    |  |
| In cases of rape                                 | _                                       | <del>-</del>                                    |  |
| In cases of foetal impairment                    | <del>-</del>                            | <del>-</del>                                    |  |
| For economic or social reason                    | Yes                                     | 22  |  |
| On request                                       | Yes                                     | 12  |  |
| For other reason(s)                              | _                                       | _   |  |

|       |   | Persons who can be criminally | charged for a | n illegal abortion                 |   |  |
|-------|---|-------------------------------|---------------|------------------------------------|---|--|
| Woman | _ | Provider                      | Yes           | Other person who assists the woman | _ |  |

| REQUIREMENTS FOR INDUCED ABORTION            |     |  |     |  |
|--|-----|--|-----|--|
| Authorizations required Consent required     |     |  |     |  |
| Authorization of health care professional(s) | No  | Spousal consent                              | No  |  |
| Number of authorizations                     | _   | Parental consent for minors                  | Yes |  |
| Cadre of health care professional            |     | Consent by another adult                     | Yes |  |
| Doctor (specialty not specified)             | _   |  |     |  |
| Specialist doctor, including OB/GYN          | _   | Other requirements                           |     |  |
| Nurse  | _   | Gestational age limits                       | Yes |  |
| Midwife/nurse-midwife                        | _   | Compulsory counselling                       | _   |  |
| Other providers                              | _   | Compulsory waiting period                    | _   |  |
| Authorized in specially licensed facilities  | Yes | Length of waiting period (days)              | _   |  |
| Judicial authorization                       |     | Mandatory screening test                     |     |  |
| For minors                                   | Yes | HIV test                                     | _   |  |
| In case of rape                              | _   | Other STI test(s)                            | _   |  |
| Police report in case of rape                | _   | Ultrasound viewing or listening to heartbeat | _   |  |

| Age limit for parental consent (years) | 18 | Age limit for judicial consent (years) | 18 |  |
|--|----|--|----|--|
|  |    |  |    |  |
|  |    |  |    |  |

| Prohibition of sex-selective abortion  Yes  Restrictions on the methods to detect the sex  of the foctus |                                       | Sex-selective abortion |  |
|--|---------------------------------------|------------------------|--|
| of the locals  | Prohibition of sex-selective abortion | Yes                    |  |

| ACCESS TO ABORTION SERVICES           |                                  |   |  |  |
|---------------------------------------|----------------------------------|---|--|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |  |
| Vacuum aspiration                     | <del>-</del>                     | <del>-</del>                              |  |  |
| Dilatation and evacuation             | <del>-</del>                     | _   |  |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | _   |  |  |
| Misoprostol only                      | <del>-</del>                     | _   |  |  |
| Other method(s)                       | <del>-</del>                     | _   |  |  |



#### **Armenia**

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | Yes   | _  |  |
| Misoprostol  | Yes <sup>2</sup>                                  | Yes <sup>3</sup>   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | _                  |
| Specialized abortion care public facilities       | <del>-</del>     | _                  |
| Private health-care centres or clinics            | <del>-</del>     | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | _                  |
| Other settings or facilities                      | _                | _                  |

| Health care personnel allowed to provide legal abortions |                                       |
|--|---------------------------------------|
| [  | Doctors (speciality not specified) —  |
| 9  | Specialist doctor, including OB/GYN — |
| 1  | Nurse —                               |
| ľ  | Midwife/nurse-midwife                 |
| (  | Other provider(s)                     |
| (  | Other provider(s)                     |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | _   |
| National guidelines on clinical and service delivery of post-abortion care | _   |
| Restrictions on public information on legal abortion services              | _   |
| Counselling for contraceptive methods during post-abortion care            | Yes |

| Service delivery requirements for providers or facilities |   |
|---|---|
| Referral linkage to a higher-level facility               | _ |
| Availability of a specialist doctor                       | _ |
| Minimum number of beds                                    | _ |
| Other facility/provider requirements                      | _ |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | _                 | _   |

#### Notes:

- The gestational limit for medical indications is 22 weeks.
   For gynaecological indications.
   With prescription only.



### Australia

|   | LAWS ON  | ABORTION 1  |  |
|---|--|---|--|
| egal grounds for induced abortion   |  | Currently permissible in the country  | Gestational limit for each legal ground (weeks)  |
| To save life  |  | Yes   | <u> </u>   |
| To preserve health  |  | Yes   | _  |
| To preserve physical health   |  | Yes   | <del>-</del>   |
| To preserve mental health   | ealth Yes —  |   |  |
| In cases of intellectual or cognitive disability  | disability — —   |   |  |
| In cases of incest  |  | _   | _  |
| In cases of rape  |  | _   | _  |
| In cases of foetal impairment   |  | Yes   | _  |
| For economic or social reason   |  | Yes   | _  |
| On request  |  | Yes   | _  |
| For other reason(s)   |  | -   | -  |
| Pers  | ons who can be criminally charg  | ed for an illegal abortion  |  |
| Woman —   | Provider -   | Other person who assists the wo   | oman —   |
| uthorizations required  |  | Consent required  |  |
| uthorizations required  |  | Consent required  |  |
| Authorization of health care professional(s)  | Varies by jurisdiction   | Spousal consent   | Varies by jurisdiction   |
| Number of authorizations  | _  | Parental consent for minors   | Varies by jurisdiction   |
| Cadre of health care professional Consent by another adult —  |  |   |  |
|   |  |   |  |
| Doctor (specialty not specified)  | _  |   |  |
| <u> </u>  | _<br>_   | Other requirements  |  |
| Doctor (specialty not specified)  | -<br>-<br>-  |   | Varies by jurisdiction   |
| Doctor (specialty not specified)  Specialist doctor, including OB/GYN   | -<br>-<br>-<br>-   | Other requirements  | Varies by jurisdiction Varies by jurisdiction  |
| Doctor (specialty not specified)  Specialist doctor, including OB/GYN  Nurse  | -<br>-<br>-<br>-   | Other requirements  Gestational age limits  |  |
| Doctor (specialty not specified)  Specialist doctor, including OB/GYN  Nurse  Midwife/nurse-midwife   | Varies by jurisdiction   | Other requirements  Gestational age limits  Compulsory counselling  | Varies by jurisdiction   |
| Doctor (specialty not specified)  Specialist doctor, including OB/GYN  Nurse  Midwife/nurse-midwife  Other providers  | -<br>-<br>-  | Other requirements  Gestational age limits  Compulsory counselling  Compulsory waiting period   | Varies by jurisdiction   |
| Doctor (specialty not specified) Specialist doctor, including OB/GYN Nurse Midwife/nurse-midwife Other providers Authorized in specially licensed facilities  | -<br>-<br>-  | Other requirements  Gestational age limits  Compulsory counselling  Compulsory waiting period  Length of waiting period (days)  | Varies by jurisdiction   |
| Doctor (specialty not specified) Specialist doctor, including OB/GYN Nurse Midwife/nurse-midwife Other providers Authorized in specially licensed facilities Judicial authorization   | — — — Varies by jurisdiction   | Other requirements  Gestational age limits  Compulsory counselling  Compulsory waiting period  Length of waiting period (days)  Mandatory screening test  | Varies by jurisdiction  Varies by jurisdiction  —  |
| Doctor (specialty not specified)  Specialist doctor, including OB/GYN  Nurse  Midwife/nurse-midwife  Other providers  Authorized in specially licensed facilities  Judicial authorization  For minors   | Varies by jurisdiction   | Other requirements  Gestational age limits  Compulsory counselling  Compulsory waiting period  Length of waiting period (days)  Mandatory screening test  HIV test  | Varies by jurisdiction  Varies by jurisdiction  Varies by jurisdiction  Varies by jurisdiction   |
| Doctor (specialty not specified)  Specialist doctor, including OB/GYN  Nurse  Midwife/nurse-midwife  Other providers  Authorized in specially licensed facilities  Judicial authorization  For minors  In case of rape  Police report in case of rape | Varies by jurisdiction  Varies by jurisdiction  Varies by jurisdiction  Varies by jurisdiction | Other requirements  Gestational age limits  Compulsory counselling  Compulsory waiting period  Length of waiting period (days)  Mandatory screening test  HIV test  Other STI test(s)  Ultrasound viewing or listening to heartbeat   | Varies by jurisdiction  Varies by jurisdiction  —  Varies by jurisdiction  |
| Doctor (specialty not specified)  Specialist doctor, including OB/GYN  Nurse  Midwife/nurse-midwife  Other providers  Authorized in specially licensed facilities  Judicial authorization  For minors  In case of rape  Police report in case of rape | Varies by jurisdiction  Varies by jurisdiction  Varies by jurisdiction  Varies by jurisdiction | Other requirements  Gestational age limits  Compulsory counselling  Compulsory waiting period  Length of waiting period (days)  Mandatory screening test  HIV test  Other STI test(s)  Ultrasound viewing or listening to heartbeat   | Varies by jurisdiction  Varies by jurisdiction  Varies by jurisdiction  Varies by jurisdiction   |
| Doctor (specialty not specified)  Specialist doctor, including OB/GYN  Nurse  Midwife/nurse-midwife  Other providers  Authorized in specially licensed facilities  Judicial authorization  For minors  In case of rape  Police report in case of rape | Varies by jurisdiction  Varies by jurisdiction  Varies by jurisdiction  Varies by jurisdiction | Other requirements  Gestational age limits  Compulsory counselling  Compulsory waiting period  Length of waiting period (days)  Mandatory screening test  HIV test  Other STI test(s)  Ultrasound viewing or listening to heartbeat   | Varies by jurisdiction  Varies by jurisdiction  Varies by jurisdiction  Varies by jurisdiction   |
| Doctor (specialty not specified)  Specialist doctor, including OB/GYN  Nurse  Midwife/nurse-midwife  Other providers  Authorized in specially licensed facilities  Judicial authorization  For minors  In case of rape  Police report in case of rape | Varies by jurisdiction  Varies by jurisdiction  Varies by jurisdiction  Varies by jurisdiction | Other requirements  Gestational age limits  Compulsory counselling  Compulsory waiting period  Length of waiting period (days)  Mandatory screening test  HIV test  Other STI test(s)  Ultrasound viewing or listening to heartbeat  thout parental or judicial consent  Age limit for judicial consent (years) | Varies by jurisdiction  Varies by jurisdiction |

| ACCESS TO ABORTION SERVICES           |                                  |   |
|---------------------------------------|----------------------------------|---|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |
| Vacuum aspiration                     | _                                | _   |
| Dilatation and evacuation             | _                                | _   |
| Combination mifepristone- misoprostol | _                                | <del>-</del>                              |
| Misoprostol only                      | _                                | <del>-</del>                              |
| Other method(s)                       | _                                | <del>-</del>                              |
|                                       |                                  |   |



#### Australia

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |
|--|---|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |
| Mifepristone and/or combination mifepristone-misoprostol | Yes   | _  |
| Misoprostol  | <del>-</del>                                      | <del>-</del>   |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | _                  |
| Specialized abortion care public facilities       | <del>-</del>     | _                  |
| Private health-care centres or clinics            | <del>-</del>     | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | _                  |
| Other settings or facilities                      | _                | _                  |

| Health care personnel allowed to provide legal abortions |              |
|--|--------------|
| Doctors (speciality not specified)                       | _            |
| Specialist doctor, including OB/GYN                      | _            |
| Nurse  | _            |
| Midwife/nurse-midwife                                    | <del>_</del> |
| Other provider(s)  | _            |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |   |
|--|---|
| National guidelines on clinical and service delivery of induced abortion   | _ |
| National guidelines on clinical and service delivery of post-abortion care | _ |
| Restrictions on public information on legal abortion services              | _ |
| Counselling for contraceptive methods during<br>post-abortion care         | _ |

| Service delivery requirements for providers or facilities |   |
|---|---|
| Referral linkage to a higher-level facility               | _ |
| Availability of a specialist doctor                       | _ |
| Minimum number of beds                                    | _ |
| Other facility/provider requirements                      | _ |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to<br>alternative provider or facility |
|--|-------------------|--|
| Health-care facilities   | _                 | _  |
| Health-care providers  | _                 | _  |

#### Notes:

- Indicates that data are not available, not applicable or not specified.
- 1. Varies by jurisdiction.



Age limit for parental consent (years)

### Abortion laws and policies, 2017

#### **Austria**

| LAWS ON ABORTION                                 |                                      |   |
|--|--------------------------------------|---|
| egal grounds for induced abortion                | Currently permissible in the country | Gestational limit for each legal ground (weeks) |
| To save life                                     | Yes                                  | No limit  |
| To preserve health                               | Yes                                  | No limit  |
| To preserve physical health                      | Yes                                  | No limit  |
| To preserve mental health                        | Yes                                  | No limit  |
| In cases of intellectual or cognitive disability | <del>-</del>                         | _   |
| In cases of incest                               | <del>-</del>                         | _   |
| In cases of rape                                 | <del>-</del>                         | _   |
| In cases of foetal impairment                    | Yes                                  | No limit  |
| For economic or social reason                    | <del>-</del>                         | _   |
| On request                                       | Yes                                  | 12  |
| For other reason(s)                              | Yes 1                                | _   |

|       | Persons who can be criminally charged for an illegal abortion |          |     |                                    |   |
|-------|---|----------|-----|------------------------------------|---|
| Woman | Yes   | Provider | Yes | Other person who assists the woman | _ |

| uthorizations required                       | Consent required                             |     |
|--|--|-----|
| Authorization of health care professional(s) | Spousal consent                              | _   |
| Number of authorizations                     | Parental consent for minors                  | Yes |
| Cadre of health care professional            | Consent by another adult                     | Yes |
| Doctor (specialty not specified)             | _  |     |
| Specialist doctor, including OB/GYN          | Other requirements                           |     |
| Nurse -                                      | Gestational age limits                       | Yes |
| Midwife/nurse-midwife -                      | Compulsory counselling                       | _   |
| Other providers -                            | Compulsory waiting period                    | _   |
| Authorized in specially licensed facilities  | Length of waiting period (days)              | _   |
| Judicial authorization                       | Mandatory screening test                     |     |
| For minors                                   | HIV test                                     | _   |
| In case of rape                              | Other STI test(s)                            | _   |
| Police report in case of rape                | Ultrasound viewing or listening to heartbeat | _   |

Age when a woman can obtain an abortion without parental or judicial consent

|                                       | Sex-selective abortion                                      |
|---------------------------------------|---|
| Prohibition of sex-selective abortion | Restrictions on the methods to detect the sex of the foetus |

Age limit for judicial consent (years)

| ACCESS TO ABORTION SERVICES           |                                  |   |
|---------------------------------------|----------------------------------|---|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |
| Vacuum aspiration                     | <del>-</del>                     | _   |
| Dilatation and evacuation             | <del>-</del>                     | _   |
| Combination mifepristone- misoprostol | Yes                              | 9   |
| Misoprostol only                      | _                                | _   |
| Other method(s)                       | <del>-</del>                     | _   |



#### **Austria**

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |
|--|---|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |
| Mifepristone and/or combination mifepristone-misoprostol | Yes   | <del>-</del>   |
| Misoprostol  | Yes <sup>2</sup>                                  | Yes <sup>3</sup>   |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | _                  |
| Specialized abortion care public facilities       | <del>-</del>     | _                  |
| Private health-care centres or clinics            | <del>-</del>     | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | _                  |
| Other settings or facilities                      | _                | _                  |

| Health care personnel allowed to provide legal abortion | ons |
|---|-----|
| Doctors (speciality not specified)                      | Yes |
| Specialist doctor, including OB/GYN                     | _   |
| Nurse   | _   |
| Midwife/nurse-midwife                                   | _   |
| Other provider(s)                                       | _   |

| Types of insurance or other coverage for abortion                  |     |
|--|-----|
| Public health coverage for induced abortion for all women          | Yes |
| Public health coverage for induced abortion for<br>poor women only | No  |
| Public health coverage for abortion complications                  | Yes |
| Private health coverage for induced abortion                       | _   |
| Other type of coverage   | _   |

| Information and guidelines on abortion services                            |   |
|--|---|
| National guidelines on clinical and service delivery of induced abortion   | _ |
| National guidelines on clinical and service delivery of post-abortion care | _ |
| Restrictions on public information on legal abortion services              | _ |
| Counselling for contraceptive methods during post-abortion care            | _ |

| Service delivery requirements for providers or facilities |   |  |
|---|---|--|
| Referral linkage to a higher-level facility               | _ |  |
| Availability of a specialist doctor                       | _ |  |
| Minimum number of beds                                    | _ |  |
| Other facility/provider requirements                      | _ |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | Yes <sup>4</sup>  | _   |

#### Notes:

- If the girl was below the age of 14 when getting pregnant.
   For gynaecological indications.
   With prescription only.
   Provider type not specified.



### Azerbaijan

| LAWS ON ABORTION                                 |   |   |  |
|--|---|---|--|
| Legal grounds for induced abortion               | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | No limit  |  |
| To preserve health                               | Yes                                     | No limit  |  |
| To preserve physical health                      | <del>-</del>                            | <del>_</del>                                    |  |
| To preserve mental health                        | <del>-</del>                            | _   |  |
| In cases of intellectual or cognitive disability | <del>-</del>                            | _   |  |
| In cases of incest                               | <del>-</del>                            | _   |  |
| In cases of rape                                 | _                                       | _   |  |
| In cases of foetal impairment                    | _                                       | _   |  |
| For economic or social reason                    | Yes                                     | 22  |  |
| On request                                       | Yes                                     | 12  |  |
| For other reason(s)                              | _                                       | _   |  |

| Persons who can be criminally charged for an illegal abortion |   |          |     |                                    |     |  |
|---|---|----------|-----|------------------------------------|-----|--|
| Woman   | _ | Provider | Yes | Other person who assists the woman | Yes |  |

Parental consent for minors

|  | REQUIREMENTS FOR INDUCED ABORTION |                       |
|--|-----------------------------------|-----------------------|
| Authorizations required                      |                                   | Consent required      |
| Authorization of health care professional(s) | Yes                               | Spousal consent       |
| Number of authorizations                     | _                                 | Parental consent for  |
| Cadre of health care professional            |                                   | Consent by another    |
| Doctor (specialty not specified)             | _                                 |                       |
| Specialist doctor, including OB/GYN          | _                                 | Other requirements    |
| Nurse  | _                                 | Gestational age limit |
| Midwife/nurse-midwife                        | _                                 | Compulsory counsel    |
| Other providers                              | _                                 | Compulsory waiting    |
| Authorized in specially licensed facilities  | _                                 | Length of waitin      |
| Judicial authorization                       |                                   | Mandatory screening   |
| For minors                                   | _                                 | HIV test              |
| In case of rape                              | _                                 | Other STI test(s      |
| Police report in case of rape                | _                                 | Ultrasound viewing of |

| Consent by another adult                     | _   |  |
|--|-----|--|
|  |     |  |
| Other requirements                           |     |  |
| Gestational age limits                       | Yes |  |
| Compulsory counselling                       | _   |  |
| Compulsory waiting period                    | _   |  |
| Length of waiting period (days)              | _   |  |
| Mandatory screening test                     |     |  |
| HIV test                                     | _   |  |
| Other STI test(s)                            | _   |  |
| Ultrasound viewing or listening to heartbeat | _   |  |

| Age when a woman can obtain an abortion without parental or judicial consent |  |   |
|--|--|---|
| Age limit for parental consent (years)                                       | <ul> <li>Age limit for judicial consent (years)</li> </ul> | _ |

|                                       | Sex-selective abortion                                      |
|---------------------------------------|---|
| Prohibition of sex-selective abortion | Restrictions on the methods to detect the sex of the foetus |

| ACCESS TO ABORTION SERVICES           |                                  |   |  |  |
|---------------------------------------|----------------------------------|---|--|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |  |
| Vacuum aspiration                     | _                                | <del>-</del>                              |  |  |
| Dilatation and evacuation             | <del>-</del>                     | <del>-</del>                              |  |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | <del>-</del>                              |  |  |
| Misoprostol only                      | _                                | <del>-</del>                              |  |  |
| Other method(s)                       | _                                | _   |  |  |



### Azerbaijan

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | _   | _  |  |
| Misoprostol  | _   | _  |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | _                | <del>-</del>       |
| Secondary (district-level) health-care facilities | Yes              | <del>-</del>       |
| Specialized abortion care public facilities       | _                | _                  |
| Private health-care centres or clinics            | Yes              | <del>-</del>       |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | _                | <del>-</del>       |

| Health care personnel allowed to provide legal abortions |     |  |
|--|-----|--|
| Doctors (speciality not specified)                       | Yes |  |
| Specialist doctor, including OB/GYN                      | _   |  |
| Nurse  | No  |  |
| Midwife/nurse-midwife                                    | No  |  |
| Other provider(s)  | _   |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |   |
|--|---|
| National guidelines on clinical and service delivery of induced abortion   | _ |
| National guidelines on clinical and service delivery of post-abortion care | _ |
| Restrictions on public information on legal abortion services              | _ |
| Counselling for contraceptive methods during<br>post-abortion care         | _ |

| Service delivery requirements for providers or facilities |     |  |
|---|-----|--|
| Referral linkage to a higher-level facility               | _   |  |
| Availability of a specialist doctor                       | Yes |  |
| Minimum number of beds                                    | _   |  |
| Other facility/provider requirements                      | _   |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to<br>alternative provider or facility |
|--|-------------------|--|
| Health-care facilities   | _                 | _  |
| Health-care providers  | _                 | _  |

Indicates that data are not available, not applicable or not specified.



Prohibition of sex-selective abortion

# Abortion laws and policies, 2017

### **Bahamas**

| LAWS ON ABORTION                                 |   |   |
|--|---|---|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |
| To save life                                     | Yes                                     | <del>-</del>                                    |
| To preserve health                               | Yes                                     | <del>-</del>                                    |
| To preserve physical health                      | Yes                                     | <del>-</del>                                    |
| To preserve mental health                        | <del>-</del>                            | <del>-</del>                                    |
| In cases of intellectual or cognitive disability | No                                      | <del>-</del>                                    |
| In cases of incest                               | <del>-</del>                            | <del>-</del>                                    |
| In cases of rape                                 | _                                       | <del>-</del>                                    |
| In cases of foetal impairment                    | _                                       | _   |
| For economic or social reason                    | No                                      | _   |
| On request                                       | No                                      | _   |
| For other reason(s)                              | _                                       | _   |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |  |  |
|--|--|--|
| Authorizations required                      | Consent required                             |  |
| Authorization of health care professional(s) | Spousal consent —                            |  |
| Number of authorizations                     | Parental consent for minors                  |  |
| Cadre of health care professional            | Consent by another adult —                   |  |
| Doctor (specialty not specified)             | -  |  |
| Specialist doctor, including OB/GYN          | Other requirements                           |  |
| Nurse  | Gestational age limits —                     |  |
| Midwife/nurse-midwife                        | Compulsory counselling —                     |  |
| Other providers                              | Compulsory waiting period —                  |  |
| Authorized in specially licensed facilities  | Length of waiting period (days)              |  |
| Judicial authorization                       | Mandatory screening test                     |  |
| For minors                                   | – HIV test –                                 |  |
| In case of rape                              | Other STI test(s)                            |  |
| Police report in case of rape                | Ultrasound viewing or listening to heartbeat |  |

| Age when a woman can obtain an abortion without parental or judicial consent |  |  |
|--|--|--|
| Age limit for parental consent (years)                                       | <ul><li>Age limit for judicial consent (years)</li></ul> |  |
|  |  |  |
|  | Sex-selective abortion                                   |  |

Restrictions on the methods to detect the sex

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | _                                | <del>-</del>                              |  |
| Dilatation and evacuation             | _                                | <del>-</del>                              |  |
| Combination mifepristone- misoprostol | _                                | <del>-</del>                              |  |
| Misoprostol only                      | _                                | _   |  |
| Other method(s)                       | _                                | _   |  |



#### **Bahamas**

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |
|--|---|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |
| Mifepristone and/or combination mifepristone-misoprostol | _   | _  |
| Misoprostol  | _   | <del>-</del>   |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | _                | <del>-</del>       |
| Specialized abortion care public facilities       | <del>-</del>     | <del>-</del>       |
| Private health-care centres or clinics            | <del>-</del>     | <del>-</del>       |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | _                | _                  |

| Health care personnel allowed to provide legal abortions |   |  |
|--|---|--|
| Doctors (speciality not specified)                       | _ |  |
| Specialist doctor, including OB/GYN                      | _ |  |
| Nurse  | _ |  |
| Midwife/nurse-midwife                                    | _ |  |
| Other provider(s)  | _ |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |   |
|--|---|
| National guidelines on clinical and service delivery of induced abortion   | _ |
| National guidelines on clinical and service delivery of post-abortion care | _ |
| Restrictions on public information on legal abortion services              | _ |
| Counselling for contraceptive methods during<br>post-abortion care         | _ |

| Service delivery requirements for providers or facilities |   |  |
|---|---|--|
| Referral linkage to a higher-level facility               | _ |  |
| Availability of a specialist doctor                       | _ |  |
| Minimum number of beds                                    | _ |  |
| Other facility/provider requirements                      | _ |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | <del>_</del>      | _   |
| Health-care providers  | _                 | <del>_</del>  |

#### Notes:

Indicates that data are not available, not applicable or not specified

<sup>1.</sup> Any act which is done, in good faith and without negligence, for the purposes of medical or surgical treatment of a pregnant woman is justifiable, although it causes or is intended to cause abortion or miscarriage, or premature delivery, or the death of the child. Abortions are reportedly performed on the grounds of foetal deformity and rape or incest, as well as on health grounds.



#### Bahrain

| LAWS ON ABORTION                                 |   |   |  |
|--|---|---|--|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | _   |  |
| To preserve health                               | _                                       | _   |  |
| To preserve physical health                      | <del>-</del>                            | <del>_</del>                                    |  |
| To preserve mental health                        | <del>-</del>                            | <del>-</del>                                    |  |
| In cases of intellectual or cognitive disability | _                                       | _   |  |
| In cases of incest                               | <del>-</del>                            | <del>-</del>                                    |  |
| In cases of rape                                 | _                                       | _   |  |
| In cases of foetal impairment                    | _                                       | _   |  |
| For economic or social reason                    | _                                       | _   |  |
| On request                                       | Yes                                     | _   |  |
| For other reason(s)                              | _                                       | _   |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |     |  |     |  |
|--|-----|--|-----|--|
| Authorizations required                      |     | Consent required                             |     |  |
| Authorization of health care professional(s) | Yes | Spousal consent                              | Yes |  |
| Number of authorizations                     | 3 2 | Parental consent for minors                  | Yes |  |
| Cadre of health care professional            |     | Consent by another adult                     | Yes |  |
| Doctor (specialty not specified)             | Yes |  |     |  |
| Specialist doctor, including OB/GYN          | Yes | Other requirements                           |     |  |
| Nurse  | _   | Gestational age limits                       | _   |  |
| Midwife/nurse-midwife                        | _   | Compulsory counselling                       | _   |  |
| Other providers                              | Yes | Compulsory waiting period                    | _   |  |
| Authorized in specially licensed facilities  | Yes | Length of waiting period (days)              | _   |  |
| Judicial authorization                       |     | Mandatory screening test                     |     |  |
| For minors                                   | _   | HIV test                                     | _   |  |
| In case of rape                              | _   | Other STI test(s)                            | _   |  |
| Police report in case of rape                | _   | Ultrasound viewing or listening to heartbeat | _   |  |

| Age when a woman can obtain an abortion without parental or judicial consent |   |  |   |
|--|---|--|---|
| Age limit for parental consent (years)                                       | _ | Age limit for judicial consent (years) | _ |
|  |   |  |   |
|  |   |  |   |

|                                       | Sex-selective abortion                                      |
|---------------------------------------|---|
| Prohibition of sex-selective abortion | Restrictions on the methods to detect the sex of the foetus |

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | _                                | <del>-</del>                              |  |
| Dilatation and evacuation             | <del>-</del>                     | <del>-</del>                              |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | <del>-</del>                              |  |
| Misoprostol only                      | <del>-</del>                     | _   |  |
| Other method(s)                       | <del>-</del>                     | <del>-</del>                              |  |



#### **Bahrain**

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |  |
| Misoprostol  | Yes <sup>3</sup>                                  | Yes <sup>4</sup>   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | No               | _                  |
| Secondary (district-level) health-care facilities | Yes              | _                  |
| Specialized abortion care public facilities       | _                | _                  |
| Private health-care centres or clinics            | Yes              | _                  |
| NGO health-care centres or clinics                | _                | <del>-</del>       |
| Other settings or facilities                      | _                | _                  |

| Health care personnel allowed to provide legal abortions |     |  |
|--|-----|--|
| Doctors (speciality not specified)                       | No  |  |
| Specialist doctor, including OB/GYN                      | Yes |  |
| Nurse  | No  |  |
| Midwife/nurse-midwife                                    | _   |  |
| Other provider(s)  | _   |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | Yes |
| National guidelines on clinical and service delivery of post-abortion care | Yes |
| Restrictions on public information on legal abortion services              | _   |
| Counselling for contraceptive methods during post-abortion care            | _   |

| Service delivery requirements for providers or facilities |     |  |
|---|-----|--|
| Referral linkage to a higher-level facility               | _   |  |
| Availability of a specialist doctor                       | Yes |  |
| Minimum number of beds                                    | _   |  |
| Other facility/provider requirements                      | _   |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to<br>alternative provider or facility |
|--|-------------------|--|
| Health-care facilities   | _                 | _  |
| Health-care providers  | _                 | _  |

#### Notes:

- Abortion is unlawful if carried out by a pregnant woman on herself without the knowledge or counselling of a physical, or if carried out by another person without consent of the woman.
   In the case that a pregnant woman suffers complications due to a medical or surgical problem that jeopardizes her health, a specialist doctor must be consulted.
   For gynaecological indications.
   With prescription only.



Age limit for parental consent (years)

# Abortion laws and policies, 2017

### **Bangladesh**

| LAWS ON ABORTION 1                               |                                      |   |
|--|--------------------------------------|---|
| egal grounds for induced abortion                | Currently permissible in the country | Gestational limit for each legal ground (weeks) |
| To save life                                     | Yes                                  | No limit  |
| To preserve health                               | No                                   | <del>-</del>                                    |
| To preserve physical health                      | No                                   | <del>-</del>                                    |
| To preserve mental health                        | No                                   | _   |
| In cases of intellectual or cognitive disability | No                                   | _   |
| In cases of incest                               | No                                   | <del>-</del>                                    |
| In cases of rape                                 | No                                   | <del>-</del>                                    |
| In cases of foetal impairment                    | No                                   | _   |
| For economic or social reason                    | No                                   | <del>-</del>                                    |
| On request                                       | No                                   | <del>-</del>                                    |
| For other reason(s)                              | Yes <sup>2</sup>                     | _   |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| Authorizations required                      | Consent required                             |     |
|--|--|-----|
| Authorization of health care professional(s) | Spousal consent                              | _   |
| Number of authorizations -                   | Parental consent for minors                  | Yes |
| Cadre of health care professional            | Consent by another adult                     | Yes |
| Doctor (specialty not specified)             |  |     |
| Specialist doctor, including OB/GYN -        | Other requirements                           |     |
| Nurse -                                      | Gestational age limits                       | Yes |
| Midwife/nurse-midwife -                      | Compulsory counselling                       | No  |
| Other providers -                            | Compulsory waiting period                    | _   |
| Authorized in specially licensed facilities  | Length of waiting period (days)              | _   |
| Judicial authorization                       | Mandatory screening test                     |     |
| For minors                                   | HIV test                                     | _   |
| In case of rape                              | Other STI test(s)                            | _   |
| Police report in case of rape                | Ultrasound viewing or listening to heartbeat | _   |

|                                       | Sex-selective abortion                                      |  |
|---------------------------------------|---|--|
| Prohibition of sex-selective abortion | Restrictions on the methods to detect the sex of the foetus |  |

Age limit for judicial consent (years)

Age when a woman can obtain an abortion without parental or judicial consent

| ACCESS TO ABORTION SERVICES           |                                  |   |
|---------------------------------------|----------------------------------|---|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |
| Vacuum aspiration                     | Yes                              | 10  |
| Dilatation and evacuation             | <del>-</del>                     | <del>-</del>                              |
| Combination mifepristone- misoprostol | Yes                              | 9   |
| Misoprostol only                      | Yes                              | <del>-</del>                              |
| Other method(s)                       | Yes <sup>3</sup>                 | <del>-</del>                              |



### **Bangladesh**

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | _   | _  |  |
| Misoprostol  | Yes <sup>4</sup>                                  | _  |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | Yes              | <u> </u>           |
| Secondary (district-level) health-care facilities | Yes              | Yes                |
| Specialized abortion care public facilities       | _                | _                  |
| Private health-care centres or clinics            | <del>-</del>     | Yes                |
| NGO health-care centres or clinics                | <del>-</del>     | Yes                |
| Other settings or facilities                      | Yes <sup>5</sup> | Yes <sup>6</sup>   |

| Health care personnel allowed to provide legal abortions |                  |  |
|--|------------------|--|
| Doctors (speciality not specified)                       | Yes              |  |
| Specialist doctor, including OB/GYN                      | Yes              |  |
| Nurse  | _                |  |
| Midwife/nurse-midwife                                    | _                |  |
| Other provider(s)  | Yes <sup>7</sup> |  |
|  |                  |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | Yes |
| National guidelines on clinical and service delivery of post-abortion care | Yes |
| Restrictions on public information on legal abortion services              | _   |
| Counselling for contraceptive methods during<br>post-abortion care         | Yes |

| Service delivery requirements for providers or facilities |                  |  |
|---|------------------|--|
| Referral linkage to a higher-level facility               | _                |  |
| Availability of a specialist doctor                       | _                |  |
| Minimum number of beds                                    | _                |  |
| Other facility/provider requirements                      | Yes <sup>8</sup> |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | Yes <sup>9</sup>  | Yes   |

#### Notes:

- Indicates that data are not available, not applicable or not specified.

- I. Varies by jurisdiction.

  2. Menstrual regulation is available on request for women with a last menstrual period of 10 weeks or less.

  3. Dilation and curettage.

  4. For gynaecological indications.

  5. Government medical colleges or family planning unit.

  6. For menstrual regulation is permitted and can be performed on an outpatient basis by a paramedic or in health care centres from primary level upwards by other trained health professionals.

  7. Menstrual regulation is permitted and can be performed on an outpatient basis by a paramedic or in health care centres from primary level upwards by other trained health professionals.

  8. The Bangladesh National Menstrual Regulation Services Guideline states that menstrual regulation using vacuum aspiration (VA) can be performed in all the services centres of DGFP, medical college hospitals, district hospitals and NGOs and private clinics, with a setting equivalent to a basic outpatient procedure room, or a minor or major operation theatre.

  9. Provider type not specified.



#### Barbados

| LAWS ON ABORTION                                 |   |   |  |
|--|---|---|--|
| Legal grounds for induced abortion               | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | No limit  |  |
| To preserve health                               | Yes                                     | No limit  |  |
| To preserve physical health                      | Yes                                     | <del>-</del>                                    |  |
| To preserve mental health                        | Yes                                     | <del>-</del>                                    |  |
| In cases of intellectual or cognitive disability | <del>-</del>                            | <del>-</del>                                    |  |
| In cases of incest                               | Yes                                     | _   |  |
| In cases of rape                                 | Yes                                     | <del>-</del>                                    |  |
| In cases of foetal impairment                    | Yes                                     | <del>-</del>                                    |  |
| For economic or social reason                    | Yes                                     | _   |  |
| On request                                       | <del>-</del>                            | <del>-</del>                                    |  |
| For other reason(s)                              | _                                       | _   |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |     |  |     |  |
|--|-----|--|-----|--|
| Authorizations required                      |     | Consent required                             |     |  |
| Authorization of health care professional(s) | Yes | Spousal consent                              | No  |  |
| Number of authorizations                     | 2 1 | Parental consent for minors                  | Yes |  |
| Cadre of health care professional            |     | Consent by another adult                     | Yes |  |
| Doctor (specialty not specified)             | Yes |  |     |  |
| Specialist doctor, including OB/GYN          | _   | Other requirements                           |     |  |
| Nurse  | _   | Gestational age limits                       | Yes |  |
| Midwife/nurse-midwife                        | _   | Compulsory counselling                       | Yes |  |
| Other providers                              | _   | Compulsory waiting period                    | _   |  |
| Authorized in specially licensed facilities  | Yes | Length of waiting period (days)              | _   |  |
| Judicial authorization                       |     | Mandatory screening test                     |     |  |
| For minors                                   | No  | HIV test                                     | _   |  |
| In case of rape                              | No  | Other STI test(s)                            | _   |  |
| Police report in case of rape                | No  | Ultrasound viewing or listening to heartbeat | _   |  |

| Age limit for parental consent (years) | 16            | Age limit for judicial consent (years)        | _ |
|--|---------------|---|---|
|  |               |   |   |
|  | Sex-selective | abortion                                      |   |
| Drabibition of any collective abortion |               | Restrictions on the methods to detect the sex |   |

Age when a woman can obtain an abortion without parental or judicial consent

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | _                                | <del>-</del>                              |  |
| Dilatation and evacuation             | <del>-</del>                     | <del>-</del>                              |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | <del>-</del>                              |  |
| Misoprostol only                      | <del>-</del>                     | _   |  |
| Other method(s)                       | <del>-</del>                     | <del>-</del>                              |  |



#### Barbados

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |  |
| Misoprostol  | Yes <sup>2</sup>                                  | No   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | _                | <del>-</del>       |
| Secondary (district-level) health-care facilities | Yes              | <del>-</del>       |
| Specialized abortion care public facilities       | _                | <del>-</del>       |
| Private health-care centres or clinics            | _                | <del>-</del>       |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | _                | _                  |

| Health care personnel allowed to provide legal abortions |                  |
|--|------------------|
| Doctors (speciality not specified)                       | _                |
| Specialist doctor, including OB/GYN                      | _                |
| Nurse  | _                |
| Midwife/nurse-midwife                                    | _                |
| Other provider(s)  | Yes <sup>3</sup> |
|  |                  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |   |
|--|---|
| National guidelines on clinical and service delivery of induced abortion   | _ |
| National guidelines on clinical and service delivery of post-abortion care | _ |
| Restrictions on public information on legal abortion services              | _ |
| Counselling for contraceptive methods during<br>post-abortion care         | _ |

| Service delivery requirements for providers or facilities |   |  |
|---|---|--|
| Referral linkage to a higher-level facility               | _ |  |
| Availability of a specialist doctor                       | _ |  |
| Minimum number of beds                                    | _ |  |
| Other facility/provider requirements                      | _ |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | Yes <sup>4</sup>  | _   |

#### Notes:

- Indicates that data are not available, not applicable or not specified.
- An abortion before 20 weeks of gestation requires two authorisations. After 20 weeks three authorisations are required.
   Indications not specified.
   Medical practitioner.
   Provider type not specified.



### Belarus

| LAWS ON ABORTION                                 |   |   |  |
|--|---|---|--|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | No limit  |  |
| To preserve health                               | Yes                                     | No limit  |  |
| To preserve physical health                      | Yes                                     | _   |  |
| To preserve mental health                        | Yes                                     | _   |  |
| In cases of intellectual or cognitive disability | _                                       | _   |  |
| In cases of incest                               | <del>-</del>                            | _   |  |
| In cases of rape                                 | Yes                                     | _   |  |
| In cases of foetal impairment                    | _                                       | _   |  |
| For economic or social reason                    | Yes                                     | 22  |  |
| On request                                       | Yes                                     | 12  |  |
| For other reason(s)                              | _                                       | _   |  |

|       |   | Persons who can be criminally | charged for a | n illegal abortion                 |   |  |
|-------|---|-------------------------------|---------------|------------------------------------|---|--|
| Woman | _ | Provider                      | Yes           | Other person who assists the woman | _ |  |

| REQUIREMENTS FOR INDUCED ABORTION            |     |  |     |  |
|--|-----|--|-----|--|
| Authorizations required                      |     | Consent required                             |     |  |
| Authorization of health care professional(s) | Yes | Spousal consent                              | No  |  |
| Number of authorizations                     | 1   | Parental consent for minors                  | Yes |  |
| Cadre of health care professional            |     | Consent by another adult                     | _   |  |
| Doctor (specialty not specified)             | _   |  |     |  |
| Specialist doctor, including OB/GYN          | Yes | Other requirements                           |     |  |
| Nurse  | _   | Gestational age limits                       | Yes |  |
| Midwife/nurse-midwife                        | _   | Compulsory counselling                       | _   |  |
| Other providers                              | _   | Compulsory waiting period                    | _   |  |
| Authorized in specially licensed facilities  | Yes | Length of waiting period (days)              | _   |  |
| Judicial authorization                       |     | Mandatory screening test                     |     |  |
| For minors                                   | No  | HIV test                                     | _   |  |
| In case of rape                              | _   | Other STI test(s)                            | _   |  |
| Police report in case of rape                | _   | Ultrasound viewing or listening to heartbeat | _   |  |

| Age when a woman can obtain an abortion without parental or judicial consent |   |  |   |  |
|--|---|--|---|--|
| Age limit for parental consent (years)                                       | _ | Age limit for judicial consent (years) | _ |  |
|  |   |  |   |  |

|                                       | Sex-selective abortion |   |
|---------------------------------------|------------------------|---|
| Prohibition of sex-selective abortion | Yes                    | Restrictions on the methods to detect the sex of the foetus |

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | <del>-</del>                     | _   |  |
| Dilatation and evacuation             | _                                | _   |  |
| Combination mifepristone- misoprostol | Yes                              | 7   |  |
| Misoprostol only                      | _                                | _   |  |
| Other method(s)                       | _                                | _   |  |



#### Belarus

| ACCESS TO ABORTION SERVICES (continued)  |   |              |  |  |
|--|---|--------------|--|--|
| Drugs for inducing abortion Included in the official list Allowed to be sold or of authorized drugs distributed by pharmacies or drug stor |   |              |  |  |
| Mifepristone and/or combination mifepristone-misoprostol   | _ | _            |  |  |
| Misoprostol  | _ | <del>-</del> |  |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>_</del>     | <del>_</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | _                  |
| Specialized abortion care public facilities       | <del>-</del>     | _                  |
| Private health-care centres or clinics            | <del>-</del>     | <del>-</del>       |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | _                | _                  |

| Health care personnel allowed to provide legal abortions |     |  |
|--|-----|--|
| Doctors (speciality not specified)                       | _   |  |
| Specialist doctor, including OB/GYN                      | Yes |  |
| Nurse  | _   |  |
| Midwife/nurse-midwife                                    | _   |  |
| Other provider(s)  | _   |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Yes |
|-----|
| _   |
| _   |
| Yes |
|     |

| Service delivery requirements for providers or facilities |     |  |
|---|-----|--|
| Referral linkage to a higher-level facility               | _   |  |
| Availability of a specialist doctor                       | Yes |  |
| Minimum number of beds                                    | _   |  |
| Other facility/provider requirements                      | _   |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to<br>alternative provider or facility |
|--|-------------------|--|
| Health-care facilities   | _                 | _  |
| Health-care providers  | Yes 1             | _  |

#### Notes:

- Indicates that data are not available, not applicable or not specified.
- 1. Public-sector providers only.



Age limit for parental consent (years)

# Abortion laws and policies, 2017 Belgium

|  | <u> </u>                             |   |  |
|--|--------------------------------------|---|--|
| LAWS ON ABORTION                                 |                                      |   |  |
| Legal grounds for induced abortion               | Currently permissible in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                  | No limit  |  |
| To preserve health                               | Yes                                  | No limit  |  |
| To preserve physical health                      | _                                    | _   |  |
| To preserve mental health                        | _                                    | _   |  |
| In cases of intellectual or cognitive disability | _                                    | _   |  |
| In cases of incest                               | _                                    | _   |  |
| In cases of rape                                 | _                                    | _   |  |
| In cases of foetal impairment                    | Yes                                  | No limit  |  |
| For economic or social reason                    | _                                    | <del>-</del>                                    |  |
| On request                                       | Yes                                  | 12  |  |
| For other reason(s)                              | _                                    | _   |  |

| Persons who can be criminally charged for an illegal abortion |   |          |     |                                    |   |  |
|---|---|----------|-----|------------------------------------|---|--|
| Woman   | _ | Provider | Yes | Other person who assists the woman | _ |  |

| REQUIREMENTS FOR INDUCED ABORTION            |     |  |                |  |
|--|-----|--|----------------|--|
| uthorizations required                       |     | Consent required                             |                |  |
| Authorization of health care professional(s) | Yes | Spousal consent                              | No             |  |
| Number of authorizations                     | 1 2 | Parental consent for minors                  | No             |  |
| Cadre of health care professional            |     | Consent by another adult                     | <del>_</del>   |  |
| Doctor (specialty not specified)             | Yes |  |                |  |
| Specialist doctor, including OB/GYN          | _   | Other requirements                           |                |  |
| Nurse  | _   | Gestational age limits                       | Yes            |  |
| Midwife/nurse-midwife                        | _   | Compulsory counselling                       | Yes            |  |
| Other providers                              | _   | Compulsory waiting period                    | Yes            |  |
| Authorized in specially licensed facilities  | Yes | Length of waiting period (days)              | 6 <sup>3</sup> |  |
| Judicial authorization                       |     | Mandatory screening test                     |                |  |
| For minors                                   | No  | HIV test                                     | _              |  |
| In case of rape                              | _   | Other STI test(s)                            | _              |  |
| Police report in case of rape                | _   | Ultrasound viewing or listening to heartbeat | _              |  |

|                                       | Sex-selective a | bortion                                       |
|---------------------------------------|-----------------|---|
| Prohibition of sex-selective abortion | Yes             | Restrictions on the methods to detect the sex |

Age limit for judicial consent (years)

Age when a woman can obtain an abortion without parental or judicial consent

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | _                                | _   |  |
| Dilatation and evacuation             | <del>-</del>                     | _   |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | _   |  |
| Misoprostol only                      | _                                | _   |  |
| Other method(s)                       | <del>-</del>                     | _   |  |



### Belgium

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |  |
|--|---|--|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |  |
| Mifepristone and/or combination mifepristone-misoprostol | Yes   | Yes <sup>4</sup>   |  |  |
| Misoprostol  | Yes <sup>5</sup>                                  |  |  |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | _                | <del>-</del>       |
| Specialized abortion care public facilities       | _                | Yes                |
| Private health-care centres or clinics            | _                | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | Yes <sup>6</sup> | _                  |

| Health care personnel allowed to provide legal abortions |     |  |
|--|-----|--|
| Doctors (speciality not specified)                       | Yes |  |
| Specialist doctor, including OB/GYN                      | _   |  |
| Nurse  | _   |  |
| Midwife/nurse-midwife                                    | _   |  |
| Other provider(s)  | _   |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | _   |
| National guidelines on clinical and service delivery of post-abortion care | _   |
| Restrictions on public information on legal abortion services              | _   |
| Counselling for contraceptive methods during<br>post-abortion care         | Yes |

| Service delivery requirements for providers or facilities |                  |  |
|---|------------------|--|
| Referral linkage to a higher-level facility               | Yes              |  |
| Availability of a specialist doctor                       | Yes              |  |
| Minimum number of beds                                    | _                |  |
| Other facility/provider requirements                      | Yes <sup>7</sup> |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | Yes <sup>8</sup>  | _   |

#### Notes:

- Indicates that data are not available, not applicable or not specified.
- 1. An abortion can be performed when a woman is in a state of distress, as assessed by a doctor.
  2. After 12 weeks of gestation, the pregnancy can only be terminated in case of serious risk to the woman's health or foetal impairment, and with the authorization of two doctors (no specialisation mentioned). Before 12 weeks only one doctor (no mention of a specialisation) is required for the abortion to take place, but his authorization is not necessary beyond assessment of the woman's situation of distress and informed consent to go ahead with the abortion.
  3. After first consultation with the doctor in the facility where the abortion will take place.
  4. With prescription only.

- 4. With prescription only.

  5. For gynaccological indications.

  6. Health care facility where there is an information service to accommodate the pregnant woman and give her detailed information, in particular on the rights, aids and benefits guaranteed by laws and decrees to families and unmarried mothers and their children, as well as the possibilities offered by the adoption of the unborn child and where, at the request of either the doctor or the woman, she shall be assisted and counselled on the means to which she may have recourse to solve the psychological and social problems posed by her situation. Medico-psycho-social support centre for unwanted pregnancy.

  7. Abortions must be practiced under good medical conditions, in a care facility where there is an information service that will accommodate the pregnant woman and give her detailed information.

  8. Provider type not specified.



#### Belize

| LAWS ON ABORTION                                 |   |   |  |
|--|---|---|--|
| Legal grounds for induced abortion               | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | No limit  |  |
| To preserve health                               | Yes                                     | No limit  |  |
| To preserve physical health                      | Yes                                     | No limit  |  |
| To preserve mental health                        | Yes                                     | No limit  |  |
| In cases of intellectual or cognitive disability | _                                       | _   |  |
| In cases of incest                               | No                                      | _   |  |
| In cases of rape                                 | No                                      | _   |  |
| In cases of foetal impairment                    | Yes                                     | No limit  |  |
| For economic or social reason                    | Yes                                     | _   |  |
| On request                                       | No                                      | _   |  |
| For other reason(s)                              | _                                       | _   |  |

|       |     | Persons who can be criminally cha | arged for | an illegal abortion                |     |
|-------|-----|-----------------------------------|-----------|------------------------------------|-----|
| Woman | Yes | Provider                          | Yes       | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |       |  |     |  |
|--|-------|--|-----|--|
| Authorizations required                      |       | Consent required                             |     |  |
| Authorization of health care professional(s) | Yes   | Spousal consent                              | No  |  |
| Number of authorizations                     | 2     | Parental consent for minors                  | Yes |  |
| Cadre of health care professional            |       | Consent by another adult                     | _   |  |
| Doctor (specialty not specified)             | _     |  |     |  |
| Specialist doctor, including OB/GYN          | _     | Other requirements                           |     |  |
| Nurse  | _     | Gestational age limits                       | _   |  |
| Midwife/nurse-midwife                        | _     | Compulsory counselling                       | _   |  |
| Other providers                              | Yes 1 | Compulsory waiting period                    | _   |  |
| Authorized in specially licensed facilities  | Yes   | Length of waiting period (days)              | _   |  |
| Judicial authorization                       |       | Mandatory screening test                     |     |  |
| For minors                                   | No    | HIV test                                     | _   |  |
| In case of rape                              | _     | Other STI test(s)                            | _   |  |
| Police report in case of rape                | _     | Ultrasound viewing or listening to heartbeat | _   |  |

| Ago Wildir a Wollian San Strain an abortion Wilload parollical of judicial Collectic |  |  |  |
|--|--|--|--|
| Age limit for parental consent (years)   | Age limit for judicial consent (years) |  |  |
|  |  |  |  |
|  |  |  |  |

|                                       | Sex-selective abortion |   |
|---------------------------------------|------------------------|---|
| Prohibition of sex-selective abortion | No                     | Restrictions on the methods to detect the sex of the foetus |

| ACCESS TO ABORTION SERVICES           |                                  |   |
|---------------------------------------|----------------------------------|---|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |
| Vacuum aspiration                     | _                                | <del>-</del>                              |
| Dilatation and evacuation             | <del>-</del>                     | <del>-</del>                              |
| Combination mifepristone- misoprostol | <del>-</del>                     | <del>-</del>                              |
| Misoprostol only                      | _                                | _   |
| Other method(s)                       | _                                | _   |



#### Belize

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |
|--|---|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |
| Mifepristone and/or combination mifepristone-misoprostol | <del>-</del>                                      | _  |
| Misoprostol  | <del>-</del>                                      | _  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>_</del>     | <del>_</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | <del>-</del>       |
| Specialized abortion care public facilities       | <del>-</del>     | <del>-</del>       |
| Private health-care centres or clinics            | <del>-</del>     | <del>-</del>       |
| NGO health-care centres or clinics                | _                | _                  |
| Other settings or facilities                      | _                | _                  |

| Health care personnel allowed to provide legal abortions |                  |  |
|--|------------------|--|
| Doctors (speciality not specified)                       | _                |  |
| Specialist doctor, including OB/GYN                      | _                |  |
| Nurse  | _                |  |
| Midwife/nurse-midwife                                    | _                |  |
| Other provider(s)  | Yes <sup>2</sup> |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |  |  |
|--|--|--|
| National guidelines on clinical and service delivery of induced abortion   |  |  |
| National guidelines on clinical and service delivery of post-abortion care |  |  |
| Restrictions on public information on legal abortion services              |  |  |
| Counselling for contraceptive methods during                               |  |  |

| Service delivery requirements for providers or facilities |              |  |
|---|--------------|--|
| Referral linkage to a higher-level facility               | _            |  |
| Availability of a specialist doctor                       | _            |  |
| Minimum number of beds                                    | <del>-</del> |  |
| Other facility/provider requirements                      | _            |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | Yes <sup>3</sup>  | <del>-</del>  |

#### Notes:

- Registered medical practitioner.
   Registered medical practitioners.
   Provider type not specified.



### Benin

| LAWS ON ABORTION                                 |   |   |
|--|---|---|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |
| To save life                                     | Yes                                     | _   |
| To preserve health                               | Yes                                     | <del>-</del>                                    |
| To preserve physical health                      | <del>-</del>                            | _   |
| To preserve mental health                        | <del>-</del>                            | _   |
| In cases of intellectual or cognitive disability | _                                       | _   |
| In cases of incest                               | Yes                                     | _   |
| In cases of rape                                 | Yes                                     | _   |
| In cases of foetal impairment                    | Yes                                     | _   |
| For economic or social reason                    | No                                      | _   |
| On request                                       | No                                      | _   |
| For other reason(s)                              | _                                       | _   |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABOR                |     | OR INDUCED ABORTION   |
|--|-----|-----------------------|
| Authorizations required                      |     | Consent required      |
| Authorization of health care professional(s) | Yes | Spousal consent       |
| Number of authorizations                     | 1 2 | Parental consent for  |
| Cadre of health care professional            |     | Consent by another    |
| Doctor (specialty not specified)             | Yes |                       |
| Specialist doctor, including OB/GYN          | _   | Other requirements    |
| Nurse  | _   | Gestational age limit |
| Midwife/nurse-midwife                        | _   | Compulsory counsel    |
| Other providers                              | _   | Compulsory waiting    |
| Authorized in specially licensed facilities  | Yes | Length of waitin      |
| Judicial authorization                       |     | Mandatory screening   |
| For minors                                   | _   | HIV test              |
| In case of rape                              | _   | Other STI test(s      |
| Police report in case of rape                | _   | Ultrasound viewing of |

| Parental consent for minors     | Yes          |
|---------------------------------|--------------|
| Consent by another adult        | <del>-</del> |
|                                 |              |
| Other requirements              |              |
| Gestational age limits          | Yes          |
| Compulsory counselling          | _            |
| Compulsory waiting period       | <del>-</del> |
| Length of waiting period (days) | _            |
| Mandatory screening test        |              |
| HIV test                        | _            |
| Other STI test(s)               | <del>_</del> |

Ultrasound viewing or listening to heartbeat

No

| Age when a woman can obtain an abortion without parental or judicial consent |  |   |  |
|--|--|---|--|
| Age limit for parental consent (years)                                       | <ul> <li>Age limit for judicial consent (years)</li> </ul> | _ |  |

|                                       | Sex-selective abortion |   |
|---------------------------------------|------------------------|---|
| Prohibition of sex-selective abortion | Yes                    | Restrictions on the methods to detect the sex of the foetus |

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | Yes                              | 14 or over                                |  |
| Dilatation and evacuation             | Yes                              | 14 or over                                |  |
| Combination mifepristone- misoprostol | Yes                              | 20  |  |
| Misoprostol only                      | Yes                              | 10  |  |
| Other method(s)                       | <del>-</del>                     | <del>-</del>                              |  |



#### Benin

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |  |
| Misoprostol  | Yes <sup>3</sup>                                  | <del>-</del>   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | No               | No                 |
| Secondary (district-level) health-care facilities | Yes              | Yes                |
| Specialized abortion care public facilities       | _                | <del>-</del>       |
| Private health-care centres or clinics            | Yes              | Yes                |
| NGO health-care centres or clinics                | _                | <del>-</del>       |
| Other settings or facilities                      | _                | <del>-</del>       |

| Health care personnel allowed to provide legal abortions |                  |  |
|--|------------------|--|
| Doctors (speciality not specified)                       | Yes              |  |
| Specialist doctor, including OB/GYN                      | Yes              |  |
| Nurse  | _                |  |
| Midwife/nurse-midwife                                    | Yes              |  |
| Other provider(s)  | Yes <sup>4</sup> |  |
|  |                  |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | _   |
| National guidelines on clinical and service delivery of post-abortion care | _   |
| Restrictions on public information on legal abortion services              | _   |
| Counselling for contraceptive methods during<br>post-abortion care         | Yes |

| Service delivery requirements for providers or | facilities   |
|--|--------------|
| Referral linkage to a higher-level facility    | <del>-</del> |
| Availability of a specialist doctor            | Yes          |
| Minimum number of beds                         | _            |
| Other facility/provider requirements           | _            |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | _                 | _   |

#### Notes:

- Indicates that data are not available, not applicable or not specified.
- 1. Abortion is permitted for minors in cases where this would negatively impact their development.
  2. The practitioner must consult at least two other doctors chosen for their competence, who, after review of the case, should jointly make a decision. A copy of the report of the consultation should be given to the patient and a copy kept by each of the two consultants. Also a memorandum of the decision that does not mention the name of the patient must be sent by registered mail to the Council.
  3. Indications not specified.
  4. Psychologist, though medical role is unspecified.



Age limit for parental consent (years)

# Abortion laws and policies, 2017

#### Bhutan

| LAWS ON ABORTION                                 |   |   |
|--|---|---|
| Legal grounds for induced abortion               | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |
| To save life                                     | Yes                                     | _   |
| To preserve health                               | Yes                                     | _   |
| To preserve physical health                      | <del>-</del>                            | _   |
| To preserve mental health                        | -                                       | _   |
| In cases of intellectual or cognitive disability | Yes                                     | _   |
| In cases of incest                               | Yes                                     | _   |
| In cases of rape                                 | Yes                                     | _   |
| In cases of foetal impairment                    | Yes                                     | _   |
| For economic or social reason                    | No                                      | _   |
| On request                                       | No                                      | _   |
| For other reason(s)                              | _                                       | _   |

| Persons who can be criminally charged for an illegal abortion |     |              |                                    |   |
|---|-----|--------------|------------------------------------|---|
| Woman   | Yes | Provider Yes | Other person who assists the woman | _ |

| REQUIREMENTS FOR INDUCED ABORTION            |   |  |   |
|--|---|--|---|
| Authorizations required                      |   | Consent required                             |   |
| Authorization of health care professional(s) | _ | Spousal consent                              | _ |
| Number of authorizations                     | _ | Parental consent for minors                  | _ |
| Cadre of health care professional            |   | Consent by another adult                     | _ |
| Doctor (specialty not specified)             | _ |  |   |
| Specialist doctor, including OB/GYN          | _ | Other requirements                           |   |
| Nurse  | _ | Gestational age limits                       | _ |
| Midwife/nurse-midwife                        | _ | Compulsory counselling                       | _ |
| Other providers                              | _ | Compulsory waiting period                    | _ |
| Authorized in specially licensed facilities  | _ | Length of waiting period (days)              | _ |
| Judicial authorization                       |   | Mandatory screening test                     |   |
| For minors                                   | _ | HIV test                                     | _ |
| In case of rape                              | _ | Other STI test(s)                            | _ |
| Police report in case of rape                | _ | Ultrasound viewing or listening to heartbeat | _ |

|                                       | Sex-selective abortion |   |
|---------------------------------------|------------------------|---|
| Prohibition of sex-selective abortion | _                      | Restrictions on the methods to detect the sex of the foetus |

Age limit for judicial consent (years)

Age when a woman can obtain an abortion without parental or judicial consent

| ACCESS TO ABORTION SERVICES           |                                  |   |
|---------------------------------------|----------------------------------|---|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |
| Vacuum aspiration                     | Yes                              | _   |
| Dilatation and evacuation             | <del>-</del>                     | <del>-</del>                              |
| Combination mifepristone- misoprostol | <del>-</del>                     | <del>-</del>                              |
| Misoprostol only                      | <del>-</del>                     | <del>-</del>                              |
| Other method(s)                       | Yes 1                            | <del>-</del>                              |



#### Bhutan

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | <del>-</del>   |  |
| Misoprostol  | Yes <sup>2</sup>                                  | <del>-</del>   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | _                | Yes                |
| Secondary (district-level) health-care facilities | _                | Yes                |
| Specialized abortion care public facilities       | _                | <del>-</del>       |
| Private health-care centres or clinics            | _                | <del>-</del>       |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | _                | _                  |

| Health care personnel allowed to provide legal abortions |   |
|--|---|
| Doctors (speciality not specified)                       | _ |
| Specialist doctor, including OB/GYN                      | _ |
| Nurse  | _ |
| Midwife/nurse-midwife                                    | _ |
| Other provider(s)  | _ |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | Yes |
| National guidelines on clinical and service delivery of post-abortion care | Yes |
| Restrictions on public information on legal abortion services              | _   |
| Counselling for contraceptive methods during<br>post-abortion care         | Yes |

| Service delivery requirements for providers or facilities |   |  |
|---|---|--|
| Referral linkage to a higher-level facility               | _ |  |
| Availability of a specialist doctor                       | _ |  |
| Minimum number of beds                                    | _ |  |
| Other facility/provider requirements                      | _ |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to<br>alternative provider or facility |
|--|-------------------|--|
| Health-care facilities   | _                 | _  |
| Health-care providers  | _                 | _  |

#### Notes:

- 1. Pharmacological induction with Mifepristone and Prostaglandin, dilation and curettage after pre-treating cervix with prostaglandin, vaginally or intracervical.

  2. For gynaecological indications.



Age limit for parental consent (years)

### Abortion laws and policies, 2017

### **Bolivia (Plurinational State of)**

| LAWS ON ABORTION                                 |   |   |  |
|--|---|---|--|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | 22  |  |
| To preserve health                               | Yes                                     | 22  |  |
| To preserve physical health                      | Yes                                     | 22  |  |
| To preserve mental health                        | Yes                                     | 22  |  |
| In cases of intellectual or cognitive disability | No                                      | _   |  |
| In cases of incest                               | Yes                                     | 22  |  |
| In cases of rape                                 | Yes                                     | 22  |  |
| In cases of foetal impairment                    | Yes                                     | 22  |  |
| For economic or social reason                    | No                                      | _   |  |
| On request                                       | No                                      | _   |  |
| For other reason(s)                              | Yes <sup>1</sup>                        | _   |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |     |  |     |
|--|-----|--|-----|
| Authorizations required                      |     | Consent required                             |     |
| Authorization of health care professional(s) | _   | Spousal consent                              | _   |
| Number of authorizations                     | _   | Parental consent for minors                  | No  |
| Cadre of health care professional            |     | Consent by another adult                     | _   |
| Doctor (specialty not specified)             | _   |  |     |
| Specialist doctor, including OB/GYN          | _   | Other requirements                           |     |
| Nurse  | _   | Gestational age limits                       | Yes |
| Midwife/nurse-midwife                        | _   | Compulsory counselling                       | _   |
| Other providers                              | _   | Compulsory waiting period                    | _   |
| Authorized in specially licensed facilities  | _   | Length of waiting period (days)              | _   |
| Judicial authorization                       |     | Mandatory screening test                     |     |
| For minors                                   | _   | HIV test                                     | No  |
| In case of rape                              | Yes | Other STI test(s)                            | No  |
| Police report in case of rape                | Yes | Ultrasound viewing or listening to heartbeat | _   |

|                                       | Sex-selective abortion | 1   |
|---------------------------------------|------------------------|---|
| Prohibition of sex-selective abortion | _                      | Restrictions on the methods to detect the sex |

Age limit for judicial consent (years)

Age when a woman can obtain an abortion without parental or judicial consent

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | <del>-</del>                     | _   |  |
| Dilatation and evacuation             | <del>-</del>                     | _   |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | _   |  |
| Misoprostol only                      | Yes                              | 20  |  |
| Other method(s)                       | <del>-</del>                     | _   |  |



### **Bolivia (Plurinational State of)**

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |  |
| Misoprostol  | Yes <sup>2</sup>                                  | <del>-</del>   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | _                | <del>-</del>       |
| Secondary (district-level) health-care facilities | _                | _                  |
| Specialized abortion care public facilities       | _                | _                  |
| Private health-care centres or clinics            | _                | _                  |
| NGO health-care centres or clinics                | _                | _                  |
| Other settings or facilities                      | Yes <sup>3</sup> | _                  |

| Health care personnel allowed to provide legal abortions |     |  |
|--|-----|--|
| Doctors (speciality not specified)                       | Yes |  |
| Specialist doctor, including OB/GYN                      | _   |  |
| Nurse  | _   |  |
| Midwife/nurse-midwife                                    | _   |  |
| Other provider(s)  | _   |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | Yes |
| National guidelines on clinical and service delivery of post-abortion care | Yes |
| Restrictions on public information on legal abortion services              | _   |
| Counselling for contraceptive methods during<br>post-abortion care         | Yes |

| Service delivery requirements for providers or facilities |   |  |
|---|---|--|
| Referral linkage to a higher-level facility               | _ |  |
| Availability of a specialist doctor                       | _ |  |
| Minimum number of beds                                    | _ |  |
| Other facility/provider requirements                      | _ |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to<br>alternative provider or facility |
|--|-------------------|--|
| Health-care facilities   | No                | _  |
| Health-care providers  | Yes <sup>4</sup>  | Yes  |

#### Notes:

- Abduction not followed by marriage.
   For gynaecological indications.
   Must be a comprehensive health centre, and comply with and enforce the Regulations, Standards and Clinical protocols.
   Provider type not specified.



### **Bosnia and Herzegovina**

| LAWS ON ABORTION 1                               |   |   |
|--|---|---|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |
| To save life                                     | Yes                                     | <del>-</del>                                    |
| To preserve health                               | Yes                                     | _   |
| To preserve physical health                      | Yes                                     | _   |
| To preserve mental health                        | Yes                                     | _   |
| In cases of intellectual or cognitive disability | _                                       | _   |
| In cases of incest                               | Yes                                     | _   |
| In cases of rape                                 | Yes                                     | <del>-</del>                                    |
| In cases of foetal impairment                    | Yes                                     | _   |
| For economic or social reason                    | _                                       | _   |
| On request                                       | Yes                                     | _   |
| For other reason(s)                              | _                                       | _   |

| Persons who can be criminally charged for an illegal abortion |   |          |     |                                    |     |  |
|---|---|----------|-----|------------------------------------|-----|--|
| Woman   | _ | Provider | Yes | Other person who assists the woman | Yes |  |

| REQUIREMENTS FOR INDUCED ABORTION            |                        |  |                        |
|--|------------------------|--|------------------------|
| Authorizations required                      |                        | Consent required                             |                        |
| Authorization of health care professional(s) | Yes                    | Spousal consent                              | Varies by jurisdiction |
| Number of authorizations                     | 3 2                    | Parental consent for minors                  | Yes                    |
| Cadre of health care professional            |                        | Consent by another adult                     | _                      |
| Doctor (specialty not specified)             | Yes                    |  |                        |
| Specialist doctor, including OB/GYN          | Yes                    | Other requirements                           |                        |
| Nurse  | _                      | Gestational age limits                       | Varies by jurisdiction |
| Midwife/nurse-midwife                        | _                      | Compulsory counselling                       | Varies by jurisdiction |
| Other providers                              | Yes <sup>3</sup>       | Compulsory waiting period                    | Varies by jurisdiction |
| Authorized in specially licensed facilities  | Yes                    | Length of waiting period (days)              | _                      |
| Judicial authorization                       |                        | Mandatory screening test                     |                        |
| For minors                                   | Varies by jurisdiction | HIV test                                     | Varies by jurisdiction |
| In case of rape                              | Varies by jurisdiction | Other STI test(s)                            | Varies by jurisdiction |
| Police report in case of rape                | Varies by jurisdiction | Ultrasound viewing or listening to heartbeat | Varies by jurisdiction |

| Age when a woman can obtain an abortion without parental or judicial consent |    |  |   |
|--|----|--|---|
| Age limit for parental consent (years)                                       | 16 | Age limit for judicial consent (years) | _ |
|  |    |  |   |
| Say solocities shortion  |    |  |   |

| Sex-selective abortion                |                        |   |  |
|---------------------------------------|------------------------|---|--|
| Prohibition of sex-selective abortion | Varies by jurisdiction | Restrictions on the methods to detect the sex of the foetus |  |
|                                       |                        |   |  |

| ACCESS TO ABORTION SERVICES           |                                  |   |
|---------------------------------------|----------------------------------|---|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |
| Vacuum aspiration                     | _                                | <del>-</del>                              |
| Dilatation and evacuation             | <del>-</del>                     | <del>-</del>                              |
| Combination mifepristone- misoprostol | <del>-</del>                     | <del>-</del>                              |
| Misoprostol only                      | _                                | <del>-</del>                              |
| Other method(s)                       | _                                | _   |



### **Bosnia and Herzegovina**

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | <del>-</del>                                      | _  |  |
| Misoprostol  | <del>-</del>                                      | <del>-</del>   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | _                  |
| Specialized abortion care public facilities       | <del>-</del>     | _                  |
| Private health-care centres or clinics            | <del>-</del>     | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | _                  |
| Other settings or facilities                      | _                | _                  |

| Health care personnel allowed to provide legal abortions |              |  |
|--|--------------|--|
| Doctors (speciality not specified)                       | _            |  |
| Specialist doctor, including OB/GYN                      | _            |  |
| Nurse  | <del>_</del> |  |
| Midwife/nurse-midwife                                    | _            |  |
| Other provider(s)  | _            |  |
|  |              |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and            | guidelines on abortion services                   |   |
|----------------------------|---|---|
|                            | delines on clinical and service aduced abortion   | _ |
|                            | delines on clinical and service ost-abortion care | _ |
| Restrictions abortion serv | on public information on legal<br>vices           | _ |
| Counselling post-abortion  | for contraceptive methods during                  | _ |

| Service delivery requirements for providers or facilities |   |  |
|---|---|--|
| Referral linkage to a higher-level facility               | _ |  |
| Availability of a specialist doctor                       | _ |  |
| Minimum number of beds                                    | _ |  |
| Other facility/provider requirements                      | _ |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to<br>alternative provider or facility |
|--|-------------------|--|
| Health-care facilities   | _                 | _  |
| Health-care providers  | _                 | _  |

#### Notes:

- 1. Varies by jurisdiction.
  2. After 10 weeks of pregnancy, special authorization is required by a commission composed of a gynaecologist or obstetrician, a general physician or a specialist in internal medicine, and a social worker or a psychologist. This requirement applies to the Republika Srpska.
  3. Social worker or a psychologist.



### Botswana

| LAWS ON ABORTION                                 |                                      |   |  |
|--|--------------------------------------|---|--|
| Legal grounds for induced abortion               | Currently permissible in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                  | 16  |  |
| To preserve health                               | Yes                                  | 16  |  |
| To preserve physical health                      | Yes                                  | 16  |  |
| To preserve mental health                        | Yes                                  | 16  |  |
| In cases of intellectual or cognitive disability | Yes                                  | 16  |  |
| In cases of incest                               | Yes                                  | 16  |  |
| In cases of rape                                 | Yes                                  | 16  |  |
| In cases of foetal impairment                    | Yes                                  | 16  |  |
| For economic or social reason                    | No                                   | <del>-</del>                                    |  |
| On request                                       | No                                   | <del>-</del>                                    |  |
| For other reason(s)                              | _                                    | _   |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |     |  |     |
|--|-----|--|-----|
| Authorizations required                      |     | Consent required                             |     |
| Authorization of health care professional(s) | Yes | Spousal consent                              | _   |
| Number of authorizations                     | 2   | Parental consent for minors                  | _   |
| Cadre of health care professional            |     | Consent by another adult                     | Yes |
| Doctor (specialty not specified)             | Yes |  |     |
| Specialist doctor, including OB/GYN          | _   | Other requirements                           |     |
| Nurse  | _   | Gestational age limits                       | Yes |
| Midwife/nurse-midwife                        | _   | Compulsory counselling                       | _   |
| Other providers                              | _   | Compulsory waiting period                    | _   |
| Authorized in specially licensed facilities  | Yes | Length of waiting period (days)              | _   |
| Judicial authorization                       |     | Mandatory screening test                     |     |
| For minors                                   | _   | HIV test                                     | _   |
| In case of rape                              | _   | Other STI test(s)                            | _   |
| Police report in case of rape                | _   | Ultrasound viewing or listening to heartbeat | _   |

| Ago when a wellian out obtain an abortion without parental or judicial content |  |  |  |
|--|--|--|--|
| Age limit for parental consent (years)   | Age limit for judicial consent (years) |  |  |
|  |  |  |  |
|  |  |  |  |

|                                       | Sex-selective abortion                                      |
|---------------------------------------|---|
| Prohibition of sex-selective abortion | Restrictions on the methods to detect the sex of the foetus |

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | Yes                              | 12  |  |
| Dilatation and evacuation             | Yes                              | <del>-</del>                              |  |
| Combination mifepristone- misoprostol | Yes                              | 12  |  |
| Misoprostol only                      | Yes                              | 12  |  |
| Other method(s)                       | Yes <sup>1</sup>                 | <del>-</del>                              |  |



#### Botswana

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |  |
| Misoprostol  | No  | <del>-</del>   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | _                | Yes                |
| Secondary (district-level) health-care facilities | Yes              | Yes                |
| Specialized abortion care public facilities       | Yes              | <del>-</del>       |
| Private health-care centres or clinics            | Yes              | Yes                |
| NGO health-care centres or clinics                | _                | Yes                |
| Other settings or facilities                      | _                | Yes <sup>2</sup>   |

| Health care personnel allowed to provide legal abortions |              |  |
|--|--------------|--|
| Doctors (speciality not specified)                       | Yes          |  |
| Specialist doctor, including OB/GYN                      | <del>-</del> |  |
| Nurse  | _            |  |
| Midwife/nurse-midwife                                    | _            |  |
| Other provider(s)  | _            |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | Yes |
| National guidelines on clinical and service delivery of post-abortion care | Yes |
| Restrictions on public information on legal abortion services              | _   |
| Counselling for contraceptive methods during<br>post-abortion care         | Yes |
|  |     |

| Service delivery requirements for providers or | facilities |
|--|------------|
| Referral linkage to a higher-level facility    | _          |
| Availability of a specialist doctor            | _          |
| Minimum number of beds                         | _          |
| Other facility/provider requirements           | _          |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to<br>alternative provider or facility |
|--|-------------------|--|
| Health-care facilities   | _                 | _  |
| Health-care providers  | _                 | _  |

#### Notes:

- Curettage.
   Mine hospitals and clinics.



Age limit for parental consent (years)

# Abortion laws and policies, 2017

### Brazil

| WS ON ABORTION                       |   |
|--------------------------------------|---|
| Currently permissible in the country | Gestational limit for each legal ground (weeks)           |
| Yes                                  | 22  |
| No                                   | <del>-</del>  |
| Yes                                  | 22  |
| Yes                                  | 22  |
| No                                   | _   |
| No                                   | <del>-</del>  |
| <del>-</del>                         | <del>-</del>  |
|                                      | in the country Yes No |

|       |     | Persons who can be criminally cha | arged for | an illegal abortion                |     |
|-------|-----|-----------------------------------|-----------|------------------------------------|-----|
| Woman | Yes | Provider                          | Yes       | Other person who assists the woman | Yes |

|  | REQUIREMENTS FO | R INDUCED ABORTION                           |    |
|--|-----------------|--|----|
| Authorizations required                      |                 | Consent required                             |    |
| Authorization of health care professional(s) | _               | Spousal consent                              | _  |
| Number of authorizations                     | _               | Parental consent for minors                  | Ye |
| Cadre of health care professional            |                 | Consent by another adult                     | Ye |
| Doctor (specialty not specified)             | _               |  |    |
| Specialist doctor, including OB/GYN          | _               | Other requirements                           |    |
| Nurse  | _               | Gestational age limits                       | Ye |
| Midwife/nurse-midwife                        | _               | Compulsory counselling                       | _  |
| Other providers                              | _               | Compulsory waiting period                    | _  |
| Authorized in specially licensed facilities  | _               | Length of waiting period (days)              | _  |
| Judicial authorization                       |                 | Mandatory screening test                     |    |
| For minors                                   | Yes             | HIV test                                     | _  |
| In case of rape                              | _               | Other STI test(s)                            | _  |
| Police report in case of rape                | No              | Ultrasound viewing or listening to heartbeat | _  |
|  |                 |  |    |

|                                       | Sex-selective abortion | 1   |
|---------------------------------------|------------------------|---|
| Prohibition of sex-selective abortion | _                      | Restrictions on the methods to detect the sex |

Age limit for judicial consent (years)

Age when a woman can obtain an abortion without parental or judicial consent

| AC                                    | CESS TO ABORTION SERVICES        |   |
|---------------------------------------|----------------------------------|---|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |
| Vacuum aspiration                     | Yes                              | 12  |
| Dilatation and evacuation             | <del>-</del>                     | _   |
| Combination mifepristone- misoprostol | No                               | _   |
| Misoprostol only                      | Yes                              | 20  |
| Other method(s)                       | Yes <sup>2</sup>                 | 20  |



#### Brazil

| ACCESS TO AE   | BORTION SERVICES (continued)                      |  |
|--|---|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |
| Misoprostol  | Yes <sup>3</sup>                                  | No   |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | _                  |
| Specialized abortion care public facilities       | <del>-</del>     | _                  |
| Private health-care centres or clinics            | <del>-</del>     | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | <del>-</del>     | _                  |

| Doctors (speciality not specified) —  Specialist doctor, including OB/GYN —  Nurse — |
|--|
|  |
| Nurse —  |
|  |
| Midwife/nurse-midwife —  |
| Other provider(s)  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | Yes |
| National guidelines on clinical and service delivery of post-abortion care | Yes |
| Restrictions on public information on legal abortion services              | _   |
| Counselling for contraceptive methods during<br>post-abortion care         | Yes |
| post-abortion care   | 165 |

| Service delivery requirements for providers or facilities |                  |  |  |
|---|------------------|--|--|
| Referral linkage to a higher-level facility               | _                |  |  |
| Availability of a specialist doctor                       | _                |  |  |
| Minimum number of beds                                    | _                |  |  |
| Other facility/provider requirements                      | Yes <sup>4</sup> |  |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | _                 | _   |

#### Notes:

- Indicates that data are not available, not applicable or not specified.

- Abortions in cases of foetal impairment are only permitted in the case of anencephalic foetus.
   Dilation and curettage (after foetal expulsion).
   For gynaecological indications.
   Materials and equipment necessary for the service are the same needed for an outpatient room in gynaecology and obstetrics.



Age limit for parental consent (years)

# Abortion laws and policies, 2017

### **Brunei Darussalam**

| LAWS ON ABORTION                                 |   |   |  |
|--|---|---|--|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | No limit  |  |
| To preserve health                               | No                                      | _   |  |
| To preserve physical health                      | No                                      | _   |  |
| To preserve mental health                        | No                                      | _   |  |
| In cases of intellectual or cognitive disability | No                                      | _   |  |
| In cases of incest                               | No                                      | _   |  |
| In cases of rape                                 | No                                      | _   |  |
| In cases of foetal impairment                    | No                                      | _   |  |
| For economic or social reason                    | No                                      | _   |  |
| On request                                       | No                                      | _   |  |
| For other reason(s)                              | _                                       | _   |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |              |  |    |
|--|--------------|--|----|
| Authorizations required                      |              | Consent required                             |    |
| Authorization of health care professional(s) | Yes          | Spousal consent                              | _  |
| Number of authorizations                     | 1            | Parental consent for minors                  | _  |
| Cadre of health care professional            |              | Consent by another adult                     | _  |
| Doctor (specialty not specified)             | _            |  |    |
| Specialist doctor, including OB/GYN          | <del>_</del> | Other requirements                           |    |
| Nurse  | _            | Gestational age limits                       | No |
| Midwife/nurse-midwife                        | _            | Compulsory counselling                       | _  |
| Other providers                              | Yes 1        | Compulsory waiting period                    | _  |
| Authorized in specially licensed facilities  | _            | Length of waiting period (days)              | _  |
| Judicial authorization                       |              | Mandatory screening test                     |    |
| For minors                                   | _            | HIV test                                     | _  |
| In case of rape                              | _            | Other STI test(s)                            | _  |
| Police report in case of rape                | _            | Ultrasound viewing or listening to heartbeat | _  |

|                                       | Sex-selective abortion |   |
|---------------------------------------|------------------------|---|
| Prohibition of sex-selective abortion | _                      | Restrictions on the methods to detect the sex of the foetus |

Age limit for judicial consent (years)

Age when a woman can obtain an abortion without parental or judicial consent

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | _                                | _   |  |
| Dilatation and evacuation             | <del>-</del>                     | _   |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | _   |  |
| Misoprostol only                      | _                                | _   |  |
| Other method(s)                       | <del>-</del>                     | _   |  |



### **Brunei Darussalam**

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |  |
| Misoprostol  | No  | <del>-</del>   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | _                  |
| Specialized abortion care public facilities       | <del>-</del>     | _                  |
| Private health-care centres or clinics            | <del>-</del>     | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | _                  |
| Other settings or facilities                      | _                | _                  |

| Health care personnel allowed to provide legal abortions |                  |  |
|--|------------------|--|
| Doctors (speciality not specified)                       | _                |  |
| Specialist doctor, including OB/GYN                      | _                |  |
| Nurse  | <del>_</del>     |  |
| Midwife/nurse-midwife                                    | _                |  |
| Other provider(s)  | Yes <sup>2</sup> |  |
|  |                  |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| I | nformation and guidelines on abortion services                             |  |
|---|--|--|
|   | National guidelines on clinical and service delivery of induced abortion   |  |
|   | National guidelines on clinical and service delivery of post-abortion care |  |
|   | Restrictions on public information on legal abortion services              |  |
|   | Counselling for contraceptive methods during post-abortion care            |  |

| Service delivery requirements for providers or t | facilities   |
|--|--------------|
| Referral linkage to a higher-level facility      | <del>-</del> |
| Availability of a specialist doctor              | <del>-</del> |
| Minimum number of beds                           | _            |
| Other facility/provider requirements             | _            |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | _                 | _   |

#### Notes:

- Medical practitioner, not specified.
   Medical practitioner, cadre not specified.



### Bulgaria

| LAWS ON ABORTION                                 |   |   |  |
|--|---|---|--|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | No limit  |  |
| To preserve health                               | Yes                                     | 20  |  |
| To preserve physical health                      | Yes                                     | 20  |  |
| To preserve mental health                        | Yes                                     | 20  |  |
| In cases of intellectual or cognitive disability | _                                       | <del>-</del>                                    |  |
| In cases of incest                               | Yes                                     | <del>-</del>                                    |  |
| In cases of rape                                 | Yes                                     | <del>-</del>                                    |  |
| In cases of foetal impairment                    | Yes                                     | No limit  |  |
| For economic or social reason                    | _                                       | _   |  |
| On request                                       | Yes                                     | 12  |  |
| For other reason(s)                              | Yes 1                                   | _   |  |

| Persons who can be criminally charged for an illegal abortion |   |          |     |                                    |   |  |
|---|---|----------|-----|------------------------------------|---|--|
| Woman   | _ | Provider | Yes | Other person who assists the woman | _ |  |

| Cadre of health care professional  Doctor (specialty not specified)  Specialist doctor, including OB/GYN  Nurse  Midwife/nurse-midwife  Other providers  Authorized in specially licensed facilities  Judicial authorization  For minors  In case of rape  Consent by another  Authorized in specially licensed facilities  No  Length of waiting  Mandatory screening  For minors  — Other STI test(  |  |                  |                       |
|--|--|------------------|-----------------------|
| Authorization of health care professional(s)  Number of authorizations  Cadre of health care professional  Doctor (specialty not specified)  Specialist doctor, including OB/GYN  Nurse  Midwife/nurse-midwife  Other providers  Authorized in specially licensed facilities  Modulical authorization  For minors  In case of rape  Spousal consent  Parental consent for  Consent by another  Con |  | REQUIREMENTS FOR | R INDUCED ABORTION    |
| Number of authorizations  Cadre of health care professional  Doctor (specialty not specified)  Specialist doctor, including OB/GYN  Nurse  Midwife/nurse-midwife  Other providers  Authorized in specially licensed facilities  Moducial authorization  For minors  In case of rape  Parental consent for Consent by another  Consent by another  Other requirements  Gestational age limit  Compulsory counse  Compulsory waiting  Authorized in specially licensed facilities  No  Length of waitin  Mandatory screenin  HIV test  In case of rape  Other STI test(s   | Authorizations required                      |                  | Consent required      |
| Cadre of health care professional  Consent by another  Doctor (specialty not specified)  Specialist doctor, including OB/GYN  Nurse  Midwife/nurse-midwife  Other providers  Authorized in specially licensed facilities  Mo  Length of waitin  Judicial authorization  For minors  In arental consent to another  Consent by another  Other requirements  Gestational age limit  Compulsory counse  Compulsory counse  Compulsory waiting  Authorized in specially licensed facilities  No  Length of waitin  Mandatory screenin  For minors  —  Other STI test(:   | Authorization of health care professional(s) | Yes              | Spousal consent       |
| Doctor (specialty not specified) —  Specialist doctor, including OB/GYN Yes Other requirements  Nurse — Gestational age limit  Midwife/nurse-midwife — Compulsory counse  Other providers Yes 3 Compulsory waiting  Authorized in specially licensed facilities No Length of waitin  Judicial authorization Mandatory screenin  For minors — HIV test  In case of rape — Other STI test(:  | Number of authorizations                     | 2                | Parental consent for  |
| Specialist doctor, including OB/GYN  Nurse  — Gestational age limi  Midwife/nurse-midwife — Compulsory counse  Other providers  Yes  Compulsory waiting  Authorized in specially licensed facilities  No Length of waitin  Judicial authorization  For minors — HIV test In case of rape  — Other STI test(:   | Cadre of health care professional            |                  | Consent by another    |
| Nurse — Gestational age limit Midwife/nurse-midwife — Compulsory counse Other providers Yes 3 Compulsory waiting Authorized in specially licensed facilities No Length of waitin Judicial authorization Mandatory screenin For minors — HIV test In case of rape — Other STI test(:  | Doctor (specialty not specified)             | _                |                       |
| Midwife/nurse-midwife — Compulsory counse  Other providers Yes 3 Compulsory waiting  Authorized in specially licensed facilities No Length of waiting  Judicial authorization Mandatory screening  For minors — HIV test  In case of rape — Other STI test(  | Specialist doctor, including OB/GYN          | Yes              | Other requirements    |
| Other providers  Authorized in specially licensed facilities  No  Length of waiting  Judicial authorization  For minors  In case of rape  Compulsory waiting  Mandatory screenin  HIV test  — Other STI test(:   | Nurse  | _                | Gestational age limit |
| Authorized in specially licensed facilities  No Length of waiting  Judicial authorization  For minors  In case of rape  Other STI test(:   | Midwife/nurse-midwife                        | _                | Compulsory counsel    |
| Judicial authorization  For minors  — HIV test  In case of rape — Other STI test(:   | Other providers                              | Yes <sup>3</sup> | Compulsory waiting    |
| For minors — HIV test In case of rape — Other STI test(:   | Authorized in specially licensed facilities  | No               | Length of waitin      |
| In case of rape — Other STI test(:   | Judicial authorization                       |                  | Mandatory screening   |
|  | For minors                                   | _                | HIV test              |
| Police report in case of rape  — Ultrasound viewing  | In case of rape                              | _                | Other STI test(s      |
|  | Police report in case of rape                | _                | Ultrasound viewing of |

| Parental consent for minors     | _        |  |
|---------------------------------|----------|--|
| Consent by another adult        | _        |  |
|                                 |          |  |
| Other requirements              |          |  |
| Gestational age limits          | Yes      |  |
| Compulsory counselling          | _        |  |
| Compulsory waiting period       | _        |  |
| Length of waiting period (days) | _        |  |
| Mandatory screening test        |          |  |
| HIV test                        | _        |  |
| Other STI test(s)               | <u>-</u> |  |
|                                 |          |  |

Ultrasound viewing or listening to heartbeat

| Age when a woman can obtain an abortion without parental or judicial consent |  |   |  |  |
|--|--|---|--|--|
| Age limit for parental consent (years)                                       | <ul> <li>Age limit for judicial consent (years)</li> </ul> | _ |  |  |

|                                       | Sex-selective abortion                                      |
|---------------------------------------|---|
| Prohibition of sex-selective abortion | Restrictions on the methods to detect the sex of the foetus |

| ACCESS TO ABORTION SERVICES           |                                  |   |  |  |
|---------------------------------------|----------------------------------|---|--|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |  |
| Vacuum aspiration                     | Yes                              | 12  |  |  |
| Dilatation and evacuation             | Yes                              | 12 or over                                |  |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | <del>-</del>                              |  |  |
| Misoprostol only                      | <del>-</del>                     | _   |  |  |
| Other method(s)                       | Yes <sup>4</sup>                 | 12 or over                                |  |  |



### Bulgaria

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | _   | _  |  |
| Misoprostol  | _   | <del>-</del>   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | _                | <del>-</del>       |
| Secondary (district-level) health-care facilities | Yes              | Yes                |
| Specialized abortion care public facilities       | Yes              | <del>-</del>       |
| Private health-care centres or clinics            | _                | <del>-</del>       |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | _                | <del>-</del>       |

| Health care personnel allowed to provide legal abortions |              |  |
|--|--------------|--|
| Doctors (speciality not specified)                       | _            |  |
| Specialist doctor, including OB/GYN                      | Yes          |  |
| Nurse  | <del>-</del> |  |
| Midwife/nurse-midwife                                    | _            |  |
| Other provider(s)  | <del>-</del> |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | Yes |
| National guidelines on clinical and service delivery of post-abortion care | Yes |
| Restrictions on public information on legal abortion services              | _   |
| Counselling for contraceptive methods during<br>post-abortion care         | Yes |

| Service delivery requirements for providers or facilities |     |  |
|---|-----|--|
| Referral linkage to a higher-level facility               | _   |  |
| Availability of a specialist doctor                       | Yes |  |
| Minimum number of beds                                    | Yes |  |
| Other facility/provider requirements                      | _   |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | <del>-</del>      | _   |
| Health-care providers  | _                 | <del>-</del>  |

#### Notes:

- When pregnancy results from an act of violence, proven by the competent authorities. No gestational limit is specified for abortion in the case of pregnancy resulting from an act of violence.
   Authorisation is required for gestational ages of more than twelve weeks. The Commission providing the authorization consists of four members: the Head of Department of Obstetrics and Gynaecology, an obstetrician-gynaecologist, a specialist in the relevant medical condition, and a secretary. In cases of foetal congenital anomalies, the Commission also comprises a genetics specialist.
   Secretary.
   Seline, rivanol, balloon catheter and medication (type not specified).



### **Burkina Faso**

| LAWS ON ABORTION                                 |                                      |   |  |
|--|--------------------------------------|---|--|
| Legal grounds for induced abortion               | Currently permissible in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                  | No limit  |  |
| To preserve health                               | Yes                                  | No limit  |  |
| To preserve physical health                      | <del>-</del>                         | <del>-</del>                                    |  |
| To preserve mental health                        | No                                   | <del>-</del>                                    |  |
| In cases of intellectual or cognitive disability | No                                   | <del>-</del>                                    |  |
| In cases of incest                               | Yes                                  | 10  |  |
| In cases of rape                                 | Yes                                  | 10  |  |
| In cases of foetal impairment                    | Yes                                  | No limit  |  |
| For economic or social reason                    | No                                   | _   |  |
| On request                                       | No                                   | _   |  |
| For other reason(s)                              | _                                    | _   |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |     |  |              |  |
|--|-----|--|--------------|--|
| uthorizations required                       |     | Consent required                             |              |  |
| Authorization of health care professional(s) | Yes | Spousal consent                              | No           |  |
| Number of authorizations                     | 2   | Parental consent for minors                  | <del>-</del> |  |
| Cadre of health care professional            |     | Consent by another adult                     | Yes          |  |
| Doctor (specialty not specified)             | Yes |  |              |  |
| Specialist doctor, including OB/GYN          | _   | Other requirements                           |              |  |
| Nurse  | _   | Gestational age limits                       | Yes          |  |
| Midwife/nurse-midwife                        | _   | Compulsory counselling                       | No           |  |
| Other providers                              | _   | Compulsory waiting period                    | No           |  |
| Authorized in specially licensed facilities  | No  | Length of waiting period (days)              | <del>_</del> |  |
| Judicial authorization                       |     | Mandatory screening test                     |              |  |
| For minors                                   | No  | HIV test                                     | _            |  |
| In case of rape                              | _   | Other STI test(s)                            | _            |  |
| Police report in case of rape                | _   | Ultrasound viewing or listening to heartbeat | _            |  |

| Age when a woman can obtain an abortion without parental or judicial consent |   |  |   |
|--|---|--|---|
| Age limit for parental consent (years)                                       | _ | Age limit for judicial consent (years) | _ |
|  |   |  |   |

|                                       | Sex-selective abortion |   |
|---------------------------------------|------------------------|---|
| Prohibition of sex-selective abortion | No                     | Restrictions on the methods to detect the sex of the foetus |

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | _                                | <u> </u>                                  |  |
| Dilatation and evacuation             | <del>_</del>                     | <del>-</del>                              |  |
| Combination mifepristone- misoprostol | _                                | <del>-</del>                              |  |
| Misoprostol only                      | _                                | <del>-</del>                              |  |
| Other method(s)                       | <del>-</del>                     | <del>-</del>                              |  |



#### **Burkina Faso**

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |  |
|--|---|--|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |  |
| Mifepristone and/or combination mifepristone-misoprostol | _   | _  |  |  |
| Misoprostol  | <del>_</del>                                      | _  |  |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | _                | Yes                |
| Secondary (district-level) health-care facilities | _                | Yes                |
| Specialized abortion care public facilities       | _                | _                  |
| Private health-care centres or clinics            | _                | Yes                |
| NGO health-care centres or clinics                | <del>-</del>     | Yes                |
| Other settings or facilities                      | _                | _                  |

| lealth care personnel allowed to provide legal abortions |   |  |
|--|---|--|
| Doctors (speciality not specified)                       | _ |  |
| Specialist doctor, including OB/GYN                      | _ |  |
| Nurse  | _ |  |
| Midwife/nurse-midwife                                    | _ |  |
| Other provider(s)  | _ |  |

| Types of insurance or other coverage for abortion                  |     |
|--|-----|
| Public health coverage for induced abortion for all women          | _   |
| Public health coverage for induced abortion for<br>poor women only | _   |
| Public health coverage for abortion complications                  | Yes |
| Private health coverage for induced abortion                       | _   |
| Other type of coverage   | _   |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | _   |
| National guidelines on clinical and service delivery of post-abortion care | _   |
| Restrictions on public information on legal abortion services              | Yes |
| Counselling for contraceptive methods during<br>post-abortion care         | Yes |

| Service delivery requirements for providers or facilities |   |  |
|---|---|--|
| Referral linkage to a higher-level facility               | _ |  |
| Availability of a specialist doctor                       | _ |  |
| Minimum number of beds                                    | _ |  |
| Other facility/provider requirements                      | _ |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | Yes <sup>2</sup>  | Yes   |

#### Notes:

- Abortion is permitted for therapeutic purposes.
   Provider type not specified.



### Burundi

| LAWS ON ABORTION                                 |   |   |  |
|--|---|---|--|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | _   |  |
| To preserve health                               | Yes                                     | _   |  |
| To preserve physical health                      | _                                       | _   |  |
| To preserve mental health                        | No                                      | _   |  |
| In cases of intellectual or cognitive disability | No                                      | _   |  |
| In cases of incest                               | No                                      | _   |  |
| In cases of rape                                 | No                                      | _   |  |
| In cases of foetal impairment                    | No                                      | _   |  |
| For economic or social reason                    | No                                      | _   |  |
| On request                                       | No                                      | _   |  |
| For other reason(s)                              | _                                       | _   |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |  |
|---|-----|----------|-----|------------------------------------|-----|--|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |  |

| Authorizations required                      |              | Consent required                             |   |
|--|--------------|--|---|
| Authorization of health care professional(s) | Yes          | Spousal consent                              | _ |
| Number of authorizations                     | 2            | Parental consent for minors                  | _ |
| Cadre of health care professional            |              | Consent by another adult                     | _ |
| Doctor (specialty not specified)             | Yes          |  |   |
| Specialist doctor, including OB/GYN          | <del>-</del> | Other requirements                           |   |
| Nurse  | _            | Gestational age limits                       | _ |
| Midwife/nurse-midwife                        | _            | Compulsory counselling                       | _ |
| Other providers                              | _            | Compulsory waiting period                    | _ |
| Authorized in specially licensed facilities  | _            | Length of waiting period (days)              | _ |
| Judicial authorization                       |              | Mandatory screening test                     |   |
| For minors                                   | _            | HIV test                                     | _ |
| In case of rape                              | _            | Other STI test(s)                            | _ |
| Police report in case of rape                | _            | Ultrasound viewing or listening to heartbeat | _ |

| Age limit for parental consent (years) | <ul><li>Age limit for judicial consent (years)</li></ul> |
|--|--|
|  |  |
|  | Sex-selective abortion                                   |
| Drahibition of any collective abortion | Restrictions on the methods to detect the sex            |

Age when a woman can obtain an abortion without parental or judicial consent

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | <del>-</del>                     | <del>-</del>                              |  |
| Dilatation and evacuation             | <del>-</del>                     | _   |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | _   |  |
| Misoprostol only                      | _                                | _   |  |
| Other method(s)                       | _                                | _   |  |



#### Burundi

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |
|--|---|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |
| Misoprostol  | Yes <sup>2</sup>                                  | Yes <sup>3</sup>   |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | _                | <del>-</del>       |
| Specialized abortion care public facilities       | <del>-</del>     | <del>-</del>       |
| Private health-care centres or clinics            | <del>-</del>     | <del>-</del>       |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | _                | _                  |

| Health care personnel allowed to provide legal abo | Health care personnel allowed to provide legal abortions |  |
|--|--|--|
| Doctors (speciality not specified)                 | Yes  |  |
| Specialist doctor, including OB/GYN                | _  |  |
| Nurse  | _  |  |
| Midwife/nurse-midwife                              | _  |  |
| Other provider(s)                                  | _  |  |
|  |  |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | _   |
| National guidelines on clinical and service delivery of post-abortion care | Yes |
| Restrictions on public information on legal abortion services              | _   |
| Counselling for contraceptive methods during<br>post-abortion care         | Yes |

| Service delivery requirements for providers or facilities |   |
|---|---|
| Referral linkage to a higher-level facility               | _ |
| Availability of a specialist doctor                       | _ |
| Minimum number of beds                                    | _ |
| Other facility/provider requirements                      | _ |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | _                 | _   |

#### Notes:

- 1. Abortion is exempted from criminal punishment when the pregnancy was interrupted by a licensed physician, with the written consent of the pregnant person and assent of a second medical practitioner, in order to obviate a danger which cannot be otherwise obviated and which threatens the life of the mother or seriously threatens her health with grave and permanent impairment.

  2. For non-gynaecological indications only.

  3. With prescription only.



### **Cabo Verde**

| LAWS ON ABORTION                                 |   |   |
|--|---|---|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |
| To save life                                     | Yes                                     | No limit  |
| To preserve health                               | Yes                                     | No limit  |
| To preserve physical health                      | Yes                                     | No limit  |
| To preserve mental health                        | Yes                                     | No limit  |
| In cases of intellectual or cognitive disability | <del>-</del>                            | <del>-</del>                                    |
| In cases of incest                               | <del>-</del>                            | <del>-</del>                                    |
| In cases of rape                                 | <del>-</del>                            | <del>-</del>                                    |
| In cases of foetal impairment                    | Yes                                     | _   |
| For economic or social reason                    | <del>-</del>                            | <del>-</del>                                    |
| On request                                       | Yes                                     | 12  |
| For other reason(s)                              | Yes <sup>1</sup>                        | _   |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |                  |  |     |
|--|------------------|--|-----|
| uthorizations required                       |                  | Consent required                             |     |
| Authorization of health care professional(s) | Yes              | Spousal consent                              | _   |
| Number of authorizations                     | 2                | Parental consent for minors                  | Yes |
| Cadre of health care professional            |                  | Consent by another adult                     | Yes |
| Doctor (specialty not specified)             | Yes              |  |     |
| Specialist doctor, including OB/GYN          | Yes              | Other requirements                           |     |
| Nurse  | _                | Gestational age limits                       | Yes |
| Midwife/nurse-midwife                        | _                | Compulsory counselling                       | _   |
| Other providers                              | Yes <sup>2</sup> | Compulsory waiting period                    | _   |
| Authorized in specially licensed facilities  | Yes              | Length of waiting period (days)              | _   |
| Judicial authorization                       |                  | Mandatory screening test                     |     |
| For minors                                   | _                | HIV test                                     | _   |
| In case of rape                              | _                | Other STI test(s)                            | _   |
| Police report in case of rape                | _                | Ultrasound viewing or listening to heartbeat | _   |

| Age when a woman can obtain an abortion without parental or judicial consent |   |  |   |
|--|---|--|---|
| Age limit for parental consent (years)                                       | _ | Age limit for judicial consent (years) | _ |
|  |   |  |   |

|                                       | Sex-selective abortion                                      |
|---------------------------------------|---|
| Prohibition of sex-selective abortion | Restrictions on the methods to detect the sex of the foetus |

| AC                                    | CESS TO ABORTION SERVICES        |   |
|---------------------------------------|----------------------------------|---|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |
| Vacuum aspiration                     | _                                | <del>-</del>                              |
| Dilatation and evacuation             | <del>-</del>                     | <del>-</del>                              |
| Combination mifepristone- misoprostol | <del>-</del>                     | <del>-</del>                              |
| Misoprostol only                      | <del>-</del>                     | _   |
| Other method(s)                       | <del>-</del>                     | <del>-</del>                              |



#### Cabo Verde

| ACCESS TO AI   | BORTION SERVICES (continued)                      |  |
|--|---|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |
| Mifepristone and/or combination mifepristone-misoprostol | No  | <del>-</del>   |
| Misoprostol  | Yes <sup>3</sup>                                  | No   |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | _                | <del>-</del>       |
| Secondary (district-level) health-care facilities | _                | <del>-</del>       |
| Specialized abortion care public facilities       | _                | <del>-</del>       |
| Private health-care centres or clinics            | _                | <del>-</del>       |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | Yes <sup>4</sup> | _                  |

| Doctors (speciality not specified)  | Yes |
|-------------------------------------|-----|
| Specialist doctor, including OB/GYN | Yes |
| Nurse                               | _   |
| Midwife/nurse-midwife               | _   |
| Other provider(s)                   | _   |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | _   |
| National guidelines on clinical and service delivery of post-abortion care | _   |
| Restrictions on public information on legal abortion services              | _   |
| Counselling for contraceptive methods during<br>post-abortion care         | Yes |

| Service delivery requirements for providers or for | acilities |
|--|-----------|
| Referral linkage to a higher-level facility        | _         |
| Availability of a specialist doctor                | _         |
| Minimum number of beds                             | _         |
| Other facility/provider requirements               | _         |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | Yes <sup>5</sup>  | _   |

#### Notes:

- Indicates that data are not available, not applicable or not specified.

- To prevent the transmission of a grave hereditary or contagious illness.
   Director of the health institution.
   For gynaecological indications.
   Health Institutions with the necessary technical capacity designated by the Ministry of Health.
   Provider type not specified.



### Cambodia

|  | LAWS ON ABORTION                        |   |
|--|---|---|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |
| To save life                                     | Yes                                     | No limit  |
| To preserve health                               | _                                       | _   |
| To preserve physical health                      | <del>-</del>                            | <del>-</del>                                    |
| To preserve mental health                        | <del>-</del>                            | <del>-</del>                                    |
| In cases of intellectual or cognitive disability | <del>-</del>                            | <del>-</del>                                    |
| In cases of incest                               | <del>-</del>                            | <del>-</del>                                    |
| In cases of rape                                 | Yes                                     | No limit  |
| In cases of foetal impairment                    | Yes                                     | No limit  |
| For economic or social reason                    | <del>-</del>                            | <del>-</del>                                    |
| On request                                       | Yes                                     | 12  |
| For other reason(s)                              | _                                       | _   |

| Persons who can be criminally charged for an illegal abortion |   |          |     |                                    |     |  |
|---|---|----------|-----|------------------------------------|-----|--|
| Woman   | _ | Provider | Yes | Other person who assists the woman | Yes |  |

|  | REQUIREMENTS FO  | R INDUCED ABORTION                           |
|--|------------------|--|
| Authorizations required                      |                  | Consent required                             |
| Authorization of health care professional(s) | Yes              | Spousal consent                              |
| Number of authorizations                     | 2 1              | Parental consent for minors                  |
| Cadre of health care professional            |                  | Consent by another adult                     |
| Doctor (specialty not specified)             | Yes              |  |
| Specialist doctor, including OB/GYN          | _                | Other requirements                           |
| Nurse  | _                | Gestational age limits                       |
| Midwife/nurse-midwife                        | Yes              | Compulsory counselling                       |
| Other providers                              | Yes <sup>2</sup> | Compulsory waiting period                    |
| Authorized in specially licensed facilities  | Yes              | Length of waiting period (days)              |
| Judicial authorization                       |                  | Mandatory screening test                     |
| For minors                                   | No               | HIV test                                     |
| In case of rape                              | _                | Other STI test(s)                            |
| Police report in case of rape                | _                | Ultrasound viewing or listening to heartbeat |
| <u>'</u>                                     | _                |  |

| <u> </u>                                     |     |
|--|-----|
|  |     |
| Other requirements                           |     |
| Gestational age limits                       | Yes |
| Compulsory counselling                       | No  |
| Compulsory waiting period                    | No  |
| Length of waiting period (days)              | _   |
| Mandatory screening test                     |     |
| HIV test                                     | _   |
| Other STI test(s)                            | Yes |
| Ultrasound viewing or listening to heartbeat | _   |
|  |     |

No Yes

| Age when a woman can obtain an abortion without parental or judicial consent |    |  |   |  |
|--|----|--|---|--|
| Age limit for parental consent (years)                                       | 18 | Age limit for judicial consent (years) | _ |  |
|  |    |  |   |  |

| Sex-selective abo                     |     |   |
|---------------------------------------|-----|---|
| Prohibition of sex-selective abortion | Yes | Restrictions on the methods to detect the sex of the foetus |

| ACCESS TO ABORTION SERVICES           |                                  |   |  |  |
|---------------------------------------|----------------------------------|---|--|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |  |
| Vacuum aspiration                     | Yes                              | 12  |  |  |
| Dilatation and evacuation             | Yes                              | 13 or over                                |  |  |
| Combination mifepristone- misoprostol | Yes                              | 9   |  |  |
| Misoprostol only                      | _                                | <del>-</del>                              |  |  |
| Other method(s)                       | Yes <sup>3</sup>                 | _   |  |  |



#### Cambodia

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | Yes   | _  |  |
| Misoprostol  | Yes <sup>4</sup>                                  | <del>-</del>   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | Yes              | Yes                |
| Secondary (district-level) health-care facilities | Yes              | Yes                |
| Specialized abortion care public facilities       | Yes              | Yes                |
| Private health-care centres or clinics            | Yes              | Yes                |
| NGO health-care centres or clinics                | Yes              | Yes                |
| Other settings or facilities                      | _                | _                  |

| Health care personnel allowed to provide legal abortions |                  |
|--|------------------|
| Doctors (speciality not specified)                       | Yes              |
| Specialist doctor, including OB/GYN                      | _                |
| Nurse  | _                |
| Midwife/nurse-midwife                                    | Yes              |
| Other provider(s)  | Yes <sup>5</sup> |
|  |                  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion                             | on services    |
|--|----------------|
| National guidelines on clinical and delivery of induced abortion   | service Yes    |
| National guidelines on clinical and delivery of post-abortion care | service Yes    |
| Restrictions on public information of abortion services            | n legal        |
| Counselling for contraceptive meth post-abortion care              | ods during Yes |

| Service delivery requirements for providers or facilities |                  |  |
|---|------------------|--|
| Referral linkage to a higher-level facility               | _                |  |
| Availability of a specialist doctor                       | _                |  |
| Minimum number of beds                                    | _                |  |
| Other facility/provider requirements                      | Yes <sup>6</sup> |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to<br>alternative provider or facility |
|--|-------------------|--|
| Health-care facilities   | _                 | _  |
| Health-care providers  | _                 | _  |

#### Notes:

- The Law on Abortion states that the decision on whether the conditions for lawful abortion are met requires an approval from a group of 2 to 3 doctors and also consent from the concerned person.
   Medium medical practitioner.
   Dilation and curettage.
   For gynaecological indications.
   Medical assistants.
   Technical capability in providing emergency medical treatment for any consequence which may result from abortion; means of transportation to a hospital, if necessary.



Prohibition of sex-selective abortion

# Abortion laws and policies, 2017

### Cameroon

| LAWS ON ABORTION                                 |   |   |  |  |
|--|---|---|--|--|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |  |
| To save life                                     | Yes                                     | _   |  |  |
| To preserve health                               | Yes                                     | _   |  |  |
| To preserve physical health                      | <del>-</del>                            | _   |  |  |
| To preserve mental health                        | <del>-</del>                            | _   |  |  |
| In cases of intellectual or cognitive disability | No                                      | _   |  |  |
| In cases of incest                               | No                                      | _   |  |  |
| In cases of rape                                 | Yes                                     | _   |  |  |
| In cases of foetal impairment                    | No                                      | _   |  |  |
| For economic or social reason                    | No                                      | _   |  |  |
| On request                                       | No                                      | _   |  |  |
| For other reason(s)                              | _                                       | _   |  |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |  |   |  |  |
|--|--|---|--|--|
| Authorizations required                      | Consent required                             |   |  |  |
| Authorization of health care professional(s) | Spousal consent                              | _ |  |  |
| Number of authorizations                     | Parental consent for minors                  | _ |  |  |
| Cadre of health care professional            | Consent by another adult                     | _ |  |  |
| Doctor (specialty not specified)             | _  |   |  |  |
| Specialist doctor, including OB/GYN          | Other requirements                           |   |  |  |
| Nurse  | Gestational age limits                       | _ |  |  |
| Midwife/nurse-midwife                        | Compulsory counselling                       | _ |  |  |
| Other providers                              | Compulsory waiting period                    | _ |  |  |
| Authorized in specially licensed facilities  | Length of waiting period (days)              | _ |  |  |
| Judicial authorization                       | Mandatory screening test                     |   |  |  |
| For minors                                   | HIV test                                     | _ |  |  |
| In case of rape                              | Other STI test(s)                            | _ |  |  |
| Police report in case of rape                | Ultrasound viewing or listening to heartbeat | _ |  |  |

| Age limit for parental consent (years) | <ul><li>Age limit for judicial consent (years)</li></ul> |  |
|--|--|--|
|  |  |  |
|  | Sex-selective abortion                                   |  |
| Prohibition of sex-selective abortion  | Restrictions on the methods to detect the sex            |  |

Age when a woman can obtain an abortion without parental or judicial consent

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | _                                | _   |  |
| Dilatation and evacuation             | <del>-</del>                     | _   |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | _   |  |
| Misoprostol only                      | _                                | _   |  |
| Other method(s)                       | <del>-</del>                     | _   |  |



#### Cameroon

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |  |
|--|---|--|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |  |  |
| Misoprostol  | No  | <del>-</del>   |  |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | _                  |
| Specialized abortion care public facilities       | <del>-</del>     | _                  |
| Private health-care centres or clinics            | <del>-</del>     | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | _                  |
| Other settings or facilities                      | _                | _                  |

| Health care personnel allowed to provide legal abortions |   |
|--|---|
| Doctors (speciality not specified)                       | _ |
| Specialist doctor, including OB/GYN                      | _ |
| Nurse  | _ |
| Midwife/nurse-midwife                                    | _ |
| Other provider(s)  | _ |
|  |   |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |              |
|--|--------------|
| National guidelines on clinical and service delivery of induced abortion   | _            |
| National guidelines on clinical and service delivery of post-abortion care | _            |
| Restrictions on public information on legal abortion services              | _            |
| Counselling for contraceptive methods during<br>post-abortion care         | <del>-</del> |

| Service delivery requirements for providers or facilities |              |  |
|---|--------------|--|
| Referral linkage to a higher-level facility               | _            |  |
| Availability of a specialist doctor                       | <del>-</del> |  |
| Minimum number of beds                                    | _            |  |
| Other facility/provider requirements                      | _            |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to<br>alternative provider or facility |  |
|--|-------------------|--|--|
| Health-care facilities   | _                 | _  |  |
| Health-care providers  | <del>-</del>      | _  |  |

Indicates that data are not available, not applicable or not specified.



### Canada

| LAWS ON ABORTION 1                               |   |   |  |
|--|---|---|--|
| egal grounds for induced abortion 2              | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | _   |  |
| To preserve health                               | Yes                                     | _   |  |
| To preserve physical health                      | Yes                                     | _   |  |
| To preserve mental health                        | Yes                                     | _   |  |
| In cases of intellectual or cognitive disability | <del>-</del>                            | _   |  |
| In cases of incest                               | Yes                                     | <del>-</del>                                    |  |
| In cases of rape                                 | Yes                                     | _   |  |
| In cases of foetal impairment                    | Yes                                     | _   |  |
| For economic or social reason                    | <del>-</del>                            | _   |  |
| On request                                       | Yes                                     | _   |  |
| For other reason(s)                              | _                                       | _   |  |

| Persons who can be criminally charged for an illegal abortion |   |          |   |                                    |   |  |
|---|---|----------|---|------------------------------------|---|--|
| Woman   | _ | Provider | _ | Other person who assists the woman | _ |  |

|  | REQUIREMENTS FOR INDUCED ABORTION |                       |
|--|-----------------------------------|-----------------------|
| Authorizations required                      |                                   | Consent required      |
| Authorization of health care professional(s) | No                                | Spousal consent       |
| Number of authorizations                     | _                                 | Parental consent for  |
| Cadre of health care professional            |                                   | Consent by another    |
| Doctor (specialty not specified)             | _                                 |                       |
| Specialist doctor, including OB/GYN          | _                                 | Other requirements    |
| Nurse  | _                                 | Gestational age limit |
| Midwife/nurse-midwife                        | _                                 | Compulsory counsel    |
| Other providers                              | _                                 | Compulsory waiting    |
| Authorized in specially licensed facilities  | _                                 | Length of waitin      |
| Judicial authorization                       |                                   | Mandatory screening   |
| For minors                                   | _                                 | HIV test              |
| In case of rape                              | _                                 | Other STI test(s      |
| Police report in case of rape                | _                                 | Ultrasound viewing of |
|  |                                   |                       |

| Spousal consent             | No                     |
|-----------------------------|------------------------|
| Parental consent for minors | Varies by jurisdiction |
| Consent by another adult    | _                      |
|                             |                        |
| Other requirements          |                        |
| Other requirements          |                        |
| Gestational age limits      | Varies by jurisdiction |
| •                           | Varies by jurisdiction |

| Age when a woman can obtain an abortion without parental or judicial consent |   |  |   |  |
|--|---|--|---|--|
| Age limit for parental consent (years)                                       | _ | Age limit for judicial consent (years) | _ |  |

Mandatory screening test HIV test Other STI test(s)

Length of waiting period (days)

Ultrasound viewing or listening to heartbeat

|                                       | Sex-selective abortion                                      |
|---------------------------------------|---|
| Prohibition of sex-selective abortion | Restrictions on the methods to detect the sex of the foetus |

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | Yes                              | 12  |  |
| Dilatation and evacuation             | Yes                              | 24  |  |
| Combination mifepristone- misoprostol | Yes                              | 7   |  |
| Misoprostol only                      | _                                | <del>-</del>                              |  |
| Other method(s)                       | Yes <sup>4</sup>                 | _   |  |



#### Canada

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | Yes   | Yes <sup>5</sup>   |  |
| Misoprostol  | _   | <del>-</del>   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | _                  |
| Specialized abortion care public facilities       | <del>-</del>     | _                  |
| Private health-care centres or clinics            | <del>-</del>     | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | _                  |
| Other settings or facilities                      | _                | _                  |

| Doctors (speciality not specified)   | _ |
|--|---|
| Specialist doctor, including OB/GYN  | _ |
| Nurse  | _ |
| Midwife/nurse-midwife  | _ |
| Other provider(s)  | _ |
| Information and guidelines on abortion services  |   |
| National guidelines on clinical and service  | _ |
| delivery of induced abortion  National guidelines on clinical and service delivery of post-abortion care | _ |
| Restrictions on public information on legal  |   |
| abortion services  | _ |

Health care personnel allowed to provide legal abortions

| Public health coverage for induced abortion for all women       | Yes   |
|---|-------|
| Public health coverage for induced abortion for poor women only | No    |
| Public health coverage for abortion complications               | _     |
| Private health coverage for induced abortion                    | Yes   |
| Other type of coverage  | _     |
| udaa daliyayy saggiyamanta fay nyayidaya ay facil               | ition |
| vice delivery requirements for providers or facil               | ities |
| Referral linkage to a higher-level facility                     | _     |

Types of insurance or other coverage for abortion

Availability of a specialist doctor Minimum number of beds

Other facility/provider requirements

| post-abortion care   | Other facility/provider requiren | nents —   |
|--|----------------------------------|---|
| Conscientious objection to the provision of legally induced abortion | Allowed to object                | Required to refer to alternative provider or facility |
| Health-care facilities   | _                                | _   |
| Health-care providers  | _                                | _   |

#### Notes:

- Indicates that data are not available, not applicable or not specified.
- 1. Varies by jurisdiction.
  2. There are no legal restrictions on abortion, including no gestational limit. Abortion services form part of medically required health services provision and are regulated as such. The Canada Health Act outlines coverage for abortion services. Access however in practice varies depending on the availability of public facilities, and gestational limits vary at province level.
  3. The legal right to make health care decisions depends on decision-making ability rather than age; in other provinces the age of consent is consistent with the age of majority.
  4. Other methods may be allowed, depending on the province. For instance, in British Columbia, abortion by use of Methotrexate and Misoprostol is allowed for pregnancies up to the 49th day of gestation.
  5. With prescription only.



Prohibition of sex-selective abortion

# Abortion laws and policies, 2017

### **Central African Republic**

| LAWS ON ABORTION                                 |                                      |   |  |
|--|--------------------------------------|---|--|
| egal grounds for induced abortion                | Currently permissible in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                  | 8   |  |
| To preserve health                               | <del>-</del>                         | <del>-</del>                                    |  |
| To preserve physical health                      | _                                    | _   |  |
| To preserve mental health                        | _                                    | _   |  |
| In cases of intellectual or cognitive disability | No                                   | _   |  |
| In cases of incest                               | Yes                                  | 8   |  |
| In cases of rape                                 | Yes                                  | 8   |  |
| In cases of foetal impairment                    | Yes                                  | 8   |  |
| For economic or social reason                    | No                                   | _   |  |
| On request                                       | No                                   | _   |  |
| For other reason(s)                              | Yes 1                                | _   |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |   |
|---|-----|----------|-----|------------------------------------|---|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | _ |

| REQUIREMENTS FOR INDUCED ABORTION            |   |  |     |
|--|---|--|-----|
| Authorizations required                      |   | Consent required                             |     |
| Authorization of health care professional(s) | _ | Spousal consent                              | _   |
| Number of authorizations                     | _ | Parental consent for minors                  | _   |
| Cadre of health care professional            |   | Consent by another adult                     | _   |
| Doctor (specialty not specified)             | _ |  |     |
| Specialist doctor, including OB/GYN          | _ | Other requirements                           |     |
| Nurse  | _ | Gestational age limits                       | Yes |
| Midwife/nurse-midwife                        | _ | Compulsory counselling                       | _   |
| Other providers                              | _ | Compulsory waiting period                    | _   |
| Authorized in specially licensed facilities  | _ | Length of waiting period (days)              | _   |
| Judicial authorization                       |   | Mandatory screening test                     |     |
| For minors                                   | _ | HIV test                                     | _   |
| In case of rape                              | _ | Other STI test(s)                            | _   |
| Police report in case of rape                | _ | Ultrasound viewing or listening to heartbeat | _   |

Age when a woman can obtain an abortion without parental or judicial consent

| Age limit for parental consent (years) | Age limit for judicial consent (years) |  |
|--|--|--|
|  | Sex-selective abortion                 |  |

Restrictions on the methods to detect the sex

| ACCESS TO ABORTION SERVICES           |                                  |   |  |  |
|---------------------------------------|----------------------------------|---|--|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |  |
| Vacuum aspiration                     | _                                | _   |  |  |
| Dilatation and evacuation             | _                                | <del>-</del>                              |  |  |
| Combination mifepristone- misoprostol | _                                | _   |  |  |
| Misoprostol only                      | _                                | _   |  |  |
| Other method(s)                       | _                                | _   |  |  |



### **Central African Republic**

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |  |
| Misoprostol  | No  | <del>-</del>   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | Yes                |
| Specialized abortion care public facilities       | _                | _                  |
| Private health-care centres or clinics            | <del>-</del>     | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | _                  |
| Other settings or facilities                      | _                | _                  |

| Doctors (speciality not specified)  | Yes |
|-------------------------------------|-----|
| Specialist doctor, including OB/GYN | _   |
| Nurse                               | _   |
| Midwife/nurse-midwife               | _   |
| Other provider(s)                   | _   |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |   |
|--|---|
| National guidelines on clinical and service delivery of induced abortion   | _ |
| National guidelines on clinical and service delivery of post-abortion care | _ |
| Restrictions on public information on legal abortion services              | _ |
| Counselling for contraceptive methods during<br>post-abortion care         | _ |

| Service delivery requirements for providers or | facilities   |
|--|--------------|
| Referral linkage to a higher-level facility    | _            |
| Availability of a specialist doctor            | _            |
| Minimum number of beds                         | <del>-</del> |
| Other facility/provider requirements           | _            |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to<br>alternative provider or facility |
|--|-------------------|--|
| Health-care facilities   | _                 | _  |
| Health-care providers  | _                 | _  |

#### Notes:

- Indicates that data are not available, not applicable or not specified.
- If a minor finds herself in a state of grave distress.



### Chad

| LAWS ON ABORTION                                 |                                      |   |  |
|--|--------------------------------------|---|--|
| egal grounds for induced abortion                | Currently permissible in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                  | No limit  |  |
| To preserve health                               | Yes                                  | _   |  |
| To preserve physical health                      | Yes                                  | _   |  |
| To preserve mental health                        | Yes                                  | _   |  |
| In cases of intellectual or cognitive disability | No                                   | _   |  |
| In cases of incest                               | Yes                                  | _   |  |
| In cases of rape                                 | Yes                                  | _   |  |
| In cases of foetal impairment                    | Yes                                  | No limit  |  |
| For economic or social reason                    | No                                   | _   |  |
| On request                                       | No                                   | _   |  |
| For other reason(s)                              | Yes <sup>2</sup>                     | _   |  |

| Persons who can be criminally charged for an illegal abortion |     |              |                                    |   |
|---|-----|--------------|------------------------------------|---|
| Woman   | Yes | Provider Yes | Other person who assists the woman | _ |

| REQUIREMENTS FOR INDUCED ABORTION            |     |  |   |
|--|-----|--|---|
| Authorizations required                      |     | Consent required                             |   |
| Authorization of health care professional(s) | Yes | Spousal consent                              | _ |
| Number of authorizations                     | 3   | Parental consent for minors                  | _ |
| Cadre of health care professional            |     | Consent by another adult                     | _ |
| Doctor (specialty not specified)             | Yes |  |   |
| Specialist doctor, including OB/GYN          | _   | Other requirements                           |   |
| Nurse  | _   | Gestational age limits                       | _ |
| Midwife/nurse-midwife                        | _   | Compulsory counselling                       | _ |
| Other providers                              | _   | Compulsory waiting period                    | _ |
| Authorized in specially licensed facilities  | _   | Length of waiting period (days)              | _ |
| Judicial authorization                       |     | Mandatory screening test                     |   |
| For minors                                   | _   | HIV test                                     | _ |
| In case of rape                              | _   | Other STI test(s)                            | _ |
| Police report in case of rape                | No  | Ultrasound viewing or listening to heartbeat | _ |

| Age when a woman can obtain an abortion without parental or judicial consent |  |   |  |
|--|--|---|--|
| Age limit for parental consent (years)                                       | <ul> <li>Age limit for judicial consent (years)</li> </ul> | _ |  |
|  |  |   |  |
|  |  |   |  |

|                                       | Sex-selective abortion |   |
|---------------------------------------|------------------------|---|
| Prohibition of sex-selective abortion | _                      | Restrictions on the methods to detect the sex of the foetus |
|                                       |                        |   |

| ACCESS TO ABORTION SERVICES           |                                  |   |
|---------------------------------------|----------------------------------|---|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |
| Vacuum aspiration                     | _                                | _   |
| Dilatation and evacuation             | <del>-</del>                     | <del>-</del>                              |
| Combination mifepristone- misoprostol | <del>-</del>                     | <del>-</del>                              |
| Misoprostol only                      | _                                | <del>-</del>                              |
| Other method(s)                       | _                                | _   |



#### Chad

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |
|--|---|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |
| Misoprostol  | No  | <del>-</del>   |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>_</del>     | <del>_</del>       |
| Secondary (district-level) health-care facilities | _                | <del>-</del>       |
| Specialized abortion care public facilities       | <del>-</del>     | <del>-</del>       |
| Private health-care centres or clinics            | _                | <del>-</del>       |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | _                | _                  |

| Health care personnel allowed to provide legal abortions |   |
|--|---|
| Doctors (speciality not specified)                       | _ |
| Specialist doctor, including OB/GYN                      | _ |
| Nurse  | _ |
| Midwife/nurse-midwife                                    | _ |
| Other provider(s)  | _ |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | _   |
| National guidelines on clinical and service delivery of post-abortion care | _   |
| Restrictions on public information on legal abortion services              | Yes |
| Counselling for contraceptive methods during<br>post-abortion care         | _   |

| Service delivery requirements for providers or facilities |   |  |
|---|---|--|
| Referral linkage to a higher-level facility               | _ |  |
| Availability of a specialist doctor                       | _ |  |
| Minimum number of beds                                    | _ |  |
| Other facility/provider requirements                      | _ |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to<br>alternative provider or facility |
|--|-------------------|--|
| Health-care facilities   | _                 | _  |
| Health-care providers  | _                 | _  |

#### Notes:

- Indicates that data are not available, not applicable or not specified.
- The law states that abortion is legal "when the unborn child has been diagnosed with a particularly grave disorder." The law does not specify which disorders are meant.
   Sexual assault.
   The authorisation for an abortion is issued by the public prosecutor after a doctor has certified the facts.



# Abortion laws and policies, 2017 Chile

| LAWS ON ABORTION                                 |   |   |
|--|---|---|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |
| To save life                                     | Yes                                     | No limit  |
| To preserve health                               | No                                      | <del>-</del>                                    |
| To preserve physical health                      | No                                      | _   |
| To preserve mental health                        | No                                      | _   |
| In cases of intellectual or cognitive disability | No                                      | _   |
| In cases of incest                               | No                                      | _   |
| In cases of rape                                 | Yes                                     | 12  |
| In cases of foetal impairment                    | Yes                                     | _   |
| For economic or social reason                    | No                                      | _   |
| On request                                       | No                                      | _   |
| For other reason(s)                              | _                                       | _   |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |                  |  |     |  |
|--|------------------|--|-----|--|
| Authorizations required                      |                  | Consent required                             |     |  |
| Authorization of health care professional(s) | Yes              | Spousal consent                              | _   |  |
| Number of authorizations                     | 2                | Parental consent for minors                  | _   |  |
| Cadre of health care professional            |                  | Consent by another adult                     | Yes |  |
| Doctor (specialty not specified)             | _                |  |     |  |
| Specialist doctor, including OB/GYN          | Yes              | Other requirements                           |     |  |
| Nurse  | _                | Gestational age limits                       | Yes |  |
| Midwife/nurse-midwife                        | _                | Compulsory counselling                       | Yes |  |
| Other providers                              | Yes <sup>2</sup> | Compulsory waiting period                    | _   |  |
| Authorized in specially licensed facilities  | _                | Length of waiting period (days)              | _   |  |
| Judicial authorization                       |                  | Mandatory screening test                     |     |  |
| For minors                                   | Yes              | HIV test                                     | _   |  |
| In case of rape                              | _                | Other STI test(s)                            | _   |  |
| Police report in case of rape                | _                | Ultrasound viewing or listening to heartbeat | _   |  |

| Age Wich a Woman can obtain an abortion Without parental or judicial content |  |    |  |
|--|--|----|--|
| Age limit for parental consent (years)                                       | <ul> <li>Age limit for judicial consent (years)</li> </ul> | 14 |  |
|  |  |    |  |
|  |  |    |  |

|                                       | Sex-selective abortion                                      |
|---------------------------------------|---|
| Prohibition of sex-selective abortion | Restrictions on the methods to detect the sex of the foetus |
|                                       |   |

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | Yes                              | 14  |  |
| Dilatation and evacuation             | Yes                              | 12-22                                     |  |
| Combination mifepristone- misoprostol | Yes                              | 24  |  |
| Misoprostol only                      | Yes                              | 24  |  |
| Other method(s)                       | Yes                              | 12-22                                     |  |



#### Chile

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |  |
| Misoprostol  | Yes <sup>3</sup>                                  | <del>-</del>   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | _                | <del>-</del>       |
| Secondary (district-level) health-care facilities | Yes              | Yes                |
| Specialized abortion care public facilities       | _                | _                  |
| Private health-care centres or clinics            | Yes              | Yes                |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | _                | Yes <sup>4</sup>   |

| Health care personnel allowed to provide legal abortions |     |  |
|--|-----|--|
| Doctors (speciality not specified)                       | _   |  |
| Specialist doctor, including OB/GYN                      | _   |  |
| Nurse  | _   |  |
| Midwife/nurse-midwife                                    | _   |  |
| Other provider(s)  | Yes |  |
|  |     |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | Yes |
| National guidelines on clinical and service delivery of post-abortion care | Yes |
| Restrictions on public information on legal abortion services              | Yes |
| Counselling for contraceptive methods during<br>post-abortion care         | Yes |

| Service delivery requirements for providers or facilities |              |  |  |
|---|--------------|--|--|
| Referral linkage to a higher-level facility               | _            |  |  |
| Availability of a specialist doctor                       | <del>-</del> |  |  |
| Minimum number of beds                                    | _            |  |  |
| Other facility/provider requirements                      | _            |  |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to<br>alternative provider or facility |
|--|-------------------|--|
| Health-care facilities   | _                 | _  |
| Health-care providers  | Yes               | Yes  |

#### Notes:

- Indicates that data are not available, not applicable or not specified.
- Abortion is permitted in the case of rape during the first 18 weeks of pregnancy, if the woman is under 14 years of age.
   Surgeon.
   For non-gynaecological indications only.
   Tertiary level.



### China

| LAWS ON ABORTION                                 |   |   |  |
|--|---|---|--|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | No limit  |  |
| To preserve health                               | Yes                                     | No limit  |  |
| To preserve physical health                      | Yes                                     | No limit  |  |
| To preserve mental health                        | <del>-</del>                            | _   |  |
| In cases of intellectual or cognitive disability | <del>-</del>                            | <del>-</del>                                    |  |
| In cases of incest                               | <del>-</del>                            | _   |  |
| In cases of rape                                 | _                                       | _   |  |
| In cases of foetal impairment                    | Yes                                     | No limit  |  |
| For economic or social reason                    | _                                       | _   |  |
| On request                                       | Yes                                     | No limit  |  |
| For other reason(s)                              | _                                       | _   |  |

|       |   | Persons who can be crimina | ally charged for an | illegal abortion                   |     |  |
|-------|---|----------------------------|---------------------|------------------------------------|-----|--|
| Woman | _ | Provider                   | Yes                 | Other person who assists the woman | Yes |  |

|  | REQUIREMENTS FO | R INDUCED ABORTION    |
|--|-----------------|-----------------------|
| Authorizations required                      |                 | Consent required      |
| Authorization of health care professional(s) | _               | Spousal consent       |
| Number of authorizations                     | _               | Parental consent for  |
| Cadre of health care professional            |                 | Consent by another    |
| Doctor (specialty not specified)             | _               |                       |
| Specialist doctor, including OB/GYN          | _               | Other requirements    |
| Nurse  | _               | Gestational age limit |
| Midwife/nurse-midwife                        | _               | Compulsory counsel    |
| Other providers                              | _               | Compulsory waiting    |
| Authorized in specially licensed facilities  | Yes             | Length of waitin      |
| Judicial authorization                       |                 | Mandatory screening   |
| For minors                                   | _               | HIV test              |
| In case of rape                              | _               | Other STI test(s      |
| Police report in case of rape                | _               | Ultrasound viewing of |
|  |                 |                       |

| Parental consent for minors                  | _   |  |
|--|-----|--|
| Consent by another adult                     | _   |  |
|  |     |  |
| Other requirements                           |     |  |
| Gestational age limits                       | Yes |  |
| Compulsory counselling                       | _   |  |
| Compulsory waiting period                    | _   |  |
| Length of waiting period (days)              | _   |  |
| Mandatory screening test                     |     |  |
| HIV test                                     | _   |  |
| Other STI test(s)                            | _   |  |
| Ultrasound viewing or listening to heartbeat | _   |  |

| Age when a woman can obtain an abortion without parental or judicial consent |  |   |  |
|--|--|---|--|
| Age limit for parental consent (years)                                       | <ul> <li>Age limit for judicial consent (years)</li> </ul> | _ |  |

|                                       | Sex-selective abortion |   |                  |
|---------------------------------------|------------------------|---|------------------|
| Prohibition of sex-selective abortion | Yes                    | Restrictions on the methods to detect the sex of the foetus | Yes <sup>1</sup> |

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | Yes                              | 10  |  |
| Dilatation and evacuation             | _                                | <del>-</del>                              |  |
| Combination mifepristone- misoprostol | Yes                              | 7   |  |
| Misoprostol only                      | _                                | _   |  |
| Other method(s)                       | Yes <sup>2</sup>                 | 27  |  |



#### China

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | Yes   | _  |  |
| Misoprostol  | Yes <sup>3</sup>                                  | No   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | _                | <del>-</del>       |
| Secondary (district-level) health-care facilities | _                | <del>-</del>       |
| Specialized abortion care public facilities       | _                | <del>-</del>       |
| Private health-care centres or clinics            | _                | <del>-</del>       |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | Yes <sup>4</sup> | _                  |

| Health care personnel allowed to provide legal abortions |                  |
|--|------------------|
| Doctors (speciality not specified)                       | Yes              |
| Specialist doctor, including OB/GYN                      | _                |
| Nurse  | _                |
| Midwife/nurse-midwife                                    | _                |
| Other provider(s)  | Yes <sup>5</sup> |

| Types of insurance or other coverage for abortion                  |                  |
|--|------------------|
| Public health coverage for induced abortion for all women          | Yes              |
| Public health coverage for induced abortion for<br>poor women only | _                |
| Public health coverage for abortion complications                  | _                |
| Private health coverage for induced abortion                       | _                |
| Other type of coverage   | Yes <sup>6</sup> |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | Yes |
| National guidelines on clinical and service delivery of post-abortion care | Yes |
| Restrictions on public information on legal abortion services              | _   |
| Counselling for contraceptive methods during post-abortion care            | Yes |

| Service delivery requirements for providers or facilities |                  |  |
|---|------------------|--|
| Referral linkage to a higher-level facility               | Yes              |  |
| Availability of a specialist doctor                       | Yes              |  |
| Minimum number of beds                                    | Yes              |  |
| Other facility/provider requirements                      | Yes <sup>7</sup> |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | _                 | _   |

#### Notes:

- Indicates that data are not available, not applicable or not specified.

- 1. Use of ultrasonography or other techniques to identify foetal sex for non-medical purposes is strictly prohibited.
  2. Rivanol for mid-trimester abortion, induction of labour, dilation and curettage.
  3. For gnaecological indications.
  4. For abortions after 12 weeks of gestation, they must take place in hospital.
  5. Must pass the examination of the administrative department of public health under the people's government at or above the county level, and obtain a corresponding qualification certificate.
  6. Couples of reproductive age who practise family planning enjoy, free of charge, the basic items of technical services specified by the State.
  7. Places performing medical abortions must have access to emergency curettage, oxygen, infusion, transfusion (blood transfusion- if no conditions of the unit must have the nearest referral conditions) region, above the county level medical units and family planning technical service personnel must carry out family planning technical services or institutions. The family planning technical service personnel must carry out family planning technical service scopes and items and categories of surgery, and abide by the profession-related laws, regulations, rules, general technical norms, professional ethical norms and management systems.



### Colombia

| LAWS ON ABORTION                                 |                                      |   |  |
|--|--------------------------------------|---|--|
| Legal grounds for induced abortion               | Currently permissible in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                  | No limit  |  |
| To preserve health                               | Yes                                  | No limit  |  |
| To preserve physical health                      | Yes                                  | No limit  |  |
| To preserve mental health                        | Yes                                  | No limit  |  |
| In cases of intellectual or cognitive disability | No                                   | <del>-</del>                                    |  |
| In cases of incest                               | Yes                                  | No limit  |  |
| In cases of rape                                 | Yes                                  | No limit  |  |
| In cases of foetal impairment                    | Yes                                  | No limit  |  |
| For economic or social reason                    | No                                   | <del>-</del>                                    |  |
| On request                                       | No                                   | <del>-</del>                                    |  |
| For other reason(s)                              | Yes 1                                | _   |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |                |  |    |
|--|----------------|--|----|
| Authorizations required                      |                | Consent required                             |    |
| Authorization of health care professional(s) | Yes            | Spousal consent                              | No |
| Number of authorizations                     | 1 <sup>2</sup> | Parental consent for minors                  | No |
| Cadre of health care professional            |                | Consent by another adult                     | _  |
| Doctor (specialty not specified)             | Yes            |  |    |
| Specialist doctor, including OB/GYN          | _              | Other requirements                           |    |
| Nurse  | _              | Gestational age limits                       | No |
| Midwife/nurse-midwife                        | _              | Compulsory counselling                       | No |
| Other providers                              | _              | Compulsory waiting period                    | No |
| Authorized in specially licensed facilities  | No             | Length of waiting period (days)              | _  |
| Judicial authorization                       |                | Mandatory screening test                     |    |
| For minors                                   | No             | HIV test                                     | No |
| In case of rape                              | No             | Other STI test(s)                            | No |
| Police report in case of rape                | Yes            | Ultrasound viewing or listening to heartbeat | No |

| Age limit for parental consent (years) | <ul><li>Age limit for judicial consent (years)</li></ul> |
|--|--|
|  |  |
|  | Sex-selective abortion                                   |
| Prohibition of sex-selective abortion  | Restrictions on the methods to detect the sex            |

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | Yes                              | 15  |  |
| Dilatation and evacuation             | Yes                              | 15 or over                                |  |
| Combination mifepristone- misoprostol | No                               | _   |  |
| Misoprostol only                      | Yes                              | 10  |  |
| Other method(s)                       | <del>-</del>                     | <del>-</del>                              |  |



#### Colombia

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |  |
| Misoprostol  | Yes <sup>3</sup>                                  | Yes <sup>4</sup>   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | Yes              | Yes                |
| Secondary (district-level) health-care facilities | Yes              | Yes                |
| Specialized abortion care public facilities       | Yes              | Yes                |
| Private health-care centres or clinics            | Yes              | Yes                |
| NGO health-care centres or clinics                | Yes              | Yes                |
| Other settings or facilities                      | _                | <del>-</del>       |

| Health care personnel allowed to provide legal abortions |     |  |
|--|-----|--|
| Doctors (speciality not specified)                       | Yes |  |
| Specialist doctor, including OB/GYN                      | Yes |  |
| Nurse  | No  |  |
| Midwife/nurse-midwife                                    | No  |  |
| Other provider(s)  | _   |  |

| Types of insurance or other coverage for abortion                  |     |
|--|-----|
| Public health coverage for induced abortion for all women          | _   |
| Public health coverage for induced abortion for<br>poor women only | _   |
| Public health coverage for abortion complications                  | Yes |
| Private health coverage for induced abortion                       | Yes |
| Other type of coverage   | _   |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | Yes |
| National guidelines on clinical and service delivery of post-abortion care | Yes |
| Restrictions on public information on legal abortion services              | No  |
| Counselling for contraceptive methods during post-abortion care            | Yes |

| Service delivery requirements for providers or facilities |                  |  |
|---|------------------|--|
| Referral linkage to a higher-level facility               | Yes              |  |
| Availability of a specialist doctor                       | Yes              |  |
| Minimum number of beds                                    | Yes              |  |
| Other facility/provider requirements                      | Yes <sup>5</sup> |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | No                | _   |
| Health-care providers  | Yes <sup>6</sup>  | Yes   |

The designations employed in this publication and the material presented in it do not imply the expression of any opinion whatsoever on the part of the Secretariat of the United Nations concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries.

- Indicates that data are not available, not applicable or not specified.
- 1. The pregnancy is the result of a criminal act of unwanted artificial insemination or unwanted implantation of a fertilized ovum.

  2. The settling up of Commissions and boards to decide on access to legal and safe abortion is prohibited, as it is considered an unacceptable obstacle which could delay a woman or girl's access to safe abortion services to which they are entitled by law. Although a health professional has to 'certfly' the indication (e.g. health risk), the woman is the one entitled to decide whether to continue or terminate the pregnancy. Health institutions or any other actor or professional cannot decide for the woman about the continuation or interruption of the pregnancy.

  3. For gynaecological indications.

  4. With prescription only.

  5. Minimum requirements for health service providers and for the provision of gynaecological health services, including periodic professional clinical and human rights training.

  6. Provider type not specified.

Notes:



### Comoros

| LAWS ON ABORTION                                 |   |   |
|--|---|---|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |
| To save life                                     | Yes                                     | _   |
| To preserve health                               | Yes                                     | <del>-</del>                                    |
| To preserve physical health                      | <del>-</del>                            | <del>-</del>                                    |
| To preserve mental health                        | <del>-</del>                            | <del>-</del>                                    |
| In cases of intellectual or cognitive disability | No                                      | <del>-</del>                                    |
| In cases of incest                               | No                                      | <del>-</del>                                    |
| In cases of rape                                 | No                                      | _   |
| In cases of foetal impairment                    | No                                      | _   |
| For economic or social reason                    | No                                      | _   |
| On request                                       | No                                      | _   |
| For other reason(s)                              | _                                       | _   |

| Persons who can be criminally charged for an illegal abortion |     |              |                                    |   |
|---|-----|--------------|------------------------------------|---|
| Woman   | Yes | Provider Yes | Other person who assists the woman | _ |

| REQUIREMENTS FOR INDUCED ABORTION            |     |  |   |
|--|-----|--|---|
| Authorizations required                      |     | Consent required                             |   |
| Authorization of health care professional(s) | Yes | Spousal consent                              | _ |
| Number of authorizations                     | 2   | Parental consent for minors                  | _ |
| Cadre of health care professional            |     | Consent by another adult                     | _ |
| Doctor (specialty not specified)             | Yes |  |   |
| Specialist doctor, including OB/GYN          | _   | Other requirements                           |   |
| Nurse  | _   | Gestational age limits                       | _ |
| Midwife/nurse-midwife                        | _   | Compulsory counselling                       | _ |
| Other providers                              | _   | Compulsory waiting period                    | _ |
| Authorized in specially licensed facilities  | _   | Length of waiting period (days)              | _ |
| Judicial authorization                       |     | Mandatory screening test                     |   |
| For minors                                   | _   | HIV test                                     | _ |
| In case of rape                              | _   | Other STI test(s)                            | _ |
| Police report in case of rape                | _   | Ultrasound viewing or listening to heartbeat | _ |

| Age limit for parental consent (years) | <ul><li>Age limit for judicial consent (years)</li></ul> |
|--|--|
|  |  |
|  | Sex-selective abortion                                   |
| Deskibition of any colorative aboution | Restrictions on the methods to detect the sex            |

| ACCESS TO ABORTION SERVICES           |                                  |   |
|---------------------------------------|----------------------------------|---|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |
| Vacuum aspiration                     | <del>-</del>                     | _   |
| Dilatation and evacuation             | <del>-</del>                     | _   |
| Combination mifepristone- misoprostol | <del>-</del>                     | _   |
| Misoprostol only                      | _                                | _   |
| Other method(s)                       | <del>-</del>                     | <del>-</del>                              |



#### Comoros

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | _   | _  |  |
| Misoprostol  | <del>-</del>                                      | _  |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | _                  |
| Specialized abortion care public facilities       | <del>-</del>     | _                  |
| Private health-care centres or clinics            | <del>-</del>     | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | _                  |
| Other settings or facilities                      | _                | _                  |

| Health care personnel allowed to provide legal abortions |              |
|--|--------------|
| Doctors (speciality not specified)                       | _            |
| Specialist doctor, including OB/GYN                      | _            |
| Nurse  | _            |
| Midwife/nurse-midwife                                    | <del>_</del> |
| Other provider(s)  | _            |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and            | guidelines on abortion services                   |   |
|----------------------------|---|---|
|                            | delines on clinical and service aduced abortion   | _ |
|                            | delines on clinical and service ost-abortion care | _ |
| Restrictions abortion serv | on public information on legal vices              | _ |
| Counselling post-abortion  | for contraceptive methods during                  | _ |

| Service delivery requirements for providers or facilities |              |  |
|---|--------------|--|
| Referral linkage to a higher-level facility               | _            |  |
| Availability of a specialist doctor                       | <del>-</del> |  |
| Minimum number of beds                                    | _            |  |
| Other facility/provider requirements                      | _            |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | _                 | _   |

#### Notes:

- Indicates that data are not available, not applicable or not specified
- 1. Abortions can be performed for "serious medical reasons." The Penal Code does not indicate whether these reasons may relate to mental health as well as to physical health. It does not specify a gestational limit.



### Congo

| LAWS ON ABORTION                                 |   |   |
|--|---|---|
| Legal grounds for induced abortion               | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |
| To save life                                     | Yes                                     | <del>-</del>                                    |
| To preserve health                               | No                                      | <del>-</del>                                    |
| To preserve physical health                      | No                                      | <del>_</del>                                    |
| To preserve mental health                        | No                                      | _   |
| In cases of intellectual or cognitive disability | No                                      | <del>-</del>                                    |
| In cases of incest                               | No                                      | _   |
| In cases of rape                                 | No                                      | <del>-</del>                                    |
| In cases of foetal impairment                    | No                                      | <del>-</del>                                    |
| For economic or social reason                    | No                                      | <del>-</del>                                    |
| On request                                       | No                                      | <del>-</del>                                    |
| For other reason(s)                              | _                                       | _   |

|       |     | Persons who can be criminally cha | arged for | an illegal abortion                |     |
|-------|-----|-----------------------------------|-----------|------------------------------------|-----|
| Woman | Yes | Provider                          | Yes       | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |  |   |
|--|--|---|
| Authorizations required                      | Consent required                             |   |
| Authorization of health care professional(s) | — Spousal consent                            | _ |
| Number of authorizations                     | Parental consent for minors                  | _ |
| Cadre of health care professional            | Consent by another adult                     | _ |
| Doctor (specialty not specified)             | _  |   |
| Specialist doctor, including OB/GYN          | Other requirements                           |   |
| Nurse  | — Gestational age limits                     | _ |
| Midwife/nurse-midwife                        | — Compulsory counselling                     | _ |
| Other providers                              | Compulsory waiting period                    | _ |
| Authorized in specially licensed facilities  | Length of waiting period (days)              | _ |
| Judicial authorization                       | Mandatory screening test                     |   |
| For minors                                   | — HIV test                                   | _ |
| In case of rape                              | — Other STI test(s)                          | _ |
| Police report in case of rape                | Ultrasound viewing or listening to heartbeat | _ |

| Age when a woman can obtain an abortion without parental or judicial consent |   |  |   |  |
|--|---|--|---|--|
| Age limit for parental consent (years)                                       | _ | Age limit for judicial consent (years) | _ |  |
|  |   |  |   |  |
| Sex-selective abortion   |   |  |   |  |

| Prohibition of sex-selective abortion | Restrictions on the methods to detect the sex of the foetus |  |
|---------------------------------------|---|--|
| ACCESS TO ABORTION SERVICES           |   |  |

| ACCESS TO ABORTION SERVICES           |                                  |   |
|---------------------------------------|----------------------------------|---|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |
| Vacuum aspiration                     | <del>-</del>                     | _   |
| Dilatation and evacuation             | <del>-</del>                     | <del>-</del>                              |
| Combination mifepristone- misoprostol | <del>-</del>                     | <del>-</del>                              |
| Misoprostol only                      | _                                | _   |
| Other method(s)                       | _                                | _   |



### Congo

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |  |
| Misoprostol  | Yes <sup>2</sup>                                  | _  |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | _                  |
| Specialized abortion care public facilities       | <del>-</del>     | _                  |
| Private health-care centres or clinics            | <del>-</del>     | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | _                  |
| Other settings or facilities                      | _                | _                  |

| Health care personnel allowed to provide legal abortions |   |
|--|---|
| Doctors (speciality not specified)                       | _ |
| Specialist doctor, including OB/GYN                      | _ |
| Nurse  | _ |
| Midwife/nurse-midwife                                    | _ |
| Other provider(s)  | _ |
|  |   |
| Information and guidelines on abortion services          |   |
|  |   |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| formation and guidelines on abortion services                              |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | _   |
| National guidelines on clinical and service delivery of post-abortion care | _   |
| Restrictions on public information on legal abortion services              | Yes |
| Counselling for contraceptive methods during post-abortion care            | _   |

| Service delivery requirements for providers or facilities |   |  |
|---|---|--|
| Referral linkage to a higher-level facility               | _ |  |
| Availability of a specialist doctor                       | _ |  |
| Minimum number of beds                                    | _ |  |
| Other facility/provider requirements                      | _ |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | _                 | _   |

#### Notes:

- Indicates that data are not available, not applicable or not specified.
- 1. Abortion is generally illegal in the country. However, under the general criminal law principles of necessity, it is allowed to be performed to save the life of the pregnant woman.

  2. Indications not specified.



Prohibition of sex-selective abortion

# Abortion laws and policies, 2017

### **Cook Islands**

| LAWS ON ABORTION                                 |   |   |
|--|---|---|
| Legal grounds for induced abortion               | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |
| To save life                                     | Yes                                     | _   |
| To preserve health                               | Yes                                     | _   |
| To preserve physical health                      | Yes                                     | _   |
| To preserve mental health                        | Yes                                     | _   |
| In cases of intellectual or cognitive disability | No                                      | _   |
| In cases of incest                               | No                                      | <del>-</del>                                    |
| In cases of rape                                 | No                                      | _   |
| In cases of foetal impairment                    | No                                      | _   |
| For economic or social reason                    | No                                      | _   |
| On request                                       | No                                      | _   |
| For other reason(s)                              | _                                       | _   |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |  |   |
|--|--|---|
| Authorizations required                      | Consent required                             |   |
| Authorization of health care professional(s) | — Spousal consent                            | _ |
| Number of authorizations                     | Parental consent for minors                  | _ |
| Cadre of health care professional            | Consent by another adult                     | _ |
| Doctor (specialty not specified)             | _  |   |
| Specialist doctor, including OB/GYN          | Other requirements                           |   |
| Nurse  | — Gestational age limits                     | _ |
| Midwife/nurse-midwife                        | — Compulsory counselling                     | _ |
| Other providers                              | Compulsory waiting period                    | _ |
| Authorized in specially licensed facilities  | Length of waiting period (days)              | _ |
| Judicial authorization                       | Mandatory screening test                     |   |
| For minors                                   | - HIV test                                   | _ |
| In case of rape                              | — Other STI test(s)                          | _ |
| Police report in case of rape                | Ultrasound viewing or listening to heartbeat | _ |

| Age when a woman can obtain an abortion without parental or judicial consent |  |  |
|--|--|--|
| Age limit for parental consent (years)                                       | <ul> <li>Age limit for judicial consent (years)</li> </ul> |  |
|  |  |  |
| s  | ex-selective abortion                                      |  |

Restrictions on the methods to detect the sex

|  | of the foctus                    |   |
|--|----------------------------------|---|
|  | ACCESS TO ABORTION SERVICES      |   |
| Methods for induced abortions              | Currently allowed in the country | Gestational limit for each method (weeks) |
| Vacuum aspiration                          | <del>-</del>                     | _   |
| But an |                                  |   |



#### **Cook Islands**

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |
|--|---|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |
| Mifepristone and/or combination mifepristone-misoprostol | No  | <del>-</del>   |
| Misoprostol  | Yes <sup>2</sup>                                  | <del>-</del>   |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | _                  |
| Specialized abortion care public facilities       | <del>-</del>     | _                  |
| Private health-care centres or clinics            | <del>-</del>     | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | _                  |
| Other settings or facilities                      | _                | _                  |

| Health care personnel allowed to provide legal abortions |   |  |
|--|---|--|
| Doctors (speciality not specified)                       | _ |  |
| Specialist doctor, including OB/GYN                      | _ |  |
| Nurse  | _ |  |
| Midwife/nurse-midwife                                    | _ |  |
| Other provider(s)  | _ |  |
|  |   |  |
| Information and guidelines on abortion services          |   |  |
| National avidations on aliminal and assuing              |   |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Info | rmation and guidelines on abortion services                                |
|------|--|
|      | National guidelines on clinical and service delivery of induced abortion   |
|      | National guidelines on clinical and service delivery of post-abortion care |
|      | Restrictions on public information on legal abortion services              |
|      | Counselling for contraceptive methods during post-abortion care            |

| Service delivery requirements for providers or facilities |   |  |
|---|---|--|
| Referral linkage to a higher-level facility               | _ |  |
| Availability of a specialist doctor                       | _ |  |
| Minimum number of beds                                    | _ |  |
| Other facility/provider requirements                      | _ |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | <del>_</del>      | _   |
| Health-care providers  | _                 | <del>_</del>  |

#### Notes:

- 1. Surgical operation performed in good faith and with reasonable care and skill upon an unborn child for the preservation of the mother's life, if the performance of the operation is reasonable, having regard to the patient's state at the time and to all the circumstances of the case.

  2. For gynaecological indications.



Prohibition of sex-selective abortion

Other method(s)

# Abortion laws and policies, 2017

### Costa Rica

| LAWS ON ABORTION                                 |   |   |
|--|---|---|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |
| To save life                                     | Yes                                     | _   |
| To preserve health                               | Yes                                     | <del>-</del>                                    |
| To preserve physical health                      | _                                       | _   |
| To preserve mental health                        | <del>-</del>                            | _   |
| In cases of intellectual or cognitive disability | No                                      | _   |
| In cases of incest                               | No                                      | _   |
| In cases of rape                                 | No                                      | _   |
| In cases of foetal impairment                    | No                                      | _   |
| For economic or social reason                    | No                                      | _   |
| On request                                       | No                                      | _   |
| For other reason(s)                              | _                                       | _   |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |   |  |              |
|--|---|--|--------------|
| Authorizations required                      |   | Consent required                             |              |
| Authorization of health care professional(s) | _ | Spousal consent                              | _            |
| Number of authorizations                     | _ | Parental consent for minors                  | _            |
| Cadre of health care professional            |   | Consent by another adult                     | _            |
| Doctor (specialty not specified)             | _ |  |              |
| Specialist doctor, including OB/GYN          | _ | Other requirements                           |              |
| Nurse  | _ | Gestational age limits                       | <del>_</del> |
| Midwife/nurse-midwife                        | _ | Compulsory counselling                       | _            |
| Other providers                              | _ | Compulsory waiting period                    | _            |
| Authorized in specially licensed facilities  | _ | Length of waiting period (days)              | _            |
| Judicial authorization                       |   | Mandatory screening test                     |              |
| For minors                                   | _ | HIV test                                     | _            |
| In case of rape                              | _ | Other STI test(s)                            | _            |
| Police report in case of rape                | _ | Ultrasound viewing or listening to heartbeat | _            |

| Age when a woman can obtain an abortion without parental or judicial consent |   |  |   |
|--|---|--|---|
| Age limit for parental consent (years)                                       | _ | Age limit for judicial consent (years) | _ |
|  |   |  |   |
| Sex-selective abortion   |   |  |   |

Restrictions on the methods to detect the sex

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | _                                | _   |  |
| Dilatation and evacuation             | <del>-</del>                     | _   |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | _   |  |
| Misoprostol only                      | _                                | _   |  |



#### **Costa Rica**

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |
|--|---|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |
| Misoprostol  | No  | <del>-</del>   |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | _                  |
| Specialized abortion care public facilities       | <del>-</del>     | _                  |
| Private health-care centres or clinics            | <del>-</del>     | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | _                  |
| Other settings or facilities                      | _                | _                  |

| lealth care personnel allowed to provide legal abortions |     |  |
|--|-----|--|
| Doctors (speciality not specified)                       | Yes |  |
| Specialist doctor, including OB/GYN                      | Yes |  |
| Nurse  | No  |  |
| Midwife/nurse-midwife                                    | No  |  |
| Other provider(s)  | _   |  |
|  |     |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | _   |
| National guidelines on clinical and service delivery of post-abortion care | _   |
| Restrictions on public information on legal abortion services              | Yes |
| Counselling for contraceptive methods during<br>post-abortion care         | _   |

| Service delivery requirements for providers or facilities |   |  |
|---|---|--|
| Referral linkage to a higher-level facility               | _ |  |
| Availability of a specialist doctor                       | _ |  |
| Minimum number of beds                                    | _ |  |
| Other facility/provider requirements                      | _ |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to<br>alternative provider or facility |
|--|-------------------|--|
| Health-care facilities   | _                 | _  |
| Health-care providers  | _                 | _  |

#### Notes:

- Indicates that data are not available, not applicable or not specified.
- 1. Women who have caused their own abortion may be granted a judicial pardon if the pregnancy was the result of rape.



### Côte d'Ivoire

| LAWS ON ABORTION                                 |                                      |   |
|--|--------------------------------------|---|
| Legal grounds for induced abortion               | Currently permissible in the country | Gestational limit for each legal ground (weeks) |
| To save life                                     | Yes                                  | <del>-</del>                                    |
| To preserve health                               | Yes                                  | _   |
| To preserve physical health                      | Yes                                  | <del>-</del>                                    |
| To preserve mental health                        | Yes                                  | <del>-</del>                                    |
| In cases of intellectual or cognitive disability | No                                   | <del>-</del>                                    |
| In cases of incest                               | Yes                                  | <del>-</del>                                    |
| In cases of rape                                 | Yes                                  | <del>-</del>                                    |
| In cases of foetal impairment                    | Yes                                  | <del>-</del>                                    |
| For economic or social reason                    | No                                   | <del>-</del>                                    |
| On request                                       | No                                   | <del>-</del>                                    |
| For other reason(s)                              | _                                    | _   |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

|  | REQUIREMENTS F | OR INDUCED ABORTION                          |
|--|----------------|--|
| Authorizations required                      |                | Consent required                             |
| Authorization of health care professional(s) | Yes            | Spousal consent                              |
| Number of authorizations                     | 2 2            | Parental consent for minors                  |
| Cadre of health care professional            |                | Consent by another adult                     |
| Doctor (specialty not specified)             | Yes            |  |
| Specialist doctor, including OB/GYN          | Yes            | Other requirements                           |
| Nurse  | _              | Gestational age limits                       |
| Midwife/nurse-midwife                        | _              | Compulsory counselling                       |
| Other providers                              | _              | Compulsory waiting period                    |
| Authorized in specially licensed facilities  | _              | Length of waiting period (days)              |
| Judicial authorization                       |                | Mandatory screening test                     |
| For minors                                   | _              | HIV test                                     |
| In case of rape                              | _              | Other STI test(s)                            |
| Police report in case of rape                | _              | Ultrasound viewing or listening to heartbeat |

| Consent by another adult                     | Yes          |  |
|--|--------------|--|
|  |              |  |
| Other requirements                           |              |  |
| Gestational age limits                       | Yes          |  |
| Compulsory counselling                       | _            |  |
| Compulsory waiting period                    | _            |  |
| Length of waiting period (days)              | _            |  |
| Mandatory screening test                     |              |  |
| HIV test                                     | <del>-</del> |  |
| Other STI test(s)                            | _            |  |
| Ultrasound viewing or listening to heartbeat | _            |  |

Yes

| Age when a woman can obtain an abortion without parental or judicial consent |   |  |   |  |
|--|---|--|---|--|
| Age limit for parental consent (years)                                       | _ | Age limit for judicial consent (years) | _ |  |
|  |   |  |   |  |

|                                       | Sex-selective abortion                                      |
|---------------------------------------|---|
| Prohibition of sex-selective abortion | Restrictions on the methods to detect the sex of the foetus |
|                                       |   |

| ACCESS TO ABORTION SERVICES           |                                  |   |
|---------------------------------------|----------------------------------|---|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |
| Vacuum aspiration                     | _                                | <del>-</del>                              |
| Dilatation and evacuation             | <del>-</del>                     | <del>-</del>                              |
| Combination mifepristone- misoprostol | <del>-</del>                     | <del>-</del>                              |
| Misoprostol only                      | <del>-</del>                     | _   |
| Other method(s)                       | <del>-</del>                     | <del>-</del>                              |



#### Côte d'Ivoire

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |
|--|---|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |
| Mifepristone and/or combination mifepristone-misoprostol | No  | <del>-</del>   |
| Misoprostol  | No  | <del>-</del>   |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | _                  |
| Specialized abortion care public facilities       | <del>-</del>     | _                  |
| Private health-care centres or clinics            | <del>-</del>     | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | _                  |
| Other settings or facilities                      | _                | _                  |

| Health care personnel allowed to provide legal ab | ortions          |
|---|------------------|
| Doctors (speciality not specified)                | Yes              |
| Specialist doctor, including OB/GYN               | _                |
| Nurse   | _                |
| Midwife/nurse-midwife                             | _                |
| Other provider(s)                                 | Yes <sup>3</sup> |
|   |                  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |              |
|--|--------------|
| National guidelines on clinical and service delivery of induced abortion   | <del>-</del> |
| National guidelines on clinical and service delivery of post-abortion care | _            |
| Restrictions on public information on legal abortion services              | Yes          |
| Counselling for contraceptive methods during<br>post-abortion care         | _            |

| Service delivery requirements for providers or facilities |   |  |
|---|---|--|
| Referral linkage to a higher-level facility               | _ |  |
| Availability of a specialist doctor                       | _ |  |
| Minimum number of beds                                    | _ |  |
| Other facility/provider requirements                      | _ |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to<br>alternative provider or facility |
|--|-------------------|--|
| Health-care facilities   | _                 | _  |
| Health-care providers  | Yes <sup>4</sup>  | Yes  |

#### Notes:

- Indicates that data are not available, not applicable or not specified.
- 1. Under the general criminal law principles of necessity, it is allowed to be performed to save the life of the pregnant woman. In addition, the country ratified the Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa, better known as the Maputo protocol. The Maputo Protocol explicitly guarantees the right to legal abortion to "protect the reproductive rights of women by authorizing medical abortion in cases of sexual assault, rape, incest, and where the continued pregnancy entantla and physical health of the mother or the life of the mother or the feetus."

  2. The authorization of two doctors is required. However, if there is only one doctor in the district, authorization by only one doctor is sufficient.

- Surgeons.
   Provider type not specified.



### Croatia

|  | LAWS ON ABORTION                     |   |
|--|--------------------------------------|---|
| egal grounds for induced abortion                | Currently permissible in the country | Gestational limit for each legal ground (weeks) |
| To save life                                     | Yes                                  | No limit  |
| To preserve health                               | Yes                                  | No limit  |
| To preserve physical health                      | <del>-</del>                         | _   |
| To preserve mental health                        | <del>-</del>                         | _   |
| In cases of intellectual or cognitive disability | <del>-</del>                         | _   |
| In cases of incest                               | <del>-</del>                         | No limit  |
| In cases of rape                                 | Yes                                  | No limit  |
| In cases of foetal impairment                    | Yes                                  | No limit  |
| For economic or social reason                    | <del>-</del>                         | _   |
| On request                                       | Yes                                  | 10  |
| For other reason(s)                              | _                                    | _   |

| Persons who can be criminally charged for an illegal abortion |   |          |     |                                    |     |  |
|---|---|----------|-----|------------------------------------|-----|--|
| Woman   | _ | Provider | Yes | Other person who assists the woman | Yes |  |

| REQUIREMENTS FOR INDUCED ABORTION            |     |  |     |
|--|-----|--|-----|
| Authorizations required                      |     | Consent required                             |     |
| Authorization of health care professional(s) | Yes | Spousal consent                              | _   |
| Number of authorizations                     | 3   | Parental consent for minors                  | Yes |
| Cadre of health care professional            |     | Consent by another adult                     | Yes |
| Doctor (specialty not specified)             | Yes |  |     |
| Specialist doctor, including OB/GYN          | Yes | Other requirements                           |     |
| Nurse  | Yes | Gestational age limits                       | Yes |
| Midwife/nurse-midwife                        | _   | Compulsory counselling                       | _   |
| Other providers                              | _   | Compulsory waiting period                    | _   |
| Authorized in specially licensed facilities  | Yes | Length of waiting period (days)              | _   |
| Judicial authorization                       |     | Mandatory screening test                     |     |
| For minors                                   | _   | HIV test                                     | _   |
| In case of rape                              | _   | Other STI test(s)                            | _   |
| Police report in case of rape                | _   | Ultrasound viewing or listening to heartbeat | _   |

| Age when a woman can obtain an abortion without parental or judicial consent |    |  |   |
|--|----|--|---|
| Age limit for parental consent (years)                                       | 16 | Age limit for judicial consent (years) | _ |
|  |    |  |   |

|                                       | Sex-selective abortion                                      |
|---------------------------------------|---|
| Prohibition of sex-selective abortion | Restrictions on the methods to detect the sex of the foetus |

| ACCESS TO ABORTION SERVICES           |                                  |   |
|---------------------------------------|----------------------------------|---|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |
| Vacuum aspiration                     | <del>-</del>                     | _   |
| Dilatation and evacuation             | <del>-</del>                     | _   |
| Combination mifepristone- misoprostol | <del>-</del>                     | _   |
| Misoprostol only                      | _                                | _   |
| Other method(s)                       | <del>-</del>                     | <del>-</del>                              |



#### Croatia

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |  |
| Misoprostol  | No  | <del>-</del>   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | _                | _                  |
| Secondary (district-level) health-care facilities | Yes              | Yes                |
| Specialized abortion care public facilities       | Yes              | Yes                |
| Private health-care centres or clinics            | _                | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | _                | _                  |

| Health care personnel allowed to provide legal abortions |     |
|--|-----|
| Doctors (speciality not specified)                       | _   |
| Specialist doctor, including OB/GYN                      | Yes |
| Nurse  | _   |
| Midwife/nurse-midwife                                    | _   |
| Other provider(s)  | _   |
|  |     |

| Types of insurance or other coverage for abortion                  |              |
|--|--------------|
| Public health coverage for induced abortion for all women          | <del>_</del> |
| Public health coverage for induced abortion for<br>poor women only | _            |
| Public health coverage for abortion complications                  | _            |
| Private health coverage for induced abortion                       | _            |
| Other type of coverage   | _            |

|   | Information and guidelines on abortion services                            |   |  |
|---|--|---|--|
| , | National guidelines on clinical and service delivery of induced abortion   | _ |  |
|   | National guidelines on clinical and service delivery of post-abortion care | _ |  |
|   | Restrictions on public information on legal abortion services              | _ |  |
|   | Counselling for contraceptive methods during<br>post-abortion care         | _ |  |

| Service delivery requirements for providers or | facilities |  |
|--|------------|--|
| Referral linkage to a higher-level facility    | _          |  |
| Availability of a specialist doctor            | Yes        |  |
| Minimum number of beds                         | _          |  |
| Other facility/provider requirements           | _          |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to<br>alternative provider or facility |
|--|-------------------|--|
| Health-care facilities   | _                 | _  |
| Health-care providers  | Yes <sup>2</sup>  | Yes  |

#### Notes:

- Indicates that data are not available, not applicable or not specified.
- 1. In case of a minor older than 16 years of age and not yet married, if the abortion may cause serious consequences or the gestational age is more than 10 weeks, a special commission is required to make the decision and inform the parents.

  2. Provider type not specified.



Prohibition of sex-selective abortion

Other method(s)

### Abortion laws and policies, 2017

#### Cuba

| LAWS ON ABORTION                                 |   |   |  |  |
|--|---|---|--|--|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |  |
| To save life                                     | Yes                                     | No limit  |  |  |
| To preserve health                               | Yes                                     | 22  |  |  |
| To preserve physical health                      | <del>-</del>                            | <del>_</del>                                    |  |  |
| To preserve mental health                        | Yes                                     | 22  |  |  |
| In cases of intellectual or cognitive disability | _                                       | _   |  |  |
| In cases of incest                               | <del>-</del>                            | _   |  |  |
| In cases of rape                                 | Yes                                     | 22  |  |  |
| In cases of foetal impairment                    | Yes                                     | 35  |  |  |
| For economic or social reason                    | Yes                                     | 22  |  |  |
| On request                                       | Yes                                     | 12  |  |  |
| For other reason(s)                              | _                                       | _   |  |  |

| Persons who can be criminally charged for an illegal abortion |   |          |     |                                    |     |
|---|---|----------|-----|------------------------------------|-----|
| Woman   | _ | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |     |  |     |  |
|--|-----|--|-----|--|
| uthorizations required                       |     | Consent required                             |     |  |
| Authorization of health care professional(s) | Yes | Spousal consent                              | _   |  |
| Number of authorizations                     | 3   | Parental consent for minors                  | Yes |  |
| Cadre of health care professional            |     | Consent by another adult                     | Yes |  |
| Doctor (specialty not specified)             | _   |  |     |  |
| Specialist doctor, including OB/GYN          | Yes | Other requirements                           |     |  |
| Nurse  | _   | Gestational age limits                       | Yes |  |
| Midwife/nurse-midwife                        | _   | Compulsory counselling                       | _   |  |
| Other providers                              | _   | Compulsory waiting period                    | _   |  |
| Authorized in specially licensed facilities  | Yes | Length of waiting period (days)              | _   |  |
| Judicial authorization                       |     | Mandatory screening test                     |     |  |
| For minors                                   | _   | HIV test                                     | _   |  |
| In case of rape                              | _   | Other STI test(s)                            | _   |  |
| Police report in case of rape                | _   | Ultrasound viewing or listening to heartbeat | _   |  |

| Age limit for parental consent (years) | <del>-</del>   | Age limit for judicial consent (years) | <del>-</del> |
|--|----------------|--|--------------|
|  |                |  |              |
|  | Con coloration | a abantian                             |              |

Restrictions on the methods to detect the sex

27-35

Yes

| ACCESS TO ABORTION SERVICES           |                                  |   |  |  |
|---------------------------------------|----------------------------------|---|--|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |  |
| Vacuum aspiration                     | Yes                              | 7   |  |  |
| Dilatation and evacuation             | Yes                              | _   |  |  |
| Combination mifepristone- misoprostol | _                                | _   |  |  |
| Misoprostol only                      | Yes                              | 12  |  |  |



#### Cuba

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | <del>-</del>   |  |
| Misoprostol  | Yes <sup>3</sup>                                  | <del>_</del>   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | _                | <del>-</del>       |
| Secondary (district-level) health-care facilities | _                | <del>-</del>       |
| Specialized abortion care public facilities       | Yes              | <del>-</del>       |
| Private health-care centres or clinics            | _                | <del>-</del>       |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | _                | _                  |

| Health care personnel allowed to provide legal abortions |     |  |
|--|-----|--|
| Doctors (speciality not specified)                       | _   |  |
| Specialist doctor, including OB/GYN                      | Yes |  |
| Nurse  | _   |  |
| Midwife/nurse-midwife                                    | _   |  |
| Other provider(s)  | _   |  |
| Other provider(3)  |     |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | Yes |
| National guidelines on clinical and service delivery of post-abortion care | Yes |
| Restrictions on public information on legal abortion services              | _   |
| Counselling for contraceptive methods during<br>post-abortion care         | Yes |
|  |     |

| Service delivery requirements for providers or facilities |              |  |
|---|--------------|--|
| Referral linkage to a higher-level facility               | _            |  |
| Availability of a specialist doctor                       | <del>-</del> |  |
| Minimum number of beds                                    | _            |  |
| Other facility/provider requirements                      | _            |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to<br>alternative provider or facility |
|--|-------------------|--|
| Health-care facilities   | _                 | _  |
| Health-care providers  | _                 | _  |

#### Notes:

- Indicates that data are not available, not applicable or not specified.
- 1. When a minor accesses menstrual regulation during the first 45 days of pregnancy, she must have parental consent or consent from her legal guardian unless there is a risk that obtaining such consent would result in serious conflict and violence, in which when a minor accesses menstrual regulation during case this can be waived.
   Foetal intra-cardiac injection of potassium chloride.
   For non-gynaecological indications only.



### **Cyprus**

| LAWS ON ABORTION                                 |   |   |  |
|--|---|---|--|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | _   |  |
| To preserve health                               | Yes                                     | _   |  |
| To preserve physical health                      | Yes                                     | _   |  |
| To preserve mental health                        | Yes                                     | _   |  |
| In cases of intellectual or cognitive disability | _                                       | _   |  |
| In cases of incest                               | <del>-</del>                            | _   |  |
| In cases of rape                                 | Yes                                     | 19  |  |
| In cases of foetal impairment                    | Yes                                     | _   |  |
| For economic or social reason                    | _                                       | _   |  |
| On request                                       | Yes                                     | 12  |  |
| For other reason(s)                              | Yes 1                                   | _   |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |                  |  |
|--|------------------|--|
| Authorizations required                      |                  | Consent required                             |
| Authorization of health care professional(s) | Yes              | Spousal consent                              |
| Number of authorizations                     | 1                | Parental consent for minors                  |
| Cadre of health care professional            |                  | Consent by another adult                     |
| Doctor (specialty not specified)             | Yes              |  |
| Specialist doctor, including OB/GYN          | _                | Other requirements                           |
| Nurse  | _                | Gestational age limits                       |
| Midwife/nurse-midwife                        | _                | Compulsory counselling                       |
| Other providers                              | Yes <sup>2</sup> | Compulsory waiting period                    |
| Authorized in specially licensed facilities  | _                | Length of waiting period (days)              |
| Judicial authorization                       |                  | Mandatory screening test                     |
| For minors                                   | _                | HIV test                                     |
| In case of rape                              | _                | Other STI test(s)                            |
| Police report in case of rape                | No               | Ultrasound viewing or listening to heartbeat |

| Parental consent for minors     | Yes          |  |
|---------------------------------|--------------|--|
| Consent by another adult        | Yes          |  |
|                                 |              |  |
| Other requirements              |              |  |
| Gestational age limits          | Yes          |  |
| Compulsory counselling          | _            |  |
| Compulsory waiting period       | _            |  |
| Length of waiting period (days) | _            |  |
| Mandatory screening test        |              |  |
| HIV test                        | _            |  |
| Other STI test(s)               | <del>_</del> |  |

| Age when a woman can obtain an abortion without parental or judicial consent |    |  |   |
|--|----|--|---|
| Age limit for parental consent (years)                                       | 18 | Age limit for judicial consent (years) | _ |

|                                       | Sex-selective abortion                                      |
|---------------------------------------|---|
| Prohibition of sex-selective abortion | Restrictions on the methods to detect the sex of the foetus |

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | _                                | _   |  |
| Dilatation and evacuation             | <del>-</del>                     | _   |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | _   |  |
| Misoprostol only                      | _                                | _   |  |
| Other method(s)                       | <del>-</del>                     | _   |  |



### **Cyprus**

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |  |
| Misoprostol  | Yes <sup>3</sup>                                  | <del>_</del>   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | _                  |
| Specialized abortion care public facilities       | <del>-</del>     | _                  |
| Private health-care centres or clinics            | <del>-</del>     | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | _                  |
| Other settings or facilities                      | Yes <sup>4</sup> | _                  |

| Doctors (speciality not specified)  | Yes |
|-------------------------------------|-----|
| Specialist doctor, including OB/GYN | _   |
| Nurse                               | _   |
| Midwife/nurse-midwife               | _   |
| Other provider(s)                   | _   |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |
|  |   |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | _   |
| National guidelines on clinical and service delivery of post-abortion care | _   |
| Restrictions on public information on legal abortion services              | Yes |
| Counselling for contraceptive methods during<br>post-abortion care         | _   |

| Service delivery requirements for providers or facilities |   |
|---|---|
| Referral linkage to a higher-level facility               | _ |
| Availability of a specialist doctor                       | _ |
| Minimum number of beds                                    | _ |
| Other facility/provider requirements                      | _ |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | _                 | _   |

#### Notes:

- Indicates that data are not available, not applicable or not specified.
- Sexual abuse of an adult, a minor or a woman with a mental illness or disability.
   Registered medical practitioner.
   Indications not specified.
   Organised nursing unit.



### Czechia

| LAWS ON ABORTION                                 |                                      |   |
|--|--------------------------------------|---|
| egal grounds for induced abortion                | Currently permissible in the country | Gestational limit for each legal ground (weeks) |
| To save life                                     | Yes                                  | 24  |
| To preserve health                               | Yes                                  | 24  |
| To preserve physical health                      | Yes                                  | 24  |
| To preserve mental health                        | Yes                                  | 24  |
| In cases of intellectual or cognitive disability | <del>-</del>                         | _   |
| In cases of incest                               | <del>-</del>                         | <del>-</del>                                    |
| In cases of rape                                 | Yes                                  | 24  |
| In cases of foetal impairment                    | Yes                                  | 24  |
| For economic or social reason                    | <del>-</del>                         | _   |
| On request                                       | Yes                                  | 12  |
| For other reason(s)                              | _                                    | _   |

| Persons who can be criminally charged for an illegal abortion |     |   |     |
|---|-----|---|-----|
| Woman   | Yes | Provider — Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORT               |     | R INDUCED ABORTIC |
|--|-----|-------------------|
| Authorizations required                      |     | Consent required  |
| Authorization of health care professional(s) | Yes | Spousal consen    |
| Number of authorizations                     | 1 1 | Parental consen   |
| Cadre of health care professional            |     | Consent by anot   |
| Doctor (specialty not specified)             | _   |                   |
| Specialist doctor, including OB/GYN          | Yes | Other requiremen  |
| Nurse  | _   | Gestational age   |
| Midwife/nurse-midwife                        | _   | Compulsory cou    |
| Other providers                              | _   | Compulsory wai    |
| Authorized in specially licensed facilities  | No  | Length of w       |
| Judicial authorization                       |     | Mandatory scree   |
| For minors                                   | _   | HIV test          |
| In case of rape                              | _   | Other STI to      |
| Police report in case of rape                | _   | Ultrasound view   |
|  |     |                   |

| Parental consent for minors                  | Yes |  |
|--|-----|--|
| Consent by another adult                     | Yes |  |
|  |     |  |
| Other requirements                           |     |  |
| Gestational age limits                       | Yes |  |
| Compulsory counselling                       | No  |  |
| Compulsory waiting period                    | No  |  |
| Length of waiting period (days)              | _   |  |
| Mandatory screening test                     |     |  |
| HIV test                                     | _   |  |
| Other STI test(s)                            | _   |  |
| Ultrasound viewing or listening to heartbeat | _   |  |

| Age when a woman can obtain an abortion without parental or judicial consent |    |  |   |
|--|----|--|---|
| Age limit for parental consent (years)                                       | 16 | Age limit for judicial consent (years) | _ |

|                                       | Sex-selective abortion |   |
|---------------------------------------|------------------------|---|
| Prohibition of sex-selective abortion | No                     | Restrictions on the methods to detect the sex of the foetus |

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | <del>-</del>                     | <del>-</del>                              |  |
| Dilatation and evacuation             | <del>-</del>                     | <del>-</del>                              |  |
| Combination mifepristone- misoprostol | Yes                              | <del>-</del>                              |  |
| Misoprostol only                      | Yes                              | _   |  |
| Other method(s)                       | <del>-</del>                     | <del>-</del>                              |  |



#### Czechia

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |  |
|--|---|--|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |  |
| Mifepristone and/or combination mifepristone-misoprostol | Yes   | Yes <sup>2</sup>   |  |  |
| Misoprostol  | Yes <sup>3</sup>                                  | Yes <sup>4</sup>   |  |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | _                  |
| Specialized abortion care public facilities       | <del>-</del>     | _                  |
| Private health-care centres or clinics            | <del>-</del>     | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | _                  |
| Other settings or facilities                      | _                | _                  |

| Doctors (speciality not specified)  | No  |
|-------------------------------------|-----|
| Specialist doctor, including OB/GYN | Yes |
| Nurse                               | No  |
| Midwife/nurse-midwife               | No  |
| Other provider(s)                   | _   |

| Types of insurance or other coverage for abortion                  |     |
|--|-----|
| Public health coverage for induced abortion for all women          | Yes |
| Public health coverage for induced abortion for<br>poor women only | No  |
| Public health coverage for abortion complications                  | _   |
| Private health coverage for induced abortion                       | _   |
| Other type of coverage   | _   |

| Infor | rmation and guidelines on abortion services                                |
|-------|--|
|       | National guidelines on clinical and service delivery of induced abortion   |
|       | National guidelines on clinical and service delivery of post-abortion care |
|       | Restrictions on public information on legal abortion services              |
|       | Counselling for contraceptive methods during post-abortion care            |

| Service delivery requirements for providers or f | acilities |
|--|-----------|
| Referral linkage to a higher-level facility      | _         |
| Availability of a specialist doctor              | _         |
| Minimum number of beds                           | _         |
| Other facility/provider requirements             | _         |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | Yes <sup>5</sup>  | Yes   |

#### Notes:

- Indicates that data are not available, not applicable or not specified.
- Abortions at gestational ages of more than 12 weeks need to be authorized.
   With prescription only.
   For gynaecological indications.
   With prescription only.
   Provider type not specified.



Age limit for parental consent (years)

### Abortion laws and policies, 2017

### Dem. People's Republic of Korea

| egal grounds for induced abortion                | Currently permissible in the country | Gestational limit for each legal ground (weeks) |  |  |
|--|--------------------------------------|---|--|--|
| To save life                                     | Yes                                  | _   |  |  |
| To preserve health                               | Yes                                  | <del>-</del>                                    |  |  |
| To preserve physical health                      | Yes                                  | _   |  |  |
| To preserve mental health                        | Yes                                  | <del>-</del>                                    |  |  |
| In cases of intellectual or cognitive disability | Yes                                  | <del>-</del>                                    |  |  |
| In cases of incest                               | Yes                                  | <del>-</del>                                    |  |  |
| In cases of rape                                 | Yes                                  | <del>-</del>                                    |  |  |
| In cases of foetal impairment                    | Yes                                  | _   |  |  |
| For economic or social reason                    | Yes                                  | _   |  |  |
| On request                                       | Yes                                  | _   |  |  |
| For other reason(s)                              | _                                    | _   |  |  |

| Persons who can be criminally charged for an illegal abortion |   |          |     |                                    |   |  |
|---|---|----------|-----|------------------------------------|---|--|
| Woman   | _ | Provider | Yes | Other person who assists the woman | _ |  |

| REQUIREMENTS FOR INDUCED ABORTION            |              |  |    |  |
|--|--------------|--|----|--|
| uthorizations required                       |              | Consent required                             |    |  |
| Authorization of health care professional(s) | No           | Spousal consent                              | No |  |
| Number of authorizations                     | <del>_</del> | Parental consent for minors                  | No |  |
| Cadre of health care professional            |              | Consent by another adult                     | _  |  |
| Doctor (specialty not specified)             | _            |  |    |  |
| Specialist doctor, including OB/GYN          | <del>_</del> | Other requirements                           |    |  |
| Nurse  | _            | Gestational age limits                       | No |  |
| Midwife/nurse-midwife                        | _            | Compulsory counselling                       | _  |  |
| Other providers                              | _            | Compulsory waiting period                    | _  |  |
| Authorized in specially licensed facilities  | Yes          | Length of waiting period (days)              | _  |  |
| Judicial authorization                       |              | Mandatory screening test                     |    |  |
| For minors                                   | No           | HIV test                                     | _  |  |
| In case of rape                              | _            | Other STI test(s)                            | _  |  |
| Police report in case of rape                | _            | Ultrasound viewing or listening to heartbeat | _  |  |

|                                       | Sex-selective abortion |   |
|---------------------------------------|------------------------|---|
| Prohibition of sex-selective abortion | Yes                    | Restrictions on the methods to detect the sex of the foetus |

Age limit for judicial consent (years)

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | <del>-</del>                     | _   |  |
| Dilatation and evacuation             | <del>-</del>                     | _   |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | _   |  |
| Misoprostol only                      | _                                | _   |  |
| Other method(s)                       | <del>-</del>                     | <del>-</del>                              |  |



### Dem. People's Republic of Korea

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |  |
|--|---|--|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |  |  |
| Misoprostol  | No  | _  |  |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | _                  |
| Specialized abortion care public facilities       | <del>-</del>     | _                  |
| Private health-care centres or clinics            | <del>-</del>     | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | _                  |
| Other settings or facilities                      | _                | _                  |

| Health care personnel allowed to provide legal abortions | Types of insurance or other coverage for abortion               |
|--|---|
| Doctors (speciality not specified) —                     | Public health coverage for induced abortion for all women       |
| Specialist doctor, including OB/GYN —                    | Public health coverage for induced abortion for poor women only |
| Nurse —  | Public health coverage for abortion complications —             |
| Midwife/nurse-midwife —                                  | Private health coverage for induced abortion —                  |
| Other provider(s)  | Other type of coverage —  |
|  |   |
| Information and guidelines on abortion services          | Service delivery requirements for providers or facilities       |
| National guidelines on clinical and service              | Referral linkage to a higher-level facility —                   |

| National guidelines on clinical and service delivery of induced abortion   | Referral linkage to a higher-level facility — |
|--|---|
| National guidelines on clinical and service delivery of post-abortion care | Availability of a specialist doctor —         |
| Restrictions on public information on legal abortion services              | Minimum number of beds —                      |
| Counselling for contraceptive methods during post-abortion care            | Other facility/provider requirements —        |
|  |   |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | <del>-</del>      | _   |

Indicates that data are not available, not applicable or not specified.



Age limit for parental consent (years)

### Abortion laws and policies, 2017

### **Democratic Republic of the Congo**

| LAWS ON ABORTION                                 |   |   |  |
|--|---|---|--|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | <del>-</del>                                    |  |
| To preserve health                               | _                                       | _   |  |
| To preserve physical health                      | <del>-</del>                            | <del>-</del>                                    |  |
| To preserve mental health                        | _                                       | <del>-</del>                                    |  |
| In cases of intellectual or cognitive disability | No                                      | <del>-</del>                                    |  |
| In cases of incest                               | Yes                                     | <del>-</del>                                    |  |
| In cases of rape                                 | Yes                                     | <del>-</del>                                    |  |
| In cases of foetal impairment                    | Yes                                     | _   |  |
| For economic or social reason                    | No                                      | _   |  |
| On request                                       | No                                      | _   |  |
| For other reason(s)                              | _                                       | _   |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |  |
|---|-----|----------|-----|------------------------------------|-----|--|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |  |

| REQUIREMENTS FOR INDUCED ABORTION            |     |  |     |  |
|--|-----|--|-----|--|
| Authorizations required                      |     | Consent required                             |     |  |
| Authorization of health care professional(s) | Yes | Spousal consent                              | _   |  |
| Number of authorizations                     | 3   | Parental consent for minors                  | Yes |  |
| Cadre of health care professional            |     | Consent by another adult                     | Yes |  |
| Doctor (specialty not specified)             | Yes |  |     |  |
| Specialist doctor, including OB/GYN          | _   | Other requirements                           |     |  |
| Nurse  | _   | Gestational age limits                       | Yes |  |
| Midwife/nurse-midwife                        | _   | Compulsory counselling                       | _   |  |
| Other providers                              | _   | Compulsory waiting period                    | _   |  |
| Authorized in specially licensed facilities  | _   | Length of waiting period (days)              | _   |  |
| Judicial authorization                       |     | Mandatory screening test                     |     |  |
| For minors                                   | _   | HIV test                                     | _   |  |
| In case of rape                              | _   | Other STI test(s)                            | _   |  |
| Police report in case of rape                | _   | Ultrasound viewing or listening to heartbeat | _   |  |

|                                       | Sex-selective abortion                                      |
|---------------------------------------|---|
| Prohibition of sex-selective abortion | Restrictions on the methods to detect the sex of the foetus |

Age limit for judicial consent (years)

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | <del>-</del>                     | <del>-</del>                              |  |
| Dilatation and evacuation             | <del>-</del>                     | _   |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | _   |  |
| Misoprostol only                      | _                                | _   |  |
| Other method(s)                       | _                                | _   |  |



### **Democratic Republic of the Congo**

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |  |
| Misoprostol  | No  | <del>-</del>   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | _                  |
| Specialized abortion care public facilities       | <del>-</del>     | _                  |
| Private health-care centres or clinics            | <del>-</del>     | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | _                  |
| Other settings or facilities                      | _                | _                  |

| Doctors (speciality not specified)  | Yes |
|---|-----|
| Specialist doctor, including OB/GYN   | _   |
| Nurse   | _   |
| Midwife/nurse-midwife   | _   |
| Other provider(s)   | _   |
|   |     |
| Information and guidelines on abortion services                               |     |
| National guidelines on clinical and service delivery of induced abortion      | _   |
| National guidelines on clinical and service<br>delivery of post-abortion care | _   |
| Restrictions on public information on legal                                   | Yes |

Health care personnel allowed to provide legal abortions

| Public health coverage for induced abortion for all women       | _ |
|---|---|
| Public health coverage for induced abortion for poor women only | _ |
| Public health coverage for abortion complications               | _ |
| Private health coverage for induced abortion                    | _ |
| Other type of coverage  | _ |

| Service delivery requirements for providers or facilities |  |  |
|---|--|--|
| _   |  |  |
| _   |  |  |
| _   |  |  |
| _   |  |  |
| 2   |  |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | Yes <sup>2</sup>  | _   |

#### Notes:

The designations employed in this publication and the material presented in it do not imply the expression of any opinion whatsoever on the part of the Secretariat of the United Nations concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries.

Counselling for contraceptive methods during

post-abortion care

<sup>1.</sup> Under the general criminal law principles of necessity, it is allowed to be performed to save the life of the pregnant woman. In addition, the country ratified the Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa, better known as the Maputo protocol. The Maputo Protocol explicitly guarantees the right to legal abortion to "protect the reproductive rights of women by authorizing medical abortion in cases of sexual assault, rape, incest, and where the continued represancy endangers the mental and physical health of the mother or the life of the mother or the foetus."

2. Provider type not specified.



### Denmark

| LAWS ON ABORTION                                 |                                      |   |  |
|--|--------------------------------------|---|--|
| Legal grounds for induced abortion               | Currently permissible in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                  | No limit  |  |
| To preserve health                               | Yes                                  | No limit  |  |
| To preserve physical health                      | Yes                                  | No limit  |  |
| To preserve mental health                        | Yes                                  | No limit  |  |
| In cases of intellectual or cognitive disability | Yes                                  | No limit  |  |
| In cases of incest                               | Yes                                  | No limit  |  |
| In cases of rape                                 | Yes                                  | No limit  |  |
| In cases of foetal impairment                    | Yes                                  | No limit  |  |
| For economic or social reason                    | Yes                                  | No limit  |  |
| On request                                       | Yes                                  | 12  |  |
| For other reason(s)                              | Yes <sup>1</sup>                     | _   |  |

| Persons who can be criminally charged for an illegal abortion |   |          |     |                                    |     |  |
|---|---|----------|-----|------------------------------------|-----|--|
| Woman   | _ | Provider | Yes | Other person who assists the woman | Yes |  |

| REQUIREMENTS FOR INDUCED ABORTION            |                  |  |     |  |
|--|------------------|--|-----|--|
| Authorizations required                      |                  | Consent required                             |     |  |
| Authorization of health care professional(s) | Yes              | Spousal consent                              | No  |  |
| Number of authorizations                     | 3                | Parental consent for minors                  | Yes |  |
| Cadre of health care professional            |                  | Consent by another adult                     | Yes |  |
| Doctor (specialty not specified)             | _                |  |     |  |
| Specialist doctor, including OB/GYN          | Yes              | Other requirements                           |     |  |
| Nurse  | _                | Gestational age limits                       | Yes |  |
| Midwife/nurse-midwife                        | _                | Compulsory counselling                       | No  |  |
| Other providers                              | Yes <sup>2</sup> | Compulsory waiting period                    | _   |  |
| Authorized in specially licensed facilities  | Yes              | Length of waiting period (days)              | _   |  |
| Judicial authorization                       |                  | Mandatory screening test                     |     |  |
| For minors                                   | Yes              | HIV test                                     | _   |  |
| In case of rape                              | _                | Other STI test(s)                            | _   |  |
| Police report in case of rape                | _                | Ultrasound viewing or listening to heartbeat | _   |  |

| Age when a wor                         | nan can obtain an abortior | without parental or judicial consent   |    |  |
|--|----------------------------|--|----|--|
| Age limit for parental consent (years) | 18                         | Age limit for judicial consent (years) | 18 |  |
|  |                            |  |    |  |

|                                       | Sex-selective abortion |   |
|---------------------------------------|------------------------|---|
| Prohibition of sex-selective abortion | Yes                    | Restrictions on the methods to detect the sex of the foetus |

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | _                                | <del>-</del>                              |  |
| Dilatation and evacuation             | <del>-</del>                     | <del>-</del>                              |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | <del>-</del>                              |  |
| Misoprostol only                      | <del>-</del>                     | _   |  |
| Other method(s)                       | <del>-</del>                     | <del>-</del>                              |  |



#### **Denmark**

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | Yes   | _  |  |
| Misoprostol  | Yes <sup>3</sup>                                  | <del>-</del>   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>_</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | Yes              | Yes                |
| Specialized abortion care public facilities       | Yes              | <del>-</del>       |
| Private health-care centres or clinics            | Yes              | <del>-</del>       |
| NGO health-care centres or clinics                | _                | <del>-</del>       |
| Other settings or facilities                      | _                | <del>-</del>       |

| Health care personnel allowed to provide legal abortions |     |  |
|--|-----|--|
| Doctors (speciality not specified)                       | Yes |  |
| Specialist doctor, including OB/GYN                      | Yes |  |
| Nurse  | _   |  |
| Midwife/nurse-midwife                                    | _   |  |
| Other provider(s)  | _   |  |

| Types of insurance or other coverage for abortion                  |     |  |
|--|-----|--|
| Public health coverage for induced abortion for all women          | Yes |  |
| Public health coverage for induced abortion for<br>poor women only | No  |  |
| Public health coverage for abortion complications                  | Yes |  |
| Private health coverage for induced abortion                       | _   |  |
| Other type of coverage   | _   |  |

| Information and guidelines on abortion                             | on services    |
|--|----------------|
| National guidelines on clinical and delivery of induced abortion   | service Yes    |
| National guidelines on clinical and delivery of post-abortion care | service Yes    |
| Restrictions on public information of abortion services            | n legal        |
| Counselling for contraceptive meth post-abortion care              | ods during Yes |

| Service delivery requirements for providers or facilities |   |  |
|---|---|--|
| Referral linkage to a higher-level facility               | _ |  |
| Availability of a specialist doctor                       | _ |  |
| Minimum number of beds                                    | _ |  |
| Other facility/provider requirements                      | _ |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | Yes <sup>4</sup>  | _   |

#### Notes:

- Young age or immaturity therefore not able to care for the child in a proper way.
   Specialist in psychiatry/social medicine; director or colleague with equivalent training at a maternity aid institution.
   For gynaecological indications.
   Provider type not specified.



Age limit for parental consent (years)

# Abortion laws and policies, 2017

### Djibouti

| LAWS ON ABORTION                                 |                                      |   |  |
|--|--------------------------------------|---|--|
| egal grounds for induced abortion                | Currently permissible in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                  | No limit  |  |
| To preserve health                               | _                                    | _   |  |
| To preserve physical health                      | _                                    | <del>_</del>                                    |  |
| To preserve mental health                        | _                                    | _   |  |
| In cases of intellectual or cognitive disability | No                                   | _   |  |
| In cases of incest                               | No                                   | _   |  |
| In cases of rape                                 | No                                   | _   |  |
| In cases of foetal impairment                    | _                                    | _   |  |
| For economic or social reason                    | No                                   | _   |  |
| On request                                       | No                                   | _   |  |
| For other reason(s)                              | _                                    | _   |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |  |   |  |
|--|--|---|--|
| Authorizations required                      | Consent required                             |   |  |
| Authorization of health care professional(s) | — Spousal consent                            | _ |  |
| Number of authorizations                     | Parental consent for minors                  | _ |  |
| Cadre of health care professional            | Consent by another adult                     | _ |  |
| Doctor (specialty not specified)             | _  |   |  |
| Specialist doctor, including OB/GYN          | Other requirements                           |   |  |
| Nurse  | — Gestational age limits                     | _ |  |
| Midwife/nurse-midwife                        | <ul> <li>Compulsory counselling</li> </ul>   | _ |  |
| Other providers                              | Compulsory waiting period                    | _ |  |
| Authorized in specially licensed facilities  | Length of waiting period (days)              | _ |  |
| Judicial authorization                       | Mandatory screening test                     |   |  |
| For minors                                   | HIV test                                     | _ |  |
| In case of rape                              | — Other STI test(s)                          | _ |  |
| Police report in case of rape                | Ultrasound viewing or listening to heartbeat | _ |  |

|                                       | Sex-selective abortion |   |
|---------------------------------------|------------------------|---|
| Prohibition of sex-selective abortion | _                      | Restrictions on the methods to detect the sex of the foetus |

Age limit for judicial consent (years)

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | <del>-</del>                     | <del>-</del>                              |  |
| Dilatation and evacuation             | <del>-</del>                     | _   |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | _   |  |
| Misoprostol only                      | _                                | _   |  |
| Other method(s)                       | _                                | _   |  |



### Djibouti

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |  |
| Misoprostol  | No  | <del>_</del>   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | _                  |
| Specialized abortion care public facilities       | <del>-</del>     | _                  |
| Private health-care centres or clinics            | <del>-</del>     | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | _                  |
| Other settings or facilities                      | _                | _                  |

| Health care personnel allowed to provide legal abort | tions |
|--|-------|
| Doctors (speciality not specified)                   | Yes   |
| Specialist doctor, including OB/GYN                  | _     |
| Nurse  | _     |
| Midwife/nurse-midwife                                | _     |
| Other provider(s)                                    | _     |
|  |       |
| Information and guidelines on abortion services      |       |
| National guidelines on clinical and service          |       |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |   |
|--|---|
| National guidelines on clinical and service delivery of induced abortion   | _ |
| National guidelines on clinical and service delivery of post-abortion care | _ |
| Restrictions on public information on legal abortion services              | _ |
| Counselling for contraceptive methods during<br>post-abortion care         | _ |

| Service delivery requirements for providers or facilities |              |  |
|---|--------------|--|
| Referral linkage to a higher-level facility               | _            |  |
| Availability of a specialist doctor                       | <del>-</del> |  |
| Minimum number of beds                                    | _            |  |
| Other facility/provider requirements                      | _            |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to<br>alternative provider or facility |
|--|-------------------|--|
| Health-care facilities   | _                 | _  |
| Health-care providers  | Yes <sup>2</sup>  | Yes  |

#### Notes:

- Indicates that data are not available, not applicable or not specified.
- 1. Abortion is permitted for therapeutic purposes. The grounds that constitute therapeutic purposes are not specified.

  2. Provider type not specified.



#### **Dominica**

| LAWS ON ABORTION                                 |   |   |
|--|---|---|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |
| To save life                                     | Yes                                     | _   |
| To preserve health                               | No                                      | _   |
| To preserve physical health                      | No                                      | _   |
| To preserve mental health                        | No                                      | _   |
| In cases of intellectual or cognitive disability | No                                      | _   |
| In cases of incest                               | No                                      | <del>-</del>                                    |
| In cases of rape                                 | No                                      | _   |
| In cases of foetal impairment                    | No                                      | _   |
| For economic or social reason                    | No                                      | _   |
| On request                                       | No                                      | _   |
| For other reason(s)                              | _                                       | _   |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |   |  |   |
|--|---|--|---|
| Authorizations required                      |   | Consent required                             |   |
| Authorization of health care professional(s) | _ | Spousal consent                              | _ |
| Number of authorizations                     | _ | Parental consent for minors                  | _ |
| Cadre of health care professional            |   | Consent by another adult                     | _ |
| Doctor (specialty not specified)             | _ |  |   |
| Specialist doctor, including OB/GYN          | _ | Other requirements                           |   |
| Nurse  | _ | Gestational age limits                       | _ |
| Midwife/nurse-midwife                        | _ | Compulsory counselling                       | _ |
| Other providers                              | _ | Compulsory waiting period                    | _ |
| Authorized in specially licensed facilities  | _ | Length of waiting period (days)              | _ |
| Judicial authorization                       |   | Mandatory screening test                     |   |
| For minors                                   | _ | HIV test                                     | _ |
| In case of rape                              | _ | Other STI test(s)                            | _ |
| Police report in case of rape                | _ | Ultrasound viewing or listening to heartbeat | _ |

| Age when a woman can obtain an abortion without parental or judicial consent |   |  |   |
|--|---|--|---|
| Age limit for parental consent (years)                                       | _ | Age limit for judicial consent (years) | _ |
|  |   |  |   |
| Say-salactive abortion   |   |  |   |

| Prohibition of sex-selective abortion | Restrictions on the methods to detect the sex of the foetus |  |  |  |
|---------------------------------------|---|--|--|--|
| ACCESS TO ABORTION SERVICES           |   |  |  |  |

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | _                                | _   |  |
| Dilatation and evacuation             | <del>-</del>                     | <del>-</del>                              |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | <del>-</del>                              |  |
| Misoprostol only                      | <del>-</del>                     | _   |  |
| Other method(s)                       | _                                | _   |  |



#### **Dominica**

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | <del>-</del>   |  |
| Misoprostol  | Yes <sup>2</sup>                                  | <del>-</del>   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | _                  |
| Specialized abortion care public facilities       | <del>-</del>     | _                  |
| Private health-care centres or clinics            | <del>-</del>     | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | _                  |
| Other settings or facilities                      | _                | _                  |

| Health care personnel allowed to provide legal abortions | s |
|--|---|
| Doctors (speciality not specified)                       | _ |
| Specialist doctor, including OB/GYN                      | _ |
| Nurse  | _ |
| Midwife/nurse-midwife                                    | _ |
| Other provider(s)  | _ |
|  |   |
| Information and guidelines on abortion services          |   |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| fe | ormation and guidelines on abortion services                               |
|----|--|
|    | National guidelines on clinical and service delivery of induced abortion   |
|    | National guidelines on clinical and service delivery of post-abortion care |
|    | Restrictions on public information on legal abortion services              |
|    | Counselling for contraceptive methods during post-abortion care            |

| Service delivery requirements for providers or facilities |              |  |
|---|--------------|--|
| Referral linkage to a higher-level facility               | _            |  |
| Availability of a specialist doctor                       | _            |  |
| Minimum number of beds                                    | <del>-</del> |  |
| Other facility/provider requirements                      | _            |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | _                 | _   |

#### Notes:

- 1. Abortion is generally illegal in the country. However, under the general criminal law principles of necessity, it is allowed to be performed to save the life of the pregnant woman.
  2. For non-gynaecological indications only.



Prohibition of sex-selective abortion

# Abortion laws and policies, 2017

### **Dominican Republic**

| LAWS ON ABORTION                                 |                                      |   |  |
|--|--------------------------------------|---|--|
| Legal grounds for induced abortion               | Currently permissible in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                  | _   |  |
| To preserve health                               | No                                   | _   |  |
| To preserve physical health                      | No                                   | <del>-</del>                                    |  |
| To preserve mental health                        | No                                   | <del>-</del>                                    |  |
| In cases of intellectual or cognitive disability | No                                   | <del>-</del>                                    |  |
| In cases of incest                               | No                                   | <del>-</del>                                    |  |
| In cases of rape                                 | No                                   | <del>-</del>                                    |  |
| In cases of foetal impairment                    | No                                   | <del>-</del>                                    |  |
| For economic or social reason                    | No                                   | <del>-</del>                                    |  |
| On request                                       | No                                   | <del>-</del>                                    |  |
| For other reason(s)                              | _                                    | _   |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |   |  |   |
|--|---|--|---|
| Authorizations required                      |   | Consent required                             |   |
| Authorization of health care professional(s) | _ | Spousal consent                              | _ |
| Number of authorizations                     | _ | Parental consent for minors                  | _ |
| Cadre of health care professional            |   | Consent by another adult                     | _ |
| Doctor (specialty not specified)             | _ |  |   |
| Specialist doctor, including OB/GYN          | _ | Other requirements                           |   |
| Nurse  | _ | Gestational age limits                       | _ |
| Midwife/nurse-midwife                        | _ | Compulsory counselling                       | _ |
| Other providers                              | _ | Compulsory waiting period                    | _ |
| Authorized in specially licensed facilities  | _ | Length of waiting period (days)              | _ |
| Judicial authorization                       |   | Mandatory screening test                     |   |
| For minors                                   | _ | HIV test                                     | _ |
| In case of rape                              | _ | Other STI test(s)                            | _ |
| Police report in case of rape                | _ | Ultrasound viewing or listening to heartbeat | _ |

| Age limit for parental consent (years) | <ul><li>Age limit for judicial consent (years)</li></ul> |  |
|--|--|--|
|  |  |  |
|  | Sex-selective abortion                                   |  |
| Prohibition of sex-selective abortion  | Restrictions on the methods to detect the sex            |  |

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | <del>-</del>                     | <del>-</del>                              |  |
| Dilatation and evacuation             | <del>-</del>                     | _   |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | _   |  |
| Misoprostol only                      | _                                | _   |  |
| Other method(s)                       | _                                | _   |  |



### **Dominican Republic**

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |  |
|--|---|--|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |  |  |
| Misoprostol  | Yes <sup>2</sup>                                  | _  |  |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | _                | <del>-</del>       |
| Specialized abortion care public facilities       | _                | _                  |
| Private health-care centres or clinics            | _                | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | _                | <del>-</del>       |

| Doctors (speciality not specified)  | _ |
|-------------------------------------|---|
| Specialist doctor, including OB/GYN | _ |
| Nurse                               | _ |
| Midwife/nurse-midwife               | _ |
| Other provider(s)                   | _ |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | _   |
| National guidelines on clinical and service delivery of post-abortion care | Yes |
| Restrictions on public information on legal abortion services              | _   |
| Counselling for contraceptive methods during<br>post-abortion care         | Yes |

| Service delivery requirements for providers or facilities |              |  |
|---|--------------|--|
| Referral linkage to a higher-level facility               | _            |  |
| Availability of a specialist doctor                       | <del>-</del> |  |
| Minimum number of beds                                    | _            |  |
| Other facility/provider requirements                      | _            |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to<br>alternative provider or facility |
|--|-------------------|--|
| Health-care facilities   | _                 | _  |
| Health-care providers  | _                 | _  |

#### Notes:

- Indicates that data are not available, not applicable or not specified.
- Abortion is generally illegal in the country. However, under the general criminal law principles of necessity, it is allowed to be performed to save the life of the pregnant woman.
   Indications not specified.



### **Ecuador**

| LAWS ON ABORTION                                 |   |   |  |  |
|--|---|---|--|--|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |  |
| To save life                                     | Yes                                     | _   |  |  |
| To preserve health                               | Yes                                     | <del>-</del>                                    |  |  |
| To preserve physical health                      | _                                       | _   |  |  |
| To preserve mental health                        | <del>-</del>                            | _   |  |  |
| In cases of intellectual or cognitive disability | Yes                                     | _   |  |  |
| In cases of incest                               | No                                      | _   |  |  |
| In cases of rape                                 | Yes                                     | _   |  |  |
| In cases of foetal impairment                    | No                                      | _   |  |  |
| For economic or social reason                    | No                                      | _   |  |  |
| On request                                       | No                                      | _   |  |  |
| For other reason(s)                              | _                                       | _   |  |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

|  | REQUIREMENTS FOR INDUCED ABORTION |                                 |  |
|--|-----------------------------------|---------------------------------|--|
| Authorizations required                      |                                   | Consent required                |  |
| Authorization of health care professional(s) | Yes                               | Spousal consent                 |  |
| Number of authorizations                     | _                                 | Parental consent for minors     |  |
| Cadre of health care professional            |                                   | Consent by another adult        |  |
| Doctor (specialty not specified)             | _                                 |                                 |  |
| Specialist doctor, including OB/GYN          | _                                 | Other requirements              |  |
| Nurse  | _                                 | Gestational age limits          |  |
| Midwife/nurse-midwife                        | _                                 | Compulsory counselling          |  |
| Other providers                              | _                                 | Compulsory waiting period       |  |
| Authorized in specially licensed facilities  | No                                | Length of waiting period        |  |
| Judicial authorization                       |                                   | Mandatory screening test        |  |
| For minors                                   | Yes                               | HIV test                        |  |
| In case of rape                              | _                                 | Other STI test(s)               |  |
| Police report in case of rape                | _                                 | Ultrasound viewing or listening |  |

| Consent by another adult                     | _            |  |
|--|--------------|--|
| Other requirements                           |              |  |
| Other requirements                           |              |  |
| Gestational age limits                       | Yes          |  |
| Compulsory counselling                       | No           |  |
| Compulsory waiting period                    | No           |  |
| Length of waiting period (days)              | _            |  |
| Mandatory screening test                     |              |  |
| HIV test                                     | _            |  |
| Other STI test(s)                            | <del>_</del> |  |
| Ultrasound viewing or listening to heartbeat | _            |  |

No

Yes

| Age when a woman can obtain an abortion without parental or judicial consent |  |   |  |
|--|--|---|--|
| Age limit for parental consent (years)                                       | <ul> <li>Age limit for judicial consent (years)</li> </ul> | _ |  |

|                                       | Sex-selective abortion |   |
|---------------------------------------|------------------------|---|
| Prohibition of sex-selective abortion | No                     | Restrictions on the methods to detect the sex of the foetus |

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | Yes                              | 12-14                                     |  |
| Dilatation and evacuation             | Yes                              | <del>-</del>                              |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | <del>-</del>                              |  |
| Misoprostol only                      | Yes                              | _   |  |
| Other method(s)                       | <del>-</del>                     | _   |  |



#### **Ecuador**

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |  |
| Misoprostol  | Yes <sup>2</sup>                                  | <del>-</del>   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | Yes                |
| Secondary (district-level) health-care facilities | _                | Yes                |
| Specialized abortion care public facilities       | _                | _                  |
| Private health-care centres or clinics            | _                | <del>-</del>       |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | _                | _                  |

| Health care personnel allowed to provide legal abortions |              |
|--|--------------|
| Doctors (speciality not specified)                       | _            |
| Specialist doctor, including OB/GYN                      | _            |
| Nurse  | _            |
| Midwife/nurse-midwife                                    | _            |
| Other provider(s)  | <del>_</del> |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | Yes |
| National guidelines on clinical and service delivery of post-abortion care | Yes |
| Restrictions on public information on legal abortion services              | _   |
| Counselling for contraceptive methods during<br>post-abortion care         | Yes |

| Service delivery requirements for providers or t | facilities   |
|--|--------------|
| Referral linkage to a higher-level facility      | _            |
| Availability of a specialist doctor              | <del>-</del> |
| Minimum number of beds                           | _            |
| Other facility/provider requirements             | _            |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to<br>alternative provider or facility |
|--|-------------------|--|
| Health-care facilities   | _                 | _  |
| Health-care providers  | _                 | _  |

#### Notes:

- 1. Abortions may be performed on the ground of rape only when the woman suffers from mental disability. Abortions may be performed on the ground of intellectual or cognitive disability of the woman only when the pregnancy was the result of rape.

  2. For gynaecological indications.



Age limit for parental consent (years)

# Abortion laws and policies, 2017 Egypt

| LAWS ON ABORTION                                 |   |   |  |
|--|---|---|--|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | _   |  |
| To preserve health                               | Yes                                     | <del>-</del>                                    |  |
| To preserve physical health                      | <del>-</del>                            | _   |  |
| To preserve mental health                        | -                                       | _   |  |
| In cases of intellectual or cognitive disability | <del>-</del>                            | _   |  |
| In cases of incest                               | No                                      | _   |  |
| In cases of rape                                 | No                                      | _   |  |
| In cases of foetal impairment                    | _                                       | _   |  |
| For economic or social reason                    | No                                      | _   |  |
| On request                                       | No                                      | _   |  |
| For other reason(s)                              | _                                       | _   |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |   |
|---|-----|----------|-----|------------------------------------|---|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | _ |

| uthorizations required                       |     | Consent required                             |     |
|--|-----|--|-----|
| Authorization of health care professional(s) | Yes | Spousal consent                              | Yes |
| Number of authorizations                     | 2 1 | Parental consent for minors                  | Yes |
| Cadre of health care professional            |     | Consent by another adult                     | _   |
| Doctor (specialty not specified)             | _   |  |     |
| Specialist doctor, including OB/GYN          | Yes | Other requirements                           |     |
| Nurse  | _   | Gestational age limits                       | Yes |
| Midwife/nurse-midwife                        | _   | Compulsory counselling                       | _   |
| Other providers                              | _   | Compulsory waiting period                    | _   |
| Authorized in specially licensed facilities  | Yes | Length of waiting period (days)              | _   |
| Judicial authorization                       |     | Mandatory screening test                     |     |
| For minors                                   | Yes | HIV test                                     | _   |
| In case of rape                              | _   | Other STI test(s)                            | _   |
| Police report in case of rape                | _   | Ultrasound viewing or listening to heartbeat | _   |

|                                       | Sex-selective abortion |   |
|---------------------------------------|------------------------|---|
| Prohibition of sex-selective abortion | Yes                    | Restrictions on the methods to detect the sex of the foetus |

Age limit for judicial consent (years)

| ACCESS TO ABORTION SERVICES           |                                  |   |
|---------------------------------------|----------------------------------|---|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |
| Vacuum aspiration                     | _                                | _   |
| Dilatation and evacuation             | <del>-</del>                     | _   |
| Combination mifepristone- misoprostol | <del>-</del>                     | _   |
| Misoprostol only                      | _                                | _   |
| Other method(s)                       | <del>-</del>                     | _   |



### **Egypt**

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | <del>-</del>   |  |
| Misoprostol  | Yes <sup>2</sup>                                  | No   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | <del>-</del>       |
| Specialized abortion care public facilities       | <del>-</del>     | <del>-</del>       |
| Private health-care centres or clinics            | <del>-</del>     | <del>-</del>       |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | <del>-</del>     | _                  |

| Health care personnel allowed to provide legal abortions |              |  |
|--|--------------|--|
| Doctors (speciality not specified)                       | _            |  |
| Specialist doctor, including OB/GYN                      | <del>-</del> |  |
| Nurse  | _            |  |
| Midwife/nurse-midwife                                    | _            |  |
| Other provider(s)  | _            |  |
| Other provider(s)  |              |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and middlines on abouting consists                              |     |
|---|-----|
| Information and guidelines on abortion services                             |     |
| National guidelines on clinical and service<br>delivery of induced abortion | _   |
| National guidelines on clinical and service delivery of post-abortion care  | Yes |
| Restrictions on public information on legal abortion services               | _   |
| Counselling for contraceptive methods during<br>post-abortion care          | Yes |

| Service delivery requirements for providers or facilities |   |  |
|---|---|--|
| Referral linkage to a higher-level facility               | _ |  |
| Availability of a specialist doctor                       | _ |  |
| Minimum number of beds                                    | _ |  |
| Other facility/provider requirements                      | _ |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to<br>alternative provider or facility |
|--|-------------------|--|
| Health-care facilities   | _                 | _  |
| Health-care providers  | _                 | _  |

#### Notes:

- Indicates that data are not available, not applicable or not specified.
- 1. The Code of Medical Ethics specifies a requirement of \*a written certificate from two specialist physicians.\*
  2. For gynaecological indications.



### El Salvador

| LAWS ON ABORTION                                 |                                      |   |  |
|--|--------------------------------------|---|--|
| egal grounds for induced abortion                | Currently permissible in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | No                                   | _   |  |
| To preserve health                               | No                                   | _   |  |
| To preserve physical health                      | No                                   | _   |  |
| To preserve mental health                        | No                                   | _   |  |
| In cases of intellectual or cognitive disability | No                                   | _   |  |
| In cases of incest                               | No                                   | _   |  |
| In cases of rape                                 | No                                   | _   |  |
| In cases of foetal impairment                    | No                                   | _   |  |
| For economic or social reason                    | No                                   | _   |  |
| On request                                       | No                                   | _   |  |
| For other reason(s)                              | _                                    | _   |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |   |  |              |
|--|---|--|--------------|
| Authorizations required                      |   | Consent required                             |              |
| Authorization of health care professional(s) | _ | Spousal consent                              | <del>_</del> |
| Number of authorizations                     | _ | Parental consent for minors                  | _            |
| Cadre of health care professional            |   | Consent by another adult                     | _            |
| Doctor (specialty not specified)             | _ |  |              |
| Specialist doctor, including OB/GYN          | _ | Other requirements                           |              |
| Nurse  | _ | Gestational age limits                       | _            |
| Midwife/nurse-midwife                        | _ | Compulsory counselling                       | _            |
| Other providers                              | _ | Compulsory waiting period                    | _            |
| Authorized in specially licensed facilities  | _ | Length of waiting period (days)              | _            |
| Judicial authorization                       |   | Mandatory screening test                     |              |
| For minors                                   | _ | HIV test                                     | _            |
| In case of rape                              | _ | Other STI test(s)                            | _            |
| Police report in case of rape                | _ | Ultrasound viewing or listening to heartbeat | _            |

| Age limit for parental consent (years) | <ul><li>Age limit for judicial consent (years)</li></ul> |
|--|--|
|  |  |
|  | Sex-selective abortion                                   |
| Drahibition of any collective abortion | Restrictions on the methods to detect the sex            |

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | _                                | <del>-</del>                              |  |
| Dilatation and evacuation             | _                                | <del>-</del>                              |  |
| Combination mifepristone- misoprostol | _                                | <del>-</del>                              |  |
| Misoprostol only                      | _                                | <del>-</del>                              |  |
| Other method(s)                       | _                                | <del>-</del>                              |  |



### **El Salvador**

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |  |
| Misoprostol  | No  | _  |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | _                | Yes                |
| Secondary (district-level) health-care facilities | _                | Yes                |
| Specialized abortion care public facilities       | _                | <del>-</del>       |
| Private health-care centres or clinics            | _                | <del>-</del>       |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | _                | _                  |

| Health care personnel allowed to provide legal abortions |   |
|--|---|
| Doctors (speciality not specified)                       | _ |
| Specialist doctor, including OB/GYN                      | _ |
| Nurse  | _ |
| Midwife/nurse-midwife                                    | _ |
| Other provider(s)  | _ |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| _   |
|-----|
| Yes |
| _   |
| Yes |
|     |

| Service delivery requirements for providers or facilities |              |  |
|---|--------------|--|
| Referral linkage to a higher-level facility               | _            |  |
| Availability of a specialist doctor                       | <del>-</del> |  |
| Minimum number of beds                                    | _            |  |
| Other facility/provider requirements                      | _            |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to<br>alternative provider or facility |
|--|-------------------|--|
| Health-care facilities   | _                 | <del>-</del>   |
| Health-care providers  | <del>-</del>      | _  |

Indicates that data are not available, not applicable or not specified.



Prohibition of sex-selective abortion

# Abortion laws and policies, 2017

## **Equatorial Guinea**

| LAWS ON ABORTION                                 |   |   |  |
|--|---|---|--|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | _   |  |
| To preserve health                               | Yes                                     | _   |  |
| To preserve physical health                      | <del>-</del>                            | _   |  |
| To preserve mental health                        | <del>-</del>                            | _   |  |
| In cases of intellectual or cognitive disability | No                                      | _   |  |
| In cases of incest                               | No                                      | _   |  |
| In cases of rape                                 | No                                      | _   |  |
| In cases of foetal impairment                    | No                                      | _   |  |
| For economic or social reason                    | No                                      | _   |  |
| On request                                       | No                                      | _   |  |
| For other reason(s)                              | _                                       | _   |  |

| Persons who can be criminally charged for an illegal abortion |   |            |                                    |   |
|---|---|------------|------------------------------------|---|
| Woman   | _ | Provider — | Other person who assists the woman | _ |

| REQUIREMENTS FOR INDUCED ABORTION            |     |  |     |  |
|--|-----|--|-----|--|
| Authorizations required                      |     | Consent required                             |     |  |
| Authorization of health care professional(s) | Yes | Spousal consent                              | Yes |  |
| Number of authorizations                     | _   | Parental consent for minors                  | Yes |  |
| Cadre of health care professional            |     | Consent by another adult                     | _   |  |
| Doctor (specialty not specified)             | _   |  |     |  |
| Specialist doctor, including OB/GYN          | _   | Other requirements                           |     |  |
| Nurse  | _   | Gestational age limits                       | _   |  |
| Midwife/nurse-midwife                        | _   | Compulsory counselling                       | No  |  |
| Other providers                              | _   | Compulsory waiting period                    | No  |  |
| Authorized in specially licensed facilities  | No  | Length of waiting period (days)              | _   |  |
| Judicial authorization                       |     | Mandatory screening test                     |     |  |
| For minors                                   | _   | HIV test                                     | _   |  |
| In case of rape                              | _   | Other STI test(s)                            | _   |  |
| Police report in case of rape                | _   | Ultrasound viewing or listening to heartbeat | _   |  |

| Age limit for parental consent (years) | Age limit for judicial consent (years) |  |
|--|--|--|
|  | Sex-selective abortion                 |  |

Restrictions on the methods to detect the sex

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | _                                | _   |  |
| Dilatation and evacuation             | <del>-</del>                     | _   |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | _   |  |
| Misoprostol only                      | _                                | _   |  |
| Other method(s)                       | <del>-</del>                     | _   |  |



## **Equatorial Guinea**

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |  |
| Misoprostol  | No  | _  |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | _                | _                  |
| Secondary (district-level) health-care facilities | _                | _                  |
| Specialized abortion care public facilities       | _                | _                  |
| Private health-care centres or clinics            | _                | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | _                  |
| Other settings or facilities                      | _                | _                  |

| Health care personnel allowed to provide legal abortions |   |  |
|--|---|--|
| Doctors (speciality not specified)                       | _ |  |
| Specialist doctor, including OB/GYN                      | _ |  |
| Nurse  | _ |  |
| Midwife/nurse-midwife                                    | _ |  |
| Other provider(s)  | _ |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |
|--|
| National guidelines on clinical and service delivery of induced abortion   |
| National guidelines on clinical and service delivery of post-abortion care |
| Restrictions on public information on legal abortion services              |
| Counselling for contraceptive methods during post-abortion care            |

| Service delivery requirements for providers or facilities |   |  |
|---|---|--|
| Referral linkage to a higher-level facility               | _ |  |
| Availability of a specialist doctor                       | _ |  |
| Minimum number of beds                                    | _ |  |
| Other facility/provider requirements                      | _ |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to<br>alternative provider or facility |
|--|-------------------|--|
| Health-care facilities   | _                 | <del>-</del>   |
| Health-care providers  | <del>-</del>      | _  |

Indicates that data are not available, not applicable or not specified.



## Eritrea

| LAWS ON ABORTION                                 |                                      |   |
|--|--------------------------------------|---|
| Legal grounds for induced abortion               | Currently permissible in the country | Gestational limit for each legal ground (weeks) |
| To save life                                     | Yes                                  | _   |
| To preserve health                               | Yes                                  | <del>-</del>                                    |
| To preserve physical health                      | Yes                                  | <del>-</del>                                    |
| To preserve mental health                        | Yes                                  | <del>-</del>                                    |
| In cases of intellectual or cognitive disability | No                                   | <del>-</del>                                    |
| In cases of incest                               | Yes                                  | <del>-</del>                                    |
| In cases of rape                                 | Yes                                  | <del>-</del>                                    |
| In cases of foetal impairment                    | No                                   | <del>-</del>                                    |
| For economic or social reason                    | No                                   | <del>-</del>                                    |
| On request                                       | No                                   | <del>-</del>                                    |
| For other reason(s)                              | Yes 1                                | _   |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |     |  |              |
|--|-----|--|--------------|
| Authorizations required                      |     | Consent required                             |              |
| Authorization of health care professional(s) | Yes | Spousal consent                              | <del>_</del> |
| Number of authorizations                     | 1 2 | Parental consent for minors                  | _            |
| Cadre of health care professional            |     | Consent by another adult                     | _            |
| Doctor (specialty not specified)             | Yes |  |              |
| Specialist doctor, including OB/GYN          | _   | Other requirements                           |              |
| Nurse  | _   | Gestational age limits                       | _            |
| Midwife/nurse-midwife                        | _   | Compulsory counselling                       | _            |
| Other providers                              | _   | Compulsory waiting period                    | _            |
| Authorized in specially licensed facilities  | _   | Length of waiting period (days)              | _            |
| Judicial authorization                       |     | Mandatory screening test                     |              |
| For minors                                   | _   | HIV test                                     | _            |
| In case of rape                              | Yes | Other STI test(s)                            | _            |
| Police report in case of rape                | _   | Ultrasound viewing or listening to heartbeat | _            |

| Age when a woman can obtain an abortion without parental or judicial consent |  |   |
|--|--|---|
| Age limit for parental consent (years)                                       | <ul> <li>Age limit for judicial consent (years)</li> </ul> | _ |
|  |  |   |
|  |  |   |

|                                       | Sex-selective abortion                                      |
|---------------------------------------|---|
| Prohibition of sex-selective abortion | Restrictions on the methods to detect the sex of the foetus |

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | <del>-</del>                     | <del>-</del>                              |  |
| Dilatation and evacuation             | <del>-</del>                     | _   |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | _   |  |
| Misoprostol only                      | <del>-</del>                     | _   |  |
| Other method(s)                       | <del>-</del>                     | _   |  |



### Eritrea

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |
|--|---|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |
| Misoprostol  | Yes <sup>3</sup>                                  | <del>-</del>   |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | _                  |
| Specialized abortion care public facilities       | <del>-</del>     | _                  |
| Private health-care centres or clinics            | <del>-</del>     | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | <del>-</del>     | _                  |

| Doctors (speciality not specified)  | Yes |
|-------------------------------------|-----|
| Specialist doctor, including OB/GYN | _   |
| Nurse                               | _   |
| Midwife/nurse-midwife               | _   |
| Other provider(s)                   | _   |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Info | ormation and guidelines on abortion services                               |
|------|--|
|      | National guidelines on clinical and service delivery of induced abortion   |
|      | National guidelines on clinical and service delivery of post-abortion care |
|      | Restrictions on public information on legalabortion services               |
|      | Counselling for contraceptive methods during post-abortion care            |

| Service delivery requirements for providers or facilities |   |  |
|---|---|--|
| Referral linkage to a higher-level facility               | _ |  |
| Availability of a specialist doctor                       | _ |  |
| Minimum number of beds                                    | _ |  |
| Other facility/provider requirements                      | _ |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to<br>alternative provider or facility |
|--|-------------------|--|
| Health-care facilities   | _                 | _  |
| Health-care providers  | _                 | _  |

#### Notes:

- Termination performed on a girl under the age of 18.
   For physical or mental health grounds.
   For gynaecological indications.



## **Estonia**

| LAWS ON ABORTION                                 |   |   |
|--|---|---|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |
| To save life                                     | Yes                                     | 22  |
| To preserve health                               | Yes                                     | 22  |
| To preserve physical health                      | _                                       | _   |
| To preserve mental health                        | <del>-</del>                            | _   |
| In cases of intellectual or cognitive disability | Yes                                     | 22  |
| In cases of incest                               | <del>-</del>                            | _   |
| In cases of rape                                 | <del>-</del>                            | <del>-</del>                                    |
| In cases of foetal impairment                    | Yes                                     | 22  |
| For economic or social reason                    | _                                       | _   |
| On request                                       | Yes                                     | 12  |
| For other reason(s)                              | Yes 1                                   | _   |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

|  | REQUIREMENTS FOR | REQUIREMENTS FOR INDUCED ABORTION |  |
|--|------------------|-----------------------------------|--|
| Authorizations required                      |                  | Consent required                  |  |
| Authorization of health care professional(s) | Yes              | Spousal consent                   |  |
| Number of authorizations                     | 3 2              | Parental consent for              |  |
| Cadre of health care professional            |                  | Consent by another                |  |
| Doctor (specialty not specified)             | Yes              |                                   |  |
| Specialist doctor, including OB/GYN          | Yes              | Other requirements                |  |
| Nurse  | _                | Gestational age limit             |  |
| Midwife/nurse-midwife                        | <del>_</del>     | Compulsory counsel                |  |
| Other providers                              | Yes <sup>3</sup> | Compulsory waiting                |  |
| Authorized in specially licensed facilities  | Yes              | Length of waitin                  |  |
| Judicial authorization                       |                  | Mandatory screening               |  |
| For minors                                   | _                | HIV test                          |  |
| In case of rape                              | _                | Other STI test(s                  |  |
| Police report in case of rape                | _                | Ultrasound viewing of             |  |

| Parental consent for minors     | _            |
|---------------------------------|--------------|
| Consent by another adult        | <del>_</del> |
|                                 |              |
| Other requirements              |              |
| Gestational age limits          | Yes          |
| Compulsory counselling          | No           |
| Compulsory waiting period       | _            |
| Length of waiting period (days) | _            |
| Mandatory screening test        |              |
| HIV test                        | _            |
| Other STI test(s)               | _            |

Ultrasound viewing or listening to heartbeat

| Age v                                  | when a woman can obtain an abortion without parental or judicial consent |   |  |
|--|--|---|--|
| Age limit for parental consent (years) | <ul> <li>Age limit for judicial consent (years)</li> </ul>               | _ |  |

|                                       | Sex-selective abortion                                      |
|---------------------------------------|---|
| Prohibition of sex-selective abortion | Restrictions on the methods to detect the sex of the foetus |

| ACCESS TO ABORTION SERVICES           |                                  |   |
|---------------------------------------|----------------------------------|---|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |
| Vacuum aspiration                     | Yes                              | <del>-</del>                              |
| Dilatation and evacuation             | <del>-</del>                     | <del>-</del>                              |
| Combination mifepristone- misoprostol | Yes                              | <del>-</del>                              |
| Misoprostol only                      | Yes                              | <del>-</del>                              |
| Other method(s)                       | <del>-</del>                     | <del>-</del>                              |



### Estonia

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |
|--|---|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |
| Mifepristone and/or combination mifepristone-misoprostol | Yes   | Yes <sup>4</sup>   |
| Misoprostol  | Yes <sup>5</sup>                                  | Yes <sup>6</sup>   |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | _                  |
| Specialized abortion care public facilities       | <del>-</del>     | _                  |
| Private health-care centres or clinics            | <del>-</del>     | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | _                  |
| Other settings or facilities                      | _                | _                  |

| Health care personnel allowed to provide legal abortions |     |
|--|-----|
| Doctors (speciality not specified)                       | _   |
| Specialist doctor, including OB/GYN                      | Yes |
| Nurse  | _   |
| Midwife/nurse-midwife                                    | _   |
| Other provider(s)  | _   |
|  |     |

| Types of insurance or other coverage for abortion                  |       |
|--|-------|
| Public health coverage for induced abortion for all women          | _     |
| Public health coverage for induced abortion for<br>poor women only | _     |
| Public health coverage for abortion complications                  | _     |
| Private health coverage for induced abortion                       | _     |
| Other type of coverage   | Yes 7 |

| Information and guidelines on abortion services                            |   |
|--|---|
| National guidelines on clinical and service delivery of induced abortion   | _ |
| National guidelines on clinical and service delivery of post-abortion care | _ |
| Restrictions on public information on legal abortion services              | _ |
| Counselling for contraceptive methods during post-abortion care            | _ |

| Service delivery requirements for providers or | facilities       |
|--|------------------|
| Referral linkage to a higher-level facility    | _                |
| Availability of a specialist doctor            | Yes              |
| Minimum number of beds                         | _                |
| Other facility/provider requirements           | Yes <sup>8</sup> |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | Yes <sup>9</sup>  | _   |

#### Notes:

- 1. The woman is below the age of 15 or over the age of 45.

  2. Abortions undertaken between 12 and 22 weeks of gestation require the approval of three doctors, including two gynaecologists. For some grounds, a social worker is also involved in the decision.

  3. A social worker.

  4. With prescription only.

  5. Indications not specified.

  6. With prescription only.

  7. The woman has to pay 30 per cent of the price of an induced abortion on request with anaesthesia at her own request and 50 per cent of the price of a medical abortion.

  8. Facility should be licenced for gynaecological care.

  9. Provider type not specified.



Prohibition of sex-selective abortion

# Abortion laws and policies, 2017

### Eswatini

| LAWS ON ABORTION                                 |   |   |  |
|--|---|---|--|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | _   |  |
| To preserve health                               | Yes                                     | _   |  |
| To preserve physical health                      | Yes                                     | _   |  |
| To preserve mental health                        | Yes                                     | _   |  |
| In cases of intellectual or cognitive disability | No                                      | _   |  |
| In cases of incest                               | Yes                                     | _   |  |
| In cases of rape                                 | Yes                                     | _   |  |
| In cases of foetal impairment                    | Yes                                     | _   |  |
| For economic or social reason                    | No                                      | _   |  |
| On request                                       | No                                      | _   |  |
| For other reason(s)                              | Yes 1                                   | _   |  |

|       |   | Persons who can be criminally charg | ged fo | an illegal abortion                |   |  |
|-------|---|-------------------------------------|--------|------------------------------------|---|--|
| Woman | _ | Provider                            | _      | Other person who assists the woman | _ |  |

| REQUIREMENTS FOR INDUCED ABORTION            |     |  |   |
|--|-----|--|---|
| Authorizations required                      |     | Consent required                             |   |
| Authorization of health care professional(s) | Yes | Spousal consent                              | _ |
| Number of authorizations                     | 1 2 | Parental consent for minors                  | _ |
| Cadre of health care professional            |     | Consent by another adult                     | _ |
| Doctor (specialty not specified)             | Yes |  |   |
| Specialist doctor, including OB/GYN          | _   | Other requirements                           |   |
| Nurse  | _   | Gestational age limits                       | _ |
| Midwife/nurse-midwife                        | _   | Compulsory counselling                       | _ |
| Other providers                              | _   | Compulsory waiting period                    | _ |
| Authorized in specially licensed facilities  | _   | Length of waiting period (days)              | _ |
| Judicial authorization                       |     | Mandatory screening test                     |   |
| For minors                                   | _   | HIV test                                     | _ |
| In case of rape                              | _   | Other STI test(s)                            | _ |
| Police report in case of rape                | _   | Ultrasound viewing or listening to heartbeat | _ |

| Age limit for parental consent (years) | <del>_</del> | Age limit for judicial consent (years) | <del>-</del> |
|--|--------------|--|--------------|
|  |              |  |              |
|  | Can aslastin | a abautian                             |              |

Restrictions on the methods to detect the sex

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | _                                | <u> </u>                                  |  |
| Dilatation and evacuation             | <del>-</del>                     | _   |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | _   |  |
| Misoprostol only                      | _                                | _   |  |
| Other method(s)                       | _                                | _   |  |



## Eswatini

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |  |
| Misoprostol  | Yes <sup>3</sup>                                  | <del>-</del>   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | _                  |
| Specialized abortion care public facilities       | <del>-</del>     | _                  |
| Private health-care centres or clinics            | <del>-</del>     | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | _                  |
| Other settings or facilities                      | _                | _                  |

| lealth care personnel allowed to provide legal abo | rtions |
|--|--------|
| Doctors (speciality not specified)                 | _      |
| Specialist doctor, including OB/GYN                | _      |
| Nurse  | _      |
| Midwife/nurse-midwife                              | _      |
| Other provider(s)                                  | _      |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | _   |
| National guidelines on clinical and service delivery of post-abortion care | Yes |
| Restrictions on public information on legal abortion services              | _   |
| Counselling for contraceptive methods during<br>post-abortion care         | _   |

| Service delivery requirements for providers or for | acilities |
|--|-----------|
| Referral linkage to a higher-level facility        | _         |
| Availability of a specialist doctor                | _         |
| Minimum number of beds                             | _         |
| Other facility/provider requirements               | _         |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | _                 | _   |

#### Notes:

- Unlawful sexual intercourse with a mentally disabled female.
   Certification by a doctor is needed for abortions on medical and therapeutic grounds.
   For gynaecological indications.



Prohibition of sex-selective abortion

## Abortion laws and policies, 2017 **Ethiopia**

| LAWS ON ABORTION                                 |   |   |
|--|---|---|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |
| To save life                                     | Yes                                     | 28  |
| To preserve health                               | Yes                                     | 28  |
| To preserve physical health                      | _                                       | _   |
| To preserve mental health                        | _                                       | _   |
| In cases of intellectual or cognitive disability | Yes                                     | 28  |
| In cases of incest                               | Yes                                     | 28  |
| In cases of rape                                 | Yes                                     | 28  |
| In cases of foetal impairment                    | Yes                                     | 28  |
| For economic or social reason                    | No                                      | _   |
| On request                                       | No                                      | _   |
| For other reason(s)                              | Yes <sup>2</sup>                        | _   |

|       |     | Persons who can be criminally cl | harged for | an illegal abortion                |     |
|-------|-----|----------------------------------|------------|------------------------------------|-----|
| Woman | Yes | Provider                         | Yes        | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |    |  |              |
|--|----|--|--------------|
| Authorizations required                      |    | Consent required                             |              |
| Authorization of health care professional(s) | _  | Spousal consent                              | <del>-</del> |
| Number of authorizations                     | _  | Parental consent for minors                  | _            |
| Cadre of health care professional            |    | Consent by another adult                     | _            |
| Doctor (specialty not specified)             | _  |  |              |
| Specialist doctor, including OB/GYN          | _  | Other requirements                           |              |
| Nurse  | _  | Gestational age limits                       | Yes          |
| Midwife/nurse-midwife                        | _  | Compulsory counselling                       | No           |
| Other providers                              | _  | Compulsory waiting period                    | _            |
| Authorized in specially licensed facilities  | _  | Length of waiting period (days)              | 3            |
| Judicial authorization                       |    | Mandatory screening test                     |              |
| For minors                                   | _  | HIV test                                     | _            |
| In case of rape                              | No | Other STI test(s)                            | Yes          |
| Police report in case of rape                | No | Ultrasound viewing or listening to heartbeat | _            |

|  |  | <u> </u> |
|--|--|----------|
| Age limit for parental consent (years) | <ul> <li>Age limit for judicial consent (years)</li> </ul> | _        |
|  |  |          |
|  | Say coloctive abortion                                     |          |

Restrictions on the methods to detect the sex

| ACCESS TO ABORTION SERVICES           |                                  |   |
|---------------------------------------|----------------------------------|---|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |
| Vacuum aspiration                     | Yes                              | 12  |
| Dilatation and evacuation             | <del>-</del>                     | <del>-</del>                              |
| Combination mifepristone- misoprostol | Yes                              | 24  |
| Misoprostol only                      | Yes                              | _   |
| Other method(s)                       | Yes <sup>4</sup>                 | 12  |



## Abortion laws and policies, 2017 **Ethiopia**

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |
|--|---|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |
| Mifepristone and/or combination mifepristone-misoprostol | Yes   | <del>-</del>   |
| Misoprostol  | Yes <sup>5</sup>                                  | <del>-</del>   |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | Yes              | Yes                |
| Secondary (district-level) health-care facilities | Yes              | Yes                |
| Specialized abortion care public facilities       | <del>-</del>     | <del>-</del>       |
| Private health-care centres or clinics            | Yes              | Yes                |
| NGO health-care centres or clinics                | _                | <del>-</del>       |
| Other settings or facilities                      | <del>-</del>     | <del>-</del>       |

| Health care personnel allowed to provide legal abortions |                  |
|--|------------------|
| Doctors (speciality not specified)                       | Yes              |
| Specialist doctor, including OB/GYN                      | Yes              |
| Nurse  | Yes              |
| Midwife/nurse-midwife                                    | Yes              |
| Other provider(s)  | Yes <sup>6</sup> |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | Yes |
| National guidelines on clinical and service delivery of post-abortion care | Yes |
| Restrictions on public information on legal abortion services              | _   |
| Counselling for contraceptive methods during<br>post-abortion care         | Yes |

| Service delivery requirements for providers or f | acilities |  |
|--|-----------|--|
| Referral linkage to a higher-level facility      | Yes       |  |
| Availability of a specialist doctor              | Yes       |  |
| Minimum number of beds                           | _         |  |
| Other facility/provider requirements             | _         |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | _                 | _   |

#### Notes:

- Indicates that data are not available, not applicable or not specified.
- In the case of grave and imminent danger which can be averted only by an immediate intervention.
   Where the pregnant woman, owing to a physical or mental deficiency she suffers from, or her minority, is physically as well as mentally unfit to bring up the child.
   A woman who is eligible for pregnancy termination should obtain the service within three working days. This time is used for counselling and diagnostic measures necessary for the procedure.
   Dilation and curettage only where vacuum aspiration is not available.
   For gynaecological indications.
   Health officers.



Fiji

| LAWS ON ABORTION                                 |   |   |
|--|---|---|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |
| To save life                                     | Yes                                     | No limit  |
| To preserve health                               | Yes                                     | No limit  |
| To preserve physical health                      | Yes                                     | No limit  |
| To preserve mental health                        | Yes                                     | No limit  |
| In cases of intellectual or cognitive disability | No                                      | _   |
| In cases of incest                               | Yes                                     | 20  |
| In cases of rape                                 | Yes                                     | 20  |
| In cases of foetal impairment                    | Yes                                     | No limit  |
| For economic or social reason                    | No                                      | _   |
| On request                                       | No                                      | <del>-</del>                                    |
| For other reason(s)                              | _                                       | _   |

|       |     | Persons who can be criminally cha | arged for | an illegal abortion                |     |
|-------|-----|-----------------------------------|-----------|------------------------------------|-----|
| Woman | Yes | Provider                          | Yes       | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |     |  |              |
|--|-----|--|--------------|
| Authorizations required                      |     | Consent required                             |              |
| Authorization of health care professional(s) | Yes | Spousal consent                              | <del>-</del> |
| Number of authorizations                     | 2   | Parental consent for minors                  | Yes          |
| Cadre of health care professional            |     | Consent by another adult                     | Yes          |
| Doctor (specialty not specified)             | Yes |  |              |
| Specialist doctor, including OB/GYN          | _   | Other requirements                           |              |
| Nurse  | _   | Gestational age limits                       | Yes          |
| Midwife/nurse-midwife                        | _   | Compulsory counselling                       | _            |
| Other providers                              | _   | Compulsory waiting period                    | _            |
| Authorized in specially licensed facilities  | Yes | Length of waiting period (days)              | _            |
| Judicial authorization                       |     | Mandatory screening test                     |              |
| For minors                                   | Yes | HIV test                                     | _            |
| In case of rape                              | _   | Other STI test(s)                            | _            |
| Police report in case of rape                | _   | Ultrasound viewing or listening to heartbeat | _            |

| Age limit for parental consent (years) | 16            | Age limit for judicial consent (years)        | 16 |
|--|---------------|---|----|
|  |               |   |    |
|  | Sex-selective | abortion                                      |    |
| Prohibition of sex-selective abortion  | _             | Restrictions on the methods to detect the sex | _  |

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | _                                | <del>-</del>                              |  |
| Dilatation and evacuation             | <del>-</del>                     | <del>-</del>                              |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | <del>-</del>                              |  |
| Misoprostol only                      | <del>-</del>                     | _   |  |
| Other method(s)                       | <del>-</del>                     | <del>-</del>                              |  |



Fiji

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | <del>-</del>   |  |
| Misoprostol  | Yes 1   | <del>-</del>   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | _                | <del>-</del>       |
| Secondary (district-level) health-care facilities | _                | <del>-</del>       |
| Specialized abortion care public facilities       | _                | <del>-</del>       |
| Private health-care centres or clinics            | _                | <del>-</del>       |
| NGO health-care centres or clinics                | _                | <del>-</del>       |
| Other settings or facilities                      | Yes <sup>2</sup> | _                  |

| ealth care personnel allowed to provide legal abo | ortions |
|---|---------|
| Doctors (speciality not specified)                | Yes     |
| Specialist doctor, including OB/GYN               | Yes     |
| Nurse   | No      |
| Midwife/nurse-midwife                             | No      |
| Other provider(s)                                 | _       |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Info | ormation and guidelines on abortion services                               |
|------|--|
|      | National guidelines on clinical and service delivery of induced abortion   |
|      | National guidelines on clinical and service delivery of post-abortion care |
|      | Restrictions on public information on legalabortion services               |
|      | Counselling for contraceptive methods during post-abortion care            |

| Service delivery requirements for providers or facilities |   |  |
|---|---|--|
| Referral linkage to a higher-level facility               | _ |  |
| Availability of a specialist doctor                       | _ |  |
| Minimum number of beds                                    | _ |  |
| Other facility/provider requirements                      | _ |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to<br>alternative provider or facility |
|--|-------------------|--|
| Health-care facilities   | _                 | _  |
| Health-care providers  | _                 | _  |

#### Notes:

- Indicates that data are not available, not applicable or not specified.
- For gynaecological indications.
   For procedures performed after 20 weeks, the facility must be approved by the Minister for Health.



Prohibition of sex-selective abortion

# Abortion laws and policies, 2017

### Finland

| LAWS ON ABORTION                                 |   |   |  |
|--|---|---|--|
| Legal grounds for induced abortion               | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | 20  |  |
| To preserve health                               | Yes                                     | 20  |  |
| To preserve physical health                      | Yes                                     | 20  |  |
| To preserve mental health                        | Yes                                     | 20  |  |
| In cases of intellectual or cognitive disability | _                                       | _   |  |
| In cases of incest                               | Yes                                     | 12  |  |
| In cases of rape                                 | Yes                                     | 12  |  |
| In cases of foetal impairment                    | Yes                                     | No limit  |  |
| For economic or social reason                    | Yes                                     | 12  |  |
| On request                                       | _                                       | _   |  |
| For other reason(s)                              | Yes <sup>2</sup>                        | _   |  |

| Persons who can be criminally charged for an illegal abortion |            |     |                                    |   |  |
|---|------------|-----|------------------------------------|---|--|
| Woman -   | — Provider | Yes | Other person who assists the woman | _ |  |

| REQUIREMENTS FOR INDUCED ABORTION            |                  |  |     |  |
|--|------------------|--|-----|--|
| Authorizations required                      |                  | Consent required                             |     |  |
| Authorization of health care professional(s) | Yes              | Spousal consent                              | No  |  |
| Number of authorizations                     | 1 3              | Parental consent for minors                  | No  |  |
| Cadre of health care professional            |                  | Consent by another adult                     | _   |  |
| Doctor (specialty not specified)             | Yes              |  |     |  |
| Specialist doctor, including OB/GYN          | Yes              | Other requirements                           |     |  |
| Nurse  | _                | Gestational age limits                       | Yes |  |
| Midwife/nurse-midwife                        | _                | Compulsory counselling                       | _   |  |
| Other providers                              | Yes <sup>4</sup> | Compulsory waiting period                    | _   |  |
| Authorized in specially licensed facilities  | Yes              | Length of waiting period (days)              | _   |  |
| Judicial authorization                       |                  | Mandatory screening test                     |     |  |
| For minors                                   | No               | HIV test                                     | _   |  |
| In case of rape                              | _                | Other STI test(s)                            | _   |  |
| Police report in case of rape                | Yes              | Ultrasound viewing or listening to heartbeat | _   |  |

| Age when a woman can obtain an abortion without parental or judicial consent |   |  |   |  |
|--|---|--|---|--|
| Age limit for parental consent (years)                                       | _ | Age limit for judicial consent (years) | _ |  |
|  |   |  |   |  |
| Say salastive abortion   |   |  |   |  |

Restrictions on the methods to detect the sex

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | _                                | _   |  |
| Dilatation and evacuation             | <del>-</del>                     | _   |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | <del>-</del>                              |  |
| Misoprostol only                      | <del>-</del>                     | _   |  |
| Other method(s)                       | _                                | _   |  |



### **Finland**

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | Yes   | <del>-</del>   |  |
| Misoprostol  | Yes <sup>5</sup>                                  | <u> </u>   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | _                | <del>-</del>       |
| Secondary (district-level) health-care facilities | _                | <del>-</del>       |
| Specialized abortion care public facilities       | _                | <del>-</del>       |
| Private health-care centres or clinics            | _                | <del>-</del>       |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | Yes <sup>6</sup> | _                  |

| lealth care personnel allowed to provide legal abo | rtions |
|--|--------|
| Doctors (speciality not specified)                 | Yes    |
| Specialist doctor, including OB/GYN                | _      |
| Nurse  | _      |
| Midwife/nurse-midwife                              | _      |
| Other provider(s)                                  | _      |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services  National guidelines on clinical and service delivery of induced abortion  National guidelines on clinical and service delivery of pools abortion corp. |  |   |
|---|--|---|
| delivery of induced abortion  National guidelines on clinical and service   | Information and guidelines on abortion services                            |   |
|   |  | _ |
| delivery of post-abortion care  | National guidelines on clinical and service delivery of post-abortion care | _ |
| Restrictions on public information on legal abortion services   | 1  | _ |
| Counselling for contraceptive methods during post-abortion care   |  | _ |

| Service delivery requirements for providers or facilities |              |  |
|---|--------------|--|
| Referral linkage to a higher-level facility               | _            |  |
| Availability of a specialist doctor                       | <del>-</del> |  |
| Minimum number of beds                                    | _            |  |
| Other facility/provider requirements                      | _            |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to<br>alternative provider or facility |
|--|-------------------|--|
| Health-care facilities   | _                 | _  |
| Health-care providers  | _                 | _  |

#### Notes:

- Indicates that data are not available, not applicable or not specified.
- 1. The Law on Abortion states that an abortion may not be performed after the twelfth week of pregnancy on any grounds other than a disease or physical defect in the woman. If the woman was not yet 17 years of age at the time of conception or there are other exceptional reasons, abortion is lawful at a later stage of pregnancy, although not after the 20th week.

  2. Abortion is permitted if the delivery and care of the child would place a strain on the woman, given the living conditions of the woman or her family. Abortion is also permitted if: (a) the woman is under 17 of age or over 40, (b) the woman already has four children, and (c) when owing to disease or mental illness one or both parents are unable to care for the child.

  3. One or two physicians or national authority, depending on ground. An authorization is required for abortion after twelve weeks of gestation.

  4. Investigation by midwife, health sister or equivalent in the case where the birth and care of the child would be significantly burdensome for the woman.

- 5. For gynaecological indications.6. Termination of pregnancy is to be carried out in a hospital which has been approved for the purpose by the State Medical Board (abortion hospitals).



## France

| LAWS ON ABORTION                                 |   |   |  |
|--|---|---|--|
| Legal grounds for induced abortion               | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | No limit  |  |
| To preserve health                               | Yes                                     | No limit  |  |
| To preserve physical health                      | _                                       | <del>-</del>                                    |  |
| To preserve mental health                        | <del>-</del>                            | <del>-</del>                                    |  |
| In cases of intellectual or cognitive disability | _                                       | <del>-</del>                                    |  |
| In cases of incest                               | <del>-</del>                            | <del>-</del>                                    |  |
| In cases of rape                                 | _                                       | _   |  |
| In cases of foetal impairment                    | Yes                                     | No limit  |  |
| For economic or social reason                    | _                                       | <del>-</del>                                    |  |
| On request                                       | Yes                                     | 12  |  |
| For other reason(s)                              | _                                       | _   |  |

| Persons who can be criminally charged for an illegal abortion |   |          |     |                                    |     |  |
|---|---|----------|-----|------------------------------------|-----|--|
| Woman   | _ | Provider | Yes | Other person who assists the woman | Yes |  |

| REQUIREMENTS FOR INDUCED ABORTION            |              |                                |
|--|--------------|--------------------------------|
| Authorizations required                      |              | Consent required               |
| Authorization of health care professional(s) | Yes          | Spousal consent                |
| Number of authorizations                     | 2 1          | Parental consent for minors    |
| Cadre of health care professional            |              | Consent by another adult       |
| Doctor (specialty not specified)             | Yes          |                                |
| Specialist doctor, including OB/GYN          | Yes          | Other requirements             |
| Nurse  | _            | Gestational age limits         |
| Midwife/nurse-midwife                        | <del>-</del> | Compulsory counselling         |
| Other providers                              | _            | Compulsory waiting period      |
| Authorized in specially licensed facilities  | Yes          | Length of waiting period       |
| Judicial authorization                       |              | Mandatory screening test       |
| For minors                                   | _            | HIV test                       |
| In case of rape                              | _            | Other STI test(s)              |
| Police report in case of rape                | _            | Ultrasound viewing or listenin |
|  |              |                                |

| Consent by another adult                     | _   |
|--|-----|
|  |     |
| Other requirements                           |     |
| Gestational age limits                       | Yes |
| Compulsory counselling                       | No  |
| Compulsory waiting period                    | Yes |
| Length of waiting period (days)              | 7 2 |
| Mandatory screening test                     |     |
| HIV test                                     | _   |
| Other STI test(s)                            | _   |
| Ultrasound viewing or listening to heartbeat | _   |

| Age when a woman can obtain an abortion without parental or judicial consent |  |   |  |
|--|--|---|--|
| Age limit for parental consent (years)                                       | <ul> <li>Age limit for judicial consent (years)</li> </ul> | _ |  |

|                                       | Sex-selective abortion                                      |
|---------------------------------------|---|
| Prohibition of sex-selective abortion | Restrictions on the methods to detect the sex of the foetus |

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | Yes                              | 14  |  |
| Dilatation and evacuation             | <del>_</del>                     | <del>-</del>                              |  |
| Combination mifepristone- misoprostol | Yes                              | 9   |  |
| Misoprostol only                      | <del>-</del>                     | _   |  |
| Other method(s)                       | <del>-</del>                     | <del>-</del>                              |  |



#### **France**

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | Yes   | No   |  |
| Misoprostol  | Yes <sup>3</sup>                                  | No   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | Yes              | _                  |
| Secondary (district-level) health-care facilities | Yes              | _                  |
| Specialized abortion care public facilities       | _                | _                  |
| Private health-care centres or clinics            | Yes              | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | _                  |
| Other settings or facilities                      | Yes <sup>4</sup> | Yes <sup>5</sup>   |

| Health care personnel allowed to provide legal abortions |     |  |
|--|-----|--|
| Doctors (speciality not specified)                       | Yes |  |
| Specialist doctor, including OB/GYN                      | _   |  |
| Nurse  | No  |  |
| Midwife/nurse-midwife                                    | No  |  |
| Other provider(s)  | _   |  |
|  |     |  |

| Types of insurance or other coverage for abortion                  |     |
|--|-----|
| Public health coverage for induced abortion for all women          | Yes |
| Public health coverage for induced abortion for<br>poor women only | _   |
| Public health coverage for abortion complications                  | _   |
| Private health coverage for induced abortion                       | _   |
| Other type of coverage   | _   |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | Yes |
| National guidelines on clinical and service delivery of post-abortion care | Yes |
| Restrictions on public information on legal abortion services              | _   |
| Counselling for contraceptive methods during<br>post-abortion care         | Yes |

| Service delivery requirements for providers or facilities |                  |  |
|---|------------------|--|
| Referral linkage to a higher-level facility               | _                |  |
| Availability of a specialist doctor                       | _                |  |
| Minimum number of beds                                    | _                |  |
| Other facility/provider requirements                      | Yes <sup>6</sup> |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | Yes <sup>7</sup>  | _   |
| Health-care providers  | Yes <sup>8</sup>  | Yes   |

#### Notes:

- Indicates that data are not available, not applicable or not specified.
- 1. Medical authorisation not required for terminations until 12 weeks pregnancy. For terminations after 12 weeks of gestation, authorisation requirements vary by abortion ground.

- 1. Medical authorisation for required for terminations until 12 weeks pregnancy. For terminations after 12 weeks or gestation, authorisation requirements vary by abortion ground.

  2. From the first request by the woman for an abortion.

  3. For gynaecological indications.

  4. Abortion may only take place in a public or private health facility or within the framework of an agreement concluded between such a facility and a practitioner, a centre for family education or family planning, or a health centre under conditions determined by a decree of the State Council. Medical abortions may be provided in Centres for Family Planning or Family Education. Doctors may provide medical abortions outside of health establishments up to five weeks of gestation.
- 5. Health centres providing primary care.6. Public and private facilities must have the capacity to manage abortion complications.
- Private facilities only.
   Provider type not specified.



## Gabon

| LAWS ON ABORTION                                 |                                      |   |  |  |
|--|--------------------------------------|---|--|--|
| Legal grounds for induced abortion               | Currently permissible in the country | Gestational limit for each legal ground (weeks) |  |  |
| To save life                                     | Yes                                  | _   |  |  |
| To preserve health                               | No                                   | _   |  |  |
| To preserve physical health                      | No                                   | <del>-</del>                                    |  |  |
| To preserve mental health                        | No                                   | <del>-</del>                                    |  |  |
| In cases of intellectual or cognitive disability | No                                   | <del>-</del>                                    |  |  |
| In cases of incest                               | No                                   | <del>-</del>                                    |  |  |
| In cases of rape                                 | No                                   | <del>-</del>                                    |  |  |
| In cases of foetal impairment                    | No                                   | <del>-</del>                                    |  |  |
| For economic or social reason                    | No                                   | <del>-</del>                                    |  |  |
| On request                                       | No                                   | <del>-</del>                                    |  |  |
| For other reason(s)                              | _                                    | _   |  |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |     |  |     |
|--|-----|--|-----|
| Authorizations required                      |     | Consent required                             |     |
| Authorization of health care professional(s) | Yes | Spousal consent                              | Yes |
| Number of authorizations                     | _   | Parental consent for minors                  | Yes |
| Cadre of health care professional            |     | Consent by another adult                     | _   |
| Doctor (specialty not specified)             | _   |  |     |
| Specialist doctor, including OB/GYN          | _   | Other requirements                           |     |
| Nurse  | _   | Gestational age limits                       | _   |
| Midwife/nurse-midwife                        | _   | Compulsory counselling                       | _   |
| Other providers                              | _   | Compulsory waiting period                    | _   |
| Authorized in specially licensed facilities  | Yes | Length of waiting period (days)              | _   |
| Judicial authorization                       |     | Mandatory screening test                     |     |
| For minors                                   | _   | HIV test                                     | _   |
| In case of rape                              | _   | Other STI test(s)                            | _   |
| Police report in case of rape                | _   | Ultrasound viewing or listening to heartbeat | _   |

| Age when a woman can obtain an abortion without parental or judicial consent |   |  |   |  |
|--|---|--|---|--|
| Age limit for parental consent (years)                                       | _ | Age limit for judicial consent (years) | _ |  |
|  |   |  |   |  |

|                                       | Sex-selective abortion                                      |
|---------------------------------------|---|
| Prohibition of sex-selective abortion | Restrictions on the methods to detect the sex of the foetus |

| ACCESS TO ABORTION SERVICES           |                                  |   |  |  |
|---------------------------------------|----------------------------------|---|--|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |  |
| Vacuum aspiration                     | <del>-</del>                     | <del>-</del>                              |  |  |
| Dilatation and evacuation             | <del>-</del>                     | _   |  |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | _   |  |  |
| Misoprostol only                      | <del>-</del>                     | _   |  |  |
| Other method(s)                       | <del>-</del>                     | _   |  |  |



### Gabon

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | <del>-</del>   |  |
| Misoprostol  | No  | <del>-</del>   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | _                  |
| Specialized abortion care public facilities       | <del>-</del>     | _                  |
| Private health-care centres or clinics            | <del>-</del>     | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | _                  |
| Other settings or facilities                      | _                | _                  |

| Doctors (speciality not specified)  Specialist doctor, including OB/GYN | _            |
|---|--------------|
| Specialist doctor, including OB/GYN                                     | _            |
|   |              |
| Nurse   | _            |
| Midwife/nurse-midwife   | _            |
| Other provider(s)   | <del>_</del> |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | _   |
| National guidelines on clinical and service delivery of post-abortion care | _   |
| Restrictions on public information on legal abortion services              | Yes |
| Counselling for contraceptive methods during<br>post-abortion care         | _   |

| Service delivery requirements for providers or facilities |              |  |
|---|--------------|--|
| Referral linkage to a higher-level facility               | <del>-</del> |  |
| Availability of a specialist doctor                       | <del>-</del> |  |
| Minimum number of beds                                    | _            |  |
| Other facility/provider requirements                      | _            |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | <del>-</del>      | _   |
| Health-care providers  | _                 | <del>-</del>  |

#### Notes:

- Indicates that data are not available, not applicable or not specified.
- 1. Abortion is generally illegal in the country. However, under the general criminal law principles of necessity, it is allowed to be performed to save the life of the pregnant woman.



## Gambia

| LAWS ON ABORTION                                 |   |   |  |
|--|---|---|--|
| Legal grounds for induced abortion               | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | _   |  |
| To preserve health                               | Yes                                     | _   |  |
| To preserve physical health                      | Yes                                     | _   |  |
| To preserve mental health                        | <del>-</del>                            | _   |  |
| In cases of intellectual or cognitive disability | No                                      | _   |  |
| In cases of incest                               | No                                      | _   |  |
| In cases of rape                                 | No                                      | _   |  |
| In cases of foetal impairment                    | Yes                                     | _   |  |
| For economic or social reason                    | No                                      | _   |  |
| On request                                       | No                                      | _   |  |
| For other reason(s)                              | _                                       | _   |  |

|       |     | Persons who can be criminally cha | arged for | an illegal abortion                |     |
|-------|-----|-----------------------------------|-----------|------------------------------------|-----|
| Woman | Yes | Provider                          | Yes       | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |     |  |     |
|--|-----|--|-----|
| Authorizations required                      |     | Consent required                             |     |
| Authorization of health care professional(s) | Yes | Spousal consent                              | Yes |
| Number of authorizations                     | _   | Parental consent for minors                  | Yes |
| Cadre of health care professional            |     | Consent by another adult                     | _   |
| Doctor (specialty not specified)             | _   |  |     |
| Specialist doctor, including OB/GYN          | _   | Other requirements                           |     |
| Nurse  | _   | Gestational age limits                       | _   |
| Midwife/nurse-midwife                        | _   | Compulsory counselling                       | _   |
| Other providers                              | _   | Compulsory waiting period                    | _   |
| Authorized in specially licensed facilities  | _   | Length of waiting period (days)              | _   |
| Judicial authorization                       |     | Mandatory screening test                     |     |
| For minors                                   | _   | HIV test                                     | _   |
| In case of rape                              | _   | Other STI test(s)                            | _   |
| Police report in case of rape                | _   | Ultrasound viewing or listening to heartbeat | _   |

| Age when a work                        |  |   |  |
|--|--|---|--|
| Age limit for parental consent (years) | <ul> <li>Age limit for judicial consent (years)</li> </ul> | _ |  |
|  |  |   |  |
|  |  |   |  |

|                                       | Sex-selective abortion |   |
|---------------------------------------|------------------------|---|
| Prohibition of sex-selective abortion | _                      | Restrictions on the methods to detect the sex of the foetus |
|                                       |                        |   |

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | _                                | <del>-</del>                              |  |
| Dilatation and evacuation             | <del>-</del>                     | <del>-</del>                              |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | <del>-</del>                              |  |
| Misoprostol only                      | _                                | <del>-</del>                              |  |
| Other method(s)                       | _                                | _   |  |



### Gambia

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |  |
|--|---|--|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |  |
| Mifepristone and/or combination mifepristone-misoprostol | <del>-</del>                                      | _  |  |  |
| Misoprostol  | <del>-</del>                                      | _  |  |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | _                  |
| Specialized abortion care public facilities       | <del>-</del>     | _                  |
| Private health-care centres or clinics            | <del>-</del>     | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | _                  |
| Other settings or facilities                      | _                | _                  |

| Health care personnel allowed to provide legal abortions |   |  |
|--|---|--|
| Doctors (speciality not specified)                       | _ |  |
| Specialist doctor, including OB/GYN                      | _ |  |
| Nurse  | _ |  |
| Midwife/nurse-midwife                                    | _ |  |
| Other provider(s)  | _ |  |
|  |   |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |   |
|--|---|
| National guidelines on clinical and service delivery of induced abortion   | _ |
| National guidelines on clinical and service delivery of post-abortion care | _ |
| Restrictions on public information on legal abortion services              | _ |
| Counselling for contraceptive methods during post-abortion care            | _ |

| Service delivery requirements for providers or facilities |              |  |
|---|--------------|--|
| Referral linkage to a higher-level facility               | _            |  |
| Availability of a specialist doctor                       | <del>-</del> |  |
| Minimum number of beds                                    | _            |  |
| Other facility/provider requirements                      | _            |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | _                 | _   |

#### Notes:

- Indicates that data are not available, not applicable or not specified.
- 1. Abortion is permitted for therapeutic purposes.



## Georgia

| LAWS ON ABORTION                                 |                                      |   |  |  |
|--|--------------------------------------|---|--|--|
| Legal grounds for induced abortion               | Currently permissible in the country | Gestational limit for each legal ground (weeks) |  |  |
| To save life                                     | Yes                                  | 22  |  |  |
| To preserve health                               | Yes                                  | 22  |  |  |
| To preserve physical health                      | Yes                                  | 22  |  |  |
| To preserve mental health                        | Yes                                  | 22  |  |  |
| In cases of intellectual or cognitive disability | Yes                                  | 12  |  |  |
| In cases of incest                               | _                                    | _   |  |  |
| In cases of rape                                 | Yes                                  | 22  |  |  |
| In cases of foetal impairment                    | Yes                                  | 22  |  |  |
| For economic or social reason                    | Yes                                  | 12  |  |  |
| On request                                       | Yes                                  | 12  |  |  |
| For other reason(s)                              | Yes <sup>1</sup>                     | _   |  |  |

| Persons who can be criminally charged for an illegal abortion |   |          |     |                                    |   |  |
|---|---|----------|-----|------------------------------------|---|--|
| Woman   | _ | Provider | Yes | Other person who assists the woman | _ |  |

|  | REQUIREMENTS FOR INDUCED ABORTION |  |     |  |  |
|--|-----------------------------------|--|-----|--|--|
| Authorizations required                      |                                   | Consent required                             |     |  |  |
| Authorization of health care professional(s) | Yes                               | Spousal consent                              | _   |  |  |
| Number of authorizations                     | _ 2                               | Parental consent for minors                  | Yes |  |  |
| Cadre of health care professional            |                                   | Consent by another adult                     | Yes |  |  |
| Doctor (specialty not specified)             | Yes                               |  |     |  |  |
| Specialist doctor, including OB/GYN          | Yes                               | Other requirements                           |     |  |  |
| Nurse  | _                                 | Gestational age limits                       | Yes |  |  |
| Midwife/nurse-midwife                        | _                                 | Compulsory counselling                       | Yes |  |  |
| Other providers                              | _                                 | Compulsory waiting period                    | Yes |  |  |
| Authorized in specially licensed facilities  | Yes                               | Length of waiting period (days)              | 5   |  |  |
| Judicial authorization                       |                                   | Mandatory screening test                     |     |  |  |
| For minors                                   | _                                 | HIV test                                     | _   |  |  |
| In case of rape                              | Yes                               | Other STI test(s)                            | _   |  |  |
| Police report in case of rape                | _                                 | Ultrasound viewing or listening to heartbeat | _   |  |  |

| Age when a woman can obtain an abortion without parental or judicial consent |    |  |   |
|--|----|--|---|
| Age limit for parental consent (years)                                       | 14 | Age limit for judicial consent (years) | _ |
|  |    |  |   |

|                                       | Sex-selective abortion |   |
|---------------------------------------|------------------------|---|
| Prohibition of sex-selective abortion | Yes                    | Restrictions on the methods to detect the sex of the foetus |

| ACCESS TO ABORTION SERVICES   |                  |              |  |  |  |
|---|------------------|--------------|--|--|--|
| Methods for induced abortions  Currently allowed  in the country  each method (weeks) |                  |              |  |  |  |
| Vacuum aspiration   | Yes              | 7            |  |  |  |
| Dilatation and evacuation   | Yes              | 12 or over   |  |  |  |
| Combination mifepristone- misoprostol   | Yes              | 22           |  |  |  |
| Misoprostol only  | <del>-</del>     | <del>-</del> |  |  |  |
| Other method(s)   | Yes <sup>4</sup> | 12           |  |  |  |



## Georgia

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |  |
|--|---|--|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |  |
| Mifepristone and/or combination mifepristone-misoprostol | <del>-</del>                                      | _  |  |  |
| Misoprostol  | <del>-</del>                                      | <del>-</del>   |  |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | Yes              | _                  |
| Secondary (district-level) health-care facilities | Yes              | _                  |
| Specialized abortion care public facilities       | _                | _                  |
| Private health-care centres or clinics            | _                | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | Yes <sup>5</sup> | <del>-</del>       |

| Health care personnel allowed to provide legal abortions |     |
|--|-----|
| Doctors (speciality not specified)                       | _   |
| Specialist doctor, including OB/GYN                      | Yes |
| Nurse  | _   |
| Midwife/nurse-midwife                                    | _   |
| Other provider(s)  | _   |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | Yes |
| National guidelines on clinical and service delivery of post-abortion care | Yes |
| Restrictions on public information on legal abortion services              | Yes |
| Counselling for contraceptive methods during post-abortion care            | Yes |

| Service delivery requirements for providers or facilities |                  |  |
|---|------------------|--|
| Referral linkage to a higher-level facility               | _                |  |
| Availability of a specialist doctor                       | Yes              |  |
| Minimum number of beds                                    | _                |  |
| Other facility/provider requirements                      | Yes <sup>6</sup> |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | _                 | _   |

#### Notes:

- The woman is below the age of 15 or over the age of 49. Abortion for expanded medical and social indications can be performed beyond 22 weeks of gestation if considered necessary by the Ministry of Labour, Health and Social Affairs.
   Physician Committee at Medical Facility, to include the gynaecologist, a lawyer and a medical specialist. An authorisation is required for an abortion above 12 weeks of gestation.
   From the moment of admission.

   Dilation and curettage is also listed as a method, but not preferred (up to 12 weeks).
   Surgical procedures to terminate pregnancies of more than a seven weeks of gestation must occur in inpatient medical facilities. Ambulatory services for pregnancy up to 12 weeks of gestation.
   For pregnancy of more than 12 weeks of gestation, abortions must be carried out in an obstetric practice with the right type of in-patient medical facility.



## Germany

| LAWS ON ABORTION                                 |   |   |  |  |
|--|---|---|--|--|
| Legal grounds for induced abortion               | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |  |
| To save life                                     | Yes                                     | No limit  |  |  |
| To preserve health                               | Yes                                     | No limit  |  |  |
| To preserve physical health                      | Yes                                     | No limit  |  |  |
| To preserve mental health                        | Yes                                     | No limit  |  |  |
| In cases of intellectual or cognitive disability | _                                       | _   |  |  |
| In cases of incest                               | _                                       | <del>-</del>                                    |  |  |
| In cases of rape                                 | Yes                                     | 12  |  |  |
| In cases of foetal impairment                    | _                                       | _   |  |  |
| For economic or social reason                    | _                                       | _   |  |  |
| On request                                       | Yes                                     | 12  |  |  |
| For other reason(s)                              | _                                       | _   |  |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |  |
|---|-----|----------|-----|------------------------------------|-----|--|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |  |

|  | REQUIREMENTS FOR INDUCED ABORTION |  |  |
|--|-----------------------------------|--|--|
| Authorizations required                      |                                   | Consent required                             |  |
| Authorization of health care professional(s) | No                                | Spousal consent                              |  |
| Number of authorizations                     | _                                 | Parental consent for minors                  |  |
| Cadre of health care professional            |                                   | Consent by another adult                     |  |
| Doctor (specialty not specified)             | _                                 |  |  |
| Specialist doctor, including OB/GYN          | _                                 | Other requirements                           |  |
| Nurse  | _                                 | Gestational age limits                       |  |
| Midwife/nurse-midwife                        | _                                 | Compulsory counselling                       |  |
| Other providers                              | _                                 | Compulsory waiting period                    |  |
| Authorized in specially licensed facilities  | No                                | Length of waiting period (days)              |  |
| Judicial authorization                       |                                   | Mandatory screening test                     |  |
| For minors                                   | _                                 | HIV test                                     |  |
| In case of rape                              | _                                 | Other STI test(s)                            |  |
| Police report in case of rape                | _                                 | Ultrasound viewing or listening to heartbear |  |

| Consent by another adult                     |                |  |
|--|----------------|--|
|  |                |  |
| Other requirements                           |                |  |
| Gestational age limits                       | Yes            |  |
| Compulsory counselling                       | Yes            |  |
| Compulsory waiting period                    | Yes            |  |
| Length of waiting period (days)              | 3 <sup>2</sup> |  |
| Mandatory screening test                     |                |  |
| HIV test                                     | _              |  |
| Other STI test(s)                            | _              |  |
| Ultrasound viewing or listening to heartbeat | _              |  |
|  |                |  |

No

| Age when a woman can obtain an abortion without parental or judicial consent |   |  |   |
|--|---|--|---|
| Age limit for parental consent (years)                                       | _ | Age limit for judicial consent (years) | _ |
|  |   |  |   |

|                                       | Sex-selective abortion                                      |
|---------------------------------------|---|
| Prohibition of sex-selective abortion | Restrictions on the methods to detect the sex of the foetus |

| ACCESS TO ABORTION SERVICES  |              |              |  |  |
|--|--------------|--------------|--|--|
| Methods for induced abortions  Currently allowed Gesta in the country each i |              |              |  |  |
| Vacuum aspiration  | <del>-</del> | _            |  |  |
| Dilatation and evacuation  | <del>-</del> | <del>-</del> |  |  |
| Combination mifepristone- misoprostol  | <del>-</del> | <del>-</del> |  |  |
| Misoprostol only   | Yes          | 9            |  |  |
| Other method(s)  | <del>-</del> | _            |  |  |



## Germany

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |
|--|---|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |
| Mifepristone and/or combination mifepristone-misoprostol | Yes   | _  |
| Misoprostol  | Yes <sup>3</sup>                                  | No   |

| Settings for providing legal abortion services    | ortion services Induced abortion Post-abortion car |              |  |
|---|--|--------------|--|
| Primary health care centres                       | <del>-</del>                                       | <del>-</del> |  |
| Secondary (district-level) health-care facilities | <del>-</del>                                       | _            |  |
| Specialized abortion care public facilities       | <del>-</del>                                       | _            |  |
| Private health-care centres or clinics            | <del>-</del>                                       | _            |  |
| NGO health-care centres or clinics                | <del>-</del>                                       | <del>-</del> |  |
| Other settings or facilities                      | <del>-</del>                                       | _            |  |

| Yes |
|-----|
| _   |
| _   |
| _   |
| _   |
|     |

| Types of insurance or other coverage for abortion                  |     |
|--|-----|
| Public health coverage for induced abortion for all women          | No  |
| Public health coverage for induced abortion for<br>poor women only | Yes |
| Public health coverage for abortion complications                  | Yes |
| Private health coverage for induced abortion                       | _   |
| Other type of coverage   | _   |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | _   |
| National guidelines on clinical and service delivery of post-abortion care | _   |
| Restrictions on public information on legal abortion services              | Yes |
| Counselling for contraceptive methods during post-abortion care            | Yes |

| Service delivery requirements for providers or facilities |                  |  |
|---|------------------|--|
| Referral linkage to a higher-level facility               | _                |  |
| Availability of a specialist doctor                       | _                |  |
| Minimum number of beds                                    | _                |  |
| Other facility/provider requirements                      | Yes <sup>4</sup> |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | Yes <sup>5</sup>  | _   |

#### Notes:

- Indicates that data are not available, not applicable or not specified.
- The pregnant woman was the victim of an illegal act falling under paragraphs 176 to 179 of the Criminal Code (child sexual abuse; sexual assault, rape, sexual abuse of persons incapable of resistance) or there are pressing reasons for believing that pregnancy was caused by such an act.
   The day after counselling.
   Indications not specified.
   Facilities that can provide post-abortion care.
   Provider type not specified.



## Ghana

| LAWS ON ABORTION                                 |                                      |   |  |  |
|--|--------------------------------------|---|--|--|
| Legal grounds for induced abortion               | Currently permissible in the country | Gestational limit for each legal ground (weeks) |  |  |
| To save life                                     | Yes                                  | 28  |  |  |
| To preserve health                               | Yes                                  | 28  |  |  |
| To preserve physical health                      | Yes                                  | 28  |  |  |
| To preserve mental health                        | Yes                                  | 28  |  |  |
| In cases of intellectual or cognitive disability | No                                   | <del>-</del>                                    |  |  |
| In cases of incest                               | Yes                                  | 28  |  |  |
| In cases of rape                                 | Yes                                  | 28  |  |  |
| In cases of foetal impairment                    | Yes                                  | 28  |  |  |
| For economic or social reason                    | No                                   | <del>-</del>                                    |  |  |
| On request                                       | No                                   | <del>-</del>                                    |  |  |
| For other reason(s)                              | _                                    | _   |  |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |     |  |     |
|--|-----|--|-----|
| Authorizations required                      |     | Consent required                             |     |
| Authorization of health care professional(s) | _   | Spousal consent                              | No  |
| Number of authorizations                     | _   | Parental consent for minors                  | No  |
| Cadre of health care professional            |     | Consent by another adult                     | _   |
| Doctor (specialty not specified)             | _   |  |     |
| Specialist doctor, including OB/GYN          | _   | Other requirements                           |     |
| Nurse  | _   | Gestational age limits                       | Yes |
| Midwife/nurse-midwife                        | _   | Compulsory counselling                       | No  |
| Other providers                              | _   | Compulsory waiting period                    | _   |
| Authorized in specially licensed facilities  | Yes | Length of waiting period (days)              | _   |
| Judicial authorization                       |     | Mandatory screening test                     |     |
| For minors                                   | _   | HIV test                                     | _   |
| In case of rape                              | _   | Other STI test(s)                            | No  |
| Police report in case of rape                | No  | Ultrasound viewing or listening to heartbeat | _   |

| Age when a woman can obtain an abortion without parental or judicial consent |   |  |   |
|--|---|--|---|
| Age limit for parental consent (years)                                       | _ | Age limit for judicial consent (years) | _ |
|  |   |  |   |
|  |   |  |   |

|                                       | Sex-selective abortion                                      |
|---------------------------------------|---|
| Prohibition of sex-selective abortion | Restrictions on the methods to detect the sex of the foetus |

| ACCESS TO ABORTION SERVICES           |                                  |   |
|---------------------------------------|----------------------------------|---|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |
| Vacuum aspiration                     | Yes                              | 12  |
| Dilatation and evacuation             | Yes                              | 28  |
| Combination mifepristone- misoprostol | Yes                              | 28  |
| Misoprostol only                      | Yes                              | 28  |
| Other method(s)                       | <del>-</del>                     | _   |



### Ghana

| ACCESS TO ABO  | DRTION SERVICES (continued)                       |  |
|--|---|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |
| Mifepristone and/or combination mifepristone-misoprostol | Yes   | _  |
| Misoprostol  | Yes <sup>2</sup>                                  | <del>-</del>   |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | _                | _                  |
| Secondary (district-level) health-care facilities | Yes              | Yes                |
| Specialized abortion care public facilities       | _                | Yes                |
| Private health-care centres or clinics            | Yes              | Yes                |
| NGO health-care centres or clinics                | _                | _                  |
| Other settings or facilities                      | Yes <sup>3</sup> | Yes <sup>4</sup>   |

| Health care personnel allowed to provide legal abortions |                  |
|--|------------------|
| Doctors (speciality not specified)                       | Yes              |
| Specialist doctor, including OB/GYN                      | Yes              |
| Nurse  | _                |
| Midwife/nurse-midwife                                    | Yes              |
| Other provider(s)  | Yes <sup>5</sup> |
|  |                  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Yes |
|-----|
| Yes |
| _   |
| Yes |
|     |

| Service delivery requirements for providers or facilities |                  |
|---|------------------|
| Referral linkage to a higher-level facility               | _                |
| Availability of a specialist doctor                       | _                |
| Minimum number of beds                                    | _                |
| Other facility/provider requirements                      | Yes <sup>6</sup> |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to<br>alternative provider or facility |
|--|-------------------|--|
| Health-care facilities   | _                 | _  |
| Health-care providers  | Yes <sup>7</sup>  | Yes  |

#### Notes:

- Indicates that data are not available, not applicable or not specified.

- Abortion is permitted for therapeutic purposes.
   For gynaecological indications.
   In a place approved for the purpose by legislative instrument made by the Secretary.
   Community level health institution.
   Community Health Officer trained in midwifery or medical assistant trained in midwifery (only medical abortion).
   Trained service provider and licensed facility.
   Provider type not specified.



Prohibition of sex-selective abortion

# Abortion laws and policies, 2017

#### Greece

| LAWS ON ABORTION                                 |                                      |   |
|--|--------------------------------------|---|
| egal grounds for induced abortion                | Currently permissible in the country | Gestational limit for each legal ground (weeks) |
| To save life                                     | Yes                                  | No limit  |
| To preserve health                               | Yes                                  | No limit  |
| To preserve physical health                      | Yes                                  | No limit  |
| To preserve mental health                        | Yes                                  | No limit  |
| In cases of intellectual or cognitive disability | _                                    | _   |
| In cases of incest                               | Yes                                  | 19  |
| In cases of rape                                 | Yes                                  | 19  |
| In cases of foetal impairment                    | Yes                                  | 24  |
| For economic or social reason                    | _                                    | _   |
| On request                                       | Yes                                  | 12  |
| For other reason(s)                              | Yes 1                                | _   |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |                |  |     |  |
|--|----------------|--|-----|--|
| Authorizations required                      |                | Consent required                             |     |  |
| Authorization of health care professional(s) | Yes            | Spousal consent                              | _   |  |
| Number of authorizations                     | 1 <sup>2</sup> | Parental consent for minors                  | Yes |  |
| Cadre of health care professional            |                | Consent by another adult                     | Yes |  |
| Doctor (specialty not specified)             | Yes            |  |     |  |
| Specialist doctor, including OB/GYN          | _              | Other requirements                           |     |  |
| Nurse  | _              | Gestational age limits                       | Yes |  |
| Midwife/nurse-midwife                        | _              | Compulsory counselling                       | _   |  |
| Other providers                              | _              | Compulsory waiting period                    | _   |  |
| Authorized in specially licensed facilities  | _              | Length of waiting period (days)              | _   |  |
| Judicial authorization                       |                | Mandatory screening test                     |     |  |
| For minors                                   | _              | HIV test                                     | _   |  |
| In case of rape                              | _              | Other STI test(s)                            | _   |  |
| Police report in case of rape                | _              | Ultrasound viewing or listening to heartbeat | _   |  |

| Age limit for parental consent (years) | _                  | Age limit for judicial consent (years) | _ |
|--|--------------------|--|---|
|  |                    |  |   |
|  | Sex-selective abor | tion                                   |   |

Restrictions on the methods to detect the sex

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | _                                | <del>-</del>                              |  |
| Dilatation and evacuation             | <del>-</del>                     | <del>-</del>                              |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | <del>-</del>                              |  |
| Misoprostol only                      | <del>-</del>                     | _   |  |
| Other method(s)                       | <del>-</del>                     | <del>-</del>                              |  |



#### Greece

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | Yes   | Yes <sup>3</sup>   |  |
| Misoprostol  | Yes <sup>4</sup>                                  | Yes <sup>5</sup>   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | _                  |
| Secondary (district-level) health-care facilities | Yes              | _                  |
| Specialized abortion care public facilities       | _                | _                  |
| Private health-care centres or clinics            | Yes              | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | Yes <sup>6</sup> | _                  |

| Health care personnel allowed to provide legal abortions |     |  |
|--|-----|--|
| Doctors (speciality not specified)                       | No  |  |
| Specialist doctor, including OB/GYN                      | Yes |  |
| Nurse  | No  |  |
| Midwife/nurse-midwife                                    | No  |  |
| Other provider(s)  | _   |  |
|  |     |  |

| Types of insurance or other coverage for abortion                  |     |
|--|-----|
| Public health coverage for induced abortion for all women          | Yes |
| Public health coverage for induced abortion for<br>poor women only | No  |
| Public health coverage for abortion complications                  | Yes |
| Private health coverage for induced abortion                       | _   |
| Other type of coverage   | _   |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | Yes |
| National guidelines on clinical and service delivery of post-abortion care | Yes |
| Restrictions on public information on legal abortion services              | Yes |
| Counselling for contraceptive methods during post-abortion care            | _   |

| Service delivery requirements for providers or facilities |                  |  |
|---|------------------|--|
| Referral linkage to a higher-level facility               | _                |  |
| Availability of a specialist doctor                       | Yes              |  |
| Minimum number of beds                                    | _                |  |
| Other facility/provider requirements                      | Yes <sup>7</sup> |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | Yes <sup>8</sup>  | _   |

#### Notes:

- 1. The pregnancy results from sexual intercourse with a minor female or intercourse with a woman who is incapable of resisting, provided that the duration of the pregnancy does not exceed 19 weeks.

  2. Health care professionals are required to provide medical certificates attesting to the unavoidable risk to the life of the pregnant woman and of serious and permanent harm to her physical or mental health in order to proceed with an abortion on these grounds.

  3. With prescription only.

  4. For non-gynaecological indications only.

  5. With prescription only.

  6. Terminations of pregnancy must be carried out in a comprehensive care unit.

  7. Well organized blood bank, anaesthesia gas and oxygen, fully equipment with the necessary instruments, sufficient space, staffed by at least two midwives and necessary nursing staff.

  8. Provider type not specified.



### Grenada

| LAWS ON ABORTION                                 |   |   |
|--|---|---|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |
| To save life                                     | Yes                                     | _   |
| To preserve health                               | Yes                                     | _   |
| To preserve physical health                      | Yes                                     | _   |
| To preserve mental health                        | <del>-</del>                            | _   |
| In cases of intellectual or cognitive disability | No                                      | _   |
| In cases of incest                               | No                                      | _   |
| In cases of rape                                 | No                                      | _   |
| In cases of foetal impairment                    | No                                      | _   |
| For economic or social reason                    | No                                      | _   |
| On request                                       | No                                      | _   |
| For other reason(s)                              | _                                       | _   |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |   |  |   |  |
|--|---|--|---|--|
| Authorizations required                      |   | Consent required                             |   |  |
| Authorization of health care professional(s) | _ | Spousal consent                              | _ |  |
| Number of authorizations                     | _ | Parental consent for minors                  | _ |  |
| Cadre of health care professional            |   | Consent by another adult                     | _ |  |
| Doctor (specialty not specified)             | _ |  |   |  |
| Specialist doctor, including OB/GYN          | _ | Other requirements                           |   |  |
| Nurse  | _ | Gestational age limits                       | _ |  |
| Midwife/nurse-midwife                        | _ | Compulsory counselling                       | _ |  |
| Other providers                              | _ | Compulsory waiting period                    | _ |  |
| Authorized in specially licensed facilities  | _ | Length of waiting period (days)              | _ |  |
| Judicial authorization                       |   | Mandatory screening test                     |   |  |
| For minors                                   | _ | HIV test                                     | _ |  |
| In case of rape                              | _ | Other STI test(s)                            | _ |  |
| Police report in case of rape                | _ | Ultrasound viewing or listening to heartbeat | _ |  |

| Age when a woman can obtain an abortion without parental or judicial consent |   |  |   |  |
|--|---|--|---|--|
| Age limit for parental consent (years)                                       | _ | Age limit for judicial consent (years) | _ |  |
|  |   |  |   |  |
| Say salactive abortion   |   |  |   |  |

| Prohibition of sex-selective abortion | Restrictions on the methods to detect the sex of the foetus |  |  |  |
|---------------------------------------|---|--|--|--|
|                                       |   |  |  |  |
|                                       |   |  |  |  |

| ACCESS TO ABORTION SERVICES           |                                  |   |  |  |
|---------------------------------------|----------------------------------|---|--|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |  |
| Vacuum aspiration                     | _                                | <del>-</del>                              |  |  |
| Dilatation and evacuation             | <del>-</del>                     | <del>-</del>                              |  |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | <del>-</del>                              |  |  |
| Misoprostol only                      | _                                | <del>-</del>                              |  |  |
| Other method(s)                       | _                                | _   |  |  |



### Grenada

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |  |
| Misoprostol  | Yes <sup>2</sup>                                  | <del>-</del>   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | _                  |
| Specialized abortion care public facilities       | <del>-</del>     | _                  |
| Private health-care centres or clinics            | <del>-</del>     | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | _                  |
| Other settings or facilities                      | _                | _                  |

| Health care personnel allowed to provide legal abortions |   |  |
|--|---|--|
| Doctors (speciality not specified)                       | _ |  |
| Specialist doctor, including OB/GYN                      | _ |  |
| Nurse  | _ |  |
| Midwife/nurse-midwife                                    | _ |  |
| Other provider(s)  | _ |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Info | rmation and guidelines on abortion services                                |
|------|--|
|      | National guidelines on clinical and service delivery of induced abortion   |
|      | National guidelines on clinical and service delivery of post-abortion care |
|      | Restrictions on public information on legal abortion services              |
|      | Counselling for contraceptive methods during post-abortion care            |

| Service delivery requirements for providers or facilities |              |  |  |
|---|--------------|--|--|
| Referral linkage to a higher-level facility               | <del>-</del> |  |  |
| Availability of a specialist doctor                       | <del>-</del> |  |  |
| Minimum number of beds                                    | _            |  |  |
| Other facility/provider requirements                      | _            |  |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | _                 | _   |

#### Notes:

- Indicates that data are not available, not applicable or not specified.
- 1. Any act which is done, in good faith and without negligence, for the purposes of medical or surgical treatment of a pregnant woman is justifiable, although it causes or is intended to cause abortion or miscarriage, or premature delivery, or the death of the



Prohibition of sex-selective abortion

# Abortion laws and policies, 2017

### Guatemala

| LAWS ON ABORTION                                 |                                      |   |  |
|--|--------------------------------------|---|--|
| Legal grounds for induced abortion               | Currently permissible in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                  | _   |  |
| To preserve health                               | No                                   | _   |  |
| To preserve physical health                      | No                                   | <del>-</del>                                    |  |
| To preserve mental health                        | No                                   | <del>-</del>                                    |  |
| In cases of intellectual or cognitive disability | No                                   | <del>-</del>                                    |  |
| In cases of incest                               | No                                   | <del>-</del>                                    |  |
| In cases of rape                                 | No                                   | <del>-</del>                                    |  |
| In cases of foetal impairment                    | No                                   | <del>-</del>                                    |  |
| For economic or social reason                    | No                                   | <del>-</del>                                    |  |
| On request                                       | No                                   | <del>-</del>                                    |  |
| For other reason(s)                              | _                                    | _   |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |     |  |   |
|--|-----|--|---|
| Authorizations required                      |     | Consent required                             |   |
| Authorization of health care professional(s) | Yes | Spousal consent                              | _ |
| Number of authorizations                     | 2   | Parental consent for minors                  | _ |
| Cadre of health care professional            |     | Consent by another adult                     | _ |
| Doctor (specialty not specified)             | _   |  |   |
| Specialist doctor, including OB/GYN          | Yes | Other requirements                           |   |
| Nurse  | _   | Gestational age limits                       | _ |
| Midwife/nurse-midwife                        | _   | Compulsory counselling                       | _ |
| Other providers                              | _   | Compulsory waiting period                    | _ |
| Authorized in specially licensed facilities  | _   | Length of waiting period (days)              | _ |
| Judicial authorization                       |     | Mandatory screening test                     |   |
| For minors                                   | _   | HIV test                                     | _ |
| In case of rape                              | _   | Other STI test(s)                            | _ |
| Police report in case of rape                | _   | Ultrasound viewing or listening to heartbeat | _ |

| Age limit for parental consent (years) | <ul><li>Age limit for judicial consent (years)</li></ul> |
|--|--|
|  |  |
|  | Sex-selective abortion                                   |
| Prohibition of say calcative abortion  | Restrictions on the methods to detect the sex            |

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | Yes                              | 12  |  |
| Dilatation and evacuation             | Yes                              | 12-20                                     |  |
| Combination mifepristone- misoprostol | _                                | _   |  |
| Misoprostol only                      | Yes                              | 20  |  |
| Other method(s)                       | <del>-</del>                     | <del>-</del>                              |  |



### Guatemala

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |  |
| Misoprostol  | Yes <sup>2</sup>                                  | <del>-</del>   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | Yes              | Yes                |
| Specialized abortion care public facilities       | <del>-</del>     | <del>-</del>       |
| Private health-care centres or clinics            | <del>-</del>     | <del>-</del>       |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | <del>-</del>     | _                  |

| Health care personnel allowed to provide legal abortions |              |  |
|--|--------------|--|
| Doctors (speciality not specified)                       | _            |  |
| Specialist doctor, including OB/GYN                      | _            |  |
| Nurse  | <del>-</del> |  |
| Midwife/nurse-midwife                                    | _            |  |
| Other provider(s)  | _            |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | Yes |
| National guidelines on clinical and service delivery of post-abortion care | Yes |
| Restrictions on public information on legal abortion services              | _   |
| Counselling for contraceptive methods during<br>post-abortion care         | Yes |

| Service delivery requirements for providers or facilities |              |  |
|---|--------------|--|
| Referral linkage to a higher-level facility               | _            |  |
| Availability of a specialist doctor                       | <del>-</del> |  |
| Minimum number of beds                                    | _            |  |
| Other facility/provider requirements                      | _            |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to<br>alternative provider or facility |
|--|-------------------|--|
| Health-care facilities   | _                 | _  |
| Health-care providers  | _                 | _  |

#### Notes:

- Abortion is permitted for therapeutic purposes.
   For gynaecological indications.



Age limit for parental consent (years)

# Abortion laws and policies, 2017

### Guinea

| LAWS ON ABORTION                                 |   |   |  |
|--|---|---|--|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | <del>-</del>                                    |  |
| To preserve health                               | Yes                                     | <del>-</del>                                    |  |
| To preserve physical health                      | _                                       | <del>-</del>                                    |  |
| To preserve mental health                        | <del>-</del>                            | <del>-</del>                                    |  |
| In cases of intellectual or cognitive disability | No                                      | <del>-</del>                                    |  |
| In cases of incest                               | Yes                                     | <del>-</del>                                    |  |
| In cases of rape                                 | Yes                                     | <del>-</del>                                    |  |
| In cases of foetal impairment                    | Yes                                     | <del>-</del>                                    |  |
| For economic or social reason                    | No                                      | _   |  |
| On request                                       | No                                      | <del>-</del>                                    |  |
| For other reason(s)                              | Yes <sup>2</sup>                        | _   |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |     |  |   |  |
|--|-----|--|---|--|
| Authorizations required                      |     | Consent required                             |   |  |
| Authorization of health care professional(s) | Yes | Spousal consent                              | _ |  |
| Number of authorizations                     | 3   | Parental consent for minors                  | _ |  |
| Cadre of health care professional            |     | Consent by another adult                     | _ |  |
| Doctor (specialty not specified)             | Yes |  |   |  |
| Specialist doctor, including OB/GYN          | _   | Other requirements                           |   |  |
| Nurse  | _   | Gestational age limits                       | _ |  |
| Midwife/nurse-midwife                        | _   | Compulsory counselling                       | _ |  |
| Other providers                              | _   | Compulsory waiting period                    | _ |  |
| Authorized in specially licensed facilities  | _   | Length of waiting period (days)              | _ |  |
| Judicial authorization                       |     | Mandatory screening test                     |   |  |
| For minors                                   | _   | HIV test                                     | _ |  |
| In case of rape                              | _   | Other STI test(s)                            | _ |  |
| Police report in case of rape                | _   | Ultrasound viewing or listening to heartbeat | _ |  |

|                                       | Sex-selective abortion |   |
|---------------------------------------|------------------------|---|
| Prohibition of sex-selective abortion | _                      | Restrictions on the methods to detect the sex of the foetus |

Age limit for judicial consent (years)

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | <del>-</del>                     | _   |  |
| Dilatation and evacuation             | <del>-</del>                     | _   |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | _   |  |
| Misoprostol only                      | _                                | _   |  |
| Other method(s)                       | <del>-</del>                     | <del>-</del>                              |  |



### Guinea

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |  |
| Misoprostol  | No  | <del>-</del>   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | _                  |
| Specialized abortion care public facilities       | <del>-</del>     | _                  |
| Private health-care centres or clinics            | <del>-</del>     | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | _                  |
| Other settings or facilities                      | _                | _                  |

| Health care personnel allowed to provide legal abortions |     |  |
|--|-----|--|
| Doctors (speciality not specified)                       | Yes |  |
| Specialist doctor, including OB/GYN                      | _   |  |
| Nurse  | No  |  |
| Midwife/nurse-midwife                                    | No  |  |
| Other provider(s)  | _   |  |
|  |     |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |   |
|--|---|
| National guidelines on clinical and service delivery of induced abortion   | _ |
| National guidelines on clinical and service delivery of post-abortion care | _ |
| Restrictions on public information on legal abortion services              | _ |
| Counselling for contraceptive methods during<br>post-abortion care         | _ |

| Service delivery requirements for providers or facilities |              |  |
|---|--------------|--|
| Referral linkage to a higher-level facility               | _            |  |
| Availability of a specialist doctor                       | <del>-</del> |  |
| Minimum number of beds                                    | _            |  |
| Other facility/provider requirements                      | _            |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to<br>alternative provider or facility |
|--|-------------------|--|
| Health-care facilities   | _                 | _  |
| Health-care providers  | Yes <sup>4</sup>  | Yes  |

#### Notes:

- Abortion is permitted for therapeutic purposes.
   Termination performed on a girl under the age of 18.
   A panel of medical specialists, the number is not specified.
   Provider type not specified.



Age limit for parental consent (years)

## Abortion laws and policies, 2017

### Guinea-Bissau

| LAWS ON ABORTION                                 |   |   |  |
|--|---|---|--|
| Legal grounds for induced abortion               | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | <del>-</del>                                    |  |
| To preserve health                               | No                                      | _   |  |
| To preserve physical health                      | No                                      | <del>_</del>                                    |  |
| To preserve mental health                        | No                                      | _   |  |
| In cases of intellectual or cognitive disability | No                                      | <del>-</del>                                    |  |
| In cases of incest                               | No                                      | _   |  |
| In cases of rape                                 | No                                      | <del>-</del>                                    |  |
| In cases of foetal impairment                    | No                                      | <del>-</del>                                    |  |
| For economic or social reason                    | No                                      | <del>-</del>                                    |  |
| On request                                       | No                                      | <del>-</del>                                    |  |
| For other reason(s)                              | _                                       | _   |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |   |  |   |
|--|---|--|---|
| Authorizations required                      |   | Consent required                             |   |
| Authorization of health care professional(s) | _ | Spousal consent                              | _ |
| Number of authorizations                     | _ | Parental consent for minors                  | _ |
| Cadre of health care professional            |   | Consent by another adult                     | _ |
| Doctor (specialty not specified)             | _ |  |   |
| Specialist doctor, including OB/GYN          | _ | Other requirements                           |   |
| Nurse  | _ | Gestational age limits                       | _ |
| Midwife/nurse-midwife                        | _ | Compulsory counselling                       | _ |
| Other providers                              | _ | Compulsory waiting period                    | _ |
| Authorized in specially licensed facilities  | _ | Length of waiting period (days)              | _ |
| Judicial authorization                       |   | Mandatory screening test                     |   |
| For minors                                   | _ | HIV test                                     | _ |
| In case of rape                              | _ | Other STI test(s)                            | _ |
| Police report in case of rape                | _ | Ultrasound viewing or listening to heartbeat | _ |

|                                       | Sex-selective abortion |   |
|---------------------------------------|------------------------|---|
| Prohibition of sex-selective abortion | _                      | Restrictions on the methods to detect the sex of the foetus |

Age limit for judicial consent (years)

Age when a woman can obtain an abortion without parental or judicial consent

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | <del>-</del>                     | _   |  |
| Dilatation and evacuation             | <del>-</del>                     | _   |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | _   |  |
| Misoprostol only                      | _                                | _   |  |
| Other method(s)                       | <del>-</del>                     | <del>-</del>                              |  |



#### Guinea-Bissau

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |  |
| Misoprostol  | No  | <del>-</del>   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | _                  |
| Specialized abortion care public facilities       | <del>-</del>     | _                  |
| Private health-care centres or clinics            | <del>-</del>     | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | _                  |
| Other settings or facilities                      | _                | _                  |

| Health care personnel allowed to provide legal abortions |   |  |
|--|---|--|
| Doctors (speciality not specified)                       | _ |  |
| Specialist doctor, including OB/GYN                      | _ |  |
| Nurse  | _ |  |
| Midwife/nurse-midwife                                    | _ |  |
| Other provider(s)  | _ |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |   |
|--|---|
| National guidelines on clinical and service delivery of induced abortion   | _ |
| National guidelines on clinical and service delivery of post-abortion care | _ |
| Restrictions on public information on legal abortion services              | _ |
| Counselling for contraceptive methods during post-abortion care            | _ |

| Service delivery requirements for providers or facilities |              |  |
|---|--------------|--|
| Referral linkage to a higher-level facility               | _            |  |
| Availability of a specialist doctor                       | <del>-</del> |  |
| Minimum number of beds                                    | _            |  |
| Other facility/provider requirements                      | _            |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to<br>alternative provider or facility |
|--|-------------------|--|
| Health-care facilities   | _                 | _  |
| Health-care providers  | _                 | _  |

#### Notes:

- Indicates that data are not available, not applicable or not specified
- 1. Abortion is generally illegal in the country. However, under the general criminal law principles of necessity, it is allowed to be performed to save the life of the pregnant woman.



Age limit for parental consent (years)

## Abortion laws and policies, 2017

### Guyana

| LAWS ON ABORTION                                 |   |   |  |
|--|---|---|--|
| Legal grounds for induced abortion               | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | No limit  |  |
| To preserve health                               | Yes                                     | No limit  |  |
| To preserve physical health                      | Yes                                     | No limit  |  |
| To preserve mental health                        | Yes                                     | No limit  |  |
| In cases of intellectual or cognitive disability | Yes                                     | 16  |  |
| In cases of incest                               | Yes                                     | 16  |  |
| In cases of rape                                 | Yes                                     | 16  |  |
| In cases of foetal impairment                    | Yes                                     | 16  |  |
| For economic or social reason                    | _                                       | _   |  |
| On request                                       | Yes                                     | 8   |  |
| For other reason(s)                              | Yes <sup>2</sup>                        | _   |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |     |  |     |  |
|--|-----|--|-----|--|
| Authorizations required                      |     | Consent required                             |     |  |
| Authorization of health care professional(s) | Yes | Spousal consent                              | No  |  |
| Number of authorizations                     | 2 3 | Parental consent for minors                  | Yes |  |
| Cadre of health care professional            |     | Consent by another adult                     | _   |  |
| Doctor (specialty not specified)             | Yes |  |     |  |
| Specialist doctor, including OB/GYN          | _   | Other requirements                           |     |  |
| Nurse  | _   | Gestational age limits                       | Yes |  |
| Midwife/nurse-midwife                        | _   | Compulsory counselling                       | Yes |  |
| Other providers                              | _   | Compulsory waiting period                    | Yes |  |
| Authorized in specially licensed facilities  | Yes | Length of waiting period (days)              | 2 4 |  |
| Judicial authorization                       |     | Mandatory screening test                     |     |  |
| For minors                                   | No  | HIV test                                     | _   |  |
| In case of rape                              | _   | Other STI test(s)                            | _   |  |
| Police report in case of rape                | _   | Ultrasound viewing or listening to heartbeat | _   |  |

|                                       | Sex-selective abortion | n .   |
|---------------------------------------|------------------------|---|
| Prohibition of sex-selective abortion | _                      | Restrictions on the methods to detect the sex |

Age limit for judicial consent (years)

Age when a woman can obtain an abortion without parental or judicial consent

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | <del>-</del>                     | <del>-</del>                              |  |
| Dilatation and evacuation             | <del>-</del>                     | <del>-</del>                              |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | <del>-</del>                              |  |
| Misoprostol only                      | <del>-</del>                     | <del>-</del>                              |  |
| Other method(s)                       | Yes <sup>5</sup>                 | <del>-</del>                              |  |



### Guyana

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |  |
| Misoprostol  | No  | <del>-</del>   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | _                  |
| Specialized abortion care public facilities       | <del>-</del>     | _                  |
| Private health-care centres or clinics            | <del>-</del>     | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | Yes <sup>6</sup> | _                  |

| Health care personnel allowed to provide legal abortions |                  |  |
|--|------------------|--|
| Doctors (speciality not specified)                       | _                |  |
| Specialist doctor, including OB/GYN                      | _                |  |
| Nurse  | <del>-</del>     |  |
| Midwife/nurse-midwife                                    | _                |  |
| Other provider(s)  | Yes <sup>7</sup> |  |
|  |                  |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Yes |
|-----|
| Yes |
| _   |
| Yes |
|     |

| Service delivery requirements for providers or facilities |   |  |
|---|---|--|
| Referral linkage to a higher-level facility               | _ |  |
| Availability of a specialist doctor                       | _ |  |
| Minimum number of beds                                    | _ |  |
| Other facility/provider requirements                      | _ |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | Yes <sup>8</sup>  | _   |

#### Notes:

- Indicates that data are not available, not applicable or not specified.
- 1. Regarding pregnancies of more than eight weeks of gestation, the Medical Termination of Pregnancy Act stipulates that doctors must take into consideration the future and actual economic and social circumstances of the woman requesting an abortion.

  2. Where the pregnant woman is known to be HIV positive; or where there is clear evidence that the pregnancy resulted in spite of the use in good faith of a recognized contraceptive method by the pregnant woman or her partner.

  3. To terminate a pregnancy of no more than 16 weeks, the authorization of two medical practitioners is needed. For terminations after 16 weeks of gestation three medical practitioners need to deem the termination necessary.

  4. When the woman has made a request while being counselled.

  5. Menstrual regulation, intra-arminicit prostaglandin, suction curettage or hysterectomy.

  6. Approved institution (for terminations after 8 weeks of gestation).

  7. Medical practitioner for terminations for not more than 8 weeks duration). Authorised medical practitioner (for terminations of more than 8 weeks duration).

  8. Provider type not specified.



Age limit for parental consent (years)

# Abortion laws and policies, 2017 Haiti

| LAWS ON ABORTION                                 |   |   |  |
|--|---|---|--|
| Legal grounds for induced abortion               | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | <del>-</del>                                    |  |
| To preserve health                               | No                                      | _   |  |
| To preserve physical health                      | No                                      | <del>_</del>                                    |  |
| To preserve mental health                        | No                                      | _   |  |
| In cases of intellectual or cognitive disability | No                                      | <del>-</del>                                    |  |
| In cases of incest                               | No                                      | _   |  |
| In cases of rape                                 | No                                      | <del>-</del>                                    |  |
| In cases of foetal impairment                    | No                                      | <del>-</del>                                    |  |
| For economic or social reason                    | No                                      | <del>-</del>                                    |  |
| On request                                       | No                                      | <del>-</del>                                    |  |
| For other reason(s)                              | _                                       | _   |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| Authorizations required                      | Consent required                             |   |
|--|--|---|
| Authorization of health care professional(s) | <ul> <li>Spousal consent</li> </ul>          | _ |
| Number of authorizations                     | Parental consent for minors                  | _ |
| Cadre of health care professional            | Consent by another adult                     | _ |
| Doctor (specialty not specified)             | _  |   |
| Specialist doctor, including OB/GYN          | Other requirements                           |   |
| Nurse  | — Gestational age limits                     | _ |
| Midwife/nurse-midwife                        | — Compulsory counselling                     | _ |
| Other providers                              | Compulsory waiting period                    | _ |
| Authorized in specially licensed facilities  | Length of waiting period (days)              | _ |
| Judicial authorization                       | Mandatory screening test                     |   |
| For minors                                   | — HIV test                                   | _ |
| In case of rape                              | - Other STI test(s)                          | _ |
| Police report in case of rape                | Ultrasound viewing or listening to heartbeat | _ |

|                                       | Sex-selective abortion |   |
|---------------------------------------|------------------------|---|
| Prohibition of sex-selective abortion | _                      | Restrictions on the methods to detect the sex of the foetus |

Age limit for judicial consent (years)

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | <del>-</del>                     | _   |  |
| Dilatation and evacuation             | <del>-</del>                     | _   |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | _   |  |
| Misoprostol only                      | _                                | _   |  |
| Other method(s)                       | <del>-</del>                     | <del>-</del>                              |  |



#### Haiti

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |  |
| Misoprostol  | Yes <sup>2</sup>                                  | Yes <sup>3</sup>   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | _                | Yes                |
| Secondary (district-level) health-care facilities | _                | Yes                |
| Specialized abortion care public facilities       | _                | Yes                |
| Private health-care centres or clinics            | _                | Yes                |
| NGO health-care centres or clinics                | _                | Yes                |
| Other settings or facilities                      | _                | _                  |

| Health care personnel allowed to provide legal abortions |   |  |
|--|---|--|
| Doctors (speciality not specified)                       | _ |  |
| Specialist doctor, including OB/GYN                      | _ |  |
| Nurse  | _ |  |
| Midwife/nurse-midwife                                    | _ |  |
| Other provider(s)  | _ |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                             |     |
|---|-----|
| National guidelines on clinical and service<br>delivery of induced abortion | _   |
| National guidelines on clinical and service delivery of post-abortion care  | Yes |
| Restrictions on public information on legal abortion services               | _   |
| Counselling for contraceptive methods during<br>post-abortion care          | Yes |

| Service delivery requirements for providers or facilities |              |  |
|---|--------------|--|
| Referral linkage to a higher-level facility               | _            |  |
| Availability of a specialist doctor                       | <del>-</del> |  |
| Minimum number of beds                                    | _            |  |
| Other facility/provider requirements                      | _            |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to<br>alternative provider or facility |
|--|-------------------|--|
| Health-care facilities   | _                 | _  |
| Health-care providers  | _                 | _  |

Notes:

- Abortion is generally illegal in the country. However, under the general criminal law principles of necessity, it is allowed to be performed to save the life of the pregnant woman.
   For gynaecological indications.
   With prescription only.



Prohibition of sex-selective abortion

## Abortion laws and policies, 2017

### **Holy See**

| gal grounds for induced abortion                 | Currently permissible in the country | Gestational limit for each legal ground (weeks) |
|--|--------------------------------------|---|
| To save life                                     | No                                   | _   |
| To preserve health                               | No                                   | _   |
| To preserve physical health                      | No                                   | _   |
| To preserve mental health                        | No                                   | _   |
| In cases of intellectual or cognitive disability | No                                   | _   |
| In cases of incest                               | No                                   | _   |
| In cases of rape                                 | No                                   | _   |
| In cases of foetal impairment                    | No                                   | _   |
| For economic or social reason                    | No                                   | _   |
| On request                                       | No                                   | _   |
| For other reason(s)                              | _                                    | _   |

| Persons who can be criminally charged for an illegal abortion |   |          |   |                                    |   |  |
|---|---|----------|---|------------------------------------|---|--|
| Woman   | _ | Provider | _ | Other person who assists the woman | _ |  |

| REQUIREMENTS FOR INDUCED ABORTION            |  |              |  |
|--|--|--------------|--|
| Authorizations required                      | Consent required                             |              |  |
| Authorization of health care professional(s) | — Spousal consent                            | <del>-</del> |  |
| Number of authorizations                     | Parental consent for minors                  | _            |  |
| Cadre of health care professional            | Consent by another adult                     | _            |  |
| Doctor (specialty not specified)             | _  |              |  |
| Specialist doctor, including OB/GYN          | Other requirements                           |              |  |
| Nurse  | — Gestational age limits                     | <del>-</del> |  |
| Midwife/nurse-midwife                        | — Compulsory counselling                     | _            |  |
| Other providers                              | Compulsory waiting period                    | _            |  |
| Authorized in specially licensed facilities  | Length of waiting period (days)              | _            |  |
| Judicial authorization                       | Mandatory screening test                     |              |  |
| For minors                                   | — HIV test                                   | _            |  |
| In case of rape                              | — Other STI test(s)                          | _            |  |
| Police report in case of rape                | Ultrasound viewing or listening to heartbeat | _            |  |

| Age limit for parental consent (years) | <ul><li>Age limit for judicial consent (years)</li></ul> |
|--|--|
|  |  |
|  | Sex-selective abortion                                   |
| Prohibition of say coloctive abortion  | Restrictions on the methods to detect the sex            |

Age when a woman can obtain an abortion without parental or judicial consent

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | <del>-</del>                     | _   |  |
| Dilatation and evacuation             | <del>-</del>                     | _   |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | _   |  |
| Misoprostol only                      | _                                | _   |  |
| Other method(s)                       | <del>-</del>                     | <del>-</del>                              |  |



### **Holy See**

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | _   | _  |  |
| Misoprostol  | _   | _  |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | _                | <del>-</del>       |
| Specialized abortion care public facilities       | <del>-</del>     | <del>-</del>       |
| Private health-care centres or clinics            | <del>-</del>     | <del>-</del>       |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | _                | _                  |

| Health care personnel allowed to provide legal abortions |   |  |
|--|---|--|
| Doctors (speciality not specified)                       | _ |  |
| Specialist doctor, including OB/GYN                      | _ |  |
| Nurse  | _ |  |
| Midwife/nurse-midwife                                    | _ |  |
| Other provider(s)  | _ |  |
|  |   |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |   |
|--|---|
| National guidelines on clinical and service delivery of induced abortion   | _ |
| National guidelines on clinical and service delivery of post-abortion care | _ |
| Restrictions on public information on legal abortion services              | _ |
| Counselling for contraceptive methods during post-abortion care            | _ |

| Service delivery requirements for providers or facilities |              |  |
|---|--------------|--|
| Referral linkage to a higher-level facility               | <del>-</del> |  |
| Availability of a specialist doctor                       | <del>-</del> |  |
| Minimum number of beds                                    | _            |  |
| Other facility/provider requirements                      | _            |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | _                 | _   |

Indicates that data are not available, not applicable or not specified.



### Honduras

| LAWS ON ABORTION                                 |   |   |
|--|---|---|
| Legal grounds for induced abortion               | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |
| To save life                                     | Yes                                     | _   |
| To preserve health                               | Yes                                     | <del>-</del>                                    |
| To preserve physical health                      | <del>-</del>                            | _   |
| To preserve mental health                        | <del>-</del>                            | _   |
| In cases of intellectual or cognitive disability | No                                      | _   |
| In cases of incest                               | No                                      | _   |
| In cases of rape                                 | Yes                                     | _   |
| In cases of foetal impairment                    | Yes                                     | _   |
| For economic or social reason                    | No                                      | _   |
| On request                                       | No                                      | _   |
| For other reason(s)                              | _                                       | _   |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |     |  |     |
|--|-----|--|-----|
| Authorizations required                      |     | Consent required                             |     |
| Authorization of health care professional(s) | Yes | Spousal consent                              | Yes |
| Number of authorizations                     | 2   | Parental consent for minors                  | _   |
| Cadre of health care professional            |     | Consent by another adult                     | _   |
| Doctor (specialty not specified)             | Yes |  |     |
| Specialist doctor, including OB/GYN          | _   | Other requirements                           |     |
| Nurse  | _   | Gestational age limits                       | _   |
| Midwife/nurse-midwife                        | _   | Compulsory counselling                       | _   |
| Other providers                              | _   | Compulsory waiting period                    | _   |
| Authorized in specially licensed facilities  | _   | Length of waiting period (days)              | _   |
| Judicial authorization                       |     | Mandatory screening test                     |     |
| For minors                                   | _   | HIV test                                     | _   |
| In case of rape                              | _   | Other STI test(s)                            | _   |
| Police report in case of rape                | _   | Ultrasound viewing or listening to heartbeat | _   |

| Age when a woman can obtain an abortion without parental or judicial consent      |  |   |  |
|---|--|---|--|
| Age limit for parental consent (years) — Age limit for judicial consent (years) — |  | _ |  |
|   |  |   |  |
| Say-selective abortion  |  |   |  |

|                                       | 00.00.00.00.00 |   |
|---------------------------------------|----------------|---|
| Prohibition of sex-selective abortion | _              | Restrictions on the methods to detect the sex of the foetus |
|                                       |                |   |
| 100500 TO 1005TON 0507/050            |                |   |

| ACCESS TO ABORTION SERVICES           |                                  |   |
|---------------------------------------|----------------------------------|---|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |
| Vacuum aspiration                     | _                                | _   |
| Dilatation and evacuation             | <del>-</del>                     | <del>-</del>                              |
| Combination mifepristone- misoprostol | <del>-</del>                     | <del>-</del>                              |
| Misoprostol only                      | <del>-</del>                     | _   |
| Other method(s)                       | _                                | _   |



#### Honduras

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |
|--|---|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |
| Misoprostol  | Yes <sup>2</sup>                                  | No   |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | _                | Yes                |
| Secondary (district-level) health-care facilities | _                | Yes                |
| Specialized abortion care public facilities       | _                | <del>-</del>       |
| Private health-care centres or clinics            | _                | <del>-</del>       |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | _                | _                  |

| Health care personnel allowed to provide legal abortions |   |
|--|---|
| Doctors (speciality not specified)                       | _ |
| Specialist doctor, including OB/GYN                      | _ |
| Nurse  | _ |
| Midwife/nurse-midwife                                    | _ |
| Other provider(s)  | _ |
|  |   |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | Yes |
| National guidelines on clinical and service delivery of post-abortion care | Yes |
| Restrictions on public information on legal abortion services              | _   |
| Counselling for contraceptive methods during<br>post-abortion care         | Yes |

| Service delivery requirements for providers or facilities |              |  |
|---|--------------|--|
| Referral linkage to a higher-level facility               | <del>-</del> |  |
| Availability of a specialist doctor                       | <del>-</del> |  |
| Minimum number of beds                                    | _            |  |
| Other facility/provider requirements                      | _            |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | _                 | _   |

#### Notes:

Indicates that data are not available, not applicable or not specified.

<sup>1.</sup> The Penal Code makes no exceptions to the general prohibition on the performance of abortions. However, the Norms for Maternal and Neonatal Care allows abortion for therapeutic purposes to preserve the woman's health or save the woman's life. According to the Code abortion can be performed when the product has congenital malformations that are incompatible with life and when the pregnancy has been the result of a non-consensual relationship or a non-conse



### Hungary

| LAWS ON ABORTION                                 |   |   |
|--|---|---|
| Legal grounds for induced abortion               | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |
| To save life                                     | Yes                                     | _   |
| To preserve health                               | Yes                                     | 18  |
| To preserve physical health                      | Yes                                     | 18  |
| To preserve mental health                        | Yes                                     | 18  |
| In cases of intellectual or cognitive disability | <del>-</del>                            | _   |
| In cases of incest                               | Yes                                     | 18  |
| In cases of rape                                 | Yes                                     | 18  |
| In cases of foetal impairment                    | Yes                                     | 24  |
| For economic or social reason                    | Yes                                     | 12  |
| On request                                       | Yes                                     | 12  |
| For other reason(s)                              | _                                       | _   |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

|  | REQUIREMENTS FOR INDUCED ABORTION |                       |
|--|-----------------------------------|-----------------------|
| Authorizations required                      |                                   | Consent required      |
| Authorization of health care professional(s) | Yes                               | Spousal consent       |
| Number of authorizations                     | 2                                 | Parental consent for  |
| Cadre of health care professional            |                                   | Consent by another    |
| Doctor (specialty not specified)             | _                                 |                       |
| Specialist doctor, including OB/GYN          | Yes                               | Other requirements    |
| Nurse  | _                                 | Gestational age limit |
| Midwife/nurse-midwife                        | _                                 | Compulsory counsel    |
| Other providers                              | _                                 | Compulsory waiting    |
| Authorized in specially licensed facilities  | Yes                               | Length of waitin      |
| Judicial authorization                       |                                   | Mandatory screening   |
| For minors                                   | _                                 | HIV test              |
| In case of rape                              | _                                 | Other STI test(s      |
| Police report in case of rape                | _                                 | Ultrasound viewing of |
|  |                                   |                       |

| Parental consent for minors     | _            |
|---------------------------------|--------------|
| Consent by another adult        | _            |
|                                 |              |
| Other requirements              |              |
| Gestational age limits          | Yes          |
| Compulsory counselling          | Yes          |
| Compulsory waiting period       | Yes          |
| Length of waiting period (days) | <b>3</b> 3   |
| Mandatory screening test        |              |
| HIV test                        | <del>-</del> |
| Other STI test(s)               | <del>_</del> |

Ultrasound viewing or listening to heartbeat

| Age when a woman can obtain an abortion without parental or judicial consent |  |   |
|--|--|---|
| Age limit for parental consent (years)                                       | <ul> <li>Age limit for judicial consent (years)</li> </ul> | _ |

|                                       | Sex-selective abortion |   |
|---------------------------------------|------------------------|---|
| Prohibition of sex-selective abortion | Yes                    | Restrictions on the methods to detect the sex of the foetus |

| ACCESS TO ABORTION SERVICES           |                                  |   |
|---------------------------------------|----------------------------------|---|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |
| Vacuum aspiration                     | <del>-</del>                     | <del>-</del>                              |
| Dilatation and evacuation             | <del>-</del>                     | _   |
| Combination mifepristone- misoprostol | <del>-</del>                     | _   |
| Misoprostol only                      | <del>-</del>                     | _   |
| Other method(s)                       | <del>-</del>                     | _   |



### Hungary

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |
|--|---|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |
| Mifepristone and/or combination mifepristone-misoprostol | Yes   | _  |
| Misoprostol  | Yes <sup>4</sup>                                  | _  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | _                | <del>-</del>       |
| Secondary (district-level) health-care facilities | Yes              | <del>-</del>       |
| Specialized abortion care public facilities       | _                | <del>-</del>       |
| Private health-care centres or clinics            | _                | <del>-</del>       |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | _                | _                  |

| Health care personnel allowed to provide legal abortions |     |  |
|--|-----|--|
| Doctors (speciality not specified)                       | No  |  |
| Specialist doctor, including OB/GYN                      | Yes |  |
| Nurse  | No  |  |
| Midwife/nurse-midwife                                    | No  |  |
| Other provider(s)  | _   |  |
|  |     |  |

| Types of insurance or other coverage for abortion                  |     |
|--|-----|
| Public health coverage for induced abortion for all women          | Yes |
| Public health coverage for induced abortion for<br>poor women only | No  |
| Public health coverage for abortion complications                  | _   |
| Private health coverage for induced abortion                       | _   |
| Other type of coverage   | _   |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | Yes |
| National guidelines on clinical and service delivery of post-abortion care | _   |
| Restrictions on public information on legal abortion services              | Yes |
| Counselling for contraceptive methods during<br>post-abortion care         | _   |

| Service delivery requirements for providers or facilities |                  |  |
|---|------------------|--|
| Referral linkage to a higher-level facility               | _                |  |
| Availability of a specialist doctor                       | Yes              |  |
| Minimum number of beds                                    | _                |  |
| Other facility/provider requirements                      | Yes <sup>5</sup> |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | Yes <sup>6</sup>  | _   |

#### Notes:

- Indicates that data are not available, not applicable or not specified.

- Abortion on request is permitted when the pregnant woman is in a severe crisis situation.
   Depends on indication.
   From the date of the first counselling.
   Indications not specified.
   A range of specific



#### Iceland

| LAWS ON ABORTION                                 |                                      |   |  |
|--|--------------------------------------|---|--|
| egal grounds for induced abortion                | Currently permissible in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                  | No limit  |  |
| To preserve health                               | Yes                                  | No limit  |  |
| To preserve physical health                      | Yes                                  | No limit  |  |
| To preserve mental health                        | Yes                                  | No limit  |  |
| In cases of intellectual or cognitive disability | Yes                                  | <del>-</del>                                    |  |
| In cases of incest                               | <del>-</del>                         | <del>-</del>                                    |  |
| In cases of rape                                 | Yes                                  | _   |  |
| In cases of foetal impairment                    | Yes                                  | No limit  |  |
| For economic or social reason                    | Yes                                  | _   |  |
| On request                                       | Yes                                  | 22  |  |
| For other reason(s)                              | _                                    | _   |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |     |  |     |
|--|-----|--|-----|
| Authorizations required                      |     | Consent required                             |     |
| Authorization of health care professional(s) | Yes | Spousal consent                              | _   |
| Number of authorizations                     | 2 1 | Parental consent for minors                  | No  |
| Cadre of health care professional            |     | Consent by another adult                     | Yes |
| Doctor (specialty not specified)             | Yes |  |     |
| Specialist doctor, including OB/GYN          | _   | Other requirements                           |     |
| Nurse  | _   | Gestational age limits                       | Yes |
| Midwife/nurse-midwife                        | _   | Compulsory counselling                       | Yes |
| Other providers                              | _   | Compulsory waiting period                    | _   |
| Authorized in specially licensed facilities  | Yes | Length of waiting period (days)              | _   |
| Judicial authorization                       |     | Mandatory screening test                     |     |
| For minors                                   | _   | HIV test                                     | _   |
| In case of rape                              | _   | Other STI test(s)                            | _   |
| Police report in case of rape                | _   | Ultrasound viewing or listening to heartbeat | _   |

| Ago when a woman out obtain an abortion without parental or judicial content |  |  |  |
|--|--|--|--|
| Age limit for parental consent (years)                                       | Age limit for judicial consent (years) |  |  |
|  |  |  |  |
|  |  |  |  |

|                                       | Sex-selective abortion                                      |
|---------------------------------------|---|
| Prohibition of sex-selective abortion | Restrictions on the methods to detect the sex of the foetus |

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | _                                | _   |  |
| Dilatation and evacuation             | <del>-</del>                     | _   |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | _   |  |
| Misoprostol only                      | _                                | _   |  |
| Other method(s)                       | <del>-</del>                     | _   |  |



#### Iceland

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | Yes   | No   |  |
| Misoprostol  | Yes <sup>2</sup>                                  | Yes <sup>3</sup>   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | _                | _                  |
| Secondary (district-level) health-care facilities | Yes              | Yes                |
| Specialized abortion care public facilities       | Yes              | _                  |
| Private health-care centres or clinics            | _                | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | _                  |
| Other settings or facilities                      | _                | <del>-</del>       |

| Health care personnel allowed to provide legal abortions |     |  |
|--|-----|--|
| Doctors (speciality not specified)                       | Yes |  |
| Specialist doctor, including OB/GYN                      | Yes |  |
| Nurse  | _   |  |
| Midwife/nurse-midwife                                    | _   |  |
| Other provider(s)  | _   |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | Yes |
| National guidelines on clinical and service delivery of post-abortion care | Yes |
| Restrictions on public information on legal abortion services              | _   |
| Counselling for contraceptive methods during<br>post-abortion care         | Yes |

| Service delivery requirements for providers or facilities |     |  |
|---|-----|--|
| Referral linkage to a higher-level facility               | _   |  |
| Availability of a specialist doctor                       | Yes |  |
| Minimum number of beds                                    | _   |  |
| Other facility/provider requirements                      | _   |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | _                 | _   |

#### Notes:

- Indicates that data are not available, not applicable or not specified.
- Authorisation by two doctors required for terminations after 22 weeks.
   For non-gynaecological indications only.
   With prescription only.



Prohibition of sex-selective abortion

## Abortion laws and policies, 2017

#### India

| LAWS ON ABORTION                                 |                                      |   |  |
|--|--------------------------------------|---|--|
| egal grounds for induced abortion                | Currently permissible in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                  | 20  |  |
| To preserve health                               | Yes                                  | 20  |  |
| To preserve physical health                      | Yes                                  | 20  |  |
| To preserve mental health                        | Yes                                  | 20  |  |
| In cases of intellectual or cognitive disability | Yes                                  | 20  |  |
| In cases of incest                               | _                                    | _   |  |
| In cases of rape                                 | Yes                                  | 20  |  |
| In cases of foetal impairment                    | Yes                                  | 20  |  |
| For economic or social reason                    | Yes                                  | 20  |  |
| On request                                       | <del>-</del>                         | _   |  |
| For other reason(s)                              | _                                    | _   |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |     |  |     |  |
|--|-----|--|-----|--|
| Authorizations required                      |     | Consent required                             |     |  |
| Authorization of health care professional(s) | Yes | Spousal consent                              | No  |  |
| Number of authorizations                     | 1 1 | Parental consent for minors                  | Yes |  |
| Cadre of health care professional            |     | Consent by another adult                     | Yes |  |
| Doctor (specialty not specified)             | Yes |  |     |  |
| Specialist doctor, including OB/GYN          | Yes | Other requirements                           |     |  |
| Nurse  | _   | Gestational age limits                       | Yes |  |
| Midwife/nurse-midwife                        | _   | Compulsory counselling                       | No  |  |
| Other providers                              | _   | Compulsory waiting period                    | No  |  |
| Authorized in specially licensed facilities  | Yes | Length of waiting period (days)              | _   |  |
| Judicial authorization                       |     | Mandatory screening test                     |     |  |
| For minors                                   | No  | HIV test                                     | _   |  |
| In case of rape                              | No  | Other STI test(s)                            | _   |  |
| Police report in case of rape                | No  | Ultrasound viewing or listening to heartbeat | _   |  |

|  | Sex-selective | abortion                               |   |
|--|---------------|--|---|
|  |               |  |   |
| Age limit for parental consent (years) | 18            | Age limit for judicial consent (years) | _ |

Restrictions on the methods to detect the sex

Yes

Age when a woman can obtain an abortion without parental or judicial consent

Yes

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | Yes                              | 12  |  |
| Dilatation and evacuation             | Yes                              | 20  |  |
| Combination mifepristone- misoprostol | Yes                              | 7   |  |
| Misoprostol only                      | -                                | <del>-</del>                              |  |
| Other method(s)                       | Yes <sup>2</sup>                 | 20  |  |



#### India

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | Yes   | _  |  |
| Misoprostol  | Yes <sup>3</sup>                                  | <del>-</del>   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | _                  |
| Secondary (district-level) health-care facilities | Yes              | _                  |
| Specialized abortion care public facilities       | _                | _                  |
| Private health-care centres or clinics            | _                | _                  |
| NGO health-care centres or clinics                | _                | _                  |
| Other settings or facilities                      | Yes <sup>4</sup> | _                  |

| Health care personnel allowed to provide legal abortions |     |  |
|--|-----|--|
| Doctors (speciality not specified)                       | Yes |  |
| Specialist doctor, including OB/GYN                      | Yes |  |
| Nurse  | _   |  |
| Midwife/nurse-midwife                                    | _   |  |
| Other provider(s)  | _   |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | Yes |
| National guidelines on clinical and service delivery of post-abortion care | Yes |
| Restrictions on public information on legal abortion services              | _   |
| Counselling for contraceptive methods during post-abortion care            | Yes |

| Service delivery requirements for providers or facilities |                  |  |
|---|------------------|--|
| Referral linkage to a higher-level facility               | _                |  |
| Availability of a specialist doctor                       | Yes              |  |
| Minimum number of beds                                    | _                |  |
| Other facility/provider requirements                      | Yes <sup>5</sup> |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | _                 | _   |

#### Notes:

- Indicates that data are not available, not applicable or not specified.

- One or two depending on gestational age.
   Extra-amniotic instillation.
   For gynaecological indications.
   A place approved for the purpose by Government or a District Level Committee constituted by that Government with the Chief Medical officer or District. Health officer as the Chairperson of the said Committee.
   Various requirements (infrastructure, essential equipment, drugs and supplies) relating to particular abortion methods.



Age limit for parental consent (years)

## Abortion laws and policies, 2017

### Indonesia

| LAWS ON ABORTION                                 |   |   |  |
|--|---|---|--|
| Legal grounds for induced abortion               | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | No limit  |  |
| To preserve health                               | No                                      | _   |  |
| To preserve physical health                      | No                                      | _   |  |
| To preserve mental health                        | No                                      | _   |  |
| In cases of intellectual or cognitive disability | No                                      | _   |  |
| In cases of incest                               | No                                      | _   |  |
| In cases of rape                                 | Yes                                     | 6   |  |
| In cases of foetal impairment                    | Yes                                     | No limit  |  |
| For economic or social reason                    | No                                      | _   |  |
| On request                                       | No                                      | <del>-</del>                                    |  |
| For other reason(s)                              | _                                       | _   |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |       |  |     |
|--|-------|--|-----|
| Authorizations required                      |       | Consent required                             |     |
| Authorization of health care professional(s) | Yes   | Spousal consent                              | Yes |
| Number of authorizations                     | 1     | Parental consent for minors                  | _   |
| Cadre of health care professional            |       | Consent by another adult                     | _   |
| Doctor (specialty not specified)             | _     |  |     |
| Specialist doctor, including OB/GYN          | Yes   | Other requirements                           |     |
| Nurse  | _     | Gestational age limits                       | Yes |
| Midwife/nurse-midwife                        | _     | Compulsory counselling                       | Yes |
| Other providers                              | Yes 1 | Compulsory waiting period                    | _   |
| Authorized in specially licensed facilities  | Yes   | Length of waiting period (days)              | _   |
| Judicial authorization                       |       | Mandatory screening test                     |     |
| For minors                                   | _     | HIV test                                     | _   |
| In case of rape                              | _     | Other STI test(s)                            | _   |
| Police report in case of rape                | _     | Ultrasound viewing or listening to heartbeat | _   |

|                                       | Sex-selective abortion | 1   |
|---------------------------------------|------------------------|---|
| Prohibition of sex-selective abortion | _                      | Restrictions on the methods to detect the sex |

Age limit for judicial consent (years)

Age when a woman can obtain an abortion without parental or judicial consent

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | <del>-</del>                     | <del>-</del>                              |  |
| Dilatation and evacuation             | <del>-</del>                     | <del>-</del>                              |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | <del>-</del>                              |  |
| Misoprostol only                      | <del>-</del>                     | <del>-</del>                              |  |
| Other method(s)                       | <del>-</del>                     | <del>-</del>                              |  |



#### Indonesia

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |  |
| Misoprostol  | No  | <del>-</del>   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | _                  |
| Specialized abortion care public facilities       | <del>-</del>     | _                  |
| Private health-care centres or clinics            | <del>-</del>     | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | _                  |
| Other settings or facilities                      | _                | _                  |

| Health care personnel allowed to provide legal abortions |                  |  |
|--|------------------|--|
| Doctors (speciality not specified)                       | _                |  |
| Specialist doctor, including OB/GYN                      | _                |  |
| Nurse  | <del>-</del>     |  |
| Midwife/nurse-midwife                                    | _                |  |
| Other provider(s)  | Yes <sup>2</sup> |  |
|  |                  |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |   |
|--|---|
| National guidelines on clinical and service delivery of induced abortion   | _ |
| National guidelines on clinical and service delivery of post-abortion care | _ |
| Restrictions on public information on legal abortion services              | _ |
| Counselling for contraceptive methods during<br>post-abortion care         | _ |

| Service delivery requirements for providers or facilities |              |  |
|---|--------------|--|
| Referral linkage to a higher-level facility               | _            |  |
| Availability of a specialist doctor                       | <del>-</del> |  |
| Minimum number of beds                                    | _            |  |
| Other facility/provider requirements                      | _            |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to<br>alternative provider or facility |
|--|-------------------|--|
| Health-care facilities   | _                 | _  |
| Health-care providers  | _                 | _  |

#### Notes:

- Indicates that data are not available, not applicable or not specified.
- Health personnel who have expertise and authority and have certificate stipulated by the minister.
   Health personnel, specialty not specified.



Iran (Islamic Republic of)

| LAWS ON ABORTION                                 |                                      |   |  |
|--|--------------------------------------|---|--|
| egal grounds for induced abortion                | Currently permissible in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                  | 16  |  |
| To preserve health                               | Yes                                  | _   |  |
| To preserve physical health                      | Yes                                  | <del>-</del>                                    |  |
| To preserve mental health                        | <del>-</del>                         | <del>-</del>                                    |  |
| In cases of intellectual or cognitive disability | No                                   | _   |  |
| In cases of incest                               | <del>-</del>                         | _   |  |
| In cases of rape                                 | No                                   | _   |  |
| In cases of foetal impairment                    | Yes                                  | 16  |  |
| For economic or social reason                    | No                                   | _   |  |
| On request                                       | No                                   | _   |  |
| For other reason(s)                              | _                                    | _   |  |

| Persons who can be criminally charged for an illegal abortion |   |          |     |                                    |     |  |
|---|---|----------|-----|------------------------------------|-----|--|
| Woman   | _ | Provider | Yes | Other person who assists the woman | Yes |  |

| REQUIREMENTS FOR INDUCED ABORTION            |     |  |     |  |
|--|-----|--|-----|--|
| Authorizations required                      |     | Consent required                             |     |  |
| Authorization of health care professional(s) | Yes | Spousal consent                              | Yes |  |
| Number of authorizations                     | 3   | Parental consent for minors                  | Yes |  |
| Cadre of health care professional            |     | Consent by another adult                     | _   |  |
| Doctor (specialty not specified)             | _   |  |     |  |
| Specialist doctor, including OB/GYN          | Yes | Other requirements                           |     |  |
| Nurse  | _   | Gestational age limits                       | Yes |  |
| Midwife/nurse-midwife                        | _   | Compulsory counselling                       | No  |  |
| Other providers                              | _   | Compulsory waiting period                    | No  |  |
| Authorized in specially licensed facilities  | Yes | Length of waiting period (days)              | _   |  |
| Judicial authorization                       |     | Mandatory screening test                     |     |  |
| For minors                                   | Yes | HIV test                                     | _   |  |
| In case of rape                              | _   | Other STI test(s)                            | _   |  |
| Police report in case of rape                | _   | Ultrasound viewing or listening to heartbeat | _   |  |

| Ago Whom a Woman out obtain an abortion without paronal or judicial comociti |  |  |  |
|--|--|--|--|
| Age limit for parental consent (years)                                       | Age limit for judicial consent (years) |  |  |
|  |  |  |  |
|  |  |  |  |

|                                       | Sex-selective abortion |   |
|---------------------------------------|------------------------|---|
| Prohibition of sex-selective abortion | No                     | Restrictions on the methods to detect the sex of the foetus |

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | _                                | <del>-</del>                              |  |
| Dilatation and evacuation             | <del>-</del>                     | <del>-</del>                              |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | <del>-</del>                              |  |
| Misoprostol only                      | <del>-</del>                     | _   |  |
| Other method(s)                       | <del>-</del>                     | <del>-</del>                              |  |



### Iran (Islamic Republic of)

| ACCESS TO ABORTION SERVICES (continued)  |                  |                  |  |
|--|------------------|------------------|--|
| Drugs for inducing abortion Included in the official list Allowed to be sold or of authorized drugs distributed by pharmacies or drug stor |                  |                  |  |
| Mifepristone and/or combination mifepristone-misoprostol   | No               | _                |  |
| Misoprostol  | Yes <sup>2</sup> | Yes <sup>3</sup> |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | _                  |
| Specialized abortion care public facilities       | <del>-</del>     | _                  |
| Private health-care centres or clinics            | <del>-</del>     | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | _                  |
| Other settings or facilities                      | _                | _                  |

| Health care personnel allowed to provide legal abortions |     |  |
|--|-----|--|
| Doctors (speciality not specified)                       | Yes |  |
| Specialist doctor, including OB/GYN                      | Yes |  |
| Nurse  | _   |  |
| Midwife/nurse-midwife                                    | _   |  |
| Other provider(s)  | _   |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                             |              |
|---|--------------|
| National guidelines on clinical and service<br>delivery of induced abortion | Yes          |
| National guidelines on clinical and service delivery of post-abortion care  | <del>-</del> |
| Restrictions on public information on legal abortion services               | _            |
| Counselling for contraceptive methods during<br>post-abortion care          | _            |

| Service delivery requirements for providers or facilities |   |  |
|---|---|--|
| Referral linkage to a higher-level facility               | _ |  |
| Availability of a specialist doctor                       | _ |  |
| Minimum number of beds                                    | _ |  |
| Other facility/provider requirements                      | _ |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | _                 | _   |

#### Notes:

- Abortion is permitted for therapeutic purposes.
   For gynaecological indications.
   With prescription only.



### Iraq

| LAWS ON ABORTION                                 |   |   |  |
|--|---|---|--|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | _   |  |
| To preserve health                               | No                                      | _   |  |
| To preserve physical health                      | No                                      | _   |  |
| To preserve mental health                        | No                                      | _   |  |
| In cases of intellectual or cognitive disability | No                                      | _   |  |
| In cases of incest                               | No                                      | <del>-</del>                                    |  |
| In cases of rape                                 | No                                      | _   |  |
| In cases of foetal impairment                    | Yes                                     | _   |  |
| For economic or social reason                    | No                                      | _   |  |
| On request                                       | No                                      | _   |  |
| For other reason(s)                              | _                                       | _   |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |     |  |              |  |
|--|-----|--|--------------|--|
| Authorizations required                      |     | Consent required                             |              |  |
| Authorization of health care professional(s) | Yes | Spousal consent                              | _            |  |
| Number of authorizations                     | 3   | Parental consent for minors                  | _            |  |
| Cadre of health care professional            |     | Consent by another adult                     | _            |  |
| Doctor (specialty not specified)             | Yes |  |              |  |
| Specialist doctor, including OB/GYN          | _   | Other requirements                           |              |  |
| Nurse  | _   | Gestational age limits                       | <del>_</del> |  |
| Midwife/nurse-midwife                        | _   | Compulsory counselling                       | _            |  |
| Other providers                              | _   | Compulsory waiting period                    | _            |  |
| Authorized in specially licensed facilities  | _   | Length of waiting period (days)              | _            |  |
| Judicial authorization                       |     | Mandatory screening test                     |              |  |
| For minors                                   | _   | HIV test                                     | _            |  |
| In case of rape                              | _   | Other STI test(s)                            | _            |  |
| Police report in case of rape                | _   | Ultrasound viewing or listening to heartbeat | _            |  |

| Age when a woman can obtain an abortion without parental or judicial consent |  |   |  |
|--|--|---|--|
| Age limit for parental consent (years)                                       | <ul> <li>Age limit for judicial consent (years)</li> </ul> | _ |  |
|  |  |   |  |
|  |  |   |  |

|                                       | Sex-selective abortion                                  |              |
|---------------------------------------|---|--------------|
| Prohibition of sex-selective abortion | Restrictions on the methods to detect the of the foetus | sex <u> </u> |
|                                       |   |              |

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | _                                | <del>-</del>                              |  |
| Dilatation and evacuation             | <del>-</del>                     | <del>-</del>                              |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | <del>-</del>                              |  |
| Misoprostol only                      | _                                | <del>-</del>                              |  |
| Other method(s)                       | _                                | _   |  |



### Iraq

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |  |
|--|---|--|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |  |
| Mifepristone and/or combination mifepristone-misoprostol | Yes   | Yes <sup>2</sup>   |  |  |
| Misoprostol  | Yes <sup>3</sup>                                  | Yes <sup>4</sup>   |  |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | _                  |
| Specialized abortion care public facilities       | <del>-</del>     | _                  |
| Private health-care centres or clinics            | <del>-</del>     | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | _                  |
| Other settings or facilities                      | _                | _                  |

| Doctors (speciality not specified)  | _ |
|-------------------------------------|---|
| Specialist doctor, including OB/GYN | _ |
| Nurse                               | _ |
| Midwife/nurse-midwife               | _ |
| Other provider(s)                   | _ |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services  National guidelines on clinical and service delivery of induced abortion  National guidelines on clinical and service delivery of pools abortion corp. |  |   |
|---|--|---|
| delivery of induced abortion  National guidelines on clinical and service   | Information and guidelines on abortion services                            |   |
|   |  | _ |
| delivery of post-abortion care  | National guidelines on clinical and service delivery of post-abortion care | _ |
| Restrictions on public information on legal abortion services   | 1  | _ |
| Counselling for contraceptive methods during post-abortion care   |  | _ |

| Service delivery requirements for providers or facilities |   |  |
|---|---|--|
| Referral linkage to a higher-level facility               | _ |  |
| Availability of a specialist doctor                       | _ |  |
| Minimum number of beds                                    | _ |  |
| Other facility/provider requirements                      | _ |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | Yes <sup>5</sup>  | _   |

#### Notes:

- Abortion is permitted for therapeutic purposes.
   With prescription only.
   For gynaecological indications.
   With prescription only.
   Public-sector providers only.



Age limit for parental consent (years)

## Abortion laws and policies, 2017

#### Ireland

| LAWS ON ABORTION                                 |   |   |  |  |
|--|---|---|--|--|
| Legal grounds for induced abortion               | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |  |
| To save life                                     | Yes                                     | _   |  |  |
| To preserve health                               | Yes                                     | _   |  |  |
| To preserve physical health                      | <del>-</del>                            | <del>_</del>                                    |  |  |
| To preserve mental health                        | <del>-</del>                            | _   |  |  |
| In cases of intellectual or cognitive disability | _                                       | _   |  |  |
| In cases of incest                               | _                                       | _   |  |  |
| In cases of rape                                 | <del>-</del>                            | _   |  |  |
| In cases of foetal impairment                    | Yes                                     | <del>-</del>                                    |  |  |
| For economic or social reason                    | _                                       | _   |  |  |
| On request                                       | Yes                                     | 12  |  |  |
| For other reason(s)                              | _                                       | _   |  |  |

| Persons who can be criminally charged for an illegal abortion |   |          |     |                                    |     |  |
|---|---|----------|-----|------------------------------------|-----|--|
| Woman   | _ | Provider | Yes | Other person who assists the woman | Yes |  |

| Authorizations required                      |                  | Consent required                             |                |
|--|------------------|--|----------------|
| Authorization of health care professional(s) | Yes              | Spousal consent                              | _              |
| Number of authorizations                     | 2 1              | Parental consent for minors                  | Yes            |
| Cadre of health care professional            |                  | Consent by another adult                     | Yes            |
| Doctor (specialty not specified)             | Yes              |  |                |
| Specialist doctor, including OB/GYN          | Yes              | Other requirements                           |                |
| Nurse  | _                | Gestational age limits                       | Yes            |
| Midwife/nurse-midwife                        | _                | Compulsory counselling                       | _              |
| Other providers                              | Yes <sup>2</sup> | Compulsory waiting period                    | Yes            |
| Authorized in specially licensed facilities  | Yes              | Length of waiting period (days)              | 3 <sup>3</sup> |
| Judicial authorization                       |                  | Mandatory screening test                     |                |
| For minors                                   | Yes              | HIV test                                     | _              |
| In case of rape                              | _                | Other STI test(s)                            | _              |
| Police report in case of rape                | _                | Ultrasound viewing or listening to heartbeat | _              |

|                                       | Sex-selective abortion |   |
|---------------------------------------|------------------------|---|
| Prohibition of sex-selective abortion | _                      | Restrictions on the methods to detect the sex of the foetus |

Age limit for judicial consent (years)

Age when a woman can obtain an abortion without parental or judicial consent

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | _                                | _   |  |
| Dilatation and evacuation             | <del>-</del>                     | _   |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | _   |  |
| Misoprostol only                      | _                                | _   |  |
| Other method(s)                       | <del>-</del>                     | _   |  |



#### Ireland

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | <del>-</del>                                      | _  |  |
| Misoprostol  | Yes <sup>4</sup>                                  | No   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | Yes              | Yes                |
| Secondary (district-level) health-care facilities | Yes              | <del>-</del>       |
| Specialized abortion care public facilities       | _                | <del>-</del>       |
| Private health-care centres or clinics            | _                | <del>-</del>       |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | Yes              | <del>-</del>       |

| Health care personnel allowed to provide legal abortions |     |
|--|-----|
| Doctors (speciality not specified)                       | _   |
| Specialist doctor, including OB/GYN                      | Yes |
| Nurse  | _   |
| Midwife/nurse-midwife                                    | _   |
| Other provider(s)  | Yes |
|  |     |

| Types of insurance or other coverage for abortion                  |     |
|--|-----|
| Public health coverage for induced abortion for all women          | Yes |
| Public health coverage for induced abortion for<br>poor women only | _   |
| Public health coverage for abortion complications                  | _   |
| Private health coverage for induced abortion                       | _   |
| Other type of coverage   | _   |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | Yes |
| National guidelines on clinical and service delivery of post-abortion care | Yes |
| Restrictions on public information on legal abortion services              | Yes |
| Counselling for contraceptive methods during<br>post-abortion care         | Yes |

| Service delivery requirements for providers or facilities |   |  |
|---|---|--|
| Referral linkage to a higher-level facility               | _ |  |
| Availability of a specialist doctor                       | _ |  |
| Minimum number of beds                                    | _ |  |
| Other facility/provider requirements                      | _ |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | Yes <sup>5</sup>  | Yes   |

#### Notes:

- Indicates that data are not available, not applicable or not specified.
- 1. One or two depending on indication. Two medical practitioners are required where there is a serious risk to the life or health of a pregnant woman, or there is a condition affecting the foetus that is likely to lead to the death of the foetus either before, or
- One or two depending on indication. Two medical practitioners are required where there is a serious risk to the life or health of a pregnant woman, or there is a condition within 28 days of birth.
   An appropriate medical practitioner.
   For abortions on request in the first 12 weeks of pregnancy, a period of not less than 3 days must have elapsed from the date of certification by the medical practitioner.
   For gynaecological indications.
   Provider type not specified.



Age limit for parental consent (years)

## Abortion laws and policies, 2017

### Israel

| LAWS ON ABORTION                                 |   |   |  |
|--|---|---|--|
| Legal grounds for induced abortion               | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | _   |  |
| To preserve health                               | Yes                                     | _   |  |
| To preserve physical health                      | Yes                                     | _   |  |
| To preserve mental health                        | Yes                                     | _   |  |
| In cases of intellectual or cognitive disability | No                                      | _   |  |
| In cases of incest                               | Yes                                     | _   |  |
| In cases of rape                                 | Yes                                     | _   |  |
| In cases of foetal impairment                    | Yes                                     | _   |  |
| For economic or social reason                    | No                                      | _   |  |
| On request                                       | No                                      | _   |  |
| For other reason(s)                              | Yes <sup>1</sup>                        | _   |  |

| Persons who can be criminally charged for an illegal abortion |            |     |                                    |   |
|---|------------|-----|------------------------------------|---|
| Woman -   | — Provider | Yes | Other person who assists the woman | _ |

| uthorizations required                       |                  | Consent required                             |    |
|--|------------------|--|----|
| Authorization of health care professional(s) | Yes              | Spousal consent                              | _  |
| Number of authorizations                     | 3 <sup>2</sup>   | Parental consent for minors                  | No |
| Cadre of health care professional            |                  | Consent by another adult                     | _  |
| Doctor (specialty not specified)             | _                |  |    |
| Specialist doctor, including OB/GYN          | Yes              | Other requirements                           |    |
| Nurse  | _                | Gestational age limits                       | _  |
| Midwife/nurse-midwife                        | _                | Compulsory counselling                       | _  |
| Other providers                              | Yes <sup>3</sup> | Compulsory waiting period                    | _  |
| Authorized in specially licensed facilities  | Yes              | Length of waiting period (days)              | _  |
| Judicial authorization                       |                  | Mandatory screening test                     |    |
| For minors                                   | _                | HIV test                                     | _  |
| In case of rape                              | _                | Other STI test(s)                            | _  |
| Police report in case of rape                | _                | Ultrasound viewing or listening to heartbeat | _  |

|                                       | Sex-selective abortion |   |
|---------------------------------------|------------------------|---|
| Prohibition of sex-selective abortion | _                      | Restrictions on the methods to detect the sex of the foetus |

Age limit for judicial consent (years)

Age when a woman can obtain an abortion without parental or judicial consent

| ACCESS TO ABORTION SERVICES           |                                  |   |
|---------------------------------------|----------------------------------|---|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |
| Vacuum aspiration                     | _                                | <del>-</del>                              |
| Dilatation and evacuation             | _                                | <del>-</del>                              |
| Combination mifepristone- misoprostol | Yes                              | 7   |
| Misoprostol only                      | _                                | <del>-</del>                              |
| Other method(s)                       | _                                | <del>-</del>                              |



#### Israel

| ACCESS TO ABORTION SERVICES (continued)   |                  |              |  |
|---|------------------|--------------|--|
| Drugs for inducing abortion Included in the official list Allowed to be sold o of authorized drugs distributed by pharmacies or d |                  |              |  |
| Mifepristone and/or combination mifepristone-misoprostol  | Yes              | <del>-</del> |  |
| Misoprostol   | Yes <sup>4</sup> | <del>-</del> |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | No               | <del>-</del>       |
| Secondary (district-level) health-care facilities | No               | <del>-</del>       |
| Specialized abortion care public facilities       | No               | <del>-</del>       |
| Private health-care centres or clinics            | No               | <del>-</del>       |
| NGO health-care centres or clinics                | No               | <del>-</del>       |
| Other settings or facilities                      | Yes <sup>5</sup> | <del>-</del>       |

| Health care personnel allowed to provide legal abortions |     |  |
|--|-----|--|
| Doctors (speciality not specified)                       | No  |  |
| Specialist doctor, including OB/GYN                      | Yes |  |
| Nurse  | No  |  |
| Midwife/nurse-midwife                                    | No  |  |
| Other provider(s)  | _   |  |
|  |     |  |

| Types of insurance or other coverage for abortion                  |                  |
|--|------------------|
| Public health coverage for induced abortion for all women          | No               |
| Public health coverage for induced abortion for<br>poor women only | No               |
| Public health coverage for abortion complications                  | _                |
| Private health coverage for induced abortion                       | _                |
| Other type of coverage   | Yes <sup>6</sup> |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | _   |
| National guidelines on clinical and service delivery of post-abortion care | _   |
| Restrictions on public information on legal abortion services              | _   |
| Counselling for contraceptive methods during<br>post-abortion care         | Yes |

| Service delivery requirements for providers or facilities |   |
|---|---|
| Referral linkage to a higher-level facility               | _ |
| Availability of a specialist doctor                       | _ |
| Minimum number of beds                                    | _ |
| Other facility/provider requirements                      | _ |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | Yes <sup>7</sup>  | -   |

#### Notes:

- 1. The woman is under the age of marriage (17 years old) or over the age of 40. The pregnancy is the result of extramarital relations.

  2. The committee should be composed of: (a) a qualified physician who holds the title of specialist in obstetrics and gynaecology; (b) an additional qualified physician who practices one of the following specializations: obstetrics and gynaecology, internal medicine, psychiatry, family medicine, public health; (c) a person registered as a social worker. At least one of the committee's members should be a woman. When gestational age is greater than 24 weeks, the decision will be made by a separate late-term Abortion Committee.

- Abortion Committee.
  3. A social worker.
  4. For gynaecological indications.
  5. Authorized hospitals and clinics.
  6. A termination of pregnancy that is performed in accordance with the law and with the approval of the Pregnancy Termination Committee is included in the Health Basket and is funded by the HMOs for all women up to 33 years of age or in the following cases: (a) a pregnancy that arises from relations that are forbidden by criminal law as the result of rape or incest, (b) a situation in which the foetus is liable to have a physical or mental abnormalities, and (c) a situation in which continuation of the pregnancy is liable to mental abnormalities and continuation of the pregnancy is liable to mental abnormalities.
  7. Provider type not specified.



### Italy

| LAWS ON ABORTION  |     |              |  |
|---|-----|--------------|--|
| Legal grounds for induced abortion  Currently permissible Gestational limit fo in the country each legal ground (we |     |              |  |
| To save life  | Yes | No limit     |  |
| To preserve health  | Yes | _            |  |
| To preserve physical health   | Yes | _            |  |
| To preserve mental health   | Yes | _            |  |
| In cases of intellectual or cognitive disability  | _   | _            |  |
| In cases of incest  | _   | <del>-</del> |  |
| In cases of rape  | _   | _            |  |
| In cases of foetal impairment   | Yes | 13           |  |
| For economic or social reason   | Yes | 13           |  |
| On request  | Yes | 13           |  |
| For other reason(s)   | _   | _            |  |

|       |     | Persons who can be criminal | ly charged for ar | n illegal abortion                 |     |  |
|-------|-----|-----------------------------|-------------------|------------------------------------|-----|--|
| Woman | Yes | Provider                    | Yes               | Other person who assists the woman | Yes |  |

|  | REQUIREMENTS FO |                       |
|--|-----------------|-----------------------|
| Authorizations required                      |                 | Consent required      |
| Authorization of health care professional(s) | _               | Spousal consent       |
| Number of authorizations                     | _               | Parental consent for  |
| Cadre of health care professional            |                 | Consent by another    |
| Doctor (specialty not specified)             | _               |                       |
| Specialist doctor, including OB/GYN          | _               | Other requirements    |
| Nurse  | _               | Gestational age limit |
| Midwife/nurse-midwife                        | _               | Compulsory counsel    |
| Other providers                              | _               | Compulsory waiting    |
| Authorized in specially licensed facilities  | Yes             | Length of waitin      |
| Judicial authorization                       |                 | Mandatory screening   |
| For minors                                   | Yes             | HIV test              |
| In case of rape                              | _               | Other STI test(s      |
| Police report in case of rape                | _               | Ultrasound viewing of |
|  |                 |                       |

| Parental consent for minors Yes              |     |
|--|-----|
| Consent by another adult                     | Yes |
|  |     |
| Other requirements                           |     |
| Gestational age limits                       | Yes |
| Compulsory counselling                       | _   |
| Compulsory waiting period                    | Yes |
| Length of waiting period (days)              | 7 2 |
| Mandatory screening test                     |     |
| HIV test                                     | _   |
| Other STI test(s)                            | _   |
| Ultrasound viewing or listening to heartbeat | _   |

| Age when a wom                         | nan can obtain an abortion | n without parental or judicial consent |    |  |
|--|----------------------------|--|----|--|
| Age limit for parental consent (years) | 18                         | Age limit for judicial consent (years) | 18 |  |

|                                       | Sex-selective abortion                                      |
|---------------------------------------|---|
| Prohibition of sex-selective abortion | Restrictions on the methods to detect the sex of the foetus |

| ACCESS TO ABORTION SERVICES  |              |   |  |  |  |
|--|--------------|---|--|--|--|
| Methods for induced abortions  Currently allowed in the country  each method (weeks) |              |   |  |  |  |
| Vacuum aspiration  | <del>-</del> | _ |  |  |  |
| Dilatation and evacuation  | _            | _ |  |  |  |
| Combination mifepristone- misoprostol  | Yes          | 7 |  |  |  |
| Misoprostol only   | _            | _ |  |  |  |
| Other method(s)  | _            | _ |  |  |  |



### Italy

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |  |
|--|---|--|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |  |
| Mifepristone and/or combination mifepristone-misoprostol | Yes   | <del>-</del>   |  |  |
| Misoprostol  | Yes <sup>3</sup>                                  | Yes <sup>4</sup>   |  |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | Yes              | _                  |
| Secondary (district-level) health-care facilities | Yes              | _                  |
| Specialized abortion care public facilities       | _                | _                  |
| Private health-care centres or clinics            | Yes              | _                  |
| NGO health-care centres or clinics                | _                | _                  |
| Other settings or facilities                      | _                | <del>-</del>       |

| Health care personnel allowed to provide legal abortions |     |  |
|--|-----|--|
| Doctors (speciality not specified)                       | _   |  |
| Specialist doctor, including OB/GYN                      | Yes |  |
| Nurse  | _   |  |
| Midwife/nurse-midwife                                    | _   |  |
| Other provider(s)  | _   |  |

| Types of insurance or other coverage for abortion                  |     |
|--|-----|
| Public health coverage for induced abortion for all women          | Yes |
| Public health coverage for induced abortion for<br>poor women only | No  |
| Public health coverage for abortion complications                  | _   |
| Private health coverage for induced abortion                       | _   |
| Other type of coverage   | _   |

| Information and guidelines on abortion services                            |   |
|--|---|
| National guidelines on clinical and service delivery of induced abortion   | _ |
| National guidelines on clinical and service delivery of post-abortion care | _ |
| Restrictions on public information on legal abortion services              | _ |
| Counselling for contraceptive methods during<br>post-abortion care         | _ |

| Service delivery requirements for providers or facilities |     |  |
|---|-----|--|
| Referral linkage to a higher-level facility               | Yes |  |
| Availability of a specialist doctor                       | Yes |  |
| Minimum number of beds                                    | _   |  |
| Other facility/provider requirements                      | _   |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | Yes <sup>5</sup>  | _   |

#### Notes:

- In cases where an abortion is sought due to the woman's family circumstances or the circumstances in which conception occurred, the gestational limit is 90 days.
   From the date of the first visit.
   For non-gynaecological indications only.
   With prescription only.
   Provider type not specified.



### Jamaica

| LAWS ON ABORTION                                 |                                      |   |  |
|--|--------------------------------------|---|--|
| Legal grounds for induced abortion               | Currently permissible in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                  | <del>-</del>                                    |  |
| To preserve health                               | _                                    | _   |  |
| To preserve physical health                      | <del>-</del>                         | <del>-</del>                                    |  |
| To preserve mental health                        | <del>-</del>                         | <del>-</del>                                    |  |
| In cases of intellectual or cognitive disability | No                                   | <del>-</del>                                    |  |
| In cases of incest                               | No                                   | _   |  |
| In cases of rape                                 | No                                   | <del>-</del>                                    |  |
| In cases of foetal impairment                    | No                                   | _   |  |
| For economic or social reason                    | No                                   | _   |  |
| On request                                       | No                                   | _   |  |
| For other reason(s)                              | _                                    | _   |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |  |
|---|-----|----------|-----|------------------------------------|-----|--|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |  |

| REQUIREMENTS FOR INDUCED ABORTION            |  |                  |  |  |
|--|--|------------------|--|--|
| Authorizations required                      | Consent required                             | Consent required |  |  |
| Authorization of health care professional(s) | Spousal consent                              | Yes              |  |  |
| Number of authorizations                     | Parental consent for minors                  | _                |  |  |
| Cadre of health care professional            | Consent by another adult                     | _                |  |  |
| Doctor (specialty not specified)             | _  |                  |  |  |
| Specialist doctor, including OB/GYN          | Other requirements                           |                  |  |  |
| Nurse  | Gestational age limits                       | <del>_</del>     |  |  |
| Midwife/nurse-midwife                        | Compulsory counselling                       | _                |  |  |
| Other providers                              | Compulsory waiting period                    | _                |  |  |
| Authorized in specially licensed facilities  | Length of waiting period (days)              | _                |  |  |
| Judicial authorization                       | Mandatory screening test                     |                  |  |  |
| For minors                                   | HIV test                                     | _                |  |  |
| In case of rape                              | Other STI test(s)                            | _                |  |  |
| Police report in case of rape                | Ultrasound viewing or listening to heartbeat | _                |  |  |

| Age when a woman can obtain an abortion without parental or judicial consent |  |          |  |
|--|--|----------|--|
| _  | Age limit for judicial consent (years) | _        |  |
|  |  |          |  |
|  |  | <u> </u> |  |

|                                       | Sex-selective abortion                                      |
|---------------------------------------|---|
| Prohibition of sex-selective abortion | Restrictions on the methods to detect the sex of the foetus |

| ACCESS TO ABORTION SERVICES           |                                  |   |  |  |
|---------------------------------------|----------------------------------|---|--|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |  |
| Vacuum aspiration                     | _                                | _   |  |  |
| Dilatation and evacuation             | <del>-</del>                     | _   |  |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | _   |  |  |
| Misoprostol only                      | _                                | _   |  |  |
| Other method(s)                       | <del>-</del>                     | _   |  |  |



#### Jamaica

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |  |
|--|---|--|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |  |  |
| Misoprostol  | Yes <sup>2</sup>                                  | No   |  |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | _                  |
| Specialized abortion care public facilities       | <del>-</del>     | _                  |
| Private health-care centres or clinics            | <del>-</del>     | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | _                  |
| Other settings or facilities                      | _                | _                  |

| Health care personnel allowed to provide legal abortions |   |
|--|---|
| Doctors (speciality not specified)                       | _ |
| Specialist doctor, including OB/GYN                      | _ |
| Nurse  | _ |
| Midwife/nurse-midwife                                    | _ |
| Other provider(s)  | _ |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |   |
|--|---|
| National guidelines on clinical and service delivery of induced abortion   | _ |
| National guidelines on clinical and service delivery of post-abortion care | _ |
| Restrictions on public information on legal abortion services              | _ |
| Counselling for contraceptive methods during<br>post-abortion care         | _ |

| Service delivery requirements for providers or facilities |   |  |  |
|---|---|--|--|
| Referral linkage to a higher-level facility               | _ |  |  |
| Availability of a specialist doctor                       | _ |  |  |
| Minimum number of beds                                    | _ |  |  |
| Other facility/provider requirements                      | _ |  |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | _                 | _   |

#### Notes:

- 1. Abortion is generally illegal in the country. However, under the general criminal law principles of necessity, it is allowed to be performed to save the life of the pregnant woman. Jamaica also follows the holding of the 1938 English Rex v. Bourne decision in determining whether an abortion can be performed for health reasons.

  2. For gynaecological indications.



### Japan

| LAWS ON ABORTION   |              |    |  |  |  |  |
|--|--------------|----|--|--|--|--|
| Legal grounds for induced abortion  Currently permissible Gestational limit for in the country each legal ground (weeks) |              |    |  |  |  |  |
| To save life   | Yes          | 22 |  |  |  |  |
| To preserve health   | Yes          | 22 |  |  |  |  |
| To preserve physical health  | Yes          | 22 |  |  |  |  |
| To preserve mental health  | <del>-</del> | _  |  |  |  |  |
| In cases of intellectual or cognitive disability   | No           | _  |  |  |  |  |
| In cases of incest   | No           | _  |  |  |  |  |
| In cases of rape   | Yes          | 22 |  |  |  |  |
| In cases of foetal impairment  | No           | _  |  |  |  |  |
| For economic or social reason  | Yes          | 22 |  |  |  |  |
| On request   | No           | _  |  |  |  |  |
| For other reason(s)  | _            | _  |  |  |  |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FO                              |     | R INDUCED ABORTION    |
|--|-----|-----------------------|
| Authorizations required                      |     | Consent required      |
| Authorization of health care professional(s) | Yes | Spousal consent       |
| Number of authorizations                     | _   | Parental consent for  |
| Cadre of health care professional            |     | Consent by another    |
| Doctor (specialty not specified)             | _   |                       |
| Specialist doctor, including OB/GYN          | _   | Other requirements    |
| Nurse  | _   | Gestational age limit |
| Midwife/nurse-midwife                        | _   | Compulsory counsel    |
| Other providers                              | _   | Compulsory waiting    |
| Authorized in specially licensed facilities  | No  | Length of waitin      |
| Judicial authorization                       |     | Mandatory screening   |
| For minors                                   | No  | HIV test              |
| In case of rape                              | _   | Other STI test(s      |
| Police report in case of rape                | _   | Ultrasound viewing of |

| Parental consent for minors                  | No           |  |
|--|--------------|--|
| Consent by another adult                     | <del>_</del> |  |
|  |              |  |
| Other requirements                           |              |  |
| Gestational age limits                       | Yes          |  |
| Compulsory counselling                       | No           |  |
| Compulsory waiting period                    | No           |  |
| Length of waiting period (days)              | _            |  |
| Mandatory screening test                     |              |  |
| HIV test                                     | _            |  |
| Other STI test(s)                            | _            |  |
| Ultrasound viewing or listening to heartbeat | _            |  |

Yes

| Age when a woman can obtain an abortion without parental or judicial consent |  |   |
|--|--|---|
| Age limit for parental consent (years)                                       | <ul> <li>Age limit for judicial consent (years)</li> </ul> | _ |

|                                       | Sex-selective abortion |   |
|---------------------------------------|------------------------|---|
| Prohibition of sex-selective abortion | No                     | Restrictions on the methods to detect the sex of the foetus |

| ACCESS TO ABORTION SERVICES           |                                  |   |
|---------------------------------------|----------------------------------|---|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |
| Vacuum aspiration                     | _                                | <del>-</del>                              |
| Dilatation and evacuation             | <del>-</del>                     | <del>-</del>                              |
| Combination mifepristone- misoprostol | <del>-</del>                     | <del>-</del>                              |
| Misoprostol only                      | <del>-</del>                     | _   |
| Other method(s)                       | <del>-</del>                     | <del>-</del>                              |



### Japan

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |
|--|---|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |
| Misoprostol  | Yes 1   | Yes <sup>2</sup>   |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | <del>-</del>       |
| Specialized abortion care public facilities       | _                | _                  |
| Private health-care centres or clinics            | <del>-</del>     | <del>-</del>       |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | Yes <sup>3</sup> | <del>-</del>       |

| Health care personnel allowed to provide legal abortions |     |
|--|-----|
| Doctors (speciality not specified)                       | No  |
| Specialist doctor, including OB/GYN                      | Yes |
| Nurse  | No  |
| Midwife/nurse-midwife                                    | No  |
| Other provider(s)  | _   |
|  |     |

| Types of insurance or other coverage for abortion                  |     |
|--|-----|
| Public health coverage for induced abortion for all women          | Yes |
| Public health coverage for induced abortion for<br>poor women only | _   |
| Public health coverage for abortion complications                  | Yes |
| Private health coverage for induced abortion                       | _   |
| Other type of coverage   | _   |

| Information and guidelines on abortion services                            |    |
|--|----|
| National guidelines on clinical and service delivery of induced abortion   | _  |
| National guidelines on clinical and service delivery of post-abortion care | _  |
| Restrictions on public information on legal abortion services              | No |
| Counselling for contraceptive methods during post-abortion care            | _  |

| Service delivery requirements for providers or facilities |                  |
|---|------------------|
| Referral linkage to a higher-level facility               | _                |
| Availability of a specialist doctor                       | <del>-</del>     |
| Minimum number of beds                                    | _                |
| Other facility/provider requirements                      | Yes <sup>4</sup> |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to<br>alternative provider or facility |
|--|-------------------|--|
| Health-care facilities   | _                 | _  |
| Health-care providers  | _                 | _  |

#### Notes:

- Indicates that data are not available, not applicable or not specified.

- For non-gynaecological indications only.
   With prescription only.
   Only designated OB/GVN doctors may induce abortion at medical institutions designated by prefectural medical associations.
   Only at medical institutions designated by prefectural medical associations.



Age limit for parental consent (years)

## Abortion laws and policies, 2017

#### Jordan

| LAWS ON ABORTION                                 |   |   |
|--|---|---|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |
| To save life                                     | Yes                                     | _   |
| To preserve health                               | Yes                                     | _   |
| To preserve physical health                      | <del>-</del>                            | <del>_</del>                                    |
| To preserve mental health                        | <del>-</del>                            | <del>-</del>                                    |
| In cases of intellectual or cognitive disability | No                                      | _   |
| In cases of incest                               | No                                      | _   |
| In cases of rape                                 | No                                      | <del>-</del>                                    |
| In cases of foetal impairment                    | No                                      | _   |
| For economic or social reason                    | No                                      | _   |
| On request                                       | No                                      | _   |
| For other reason(s)                              | _                                       | _   |

|       | Persons who can be criminally charged for an illegal abortion |          |     |                                    |     |
|-------|---|----------|-----|------------------------------------|-----|
| Woman | Yes   | Provider | Yes | Other person who assists the woman | Yes |

| Authorizations required                      |       | Consent required                             |   |
|--|-------|--|---|
| Authorization of health care professional(s) | Yes   | Spousal consent                              | _ |
| Number of authorizations                     | 2     | Parental consent for minors                  | _ |
| Cadre of health care professional            |       | Consent by another adult                     | _ |
| Doctor (specialty not specified)             | _     |  |   |
| Specialist doctor, including OB/GYN          | Yes   | Other requirements                           |   |
| Nurse  | _     | Gestational age limits                       | _ |
| Midwife/nurse-midwife                        | _     | Compulsory counselling                       | _ |
| Other providers                              | Yes 1 | Compulsory waiting period                    | _ |
| Authorized in specially licensed facilities  | _     | Length of waiting period (days)              | _ |
| Judicial authorization                       |       | Mandatory screening test                     |   |
| For minors                                   | _     | HIV test                                     | _ |
| In case of rape                              | _     | Other STI test(s)                            | _ |
| Police report in case of rape                | _     | Ultrasound viewing or listening to heartbeat | _ |

Age when a woman can obtain an abortion without parental or judicial consent

|                                       | Sex-selective abortion                                      |  |
|---------------------------------------|---|--|
| Prohibition of sex-selective abortion | Restrictions on the methods to detect the sex of the foetus |  |

Age limit for judicial consent (years)

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | <del>-</del>                     | _   |  |
| Dilatation and evacuation             | <del>-</del>                     | _   |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | _   |  |
| Misoprostol only                      | _                                | _   |  |
| Other method(s)                       | <del>-</del>                     | <del>-</del>                              |  |



#### Jordan

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |
|--|---|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |
| Misoprostol  | Yes <sup>2</sup>                                  | No   |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | _                  |
| Secondary (district-level) health-care facilities | Yes              | _                  |
| Specialized abortion care public facilities       | _                | _                  |
| Private health-care centres or clinics            | _                | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | Yes <sup>3</sup> | _                  |

| Health care personnel allowed to provide legal abortions |     |  |
|--|-----|--|
| Doctors (speciality not specified)                       | _   |  |
| Specialist doctor, including OB/GYN                      | Yes |  |
| Nurse  | _   |  |
| Midwife/nurse-midwife                                    | _   |  |
| Other provider(s)  | _   |  |
|  |     |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Info | ormation and guidelines on abortion services                               |
|------|--|
|      | National guidelines on clinical and service delivery of induced abortion   |
|      | National guidelines on clinical and service delivery of post-abortion care |
|      | Restrictions on public information on legalabortion services               |
|      | Counselling for contraceptive methods during post-abortion care            |

| Service delivery requirements for providers or facilities |     |  |
|---|-----|--|
| Referral linkage to a higher-level facility               | _   |  |
| Availability of a specialist doctor                       | Yes |  |
| Minimum number of beds                                    | _   |  |
| Other facility/provider requirements                      | _   |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | <del>_</del>      | _   |
| Health-care providers  | _                 | <del>_</del>  |

#### Notes:

- Hospital director.
   For gynaecological indications.
   Abortion is permissible in a specialized clinic or maternity hospital if it is necessary to avert a danger to the life or health of a pregnant woman.



### Kazakhstan

| LAWS ON ABORTION                                 |   |   |  |
|--|---|---|--|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | No limit  |  |
| To preserve health                               | Yes                                     | No limit  |  |
| To preserve physical health                      | _                                       | _   |  |
| To preserve mental health                        | <del>-</del>                            | _   |  |
| In cases of intellectual or cognitive disability | Yes                                     | _   |  |
| In cases of incest                               | <del>-</del>                            | _   |  |
| In cases of rape                                 | Yes                                     | <del>-</del>                                    |  |
| In cases of foetal impairment                    | <del>-</del>                            | _   |  |
| For economic or social reason                    | Yes                                     | 22  |  |
| On request                                       | Yes                                     | 12  |  |
| For other reason(s)                              | _                                       | _   |  |

| Persons who can be criminally charged for an illegal abortion |   |          |     |                                    |   |  |
|---|---|----------|-----|------------------------------------|---|--|
| Woman   | _ | Provider | Yes | Other person who assists the woman | _ |  |

|  | REQUIREMENTS FOR | INDUCED ABORTION                |
|--|------------------|---------------------------------|
| Authorizations required                      |                  | Consent required                |
| Authorization of health care professional(s) | Yes              | Spousal consent                 |
| Number of authorizations                     | 3 2              | Parental consent for minors     |
| Cadre of health care professional            |                  | Consent by another adult        |
| Doctor (specialty not specified)             | Yes              |                                 |
| Specialist doctor, including OB/GYN          | Yes              | Other requirements              |
| Nurse  | _                | Gestational age limits          |
| Midwife/nurse-midwife                        | _                | Compulsory counselling          |
| Other providers                              | Yes <sup>3</sup> | Compulsory waiting period       |
| Authorized in specially licensed facilities  | Yes              | Length of waiting period        |
| Judicial authorization                       |                  | Mandatory screening test        |
| For minors                                   | _                | HIV test                        |
| In case of rape                              | _                | Other STI test(s)               |
| Police report in case of rape                | _                | Ultrasound viewing or listening |

| Parental consent for minors                  | Yes          |  |
|--|--------------|--|
| Consent by another adult                     | Yes          |  |
|  |              |  |
| Other requirements                           |              |  |
| Gestational age limits                       | Yes          |  |
| Compulsory counselling                       | Yes          |  |
| Compulsory waiting period                    | _            |  |
| Length of waiting period (days)              | _            |  |
| Mandatory screening test                     |              |  |
| HIV test                                     | <del>_</del> |  |
| Other STI test(s)                            | <del>-</del> |  |
| Ultrasound viewing or listening to heartheat | _            |  |

No

| Age when a woman can obtain an abortion without parental or judicial consent |  |   |  |
|--|--|---|--|
| Age limit for parental consent (years)                                       | <ul> <li>Age limit for judicial consent (years)</li> </ul> | _ |  |

|                                       | Sex-selective abortion |   |
|---------------------------------------|------------------------|---|
| Prohibition of sex-selective abortion | No                     | Restrictions on the methods to detect the sex of the foetus |

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | _                                | <del>-</del>                              |  |
| Dilatation and evacuation             | <del>-</del>                     | <del>-</del>                              |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | <del>-</del>                              |  |
| Misoprostol only                      | <del>-</del>                     | _   |  |
| Other method(s)                       | <del>-</del>                     | <del>-</del>                              |  |



#### Kazakhstan

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | _   | _  |  |
| Misoprostol  | _   | <del>-</del>   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | _                | <del>-</del>       |
| Secondary (district-level) health-care facilities | _                | <del>-</del>       |
| Specialized abortion care public facilities       | _                | <del>-</del>       |
| Private health-care centres or clinics            | _                | <del>-</del>       |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | Yes <sup>4</sup> | _                  |

| Health care personnel allowed to provide legal abortions |   |  |
|--|---|--|
| Doctors (speciality not specified)                       | _ |  |
| Specialist doctor, including OB/GYN                      | _ |  |
| Nurse  | _ |  |
| Midwife/nurse-midwife                                    | _ |  |
| Other provider(s)  | _ |  |
|  |   |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | _   |
| National guidelines on clinical and service delivery of post-abortion care | Yes |
| Restrictions on public information on legal abortion services              | _   |
| Counselling for contraceptive methods during<br>post-abortion care         | Yes |

| Service delivery requirements for providers or facilities |   |  |
|---|---|--|
| Referral linkage to a higher-level facility               | _ |  |
| Availability of a specialist doctor                       | _ |  |
| Minimum number of beds                                    | _ |  |
| Other facility/provider requirements                      | _ |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to<br>alternative provider or facility |
|--|-------------------|--|
| Health-care facilities   | _                 | _  |
| Health-care providers  | _                 | _  |

#### Notes:

- 1. The social indications stipulated in law are: death of husband during pregnancy; the woman or her husband are in prison; the woman and her husband recognized as officially unemployed; the woman is unmarried; presence of a court decision on the deprivation or restriction of parental rights; women who have the status of refugee or IDP; the presence of a child with a disability; dissolution of marriage during pregnancy; many children (4 or more).

  2. Committee of experts. Authorisation is required in cases where there are medical indications that threaten the life of a woman.

  3. In addition to a gynaecologist, the Committee should have an expert in the medical indication the woman is claiming (this includes mental illnesses) and the head of the health institution.

  4. Second trimester abortions can only be provided in perinatal centres, maternity homes and multi-regional hospitals.



## Kenya

| LAWS ON ABORTION                                 |                                      |   |
|--|--------------------------------------|---|
| egal grounds for induced abortion                | Currently permissible in the country | Gestational limit for each legal ground (weeks) |
| To save life                                     | Yes                                  | _   |
| To preserve health                               | Yes                                  | <del>-</del>                                    |
| To preserve physical health                      | _                                    | _   |
| To preserve mental health                        | <del>-</del>                         | <del>-</del>                                    |
| In cases of intellectual or cognitive disability | No                                   | <del>-</del>                                    |
| In cases of incest                               | No                                   | <del>-</del>                                    |
| In cases of rape                                 | Yes                                  | <del>-</del>                                    |
| In cases of foetal impairment                    | No                                   | _   |
| For economic or social reason                    | No                                   | _   |
| On request                                       | No                                   | _   |
| For other reason(s)                              | _                                    | _   |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABOR |                       |
|-------------------------------|-----------------------|
|                               | Consent required      |
| _                             | Spousal consent       |
| _                             | Parental consent for  |
|                               | Consent by another    |
| _                             |                       |
| _                             | Other requirements    |
| _                             | Gestational age limit |
| _                             | Compulsory counsel    |
| _                             | Compulsory waiting    |
| _                             | Length of waitin      |
|                               | Mandatory screening   |
| _                             | HIV test              |
| _                             | Other STI test(s      |
| _                             | Ultrasound viewing of |
|                               | REQUIREMENTS FOR      |

| Parental consent for minors                  | _ |
|--|---|
| Consent by another adult                     | _ |
|  |   |
| Other requirements                           |   |
| Gestational age limits                       | _ |
| Compulsory counselling                       | _ |
| Compulsory waiting period                    | _ |
| Length of waiting period (days)              | _ |
| Mandatory screening test                     |   |
| HIV test                                     | _ |
| Other STI test(s)                            | _ |
| Ultrasound viewing or listening to heartbeat | _ |

| Age when a woman can obtain an abortion without parental or judicial consent |   |  |   |
|--|---|--|---|
| Age limit for parental consent (years)                                       | _ | Age limit for judicial consent (years) | _ |
|  |   |  |   |

|                                       | Sex-selective abortion                                      |  |
|---------------------------------------|---|--|
| Prohibition of sex-selective abortion | Restrictions on the methods to detect the sex of the foetus |  |

| ACCESS TO ABORTION SERVICES           |                                  |   |
|---------------------------------------|----------------------------------|---|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |
| Vacuum aspiration                     | Yes                              | <del>-</del>                              |
| Dilatation and evacuation             | <del>-</del>                     | _   |
| Combination mifepristone- misoprostol | <del>_</del>                     | <del>_</del>                              |
| Misoprostol only                      | _                                | _   |
| Other method(s)                       | _                                | _   |



## Kenya

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |
|--|---|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |
| Mifepristone and/or combination mifepristone-misoprostol | Yes   | _  |
| Misoprostol  | Yes <sup>2</sup>                                  | _  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | _                  |
| Specialized abortion care public facilities       | <del>-</del>     | _                  |
| Private health-care centres or clinics            | <del>-</del>     | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | <del>-</del>     | _                  |

| Health care personnel allowed to provide legal abortions |   |  |
|--|---|--|
| Doctors (speciality not specified)                       | _ |  |
| Specialist doctor, including OB/GYN                      | _ |  |
| Nurse  | _ |  |
| Midwife/nurse-midwife                                    | _ |  |
| Other provider(s)  | _ |  |
|  |   |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                             |     |
|---|-----|
| National guidelines on clinical and service<br>delivery of induced abortion | _   |
| National guidelines on clinical and service delivery of post-abortion care  | Yes |
| Restrictions on public information on legal abortion services               | _   |
| Counselling for contraceptive methods during post-abortion care             | Yes |

| Service delivery requirements for providers or t | facilities   |
|--|--------------|
| Referral linkage to a higher-level facility      | _            |
| Availability of a specialist doctor              | <del>-</del> |
| Minimum number of beds                           | _            |
| Other facility/provider requirements             | _            |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to<br>alternative provider or facility |
|--|-------------------|--|
| Health-care facilities   | _                 | _  |
| Health-care providers  | _                 | _  |

#### Notes:

<sup>1.</sup> A person is not criminally responsible for performing in good faith and with reasonable care and skill a surgical operation upon any person for his benefit, or upon an unborn child for the preservation of the mother's life, if the performance of the operation is reasonable, having regard to the patient's state at the time, and to all the circumstances of the case.

2. For gynaecological indications.



Prohibition of sex-selective abortion

Other method(s)

# Abortion laws and policies, 2017

## Kiribati

| LAWS ON ABORTION                                 |   |   |
|--|---|---|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |
| To save life                                     | Yes                                     | _   |
| To preserve health                               | No                                      | _   |
| To preserve physical health                      | No                                      | _   |
| To preserve mental health                        | No                                      | _   |
| In cases of intellectual or cognitive disability | No                                      | _   |
| In cases of incest                               | No                                      | _   |
| In cases of rape                                 | No                                      | _   |
| In cases of foetal impairment                    | No                                      | _   |
| For economic or social reason                    | No                                      | _   |
| On request                                       | No                                      | _   |
| For other reason(s)                              | _                                       | _   |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |  |   |
|--|--|---|
| Authorizations required                      | Consent required                             |   |
| Authorization of health care professional(s) | — Spousal consent                            | _ |
| Number of authorizations                     | Parental consent for minors                  | _ |
| Cadre of health care professional            | Consent by another adult                     | _ |
| Doctor (specialty not specified)             | _  |   |
| Specialist doctor, including OB/GYN          | Other requirements                           |   |
| Nurse  | — Gestational age limits                     | _ |
| Midwife/nurse-midwife                        | — Compulsory counselling                     | _ |
| Other providers                              | Compulsory waiting period                    | _ |
| Authorized in specially licensed facilities  | Length of waiting period (days)              | _ |
| Judicial authorization                       | Mandatory screening test                     |   |
| For minors                                   | - HIV test                                   | _ |
| In case of rape                              | — Other STI test(s)                          | _ |
| Police report in case of rape                | Ultrasound viewing or listening to heartbeat | _ |

| Age when a woman can obtain an abortion without parental or judicial consent |   |  |   |  |
|--|---|--|---|--|
| Age limit for parental consent (years)                                       | _ | Age limit for judicial consent (years) | _ |  |
|  |   |  |   |  |

Restrictions on the methods to detect the sex

Sex-selective abortion

| ACCESS TO ABORTION SERVICES           |                                  |   |
|---------------------------------------|----------------------------------|---|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |
| Vacuum aspiration                     | _                                | <del>-</del>                              |
| Dilatation and evacuation             | <del>-</del>                     | <del>-</del>                              |
| Combination mifepristone- misoprostol | <del>-</del>                     | <del>-</del>                              |
| Misoprostol only                      | _                                | _   |



### Kiribati

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |  |
| Misoprostol  | Yes <sup>2</sup>                                  | Yes <sup>3</sup>   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | _                  |
| Specialized abortion care public facilities       | <del>-</del>     | _                  |
| Private health-care centres or clinics            | <del>-</del>     | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | _                  |
| Other settings or facilities                      | _                | _                  |

| lealth care personnel allowed to provide legal abortions |                  |  |
|--|------------------|--|
| Doctors (speciality not specified)                       | _                |  |
| Specialist doctor, including OB/GYN                      | _                |  |
| Nurse  | _                |  |
| Midwife/nurse-midwife                                    | _                |  |
| Other provider(s)  | Yes <sup>4</sup> |  |
|  |                  |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | _   |
| National guidelines on clinical and service delivery of post-abortion care | _   |
| Restrictions on public information on legal abortion services              | Yes |
| Counselling for contraceptive methods during<br>post-abortion care         | _   |

| Service delivery requirements for providers or facilities |              |
|---|--------------|
| Referral linkage to a higher-level facility               | <del>-</del> |
| Availability of a specialist doctor                       | <del>-</del> |
| Minimum number of beds                                    | _            |
| Other facility/provider requirements                      | _            |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | <del>-</del>      | _   |
| Health-care providers  | _                 | <del>-</del>  |

#### Notes:

- Indicates that data are not available, not applicable or not specified.
- Surgical operation performed in good faith and with reasonable care and skill upon an unborn child for the preservation of the mother's life, if the performance of the operation is reasonable, having regard to the patient's state at the time and to all the circumstances of the case.
   For gynaecological indications.
   With prescription only.
   Qualified medical practitioner. A registered pharmacist acting on instruction from a registered medical practitioner.



Age limit for parental consent (years)

# Abortion laws and policies, 2017

## Kuwait

| LAWS ON ABORTION                                 |                                      |   |
|--|--------------------------------------|---|
| Legal grounds for induced abortion               | Currently permissible in the country | Gestational limit for each legal ground (weeks) |
| To save life                                     | Yes                                  | 16  |
| To preserve health                               | Yes                                  | 16  |
| To preserve physical health                      | _                                    | <del>-</del>                                    |
| To preserve mental health                        | <del>-</del>                         | <del>-</del>                                    |
| In cases of intellectual or cognitive disability | No                                   | <del>-</del>                                    |
| In cases of incest                               | No                                   | <del>-</del>                                    |
| In cases of rape                                 | No                                   | <del>-</del>                                    |
| In cases of foetal impairment                    | Yes                                  | 16  |
| For economic or social reason                    | No                                   | <del>-</del>                                    |
| On request                                       | No                                   | <del>-</del>                                    |
| For other reason(s)                              | _                                    | _   |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| uthorizations required                       |     | Consent required                             |     |
|--|-----|--|-----|
| Authorization of health care professional(s) | Yes | Spousal consent                              | Yes |
| Number of authorizations                     | 3 1 | Parental consent for minors                  | _   |
| Cadre of health care professional            |     | Consent by another adult                     | _   |
| Doctor (specialty not specified)             | Yes |  |     |
| Specialist doctor, including OB/GYN          | Yes | Other requirements                           |     |
| Nurse  | _   | Gestational age limits                       | Yes |
| Midwife/nurse-midwife                        | _   | Compulsory counselling                       | _   |
| Other providers                              | _   | Compulsory waiting period                    | _   |
| Authorized in specially licensed facilities  | Yes | Length of waiting period (days)              | _   |
| Judicial authorization                       |     | Mandatory screening test                     |     |
| For minors                                   | _   | HIV test                                     | _   |
| In case of rape                              | _   | Other STI test(s)                            | _   |
| Police report in case of rape                | _   | Ultrasound viewing or listening to heartbeat | _   |

Age when a woman can obtain an abortion without parental or judicial consent

|                                       | Sex-selective abortion                                      |
|---------------------------------------|---|
| Prohibition of sex-selective abortion | Restrictions on the methods to detect the sex of the foetus |

Age limit for judicial consent (years)

| ACCESS TO ABORTION SERVICES           |                                  |   |
|---------------------------------------|----------------------------------|---|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |
| Vacuum aspiration                     | _                                | _   |
| Dilatation and evacuation             | <del>-</del>                     | _   |
| Combination mifepristone- misoprostol | <del>-</del>                     | _   |
| Misoprostol only                      | _                                | _   |
| Other method(s)                       | <del>-</del>                     | _   |



## Kuwait

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |
|--|---|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |
| Mifepristone and/or combination mifepristone-misoprostol | <del>-</del>                                      | _  |
| Misoprostol  | <del>-</del>                                      | _  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | Yes              | <del>-</del>       |
| Specialized abortion care public facilities       | <del>-</del>     | <del>-</del>       |
| Private health-care centres or clinics            | <del>-</del>     | <del>-</del>       |
| NGO health-care centres or clinics                | _                | <del>-</del>       |
| Other settings or facilities                      | <del>-</del>     | <del>-</del>       |

| Health care personnel allowed to provide legal abortions |     |
|--|-----|
| Doctors (speciality not specified)                       | Yes |
| Specialist doctor, including OB/GYN                      | Yes |
| Nurse  | _   |
| Midwife/nurse-midwife                                    | _   |
| Other provider(s)  | _   |
|  |     |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |              |
|--|--------------|
| National guidelines on clinical and service delivery of induced abortion   | _            |
| National guidelines on clinical and service delivery of post-abortion care | <del>-</del> |
| Restrictions on public information on legal abortion services              | Yes          |
| Counselling for contraceptive methods during<br>post-abortion care         | _            |

| Service delivery requirements for providers or facilities |   |  |
|---|---|--|
| Referral linkage to a higher-level facility               | _ |  |
| Availability of a specialist doctor                       | _ |  |
| Minimum number of beds                                    | _ |  |
| Other facility/provider requirements                      | _ |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | _                 | _   |

#### Notes:

- Indicates that data are not available, not applicable or not specified.
- 1. In government hospitals, authorized by a committee of three doctors (one of which is an obstetrician gynaecologist).



## Kyrgyzstan

| LAWS ON ABORTION 1                               |   |   |
|--|---|---|
| egal grounds for induced abortion 2              | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |
| To save life                                     | Yes                                     | <del>-</del>                                    |
| To preserve health                               | Yes                                     | <del>-</del>                                    |
| To preserve physical health                      | Yes                                     | <del>-</del>                                    |
| To preserve mental health                        | Yes                                     | <del>-</del>                                    |
| In cases of intellectual or cognitive disability | _                                       | <del>-</del>                                    |
| In cases of incest                               | Yes                                     | <del>-</del>                                    |
| In cases of rape                                 | Yes                                     | <del>-</del>                                    |
| In cases of foetal impairment                    | Yes                                     | <del>-</del>                                    |
| For economic or social reason                    | Yes                                     | 22  |
| On request                                       | Yes                                     | 12  |
| For other reason(s)                              | _                                       | _   |

|       |   | Persons who can be criminall | ly charged for ar | n illegal abortion                 |     |  |
|-------|---|------------------------------|-------------------|------------------------------------|-----|--|
| Woman | _ | Provider                     | Yes               | Other person who assists the woman | Yes |  |

No Yes

Yes Yes

| REQUIREMENTS FOR INDUCED ABORTION            |     |  |
|--|-----|--|
| uthorizations required                       |     | Consent required                             |
| Authorization of health care professional(s) | Yes | Spousal consent                              |
| Number of authorizations                     | _   | Parental consent for minors                  |
| Cadre of health care professional            |     | Consent by another adult                     |
| Doctor (specialty not specified)             | _   |  |
| Specialist doctor, including OB/GYN          | _   | Other requirements                           |
| Nurse  | _   | Gestational age limits                       |
| Midwife/nurse-midwife                        | _   | Compulsory counselling                       |
| Other providers                              | _   | Compulsory waiting period                    |
| Authorized in specially licensed facilities  | Yes | Length of waiting period (days)              |
| Judicial authorization                       |     | Mandatory screening test                     |
| For minors                                   | Yes | HIV test                                     |
| In case of rape                              | _   | Other STI test(s)                            |
| Police report in case of rape                | _   | Ultrasound viewing or listening to heartbeat |

| Age when a woman can obtain an abortion without parental or judicial consent |   |  |   |  |
|--|---|--|---|--|
| Age limit for parental consent (years)                                       | _ | Age limit for judicial consent (years) | _ |  |
|  |   |  |   |  |

|                                       | Sex-selective abortion |   |
|---------------------------------------|------------------------|---|
| Prohibition of sex-selective abortion | No                     | Restrictions on the methods to detect the sex of the foetus |

| ACCESS TO ABORTION SERVICES           |                                  |   |
|---------------------------------------|----------------------------------|---|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |
| Vacuum aspiration                     | _                                | _   |
| Dilatation and evacuation             | <del>-</del>                     | _   |
| Combination mifepristone- misoprostol | <del>-</del>                     | _   |
| Misoprostol only                      | _                                | _   |
| Other method(s)                       | <del>-</del>                     | _   |



## Kyrgyzstan

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |
|--|---|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |
| Mifepristone and/or combination mifepristone-misoprostol | No  | <del>-</del>   |
| Misoprostol  | Yes <sup>3</sup>                                  | <del>-</del>   |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | _                | <del>-</del>       |
| Secondary (district-level) health-care facilities | Yes              | <del>-</del>       |
| Specialized abortion care public facilities       | Yes              | <del>-</del>       |
| Private health-care centres or clinics            | _                | <del>-</del>       |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | _                | _                  |

| Doctors (speciality not specified)                                       | _ |
|--|---|
| Specialist doctor, including OB/GYN                                      | _ |
| Nurse  | _ |
| Midwife/nurse-midwife  | _ |
| Other provider(s)  | _ |
|  |   |
| Information and guidelines on abortion services                          |   |
| National guidelines on clinical and service delivery of induced abortion |   |
| National guidelines on clinical and service                              |   |

Health care personnel allowed to provide legal abortions

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |
|  |   |

| Information and guidelines on abortion services                            |     | Service delivery requirements for providers or facilities |
|--|-----|---|
| National guidelines on clinical and service delivery of induced abortion   | _   | Referral linkage to a higher-level facility —             |
| National guidelines on clinical and service delivery of post-abortion care | _   | Availability of a specialist doctor —                     |
| Restrictions on public information on legal abortion services              | _   | Minimum number of beds —                                  |
| Counselling for contraceptive methods during<br>post-abortion care         | Yes | Other facility/provider requirements —                    |
|  |     |   |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | _                 | _   |

## Notes:

- Varies by jurisdiction.
   Abortion for medical reasons may be performed regardless of gestational age. There is a spousal consent requirement for abortions on social grounds.
   Indications not specified.



Age limit for parental consent (years)

# Abortion laws and policies, 2017

## Lao People's Democratic Republic

| gal grounds for induced abortion                 | Currently permissible in the country | Gestational limit for each legal ground (weeks) |
|--|--------------------------------------|---|
| o save life                                      | Yes                                  | _   |
| To preserve health                               | Yes                                  | _   |
| To preserve physical health                      | Yes                                  | _   |
| To preserve mental health                        | Yes                                  | _   |
| In cases of intellectual or cognitive disability | Yes                                  | _   |
| n cases of incest                                | Yes                                  | _   |
| n cases of rape                                  | Yes                                  | _   |
| n cases of foetal impairment                     | Yes                                  | _   |
| For economic or social reason                    | Yes                                  | _   |
| On request                                       | Yes                                  | _   |
| For other reason(s)                              | _                                    | _   |

| Persons who can be criminally charged for an illegal abortion |          |   |                                    |   |
|---|----------|---|------------------------------------|---|
| Woman —   | Provider | _ | Other person who assists the woman | _ |

| Authorizations required                      |     | Consent required                             |     |
|--|-----|--|-----|
| Authorization of health care professional(s) | Yes | Spousal consent                              | _   |
| Number of authorizations                     | _   | Parental consent for minors                  | Yes |
| Cadre of health care professional            |     | Consent by another adult                     | _   |
| Doctor (specialty not specified)             | _   |  |     |
| Specialist doctor, including OB/GYN          | _   | Other requirements                           |     |
| Nurse  | _   | Gestational age limits                       | Yes |
| Midwife/nurse-midwife                        | _   | Compulsory counselling                       | _   |
| Other providers                              | _   | Compulsory waiting period                    | _   |
| Authorized in specially licensed facilities  | _   | Length of waiting period (days)              | _   |
| Judicial authorization                       |     | Mandatory screening test                     |     |
| For minors                                   | Yes | HIV test                                     | _   |
| In case of rape                              | _   | Other STI test(s)                            | _   |
| Police report in case of rape                | _   | Ultrasound viewing or listening to heartbeat | _   |

|                                       | Sex-selective abortion |   |
|---------------------------------------|------------------------|---|
| Prohibition of sex-selective abortion | _                      | Restrictions on the methods to detect the sex of the foetus |

Age limit for judicial consent (years)

Age when a woman can obtain an abortion without parental or judicial consent

| ACCESS TO ABORTION SERVICES           |                                  |   |
|---------------------------------------|----------------------------------|---|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |
| Vacuum aspiration                     | Yes                              | _   |
| Dilatation and evacuation             | Yes                              | _   |
| Combination mifepristone- misoprostol | <del>-</del>                     | _   |
| Misoprostol only                      | <del>-</del>                     | _   |
| Other method(s)                       | Yes 1                            | <del>-</del>                              |



## Lao People's Democratic Republic

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |
|--|---|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |
| Misoprostol  | Yes <sup>2</sup>                                  | <del>_</del>   |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | _                  |
| Specialized abortion care public facilities       | <del>-</del>     | _                  |
| Private health-care centres or clinics            | <del>-</del>     | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | _                  |
| Other settings or facilities                      | _                | _                  |

| Doctors (speciality not specified)  | _ |
|-------------------------------------|---|
| Specialist doctor, including OB/GYN | _ |
| Nurse                               | _ |
| Midwife/nurse-midwife               | _ |
| Other provider(s)                   | _ |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | _   |
| National guidelines on clinical and service delivery of post-abortion care | _   |
| Restrictions on public information on legal abortion services              | _   |
| Counselling for contraceptive methods during<br>post-abortion care         | Yes |

| Service delivery requirements for providers or t | facilities   |
|--|--------------|
| Referral linkage to a higher-level facility      | _            |
| Availability of a specialist doctor              | <del>-</del> |
| Minimum number of beds                           | _            |
| Other facility/provider requirements             | _            |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to<br>alternative provider or facility |
|--|-------------------|--|
| Health-care facilities   | _                 | _  |
| Health-care providers  | _                 | _  |

#### Notes:

- Indicates that data are not available, not applicable or not specified.
- Dilation and curettage.
   For gynaecological indications.



## Latvia

| LAWS ON ABORTION                                 |   |   |  |
|--|---|---|--|
| Legal grounds for induced abortion               | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | _   |  |
| To preserve health                               | Yes                                     | <del>-</del>                                    |  |
| To preserve physical health                      | <del>-</del>                            | _   |  |
| To preserve mental health                        | <del>-</del>                            | <del>-</del>                                    |  |
| In cases of intellectual or cognitive disability | _                                       | _   |  |
| In cases of incest                               | <del>-</del>                            | _   |  |
| In cases of rape                                 | Yes                                     | 12  |  |
| In cases of foetal impairment                    | <del>-</del>                            | _   |  |
| For economic or social reason                    | _                                       | _   |  |
| On request                                       | Yes                                     | 12  |  |
| For other reason(s)                              | _                                       | _   |  |

| Persons who can be criminally charged for an illegal abortion |   |          |     |                                    |   |  |
|---|---|----------|-----|------------------------------------|---|--|
| Woman   | _ | Provider | Yes | Other person who assists the woman | _ |  |

| REQUIREMENTS FOR INDUCED ABORTION            |     |  |     |
|--|-----|--|-----|
| Authorizations required                      |     | Consent required                             |     |
| Authorization of health care professional(s) | Yes | Spousal consent                              | No  |
| Number of authorizations                     | 2   | Parental consent for minors                  | Yes |
| Cadre of health care professional            |     | Consent by another adult                     | Yes |
| Doctor (specialty not specified)             | _   |  |     |
| Specialist doctor, including OB/GYN          | Yes | Other requirements                           |     |
| Nurse  | _   | Gestational age limits                       | Yes |
| Midwife/nurse-midwife                        | _   | Compulsory counselling                       | Yes |
| Other providers                              | _   | Compulsory waiting period                    | Yes |
| Authorized in specially licensed facilities  | Yes | Length of waiting period (days)              | 3 3 |
| Judicial authorization                       |     | Mandatory screening test                     |     |
| For minors                                   | No  | HIV test                                     | _   |
| In case of rape                              | _   | Other STI test(s)                            | _   |
| Police report in case of rape                | Yes | Ultrasound viewing or listening to heartbeat | _   |

| Age when a woman can obtain an abortion without parental or judicial consent      |  |  |  |
|---|--|--|--|
| Age limit for parental consent (years)  16 Age limit for judicial consent (years) |  |  |  |
|   |  |  |  |

|                                       | Sex-selective abortion |   |
|---------------------------------------|------------------------|---|
| Prohibition of sex-selective abortion | No                     | Restrictions on the methods to detect the sex of the foetus |

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | Yes                              | 12  |  |
| Dilatation and evacuation             | Yes                              | 12  |  |
| Combination mifepristone- misoprostol | Yes                              | 9   |  |
| Misoprostol only                      | <del>-</del>                     | _   |  |
| Other method(s)                       | <del>-</del>                     | _   |  |



### Latvia

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |
|--|---|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |
| Mifepristone and/or combination mifepristone-misoprostol | Yes   | _  |
| Misoprostol  | Yes <sup>4</sup>                                  | <del>-</del>   |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | Yes              | <del>-</del>       |
| Secondary (district-level) health-care facilities | Yes              | <del>-</del>       |
| Specialized abortion care public facilities       | _                | <del>-</del>       |
| Private health-care centres or clinics            | _                | <del>-</del>       |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | _                | _                  |

| Doctors (speciality not specified) —  Specialist doctor, including OB/GYN —  Nurse — |
|--|
|  |
| Nurse —  |
|  |
| Midwife/nurse-midwife —  |
| Other provider(s)  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | Yes |
| National guidelines on clinical and service delivery of post-abortion care | Yes |
| Restrictions on public information on legal abortion services              | _   |
| Counselling for contraceptive methods during<br>post-abortion care         | Yes |

| Service delivery requirements for providers or f | acilities |
|--|-----------|
| Referral linkage to a higher-level facility      | _         |
| Availability of a specialist doctor              | _         |
| Minimum number of beds                           | _         |
| Other facility/provider requirements             | _         |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | Yes <sup>5</sup>  | _   |

#### Notes:

- 1. Abortion is permitted in case of illness during pregnancy and medical indications up to 24 weeks of gestation. Termination of the pregnancy for a patient younger than 16 years due to medical indications or in the case of a pregnancy resulting from rape is allowed only if there is a confirmation by the council of doctors or a certificate on a case of rape issued by a law enforcement institution, and if at least one of the patient's parents or her guardian has given written consent.

  2. Proor the time of being counselled.

  4. For gynaecological indications.

  5. Provider type not specified.



Prohibition of sex-selective abortion

# Abortion laws and policies, 2017

### Lebanon

| LAWS ON ABORTION                                 |                                      |   |
|--|--------------------------------------|---|
| Legal grounds for induced abortion               | Currently permissible in the country | Gestational limit for each legal ground (weeks) |
| To save life                                     | Yes                                  | _   |
| To preserve health                               | No                                   | _   |
| To preserve physical health                      | No                                   | <del>-</del>                                    |
| To preserve mental health                        | No                                   | <del>-</del>                                    |
| In cases of intellectual or cognitive disability | No                                   | _   |
| In cases of incest                               | No                                   | <del>-</del>                                    |
| In cases of rape                                 | No                                   | _   |
| In cases of foetal impairment                    | No                                   | _   |
| For economic or social reason                    | No                                   | _   |
| On request                                       | No                                   | _   |
| For other reason(s)                              | _                                    | _   |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |     |  |   |
|--|-----|--|---|
| Authorizations required                      |     | Consent required                             |   |
| Authorization of health care professional(s) | Yes | Spousal consent                              | _ |
| Number of authorizations                     | 3   | Parental consent for minors                  | _ |
| Cadre of health care professional            |     | Consent by another adult                     | _ |
| Doctor (specialty not specified)             | Yes |  |   |
| Specialist doctor, including OB/GYN          | _   | Other requirements                           |   |
| Nurse  | _   | Gestational age limits                       | _ |
| Midwife/nurse-midwife                        | _   | Compulsory counselling                       | _ |
| Other providers                              | _   | Compulsory waiting period                    | _ |
| Authorized in specially licensed facilities  | _   | Length of waiting period (days)              | _ |
| Judicial authorization                       |     | Mandatory screening test                     |   |
| For minors                                   | _   | HIV test                                     | _ |
| In case of rape                              | _   | Other STI test(s)                            | _ |
| Police report in case of rape                | _   | Ultrasound viewing or listening to heartbeat | _ |

| Age limit for parental consent (years) | <ul><li>Age limit for judicial consent (years)</li></ul> |
|--|--|
|  |  |
|  | Sex-selective abortion                                   |
| Prohibition of say calcative abortion  | Restrictions on the methods to detect the sex            |

Age when a woman can obtain an abortion without parental or judicial consent

| ACCESS TO ABORTION SERVICES           |                                  |   |
|---------------------------------------|----------------------------------|---|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |
| Vacuum aspiration                     | _                                | _   |
| Dilatation and evacuation             | <del>-</del>                     | _   |
| Combination mifepristone- misoprostol | <del>-</del>                     | _   |
| Misoprostol only                      | _                                | _   |
| Other method(s)                       | <del>-</del>                     | _   |



## Lebanon

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |
|--|---|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |
| Mifepristone and/or combination mifepristone-misoprostol | No  | <del>-</del>   |
| Misoprostol  | Yes 1   | Yes <sup>2</sup>   |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | _                  |
| Specialized abortion care public facilities       | <del>-</del>     | _                  |
| Private health-care centres or clinics            | <del>-</del>     | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | _                  |
| Other settings or facilities                      | _                | _                  |

| lealth care personnel allowed to provide legal abortions |     |  |
|--|-----|--|
| Doctors (speciality not specified)                       | Yes |  |
| Specialist doctor, including OB/GYN                      | _   |  |
| Nurse  | _   |  |
| Midwife/nurse-midwife                                    | _   |  |
| Other provider(s)  | _   |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | _   |
| National guidelines on clinical and service delivery of post-abortion care | _   |
| Restrictions on public information on legal abortion services              | Yes |
| Counselling for contraceptive methods during<br>post-abortion care         | _   |
|  | _   |

| Service delivery requirements for providers or facilities |              |  |
|---|--------------|--|
| Referral linkage to a higher-level facility               | _            |  |
| Availability of a specialist doctor                       | <del>-</del> |  |
| Minimum number of beds                                    | _            |  |
| Other facility/provider requirements                      | _            |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to<br>alternative provider or facility |
|--|-------------------|--|
| Health-care facilities   | _                 | _  |
| Health-care providers  | Yes <sup>3</sup>  | Yes  |

#### Notes:

- For gynaecological indications.
   With prescription only.
   Provider type not specified.



Prohibition of sex-selective abortion

# Abortion laws and policies, 2017

## Lesotho

| LAWS ON ABORTION                                 |   |   |
|--|---|---|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |
| To save life                                     | Yes                                     | _   |
| To preserve health                               | Yes                                     | _   |
| To preserve physical health                      | <del>-</del>                            | _   |
| To preserve mental health                        | <del>-</del>                            | _   |
| In cases of intellectual or cognitive disability | No                                      | _   |
| In cases of incest                               | Yes                                     | <del>-</del>                                    |
| In cases of rape                                 | Yes                                     | _   |
| In cases of foetal impairment                    | Yes                                     | _   |
| For economic or social reason                    | No                                      | _   |
| On request                                       | No                                      | _   |
| For other reason(s)                              | _                                       | _   |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| Authorizations required                      |              | Consent required                             |    |
|--|--------------|--|----|
| Authorization of health care professional(s) | Yes          | Spousal consent                              | _  |
| Number of authorizations                     | 1            | Parental consent for minors                  | _  |
| Cadre of health care professional            |              | Consent by another adult                     | _  |
| Doctor (specialty not specified)             | Yes          |  |    |
| Specialist doctor, including OB/GYN          | <del>-</del> | Other requirements                           |    |
| Nurse  | _            | Gestational age limits                       | No |
| Midwife/nurse-midwife                        | _            | Compulsory counselling                       | _  |
| Other providers                              | _            | Compulsory waiting period                    | _  |
| Authorized in specially licensed facilities  | _            | Length of waiting period (days)              | _  |
| Judicial authorization                       |              | Mandatory screening test                     |    |
| For minors                                   | _            | HIV test                                     | _  |
| In case of rape                              | _            | Other STI test(s)                            | _  |
| Police report in case of rape                | _            | Ultrasound viewing or listening to heartbeat | _  |

| Age limit for parental consent (years) | <ul><li>Age limit for judicial consent (years)</li></ul> |
|--|--|
|  |  |
|  | Sex-selective abortion                                   |
| Prohibition of say calcative abortion  | Restrictions on the methods to detect the sex            |

Age when a woman can obtain an abortion without parental or judicial consent

| ACCESS TO ABORTION SERVICES           |                                  |   |
|---------------------------------------|----------------------------------|---|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |
| Vacuum aspiration                     | _                                | <del>-</del>                              |
| Dilatation and evacuation             | <del>-</del>                     | <del>-</del>                              |
| Combination mifepristone- misoprostol | <del>-</del>                     | <del>-</del>                              |
| Misoprostol only                      | <del>-</del>                     | _   |
| Other method(s)                       | <del>-</del>                     | <del>-</del>                              |



### Lesotho

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |
|--|---|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |
| Misoprostol  | No  | <del>-</del>   |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | _                  |
| Specialized abortion care public facilities       | <del>-</del>     | _                  |
| Private health-care centres or clinics            | <del>-</del>     | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | <del>-</del>     | _                  |

| Health and managed allowed to man the best of and all arthur |       |
|--|-------|
| Health care personnel allowed to provide legal abortions     |       |
| Doctors (speciality not specified)                           | _     |
| Specialist doctor, including OB/GYN                          | _     |
| Nurse  | _     |
| Midwife/nurse-midwife  | _     |
| Other provider(s)  | Yes 1 |
|  |       |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                             |   |
|---|---|
| National guidelines on clinical and service<br>delivery of induced abortion | _ |
| National guidelines on clinical and service delivery of post-abortion care  | _ |
| Restrictions on public information on legal abortion services               | _ |
| Counselling for contraceptive methods during post-abortion care             | _ |

| Service delivery requirements for providers or facilities |              |  |
|---|--------------|--|
| Referral linkage to a higher-level facility               | _            |  |
| Availability of a specialist doctor                       | <del>-</del> |  |
| Minimum number of beds                                    | _            |  |
| Other facility/provider requirements                      | _            |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to<br>alternative provider or facility |
|--|-------------------|--|
| Health-care facilities   | _                 | _  |
| Health-care providers  | _                 | _  |

#### Notes:

- Indicates that data are not available, not applicable or not specified.
- 1. Registered medical practitioners.



## Liberia

| LAWS ON ABORTION                                 |   |   |  |
|--|---|---|--|
| Legal grounds for induced abortion               | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | _   |  |
| To preserve health                               | Yes                                     | <del>-</del>                                    |  |
| To preserve physical health                      | Yes                                     | _   |  |
| To preserve mental health                        | Yes                                     | <del>-</del>                                    |  |
| In cases of intellectual or cognitive disability | No                                      | <del>-</del>                                    |  |
| In cases of incest                               | Yes                                     | <del>-</del>                                    |  |
| In cases of rape                                 | Yes                                     | _   |  |
| In cases of foetal impairment                    | Yes                                     | _   |  |
| For economic or social reason                    | No                                      | _   |  |
| On request                                       | No                                      | _   |  |
| For other reason(s)                              | Yes <sup>2</sup>                        | _   |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

HIV test Other STI test(s)

Ultrasound viewing or listening to heartbeat

| REQUIREMENTS FO                              |                | OR INDUCED ABORTION   |
|--|----------------|-----------------------|
| Authorizations required                      |                | Consent required      |
| Authorization of health care professional(s) | Yes            | Spousal consent       |
| Number of authorizations                     | 2 <sup>3</sup> | Parental consent for  |
| Cadre of health care professional            |                | Consent by another    |
| Doctor (specialty not specified)             | Yes            |                       |
| Specialist doctor, including OB/GYN          | _              | Other requirements    |
| Nurse  | _              | Gestational age limit |
| Midwife/nurse-midwife                        | _              | Compulsory counsel    |
| Other providers                              | _              | Compulsory waiting    |
| Authorized in specially licensed facilities  | _              | Length of waitin      |
| Judicial authorization                       |                | Mandatory screening   |
| For minors                                   | _              | HIV test              |
| In case of rape                              | _              | Other STI test(s      |
| Police report in case of rape                | _              | Ultrasound viewing of |

| Spousal consent                                | _             |  |
|--|---------------|--|
| Parental consent for minors                    | _             |  |
| Consent by another adult                       | _             |  |
|  |               |  |
| Other requirements                             |               |  |
|  |               |  |
| Gestational age limits                         | Yes           |  |
| Gestational age limits  Compulsory counselling | Yes —         |  |
|  | Yes — — —     |  |
| Compulsory counselling                         | Yes — — — — — |  |

| Age when a woman can obtain an abortion without parental or judicial consent      |  |  |  |  |
|---|--|--|--|--|
| Age limit for parental consent (years) — Age limit for judicial consent (years) — |  |  |  |  |

|                                       | Sex-selective abortion                                      |
|---------------------------------------|---|
| Prohibition of sex-selective abortion | Restrictions on the methods to detect the sex of the foetus |

| ACCESS TO ABORTION SERVICES           |                                  |   |
|---------------------------------------|----------------------------------|---|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |
| Vacuum aspiration                     | _                                | <del>-</del>                              |
| Dilatation and evacuation             | <del>-</del>                     | <del>-</del>                              |
| Combination mifepristone- misoprostol | <del>-</del>                     | <del>-</del>                              |
| Misoprostol only                      | _                                | <del>-</del>                              |
| Other method(s)                       | _                                | _   |



### Liberia

| ACCESS TO ABORTION SERVICES (continued)  |                  |              |  |
|--|------------------|--------------|--|
| Drugs for inducing abortion Included in the official list Allowed to be sold or of authorized drugs distributed by pharmacies or drug st |                  |              |  |
| Mifepristone and/or combination mifepristone-misoprostol   | No               | _            |  |
| Misoprostol  | Yes <sup>4</sup> | <del>-</del> |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | _                  |
| Specialized abortion care public facilities       | <del>-</del>     | _                  |
| Private health-care centres or clinics            | <del>-</del>     | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | <del>-</del>     | _                  |

| Specialist doctor, including OB/GYN | _ |
|-------------------------------------|---|
| Nime                                |   |
| Nurse                               | _ |
| Midwife/nurse-midwife               | _ |
| Other provider(s)                   | _ |

Health care personnel allowed to provide legal abortions

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Service delivery requirements for providers or facilities |              |  |
|---|--------------|--|
| Referral linkage to a higher-level facility               | _            |  |
| Availability of a specialist doctor                       | _            |  |
| Minimum number of beds                                    | _            |  |
| Other facility/provider requirements                      | <del>_</del> |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | _                 | _   |

#### Notes:

The designations employed in this publication and the material presented in it do not imply the expression of any opinion whatsoever on the part of the Secretariat of the United Nations concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries.

Restrictions on public information on legal

Counselling for contraceptive methods during

abortion services

post-abortion care

- Abortion is permitted for therapeutic purposes.
   Pregnancy that results from felonious intercourse, in particular pregnancy that results from illicit intercourse with a girl below the age of sixteen.
   No abortion shall be performed unless two physicians, one of whom may be the person performing the abortion, shall have certified in writing the circumstances which they believe to justify the abortion. Such certificate shall be submitted before the abortion (a) to the hospital where it is to be performed, or if the abortion is not performed in a hospital, to the Minister of Health, and (b) in the case of abortion following felonious intercourse, to the County Attorney or the police.



## Libya

| LAWS ON ABORTION                                 |   |   |  |
|--|---|---|--|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | _   |  |
| To preserve health                               | No                                      | _   |  |
| To preserve physical health                      | No                                      | _   |  |
| To preserve mental health                        | No                                      | _   |  |
| In cases of intellectual or cognitive disability | No                                      | _   |  |
| In cases of incest                               | No                                      | _   |  |
| In cases of rape                                 | No                                      | _   |  |
| In cases of foetal impairment                    | No                                      | _   |  |
| For economic or social reason                    | No                                      | _   |  |
| On request                                       | No                                      | _   |  |
| For other reason(s)                              | _                                       | _   |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |  |
|---|-----|----------|-----|------------------------------------|-----|--|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |  |

| REQUIREMENTS FOR INDUCED ABORTION            |     |  |   |
|--|-----|--|---|
| Authorizations required                      |     | Consent required                             |   |
| Authorization of health care professional(s) | Yes | Spousal consent                              | _ |
| Number of authorizations                     | 1   | Parental consent for minors                  | _ |
| Cadre of health care professional            |     | Consent by another adult                     | _ |
| Doctor (specialty not specified)             | _   |  |   |
| Specialist doctor, including OB/GYN          | Yes | Other requirements                           |   |
| Nurse  | _   | Gestational age limits                       | _ |
| Midwife/nurse-midwife                        | _   | Compulsory counselling                       | _ |
| Other providers                              | _   | Compulsory waiting period                    | _ |
| Authorized in specially licensed facilities  | _   | Length of waiting period (days)              | _ |
| Judicial authorization                       |     | Mandatory screening test                     |   |
| For minors                                   | _   | HIV test                                     | _ |
| In case of rape                              | _   | Other STI test(s)                            | _ |
| Police report in case of rape                | _   | Ultrasound viewing or listening to heartbeat | _ |

| Age when a woman can obtain an abortion without parental or judicial consent |   |  |              |  |
|--|---|--|--------------|--|
| Age limit for parental consent (years)                                       | _ | Age limit for judicial consent (years) | <del>-</del> |  |
|  |   |  |              |  |

|                                       | Sex-selective abortion                                      |
|---------------------------------------|---|
| Prohibition of sex-selective abortion | Restrictions on the methods to detect the sex of the foetus |

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | <del>-</del>                     | _   |  |
| Dilatation and evacuation             | <del>-</del>                     | _   |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | _   |  |
| Misoprostol only                      | _                                | _   |  |
| Other method(s)                       | <del>-</del>                     | <del>-</del>                              |  |



## Libya

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | _   | _  |  |
| Misoprostol  | <del>-</del>                                      | <del>-</del>   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | _                  |
| Specialized abortion care public facilities       | <del>-</del>     | _                  |
| Private health-care centres or clinics            | <del>-</del>     | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | _                  |
| Other settings or facilities                      | _                | _                  |

| Health care personnel allowed to provide legal abortions |              |  |
|--|--------------|--|
| Doctors (speciality not specified)                       | No           |  |
| Specialist doctor, including OB/GYN                      | Yes          |  |
| Nurse  | <del>-</del> |  |
| Midwife/nurse-midwife                                    | _            |  |
| Other provider(s)  | _            |  |
|  |              |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services  National guidelines on clinical and service delivery of induced abortion  National guidelines on clinical and service delivery of pools abortion corp. |  |   |
|---|--|---|
| delivery of induced abortion  National guidelines on clinical and service   | Information and guidelines on abortion services                            |   |
|   |  | _ |
| delivery of post-abortion care  | National guidelines on clinical and service delivery of post-abortion care | _ |
| Restrictions on public information on legal abortion services   | 1  | _ |
| Counselling for contraceptive methods during post-abortion care   |  | _ |

| Service delivery requirements for providers or facilities |     |  |
|---|-----|--|
| Referral linkage to a higher-level facility               | _   |  |
| Availability of a specialist doctor                       | Yes |  |
| Minimum number of beds                                    | _   |  |
| Other facility/provider requirements                      | _   |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | _                 | _   |

#### Notes:

- Indicates that data are not available, not applicable or not specified
- 1. Abortion is generally illegal in the country. However, under the general criminal law principles of necessity, it is allowed to be performed to save the life of the pregnant woman.



Age limit for parental consent (years)

# Abortion laws and policies, 2017

## Liechtenstein

| LAWS ON ABORTION                                 |   |   |  |
|--|---|---|--|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | _   |  |
| To preserve health                               | Yes                                     | _   |  |
| To preserve physical health                      | _                                       | _   |  |
| To preserve mental health                        | _                                       | _   |  |
| In cases of intellectual or cognitive disability | No                                      | _   |  |
| In cases of incest                               | No                                      | _   |  |
| In cases of rape                                 | Yes                                     | _   |  |
| In cases of foetal impairment                    | No                                      | _   |  |
| For economic or social reason                    | No                                      | _   |  |
| On request                                       | No                                      | _   |  |
| For other reason(s)                              | Yes <sup>2</sup>                        | _   |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |              |  |   |
|--|--------------|--|---|
| Authorizations required                      |              | Consent required                             |   |
| Authorization of health care professional(s) | <del>_</del> | Spousal consent                              | _ |
| Number of authorizations                     | _            | Parental consent for minors                  | _ |
| Cadre of health care professional            |              | Consent by another adult                     | _ |
| Doctor (specialty not specified)             | _            |  |   |
| Specialist doctor, including OB/GYN          | _            | Other requirements                           |   |
| Nurse  | _            | Gestational age limits                       | _ |
| Midwife/nurse-midwife                        | _            | Compulsory counselling                       | _ |
| Other providers                              | _            | Compulsory waiting period                    | _ |
| Authorized in specially licensed facilities  | _            | Length of waiting period (days)              | _ |
| Judicial authorization                       |              | Mandatory screening test                     |   |
| For minors                                   | _            | HIV test                                     | _ |
| In case of rape                              | _            | Other STI test(s)                            | _ |
| Police report in case of rape                | _            | Ultrasound viewing or listening to heartbeat | _ |

|                                       | Sex-selective abortion                                      |
|---------------------------------------|---|
| Prohibition of sex-selective abortion | Restrictions on the methods to detect the sex of the foetus |

Age limit for judicial consent (years)

Age when a woman can obtain an abortion without parental or judicial consent

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | <del>-</del>                     | _   |  |
| Dilatation and evacuation             | <del>-</del>                     | _   |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | _   |  |
| Misoprostol only                      | _                                | _   |  |
| Other method(s)                       | <del>-</del>                     | <del>-</del>                              |  |



### Liechtenstein

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | Yes   | Yes <sup>3</sup>   |  |
| Misoprostol  | Yes <sup>4</sup>                                  | Yes <sup>5</sup>   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | _                | <del>-</del>       |
| Specialized abortion care public facilities       | _                | _                  |
| Private health-care centres or clinics            | _                | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | _                | <del>-</del>       |

| Health care personnel allowed to provide legal abortions |                  |  |
|--|------------------|--|
| Doctors (speciality not specified)                       | Yes              |  |
| Specialist doctor, including OB/GYN                      | _                |  |
| Nurse  | _                |  |
| Midwife/nurse-midwife                                    | _                |  |
| Other provider(s)  | Yes <sup>6</sup> |  |
|  |                  |  |

| Types of insurance or other coverage for abortion                  |     |
|--|-----|
| Public health coverage for induced abortion for all women          | Yes |
| Public health coverage for induced abortion for<br>poor women only | No  |
| Public health coverage for abortion complications                  | _   |
| Private health coverage for induced abortion                       | _   |
| Other type of coverage   | _   |

| Information and guidelines on abortion services                            |              |
|--|--------------|
| National guidelines on clinical and service delivery of induced abortion   | <del>_</del> |
| National guidelines on clinical and service delivery of post-abortion care | _            |
| Restrictions on public information on legal abortion services              | Yes          |
| Counselling for contraceptive methods during<br>post-abortion care         | _            |

| Service delivery requirements for providers or facilities |              |  |
|---|--------------|--|
| Referral linkage to a higher-level facility               | _            |  |
| Availability of a specialist doctor                       | <del>-</del> |  |
| Minimum number of beds                                    | _            |  |
| Other facility/provider requirements                      | _            |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | _                 | _   |

#### Notes:

- Abortion is not punishable if the pregnant yesulted from rape, sexual coercion or a sexual abuse of a defenceless or mentally impaired person.

  2. The pregnant woman was under age at the time she got pregnant and was not married to the person who impregnated her at the time of conception or afterwards.

  3. With prescription only.

  4. For non-gynaecological indications only.

  5. With prescription only.

  6. The abortion is to be performed by a physician unless it is undertaken to save the pregnant woman's life from an immediate danger which cannot be averted otherwise in a situation when medical help cannot be obtained in time.



## Lithuania

| LAWS ON ABORTION                                 |                                      |   |  |
|--|--------------------------------------|---|--|
| Legal grounds for induced abortion               | Currently permissible in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                  | No limit  |  |
| To preserve health                               | Yes                                  | No limit  |  |
| To preserve physical health                      | Yes                                  | No limit  |  |
| To preserve mental health                        | Yes                                  | No limit  |  |
| In cases of intellectual or cognitive disability | Yes                                  | No limit  |  |
| In cases of incest                               | <del>-</del>                         | _   |  |
| In cases of rape                                 | <del>-</del>                         | <del>-</del>                                    |  |
| In cases of foetal impairment                    | Yes                                  | No limit  |  |
| For economic or social reason                    | _                                    | <del>-</del>                                    |  |
| On request                                       | Yes                                  | 12  |  |
| For other reason(s)                              | _                                    | _   |  |

| Persons who can be criminally charged for an illegal abortion |   |          |     |                                    |     |  |
|---|---|----------|-----|------------------------------------|-----|--|
| Woman   | _ | Provider | Yes | Other person who assists the woman | Yes |  |

| with a signation as a service of             |       | Company transitional                         |              |
|--|-------|--|--------------|
| Authorizations required                      |       | Consent required                             |              |
| Authorization of health care professional(s) | Yes   | Spousal consent                              | No           |
| Number of authorizations                     | 3     | Parental consent for minors                  | Yes          |
| Cadre of health care professional            |       | Consent by another adult                     | Yes          |
| Doctor (specialty not specified)             | Yes   |  |              |
| Specialist doctor, including OB/GYN          | Yes   | Other requirements                           |              |
| Nurse  | _     | Gestational age limits                       | Yes          |
| Midwife/nurse-midwife                        | _     | Compulsory counselling                       | _            |
| Other providers                              | Yes 1 | Compulsory waiting period                    | _            |
| Authorized in specially licensed facilities  | _     | Length of waiting period (days)              | <del>_</del> |
| Judicial authorization                       |       | Mandatory screening test                     |              |
| For minors                                   | _     | HIV test                                     | No           |
| In case of rape                              | _     | Other STI test(s)                            | Yes          |
| Police report in case of rape                | _     | Ultrasound viewing or listening to heartbeat | _            |

| Age limit for parental consent (years) | 16 | Age limit for judicial consent (years) | _ |
|--|----|--|---|
|  |    |  |   |
|  | 0  | all and an                             |   |

Age when a woman can obtain an abortion without parental or judicial consent

| Prohibition of sex-selective abortion | Restrictions on the methods to detect the sex of the foetus |   |  |
|---------------------------------------|---|---|--|
| ACCESS TO ABORTION SERVICES           |   |   |  |
| Methods for induced abortions         | Currently allowed in the country                            | Gestational limit for each method (weeks) |  |

| mothed for madou abortions            | in the country   | each method (weeks) |
|---------------------------------------|------------------|---------------------|
| Vacuum aspiration                     | Yes              | 5                   |
| Dilatation and evacuation             | <del>-</del>     | <u>-</u>            |
| Combination mifepristone- misoprostol | _                |                     |
| Misoprostol only                      | _                | <del>-</del>        |
| Other method(s)                       | Yes <sup>2</sup> | 9                   |



## Lithuania

| ACCESS TO ABORTION SERVICES (continued)   |                  |                  |  |
|---|------------------|------------------|--|
| Drugs for inducing abortion Included in the official list Allowed to be sold or of authorized drugs distributed by pharmacies or drug |                  |                  |  |
| Mifepristone and/or combination mifepristone-misoprostol  | Yes              | Yes <sup>3</sup> |  |
| Misoprostol   | Yes <sup>4</sup> | Yes <sup>5</sup> |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | _                | _                  |
| Secondary (district-level) health-care facilities | _                | <del>-</del>       |
| Specialized abortion care public facilities       | _                | <del>-</del>       |
| Private health-care centres or clinics            | _                | <del>-</del>       |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | Yes <sup>6</sup> | _                  |

| Health care personnel allowed to provide legal abortions |     |  |
|--|-----|--|
| Doctors (speciality not specified)                       | _   |  |
| Specialist doctor, including OB/GYN                      | Yes |  |
| Nurse  | _   |  |
| Midwife/nurse-midwife                                    | _   |  |
| Other provider(s)  | _   |  |
|  |     |  |

| Types of insurance or other coverage for abortion                  |     |
|--|-----|
| Public health coverage for induced abortion for all women          | Yes |
| Public health coverage for induced abortion for<br>poor women only | No  |
| Public health coverage for abortion complications                  | Yes |
| Private health coverage for induced abortion                       | _   |
| Other type of coverage   | _   |

| I | nformation and guidelines on abortion services                             |  |
|---|--|--|
|   | National guidelines on clinical and service delivery of induced abortion   |  |
|   | National guidelines on clinical and service delivery of post-abortion care |  |
|   | Restrictions on public information on legal abortion services              |  |
|   | Counselling for contraceptive methods during post-abortion care            |  |

| Service delivery requirements for providers or facilities |                  |  |
|---|------------------|--|
| Referral linkage to a higher-level facility               | _                |  |
| Availability of a specialist doctor                       | Yes              |  |
| Minimum number of beds                                    | _                |  |
| Other facility/provider requirements                      | Yes <sup>7</sup> |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | _                 | _   |

## Notes:

- Indicates that data are not available, not applicable or not specified.

- Physicians, neurologist and specialist physicians by disease profile.
   Mifepristone.
   With prescription only.
   For gynaecological indications.
   With prescription only.
   Specific secondary and tertiary gynaecological services.
   Pregnancy terminations are done only in gynaecological departments of hospitals and out-patient clinics equipped with operating rooms.



## Luxembourg

| LAWS ON ABORTION                                 |   |   |  |
|--|---|---|--|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | No limit  |  |
| To preserve health                               | Yes                                     | No limit  |  |
| To preserve physical health                      | <del>-</del>                            | <del>_</del>                                    |  |
| To preserve mental health                        | _                                       | <del>-</del>                                    |  |
| In cases of intellectual or cognitive disability | _                                       | <del>-</del>                                    |  |
| In cases of incest                               | _                                       | <del>-</del>                                    |  |
| In cases of rape                                 | _                                       | _   |  |
| In cases of foetal impairment                    | Yes                                     | No limit  |  |
| For economic or social reason                    | _                                       | _   |  |
| On request                                       | Yes                                     | 14  |  |
| For other reason(s)                              | _                                       | _   |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

|  | REQUIREMENTS F | OR INDUCED ABORTION                          |     |
|--|----------------|--|-----|
| Authorizations required                      |                | Consent required                             |     |
| Authorization of health care professional(s) | Yes            | Spousal consent                              | _   |
| Number of authorizations                     | 2 1            | Parental consent for minors                  | Yes |
| Cadre of health care professional            |                | Consent by another adult                     | Yes |
| Doctor (specialty not specified)             | Yes            |  |     |
| Specialist doctor, including OB/GYN          | _              | Other requirements                           |     |
| Nurse  | _              | Gestational age limits                       | Yes |
| Midwife/nurse-midwife                        | _              | Compulsory counselling                       | No  |
| Other providers                              | _              | Compulsory waiting period                    | Yes |
| Authorized in specially licensed facilities  | Yes            | Length of waiting period (days)              | 3   |
| Judicial authorization                       |                | Mandatory screening test                     |     |
| For minors                                   | _              | HIV test                                     | _   |
| In case of rape                              | _              | Other STI test(s)                            |     |
| Police report in case of rape                | _              | Ultrasound viewing or listening to heartbeat | _   |

| Age when a woman can obtain an abortion without parental or judicial consent |    |  |   |  |
|--|----|--|---|--|
| Age limit for parental consent (years)                                       | 18 | Age limit for judicial consent (years) | _ |  |
|  |    |  |   |  |

|                                       | Sex-selective abortion                                      |
|---------------------------------------|---|
| Prohibition of sex-selective abortion | Restrictions on the methods to detect the sex of the foetus |

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | _                                | _   |  |
| Dilatation and evacuation             | <del>-</del>                     | _   |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | _   |  |
| Misoprostol only                      | _                                | _   |  |
| Other method(s)                       | <del>-</del>                     | _   |  |



## Luxembourg

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |
|--|---|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |
| Mifepristone and/or combination mifepristone-misoprostol | Yes   | _  |
| Misoprostol  | Yes <sup>4</sup>                                  | Yes <sup>5</sup>   |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | Yes              | _                  |
| Secondary (district-level) health-care facilities | Yes              | _                  |
| Specialized abortion care public facilities       | _                | _                  |
| Private health-care centres or clinics            | Yes              | _                  |
| NGO health-care centres or clinics                | Yes              | _                  |
| Other settings or facilities                      | _                | _                  |

| Health care personnel allowed to provide legal abortions |              |  |
|--|--------------|--|
| Doctors (speciality not specified)                       | Yes          |  |
| Specialist doctor, including OB/GYN                      | Yes          |  |
| Nurse  | <del>-</del> |  |
| Midwife/nurse-midwife                                    | _            |  |
| Other provider(s)  | _            |  |
|  |              |  |

| Types of insurance or other coverage for abortion                  |     |  |
|--|-----|--|
| Public health coverage for induced abortion for all women          | Yes |  |
| Public health coverage for induced abortion for<br>poor women only | No  |  |
| Public health coverage for abortion complications                  | Yes |  |
| Private health coverage for induced abortion                       | _   |  |
| Other type of coverage   | _   |  |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | _   |
| National guidelines on clinical and service delivery of post-abortion care | _   |
| Restrictions on public information on legal abortion services              | _   |
| Counselling for contraceptive methods during<br>post-abortion care         | Yes |

| Service delivery requirements for providers or facilities |     |  |
|---|-----|--|
| Referral linkage to a higher-level facility               | Yes |  |
| Availability of a specialist doctor                       | Yes |  |
| Minimum number of beds                                    | _   |  |
| Other facility/provider requirements                      | _   |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | Yes <sup>6</sup>  | Yes   |

#### Notes:

- Authorisation is required for terminations carried out after 14 weeks from last menstrual period. The law specifies that the authorization is to be provided by two "qualified" physicians.
   Another adult of choice can accompany the minor (below 18 years of age) during the procedure if consent of the parent or legal guardian is not sought or given. A legal guardian can also provide consent.
   Indications not specified.
   With prescription only.
   Provider type not specified.



## Madagascar

| LAWS ON ABORTION                                 |   |   |
|--|---|---|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |
| To save life                                     | Yes                                     | _   |
| To preserve health                               | No                                      | _   |
| To preserve physical health                      | No                                      | _   |
| To preserve mental health                        | No                                      | _   |
| In cases of intellectual or cognitive disability | No                                      | _   |
| In cases of incest                               | No                                      | <del>-</del>                                    |
| In cases of rape                                 | No                                      | _   |
| In cases of foetal impairment                    | No                                      | _   |
| For economic or social reason                    | No                                      | _   |
| On request                                       | No                                      | _   |
| For other reason(s)                              | _                                       | _   |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |  |  |
|--|--|--|
| Authorizations required                      | Consent required                             |  |
| Authorization of health care professional(s) | Spousal consent —                            |  |
| Number of authorizations                     | Parental consent for minors                  |  |
| Cadre of health care professional            | Consent by another adult —                   |  |
| Doctor (specialty not specified)             | -  |  |
| Specialist doctor, including OB/GYN          | Other requirements                           |  |
| Nurse  | Gestational age limits —                     |  |
| Midwife/nurse-midwife                        | Compulsory counselling —                     |  |
| Other providers                              | Compulsory waiting period —                  |  |
| Authorized in specially licensed facilities  | Length of waiting period (days)              |  |
| Judicial authorization                       | Mandatory screening test                     |  |
| For minors                                   | – HIV test –                                 |  |
| In case of rape                              | Other STI test(s)                            |  |
| Police report in case of rape                | Ultrasound viewing or listening to heartbeat |  |

| Age when a woman can obtain an abortion without parental or judicial consent |   |  |   |
|--|---|--|---|
| Age limit for parental consent (years)                                       | _ | Age limit for judicial consent (years) | _ |
|  |   |  |   |
|  |   |  |   |

|                                       | Sex-selective abortion                                      |
|---------------------------------------|---|
| Prohibition of sex-selective abortion | Restrictions on the methods to detect the sex of the foetus |

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | _                                | <del>-</del>                              |  |
| Dilatation and evacuation             | <del>-</del>                     | <del>-</del>                              |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | <del>-</del>                              |  |
| Misoprostol only                      | _                                | <del>-</del>                              |  |
| Other method(s)                       | _                                | _   |  |



## Madagascar

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |
|--|---|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |
| Misoprostol  | Yes <sup>2</sup>                                  | <del>-</del>   |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | _                | Yes                |
| Secondary (district-level) health-care facilities | _                | Yes                |
| Specialized abortion care public facilities       | _                | Yes                |
| Private health-care centres or clinics            | _                | Yes                |
| NGO health-care centres or clinics                | _                | <del>-</del>       |
| Other settings or facilities                      | _                | _                  |

| lealth care personnel allowed to provide legal abortions |   |
|--|---|
| Doctors (speciality not specified)                       | _ |
| Specialist doctor, including OB/GYN                      | _ |
| Nurse  | _ |
| Midwife/nurse-midwife                                    | _ |
| Other provider(s)  | _ |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | _   |
| National guidelines on clinical and service delivery of post-abortion care | Yes |
| Restrictions on public information on legal abortion services              | Yes |
| Counselling for contraceptive methods during post-abortion care            | Yes |

| Service delivery requirements for providers or fa | acilities |
|---|-----------|
| Referral linkage to a higher-level facility       | _         |
| Availability of a specialist doctor               | _         |
| Minimum number of beds                            | _         |
| Other facility/provider requirements              | _         |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | _                 | _   |

#### Notes:

- Indicates that data are not available, not applicable or not specified.
- 1. Abortion is generally Illegal in the country. However, under the general criminal law principles of necessity, it is allowed to be performed to save the life of the pregnant woman.
  2. For gynaecological indications.



Age limit for parental consent (years)

# Abortion laws and policies, 2017

### Malawi

| LAWS ON ABORTION                                 |   |   |  |
|--|---|---|--|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | _   |  |
| To preserve health                               | No                                      | _   |  |
| To preserve physical health                      | No                                      | _   |  |
| To preserve mental health                        | No                                      | _   |  |
| In cases of intellectual or cognitive disability | No                                      | _   |  |
| In cases of incest                               | No                                      | _   |  |
| In cases of rape                                 | No                                      | _   |  |
| In cases of foetal impairment                    | No                                      | _   |  |
| For economic or social reason                    | No                                      | _   |  |
| On request                                       | No                                      | _   |  |
| For other reason(s)                              | _                                       | _   |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |    |  |    |  |
|--|----|--|----|--|
| Authorizations required                      |    | Consent required                             |    |  |
| Authorization of health care professional(s) | No | Spousal consent                              | No |  |
| Number of authorizations                     | _  | Parental consent for minors                  | No |  |
| Cadre of health care professional            |    | Consent by another adult                     | _  |  |
| Doctor (specialty not specified)             | _  |  |    |  |
| Specialist doctor, including OB/GYN          | _  | Other requirements                           |    |  |
| Nurse  | _  | Gestational age limits                       | No |  |
| Midwife/nurse-midwife                        | _  | Compulsory counselling                       | _  |  |
| Other providers                              | _  | Compulsory waiting period                    | _  |  |
| Authorized in specially licensed facilities  | No | Length of waiting period (days)              | _  |  |
| Judicial authorization                       |    | Mandatory screening test                     |    |  |
| For minors                                   | No | HIV test                                     | _  |  |
| In case of rape                              | _  | Other STI test(s)                            | _  |  |
| Police report in case of rape                | _  | Ultrasound viewing or listening to heartbeat | _  |  |

Age when a woman can obtain an abortion without parental or judicial consent

|                                       | Sex-selective a | abortion                                      |
|---------------------------------------|-----------------|---|
| Prohibition of sex-selective abortion | No              | Restrictions on the methods to detect the sex |

Age limit for judicial consent (years)

| ACCESS TO ABORTION SERVICES           |                                  |   |  |  |
|---------------------------------------|----------------------------------|---|--|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |  |
| Vacuum aspiration                     | _                                | _   |  |  |
| Dilatation and evacuation             | <del>-</del>                     | _   |  |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | _   |  |  |
| Misoprostol only                      | _                                | _   |  |  |
| Other method(s)                       | <del>-</del>                     | _   |  |  |



### Malawi

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |  |
| Misoprostol  | Yes <sup>2</sup>                                  | <del>-</del>   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | _                | <del>-</del>       |
| Specialized abortion care public facilities       | <del>-</del>     | <del>-</del>       |
| Private health-care centres or clinics            | <del>-</del>     | <del>-</del>       |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | _                | _                  |

| lealth care personnel allowed to provide legal abortions |   |  |
|--|---|--|
| Doctors (speciality not specified)                       | _ |  |
| Specialist doctor, including OB/GYN                      | _ |  |
| Nurse  | _ |  |
| Midwife/nurse-midwife                                    | _ |  |
| Other provider(s)  | _ |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | _   |
| National guidelines on clinical and service delivery of post-abortion care | _   |
| Restrictions on public information on legal abortion services              | _   |
| Counselling for contraceptive methods during<br>post-abortion care         | Yes |

| Service delivery requirements for providers or f | acilities |
|--|-----------|
| Referral linkage to a higher-level facility      | _         |
| Availability of a specialist doctor              | _         |
| Minimum number of beds                           | _         |
| Other facility/provider requirements             | _         |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | _                 | _   |

#### Notes:

<sup>1.</sup> A person is not criminally responsible for performing in good faith and with reasonable care and skill a surgical operation upon any person for his benefit, or upon an unborn child for the preservation of the mother's life, if the performance of the operation is reasonable, having regard to the patient's state at the time, and to all the circumstances of the case.

2. For gynaecological indications.



## Malaysia

| LAWS ON ABORTION 1   |     |    |  |  |  |  |
|--|-----|----|--|--|--|--|
| Legal grounds for induced abortion <sup>2</sup> Currently permissible Gestational limit for in the country each legal ground (weeks) |     |    |  |  |  |  |
| To save life   | Yes | 22 |  |  |  |  |
| To preserve health   | Yes | 22 |  |  |  |  |
| To preserve physical health  | Yes | 22 |  |  |  |  |
| To preserve mental health  | Yes | 22 |  |  |  |  |
| In cases of intellectual or cognitive disability   | No  | _  |  |  |  |  |
| In cases of incest   | No  | _  |  |  |  |  |
| In cases of rape   | No  | _  |  |  |  |  |
| In cases of foetal impairment  | No  | _  |  |  |  |  |
| For economic or social reason  | No  | _  |  |  |  |  |
| On request   | No  | _  |  |  |  |  |
| For other reason(s)  | _   | _  |  |  |  |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

Yes

Yes No Yes

No No

| REQUIREMENTS FOR INDUCED ABORTION            |     |  |  |
|--|-----|--|--|
| Authorizations required                      |     | Consent required                             |  |
| Authorization of health care professional(s) | Yes | Spousal consent                              |  |
| Number of authorizations                     | 1 3 | Parental consent for minors                  |  |
| Cadre of health care professional            |     | Consent by another adult                     |  |
| Doctor (specialty not specified)             | _   |  |  |
| Specialist doctor, including OB/GYN          | Yes | Other requirements                           |  |
| Nurse  | _   | Gestational age limits                       |  |
| Midwife/nurse-midwife                        | _   | Compulsory counselling                       |  |
| Other providers                              | _   | Compulsory waiting period                    |  |
| Authorized in specially licensed facilities  | Yes | Length of waiting period (days)              |  |
| Judicial authorization                       |     | Mandatory screening test                     |  |
| For minors                                   | Yes | HIV test                                     |  |
| In case of rape                              | _   | Other STI test(s)                            |  |
| Police report in case of rape                | _   | Ultrasound viewing or listening to heartbeat |  |

| Age when a woman can obtain an abortion without parental or judicial consent |    |  |   |  |
|--|----|--|---|--|
| Age limit for parental consent (years)                                       | 18 | Age limit for judicial consent (years) | _ |  |

|                                       | Sex-selective abortion |   |
|---------------------------------------|------------------------|---|
| Prohibition of sex-selective abortion | Yes                    | Restrictions on the methods to detect the sex of the foetus |

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | Yes                              | 7-19                                      |  |
| Dilatation and evacuation             | Yes                              | 15-20                                     |  |
| Combination mifepristone- misoprostol | Yes                              | 14-22                                     |  |
| Misoprostol only                      | Yes                              | 5-9, 14-22                                |  |
| Other method(s)                       | Yes <sup>5</sup>                 | _   |  |



## Malaysia

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |  |
|--|---|--|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | <del>-</del>   |  |  |
| Misoprostol  | No  | <del>-</del>   |  |  |

| Settings for providing legal abortion services    | Induced abortion Post-abortion care |              |
|---|-------------------------------------|--------------|
| Primary health care centres                       | _                                   | <del>-</del> |
| Secondary (district-level) health-care facilities | Yes                                 | Yes          |
| Specialized abortion care public facilities       | _                                   | <del>-</del> |
| Private health-care centres or clinics            | Yes                                 | Yes          |
| NGO health-care centres or clinics                | <del>-</del>                        | <del>-</del> |
| Other settings or facilities                      | _                                   | <del>-</del> |

| Health care personnel allowed to provide legal abortions |                  |
|--|------------------|
| Doctors (speciality not specified)                       | _                |
| Specialist doctor, including OB/GYN                      | _                |
| Nurse  | _                |
| Midwife/nurse-midwife                                    | _                |
| Other provider(s)  | Yes <sup>6</sup> |
| Other provider(s)  | Yes <sup>6</sup> |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | Yes |
| National guidelines on clinical and service delivery of post-abortion care | Yes |
| Restrictions on public information on legal abortion services              | _   |
| Counselling for contraceptive methods during<br>post-abortion care         | Yes |

| service delivery requirements for providers or facilities |              |  |
|---|--------------|--|
| Referral linkage to a higher-level facility               | <del>-</del> |  |
| Availability of a specialist doctor                       | Yes          |  |
| Minimum number of beds                                    | _            |  |
| Other facility/provider requirements                      | _            |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | _                 | _   |

#### Notes:

- Indicates that data are not available, not applicable or not specified.

- 1. Varies by jurisdiction.
  2. Abortion is permitted for therapeutic purposes. Muslim women require husband's consent as per Fatwa, this is not a legal requirement otherwise.
  3. In a Government Hospital setting, two doctors, one of whom is a specialist, should concur on the termination of Pregnancy. For mental health reasons, an opinion from a psychologist or psychiatrist is not needed unless it is deemed necessary by the attending doctor i.e. because of severe depression or suicidal risk.
  4. After first counselling by the healthcare professional.
  5. Gemeprostor or methotrexate with misoprostol.
  6. Medical practitioner registered under the Medical Act 1971.



## **Maldives**

| LAWS ON ABORTION                                 |                                      |   |  |
|--|--------------------------------------|---|--|
| Legal grounds for induced abortion               | Currently permissible in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                  | <del>-</del>                                    |  |
| To preserve health                               | <del>-</del>                         | <del>-</del>                                    |  |
| To preserve physical health                      | <del>_</del>                         | <del>-</del>                                    |  |
| To preserve mental health                        | No                                   | <del>-</del>                                    |  |
| In cases of intellectual or cognitive disability | No                                   | <del>-</del>                                    |  |
| In cases of incest                               | Yes                                  | <del>-</del>                                    |  |
| In cases of rape                                 | Yes                                  | <del>-</del>                                    |  |
| In cases of foetal impairment                    | Yes                                  | <del>-</del>                                    |  |
| For economic or social reason                    | No                                   | _   |  |
| On request                                       | No                                   | _   |  |
| For other reason(s)                              | _                                    | _   |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |  |
|---|-----|----------|-----|------------------------------------|-----|--|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |  |

| REQUIREMENTS FOR INDUCED ABORTION            |     |  |     |  |
|--|-----|--|-----|--|
| Authorizations required                      |     | Consent required                             |     |  |
| Authorization of health care professional(s) | Yes | Spousal consent                              | No  |  |
| Number of authorizations                     | _   | Parental consent for minors                  | Yes |  |
| Cadre of health care professional            |     | Consent by another adult                     | _   |  |
| Doctor (specialty not specified)             | Yes |  |     |  |
| Specialist doctor, including OB/GYN          | _   | Other requirements                           |     |  |
| Nurse  | _   | Gestational age limits                       | Yes |  |
| Midwife/nurse-midwife                        | _   | Compulsory counselling                       | No  |  |
| Other providers                              | _   | Compulsory waiting period                    | No  |  |
| Authorized in specially licensed facilities  | Yes | Length of waiting period (days)              | _   |  |
| Judicial authorization                       |     | Mandatory screening test                     |     |  |
| For minors                                   | No  | HIV test                                     | _   |  |
| In case of rape                              | _   | Other STI test(s)                            | _   |  |
| Police report in case of rape                | _   | Ultrasound viewing or listening to heartbeat | _   |  |

| Age when a woman can obtain an abortion without parental or judicial consent      |  |  |  |  |  |
|---|--|--|--|--|--|
| Age limit for parental consent (years) — Age limit for judicial consent (years) — |  |  |  |  |  |
|   |  |  |  |  |  |

|                                       | Sex-selective abortion |   |
|---------------------------------------|------------------------|---|
| Prohibition of sex-selective abortion | Yes                    | Restrictions on the methods to detect the sex of the foetus |

| ACCESS TO ABORTION SERVICES           |                                  |   |  |  |
|---------------------------------------|----------------------------------|---|--|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |  |
| Vacuum aspiration                     | _                                | _   |  |  |
| Dilatation and evacuation             | <del>-</del>                     | _   |  |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | _   |  |  |
| Misoprostol only                      | _                                | _   |  |  |
| Other method(s)                       | <del>-</del>                     | _   |  |  |



### **Maldives**

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |  |
|--|---|--|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |  |
| Mifepristone and/or combination mifepristone-misoprostol | Yes   | _  |  |  |
| Misoprostol  | Yes <sup>2</sup>                                  | No   |  |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | _                  |
| Specialized abortion care public facilities       | <del>-</del>     | _                  |
| Private health-care centres or clinics            | <del>-</del>     | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | <del>-</del>     | _                  |

| alth care personnel allowed to provide legal abortions |   |
|--|---|
| Doctors (speciality not specified)                     | _ |
| Specialist doctor, including OB/GYN                    | _ |
| Nurse  | _ |
| Midwife/nurse-midwife                                  | _ |
| Other provider(s)                                      | _ |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |   |
|--|---|
| National guidelines on clinical and service delivery of induced abortion   | _ |
| National guidelines on clinical and service delivery of post-abortion care | _ |
| Restrictions on public information on legal abortion services              | _ |
| Counselling for contraceptive methods during<br>post-abortion care         | _ |

| Service delivery requirements for providers or facilities |   |  |  |
|---|---|--|--|
| Referral linkage to a higher-level facility               | _ |  |  |
| Availability of a specialist doctor                       | _ |  |  |
| Minimum number of beds                                    | _ |  |  |
| Other facility/provider requirements                      | _ |  |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | <del>_</del>      | _   |
| Health-care providers  | _                 | <del>_</del>  |

#### Notes:

- 1. Abortion is permitted for therapeutic purposes. According to the Panel Code (Law No. 6/2014), exception to terminate a pregnancy also for pregnancy resulting from sexual assault, including rape, or incest.
  2. Indications not specified.



### Mali

| LAWS ON ABORTION 1                               |   |   |  |  |
|--|---|---|--|--|
| Legal grounds for induced abortion <sup>2</sup>  | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |  |
| To save life                                     | Yes                                     | _   |  |  |
| To preserve health                               | No                                      | _   |  |  |
| To preserve physical health                      | No                                      | _   |  |  |
| To preserve mental health                        | No                                      | _   |  |  |
| In cases of intellectual or cognitive disability | No                                      | _   |  |  |
| In cases of incest                               | Yes                                     | _   |  |  |
| In cases of rape                                 | Yes                                     | _   |  |  |
| In cases of foetal impairment                    | No                                      | _   |  |  |
| For economic or social reason                    | No                                      | _   |  |  |
| On request                                       | No                                      | _   |  |  |
| For other reason(s)                              | _                                       | _   |  |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

|  | REQUIREMENTS FOR INDUCED ABORTION |                       |
|--|-----------------------------------|-----------------------|
| Authorizations required                      |                                   | Consent required      |
| Authorization of health care professional(s) | Yes                               | Spousal consent       |
| Number of authorizations                     | _                                 | Parental consent for  |
| Cadre of health care professional            |                                   | Consent by another    |
| Doctor (specialty not specified)             | _                                 |                       |
| Specialist doctor, including OB/GYN          | _                                 | Other requirements    |
| Nurse  | _                                 | Gestational age limit |
| Midwife/nurse-midwife                        | _                                 | Compulsory counsel    |
| Other providers                              | _                                 | Compulsory waiting    |
| Authorized in specially licensed facilities  | No                                | Length of waitin      |
| Judicial authorization                       |                                   | Mandatory screening   |
| For minors                                   | No                                | HIV test              |
| In case of rape                              | _                                 | Other STI test(s      |
| Police report in case of rape                | _                                 | Ultrasound viewing of |
|  |                                   |                       |

| Spousal consent                 | No                     |
|---------------------------------|------------------------|
| Parental consent for minors     | No                     |
| Consent by another adult        | _                      |
|                                 |                        |
| Other requirements              |                        |
| Gestational age limits          | Varies by jurisdiction |
| Compulsory counselling          | No                     |
| Compulsory waiting period       | No                     |
| Length of waiting period (days) | <u> </u>               |

| Age when a woman can obtain an abortion without parental or judicial consent |             |                                  |  |
|--|-------------|----------------------------------|--|
| Age limit for parental consent (years)                                       | — Age limit | t for judicial consent (years) — |  |

Mandatory screening test HIV test Other STI test(s)

Ultrasound viewing or listening to heartbeat

|                                       | Sex-selective abortion |   |
|---------------------------------------|------------------------|---|
| Prohibition of sex-selective abortion | Yes                    | Restrictions on the methods to detect the sex of the foetus |

| ACCESS TO ABORTION SERVICES           |                                  |   |
|---------------------------------------|----------------------------------|---|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |
| Vacuum aspiration                     | _                                | _   |
| Dilatation and evacuation             | <del>-</del>                     | _   |
| Combination mifepristone- misoprostol | <del>-</del>                     | _   |
| Misoprostol only                      | _                                | _   |
| Other method(s)                       | <del>-</del>                     | _   |



### Mali

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |
|--|---|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |
| Mifepristone and/or combination mifepristone-misoprostol | No  | <del>-</del>   |
| Misoprostol  | Yes <sup>3</sup>                                  | <del>_</del>   |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | _                | Yes                |
| Secondary (district-level) health-care facilities | Yes              | Yes                |
| Specialized abortion care public facilities       | _                | _                  |
| Private health-care centres or clinics            | _                | Yes                |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | _                | <del>-</del>       |

| Health care personnel allowed to provide legal abortions |                  |
|--|------------------|
| Doctors (speciality not specified)                       | _                |
| Specialist doctor, including OB/GYN                      | Yes              |
| Nurse  | _                |
| Midwife/nurse-midwife                                    | _                |
| Other provider(s)  | Yes <sup>4</sup> |
|  |                  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | _   |
| National guidelines on clinical and service delivery of post-abortion care | _   |
| Restrictions on public information on legal abortion services              | Yes |
| Counselling for contraceptive methods during<br>post-abortion care         | Yes |
|  |     |

| Service delivery requirements for providers or facilities |              |  |
|---|--------------|--|
| Referral linkage to a higher-level facility               | _            |  |
| Availability of a specialist doctor                       | <del>-</del> |  |
| Minimum number of beds                                    | _            |  |
| Other facility/provider requirements                      | _            |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | _                 | _   |

#### Notes:

- Varies by jurisdiction.
   Abortion is permitted for therapeutic purposes.
   For gynaecological indications.
   Surgeons.



Prohibition of sex-selective abortion

## Abortion laws and policies, 2017

#### Malta

| LAWS ON ABORTION                                 |   |   |  |
|--|---|---|--|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | No                                      | _   |  |
| To preserve health                               | No                                      | <del>-</del>                                    |  |
| To preserve physical health                      | No                                      | _   |  |
| To preserve mental health                        | No                                      | <del>-</del>                                    |  |
| In cases of intellectual or cognitive disability | No                                      | <del>-</del>                                    |  |
| In cases of incest                               | No                                      | _   |  |
| In cases of rape                                 | No                                      | _   |  |
| In cases of foetal impairment                    | No                                      | _   |  |
| For economic or social reason                    | No                                      | _   |  |
| On request                                       | No                                      | _   |  |
| For other reason(s)                              | _                                       | _   |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |   |  |              |
|--|---|--|--------------|
| Authorizations required                      |   | Consent required                             |              |
| Authorization of health care professional(s) | _ | Spousal consent                              | <del>_</del> |
| Number of authorizations                     | _ | Parental consent for minors                  | _            |
| Cadre of health care professional            |   | Consent by another adult                     | _            |
| Doctor (specialty not specified)             | _ |  |              |
| Specialist doctor, including OB/GYN          | _ | Other requirements                           |              |
| Nurse  | _ | Gestational age limits                       | _            |
| Midwife/nurse-midwife                        | _ | Compulsory counselling                       | _            |
| Other providers                              | _ | Compulsory waiting period                    | _            |
| Authorized in specially licensed facilities  | _ | Length of waiting period (days)              | _            |
| Judicial authorization                       |   | Mandatory screening test                     |              |
| For minors                                   | _ | HIV test                                     | _            |
| In case of rape                              | _ | Other STI test(s)                            | _            |
| Police report in case of rape                | _ | Ultrasound viewing or listening to heartbeat | _            |

| Age limit for parental consent (years) | <ul><li>Age limit for judicial consent (years)</li></ul> |
|--|--|
|  |  |
|  | Sex-selective abortion                                   |
| Prohibition of say calcative abortion  | Restrictions on the methods to detect the sex            |

Age when a woman can obtain an abortion without parental or judicial consent

| ACCESS TO ABORTION SERVICES           |                                  |   |
|---------------------------------------|----------------------------------|---|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |
| Vacuum aspiration                     | _                                | <del>-</del>                              |
| Dilatation and evacuation             | <del>-</del>                     | <del>-</del>                              |
| Combination mifepristone- misoprostol | <del>-</del>                     | <del>-</del>                              |
| Misoprostol only                      | <del>-</del>                     | _   |
| Other method(s)                       | <del>-</del>                     | <del>-</del>                              |



#### Malta

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |  |
| Misoprostol  | Yes 1   | <del>-</del>   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | _                | <del>-</del>       |
| Specialized abortion care public facilities       | <del>-</del>     | <del>-</del>       |
| Private health-care centres or clinics            | <del>-</del>     | <del>-</del>       |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | _                | _                  |

| Health care personnel allowed to provide legal abortions |   |  |
|--|---|--|
| Doctors (speciality not specified)                       | _ |  |
| Specialist doctor, including OB/GYN                      | _ |  |
| Nurse  | _ |  |
| Midwife/nurse-midwife                                    | _ |  |
| Other provider(s)  | _ |  |
|  |   |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |   |
|--|---|
| National guidelines on clinical and service delivery of induced abortion   | _ |
| National guidelines on clinical and service delivery of post-abortion care | _ |
| Restrictions on public information on legal abortion services              | _ |
| Counselling for contraceptive methods during post-abortion care            | _ |

| Service delivery requirements for providers or facilities |              |  |
|---|--------------|--|
| Referral linkage to a higher-level facility               | _            |  |
| Availability of a specialist doctor                       | <del>-</del> |  |
| Minimum number of beds                                    | _            |  |
| Other facility/provider requirements                      | _            |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to<br>alternative provider or facility |
|--|-------------------|--|
| Health-care facilities   | _                 | _  |
| Health-care providers  | _                 | _  |

#### Notes:

- Indicates that data are not available, not applicable or not specified.
- 1. For gynaecological indications.



### **Marshall Islands**

| egal grounds for induced abortion                | Currently permissible in the country | Gestational limit for each legal ground (weeks) |
|--|--------------------------------------|---|
| To save life                                     | Yes                                  | _   |
| To preserve health                               | No                                   | _   |
| To preserve physical health                      | No                                   | _   |
| To preserve mental health                        | No                                   | _   |
| In cases of intellectual or cognitive disability | No                                   | _   |
| In cases of incest                               | No                                   | _   |
| In cases of rape                                 | No                                   | _   |
| In cases of foetal impairment                    | No                                   | _   |
| For economic or social reason                    | No                                   | _   |
| On request                                       | No                                   | _   |
| For other reason(s)                              | _                                    | _   |

|       | Persons who can be criminally charged for an illegal abortion |   |                                    |   |
|-------|---|---|------------------------------------|---|
| Woman | — Provider  | _ | Other person who assists the woman | _ |

| REQUIREMENTS FOR INDUCED ABORTION            |  |  |
|--|--|--|
| Authorizations required                      | Consent required                             |  |
| Authorization of health care professional(s) | Spousal consent —                            |  |
| Number of authorizations                     | — Parental consent for minors —              |  |
| Cadre of health care professional            | Consent by another adult —                   |  |
| Doctor (specialty not specified)             | _  |  |
| Specialist doctor, including OB/GYN          | Other requirements                           |  |
| Nurse  | Gestational age limits —                     |  |
| Midwife/nurse-midwife                        | Compulsory counselling —                     |  |
| Other providers                              | Compulsory waiting period —                  |  |
| Authorized in specially licensed facilities  | Length of waiting period (days)              |  |
| Judicial authorization                       | Mandatory screening test                     |  |
| For minors                                   | HIV test                                     |  |
| In case of rape                              | — Other STI test(s) —                        |  |
| Police report in case of rape                | Ultrasound viewing or listening to heartbeat |  |

| Age when a woman can obtain an abortion without parental or judicial consent |   |  |   |
|--|---|--|---|
| Age limit for parental consent (years)                                       | _ | Age limit for judicial consent (years) | _ |
|  |   |  |   |

|                                       | Sex-selective abortion                                      |
|---------------------------------------|---|
| Prohibition of sex-selective abortion | Restrictions on the methods to detect the sex of the foetus |

| ACCESS TO ABORTION SERVICES           |                                  |   |
|---------------------------------------|----------------------------------|---|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |
| Vacuum aspiration                     | _                                | <del>-</del>                              |
| Dilatation and evacuation             | <del>-</del>                     | <del>-</del>                              |
| Combination mifepristone- misoprostol | <del>-</del>                     | <del>-</del>                              |
| Misoprostol only                      | <del>-</del>                     | _   |
| Other method(s)                       | <del>-</del>                     | <del>-</del>                              |



#### **Marshall Islands**

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |
|--|---|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |
| Misoprostol  | Yes <sup>2</sup>                                  | <del>-</del>   |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | _                | <del>-</del>       |
| Specialized abortion care public facilities       | _                | _                  |
| Private health-care centres or clinics            | _                | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | _                | <del>-</del>       |

| Health care personnel allowed to provide legal abortions                 |   |  |
|--|---|--|
| Doctors (speciality not specified)                                       | _ |  |
| Specialist doctor, including OB/GYN                                      | _ |  |
| Nurse  | _ |  |
| Midwife/nurse-midwife  | _ |  |
| Other provider(s)  | _ |  |
|  |   |  |
| Information and guidelines on abortion services                          |   |  |
| National guidelines on clinical and service delivery of induced abortion |   |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |   |
|--|---|
| National guidelines on clinical and service delivery of induced abortion   | _ |
| National guidelines on clinical and service delivery of post-abortion care | _ |
| Restrictions on public information on legal abortion services              | _ |
| Counselling for contraceptive methods during post-abortion care            | _ |

| Service delivery requirements for providers or facilities |              |  |
|---|--------------|--|
| Referral linkage to a higher-level facility               | _            |  |
| Availability of a specialist doctor                       | <del>-</del> |  |
| Minimum number of beds                                    | _            |  |
| Other facility/provider requirements                      | _            |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | _                 | _   |

#### Notes:

- 1. Abortion is generally illegal in the country. However, under the general criminal law principles of necessity, it is allowed to be performed to save the life of the pregnant woman.
  2. For non-gynaecological indications only.



Age limit for parental consent (years)

## Abortion laws and policies, 2017

### Mauritania

| LAWS ON ABORTION                                 |   |   |  |
|--|---|---|--|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | _   |  |
| To preserve health                               | No                                      | _   |  |
| To preserve physical health                      | No                                      | _   |  |
| To preserve mental health                        | No                                      | _   |  |
| In cases of intellectual or cognitive disability | No                                      | _   |  |
| In cases of incest                               | No                                      | _   |  |
| In cases of rape                                 | No                                      | _   |  |
| In cases of foetal impairment                    | No                                      | _   |  |
| For economic or social reason                    | No                                      | _   |  |
| On request                                       | No                                      | _   |  |
| For other reason(s)                              | _                                       | _   |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |  |
|---|-----|----------|-----|------------------------------------|-----|--|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |  |

| REQUIREMENTS FOR INDUCED ABORTION            |              |  |    |  |
|--|--------------|--|----|--|
| Authorizations required                      |              | Consent required                             |    |  |
| Authorization of health care professional(s) | Yes          | Spousal consent                              | No |  |
| Number of authorizations                     | <del>_</del> | Parental consent for minors                  | No |  |
| Cadre of health care professional            |              | Consent by another adult                     | _  |  |
| Doctor (specialty not specified)             | _            |  |    |  |
| Specialist doctor, including OB/GYN          | <del>_</del> | Other requirements                           |    |  |
| Nurse  | _            | Gestational age limits                       | No |  |
| Midwife/nurse-midwife                        | _            | Compulsory counselling                       | _  |  |
| Other providers                              | _            | Compulsory waiting period                    | _  |  |
| Authorized in specially licensed facilities  | No           | Length of waiting period (days)              | _  |  |
| Judicial authorization                       |              | Mandatory screening test                     |    |  |
| For minors                                   | No           | HIV test                                     | _  |  |
| In case of rape                              | _            | Other STI test(s)                            | _  |  |
| Police report in case of rape                | _            | Ultrasound viewing or listening to heartbeat | _  |  |

|                                       | Sex-selective a | abortion                                      |
|---------------------------------------|-----------------|---|
| Prohibition of sex-selective abortion | Yes             | Restrictions on the methods to detect the sex |

Age limit for judicial consent (years)

Age when a woman can obtain an abortion without parental or judicial consent

| ACCESS TO ABORTION SERVICES           |                                  |   |
|---------------------------------------|----------------------------------|---|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |
| Vacuum aspiration                     | _                                | _   |
| Dilatation and evacuation             | <del>-</del>                     | _   |
| Combination mifepristone- misoprostol | <del>-</del>                     | _   |
| Misoprostol only                      | _                                | _   |
| Other method(s)                       | <del>-</del>                     | _   |



#### Mauritania

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |
|--|---|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |
| Misoprostol  | No  | <del>-</del>   |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | _                  |
| Specialized abortion care public facilities       | <del>-</del>     | _                  |
| Private health-care centres or clinics            | <del>-</del>     | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | <del>-</del>     | _                  |

| Health care personnel allowed to provide legal abortions |   |
|--|---|
| Doctors (speciality not specified)                       | _ |
| Specialist doctor, including OB/GYN                      | _ |
| Nurse  | _ |
| Midwife/nurse-midwife                                    | _ |
| Other provider(s)  | _ |
|  |   |
| Information and guidelines on abortion services          |   |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Info | ormation and guidelines on abortion services                               |
|------|--|
|      | National guidelines on clinical and service delivery of induced abortion   |
|      | National guidelines on clinical and service delivery of post-abortion care |
|      | Restrictions on public information on legal abortion services              |
|      | Counselling for contraceptive methods during post-abortion care            |

| Service delivery requirements for providers or facilities |              |  |
|---|--------------|--|
| Referral linkage to a higher-level facility               | _            |  |
| Availability of a specialist doctor                       | <del>-</del> |  |
| Minimum number of beds                                    | _            |  |
| Other facility/provider requirements                      | _            |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to<br>alternative provider or facility |
|--|-------------------|--|
| Health-care facilities   | _                 | _  |
| Health-care providers  | _                 | _  |

#### Notes:

- Indicates that data are not available, not applicable or not specified.
- 1. Abortion is generally illegal in the country. However, under the general criminal law principles of necessity, it is allowed to be performed to save the life of the pregnant woman.



### **Mauritius**

| LAWS ON ABORTION                                 |   |   |
|--|---|---|
| Legal grounds for induced abortion               | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |
| To save life                                     | Yes                                     | No limit  |
| To preserve health                               | Yes                                     | No limit  |
| To preserve physical health                      | Yes                                     | No limit  |
| To preserve mental health                        | Yes                                     | No limit  |
| In cases of intellectual or cognitive disability | No                                      | <del>-</del>                                    |
| In cases of incest                               | _                                       | <del>-</del>                                    |
| In cases of rape                                 | Yes                                     | 14  |
| In cases of foetal impairment                    | Yes                                     | No limit  |
| For economic or social reason                    | No                                      | <del>-</del>                                    |
| On request                                       | No                                      | <del>-</del>                                    |
| For other reason(s)                              | Yes <sup>1</sup>                        | _   |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |     |  |     |
|--|-----|--|-----|
| Authorizations required                      |     | Consent required                             |     |
| Authorization of health care professional(s) | Yes | Spousal consent                              | No  |
| Number of authorizations                     | 3   | Parental consent for minors                  | Yes |
| Cadre of health care professional            |     | Consent by another adult                     | Yes |
| Doctor (specialty not specified)             | _   |  |     |
| Specialist doctor, including OB/GYN          | Yes | Other requirements                           |     |
| Nurse  | _   | Gestational age limits                       | Yes |
| Midwife/nurse-midwife                        | _   | Compulsory counselling                       | _   |
| Other providers                              | _   | Compulsory waiting period                    | _   |
| Authorized in specially licensed facilities  | Yes | Length of waiting period (days)              | _   |
| Judicial authorization                       |     | Mandatory screening test                     |     |
| For minors                                   | _   | HIV test                                     | _   |
| In case of rape                              | _   | Other STI test(s)                            | _   |
| Police report in case of rape                | Yes | Ultrasound viewing or listening to heartbeat | _   |

| Age when a woman can obtain an abortion without parental or judicial consent |    |  |   |
|--|----|--|---|
| Age limit for parental consent (years)                                       | 18 | Age limit for judicial consent (years) | _ |
|  |    |  |   |

|                                       | Sex-selective abortion |   |
|---------------------------------------|------------------------|---|
| Prohibition of sex-selective abortion | No                     | Restrictions on the methods to detect the sex of the foetus |

| ACCESS TO ABORTION SERVICES           |                                  |   |
|---------------------------------------|----------------------------------|---|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |
| Vacuum aspiration                     | _                                | _   |
| Dilatation and evacuation             | <del>-</del>                     | _   |
| Combination mifepristone- misoprostol | <del>-</del>                     | _   |
| Misoprostol only                      | _                                | _   |
| Other method(s)                       | <del>-</del>                     | _   |



#### **Mauritius**

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |
|--|---|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |
| Mifepristone and/or combination mifepristone-misoprostol | <del>-</del>                                      | _  |
| Misoprostol  | <del>-</del>                                      | _  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | _                | <del>-</del>       |
| Secondary (district-level) health-care facilities | _                | <del>-</del>       |
| Specialized abortion care public facilities       | _                | <del>-</del>       |
| Private health-care centres or clinics            | _                | <del>-</del>       |
| NGO health-care centres or clinics                | _                | <del>-</del>       |
| Other settings or facilities                      | Yes <sup>2</sup> | _                  |

| Doctors (speciality not specified)  | No  |
|-------------------------------------|-----|
| Specialist doctor, including OB/GYN | Yes |
| Nurse                               | No  |
| Midwife/nurse-midwife               | No  |
| Other provider(s)                   | _   |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guideling                      | es on abortion services |
|--|-------------------------|
| National guidelines or delivery of induced ab  |                         |
| National guidelines or delivery of post-aborti |                         |
| Restrictions on public abortion services       | information on legal    |
| Counselling for contra<br>post-abortion care   | ceptive methods during  |

| Service delivery requirements for providers or t | facilities   |
|--|--------------|
| Referral linkage to a higher-level facility      | <del>-</del> |
| Availability of a specialist doctor              | <del>-</del> |
| Minimum number of beds                           | _            |
| Other facility/provider requirements             | _            |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | Yes <sup>3</sup>  | _   |

#### Notes:

- Sexual intercourse with a female under the age of 16 or sexual intercourse with a specified person which has been reported to the police.
   Must be performed in a "prescribed institution", such as institutions, hospitals, clinics or other places for providing treatment as prescribed by regulations set forth by the Minister.
   Provider type not specified.



### Mexico

| LAWS ON ABORTION 1                               |                                      |   |
|--|--------------------------------------|---|
| Legal grounds for induced abortion <sup>2</sup>  | Currently permissible in the country | Gestational limit for each legal ground (weeks) |
| To save life                                     | Yes                                  | _   |
| To preserve health                               | Yes                                  | 20  |
| To preserve physical health                      | Yes                                  | 20  |
| To preserve mental health                        | Yes                                  | 20  |
| In cases of intellectual or cognitive disability | _                                    | _   |
| In cases of incest                               | <del>-</del>                         | _   |
| In cases of rape                                 | Yes                                  | 20  |
| In cases of foetal impairment                    | Yes                                  | 20  |
| For economic or social reason                    | Yes                                  | 12  |
| On request                                       | Yes                                  | _   |
| For other reason(s)                              | _                                    | _   |

| Persons who can be criminally charged for an illegal abortion |     |              |                                    |   |
|---|-----|--------------|------------------------------------|---|
| Woman   | Yes | Provider Yes | Other person who assists the woman | _ |

|  | REQUIREMENTS FOR | R INDUCED ABORTION    |
|--|------------------|-----------------------|
| Authorizations required                      |                  | Consent required      |
| Authorization of health care professional(s) | Yes              | Spousal consent       |
| Number of authorizations                     | 2 3              | Parental consent for  |
| Cadre of health care professional            |                  | Consent by another    |
| Doctor (specialty not specified)             | Yes              |                       |
| Specialist doctor, including OB/GYN          | _                | Other requirements    |
| Nurse  | _                | Gestational age limit |
| Midwife/nurse-midwife                        | <del>_</del>     | Compulsory counsel    |
| Other providers                              | Yes <sup>4</sup> | Compulsory waiting    |
| Authorized in specially licensed facilities  | Yes              | Length of waitin      |
| Judicial authorization                       |                  | Mandatory screening   |
| For minors                                   | _                | HIV test              |
| In case of rape                              | _                | Other STI test(s      |
| Police report in case of rape                | _                | Ultrasound viewing of |

| Parental consent for minors                  | Yes |  |
|--|-----|--|
| Consent by another adult                     | Yes |  |
|  |     |  |
| Other requirements                           |     |  |
| Gestational age limits                       | Yes |  |
| Compulsory counselling                       | _   |  |
| Compulsory waiting period                    | _   |  |
| Length of waiting period (days)              | _   |  |
| Mandatory screening test                     |     |  |
| HIV test                                     | _   |  |
| Other STI test(s)                            | _   |  |
| Ultrasound viewing or listening to heartbeat | _   |  |

| Age when a woman can obtain an abortion without parental or judicial consent |   |  |   |  |
|--|---|--|---|--|
| Age limit for parental consent (years)                                       | _ | Age limit for judicial consent (years) | _ |  |

|                                       | Sex-selective abortion                                      |
|---------------------------------------|---|
| Prohibition of sex-selective abortion | Restrictions on the methods to detect the sex of the foetus |

| ACCESS TO ABORTION SERVICES           |                                  |   |
|---------------------------------------|----------------------------------|---|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |
| Vacuum aspiration                     | Yes                              | 12  |
| Dilatation and evacuation             | Yes                              | 12  |
| Combination mifepristone- misoprostol | <del>-</del>                     | <del>-</del>                              |
| Misoprostol only                      | Yes                              | 9   |
| Other method(s)                       | <del>-</del>                     | _   |



#### **Mexico**

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |
|--|---|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |
| Mifepristone and/or combination mifepristone-misoprostol | Yes   | Yes <sup>5</sup>   |
| Misoprostol  | Yes <sup>6</sup>                                  | Yes <sup>7</sup>   |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | _                | Yes                |
| Secondary (district-level) health-care facilities | Yes              | Yes                |
| Specialized abortion care public facilities       | _                | _                  |
| Private health-care centres or clinics            | _                | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | _                  |
| Other settings or facilities                      | Yes <sup>8</sup> | _                  |

| Health care personnel allowed to provide legal abortions |                  |  |
|--|------------------|--|
| Doctors (speciality not specified)                       | _                |  |
| Specialist doctor, including OB/GYN                      | Yes              |  |
| Nurse  | _                |  |
| Midwife/nurse-midwife                                    | _                |  |
| Other provider(s)  | Yes <sup>9</sup> |  |
|  |                  |  |

| Types of insurance or other coverage for abortion                  |     |
|--|-----|
| Public health coverage for induced abortion for all women          | Yes |
| Public health coverage for induced abortion for<br>poor women only | No  |
| Public health coverage for abortion complications                  | Yes |
| Private health coverage for induced abortion                       | _   |
| Other type of coverage   | _   |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | Yes |
| National guidelines on clinical and service delivery of post-abortion care | Yes |
| Restrictions on public information on legal abortion services              | _   |
| Counselling for contraceptive methods during post-abortion care            | Yes |

| Service delivery requirements for providers or facilities |                   |  |
|---|-------------------|--|
| Referral linkage to a higher-level facility               | Yes               |  |
| Availability of a specialist doctor                       | Yes               |  |
| Minimum number of beds                                    | Yes               |  |
| Other facility/provider requirements                      | Yes <sup>10</sup> |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | 11                | Yes   |

#### Notes:

- 1. Varies by jurisdiction.
  2. The woman claims "unfavourable social, economic or family conditions, such as economic precariousness, being able to study in middle and high school, graduate or postgraduate schools or the dissolution of ties of family affection, among others".
  3. Two physicians are required, except in cases of emergency or if a delay increases the risk for the woman. In cases of risk to health (physical or psychological) the authorization of the physician in charge along with that of a specialist related to the pathology is required. In cases of forteal impairment, the diagnosis has to be certified by two specialists.
  4. Specialist related to the pathology the woman carries.

- Specialist related to the pathology the woman carries.
   With prescription only.
   For gynaecological indications.
   With prescription only.
   A medical unit with attention capacity for Legal Interruption of Pregnancy (for terminations up to the twelfth week of gestation).
   General surgeon.
   Operating room is required. Trained personnel is required.
   Only obstetrician gynaecologists and general surgeons can abstain from providing abortion services. Other physicians, nurses and social workers who assist the obstetrician gynaecologist or general surgeon cannot object. There is an obligation to refer the patient, and conscientious objection is not permitted at all if the woman's life is at risk.



| Micronesia (Fed. States of)                      |                                |  |   |
|--|--------------------------------|--|---|
|  | LAWS ON A                      | ABORTION   |   |
| Legal grounds for induced abortion               |                                | Currently permissible in the country                       | Gestational limit for each legal ground (weeks) |
| To save life                                     |                                | Yes  | <del>-</del>                                    |
| To preserve health                               |                                | No   | _   |
| To preserve physical health                      |                                | No   | _   |
| To preserve mental health                        |                                | No   | _   |
| In cases of intellectual or cognitive disability |                                | No   | _   |
| In cases of incest                               |                                | No   | _   |
| In cases of rape                                 |                                | No   | _   |
| In cases of foetal impairment                    |                                | No   | _   |
| For economic or social reason                    |                                | No   | _   |
| On request                                       |                                | No   | _   |
| For other reason(s)                              |                                | <del>-</del>   | _   |
|  |                                |  |   |
| Person   | s who can be criminally charge | ed for an illegal abortion                                 |   |
| Woman —  | Provider -                     | Other person who assists the v                             | voman —   |
|  |                                |  |   |
|  | REQUIREMENTS FOR               | INDUCED ABORTION   |   |
| Authorizations required                          |                                | Consent required   |   |
| Authorization of health care professional(s)     | _                              | Spousal consent  | <del>-</del>                                    |
| Number of authorizations                         | _                              | Parental consent for minors                                | _   |
| Cadre of health care professional                |                                | Consent by another adult                                   | _   |
| Doctor (specialty not specified)                 | _                              |  |   |
| Specialist doctor, including OB/GYN              | _                              | Other requirements   |   |
| Nurse  | _                              | Gestational age limits                                     | _   |
| Midwife/nurse-midwife                            | _                              | Compulsory counselling                                     | _   |
| Other providers                                  | _                              | Compulsory waiting period                                  | _   |
| Authorized in specially licensed facilities      | _                              | Length of waiting period (days)                            | _   |
| Judicial authorization                           |                                | Mandatory screening test                                   |   |
| For minors                                       | _                              | HIV test   | _   |
| In case of rape                                  | _                              | Other STI test(s)  | _   |
| Police report in case of rape                    | _                              | Ultrasound viewing or listening to heartbeat               | _   |
|  |                                |  |   |
| Age when a wo                                    | man can obtain an abortion wit | hout parental or judicial consent                          |   |
| Age limit for parental consent (years)           | _                              | Age limit for judicial consent (years)                     | _   |
|  |                                |  |   |
|  | Sex-selective abo              |  |   |
| Prohibition of sex-selective abortion            | <u> </u>                       | Restrictions on the methods to detect the se of the foetus | <u> </u>  |
|  |                                |  |   |
|  | ACCESS TO ABO                  | RTION SERVICES   |   |
| Methods for induced abortions                    |                                | Currently allowed in the country                           | Gestational limit for each method (weeks)       |
| Vacuum aspiration                                |                                | _  | ——————————————————————————————————————          |
| Dilatation and evacuation                        |                                | _  | _   |
| Combination mifepristone- misoprostol            |                                | _  |   |
| Misoprostol only                                 |                                | _  | _   |
| Other method(s)                                  |                                | _  | _   |
|  |                                |  |   |



Micronesia (Fed. States of)

| ACCESS TO ABORTION SERVICES (continued)  |              |              |  |
|--|--------------|--------------|--|
| Drugs for inducing abortion Included in the official list Allowed to be sold or of authorized drugs distributed by pharmacies or drug stor |              |              |  |
| Mifepristone and/or combination mifepristone-misoprostol   | <del>-</del> | _            |  |
| Misoprostol  | <del>-</del> | <del>-</del> |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | _                | <del>-</del>       |
| Specialized abortion care public facilities       | <del>-</del>     | <del>-</del>       |
| Private health-care centres or clinics            | <del>-</del>     | <del>-</del>       |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | _                | _                  |

| Health care personnel allowed to provide legal abortions |                                       |  |
|--|---------------------------------------|--|
| [  | Doctors (speciality not specified) —  |  |
| 9  | Specialist doctor, including OB/GYN — |  |
| 1  | Nurse —                               |  |
| ľ  | Midwife/nurse-midwife                 |  |
| (  | Other provider(s)                     |  |
| (  | Other provider(s)                     |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and gu                   | idelines on abortion services                  |   |
|--------------------------------------|--|---|
| National guideli<br>delivery of indu | ines on clinical and service ced abortion      | _ |
| National guideli delivery of post    | ines on clinical and service<br>-abortion care | _ |
| Restrictions on abortion service     | public information on legal<br>es              | _ |
| Counselling for post-abortion ca     | contraceptive methods during are               | _ |

| Service delivery requirements for providers or facilities |              |  |
|---|--------------|--|
| Referral linkage to a higher-level facility               | _            |  |
| Availability of a specialist doctor                       | <del>-</del> |  |
| Minimum number of beds                                    | _            |  |
| Other facility/provider requirements                      | _            |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to<br>alternative provider or facility |
|--|-------------------|--|
| Health-care facilities   | _                 | _  |
| Health-care providers  | _                 | _  |

#### Notes:

- Indicates that data are not available, not applicable or not specified
- 1. Abortion is generally illegal in the country. However, under the general criminal law principles of necessity, it is allowed to be performed to save the life of the pregnant woman.



### Monaco

| LAWS ON ABORTION                                 |   |   |
|--|---|---|
| Legal grounds for induced abortion               | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |
| To save life                                     | Yes                                     | No limit  |
| To preserve health                               | _                                       | _   |
| To preserve physical health                      | Yes                                     | No limit  |
| To preserve mental health                        | No                                      | <del>-</del>                                    |
| In cases of intellectual or cognitive disability | No                                      | <del>-</del>                                    |
| In cases of incest                               | No                                      | _   |
| In cases of rape                                 | Yes                                     | 12  |
| In cases of foetal impairment                    | Yes                                     | No limit  |
| For economic or social reason                    | No                                      | _   |
| On request                                       | No                                      | _   |
| For other reason(s)                              | _                                       | _   |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |     |  |              |
|--|-----|--|--------------|
| Authorizations required                      |     | Consent required                             |              |
| Authorization of health care professional(s) | Yes | Spousal consent                              | <del>_</del> |
| Number of authorizations                     | 3 1 | Parental consent for minors                  | Yes          |
| Cadre of health care professional            |     | Consent by another adult                     | Yes          |
| Doctor (specialty not specified)             | Yes |  |              |
| Specialist doctor, including OB/GYN          | Yes | Other requirements                           |              |
| Nurse  | _   | Gestational age limits                       | Yes          |
| Midwife/nurse-midwife                        | _   | Compulsory counselling                       | _            |
| Other providers                              | _   | Compulsory waiting period                    | _            |
| Authorized in specially licensed facilities  | _   | Length of waiting period (days)              | _            |
| Judicial authorization                       |     | Mandatory screening test                     |              |
| For minors                                   | No  | HIV test                                     | _            |
| In case of rape                              | _   | Other STI test(s)                            | _            |
| Police report in case of rape                | Yes | Ultrasound viewing or listening to heartbeat | _            |

| Age when a woman can obtain an abortion without parental or judicial consent |  |   |  |
|--|--|---|--|
| Age limit for parental consent (years)                                       | <ul> <li>Age limit for judicial consent (years)</li> </ul> | _ |  |
|  |  |   |  |
|  |  |   |  |

|                                       | Sex-selective abortion                                      |
|---------------------------------------|---|
| Prohibition of sex-selective abortion | Restrictions on the methods to detect the sex of the foetus |
|                                       |   |

| ACCESS TO ABORTION SERVICES           |                                  |   |
|---------------------------------------|----------------------------------|---|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |
| Vacuum aspiration                     | _                                | <del>-</del>                              |
| Dilatation and evacuation             | <del>-</del>                     | <del>-</del>                              |
| Combination mifepristone- misoprostol | <del>-</del>                     | <del>-</del>                              |
| Misoprostol only                      | _                                | <del>-</del>                              |
| Other method(s)                       | _                                | _   |



#### Monaco

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |
|--|---|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |
| Mifepristone and/or combination mifepristone-misoprostol | _   | _  |
| Misoprostol  | <del>-</del>                                      | <del>-</del>   |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | No               | _                  |
| Secondary (district-level) health-care facilities | Yes              | _                  |
| Specialized abortion care public facilities       | <del>-</del>     | _                  |
| Private health-care centres or clinics            | No               | _                  |
| NGO health-care centres or clinics                | No               | _                  |
| Other settings or facilities                      | Yes <sup>3</sup> | _                  |

| Health care personnel allowed to provide legal abortions |     |  |
|--|-----|--|
| Doctors (speciality not specified)                       | Yes |  |
| Specialist doctor, including OB/GYN                      | _   |  |
| Nurse  | No  |  |
| Midwife/nurse-midwife                                    | No  |  |
| Other provider(s)  | _   |  |
|  |     |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |              |
|--|--------------|
| National guidelines on clinical and service delivery of induced abortion   | _            |
| National guidelines on clinical and service delivery of post-abortion care | _            |
| Restrictions on public information on legal abortion services              | _            |
| Counselling for contraceptive methods during<br>post-abortion care         | <del>-</del> |

| Service delivery requirements for providers or t | facilities   |
|--|--------------|
| Referral linkage to a higher-level facility      | _            |
| Availability of a specialist doctor              | <del>-</del> |
| Minimum number of beds                           | _            |
| Other facility/provider requirements             | _            |

| Conscientious objection to the provision of legally induced abortion | ced abortion Allowed to object Required to ref<br>alternative provider |     |
|--|--|-----|
| Health-care facilities   | _  | _   |
| Health-care providers  | Yes <sup>4</sup>   | Yes |

#### Notes:

- Indicates that data are not available, not applicable or not specified.
- 1. Authorisation is required from the doctor coordinator of the Prenatal Coordination and Family Support Centre, the treating obstetrician or a doctor designated by him/her and a specialist agreed on by the former two. Two of these have to attest to the 1. Authorisation is required from the doctor coordinator of the Prenatal Coordination and Family Support Centre, the treating obstetrician or a doctor designated by him/her and a specialist agreed on by the former two. Two of these have to attest to the concurring year with the group.

  2. Parental authorisation may be waived in case of an emergency. If parental consent is not obtained, or if the pregnancy is the result of a criminal act, then the procedure can be authorised by the Tribunal of the first instance. Abortion can be judicially authorised for a minor if parental authorisation is not obtained or if the pregnancy is a result of a criminal act. However, in other circumstances judicial authorisation is not required.

  3. Abortion may only be performed in a public hospital.

  4. Provider type not specified.



Prohibition of sex-selective abortion

### Abortion laws and policies, 2017

### Mongolia

| LAWS ON ABORTION                                 |                                      |   |  |  |
|--|--------------------------------------|---|--|--|
| Legal grounds for induced abortion               | Currently permissible in the country | Gestational limit for each legal ground (weeks) |  |  |
| To save life                                     | Yes                                  | 23  |  |  |
| To preserve health                               | Yes                                  | 23  |  |  |
| To preserve physical health                      | Yes                                  | 23  |  |  |
| To preserve mental health                        | <del>-</del>                         | _   |  |  |
| In cases of intellectual or cognitive disability | Yes                                  | _   |  |  |
| In cases of incest                               | Yes                                  | _   |  |  |
| In cases of rape                                 | Yes                                  | <del>-</del>                                    |  |  |
| In cases of foetal impairment                    | Yes                                  | _   |  |  |
| For economic or social reason                    | _                                    | _   |  |  |
| On request                                       | Yes                                  | 14  |  |  |
| For other reason(s)                              | Yes <sup>2</sup>                     | _   |  |  |

| Persons who can be criminally charged for an illegal abortion |   |          |     |                                    |   |  |
|---|---|----------|-----|------------------------------------|---|--|
| Woman   | _ | Provider | Yes | Other person who assists the woman | _ |  |

| disculantiana na manda d                     |                  | Company no mains d                           |     |
|--|------------------|--|-----|
| Authorizations required                      |                  | Consent required                             |     |
| Authorization of health care professional(s) | Yes              | Spousal consent                              | No  |
| Number of authorizations                     | _                | Parental consent for minors                  | Yes |
| Cadre of health care professional            |                  | Consent by another adult                     | Yes |
| Doctor (specialty not specified)             | _                |  |     |
| Specialist doctor, including OB/GYN          | _                | Other requirements                           |     |
| Nurse  | _                | Gestational age limits                       | Yes |
| Midwife/nurse-midwife                        | _                | Compulsory counselling                       | _   |
| Other providers                              | Yes <sup>3</sup> | Compulsory waiting period                    | _   |
| Authorized in specially licensed facilities  | Yes              | Length of waiting period (days)              | _   |
| Judicial authorization                       |                  | Mandatory screening test                     |     |
| For minors                                   | _                | HIV test                                     | _   |
| In case of rape                              | _                | Other STI test(s)                            | _   |
| Police report in case of rape                | _                | Ultrasound viewing or listening to heartbeat | _   |

|  | Sex-selective | abortion                               |   |
|--|---------------|--|---|
|  |               |  |   |
| Age limit for parental consent (years) | 18            | Age limit for judicial consent (years) | _ |

Restrictions on the methods to detect the sex

Age when a woman can obtain an abortion without parental or judicial consent

| ACCESS TO ABORTION SERVICES  |                  |            |  |  |
|--|------------------|------------|--|--|
| Methods for induced abortions         Currently allowed in the country         Gestational limit for each method (weeks) |                  |            |  |  |
| Vacuum aspiration  | Yes              | 12         |  |  |
| Dilatation and evacuation  | Yes              | 13-22      |  |  |
| Combination mifepristone- misoprostol  | Yes              | 13-22      |  |  |
| Misoprostol only   | _                | _          |  |  |
| Other method(s)  | Yes <sup>4</sup> | 20 or over |  |  |



### Mongolia

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | Yes   | _  |  |
| Misoprostol  | Yes <sup>5</sup>                                  | _  |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | No               | No                 |
| Secondary (district-level) health-care facilities | Yes              | Yes                |
| Specialized abortion care public facilities       | Yes              | Yes                |
| Private health-care centres or clinics            | Yes              | Yes                |
| NGO health-care centres or clinics                | Yes              | Yes                |
| Other settings or facilities                      | _                | <del>-</del>       |

| Health care personnel allowed to provide legal abortions |     |  |
|--|-----|--|
| Doctors (speciality not specified)                       | No  |  |
| Specialist doctor, including OB/GYN                      | Yes |  |
| Nurse  | No  |  |
| Midwife/nurse-midwife                                    | No  |  |
| Other provider(s)  | _   |  |
|  |     |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | Yes |
| National guidelines on clinical and service delivery of post-abortion care | Yes |
| Restrictions on public information on legal abortion services              | _   |
| Counselling for contraceptive methods during post-abortion care            | Yes |

| Service delivery requirements for providers or facilities |     |  |
|---|-----|--|
| Referral linkage to a higher-level facility               | Yes |  |
| Availability of a specialist doctor                       | Yes |  |
| Minimum number of beds                                    | Yes |  |
| Other facility/provider requirements                      | _   |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | _                 | _   |

#### Notes:

- An abortion can be performed during the first three months of pregnancy and later if the pregnant woman suffers from an illness seriously threatening her health. Approval of the family or of the spouse is required.
   The woman is over the age of 40.
   Medical Commission.
   Medical Commission.
   For gynaecological indications.



### Montenegro

| LAWS ON ABORTION 1                               |   |   |
|--|---|---|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |
| To save life                                     | Yes                                     | 32  |
| To preserve health                               | Yes                                     | 32  |
| To preserve physical health                      | <del>-</del>                            | <del>_</del>                                    |
| To preserve mental health                        | <del>-</del>                            | <del>-</del>                                    |
| In cases of intellectual or cognitive disability | <del>-</del>                            | <del>-</del>                                    |
| In cases of incest                               | Yes                                     | 20  |
| In cases of rape                                 | Yes                                     | 20  |
| In cases of foetal impairment                    | Yes                                     | 20  |
| For economic or social reason                    | <del>-</del>                            | <del>-</del>                                    |
| On request                                       | Yes                                     | 10  |
| For other reason(s)                              | Yes <sup>2</sup>                        | _   |

| Persons who can be criminally charged for an illegal abortion |   |          |     |                                    |     |  |
|---|---|----------|-----|------------------------------------|-----|--|
| Woman   | _ | Provider | Yes | Other person who assists the woman | Yes |  |

|  | REQUIREMENTS FOR | OR INDUCED ABORTION                |  |
|--|------------------|------------------------------------|--|
| Authorizations required                      |                  | Consent required                   |  |
| Authorization of health care professional(s) | Yes              | Spousal consent                    |  |
| Number of authorizations                     | 3                | Parental consent for minors        |  |
| Cadre of health care professional            |                  | Consent by another adult           |  |
| Doctor (specialty not specified)             | _                |                                    |  |
| Specialist doctor, including OB/GYN          | Yes              | Other requirements                 |  |
| Nurse  | _                | Gestational age limits             |  |
| Midwife/nurse-midwife                        | <del>-</del>     | Compulsory counselling             |  |
| Other providers                              | _                | Compulsory waiting period          |  |
| Authorized in specially licensed facilities  | Yes              | Length of waiting period (day      |  |
| Judicial authorization                       |                  | Mandatory screening test           |  |
| For minors                                   | _                | HIV test                           |  |
| In case of rape                              | _                | Other STI test(s)                  |  |
| Police report in case of rape                | _                | Ultrasound viewing or listening to |  |
|  |                  |                                    |  |

| Consent by another adult                     | Yes        |  |
|--|------------|--|
|  |            |  |
| Other requirements                           |            |  |
| Gestational age limits                       | Yes        |  |
| Compulsory counselling                       | _          |  |
| Compulsory waiting period                    | Yes        |  |
| Length of waiting period (days)              | <b>3</b> 3 |  |
| Mandatory screening test                     |            |  |
| HIV test                                     | _          |  |
| Other STI test(s)                            | _          |  |
| Ultrasound viewing or listening to heartbeat | _          |  |

No

| Age when a woman can obtain an abortion without parental or judicial consent |    |  |   |
|--|----|--|---|
| Age limit for parental consent (years)                                       | 16 | Age limit for judicial consent (years) | _ |

|                                       | Sex-selective abortion |   |                  |
|---------------------------------------|------------------------|---|------------------|
| Prohibition of sex-selective abortion | Yes                    | Restrictions on the methods to detect the sex of the foetus | Yes <sup>4</sup> |

| ACCESS TO ABORTION SERVICES           |                                  |   |
|---------------------------------------|----------------------------------|---|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |
| Vacuum aspiration                     | <del>-</del>                     | <del>-</del>                              |
| Dilatation and evacuation             | <del>-</del>                     | <del>-</del>                              |
| Combination mifepristone- misoprostol | <del>-</del>                     | <del>-</del>                              |
| Misoprostol only                      | _                                | <del>-</del>                              |
| Other method(s)                       | <del>-</del>                     | <del>-</del>                              |



### Montenegro

| ACCESS TO ABO  | ORTION SERVICES (continued)                       |  |
|--|---|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |
| Misoprostol  | No  | <del>-</del>   |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | No               | <del>-</del>       |
| Secondary (district-level) health-care facilities | Yes              | <del>-</del>       |
| Specialized abortion care public facilities       | _                | <del>-</del>       |
| Private health-care centres or clinics            | _                | <del>-</del>       |
| NGO health-care centres or clinics                | _                | <del>-</del>       |
| Other settings or facilities                      | _                | _                  |

| Health care personnel allowed to provide legal abortions |     |
|--|-----|
| Doctors (speciality not specified)                       | _   |
| Specialist doctor, including OB/GYN                      | Yes |
| Nurse  | _   |
| Midwife/nurse-midwife                                    | _   |
| Other provider(s)  | _   |

| Types of insurance or other coverage for abortion                  |     |
|--|-----|
| Public health coverage for induced abortion for all women          | Yes |
| Public health coverage for induced abortion for<br>poor women only | Yes |
| Public health coverage for abortion complications                  | _   |
| Private health coverage for induced abortion                       | _   |
| Other type of coverage   | _   |

| Information and guidelines on abortion services                            |   |
|--|---|
| National guidelines on clinical and service delivery of induced abortion   | _ |
| National guidelines on clinical and service delivery of post-abortion care | _ |
| Restrictions on public information on legal abortion services              | _ |
| Counselling for contraceptive methods during post-abortion care            | _ |

| Service delivery requirements for providers or facilities |                  |  |
|---|------------------|--|
| Referral linkage to a higher-level facility               | _                |  |
| Availability of a specialist doctor                       | <del>-</del>     |  |
| Minimum number of beds                                    | _                |  |
| Other facility/provider requirements                      | Yes <sup>5</sup> |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to<br>alternative provider or facility |
|--|-------------------|--|
| Health-care facilities   | _                 | _  |
| Health-care providers  | _                 | _  |

#### Notes:

- Varies by jurisdiction.
   Abortion in circumstances where the pregnancy or childbirth could lead to difficult personal or family circumstances is permissible up to 20 weeks of gestation.
   From the point of application (in writing).
   It is prohibited to use early genetic tests (up to 10 weeks of pregnancy), to determine the sex, except when there are risks of hereditary diseases.
   Abortion may be carried out only in health institutions which meet the requirements in terms of space, staff and equipment to perform these activities. They must also meet the requirements set out by the State Administration competent for health affairs.



### Morocco

| LAWS ON ABORTION                                 |                                      |   |
|--|--------------------------------------|---|
| Legal grounds for induced abortion               | Currently permissible in the country | Gestational limit for each legal ground (weeks) |
| To save life                                     | Yes                                  | No limit  |
| To preserve health                               | Yes                                  | _   |
| To preserve physical health                      | _                                    | _   |
| To preserve mental health                        | <del>-</del>                         | _   |
| In cases of intellectual or cognitive disability | No                                   | _   |
| In cases of incest                               | No                                   | _   |
| In cases of rape                                 | No                                   | _   |
| In cases of foetal impairment                    | No                                   | _   |
| For economic or social reason                    | No                                   | _   |
| On request                                       | No                                   | _   |
| For other reason(s)                              | _                                    | _   |

|       |     | Persons who can be criminally cha | arged for | an illegal abortion                |     |
|-------|-----|-----------------------------------|-----------|------------------------------------|-----|
| Woman | Yes | Provider                          | Yes       | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |     |  |     |
|--|-----|--|-----|
| Authorizations required                      |     | Consent required                             |     |
| Authorization of health care professional(s) | Yes | Spousal consent                              | Yes |
| Number of authorizations                     | 3   | Parental consent for minors                  | Yes |
| Cadre of health care professional            |     | Consent by another adult                     | Yes |
| Doctor (specialty not specified)             | Yes |  |     |
| Specialist doctor, including OB/GYN          | _   | Other requirements                           |     |
| Nurse  | _   | Gestational age limits                       | _   |
| Midwife/nurse-midwife                        | _   | Compulsory counselling                       | _   |
| Other providers                              | _   | Compulsory waiting period                    | _   |
| Authorized in specially licensed facilities  | _   | Length of waiting period (days)              | _   |
| Judicial authorization                       |     | Mandatory screening test                     |     |
| For minors                                   | _   | HIV test                                     | _   |
| In case of rape                              | _   | Other STI test(s)                            | _   |
| Police report in case of rape                | _   | Ultrasound viewing or listening to heartbeat | _   |

| Age when a woman can obtain an abortion without parental or judicial consent |  |  |
|--|--|--|
| Age limit for parental consent (years)                                       | <ul><li>Age limit for judicial consent (years)</li></ul> |  |
|  |  |  |
|  |  |  |

|                                       | Sex-selective aboution                                      |
|---------------------------------------|---|
| Prohibition of sex-selective abortion | Restrictions on the methods to detect the sex of the foetus |
|                                       |   |
|                                       |   |

| ACCESS TO ABORTION SERVICES           |                                  |   |
|---------------------------------------|----------------------------------|---|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |
| Vacuum aspiration                     | _                                | <del>-</del>                              |
| Dilatation and evacuation             | <del>-</del>                     | <del>-</del>                              |
| Combination mifepristone- misoprostol | <del>-</del>                     | <del>-</del>                              |
| Misoprostol only                      | _                                | <del>-</del>                              |
| Other method(s)                       | _                                | _   |



#### Morocco

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |
|--|---|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |
| Misoprostol  | Yes <sup>2</sup>                                  | _  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | _                  |
| Specialized abortion care public facilities       | <del>-</del>     | _                  |
| Private health-care centres or clinics            | <del>-</del>     | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | <del>-</del>     | _                  |

| lealth care personnel allowed to provide legal abortions |     |  |
|--|-----|--|
| Doctors (speciality not specified)                       | Yes |  |
| Specialist doctor, including OB/GYN                      | _   |  |
| Nurse  | No  |  |
| Midwife/nurse-midwife                                    | No  |  |
| Other provider(s)  | _   |  |
|  |     |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | _   |
| National guidelines on clinical and service delivery of post-abortion care | Yes |
| Restrictions on public information on legal abortion services              | Yes |
| Counselling for contraceptive methods during post-abortion care            | Yes |

| Service delivery requirements for providers or for | acilities |
|--|-----------|
| Referral linkage to a higher-level facility        | _         |
| Availability of a specialist doctor                | _         |
| Minimum number of beds                             | _         |
| Other facility/provider requirements               | _         |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to<br>alternative provider or facility |
|--|-------------------|--|
| Health-care facilities   | _                 | _  |
| Health-care providers  | Yes <sup>3</sup>  | Yes  |

#### Notes:

- Abortion is permitted for therapeutic purposes.
   For gynaecological indications.
   Provider type not specified.



### Mozambique

| LAWS ON ABORTION                                 |                                      |   |  |
|--|--------------------------------------|---|--|
| Legal grounds for induced abortion               | Currently permissible in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                  | No limit  |  |
| To preserve health                               | Yes                                  | _   |  |
| To preserve physical health                      | Yes                                  | 12  |  |
| To preserve mental health                        | Yes                                  | 12  |  |
| In cases of intellectual or cognitive disability | <del>-</del>                         | <del>-</del>                                    |  |
| In cases of incest                               | Yes                                  | 16  |  |
| In cases of rape                                 | Yes                                  | 16  |  |
| In cases of foetal impairment                    | Yes                                  | 24  |  |
| For economic or social reason                    | <del>-</del>                         | _   |  |
| On request                                       | Yes                                  | 12  |  |
| For other reason(s)                              | _                                    | _   |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

|  | REQUIREMENTS FOR | R INDUCED ABORTIO  |
|--|------------------|--------------------|
| Authorizations required                      |                  | Consent required   |
| Authorization of health care professional(s) | Yes              | Spousal consent    |
| Number of authorizations                     | 2 1              | Parental consent   |
| Cadre of health care professional            |                  | Consent by anoth   |
| Doctor (specialty not specified)             | _                |                    |
| Specialist doctor, including OB/GYN          | _                | Other requirement  |
| Nurse  | _                | Gestational age li |
| Midwife/nurse-midwife                        | _                | Compulsory coun    |
| Other providers                              | _                | Compulsory waiti   |
| Authorized in specially licensed facilities  | Yes              | Length of wa       |
| Judicial authorization                       |                  | Mandatory screen   |
| For minors                                   | _                | HIV test           |
| In case of rape                              | _                | Other STI tes      |
| Police report in case of rape                | _                | Ultrasound viewir  |
|  |                  |                    |

| i arental consent for millions               | 162          |  |
|--|--------------|--|
| Consent by another adult                     | Yes          |  |
|  |              |  |
| Other requirements                           |              |  |
| Gestational age limits                       | Yes          |  |
| Compulsory counselling                       | _            |  |
| Compulsory waiting period                    | _            |  |
| Length of waiting period (days)              | _            |  |
| Mandatory screening test                     |              |  |
| HIV test                                     | _            |  |
| Other STI test(s)                            | _            |  |
| Ultrasound viewing or listening to heartbeat | <del>-</del> |  |

| Age when a woman can obtain an abortion without parental or judicial consent |    |  |   |
|--|----|--|---|
| Age limit for parental consent (years)                                       | 16 | Age limit for judicial consent (years) | _ |

|                                       | Sex-selective abortion |   |
|---------------------------------------|------------------------|---|
| Prohibition of sex-selective abortion | Yes                    | Restrictions on the methods to detect the sex of the foetus |

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | <del>-</del>                     | _   |  |
| Dilatation and evacuation             | _                                | _   |  |
| Combination mifepristone- misoprostol | _                                | _   |  |
| Misoprostol only                      | Yes                              | 24  |  |
| Other method(s)                       | Yes <sup>2</sup>                 | _   |  |



### Mozambique

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |  |
| Misoprostol  | Yes <sup>3</sup>                                  | Yes <sup>4</sup>   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>_</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | <del>-</del>       |
| Specialized abortion care public facilities       | <del>-</del>     | <del>-</del>       |
| Private health-care centres or clinics            | <del>-</del>     | <del>-</del>       |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | Yes <sup>5</sup> | _                  |

| Health care personnel allowed to provide legal abortions |                  |  |
|--|------------------|--|
| Doctors (speciality not specified)                       | Yes              |  |
| Specialist doctor, including OB/GYN                      | _                |  |
| Nurse  | _                |  |
| Midwife/nurse-midwife                                    | _                |  |
| Other provider(s)  | Yes <sup>6</sup> |  |
|  |                  |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |              |
|--|--------------|
| National guidelines on clinical and service delivery of induced abortion   | _            |
| National guidelines on clinical and service delivery of post-abortion care | _            |
| Restrictions on public information on legal abortion services              | _            |
| Counselling for contraceptive methods during<br>post-abortion care         | <del>-</del> |

| Service delivery requirements for providers or facilities |   |  |
|---|---|--|
| Referral linkage to a higher-level facility               | _ |  |
| Availability of a specialist doctor                       | _ |  |
| Minimum number of beds                                    | _ |  |
| Other facility/provider requirements                      | _ |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to<br>alternative provider or facility |  |
|--|-------------------|--|--|
| Health-care facilities   | _                 | _  |  |
| Health-care providers  | Yes <sup>7</sup>  | _  |  |

#### Notes:

- Indicates that data are not available, not applicable or not specified.
- Medical certificate, written and signed before the intervention by two health professionals different from the one by whom or under whose direction the abortion will be issued.
   Dinoprost (prostaglandin F2 alpha).
   For gynaecological indications.
   With prescription only.
   Medical health establishment, recognized for the provision of services.
   Health professional, acting under direction of doctor.
   Provider type not specified.



### Myanmar

| LAWS ON ABORTION                                 |   |   |  |
|--|---|---|--|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | _   |  |
| To preserve health                               | No                                      | _   |  |
| To preserve physical health                      | No                                      | <del>-</del>                                    |  |
| To preserve mental health                        | No                                      | _   |  |
| In cases of intellectual or cognitive disability | No                                      | _   |  |
| In cases of incest                               | No                                      | _   |  |
| In cases of rape                                 | No                                      | _   |  |
| In cases of foetal impairment                    | No                                      | _   |  |
| For economic or social reason                    | No                                      | _   |  |
| On request                                       | No                                      | _   |  |
| For other reason(s)                              | _                                       | _   |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |  |   |
|--|--|---|
| Authorizations required                      | Consent required                             |   |
| Authorization of health care professional(s) | Spousal consent                              | _ |
| Number of authorizations                     | Parental consent for minors                  | _ |
| Cadre of health care professional            | Consent by another adult                     | _ |
| Doctor (specialty not specified)             | _  |   |
| Specialist doctor, including OB/GYN          | Other requirements                           |   |
| Nurse  | Gestational age limits                       | _ |
| Midwife/nurse-midwife                        | Compulsory counselling                       | _ |
| Other providers                              | Compulsory waiting period                    | _ |
| Authorized in specially licensed facilities  | Length of waiting period (days)              | _ |
| Judicial authorization                       | Mandatory screening test                     |   |
| For minors                                   | HIV test                                     | _ |
| In case of rape                              | Other STI test(s)                            | _ |
| Police report in case of rape                | Ultrasound viewing or listening to heartbeat | _ |

| Ago William dan obtain an abortion William or Jacobia Consolit |  |  |
|--|--|--|
| Age limit for parental consent (years)                         | Age limit for judicial consent (years) |  |
|  |  |  |
|  |  |  |

|                                       | Sex-selective abortion                                      |
|---------------------------------------|---|
| Prohibition of sex-selective abortion | Restrictions on the methods to detect the sex of the foetus |

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | _                                | _   |  |
| Dilatation and evacuation             | <del>-</del>                     | _   |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | _   |  |
| Misoprostol only                      | _                                | _   |  |
| Other method(s)                       | <del>-</del>                     | _   |  |



### **Myanmar**

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | <del>-</del>   |  |
| Misoprostol  | Yes 1   | <del>-</del>   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | _                | Yes                |
| Secondary (district-level) health-care facilities | <del>-</del>     | Yes                |
| Specialized abortion care public facilities       | _                | <del>-</del>       |
| Private health-care centres or clinics            | <del>-</del>     | <del>-</del>       |
| NGO health-care centres or clinics                | _                | <del>-</del>       |
| Other settings or facilities                      | _                | Yes <sup>2</sup>   |

| alth care personnel allowed to provide legal abortion                    | ns |
|--|----|
| Doctors (speciality not specified)                                       | _  |
| Specialist doctor, including OB/GYN                                      | _  |
| Nurse  | _  |
| Midwife/nurse-midwife  | _  |
| Other provider(s)  | _  |
| armetian and guidelines on chartier convisce                             |    |
| ormation and guidelines on abortion services                             |    |
| National guidelines on clinical and service delivery of induced abortion | _  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |     | Service delivery requirements for providers or facilities |  |
|--|-----|---|--|
| National guidelines on clinical and service delivery of induced abortion   | _   | Referral linkage to a higher-level facility —             |  |
| National guidelines on clinical and service delivery of post-abortion care | Yes | Availability of a specialist doctor —                     |  |
| Restrictions on public information on legal abortion services              | _   | Minimum number of beds —                                  |  |
| Counselling for contraceptive methods during<br>post-abortion care         | Yes | Other facility/provider requirements —                    |  |
|  |     |   |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | _                 | _   |

#### Notes:

- For gynaecological indications.
   Community level health workers.



#### Namibia

| LAWS ON ABORTION                                 |   |   |  |
|--|---|---|--|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | _   |  |
| To preserve health                               | Yes                                     | <del>-</del>                                    |  |
| To preserve physical health                      | Yes                                     | _   |  |
| To preserve mental health                        | Yes                                     | _   |  |
| In cases of intellectual or cognitive disability | Yes                                     | _   |  |
| In cases of incest                               | Yes                                     | _   |  |
| In cases of rape                                 | Yes                                     | <del>-</del>                                    |  |
| In cases of foetal impairment                    | Yes                                     | _   |  |
| For economic or social reason                    | No                                      | _   |  |
| On request                                       | No                                      | _   |  |
| For other reason(s)                              | _                                       | _   |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |     |  |    |
|--|-----|--|----|
| Authorizations required                      |     | Consent required                             |    |
| Authorization of health care professional(s) | Yes | Spousal consent                              | _  |
| Number of authorizations                     | 2   | Parental consent for minors                  | No |
| Cadre of health care professional            |     | Consent by another adult                     | _  |
| Doctor (specialty not specified)             | Yes |  |    |
| Specialist doctor, including OB/GYN          | _   | Other requirements                           |    |
| Nurse  | _   | Gestational age limits                       | No |
| Midwife/nurse-midwife                        | _   | Compulsory counselling                       | _  |
| Other providers                              | _   | Compulsory waiting period                    | _  |
| Authorized in specially licensed facilities  | No  | Length of waiting period (days)              | _  |
| Judicial authorization                       |     | Mandatory screening test                     |    |
| For minors                                   | No  | HIV test                                     | _  |
| In case of rape                              | Yes | Other STI test(s)                            | _  |
| Police report in case of rape                | _   | Ultrasound viewing or listening to heartbeat | _  |

| Ago when a woman our obtain an aborden without parental or judicial consent |  |  |  |
|---|--|--|--|
| Age limit for parental consent (years)                                      | Age limit for judicial consent (years) |  |  |
|   |  |  |  |
|   |  |  |  |

|                                       | Sex-selective abortion | on  |
|---------------------------------------|------------------------|---|
| Prohibition of sex-selective abortion | No                     | Restrictions on the methods to detect the sex of the foetus |
|                                       |                        |   |

| ACCESS TO ABORTION SERVICES           |                                  |   |
|---------------------------------------|----------------------------------|---|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |
| Vacuum aspiration                     | _                                | _   |
| Dilatation and evacuation             | <del>-</del>                     | <del>-</del>                              |
| Combination mifepristone- misoprostol | <del>-</del>                     | <del>-</del>                              |
| Misoprostol only                      | _                                | <del>-</del>                              |
| Other method(s)                       | _                                | _   |



#### Namibia

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |  |
| Misoprostol  | _   | <del>-</del>   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | Yes                |
| Secondary (district-level) health-care facilities | <del>-</del>     | Yes                |
| Specialized abortion care public facilities       | _                | _                  |
| Private health-care centres or clinics            | <del>-</del>     | <del>-</del>       |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | _                | _                  |

| Health care personnel allowed to provide legal abortions |     |  |
|--|-----|--|
| Doctors (speciality not specified)                       | Yes |  |
| Specialist doctor, including OB/GYN                      | _   |  |
| Nurse  | _   |  |
| Midwife/nurse-midwife                                    | _   |  |
| Other provider(s)  | _   |  |
|  |     |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |   |
|--|---|
| National guidelines on clinical and service delivery of induced abortion   | _ |
| National guidelines on clinical and service delivery of post-abortion care | _ |
| Restrictions on public information on legal abortion services              | _ |
| Counselling for contraceptive methods during<br>post-abortion care         | _ |

| Service delivery requirements for providers or facilities |              |  |  |
|---|--------------|--|--|
| Referral linkage to a higher-level facility               | _            |  |  |
| Availability of a specialist doctor                       | <del>-</del> |  |  |
| Minimum number of beds                                    | <del>-</del> |  |  |
| Other facility/provider requirements                      | Yes 1        |  |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | Yes <sup>2</sup>  | _   |

#### Notes:

- Facility must be authorised.
   Provider type not specified.



Prohibition of sex-selective abortion

## Abortion laws and policies, 2017

#### Nauru

| LAWS ON ABORTION                                 |   |   |  |
|--|---|---|--|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | _   |  |
| To preserve health                               | Yes                                     | _   |  |
| To preserve physical health                      | Yes                                     | _   |  |
| To preserve mental health                        | Yes                                     | _   |  |
| In cases of intellectual or cognitive disability | No                                      | _   |  |
| In cases of incest                               | Yes                                     | _   |  |
| In cases of rape                                 | Yes                                     | _   |  |
| In cases of foetal impairment                    | Yes                                     | _   |  |
| For economic or social reason                    | No                                      | _   |  |
| On request                                       | No                                      | _   |  |
| For other reason(s)                              | _                                       | _   |  |

|       |     | Persons who can be criminally cha | arged for | an illegal abortion                |     |
|-------|-----|-----------------------------------|-----------|------------------------------------|-----|
| Woman | Yes | Provider                          | Yes       | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |  |   |  |
|--|--|---|--|
| Authorizations required                      | Consent required                             |   |  |
| Authorization of health care professional(s) | — Spousal consent                            | _ |  |
| Number of authorizations                     | Parental consent for minors                  | _ |  |
| Cadre of health care professional            | Consent by another adult                     | _ |  |
| Doctor (specialty not specified)             | _  |   |  |
| Specialist doctor, including OB/GYN          | Other requirements                           |   |  |
| Nurse  | — Gestational age limits                     | _ |  |
| Midwife/nurse-midwife                        | — Compulsory counselling                     | _ |  |
| Other providers                              | Compulsory waiting period                    | _ |  |
| Authorized in specially licensed facilities  | Length of waiting period (days)              | _ |  |
| Judicial authorization                       | Mandatory screening test                     |   |  |
| For minors                                   | - HIV test                                   | _ |  |
| In case of rape                              | — Other STI test(s)                          | _ |  |
| Police report in case of rape                | Ultrasound viewing or listening to heartbeat | _ |  |

| Age when a woman can obtain an abortion without parental or judicial consent |   |  |   |  |
|--|---|--|---|--|
| Age limit for parental consent (years)                                       | _ | Age limit for judicial consent (years) | _ |  |
|  |   |  |   |  |

Sex-selective abortion

|                               | of the foetus                    |   |
|-------------------------------|----------------------------------|---|
|                               | ACCESS TO ABORTION SERVICES      |   |
| Methods for induced abortions | Currently allowed in the country | Gestational limit for each method (weeks) |
| Vacuum aspiration             | _                                | <del>_</del>                              |

Restrictions on the methods to detect the sex

 Vacuum aspiration
 —
 —

 Dilatation and evacuation
 —
 —

 Combination mifepristone- misoprostol
 —
 —

 Misoprostol only
 —
 —

 Other method(s)
 —
 —



#### Nauru

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |  |
| Misoprostol  | Yes <sup>2</sup>                                  | <del>-</del>   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>_</del>     | <del>_</del>       |
| Secondary (district-level) health-care facilities | _                | <del>-</del>       |
| Specialized abortion care public facilities       | <del>-</del>     | <del>-</del>       |
| Private health-care centres or clinics            | _                | <del>-</del>       |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | _                | _                  |

| Doctors (speciality not specified)  | _ |
|-------------------------------------|---|
| Specialist doctor, including OB/GYN | _ |
| Nurse                               | _ |
| Midwife/nurse-midwife               | _ |
| Other provider(s)                   | _ |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Info | ormation and guidelines on abortion services                               |
|------|--|
|      | National guidelines on clinical and service delivery of induced abortion   |
|      | National guidelines on clinical and service delivery of post-abortion care |
|      | Restrictions on public information on legalabortion services               |
|      | Counselling for contraceptive methods during post-abortion care            |

| Service delivery requirements for providers or t | facilities   |
|--|--------------|
| Referral linkage to a higher-level facility      | <del>-</del> |
| Availability of a specialist doctor              | <del>-</del> |
| Minimum number of beds                           | _            |
| Other facility/provider requirements             | _            |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | _                 | _   |

#### Notes:

- 1. Surgical operation performed in good faith and with reasonable care and skill upon an unborn child for the preservation of the mother's life, if the performance of the operation is reasonable, having regard to the patient's state at the time and to all the circumstances of the case.

  2. For gynaecological indications.



### Nepal

| LAWS ON ABORTION  |     |          |  |  |  |
|---|-----|----------|--|--|--|
| Legal grounds for induced abortion Currently permissible Gestational limit for in the country each legal ground (week |     |          |  |  |  |
| To save life  | Yes | No limit |  |  |  |
| To preserve health  | Yes | No limit |  |  |  |
| To preserve physical health   | Yes | No limit |  |  |  |
| To preserve mental health   | Yes | No limit |  |  |  |
| In cases of intellectual or cognitive disability  | _   | _        |  |  |  |
| In cases of incest  | Yes | 18       |  |  |  |
| In cases of rape  | Yes | 18       |  |  |  |
| In cases of foetal impairment   | Yes | No limit |  |  |  |
| For economic or social reason   | _   | _        |  |  |  |
| On request  | Yes | 12       |  |  |  |
| For other reason(s)   | _   | _        |  |  |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |     |  |     |  |
|--|-----|--|-----|--|
| Authorizations required                      |     | Consent required                             |     |  |
| Authorization of health care professional(s) | Yes | Spousal consent                              | No  |  |
| Number of authorizations                     | 1   | Parental consent for minors                  | Yes |  |
| Cadre of health care professional            |     | Consent by another adult                     | Yes |  |
| Doctor (specialty not specified)             | _   |  |     |  |
| Specialist doctor, including OB/GYN          | Yes | Other requirements                           |     |  |
| Nurse  | _   | Gestational age limits                       | Yes |  |
| Midwife/nurse-midwife                        | _   | Compulsory counselling                       | No  |  |
| Other providers                              | _   | Compulsory waiting period                    | _   |  |
| Authorized in specially licensed facilities  | Yes | Length of waiting period (days)              | _   |  |
| Judicial authorization                       |     | Mandatory screening test                     |     |  |
| For minors                                   | No  | HIV test                                     | No  |  |
| In case of rape                              | _   | Other STI test(s)                            | _   |  |
| Police report in case of rape                | _   | Ultrasound viewing or listening to heartbeat | _   |  |

| Age limit for parental consent (years) | 16 | Age limit for judicial consent (years) | _ |  |
|--|----|--|---|--|
|  |    |  |   |  |
|  |    |  |   |  |

|                                       | Sex-selective abortion |   |     |
|---------------------------------------|------------------------|---|-----|
| Prohibition of sex-selective abortion | Yes                    | Restrictions on the methods to detect the sex of the foetus | Yes |

| ACCESS TO ABORTION SERVICES           |                                  |   |  |  |
|---------------------------------------|----------------------------------|---|--|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |  |
| Vacuum aspiration                     | Yes                              | 12  |  |  |
| Dilatation and evacuation             | <del>-</del>                     | <del>-</del>                              |  |  |
| Combination mifepristone- misoprostol | Yes                              | 9   |  |  |
| Misoprostol only                      | _                                | <del>-</del>                              |  |  |
| Other method(s)                       | <del>-</del>                     | <del>-</del>                              |  |  |



### Nepal

| ACCESS TO ABORTION SERVICES (continued)   |                  |              |  |  |
|---|------------------|--------------|--|--|
| Drugs for inducing abortion Included in the official list Allowed to be sold or of authorized drugs distributed by pharmacies or drug |                  |              |  |  |
| Mifepristone and/or combination mifepristone-misoprostol  | Yes              | _            |  |  |
| Misoprostol   | Yes <sup>1</sup> | <del>-</del> |  |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | _                | Yes                |
| Secondary (district-level) health-care facilities | _                | Yes                |
| Specialized abortion care public facilities       | _                | _                  |
| Private health-care centres or clinics            | Yes              | Yes                |
| NGO health-care centres or clinics                | Yes              | Yes                |
| Other settings or facilities                      | _                | Yes <sup>2</sup>   |

| Н | Health care personnel allowed to provide legal abortions |                  |  |
|---|--|------------------|--|
|   | Doctors (speciality not specified)                       | Yes              |  |
|   | Specialist doctor, including OB/GYN                      | Yes              |  |
|   | Nurse  | Yes              |  |
|   | Midwife/nurse-midwife                                    | _                |  |
|   | Other provider(s)  | Yes <sup>3</sup> |  |
|   |  |                  |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | _   |
| National guidelines on clinical and service delivery of post-abortion care | Yes |
| Restrictions on public information on legal abortion services              | No  |
| Counselling for contraceptive methods during post-abortion care            | Yes |

| Service delivery requirements for providers or facilities |                  |  |  |
|---|------------------|--|--|
| Referral linkage to a higher-level facility               | Yes              |  |  |
| Availability of a specialist doctor                       | _                |  |  |
| Minimum number of beds                                    | _                |  |  |
| Other facility/provider requirements                      | Yes <sup>4</sup> |  |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | Yes <sup>5</sup>  | Yes   |

#### Notes:

- Indications not specified.
   Health facilities which fulfil criteria to be certified as PAC sites.
   Senior auxiliary nurse midwives.
   Minimum for manual vacuum aspiration (MVA) service delivery.
   Public-sector providers only.



Prohibition of sex-selective abortion

Other method(s)

### Abortion laws and policies, 2017

#### **Netherlands**

| LAWS ON ABORTION                                 |                                      |   |  |  |
|--|--------------------------------------|---|--|--|
| Legal grounds for induced abortion               | Currently permissible in the country | Gestational limit for each legal ground (weeks) |  |  |
| To save life                                     | Yes                                  | 24  |  |  |
| To preserve health                               | Yes                                  | 24  |  |  |
| To preserve physical health                      | <del>-</del>                         | _   |  |  |
| To preserve mental health                        | <del>-</del>                         | _   |  |  |
| In cases of intellectual or cognitive disability | <del>-</del>                         | _   |  |  |
| In cases of incest                               | _                                    | _   |  |  |
| In cases of rape                                 | <del>-</del>                         | _   |  |  |
| In cases of foetal impairment                    | Yes                                  | 24  |  |  |
| For economic or social reason                    | <del>-</del>                         | _   |  |  |
| On request                                       | Yes                                  | _   |  |  |
| For other reason(s)                              | _                                    | _   |  |  |

| Persons who can be criminally charged for an illegal abortion |   |          |     |                                    |   |  |
|---|---|----------|-----|------------------------------------|---|--|
| Woman   | _ | Provider | Yes | Other person who assists the woman | _ |  |

| REQUIREMENTS FOR INDUCED ABORTION            |     |  |     |  |
|--|-----|--|-----|--|
| Authorizations required                      |     | Consent required                             |     |  |
| Authorization of health care professional(s) | Yes | Spousal consent                              | No  |  |
| Number of authorizations                     | 1   | Parental consent for minors                  | Yes |  |
| Cadre of health care professional            |     | Consent by another adult                     | Yes |  |
| Doctor (specialty not specified)             | Yes |  |     |  |
| Specialist doctor, including OB/GYN          | _   | Other requirements                           |     |  |
| Nurse  | _   | Gestational age limits                       | Yes |  |
| Midwife/nurse-midwife                        | _   | Compulsory counselling                       | Yes |  |
| Other providers                              | _   | Compulsory waiting period                    | Yes |  |
| Authorized in specially licensed facilities  | Yes | Length of waiting period (days)              | 5 3 |  |
| Judicial authorization                       |     | Mandatory screening test                     |     |  |
| For minors                                   | No  | HIV test                                     | _   |  |
| In case of rape                              | _   | Other STI test(s)                            | _   |  |
| Police report in case of rape                | _   | Ultrasound viewing or listening to heartbeat | _   |  |

| Age limit for parental consent (years) | 16 | Age limit for judicial consent (years) | _ |
|--|----|--|---|
|  |    |  |   |
|  | 0  | all and an                             |   |

Restrictions on the methods to detect the sex

Age when a woman can obtain an abortion without parental or judicial consent

Yes

| ACCESS TO ABORTION SERVICES           |                                  |   |  |  |
|---------------------------------------|----------------------------------|---|--|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |  |
| Vacuum aspiration                     | Yes                              | 9   |  |  |
| Dilatation and evacuation             | Yes                              | 24  |  |  |
| Combination mifepristone- misoprostol | Yes                              | 9   |  |  |
| Misoprostol only                      | <del>-</del>                     | <del>-</del>                              |  |  |



#### **Netherlands**

| ACCESS TO ABORTION SERVICES (continued)   |                  |                  |  |  |
|---|------------------|------------------|--|--|
| Drugs for inducing abortion Included in the official list Allowed to be sold or of authorized drugs distributed by pharmacies or drug sto |                  |                  |  |  |
| Mifepristone and/or combination mifepristone-misoprostol  | Yes              | Yes <sup>4</sup> |  |  |
| Misoprostol   | Yes <sup>5</sup> | Yes <sup>6</sup> |  |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | No               | _                  |
| Secondary (district-level) health-care facilities | Yes              | <del>-</del>       |
| Specialized abortion care public facilities       | Yes              | _                  |
| Private health-care centres or clinics            | <del>-</del>     | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | _                | _                  |

| Health care personnel allowed to provide legal abortions |     |  |  |
|--|-----|--|--|
| Doctors (speciality not specified)                       | Yes |  |  |
| Specialist doctor, including OB/GYN                      | _   |  |  |
| Nurse  | No  |  |  |
| Midwife/nurse-midwife                                    | No  |  |  |
| Other provider(s)  | _   |  |  |
|  |     |  |  |

| Types of insurance or other coverage for abortion                  |     |
|--|-----|
| Public health coverage for induced abortion for all women          | Yes |
| Public health coverage for induced abortion for<br>poor women only | No  |
| Public health coverage for abortion complications                  | _   |
| Private health coverage for induced abortion                       | _   |
| Other type of coverage   | _   |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | _   |
| National guidelines on clinical and service delivery of post-abortion care | _   |
| Restrictions on public information on legal abortion services              | _   |
| Counselling for contraceptive methods during<br>post-abortion care         | Yes |

| Service delivery requirements for providers or facilities |                  |  |  |
|---|------------------|--|--|
| Referral linkage to a higher-level facility               | Yes              |  |  |
| Availability of a specialist doctor                       | _                |  |  |
| Minimum number of beds                                    | _                |  |  |
| Other facility/provider requirements                      | Yes <sup>7</sup> |  |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | Yes <sup>8</sup>  | _   |

#### Notes:

- 1. An abortion can be performed when a woman is in a state of distress. In exceptional circumstances, abortion may be provided later than 24 weeks of gestation.

  2. In general, consent from the parents or guardian is required for minors under 12 year of age. In between 12 and 16 years of age, both the consent of the minor and the parent or guardian are needed. An exception to this is possible to prevent serious disadvantage to the girl or if the girl is sticking to her consent. In these cases it is important that the doctor determines whether the girl understands the consequences of a termination and ensures that the girl is not deciding under pressure of the
- parentiguardian.
  3. After first consultation with the doctor. The waiting period is 5 full days, with the abortion to occur not before the sixth day from the day the woman first consults a doctor about the abortion. This can be reduced if the abortion is undertaken to avert imminent danger to the life or health of the woman and in "serious situations such as direct health risk to the mother, intense pregnancy symptoms, severe psychosocial problems, or foetal abnormalities."

- imminent danger to the life or health of the woman and in "serious situations such as direct health risk to the mother, intense pregnancy symptoms, severe psyr.

  4. With prescription only.

  5. For gynaecological indications.

  6. With prescription only.

  7. Abortion clinics licensed to perform terminations of pregnancy after 13 weeks need to have at least 2 doctors present in the clinic at the time of the abortion.

  8. Provider type not specified.



Prohibition of sex-selective abortion

## Abortion laws and policies, 2017

#### **New Zealand**

| LAWS ON ABORTION                                 |                                      |   |  |  |
|--|--------------------------------------|---|--|--|
| Legal grounds for induced abortion               | Currently permissible in the country | Gestational limit for each legal ground (weeks) |  |  |
| To save life                                     | Yes                                  | No limit  |  |  |
| To preserve health                               | Yes                                  | No limit  |  |  |
| To preserve physical health                      | Yes                                  | No limit  |  |  |
| To preserve mental health                        | Yes                                  | No limit  |  |  |
| In cases of intellectual or cognitive disability | Yes                                  | 20  |  |  |
| In cases of incest                               | Yes                                  | 20  |  |  |
| In cases of rape                                 | <del>-</del>                         | <del>-</del>                                    |  |  |
| In cases of foetal impairment                    | Yes                                  | 20  |  |  |
| For economic or social reason                    | No                                   | _   |  |  |
| On request                                       | No                                   | _   |  |  |
| For other reason(s)                              | Yes <sup>2</sup>                     | _   |  |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |     |  |     |  |  |
|--|-----|--|-----|--|--|
| Authorizations required                      |     | Consent required                             |     |  |  |
| Authorization of health care professional(s) | Yes | Spousal consent                              | No  |  |  |
| Number of authorizations                     | 2   | Parental consent for minors                  | No  |  |  |
| Cadre of health care professional            |     | Consent by another adult                     | _   |  |  |
| Doctor (specialty not specified)             | Yes |  |     |  |  |
| Specialist doctor, including OB/GYN          | Yes | Other requirements                           |     |  |  |
| Nurse  | _   | Gestational age limits                       | Yes |  |  |
| Midwife/nurse-midwife                        | _   | Compulsory counselling                       | No  |  |  |
| Other providers                              | 3   | Compulsory waiting period                    | _   |  |  |
| Authorized in specially licensed facilities  | Yes | Length of waiting period (days)              | _   |  |  |
| Judicial authorization                       |     | Mandatory screening test                     |     |  |  |
| For minors                                   | No  | HIV test                                     | _   |  |  |
| In case of rape                              | _   | Other STI test(s)                            | _   |  |  |
| Police report in case of rape                | _   | Ultrasound viewing or listening to heartbeat | _   |  |  |

| Age limit for parental consent (years) | <del>-</del>   | Age limit for judicial consent (years) | <del>-</del> |
|--|----------------|--|--------------|
|  |                |  |              |
|  | Con coloration | a abantian                             |              |

Restrictions on the methods to detect the sex

Age when a woman can obtain an abortion without parental or judicial consent

| ACCESS TO ABORTION SERVICES   |     |       |  |  |
|---|-----|-------|--|--|
| Methods for induced abortions  Currently allowed in the country each method (weeks) |     |       |  |  |
| Vacuum aspiration   | Yes | 14-15 |  |  |
| Dilatation and evacuation   | Yes | _     |  |  |
| Combination mifepristone- misoprostol   | Yes | _     |  |  |
| Misoprostol only  | _   | _     |  |  |
| Other method(s)   | _   | _     |  |  |



#### **New Zealand**

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |
|--|---|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |
| Mifepristone and/or combination mifepristone-misoprostol | Yes   | No   |
| Misoprostol  | Yes <sup>4</sup>                                  | No   |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | _                | <del>-</del>       |
| Secondary (district-level) health-care facilities | _                | <del>-</del>       |
| Specialized abortion care public facilities       | _                | <del>-</del>       |
| Private health-care centres or clinics            | _                | <del>-</del>       |
| NGO health-care centres or clinics                | _                | <del>-</del>       |
| Other settings or facilities                      | Yes <sup>5</sup> | Yes <sup>6</sup>   |

| Health care personnel allowed to provide legal abortions |     |  |
|--|-----|--|
| Doctors (speciality not specified)                       | Yes |  |
| Specialist doctor, including OB/GYN                      | Yes |  |
| Nurse  | No  |  |
| Midwife/nurse-midwife                                    | No  |  |
| Other provider(s)  | _   |  |
|  |     |  |

| Types of insurance or other coverage for abortion                  |       |
|--|-------|
| Public health coverage for induced abortion for all women          | Yes   |
| Public health coverage for induced abortion for<br>poor women only | No    |
| Public health coverage for abortion complications                  | Yes   |
| Private health coverage for induced abortion                       | _     |
| Other type of coverage   | Yes 7 |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | _   |
| National guidelines on clinical and service delivery of post-abortion care | _   |
| Restrictions on public information on legal abortion services              | _   |
| Counselling for contraceptive methods during post-abortion care            | Yes |

| Service delivery requirements for providers or facilities |                  |
|---|------------------|
| Referral linkage to a higher-level facility               | Yes              |
| Availability of a specialist doctor                       | Yes              |
| Minimum number of beds                                    | _                |
| Other facility/provider requirements                      | Yes <sup>8</sup> |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | Yes <sup>9</sup>  | No  |

#### Notes:

- 1. Referring to abortion in cases where the continuance of the pregnancy would result in serious danger (not being danger normally attendant upon childbirth) to the life, or to the physical or mental health, of the woman or girl, the Penal Code states: "The following matters, while not in themselves grounds for any act specified in section 183 or section 185, may be taken into account in determining for the purposes of subsection (1)(a), whether the continuance of the pregnancy would result in serious danger to her life or to the physical or mental health: (a) the age of the woman or girl concerned is near the beginning or the end of the usual child-bearing years: (b) the fact (where such is the case) that there are reasonable grounds for believing that the pregnancy is the result of sexual violation."
- 2. The pregnancy is the result of sexual intercourse that constitutes an offence against section 131(1) [Sexual conduct with dependent family member].
- 3. At least one of the two required certifying physicians must be a practising obstetrician or gynaecologist.
- 3. At least one of the two required certifying physicians must be a practising obstetrician or gynaecologist.
  4. For non-gynaecological indications only.
  5. Abortion before 12 weeks can be carried out in any clinic that has a limited or full licence; abortion after 12 weeks can be carried out in any hospital with a full licence.
  6. Post-abortion care is provided in facilities with a license to provide abortions.
  7. Women who meet certain income thresholds may apply for travel support if required. Non-residents are not covered under public health care, including seasonal migrant women and international students. Under the Code of Practice for the Pastoral Care of International Students, international students are required to have health-care coverage, but health-care plans do not, as a general rule, cover induced abortion.
  8. Adequate surgical facilities and competent staff to handle complication; adequate counselling facilities available and offered to women.
  9. Provider type not specified.



### Nicaragua

| LAWS ON ABORTION   |    |   |  |  |
|--|----|---|--|--|
| Legal grounds for induced abortion  Currently permissible  in the country  each legal ground (we |    |   |  |  |
| To save life   | No | _ |  |  |
| To preserve health   | No | _ |  |  |
| To preserve physical health  | No | _ |  |  |
| To preserve mental health  | No | _ |  |  |
| In cases of intellectual or cognitive disability   | No | _ |  |  |
| In cases of incest   | No | _ |  |  |
| In cases of rape   | No | _ |  |  |
| In cases of foetal impairment  | No | _ |  |  |
| For economic or social reason  | No | _ |  |  |
| On request   | No | _ |  |  |
| For other reason(s)  | _  | _ |  |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |  |   |
|--|--|---|
| Authorizations required                      | Consent required                             |   |
| Authorization of health care professional(s) | Spousal consent                              | _ |
| Number of authorizations                     | Parental consent for minors                  | _ |
| Cadre of health care professional            | Consent by another adult                     | _ |
| Doctor (specialty not specified)             | _  |   |
| Specialist doctor, including OB/GYN          | Other requirements                           |   |
| Nurse  | Gestational age limits                       | _ |
| Midwife/nurse-midwife                        | Compulsory counselling                       | _ |
| Other providers                              | Compulsory waiting period                    | _ |
| Authorized in specially licensed facilities  | Length of waiting period (days)              | _ |
| Judicial authorization                       | Mandatory screening test                     |   |
| For minors                                   | HIV test                                     | _ |
| In case of rape                              | Other STI test(s)                            | _ |
| Police report in case of rape                | Ultrasound viewing or listening to heartbeat | _ |

| Age limit for parental consent (years) | — Age limit for judicial consent (years) —    |
|--|---|
|  |   |
|  | Sex-selective abortion                        |
| Prohibition of sex-selective abortion  | Restrictions on the methods to detect the sex |

Age when a woman can obtain an abortion without parental or judicial consent

| ACCESS TO ABORTION SERVICES           |                                  |   |
|---------------------------------------|----------------------------------|---|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |
| Vacuum aspiration                     | <del>-</del>                     | _   |
| Dilatation and evacuation             | <del>-</del>                     | _   |
| Combination mifepristone- misoprostol | <del>-</del>                     | _   |
| Misoprostol only                      | _                                | _   |
| Other method(s)                       | <del>-</del>                     | <del>-</del>                              |



### Nicaragua

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |
|--|---|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |
| Misoprostol  | Yes 1   | No   |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | _                | <del>-</del>       |
| Specialized abortion care public facilities       | _                | _                  |
| Private health-care centres or clinics            | _                | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | _                | <del>-</del>       |

| ealth care personnel allowed to provide legal abortions | 5 |
|---|---|
| Doctors (speciality not specified)                      | _ |
| Specialist doctor, including OB/GYN                     | _ |
| Nurse   | _ |
| Midwife/nurse-midwife                                   | _ |
| Other provider(s)                                       | _ |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| nformation and guidelines on abortion services                             |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | _   |
| National guidelines on clinical and service delivery of post-abortion care | Yes |
| Restrictions on public information on legal abortion services              | _   |
| Counselling for contraceptive methods during post-abortion care            | Yes |
|  | Yes |

| Service delivery requirements for providers or facilities |              |  |
|---|--------------|--|
| Referral linkage to a higher-level facility               | _            |  |
| Availability of a specialist doctor                       | <del>-</del> |  |
| Minimum number of beds                                    | _            |  |
| Other facility/provider requirements                      | _            |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to<br>alternative provider or facility |
|--|-------------------|--|
| Health-care facilities   | _                 | _  |
| Health-care providers  | _                 | _  |

#### Notes:

- Indicates that data are not available, not applicable or not specified.
- 1. For gynaecological indications.



Age limit for parental consent (years)

## Abortion laws and policies, 2017

### Niger

| LAWS ON ABORTION                                 |   |   |  |
|--|---|---|--|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | _   |  |
| To preserve health                               | Yes                                     | <del>-</del>                                    |  |
| To preserve physical health                      | _                                       | _   |  |
| To preserve mental health                        | <del>-</del>                            | _   |  |
| In cases of intellectual or cognitive disability | No                                      | _   |  |
| In cases of incest                               | No                                      | _   |  |
| In cases of rape                                 | No                                      | _   |  |
| In cases of foetal impairment                    | Yes                                     | _   |  |
| For economic or social reason                    | No                                      | _   |  |
| On request                                       | No                                      | _   |  |
| For other reason(s)                              | _                                       | _   |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |  |
|---|-----|----------|-----|------------------------------------|-----|--|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |  |

| REQUIREMENTS FOR INDUCED ABORTION            |     |  |              |  |
|--|-----|--|--------------|--|
| Authorizations required                      |     | Consent required                             |              |  |
| Authorization of health care professional(s) | Yes | Spousal consent                              | Yes          |  |
| Number of authorizations                     | _   | Parental consent for minors                  | _            |  |
| Cadre of health care professional            |     | Consent by another adult                     | <del>_</del> |  |
| Doctor (specialty not specified)             | Yes |  |              |  |
| Specialist doctor, including OB/GYN          | _   | Other requirements                           |              |  |
| Nurse  | _   | Gestational age limits                       | _            |  |
| Midwife/nurse-midwife                        | _   | Compulsory counselling                       | _            |  |
| Other providers                              | _   | Compulsory waiting period                    | <del>-</del> |  |
| Authorized in specially licensed facilities  | Yes | Length of waiting period (days)              | <del>_</del> |  |
| Judicial authorization                       |     | Mandatory screening test                     |              |  |
| For minors                                   | _   | HIV test                                     | _            |  |
| In case of rape                              | _   | Other STI test(s)                            | _            |  |
| Police report in case of rape                | _   | Ultrasound viewing or listening to heartbeat | _            |  |

|                                       | Sex-selective abortion |   |
|---------------------------------------|------------------------|---|
| Prohibition of sex-selective abortion | _                      | Restrictions on the methods to detect the sex of the foetus |

Age limit for judicial consent (years)

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | <del>-</del>                     | _   |  |
| Dilatation and evacuation             | <del>-</del>                     | _   |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | <del>-</del>                              |  |
| Misoprostol only                      | _                                | _   |  |
| Other method(s)                       | <del>-</del>                     | <del>-</del>                              |  |



### Niger

| ACCESS TO ABORTION SERVICES (continued)  |    |              |  |  |
|--|----|--------------|--|--|
| Drugs for inducing abortion Included in the official list Allowed to be sold or of authorized drugs distributed by pharmacies or drug st |    |              |  |  |
| Mifepristone and/or combination mifepristone-misoprostol   | No | <del>-</del> |  |  |
| Misoprostol  | No | <del>-</del> |  |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | _                  |
| Specialized abortion care public facilities       | <del>-</del>     | _                  |
| Private health-care centres or clinics            | <del>-</del>     | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | _                  |
| Other settings or facilities                      | _                | _                  |

| Health care personnel allowed to provide legal abortions |   |  |
|--|---|--|
| Doctors (speciality not specified)                       | _ |  |
| Specialist doctor, including OB/GYN                      | _ |  |
| Nurse  | _ |  |
| Midwife/nurse-midwife                                    | _ |  |
| Other provider(s)  | _ |  |
|  |   |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| formation and guidelines on abortion services                              |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | _   |
| National guidelines on clinical and service delivery of post-abortion care | _   |
| Restrictions on public information on legal abortion services              | Yes |
| Counselling for contraceptive methods during post-abortion care            | _   |

| Service delivery requirements for providers or facilities |   |  |
|---|---|--|
| Referral linkage to a higher-level facility               | _ |  |
| Availability of a specialist doctor                       | _ |  |
| Minimum number of beds                                    | _ |  |
| Other facility/provider requirements                      | _ |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to<br>alternative provider or facility |
|--|-------------------|--|
| Health-care facilities   | _                 | _  |
| Health-care providers  | _                 | _  |

#### Notes:

- Indicates that data are not available, not applicable or not specified.
- 1. Abortion is permitted for therapeutic purposes.



### Nigeria

| LAWS ON ABORTION <sup>1</sup>                    |   |   |
|--|---|---|
| egal grounds for induced abortion <sup>2</sup>   | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |
| To save life                                     | Yes                                     | _   |
| To preserve health                               | Yes                                     | _   |
| To preserve physical health                      | Yes                                     | _   |
| To preserve mental health                        | Yes                                     | _   |
| In cases of intellectual or cognitive disability | _                                       | _   |
| In cases of incest                               | No                                      | _   |
| In cases of rape                                 | No                                      | _   |
| In cases of foetal impairment                    | _                                       | _   |
| For economic or social reason                    | No                                      | _   |
| On request                                       | No                                      | _   |
| For other reason(s)                              | _                                       | _   |

| Persons who can be criminally charged for an illegal abortion |   |          |     |                                    |     |  |
|---|---|----------|-----|------------------------------------|-----|--|
| Woman   | _ | Provider | Yes | Other person who assists the woman | Yes |  |

Consent required

Spousal consent

|  | REQUIREMENTS FOR |
|--|------------------|
| Authorizations required                      |                  |
| Authorization of health care professional(s) | Yes              |
| Number of authorizations                     | _                |
| Cadre of health care professional            |                  |
| Doctor (specialty not specified)             | _                |
| Specialist doctor, including OB/GYN          | _                |
| Nurse  | _                |
| Midwife/nurse-midwife                        | _                |
| Other providers                              | _                |
| Authorized in specially licensed facilities  | No               |
| Judicial authorization                       |                  |
| For minors                                   | _                |
| In case of rape                              | _                |
| Police report in case of rape                | _                |

| Parental consent for minors                  | Yes |  |
|--|-----|--|
| Consent by another adult                     | _   |  |
|  |     |  |
| Other requirements                           |     |  |
| Gestational age limits                       | _   |  |
| Compulsory counselling                       | No  |  |
| Compulsory waiting period                    | No  |  |
| Length of waiting period (days)              | _   |  |
| Mandatory screening test                     |     |  |
| HIV test                                     | _   |  |
| Other STI test(s)                            | _   |  |
| Ultrasound viewing or listening to heartbeat | _   |  |

No

| Age when a woman can obtain an abortion without parental or judicial consent |  |   |  |
|--|--|---|--|
| Age limit for parental consent (years)                                       | <ul> <li>Age limit for judicial consent (years)</li> </ul> | _ |  |

|                                       | Sex-selective abortion                                      |
|---------------------------------------|---|
| Prohibition of sex-selective abortion | Restrictions on the methods to detect the sex of the foetus |

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | _                                | _   |  |
| Dilatation and evacuation             | <del>-</del>                     | _   |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | _   |  |
| Misoprostol only                      | _                                | _   |  |
| Other method(s)                       | <del>-</del>                     | _   |  |



### Nigeria

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |  |
| Misoprostol  | Yes <sup>3</sup>                                  | <del>-</del>   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | _                  |
| Specialized abortion care public facilities       | <del>-</del>     | _                  |
| Private health-care centres or clinics            | <del>-</del>     | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | <del>-</del>     | _                  |

| Health care personnel allowed to provide legal ab | ortions      |
|---|--------------|
| Doctors (speciality not specified)                | Yes          |
| Specialist doctor, including OB/GYN               | <del>-</del> |
| Nurse   | _            |
| Midwife/nurse-midwife                             | _            |
| Other provider(s)                                 | _            |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | _   |
| National guidelines on clinical and service delivery of post-abortion care | _   |
| Restrictions on public information on legal abortion services              | _   |
| Counselling for contraceptive methods during<br>post-abortion care         | Yes |

| Service delivery requirements for providers or facilities |   |  |
|---|---|--|
| Referral linkage to a higher-level facility               | _ |  |
| Availability of a specialist doctor                       | _ |  |
| Minimum number of beds                                    | _ |  |
| Other facility/provider requirements                      | _ |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | <del>-</del>      | _   |

#### Notes:

- 1. Varies by jurisdiction.
  2. Abortion is permitted for therapeutic purposes. Nigeria has two laws on abortion: one for the northern states and one for the southern states. Both laws specifically allow abortion to be performed to save the life of a woman. In the southern states, the decision of Rev. No burne is applied, which allows abortion to be performed on grounds of preserving physical and mental health.
  3. For gynaecological indications.



### Niue

| egal grounds for induced abortion  |   | Currently permissible in the country   | Gestational limit for each legal ground (weeks) |
|--|---|--|---|
| To save life   |   | Yes  | _   |
| To preserve health   |   | Yes  | _   |
| To preserve physical health  |   | Yes  | _   |
| To preserve mental health  |   | Yes  | _   |
| In cases of intellectual or cognitive disability   |   | No   | _   |
| In cases of incest   |   | No   | _   |
| In cases of rape   |   | No   | _   |
| In cases of foetal impairment  |   | No   | _   |
| For economic or social reason  |   | No   | <del>-</del>                                    |
| On request   |   | No   | <del>-</del>                                    |
| For other reason(s)  |   | _  | _   |
| Woman —  | ns who can be criminally char<br>Provider | — Other person who ass   | ists the woman —                                |
|  | REQUIREMENTS FO                           | OR INDUCED ABORTION  |   |
| uthorizations required   |   | Consent required   |   |
| Authorization of health care professional(s)   | _   | C  |   |
|  |   | Spousal consent  | _   |
| Number of authorizations   | _   | Parental consent for minors  | <u>-</u>  |
| Number of authorizations  Cadre of health care professional  | _   |  | -<br>-<br>-                                     |
|  | -   | Parental consent for minors  | -<br>-<br>-                                     |
| Cadre of health care professional  | _<br>_<br>_                               | Parental consent for minors  | -<br>-<br>-                                     |
| Cadre of health care professional  Doctor (specialty not specified)  | -<br>-<br>-                               | Parental consent for minors  Consent by another adult  | -<br>-<br>-                                     |
| Cadre of health care professional  Doctor (specialty not specified)  Specialist doctor, including OB/GYN   | -<br>-<br>-<br>-                          | Parental consent for minors  Consent by another adult  Other requirements  | -<br>-<br>-<br>-<br>-                           |
| Cadre of health care professional  Doctor (specialty not specified)  Specialist doctor, including OB/GYN  Nurse  | -<br>-<br>-<br>-<br>-                     | Parental consent for minors Consent by another adult  Other requirements Gestational age limits  | -<br>-<br>-<br>-<br>-<br>-                      |
| Cadre of health care professional  Doctor (specialty not specified)  Specialist doctor, including OB/GYN  Nurse  Midwife/nurse-midwife   | -<br>-<br>-<br>-<br>-<br>-                | Parental consent for minors Consent by another adult  Other requirements Gestational age limits Compulsory counselling   |   |
| Cadre of health care professional  Doctor (specialty not specified)  Specialist doctor, including OB/GYN  Nurse  Midwife/nurse-midwife  Other providers  | -<br>-<br>-<br>-<br>-<br>-                | Parental consent for minors  Consent by another adult  Other requirements  Gestational age limits  Compulsory counselling  Compulsory waiting period   |   |
| Cadre of health care professional  Doctor (specialty not specified)  Specialist doctor, including OB/GYN  Nurse  Midwife/nurse-midwife  Other providers  Authorized in specially licensed facilities                         | -<br>-<br>-<br>-<br>-<br>-                | Parental consent for minors  Consent by another adult  Other requirements  Gestational age limits  Compulsory counselling  Compulsory waiting period  Length of waiting period (days)                    |   |
| Cadre of health care professional  Doctor (specialty not specified)  Specialist doctor, including OB/GYN  Nurse  Midwife/nurse-midwife  Other providers  Authorized in specially licensed facilities  Judicial authorization | -<br>-<br>-<br>-<br>-<br>-<br>-<br>-      | Parental consent for minors Consent by another adult  Other requirements Gestational age limits Compulsory counselling Compulsory waiting period Length of waiting period (days Mandatory screening test |   |

| Age when a woman can obtain an abortion without parental or judicial consent |   |  |   |
|--|---|--|---|
| Age limit for parental consent (years)                                       | _ | Age limit for judicial consent (years) | _ |
|  |   |  |   |

|                                       | Sex-selective abortion                                      |
|---------------------------------------|---|
| Prohibition of sex-selective abortion | Restrictions on the methods to detect the sex of the foetus |

| ACCESS TO ABORTION SERVICES           |                                  |   |
|---------------------------------------|----------------------------------|---|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |
| Vacuum aspiration                     | <del>-</del>                     | _   |
| Dilatation and evacuation             | <del>-</del>                     | _   |
| Combination mifepristone- misoprostol | <del>-</del>                     | _   |
| Misoprostol only                      | _                                | _   |
| Other method(s)                       | <del>-</del>                     | <del>-</del>                              |



#### Niue

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |
|--|---|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |
| Misoprostol  | Yes <sup>2</sup>                                  | <del>-</del>   |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | _                  |
| Specialized abortion care public facilities       | <del>-</del>     | _                  |
| Private health-care centres or clinics            | <del>-</del>     | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | _                  |
| Other settings or facilities                      | _                | _                  |

| Health care personnel allowed to provide legal abortions |   |
|--|---|
| Doctors (speciality not specified)                       | _ |
| Specialist doctor, including OB/GYN                      | _ |
| Nurse  | _ |
| Midwife/nurse-midwife                                    | _ |
| Other provider(s)  | _ |
|  |   |
| Information and guidelines on abortion services          |   |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |   |
|--|---|
| National guidelines on clinical and service delivery of induced abortion   | _ |
| National guidelines on clinical and service delivery of post-abortion care | _ |
| Restrictions on public information on legal abortion services              | _ |
| Counselling for contraceptive methods during<br>post-abortion care         | _ |

| Service delivery requirements for providers or facilities |   |
|---|---|
| Referral linkage to a higher-level facility               | _ |
| Availability of a specialist doctor                       | _ |
| Minimum number of beds                                    | _ |
| Other facility/provider requirements                      | _ |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to<br>alternative provider or facility |
|--|-------------------|--|
| Health-care facilities   | _                 | _  |
| Health-care providers  | _                 | _  |

#### Notes:

- 1. Surgical operation performed in good faith and with reasonable care and skill upon an unborn child for the preservation of the mother's life, if the performance of the operation is reasonable, having regard to the patient's state at the time and to all the circumstances of the case.

  2. For gynaecological indications.



Age limit for parental consent (years)

# Abortion laws and policies, 2017

### **North Macedonia**

| LAWS ON ABORTION                                 |   |   |  |
|--|---|---|--|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | No limit  |  |
| To preserve health                               | Yes                                     | No limit  |  |
| To preserve physical health                      | <del>-</del>                            | _   |  |
| To preserve mental health                        | <del>-</del>                            | _   |  |
| In cases of intellectual or cognitive disability | _                                       | _   |  |
| In cases of incest                               | Yes                                     | No limit  |  |
| In cases of rape                                 | Yes                                     | No limit  |  |
| In cases of foetal impairment                    | Yes                                     | No limit  |  |
| For economic or social reason                    | Yes                                     | _   |  |
| On request                                       | Yes                                     | 10  |  |
| For other reason(s)                              | _                                       | _   |  |

| Persons who can be criminally charged for an illegal abortion |   |          |     |                                    |   |  |
|---|---|----------|-----|------------------------------------|---|--|
| Woman   | _ | Provider | Yes | Other person who assists the woman | _ |  |

| REQUIREMENTS FOR INDUCED ABORTION            |     |  |                |
|--|-----|--|----------------|
| uthorizations required                       |     | Consent required                             |                |
| Authorization of health care professional(s) | Yes | Spousal consent                              | <del>-</del>   |
| Number of authorizations                     | 1 1 | Parental consent for minors                  | Yes            |
| Cadre of health care professional            |     | Consent by another adult                     | Yes            |
| Doctor (specialty not specified)             | Yes |  |                |
| Specialist doctor, including OB/GYN          | _   | Other requirements                           |                |
| Nurse  | _   | Gestational age limits                       | Yes            |
| Midwife/nurse-midwife                        | _   | Compulsory counselling                       | Yes            |
| Other providers                              | _   | Compulsory waiting period                    | Yes            |
| Authorized in specially licensed facilities  | Yes | Length of waiting period (days)              | 3 <sup>2</sup> |
| Judicial authorization                       |     | Mandatory screening test                     |                |
| For minors                                   | _   | HIV test                                     | _              |
| In case of rape                              | Yes | Other STI test(s)                            | _              |
| Police report in case of rape                | _   | Ultrasound viewing or listening to heartbeat | Yes            |

|                                       | Sex-selective abortion | on  |
|---------------------------------------|------------------------|---|
| Prohibition of sex-selective abortion | _                      | Restrictions on the methods to detect the sex |

Age limit for judicial consent (years)

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | <del>-</del>                     | _   |  |
| Dilatation and evacuation             | <del>-</del>                     | _   |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | _   |  |
| Misoprostol only                      | _                                | _   |  |
| Other method(s)                       | <del>-</del>                     | <del>-</del>                              |  |



#### **North Macedonia**

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | <del>-</del>   |  |
| Misoprostol  | No  | <del>-</del>   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | No               | <del>-</del>       |
| Secondary (district-level) health-care facilities | Yes              | <del>-</del>       |
| Specialized abortion care public facilities       | _                | _                  |
| Private health-care centres or clinics            | _                | <del>-</del>       |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | _                | <del>-</del>       |

| Health care personnel allowed to provide legal abortions |     |  |
|--|-----|--|
| Doctors (speciality not specified)                       | _   |  |
| Specialist doctor, including OB/GYN                      | Yes |  |
| Nurse  | Yes |  |
| Midwife/nurse-midwife                                    | Yes |  |
| Other provider(s)  | _   |  |
|  |     |  |

| Types of insurance or other coverage for abortion                  |     |
|--|-----|
| Public health coverage for induced abortion for all women          | Yes |
| Public health coverage for induced abortion for<br>poor women only | No  |
| Public health coverage for abortion complications                  | Yes |
| Private health coverage for induced abortion                       | _   |
| Other type of coverage   | _   |

| Information and guidelines on abortion services                             |              |
|---|--------------|
| National guidelines on clinical and service<br>delivery of induced abortion | Yes          |
| National guidelines on clinical and service delivery of post-abortion care  | <del>-</del> |
| Restrictions on public information on legal abortion services               | _            |
| Counselling for contraceptive methods during<br>post-abortion care          | _            |

| Service delivery requirements for providers or facilities |     |  |
|---|-----|--|
| Referral linkage to a higher-level facility               | _   |  |
| Availability of a specialist doctor                       | Yes |  |
| Minimum number of beds                                    | _   |  |
| Other facility/provider requirements                      | _   |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | _                 | _   |

#### Notes:

<sup>1.</sup> Authorisation is required by one doctor for gestational ages below 12 weeks or by a Commission of First Instance if the doctor determines that the termination of the pregnancy is not feasible due to the health condition of the pregnant woman, or that termination of the pregnancy shall jeopardize the life and health of the women, or that more than ten weeks have passed since the conception date.

2. When the woman has been counselled. There is no requirement for a waiting period if the woman is a minor or a woman with abrogated or limited legal incapacity, or if there is a justified medical indication which has to be properly recorded by the doctor in the medical documentation and records.



### Norway

| LAWS ON ABORTION                                 |                                      |   |  |
|--|--------------------------------------|---|--|
| Legal grounds for induced abortion               | Currently permissible in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                  | No limit  |  |
| To preserve health                               | Yes                                  | No limit  |  |
| To preserve physical health                      | Yes                                  | <del>-</del>                                    |  |
| To preserve mental health                        | Yes                                  | 22  |  |
| In cases of intellectual or cognitive disability | Yes                                  | 22  |  |
| In cases of incest                               | Yes                                  | 22  |  |
| In cases of rape                                 | Yes                                  | 22  |  |
| In cases of foetal impairment                    | Yes                                  | 22  |  |
| For economic or social reason                    | Yes                                  | 22  |  |
| On request                                       | Yes                                  | 12  |  |
| For other reason(s)                              | Yes <sup>1</sup>                     | _   |  |

| Persons who can be criminally charged for an illegal abortion |   |          |     |                                    |   |  |
|---|---|----------|-----|------------------------------------|---|--|
| Woman   | _ | Provider | Yes | Other person who assists the woman | _ |  |

| REQUIREMENTS FOR INDUCED ABORTION            |     |  |     |
|--|-----|--|-----|
| Authorizations required                      |     | Consent required                             |     |
| Authorization of health care professional(s) | Yes | Spousal consent                              | No  |
| Number of authorizations                     | 2   | Parental consent for minors                  | No  |
| Cadre of health care professional            |     | Consent by another adult                     | _   |
| Doctor (specialty not specified)             | Yes |  |     |
| Specialist doctor, including OB/GYN          | _   | Other requirements                           |     |
| Nurse  | _   | Gestational age limits                       | Yes |
| Midwife/nurse-midwife                        | _   | Compulsory counselling                       | No  |
| Other providers                              | _   | Compulsory waiting period                    | _   |
| Authorized in specially licensed facilities  | Yes | Length of waiting period (days)              | _   |
| Judicial authorization                       |     | Mandatory screening test                     |     |
| For minors                                   | _   | HIV test                                     | _   |
| In case of rape                              | _   | Other STI test(s)                            | _   |
| Police report in case of rape                | _   | Ultrasound viewing or listening to heartbeat | _   |

| Age when a woman can obtain an abortion without parental or judicial consent |  |   |  |  |
|--|--|---|--|--|
| Age limit for parental consent (years)                                       | <ul> <li>Age limit for judicial consent (years)</li> </ul> | _ |  |  |
|  |  |   |  |  |

|                                       | Sex-selective abortion |   |     |   |
|---------------------------------------|------------------------|---|-----|---|
| Prohibition of sex-selective abortion | _                      | Restrictions on the methods to detect the sex of the foetus | Yes | 2 |

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | _                                | _   |  |
| Dilatation and evacuation             | <del>-</del>                     | _   |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | _   |  |
| Misoprostol only                      | _                                | _   |  |
| Other method(s)                       | <del>-</del>                     | _   |  |



### Norway

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | Yes   | _  |  |
| Misoprostol  | Yes <sup>3</sup>                                  | No   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | Yes              | <del>-</del>       |
| Specialized abortion care public facilities       | _                | <del>-</del>       |
| Private health-care centres or clinics            | _                | <del>-</del>       |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | Yes <sup>4</sup> | <del>-</del>       |

| Health care personnel allowed to provide legal abortions |     |
|--|-----|
| Doctors (speciality not specified)                       | Yes |
| Specialist doctor, including OB/GYN                      | _   |
| Nurse  | _   |
| Midwife/nurse-midwife                                    | _   |
| Other provider(s)  | _   |

| Types of insurance or other coverage for abortion                  |     |
|--|-----|
| Public health coverage for induced abortion for all women          | Yes |
| Public health coverage for induced abortion for<br>poor women only | No  |
| Public health coverage for abortion complications                  | _   |
| Private health coverage for induced abortion                       | _   |
| Other type of coverage   | _   |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | _   |
| National guidelines on clinical and service delivery of post-abortion care | _   |
| Restrictions on public information on legal abortion services              | _   |
| Counselling for contraceptive methods during<br>post-abortion care         | Yes |

| Service delivery requirements for providers or facilities |   |  |
|---|---|--|
| Referral linkage to a higher-level facility               | _ |  |
| Availability of a specialist doctor                       | _ |  |
| Minimum number of beds                                    | _ |  |
| Other facility/provider requirements                      | _ |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | Yes <sup>5</sup>  | _   |

#### Notes:

- The Law on Abortion cites several crimes in addition to rape and incest as grounds for access to abortion.
   Information on foetal sex before 12 weeks gestation arising from prenatal diagnosis or another investigation of the foetus shall be provided only if the woman is a carrier of a serious sex-linked disease.
   For gynaecological indications.
   Abortions at more than 12 weeks of gestation can only be performed in hospitals. Procedures performed at less than 12 weeks can be performed in another institution so long as it has been approved by the county medical officer.
   Provider type not specified.



Age limit for parental consent (years)

# Abortion laws and policies, 2017

### Oman

| LAWS ON ABORTION                                 |   |   |  |
|--|---|---|--|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | <del>-</del>                                    |  |
| To preserve health                               | No                                      | <del>-</del>                                    |  |
| To preserve physical health                      | No                                      | <del>-</del>                                    |  |
| To preserve mental health                        | No                                      | <del>-</del>                                    |  |
| In cases of intellectual or cognitive disability | No                                      | <del>-</del>                                    |  |
| In cases of incest                               | No                                      | <del>-</del>                                    |  |
| In cases of rape                                 | No                                      | <del>-</del>                                    |  |
| In cases of foetal impairment                    | No                                      | <del>-</del>                                    |  |
| For economic or social reason                    | No                                      | <del>-</del>                                    |  |
| On request                                       | No                                      | <del>-</del>                                    |  |
| For other reason(s)                              | _                                       | _   |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |     |  |   |
|--|-----|--|---|
| Authorizations required                      |     | Consent required                             |   |
| Authorization of health care professional(s) | Yes | Spousal consent                              | _ |
| Number of authorizations                     | 1   | Parental consent for minors                  | _ |
| Cadre of health care professional            |     | Consent by another adult                     | _ |
| Doctor (specialty not specified)             | _   |  |   |
| Specialist doctor, including OB/GYN          | _   | Other requirements                           |   |
| Nurse  | _   | Gestational age limits                       | _ |
| Midwife/nurse-midwife                        | _   | Compulsory counselling                       | _ |
| Other providers                              | _   | Compulsory waiting period                    | _ |
| Authorized in specially licensed facilities  | _   | Length of waiting period (days)              | _ |
| Judicial authorization                       |     | Mandatory screening test                     |   |
| For minors                                   | _   | HIV test                                     | _ |
| In case of rape                              | _   | Other STI test(s)                            | _ |
| Police report in case of rape                | _   | Ultrasound viewing or listening to heartbeat | _ |

|                                       | Sex-selective abortion |   |
|---------------------------------------|------------------------|---|
| Prohibition of sex-selective abortion | _                      | Restrictions on the methods to detect the sex of the foetus |

Age limit for judicial consent (years)

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | <del>-</del>                     | <del>-</del>                              |  |
| Dilatation and evacuation             | <del>-</del>                     | _   |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | _   |  |
| Misoprostol only                      | Yes                              | 22  |  |
| Other method(s)                       | <del>-</del>                     | _   |  |



#### Oman

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |  |
| Misoprostol  | Yes <sup>2</sup>                                  | No   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | _                | No                 |
| Secondary (district-level) health-care facilities | _                | Yes                |
| Specialized abortion care public facilities       | _                | _                  |
| Private health-care centres or clinics            | _                | <del>-</del>       |
| NGO health-care centres or clinics                | _                | _                  |
| Other settings or facilities                      | _                | _                  |

| Health care personnel allowed to provide legal abortions |     |  |
|--|-----|--|
| Doctors (speciality not specified)                       | Yes |  |
| Specialist doctor, including OB/GYN                      | Yes |  |
| Nurse  | No  |  |
| Midwife/nurse-midwife                                    | No  |  |
| Other provider(s)  | _   |  |
|  |     |  |

| Types of insurance or other coverage for abortion                  |              |
|--|--------------|
| Public health coverage for induced abortion for all women          | <del>_</del> |
| Public health coverage for induced abortion for<br>poor women only | _            |
| Public health coverage for abortion complications                  | _            |
| Private health coverage for induced abortion                       | _            |
| Other type of coverage   | _            |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | _   |
| National guidelines on clinical and service delivery of post-abortion care | Yes |
| Restrictions on public information on legal abortion services              | Yes |
| Counselling for contraceptive methods during post-abortion care            | Yes |

| Service delivery requirements for providers or facilities |   |  |
|---|---|--|
| Referral linkage to a higher-level facility               | _ |  |
| Availability of a specialist doctor                       | _ |  |
| Minimum number of beds                                    | _ |  |
| Other facility/provider requirements                      | _ |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to<br>alternative provider or facility |
|--|-------------------|--|
| Health-care facilities   | _                 | _  |
| Health-care providers  | _                 | _  |

#### Notes:

- Medical Committee.
   For gynaecological indications.



### **Pakistan**

| LAWS ON ABORTION 1                               |   |   |  |
|--|---|---|--|
| egal grounds for induced abortion <sup>2</sup>   | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | _   |  |
| To preserve health                               | <del>-</del>                            | <del>-</del>                                    |  |
| To preserve physical health                      | _                                       | _   |  |
| To preserve mental health                        | <del>-</del>                            | _   |  |
| In cases of intellectual or cognitive disability | No                                      | _   |  |
| In cases of incest                               | No                                      | _   |  |
| In cases of rape                                 | No                                      | _   |  |
| In cases of foetal impairment                    | No                                      | _   |  |
| For economic or social reason                    | No                                      | _   |  |
| On request                                       | No                                      | _   |  |
| For other reason(s)                              | _                                       | _   |  |

|       |     | Persons who can be criminally ch | arged for | an illegal abortion                |   |  |
|-------|-----|----------------------------------|-----------|------------------------------------|---|--|
| Woman | Yes | Provider                         | Yes       | Other person who assists the woman | _ |  |

|  | REQUIREMENTS FOR INDUCED ABORTION |                                 |  |
|--|-----------------------------------|---------------------------------|--|
| Authorizations required                      |                                   | Consent required                |  |
| Authorization of health care professional(s) | Varies by jurisdiction            | Spousal consent                 |  |
| Number of authorizations                     | _                                 | Parental consent for minors     |  |
| Cadre of health care professional            |                                   | Consent by another adult        |  |
| Doctor (specialty not specified)             | _                                 |                                 |  |
| Specialist doctor, including OB/GYN          | _                                 | Other requirements              |  |
| Nurse  | _                                 | Gestational age limits          |  |
| Midwife/nurse-midwife                        | _                                 | Compulsory counselling          |  |
| Other providers                              | _                                 | Compulsory waiting period       |  |
| Authorized in specially licensed facilities  | _                                 | Length of waiting period        |  |
| Judicial authorization                       |                                   | Mandatory screening test        |  |
| For minors                                   | _                                 | HIV test                        |  |
| In case of rape                              | _                                 | Other STI test(s)               |  |
| Police report in case of rape                | _                                 | Ultrasound viewing or listening |  |
|  |                                   |                                 |  |

| Consent by another adult                     | _   |  |
|--|-----|--|
|  |     |  |
| Other requirements                           |     |  |
| Gestational age limits                       | Yes |  |
| Compulsory counselling                       | _   |  |
| Compulsory waiting period                    | _   |  |
| Length of waiting period (days)              | _   |  |
| Mandatory screening test                     |     |  |
| HIV test                                     | _   |  |
| Other STI test(s)                            | _   |  |
| Ultrasound viewing or listening to heartbeat | _   |  |

Yes

| Age when a wor                         | nan can obtain an aborti | on without parental or judicial consent |   |  |
|--|--------------------------|---|---|--|
| Age limit for parental consent (years) | _                        | Age limit for judicial consent (years)  | _ |  |

|                                       | Sex-selective abortion |   |
|---------------------------------------|------------------------|---|
| Prohibition of sex-selective abortion | Yes                    | Restrictions on the methods to detect the sex of the foetus |

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | _                                | _   |  |
| Dilatation and evacuation             | <del>-</del>                     | _   |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | _   |  |
| Misoprostol only                      | _                                | _   |  |
| Other method(s)                       | <del>-</del>                     | _   |  |



#### **Pakistan**

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | <del>-</del>                                      | _  |  |
| Misoprostol  | <del>-</del>                                      | <del>-</del>   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | <del>-</del>       |
| Specialized abortion care public facilities       | <del>-</del>     | <del>-</del>       |
| Private health-care centres or clinics            | <del>-</del>     | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | <del>-</del>     | _                  |

| Health care personnel allowed to provide legal abortions |   |
|--|---|
| Doctors (speciality not specified)                       | _ |
| Specialist doctor, including OB/GYN                      | _ |
| Nurse  | _ |
| Midwife/nurse-midwife                                    | _ |
| Other provider(s)  | _ |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | _   |
| National guidelines on clinical and service delivery of post-abortion care | Yes |
| Restrictions on public information on legal abortion services              | _   |
| Counselling for contraceptive methods during<br>post-abortion care         | Yes |

| Service delivery requirements for providers or t | facilities |  |
|--|------------|--|
| Referral linkage to a higher-level facility      | _          |  |
| Availability of a specialist doctor              | _          |  |
| Minimum number of beds                           | _          |  |
| Other facility/provider requirements             | _          |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to<br>alternative provider or facility |
|--|-------------------|--|
| Health-care facilities   | _                 | _  |
| Health-care providers  | _                 | _  |

#### Notes:

- 1. Varies by jurisdiction.

  2. An abortion can be performed to save a woman's life under the general criminal law principles of necessity. Abortion is legal in Pakistan for expanded indications in early pregnancy, generally accepted by Islamic legal scholars as up to 120 days of pregnancy, when the abortion is caused in good faith to save the woman's life and to provide "necessary treatment". After 120 days of pregnancy, abortion is legal only to save a woman's life. In Pakistan, the provinces have the autonomy to develop their own standards and guidelines on abortion and post-abortion care.



### Palau

| LAWS ON ABORTION                                 |   |   |  |
|--|---|---|--|
| Legal grounds for induced abortion               | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | <del>-</del>                                    |  |
| To preserve health                               | No                                      | _   |  |
| To preserve physical health                      | No                                      | <del>_</del>                                    |  |
| To preserve mental health                        | No                                      | _   |  |
| In cases of intellectual or cognitive disability | No                                      | <del>-</del>                                    |  |
| In cases of incest                               | No                                      | _   |  |
| In cases of rape                                 | No                                      | <del>-</del>                                    |  |
| In cases of foetal impairment                    | No                                      | <del>-</del>                                    |  |
| For economic or social reason                    | No                                      | <del>-</del>                                    |  |
| On request                                       | No                                      | <del>-</del>                                    |  |
| For other reason(s)                              | _                                       | _   |  |

| Persons who can be criminally charged for an illegal abortion |   |          |     |                                    |     |  |
|---|---|----------|-----|------------------------------------|-----|--|
| Woman   | _ | Provider | Yes | Other person who assists the woman | Yes |  |

| REQUIREMENTS FOR INDUCED ABORTION            |  |   |  |
|--|--|---|--|
| Authorizations required                      | Consent required                             |   |  |
| Authorization of health care professional(s) | — Spousal consent                            | _ |  |
| Number of authorizations                     | Parental consent for minors                  | _ |  |
| Cadre of health care professional            | Consent by another adult                     | _ |  |
| Doctor (specialty not specified)             | _  |   |  |
| Specialist doctor, including OB/GYN          | Other requirements                           |   |  |
| Nurse  | — Gestational age limits                     | _ |  |
| Midwife/nurse-midwife                        | — Compulsory counselling                     | _ |  |
| Other providers                              | Compulsory waiting period                    | _ |  |
| Authorized in specially licensed facilities  | Length of waiting period (days)              | _ |  |
| Judicial authorization                       | Mandatory screening test                     |   |  |
| For minors                                   | — HIV test                                   | _ |  |
| In case of rape                              | — Other STI test(s)                          | _ |  |
| Police report in case of rape                | Ultrasound viewing or listening to heartbeat | _ |  |

| Age when a woman can obtain an abortion without parental or judicial consent |  |  |
|--|--|--|
| Age limit for parental consent (years)                                       | <ul><li>Age limit for judicial consent (years)</li></ul> |  |
|  |  |  |
|  |  |  |

| Prohibition of sex-selective abortion | Restrictions on the methods to detect the sex of the foetus |  |
|---------------------------------------|---|--|
|                                       | ACCESS TO ABORTION SERVICES                                 |  |

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | _                                | <del>-</del>                              |  |
| Dilatation and evacuation             | _                                | <del>-</del>                              |  |
| Combination mifepristone- misoprostol | _                                | _   |  |
| Misoprostol only                      | _                                | _   |  |
| Other method(s)                       | _                                | _   |  |



#### Palau

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |  |
| Misoprostol  | No  | <del>-</del>   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | _                | <del>-</del>       |
| Specialized abortion care public facilities       | <del>-</del>     | <del>-</del>       |
| Private health-care centres or clinics            | <del>-</del>     | <del>-</del>       |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | _                | _                  |

| Health care personnel allowed to provide legal abortions |   |  |
|--|---|--|
| Doctors (speciality not specified)                       | _ |  |
| Specialist doctor, including OB/GYN                      | _ |  |
| Nurse  | _ |  |
| Midwife/nurse-midwife                                    | _ |  |
| Other provider(s)  | _ |  |
|  |   |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |   |
|--|---|
| National guidelines on clinical and service delivery of induced abortion   | _ |
| National guidelines on clinical and service delivery of post-abortion care | _ |
| Restrictions on public information on legal abortion services              | _ |
| Counselling for contraceptive methods during post-abortion care            | _ |

| Service delivery requirements for providers or facilities |              |  |
|---|--------------|--|
| Referral linkage to a higher-level facility               | _            |  |
| Availability of a specialist doctor                       | <del>-</del> |  |
| Minimum number of beds                                    | _            |  |
| Other facility/provider requirements                      | _            |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to<br>alternative provider or facility |
|--|-------------------|--|
| Health-care facilities   | _                 | _  |
| Health-care providers  | _                 | _  |

#### Notes:

- Indicates that data are not available, not applicable or not specified
- 1. Abortion is generally illegal in the country. However, under the general criminal law principles of necessity, it is allowed to be performed to save the life of the pregnant woman.



#### **Panama**

| LAWS ON ABORTION                                 |                                      |   |  |  |
|--|--------------------------------------|---|--|--|
| Legal grounds for induced abortion               | Currently permissible in the country | Gestational limit for each legal ground (weeks) |  |  |
| To save life                                     | Yes                                  | No limit  |  |  |
| To preserve health                               | No                                   | _   |  |  |
| To preserve physical health                      | No                                   | <del>-</del>                                    |  |  |
| To preserve mental health                        | No                                   | _   |  |  |
| In cases of intellectual or cognitive disability | No                                   | _   |  |  |
| In cases of incest                               | No                                   | _   |  |  |
| In cases of rape                                 | Yes                                  | 8   |  |  |
| In cases of foetal impairment                    | Yes                                  | 24  |  |  |
| For economic or social reason                    | No                                   | _   |  |  |
| On request                                       | No                                   | <del>-</del>                                    |  |  |
| For other reason(s)                              | _                                    | _   |  |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |   |
|---|-----|----------|-----|------------------------------------|---|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | _ |

| REQUIREMENTS FOR INDUCED ABORTION            |     |  |              |
|--|-----|--|--------------|
| Authorizations required Consent required     |     |  |              |
| Authorization of health care professional(s) | Yes | Spousal consent                              | <del>-</del> |
| Number of authorizations                     | 3   | Parental consent for minors                  | Yes          |
| Cadre of health care professional            |     | Consent by another adult                     | _            |
| Doctor (specialty not specified)             | Yes |  |              |
| Specialist doctor, including OB/GYN          | Yes | Other requirements                           |              |
| Nurse  | _   | Gestational age limits                       | Yes          |
| Midwife/nurse-midwife                        | _   | Compulsory counselling                       | _            |
| Other providers                              | _   | Compulsory waiting period                    | _            |
| Authorized in specially licensed facilities  | Yes | Length of waiting period (days)              | _            |
| Judicial authorization                       |     | Mandatory screening test                     |              |
| For minors                                   | _   | HIV test                                     | _            |
| In case of rape                              | Yes | Other STI test(s)                            | _            |
| Police report in case of rape                | _   | Ultrasound viewing or listening to heartbeat | _            |

| Age limit for parental consent (years) | 18            | Age limit for judicial consent (years)        | _ |
|--|---------------|---|---|
|  |               |   |   |
|  | Sex-selective | abortion                                      |   |
| Deskibition of any colorative abouting |               | Restrictions on the methods to detect the sex |   |

| ACCESS TO ABORTION SERVICES           |                                  |   |  |  |
|---------------------------------------|----------------------------------|---|--|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |  |
| Vacuum aspiration                     | Yes                              | <del>-</del>                              |  |  |
| Dilatation and evacuation             | Yes                              | <del>-</del>                              |  |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | <del>-</del>                              |  |  |
| Misoprostol only                      | _                                | _   |  |  |
| Other method(s)                       | _                                | <del>-</del>                              |  |  |



#### **Panama**

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |  |
| Misoprostol  | Yes 1   | Yes <sup>2</sup>   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | _                | _                  |
| Secondary (district-level) health-care facilities | Yes              | Yes                |
| Specialized abortion care public facilities       | _                | _                  |
| Private health-care centres or clinics            | _                | <del>-</del>       |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | _                | Yes <sup>3</sup>   |

| Health care personnel allowed to provide legal abortions |     |  |
|--|-----|--|
| Doctors (speciality not specified)                       | _   |  |
| Specialist doctor, including OB/GYN                      | Yes |  |
| Nurse  | _   |  |
| Midwife/nurse-midwife                                    | _   |  |
| Other provider(s)  | _   |  |

| Times of incurance or other severage for charties                  |     |
|--|-----|
| Types of insurance or other coverage for abortion                  |     |
| Public health coverage for induced abortion for all women          | Yes |
| Public health coverage for induced abortion for<br>poor women only | _   |
| Public health coverage for abortion complications                  | Yes |
| Private health coverage for induced abortion                       | _   |
| Other type of coverage   | _   |

| Yes |
|-----|
| Yes |
| _   |
| Yes |
|     |

| Service delivery requirements for providers or facilities |     |  |
|---|-----|--|
| Referral linkage to a higher-level facility               | Yes |  |
| Availability of a specialist doctor                       | Yes |  |
| Minimum number of beds                                    | _   |  |
| Other facility/provider requirements                      | _   |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | Yes <sup>4</sup>  | _   |

#### Notes:

- Indications not specified.
   With prescription only.
   Tertiary level hospitals.
   Provider type not specified.



### Papua New Guinea

| LAWS ON ABORTION                                 |   |   |  |
|--|---|---|--|
| Legal grounds for induced abortion               | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | _   |  |
| To preserve health                               | Yes                                     | _   |  |
| To preserve physical health                      | Yes                                     | _   |  |
| To preserve mental health                        | Yes                                     | _   |  |
| In cases of intellectual or cognitive disability | No                                      | _   |  |
| In cases of incest                               | No                                      | <del>-</del>                                    |  |
| In cases of rape                                 | No                                      | _   |  |
| In cases of foetal impairment                    | No                                      | _   |  |
| For economic or social reason                    | No                                      | _   |  |
| On request                                       | No                                      | _   |  |
| For other reason(s)                              | _                                       | _   |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |  |   |  |
|--|--|---|--|
| Authorizations required                      | Consent required                             |   |  |
| Authorization of health care professional(s) | — Spousal consent                            | _ |  |
| Number of authorizations                     | Parental consent for minors                  | _ |  |
| Cadre of health care professional            | Consent by another adult                     | _ |  |
| Doctor (specialty not specified)             | _  |   |  |
| Specialist doctor, including OB/GYN          | Other requirements                           |   |  |
| Nurse  | — Gestational age limits                     | _ |  |
| Midwife/nurse-midwife                        | — Compulsory counselling                     | _ |  |
| Other providers                              | Compulsory waiting period                    | _ |  |
| Authorized in specially licensed facilities  | Length of waiting period (days)              | _ |  |
| Judicial authorization                       | Mandatory screening test                     |   |  |
| For minors                                   | - HIV test                                   | _ |  |
| In case of rape                              | — Other STI test(s)                          | _ |  |
| Police report in case of rape                | Ultrasound viewing or listening to heartbeat | _ |  |

| Age when a wo                          | Age when a woman can obtain an abortion without parental or judicial consent |  |   |   |  |
|--|--|--|---|---|--|
| Age limit for parental consent (years) | _  | Age limit for judicial consent (years) | _ |   |  |
|  |  |  |   |   |  |
|  |  |  |   | _ |  |

|                                       | Sex-selective abortion                                      |
|---------------------------------------|---|
| Prohibition of sex-selective abortion | Restrictions on the methods to detect the sex of the foetus |

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | _                                | <del>-</del>                              |  |
| Dilatation and evacuation             | <del>-</del>                     | <del>-</del>                              |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | <del>-</del>                              |  |
| Misoprostol only                      | <del>-</del>                     | _   |  |
| Other method(s)                       | <del>-</del>                     | <del>-</del>                              |  |



### Papua New Guinea

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |  |
| Misoprostol  | Yes <sup>2</sup>                                  | Yes <sup>3</sup>   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | _                  |
| Specialized abortion care public facilities       | <del>-</del>     | _                  |
| Private health-care centres or clinics            | <del>-</del>     | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | _                  |
| Other settings or facilities                      | _                | _                  |

| Health care personnel allowed to provide legal abortions |   |  |
|--|---|--|
| Doctors (speciality not specified)                       | _ |  |
| Specialist doctor, including OB/GYN                      | _ |  |
| Nurse  | _ |  |
| Midwife/nurse-midwife                                    | _ |  |
| Other provider(s)  | _ |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | _   |
| National guidelines on clinical and service delivery of post-abortion care | Yes |
| Restrictions on public information on legal abortion services              | _   |
| Counselling for contraceptive methods during<br>post-abortion care         | Yes |

| Service delivery requirements for providers or facilities |   |  |
|---|---|--|
| Referral linkage to a higher-level facility               | _ |  |
| Availability of a specialist doctor                       | _ |  |
| Minimum number of beds                                    | _ |  |
| Other facility/provider requirements                      | _ |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to<br>alternative provider or facility |
|--|-------------------|--|
| Health-care facilities   | _                 | _  |
| Health-care providers  | _                 | _  |

#### Notes:

- Indicates that data are not available, not applicable or not specified.
- 1. Surgical operation performed in good faith and with reasonable care and skill upon an unborn child for the preservation of the mother's life, if the performance of the operation is reasonable, having regard to the patient's state at the time and to all the circumstances of the case.

  2. For gynaecological indications.

  3. With prescription only.



### Paraguay

| LAWS ON ABORTION                                 |   |   |  |
|--|---|---|--|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | _   |  |
| To preserve health                               | No                                      | _   |  |
| To preserve physical health                      | No                                      | _   |  |
| To preserve mental health                        | No                                      | <del>-</del>                                    |  |
| In cases of intellectual or cognitive disability | No                                      | _   |  |
| In cases of incest                               | No                                      | _   |  |
| In cases of rape                                 | No                                      | _   |  |
| In cases of foetal impairment                    | No                                      | _   |  |
| For economic or social reason                    | No                                      | _   |  |
| On request                                       | No                                      | _   |  |
| For other reason(s)                              | _                                       | _   |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |   |  |              |
|--|---|--|--------------|
| Authorizations required                      |   | Consent required                             |              |
| Authorization of health care professional(s) | _ | Spousal consent                              | <del>_</del> |
| Number of authorizations                     | _ | Parental consent for minors                  | _            |
| Cadre of health care professional            |   | Consent by another adult                     | _            |
| Doctor (specialty not specified)             | _ |  |              |
| Specialist doctor, including OB/GYN          | _ | Other requirements                           |              |
| Nurse  | _ | Gestational age limits                       | _            |
| Midwife/nurse-midwife                        | _ | Compulsory counselling                       | _            |
| Other providers                              | _ | Compulsory waiting period                    | _            |
| Authorized in specially licensed facilities  | _ | Length of waiting period (days)              | _            |
| Judicial authorization                       |   | Mandatory screening test                     |              |
| For minors                                   | _ | HIV test                                     | _            |
| In case of rape                              | _ | Other STI test(s)                            | _            |
| Police report in case of rape                | _ | Ultrasound viewing or listening to heartbeat | _            |

| Age limit for parental consent (years) | — Age limit for judicial consent (years) —    |
|--|---|
|  |   |
|  | Sex-selective abortion                        |
| Prohibition of sex-selective abortion  | Restrictions on the methods to detect the sex |

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | Yes                              | _   |  |
| Dilatation and evacuation             | Yes                              | _   |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | _   |  |
| Misoprostol only                      | <del>-</del>                     | _   |  |
| Other method(s)                       | <del>-</del>                     | _   |  |



### **Paraguay**

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |  |
| Misoprostol  | No  | _  |  |

| Settings for providing legal abortion services    | Post-abortion care |              |
|---|--------------------|--------------|
| Primary health care centres                       | <del>-</del>       | <del>-</del> |
| Secondary (district-level) health-care facilities | <del>-</del>       | _            |
| Specialized abortion care public facilities       | <del>-</del>       | _            |
| Private health-care centres or clinics            | <del>-</del>       | _            |
| NGO health-care centres or clinics                | <del>-</del>       | _            |
| Other settings or facilities                      | _                  | _            |

| Health care personnel allowed to provide legal abortions |   |
|--|---|
| Doctors (speciality not specified)                       | _ |
| Specialist doctor, including OB/GYN                      | _ |
| Nurse  | _ |
| Midwife/nurse-midwife                                    | _ |
| Other provider(s)  | _ |
|  |   |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | _   |
| National guidelines on clinical and service delivery of post-abortion care | Yes |
| Restrictions on public information on legal abortion services              | _   |
| Counselling for contraceptive methods during post-abortion care            | Yes |

| Service delivery requirements for providers or facilities |              |  |
|---|--------------|--|
| Referral linkage to a higher-level facility               | _            |  |
| Availability of a specialist doctor                       | <del>-</del> |  |
| Minimum number of beds                                    | _            |  |
| Other facility/provider requirements                      | _            |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to<br>alternative provider or facility |
|--|-------------------|--|
| Health-care facilities   | _                 | <del>-</del>   |
| Health-care providers  | <del>-</del>      | _  |

Indicates that data are not available, not applicable or not specified.



### Peru

| LAWS ON ABORTION                                 |   |   |
|--|---|---|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |
| To save life                                     | Yes                                     | 22  |
| To preserve health                               | Yes                                     | 22  |
| To preserve physical health                      | _                                       | _   |
| To preserve mental health                        | _                                       | _   |
| In cases of intellectual or cognitive disability | No                                      | _   |
| In cases of incest                               | No                                      | _   |
| In cases of rape                                 | No                                      | _   |
| In cases of foetal impairment                    | No                                      | _   |
| For economic or social reason                    | No                                      | _   |
| On request                                       | No                                      | _   |
| For other reason(s)                              | _                                       | _   |

| Persons who can be criminally charged for an illegal abortion |   |          |     |                                    |   |  |
|---|---|----------|-----|------------------------------------|---|--|
| Woman   | _ | Provider | Yes | Other person who assists the woman | _ |  |

| REQUIREMENTS FO                              |                  | R INDUCED ABORTION    |
|--|------------------|-----------------------|
| Authorizations required                      |                  | Consent required      |
| Authorization of health care professional(s) | Yes              | Spousal consent       |
| Number of authorizations                     | 1                | Parental consent for  |
| Cadre of health care professional            |                  | Consent by another    |
| Doctor (specialty not specified)             | Yes              |                       |
| Specialist doctor, including OB/GYN          | Yes              | Other requirements    |
| Nurse  | _                | Gestational age limit |
| Midwife/nurse-midwife                        | _                | Compulsory counsel    |
| Other providers                              | Yes <sup>2</sup> | Compulsory waiting    |
| Authorized in specially licensed facilities  | Yes              | Length of waitin      |
| Judicial authorization                       |                  | Mandatory screening   |
| For minors                                   | _                | HIV test              |
| In case of rape                              | _                | Other STI test(s      |
| Police report in case of rape                | _                | Ultrasound viewing of |

| Parental consent for minors                  | Yes |  |
|--|-----|--|
| Consent by another adult                     | _   |  |
|  |     |  |
| Other requirements                           |     |  |
| Gestational age limits                       | Yes |  |
| Compulsory counselling                       | _   |  |
| Compulsory waiting period                    | _   |  |
| Length of waiting period (days)              | _   |  |
| Mandatory screening test                     |     |  |
| HIV test                                     | _   |  |
| Other STI test(s)                            | _   |  |
| Ultrasound viewing or listening to heartbeat | _   |  |

No

| Age when a woman                       | an obtain an abortion without parental or judicial consent |   |
|--|--|---|
| Age limit for parental consent (years) | <ul> <li>Age limit for judicial consent (years)</li> </ul> | _ |

|                                       | Sex-selective abortion |   |
|---------------------------------------|------------------------|---|
| Prohibition of sex-selective abortion | Yes                    | Restrictions on the methods to detect the sex of the foetus |

| ACCESS TO ABORTION SERVICES           |                                  |   |  |  |
|---------------------------------------|----------------------------------|---|--|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |  |
| Vacuum aspiration                     | Yes                              | 12  |  |  |
| Dilatation and evacuation             | <del>-</del>                     | <del>-</del>                              |  |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | <del>-</del>                              |  |  |
| Misoprostol only                      | Yes                              | 22  |  |  |
| Other method(s)                       | Yes <sup>3</sup>                 | 22  |  |  |



#### Peru

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |  |
|--|---|--|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |  |  |
| Misoprostol  | Yes <sup>4</sup>                                  | Yes <sup>5</sup>   |  |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | No               | Yes                |
| Secondary (district-level) health-care facilities | Yes              | Yes                |
| Specialized abortion care public facilities       | _                | <del>-</del>       |
| Private health-care centres or clinics            | _                | <del>-</del>       |
| NGO health-care centres or clinics                | _                | <del>-</del>       |
| Other settings or facilities                      | _                | Yes <sup>6</sup>   |

| Health care personnel allowed to provide legal abortions | ;            |
|--|--------------|
| Doctors (speciality not specified)                       | _            |
| Specialist doctor, including OB/GYN                      | Yes          |
| Nurse  | _            |
| Midwife/nurse-midwife                                    | _            |
| Other provider(s)  | <del>_</del> |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | Yes |
| National guidelines on clinical and service delivery of post-abortion care | Yes |
| Restrictions on public information on legal abortion services              | _   |
| Counselling for contraceptive methods during<br>post-abortion care         | Yes |

| Service delivery requirements for providers or facilities |                  |  |
|---|------------------|--|
| Referral linkage to a higher-level facility               | _                |  |
| Availability of a specialist doctor                       | Yes              |  |
| Minimum number of beds                                    | _                |  |
| Other facility/provider requirements                      | Yes <sup>7</sup> |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |  |
|--|-------------------|---|--|
| Health-care facilities   | _                 | _   |  |
| Health-care providers  | _                 | _   |  |

#### Notes:

- 1. Abortion is criminalized in cases of pregnancy resulting from rape but carries a reduced sentence of three months in prison, instead of the minimum 1 year maximum 5 years when an abortion is obtained for other reasons. To be eligible to be considered for a reduced penalty the rape victim who obtained an illegal abortion must file an official complaint with the police and it must have been investigated and assessed. A reduced sentence of three months is also applicable to cases in which it is likely, based on a medical diagnosis, that the foetus when born would have grave physical or mental deflects.

  2. Medical Committee of experts.

  3. Misoprostol and curettage. Dilation and curettage.

  4. For gynaecological indications.

  5. With prescription only.

  6. Tertiary level health care providers.

  7. Operating room, equipment for anaesthesia, Manual Vacuum Aspiration (MVA) and dilation and curettage.



### **Philippines**

| LAWS ON ABORTION                                 |   |   |  |  |
|--|---|---|--|--|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |  |
| To save life                                     | Yes                                     | _   |  |  |
| To preserve health                               | No                                      | _   |  |  |
| To preserve physical health                      | No                                      | _   |  |  |
| To preserve mental health                        | No                                      | _   |  |  |
| In cases of intellectual or cognitive disability | No                                      | _   |  |  |
| In cases of incest                               | No                                      | _   |  |  |
| In cases of rape                                 | No                                      | _   |  |  |
| In cases of foetal impairment                    | No                                      | _   |  |  |
| For economic or social reason                    | No                                      | _   |  |  |
| On request                                       | No                                      | _   |  |  |
| For other reason(s)                              | _                                       | _   |  |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |  |   |  |  |
|--|--|---|--|--|
| Authorizations required                      | Consent required                             |   |  |  |
| Authorization of health care professional(s) | — Spousal consent                            | _ |  |  |
| Number of authorizations                     | Parental consent for minors                  | _ |  |  |
| Cadre of health care professional            | Consent by another adult                     | _ |  |  |
| Doctor (specialty not specified)             | _  |   |  |  |
| Specialist doctor, including OB/GYN          | Other requirements                           |   |  |  |
| Nurse  | — Gestational age limits                     | _ |  |  |
| Midwife/nurse-midwife                        | — Compulsory counselling                     | _ |  |  |
| Other providers                              | Compulsory waiting period                    | _ |  |  |
| Authorized in specially licensed facilities  | Length of waiting period (days)              | _ |  |  |
| Judicial authorization                       | Mandatory screening test                     |   |  |  |
| For minors                                   | - HIV test                                   | _ |  |  |
| In case of rape                              | — Other STI test(s)                          | _ |  |  |
| Police report in case of rape                | Ultrasound viewing or listening to heartbeat | _ |  |  |

| Age when a woman can obtain an abortion without parental or judicial consent |   |  |   |   |
|--|---|--|---|---|
| Age limit for parental consent (years)                                       | _ | Age limit for judicial consent (years) | _ |   |
|  |   |  |   |   |
|  |   |  |   | _ |

|                                       | Sex-selective abortion                                      |  |
|---------------------------------------|---|--|
| Prohibition of sex-selective abortion | Restrictions on the methods to detect the sex of the foetus |  |

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | _                                | <del>-</del>                              |  |
| Dilatation and evacuation             | <del>-</del>                     | <del>-</del>                              |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | <del>-</del>                              |  |
| Misoprostol only                      | <del>-</del>                     | _   |  |
| Other method(s)                       | <del>-</del>                     | <del>-</del>                              |  |



### **Philippines**

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |  |
| Misoprostol  | No  | <del>_</del>   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | _                  |
| Specialized abortion care public facilities       | <del>-</del>     | _                  |
| Private health-care centres or clinics            | <del>-</del>     | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | <del>-</del>     | _                  |

| _ |
|---|
| _ |
| _ |
| _ |
| _ |
|   |
|   |
| _ |
|   |

Health care personnel allowed to provide legal abortions

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Service delivery requirements for providers or facilities |   |  |  |
|---|---|--|--|
| Referral linkage to a higher-level facility               | _ |  |  |
| Availability of a specialist doctor                       | _ |  |  |
| Minimum number of beds                                    | _ |  |  |
| Other facility/provider requirements                      | _ |  |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | <del>-</del>      | <del>-</del>  |
| Health-care providers  | <u> </u>          | _   |

#### Notes:

The designations employed in this publication and the material presented in it do not imply the expression of any opinion whatsoever on the part of the Secretariat of the United Nations concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries.

Indicates that data are not available, not applicable or not specified.

Restrictions on public information on legal abortion services

Counselling for contraceptive methods during

post-abortion care

1. Abortion is generally illegal in the country. However, under the general criminal law principles of necessity, it is allowed to be performed to save the life of the pregnant woman.



### **Poland**

| LAWS ON ABORTION                                 |   |   |  |  |
|--|---|---|--|--|
| Legal grounds for induced abortion               | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |  |
| To save life                                     | Yes                                     | No limit  |  |  |
| To preserve health                               | Yes                                     | No limit  |  |  |
| To preserve physical health                      | <del>-</del>                            | <del>-</del>                                    |  |  |
| To preserve mental health                        | <del>-</del>                            | _   |  |  |
| In cases of intellectual or cognitive disability | No                                      | <del>-</del>                                    |  |  |
| In cases of incest                               | Yes                                     | 13  |  |  |
| In cases of rape                                 | Yes                                     | 13  |  |  |
| In cases of foetal impairment                    | Yes                                     | <del>-</del>                                    |  |  |
| For economic or social reason                    | No                                      | <del>-</del>                                    |  |  |
| On request                                       | No                                      | <del>-</del>                                    |  |  |
| For other reason(s)                              | _                                       | _   |  |  |

| Persons who can be criminally charged for an illegal abortion |   |          |     |                                    |     |  |
|---|---|----------|-----|------------------------------------|-----|--|
| Woman   | _ | Provider | Yes | Other person who assists the woman | Yes |  |

| REQUIREMENTS FOR INDUCED ABORTION            |     |  |     |  |  |
|--|-----|--|-----|--|--|
| Authorizations required                      |     | Consent required                             |     |  |  |
| Authorization of health care professional(s) | Yes | Spousal consent                              | _   |  |  |
| Number of authorizations                     | 1 1 | Parental consent for minors                  | Yes |  |  |
| Cadre of health care professional            |     | Consent by another adult                     | Yes |  |  |
| Doctor (specialty not specified)             | Yes |  |     |  |  |
| Specialist doctor, including OB/GYN          | _   | Other requirements                           |     |  |  |
| Nurse  | _   | Gestational age limits                       | Yes |  |  |
| Midwife/nurse-midwife                        | _   | Compulsory counselling                       | _   |  |  |
| Other providers                              | _   | Compulsory waiting period                    | Yes |  |  |
| Authorized in specially licensed facilities  | _   | Length of waiting period (days)              | 3 3 |  |  |
| Judicial authorization                       |     | Mandatory screening test                     |     |  |  |
| For minors                                   | No  | HIV test                                     | _   |  |  |
| In case of rape                              | _   | Other STI test(s)                            | _   |  |  |
| Police report in case of rape                | _   | Ultrasound viewing or listening to heartbeat | _   |  |  |

| Age when a woman can obtain an abortion without parental or judicial consent |   |  |   |
|--|---|--|---|
| Age limit for parental consent (years)                                       | _ | Age limit for judicial consent (years) | _ |
|  |   |  |   |
|  |   |  |   |

|                                       | Sex-selective abortion                                      |
|---------------------------------------|---|
| Prohibition of sex-selective abortion | Restrictions on the methods to detect the sex of the foetus |

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | _                                | <del>-</del>                              |  |
| Dilatation and evacuation             | <del>-</del>                     | <del>-</del>                              |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | <del>-</del>                              |  |
| Misoprostol only                      | <del>-</del>                     | _   |  |
| Other method(s)                       | <del>-</del>                     | <del>-</del>                              |  |



#### **Poland**

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |  |
|--|---|--|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |  |  |
| Misoprostol  | Yes <sup>4</sup>                                  | <del>-</del>   |  |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>_</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | <del>-</del>       |
| Specialized abortion care public facilities       | <del>-</del>     | <del>-</del>       |
| Private health-care centres or clinics            | <del>-</del>     | <del>-</del>       |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | Yes <sup>5</sup> | _                  |

| lealth care personnel allowed to provide legal ab | ortions |
|---|---------|
| Doctors (speciality not specified)                | No      |
| Specialist doctor, including OB/GYN               | Yes     |
| Nurse   | No      |
| Midwife/nurse-midwife                             | No      |
| Other provider(s)                                 | _       |
|   |         |

| Types of insurance or other coverage for abortion                  |     |
|--|-----|
| Public health coverage for induced abortion for all women          | Yes |
| Public health coverage for induced abortion for<br>poor women only | No  |
| Public health coverage for abortion complications                  | _   |
| Private health coverage for induced abortion                       | _   |
| Other type of coverage   | _   |

| to form a discount for the three countries and a section of the countries.  |     |
|---|-----|
| Information and guidelines on abortion services                             |     |
| National guidelines on clinical and service<br>delivery of induced abortion | _   |
| National guidelines on clinical and service delivery of post-abortion care  | _   |
| Restrictions on public information on legal abortion services               | _   |
| Counselling for contraceptive methods during post-abortion care             | Yes |

| Service delivery requirements for providers or facilities |     |  |
|---|-----|--|
| Referral linkage to a higher-level facility               | _   |  |
| Availability of a specialist doctor                       | Yes |  |
| Minimum number of beds                                    | _   |  |
| Other facility/provider requirements                      | _   |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | Yes <sup>6</sup>  | Yes   |

#### Notes:

- 1. In case of risk to life or health or foetal impairment, the authorisation of a physician other than the one performing the abortion is needed. In case of a pregnancy resulting from a prohibited act, the statement of a prosecutor is required.

  2. Parental consent is required and, if not obtained, judicial authorization of the custody court is required for minors. For girls below 13 years of age, judicial authorization is required in addition to parental consent.

  3. From the time of consultation.

  4. Indications not specified.

- 5. Hospital.6. Provider type not specified.



### **Portugal**

| LAWS ON ABORTION                                 |                                      |   |  |  |
|--|--------------------------------------|---|--|--|
| egal grounds for induced abortion                | Currently permissible in the country | Gestational limit for each legal ground (weeks) |  |  |
| To save life                                     | Yes                                  | No limit  |  |  |
| To preserve health                               | Yes                                  | 12  |  |  |
| To preserve physical health                      | Yes                                  | 12  |  |  |
| To preserve mental health                        | Yes                                  | 12  |  |  |
| In cases of intellectual or cognitive disability | <del>-</del>                         | <del>-</del>                                    |  |  |
| In cases of incest                               | <del>-</del>                         | <del>-</del>                                    |  |  |
| In cases of rape                                 | Yes                                  | <del>-</del>                                    |  |  |
| In cases of foetal impairment                    | Yes                                  | 24  |  |  |
| For economic or social reason                    | <del>-</del>                         | <del>-</del>                                    |  |  |
| On request                                       | Yes                                  | 10  |  |  |
| For other reason(s)                              | Yes <sup>1</sup>                     | _   |  |  |

|       |     | Persons who can be criminally cha | arged for | an illegal abortion                |     |
|-------|-----|-----------------------------------|-----------|------------------------------------|-----|
| Woman | Yes | Provider                          | Yes       | Other person who assists the woman | Yes |

| Authorizations required                      |     | Consent required                             |     |
|--|-----|--|-----|
| Authorization of health care professional(s) | Yes | Spousal consent                              | _   |
| Number of authorizations                     | 1 2 | Parental consent for minors                  | Yes |
| Cadre of health care professional            |     | Consent by another adult                     | Yes |
| Doctor (specialty not specified)             | Yes |  |     |
| Specialist doctor, including OB/GYN          | _   | Other requirements                           |     |
| Nurse  | _   | Gestational age limits                       | Yes |
| Midwife/nurse-midwife                        | _   | Compulsory counselling                       | Yes |
| Other providers                              | _   | Compulsory waiting period                    | Yes |
| Authorized in specially licensed facilities  | Yes | Length of waiting period (days)              | 3 3 |
| Judicial authorization                       |     | Mandatory screening test                     |     |
| For minors                                   | _   | HIV test                                     | _   |
| In case of rape                              | _   | Other STI test(s)                            | _   |
| Police report in case of rape                | _   | Ultrasound viewing or listening to heartbeat | _   |

Age when a woman can obtain an abortion without parental or judicial consent

| Age limit for parental consent (years) | 16            | Age limit for judicial consent (years)        | _ |
|--|---------------|---|---|
|  |               |   |   |
|  | Sex-selective | abortion                                      |   |
| Prohibition of sex-selective abortion  |               | Restrictions on the methods to detect the sex | _ |

of the foetus

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | Yes                              | 10  |  |
| Dilatation and evacuation             | <del>-</del>                     | <del>-</del>                              |  |
| Combination mifepristone- misoprostol | Yes                              | 9   |  |
| Misoprostol only                      | _                                | _   |  |
| Other method(s)                       | Yes <sup>4</sup>                 | _   |  |



### **Portugal**

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |
|--|---|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |
| Mifepristone and/or combination mifepristone-misoprostol | Yes   | No   |
| Misoprostol  | Yes <sup>5</sup>                                  | Yes <sup>6</sup>   |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>_</del>       |
| Secondary (district-level) health-care facilities | _                | <del>-</del>       |
| Specialized abortion care public facilities       | _                | _                  |
| Private health-care centres or clinics            | _                | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | Yes <sup>7</sup> | _                  |

| Health care personnel allowed to provide legal abortions |                  |  |
|--|------------------|--|
| Doctors (speciality not specified)                       | Yes              |  |
| Specialist doctor, including OB/GYN                      | _                |  |
| Nurse  | _                |  |
| Midwife/nurse-midwife                                    | _                |  |
| Other provider(s)  | Yes <sup>8</sup> |  |
|  |                  |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | Yes |
| National guidelines on clinical and service delivery of post-abortion care | Yes |
| Restrictions on public information on legal abortion services              | _   |
| Counselling for contraceptive methods during<br>post-abortion care         | Yes |

| Service delivery requirements for providers or facilities |   |  |
|---|---|--|
| Referral linkage to a higher-level facility               | _ |  |
| Availability of a specialist doctor                       | _ |  |
| Minimum number of beds                                    | _ |  |
| Other facility/provider requirements                      | _ |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | Yes <sup>9</sup>  | Yes   |

#### Notes:

- Abortion is permissible when the pregnancy resulted from a crime against freedom and sexual self-determination during first 16 weeks of pregnancy.

  2. The doctor authorising the abortion must be different from the doctor providing the abortion. In cases where the unborn child will incurably suffer from a serious illness or congenital malformation, the required certification is done by a Technical Committee at the level of the health institution.

  3. There is a waiting period of no less than three days from the day of the first consultation in the case of abortion on request.

  4. Dilation and curettage.

  5. For gynaecological indications.

  6. With prescription only.

  7. Officially recognized health facility.

  8. \*\*Under the direction of a doctor\*\*, not further specified.

  9. Provider type not specified.



Prohibition of sex-selective abortion

Other method(s)

## Abortion laws and policies, 2017

#### Qatar

| LAWS ON ABORTION                                 |   |   |  |
|--|---|---|--|
| Legal grounds for induced abortion               | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | No limit  |  |
| To preserve health                               | Yes                                     | 16  |  |
| To preserve physical health                      | <del>-</del>                            | <del>_</del>                                    |  |
| To preserve mental health                        | <del>-</del>                            | _   |  |
| In cases of intellectual or cognitive disability | No                                      | _   |  |
| In cases of incest                               | No                                      | _   |  |
| In cases of rape                                 | No                                      | _   |  |
| In cases of foetal impairment                    | Yes                                     | 16  |  |
| For economic or social reason                    | No                                      | _   |  |
| On request                                       | No                                      | _   |  |
| For other reason(s)                              | _                                       | _   |  |

| Persons who can be criminally charged for an illegal abortion |     |              |                                    |   |
|---|-----|--------------|------------------------------------|---|
| Woman   | Yes | Provider Yes | Other person who assists the woman | _ |

| REQUIREMENTS FOR INDUCED ABORTION            |     |  |     |  |
|--|-----|--|-----|--|
| uthorizations required                       |     | Consent required                             |     |  |
| Authorization of health care professional(s) | Yes | Spousal consent                              | Yes |  |
| Number of authorizations                     | 3 1 | Parental consent for minors                  | _   |  |
| Cadre of health care professional            |     | Consent by another adult                     | _   |  |
| Doctor (specialty not specified)             | _   |  |     |  |
| Specialist doctor, including OB/GYN          | Yes | Other requirements                           |     |  |
| Nurse  | _   | Gestational age limits                       | Yes |  |
| Midwife/nurse-midwife                        | _   | Compulsory counselling                       | _   |  |
| Other providers                              | _   | Compulsory waiting period                    | _   |  |
| Authorized in specially licensed facilities  | _   | Length of waiting period (days)              | _   |  |
| Judicial authorization                       |     | Mandatory screening test                     |     |  |
| For minors                                   | _   | HIV test                                     | _   |  |
| In case of rape                              | _   | Other STI test(s)                            | _   |  |
| Police report in case of rape                | _   | Ultrasound viewing or listening to heartbeat | _   |  |

| Age limit for parental consent (years) | <del>-</del>   | Age limit for judicial consent (years) | <del>-</del> |
|--|----------------|--|--------------|
|  |                |  |              |
|  | Con coloration | a abantian                             |              |

Restrictions on the methods to detect the sex

| ACCESS TO ABORTION SERVICES           |                                  |   |
|---------------------------------------|----------------------------------|---|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |
| Vacuum aspiration                     | _                                | <del>-</del>                              |
| Dilatation and evacuation             | <del>-</del>                     | <del>-</del>                              |
| Combination mifepristone- misoprostol | <del>-</del>                     | <del>-</del>                              |
| Misoprostol only                      | _                                | _   |



#### Qatar

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |  |
| Misoprostol  | Yes <sup>2</sup>                                  | _  |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | No               | _                  |
| Secondary (district-level) health-care facilities | Yes              | _                  |
| Specialized abortion care public facilities       | _                | _                  |
| Private health-care centres or clinics            | No               | _                  |
| NGO health-care centres or clinics                | No               | _                  |
| Other settings or facilities                      | _                | _                  |

| Health care personnel allowed to provide legal abortion | ıs |
|---|----|
| Doctors (speciality not specified)                      | _  |
| Specialist doctor, including OB/GYN                     | _  |
| Nurse   | _  |
| Midwife/nurse-midwife                                   | _  |
| Other provider(s)                                       | _  |
|   |    |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| lr | formation and guidelines on abortion services                              |
|----|--|
|    | National guidelines on clinical and service delivery of induced abortion   |
|    | National guidelines on clinical and service delivery of post-abortion care |
|    | Restrictions on public information on legal abortion services              |
|    | Counselling for contraceptive methods during                               |

| Service delivery requirements for providers or facilities |   |  |
|---|---|--|
| Referral linkage to a higher-level facility               | _ |  |
| Availability of a specialist doctor                       | _ |  |
| Minimum number of beds                                    | _ |  |
| Other facility/provider requirements                      | _ |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to<br>alternative provider or facility |
|--|-------------------|--|
| Health-care facilities   | _                 | _  |
| Health-care providers  | _                 | _  |

#### Notes:

- 1. Abortion must be performed in a government hospital on the recommendation of a medical commission composed of three medical specialists, including a specialist in gynaecology and a specialist in obstetrics.

  2. Indications not specified.



Prohibition of sex-selective abortion

# Abortion laws and policies, 2017

### Republic of Korea

| LAWS ON ABORTION                                 |   |   |  |
|--|---|---|--|
| Legal grounds for induced abortion               | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | _   |  |
| To preserve health                               | Yes                                     | 24  |  |
| To preserve physical health                      | Yes                                     | 24  |  |
| To preserve mental health                        | _                                       | _   |  |
| In cases of intellectual or cognitive disability | Yes                                     | 24  |  |
| In cases of incest                               | Yes                                     | 24  |  |
| In cases of rape                                 | Yes                                     | 24  |  |
| In cases of foetal impairment                    | Yes                                     | _   |  |
| For economic or social reason                    | No                                      | _   |  |
| On request                                       | No                                      | _   |  |
| For other reason(s)                              | Yes <sup>1</sup>                        | _   |  |

|       |     | Persons who can be criminally charged fo | r an illegal abortion              |   |
|-------|-----|--|------------------------------------|---|
| Woman | Yes | Provider Yes                             | Other person who assists the woman | _ |

| Authorizations required                      | Consent required                             |     |
|--|--|-----|
| Authorization of health care professional(s) | Spousal consent                              | Yes |
| Number of authorizations                     | Parental consent for minors                  | _   |
| Cadre of health care professional            | Consent by another adult                     | _   |
| Doctor (specialty not specified)             |  |     |
| Specialist doctor, including OB/GYN          | Other requirements                           |     |
| Nurse  | Gestational age limits                       | Yes |
| Midwife/nurse-midwife                        | Compulsory counselling                       | _   |
| Other providers                              | Compulsory waiting period                    | _   |
| Authorized in specially licensed facilities  | Length of waiting period (days)              | _   |
| Judicial authorization                       | Mandatory screening test                     |     |
| For minors                                   | HIV test                                     | _   |
| In case of rape                              | Other STI test(s)                            | _   |
| Police report in case of rape                | Ultrasound viewing or listening to heartbeat | _   |

| Age limit for parental consent (years) | Age limit for judicial consent (years) |  |
|--|--|--|
|  | Sex-selective abortion                 |  |

Restrictions on the methods to detect the sex

Yes

| ACCESS TO ABORTION SERVICES   |   |              |  |  |  |
|---|---|--------------|--|--|--|
| Methods for induced abortions  Currently allowed Gestational limit for in the country each method (weeks) |   |              |  |  |  |
| Vacuum aspiration   | _ | <del>-</del> |  |  |  |
| Dilatation and evacuation   | _ | _            |  |  |  |
| Combination mifepristone- misoprostol   | _ | _            |  |  |  |
| Misoprostol only  | _ | _            |  |  |  |
| Other method(s)   | _ | _            |  |  |  |



### Republic of Korea

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | <del>-</del>                                      | _  |  |
| Misoprostol  | <del>-</del>                                      | <del>-</del>   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | _                  |
| Specialized abortion care public facilities       | <del>-</del>     | _                  |
| Private health-care centres or clinics            | <del>-</del>     | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | _                  |
| Other settings or facilities                      | _                | _                  |

| Health care personnel allowed to provide legal abortions |     |  |
|--|-----|--|
| Doctors (speciality not specified)                       | Yes |  |
| Specialist doctor, including OB/GYN                      | _   |  |
| Nurse  | _   |  |
| Midwife/nurse-midwife                                    | _   |  |
| Other provider(s)  | _   |  |
|  |     |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |   |
|--|---|
| National guidelines on clinical and service delivery of induced abortion   | _ |
| National guidelines on clinical and service delivery of post-abortion care | _ |
| Restrictions on public information on legal abortion services              | _ |
| Counselling for contraceptive methods during<br>post-abortion care         | _ |

| Service delivery requirements for providers or facilities |   |  |
|---|---|--|
| Referral linkage to a higher-level facility               | _ |  |
| Availability of a specialist doctor                       | _ |  |
| Minimum number of beds                                    | _ |  |
| Other facility/provider requirements                      | _ |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to<br>alternative provider or facility |
|--|-------------------|--|
| Health-care facilities   | _                 | _  |
| Health-care providers  | _                 | _  |

#### Notes:

- Indicates that data are not available, not applicable or not specified.
- 1. The woman's spouse suffers from any eugenic or genetic mental disability, physical disease or contagious disease prescribed by Presidential Decree.



Prohibition of sex-selective abortion

Other method(s)

# Abortion laws and policies, 2017

### Republic of Moldova

| LAWS ON ABORTION                                 |                                      |   |  |
|--|--------------------------------------|---|--|
| Legal grounds for induced abortion               | Currently permissible in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                  | 21  |  |
| To preserve health                               | Yes                                  | 21  |  |
| To preserve physical health                      | Yes                                  | 21  |  |
| To preserve mental health                        | Yes                                  | 21  |  |
| In cases of intellectual or cognitive disability | Yes                                  | 21  |  |
| In cases of incest                               | Yes                                  | 21  |  |
| In cases of rape                                 | Yes                                  | 21  |  |
| In cases of foetal impairment                    | Yes                                  | 21  |  |
| For economic or social reason                    | Yes                                  | 21  |  |
| On request                                       | Yes                                  | 12  |  |
| For other reason(s)                              | _                                    | _   |  |

| Persons who can be criminally charged for an illegal abortion |   |          |     |                                    |   |  |
|---|---|----------|-----|------------------------------------|---|--|
| Woman   | _ | Provider | Yes | Other person who assists the woman | _ |  |

| REQUIREMENTS FOR INDUCED ABORTION            |     |  |     |  |
|--|-----|--|-----|--|
| Authorizations required                      |     | Consent required                             |     |  |
| Authorization of health care professional(s) | Yes | Spousal consent                              | No  |  |
| Number of authorizations                     | _ 1 | Parental consent for minors                  | Yes |  |
| Cadre of health care professional            |     | Consent by another adult                     | Yes |  |
| Doctor (specialty not specified)             | _   |  |     |  |
| Specialist doctor, including OB/GYN          | _   | Other requirements                           |     |  |
| Nurse  | _   | Gestational age limits                       | Yes |  |
| Midwife/nurse-midwife                        | _   | Compulsory counselling                       | _   |  |
| Other providers                              | _   | Compulsory waiting period                    | _   |  |
| Authorized in specially licensed facilities  | Yes | Length of waiting period (days)              | _   |  |
| Judicial authorization                       |     | Mandatory screening test                     |     |  |
| For minors                                   | No  | HIV test                                     | _   |  |
| In case of rape                              | _   | Other STI test(s)                            | _   |  |
| Police report in case of rape                | _   | Ultrasound viewing or listening to heartbeat | _   |  |

|  | Sex-selective | abortion                               |   |
|--|---------------|--|---|
|  |               |  |   |
| Age limit for parental consent (years) | 16            | Age limit for judicial consent (years) | _ |

Restrictions on the methods to detect the sex

Yes 2

| ACCESS TO ABORTION SERVICES           |                                  |   |
|---------------------------------------|----------------------------------|---|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |
| Vacuum aspiration                     | Yes                              | 12  |
| Dilatation and evacuation             | _                                | <del>-</del>                              |
| Combination mifepristone- misoprostol | Yes                              | 21  |
| Misoprostol only                      | Yes                              | 13-21                                     |



### **Republic of Moldova**

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | Yes   | _  |  |
| Misoprostol  | Yes <sup>3</sup>                                  | <del>-</del>   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | Yes              | Yes                |
| Secondary (district-level) health-care facilities | Yes              | Yes                |
| Specialized abortion care public facilities       | <del>-</del>     | <del>-</del>       |
| Private health-care centres or clinics            | Yes              | Yes                |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | Yes <sup>4</sup> | Yes                |

| Health care personnel allowed to provide legal abortions |                  |  |
|--|------------------|--|
| Doctors (speciality not specified)                       | No               |  |
| Specialist doctor, including OB/GYN                      | Yes              |  |
| Nurse  | No               |  |
| Midwife/nurse-midwife                                    | No               |  |
| Other provider(s)  | Yes <sup>5</sup> |  |
|  |                  |  |

| Types of insurance or other coverage for abortion                  |     |
|--|-----|
| Public health coverage for induced abortion for all women          | Yes |
| Public health coverage for induced abortion for<br>poor women only | No  |
| Public health coverage for abortion complications                  | _   |
| Private health coverage for induced abortion                       | _   |
| Other type of coverage   | _   |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | Yes |
| National guidelines on clinical and service delivery of post-abortion care | Yes |
| Restrictions on public information on legal abortion services              | _   |
| Counselling for contraceptive methods during post-abortion care            | Yes |

| Service delivery requirements for providers or facilities |     |  |
|---|-----|--|
| Referral linkage to a higher-level facility               | _   |  |
| Availability of a specialist doctor                       | Yes |  |
| Minimum number of beds                                    | _   |  |
| Other facility/provider requirements                      | _   |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | _                 | _   |

#### Notes:

- Abortions after 12 weeks of gestation needical be approved by a Medical Advisory Board of a public health care facility. The Board is composed of a specialist obstetrician gynaecologist, the medical director of the public medical institution, the institution's lawyer and its obstetrics chief and a specialist in internal medicine.

   Dilation and curettage.
   For gynaecological indications.

   Women's Health Centers, consultative sections of Perinatal Care Centres and the Reproductive Health section of the National Center for Reproductive Health and Medical Genetics.
   Residents in obstetrics and gynaecology.



### Romania

| LAWS ON ABORTION                                 |   |   |  |
|--|---|---|--|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | No limit  |  |
| To preserve health                               | <del>-</del>                            | _   |  |
| To preserve physical health                      | <del>-</del>                            | <del>_</del>                                    |  |
| To preserve mental health                        | <del>-</del>                            | _   |  |
| In cases of intellectual or cognitive disability | <del>-</del>                            | _   |  |
| In cases of incest                               | <del>-</del>                            | <del>-</del>                                    |  |
| In cases of rape                                 | _                                       | _   |  |
| In cases of foetal impairment                    | Yes                                     | 24  |  |
| For economic or social reason                    | _                                       | _   |  |
| On request                                       | Yes                                     | 14  |  |
| For other reason(s)                              | _                                       | _   |  |

| Persons who can be criminally charged for an illegal abortion |   |          |     |                                    |   |  |
|---|---|----------|-----|------------------------------------|---|--|
| Woman   | _ | Provider | Yes | Other person who assists the woman | _ |  |

|  | REQUIREMENTS FOR | INDUCED ABORTION            |
|--|------------------|-----------------------------|
| Authorizations required                      |                  | Consent required            |
| Authorization of health care professional(s) | _                | Spousal consent             |
| Number of authorizations                     | _                | Parental consent for minor  |
| Cadre of health care professional            |                  | Consent by another adult    |
| Doctor (specialty not specified)             | _                |                             |
| Specialist doctor, including OB/GYN          | _                | Other requirements          |
| Nurse  | _                | Gestational age limits      |
| Midwife/nurse-midwife                        | _                | Compulsory counselling      |
| Other providers                              | _                | Compulsory waiting period   |
| Authorized in specially licensed facilities  | _                | Length of waiting period    |
| Judicial authorization                       |                  | Mandatory screening test    |
| For minors                                   | _                | HIV test                    |
| In case of rape                              | _                | Other STI test(s)           |
| Police report in case of rape                | _                | Ultrasound viewing or liste |

| Consent by another adult                     | _   |  |
|--|-----|--|
|  |     |  |
| Other requirements                           |     |  |
| Gestational age limits                       | Yes |  |
| Compulsory counselling                       | _   |  |
| Compulsory waiting period                    | _   |  |
| Length of waiting period (days)              | _   |  |
| Mandatory screening test                     |     |  |
| HIV test                                     | _   |  |
| Other STI test(s)                            | _   |  |
| Ultrasound viewing or listening to heartbeat | _   |  |

| Age when a wo                          | man can obtain an abortio | n without parental or judicial consent |   |  |
|--|---------------------------|--|---|--|
| Age limit for parental consent (years) | _                         | Age limit for judicial consent (years) | _ |  |

|                                       | Sex-selective abortion                                      |
|---------------------------------------|---|
| Prohibition of sex-selective abortion | Restrictions on the methods to detect the sex of the foetus |

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | <del>-</del>                     | _   |  |
| Dilatation and evacuation             | <del>-</del>                     | _   |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | _   |  |
| Misoprostol only                      | _                                | _   |  |
| Other method(s)                       | <del>-</del>                     | <del>-</del>                              |  |



### Romania

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |  |
|--|---|--|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |  |
| Mifepristone and/or combination mifepristone-misoprostol | Yes   | _  |  |  |
| Misoprostol  | Yes <sup>2</sup>                                  | _  |  |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | _                | _                  |
| Secondary (district-level) health-care facilities | _                | Yes                |
| Specialized abortion care public facilities       | _                | Yes                |
| Private health-care centres or clinics            | _                | _                  |
| NGO health-care centres or clinics                | _                | _                  |
| Other settings or facilities                      | Yes <sup>3</sup> | _                  |

| alth care personnel allowed to provide legal abo | rtions |
|--|--------|
| Doctors (speciality not specified)               | No     |
| Specialist doctor, including OB/GYN              | Yes    |
| Nurse  | No     |
| Midwife/nurse-midwife                            | No     |
| Other provider(s)                                | _      |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services  National guidelines on clinical and service delivery of induced abortion  National guidelines on clinical and service delivery of pools abortion corp. |  |   |
|---|--|---|
| delivery of induced abortion  National guidelines on clinical and service   | Information and guidelines on abortion services                            |   |
|   |  | _ |
| delivery of post-abortion care  | National guidelines on clinical and service delivery of post-abortion care | _ |
| Restrictions on public information on legal abortion services   | 1  | _ |
| Counselling for contraceptive methods during post-abortion care   |  | _ |

| Service delivery requirements for providers or t | facilities   |
|--|--------------|
| Referral linkage to a higher-level facility      | _            |
| Availability of a specialist doctor              | <del>-</del> |
| Minimum number of beds                           | _            |
| Other facility/provider requirements             | _            |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to<br>alternative provider or facility |
|--|-------------------|--|
| Health-care facilities   | _                 | _  |
| Health-care providers  | Yes <sup>4</sup>  | Yes  |

#### Notes:

- Indicates that data are not available, not applicable or not specified.
- Abortion for therapeutic purposes is permissible until 24 weeks of gestation.
   Indications not specified.
   Medical facilities or offices authorized for the purpose of abortion.
   Provider type not specified.



### **Russian Federation**

| LAWS ON ABORTION                                 |   |   |  |
|--|---|---|--|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | No limit  |  |
| To preserve health                               | Yes                                     | No limit  |  |
| To preserve physical health                      | Yes                                     | No limit  |  |
| To preserve mental health                        | Yes                                     | No limit  |  |
| In cases of intellectual or cognitive disability | _                                       | _   |  |
| In cases of incest                               | <del>-</del>                            | <del>-</del>                                    |  |
| In cases of rape                                 | Yes                                     | 22  |  |
| In cases of foetal impairment                    | Yes                                     | No limit  |  |
| For economic or social reason                    | Yes                                     | 12  |  |
| On request                                       | Yes                                     | 12  |  |
| For other reason(s)                              | _                                       | _   |  |

|       |   | Persons who can be criminally | charged for a | n illegal abortion                 |   |  |
|-------|---|-------------------------------|---------------|------------------------------------|---|--|
| Woman | _ | Provider                      | Yes           | Other person who assists the woman | _ |  |

| REQUIREMENTS FOR INDUCED ABORTION            |                  |  |     |
|--|------------------|--|-----|
| Authorizations required                      |                  | Consent required                             |     |
| Authorization of health care professional(s) | Yes              | Spousal consent                              | No  |
| Number of authorizations                     | 4 1              | Parental consent for minors                  | Yes |
| Cadre of health care professional            |                  | Consent by another adult                     | Yes |
| Doctor (specialty not specified)             | Yes              |  |     |
| Specialist doctor, including OB/GYN          | Yes              | Other requirements                           |     |
| Nurse  | _                | Gestational age limits                       | Yes |
| Midwife/nurse-midwife                        | _                | Compulsory counselling                       | Yes |
| Other providers                              | Yes <sup>2</sup> | Compulsory waiting period                    | Yes |
| Authorized in specially licensed facilities  | Yes              | Length of waiting period (days)              | 3   |
| Judicial authorization                       |                  | Mandatory screening test                     |     |
| For minors                                   | No               | HIV test                                     | Yes |
| In case of rape                              | _                | Other STI test(s)                            | _   |
| Police report in case of rape                | _                | Ultrasound viewing or listening to heartbeat | _   |

| 7.30                                   | oan obtain an about | The second of th |   |  |
|--|---------------------|--|---|--|
| Age limit for parental consent (years) | 15                  | Age limit for judicial consent (years)   | _ |  |
|  |                     |  |   |  |
|  |                     |  |   |  |

|                                       | Sex-selective abortion |   |
|---------------------------------------|------------------------|---|
| Prohibition of sex-selective abortion | Yes                    | Restrictions on the methods to detect the sex of the foetus |

| ACCESS TO ABORTION SERVICES           |                                  |   |
|---------------------------------------|----------------------------------|---|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |
| Vacuum aspiration                     | Yes                              | <del>-</del>                              |
| Dilatation and evacuation             | <del>-</del>                     | _   |
| Combination mifepristone- misoprostol | <del>_</del>                     | <del>_</del>                              |
| Misoprostol only                      | _                                | _   |
| Other method(s)                       | _                                | _   |



### **Russian Federation**

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |  |
| Misoprostol  | Yes <sup>4</sup>                                  | <del>-</del>   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | Yes              | _                  |
| Secondary (district-level) health-care facilities | Yes              | _                  |
| Specialized abortion care public facilities       | _                | _                  |
| Private health-care centres or clinics            | _                | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | Yes <sup>5</sup> | _                  |

| Health care personnel allowed to provide legal abortions |     |  |
|--|-----|--|
| Doctors (speciality not specified)                       | _   |  |
| Specialist doctor, including OB/GYN                      | Yes |  |
| Nurse  | _   |  |
| Midwife/nurse-midwife                                    | _   |  |
| Other provider(s)  | _   |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | Yes |
| National guidelines on clinical and service delivery of post-abortion care | Yes |
| Restrictions on public information on legal abortion services              | Yes |
| Counselling for contraceptive methods during post-abortion care            | Yes |

| Service delivery requirements for providers or facilities |     |  |
|---|-----|--|
| Referral linkage to a higher-level facility               | _   |  |
| Availability of a specialist doctor                       | Yes |  |
| Minimum number of beds                                    | _   |  |
| Other facility/provider requirements                      | _   |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | Yes <sup>6</sup>  | Yes   |

#### Notes:

- For medical reasons and social reasons or rape.
   Lawyer and social work specialist (for social reasons/rape).
   From the day of first consultation.
   Indications not specified.
   Licensed medical institutions.
   Provider type not specified.



Prohibition of sex-selective abortion

# Abortion laws and policies, 2017

### Rwanda

| LAWS ON ABORTION                                 |   |   |
|--|---|---|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |
| To save life                                     | Yes                                     | No limit  |
| To preserve health                               | Yes                                     | No limit  |
| To preserve physical health                      | <del>-</del>                            | <del>-</del>                                    |
| To preserve mental health                        | <del>-</del>                            | <del>-</del>                                    |
| In cases of intellectual or cognitive disability | No                                      | <del>-</del>                                    |
| In cases of incest                               | Yes                                     | 22  |
| In cases of rape                                 | Yes                                     | 22  |
| In cases of foetal impairment                    | Yes                                     | No limit  |
| For economic or social reason                    | No                                      | _   |
| On request                                       | No                                      | <del>-</del>                                    |
| For other reason(s)                              | Yes 1                                   | _   |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

|  | DECLUBEMENTS E | OR INDUCED ABORTION                          |          |
|--|----------------|--|----------|
| REQUIREMENTS FOR INDUCED ABORTION  Authorizations required  Consent required |                |  |          |
| Authorization of health care professional(s)                                 | Yes            | Spousal consent                              | <u> </u> |
| Number of authorizations   | 1 2            | Parental consent for minors                  | Yes      |
| Cadre of health care professional  | ·              | Consent by another adult                     | Yes      |
| Doctor (specialty not specified)   | Yes            |  |          |
| Specialist doctor, including OB/GYN  | Yes            | Other requirements                           |          |
| Nurse  | _              | Gestational age limits                       | Yes      |
| Midwife/nurse-midwife  | _              | Compulsory counselling                       | _        |
| Other providers  | _              | Compulsory waiting period                    | _        |
| Authorized in specially licensed facilities                                  | _              | Length of waiting period (days)              | _        |
| Judicial authorization   |                | Mandatory screening test                     |          |
| For minors   | <u> </u>       | HIV test                                     | No       |
| In case of rape  | Yes            | Other STI test(s)                            | No       |
| Police report in case of rape  | _              | Ultrasound viewing or listening to heartbeat | _        |

| Age limit for parental consent (years) | 18            | Age limit for judicial consent (years)        | _ |
|--|---------------|---|---|
|  |               |   |   |
|  | Sex-selective | abortion                                      |   |
| Prohibition of cox coloctive abortion  |               | Restrictions on the methods to detect the sex |   |

| ACCESS TO ABORTION SERVICES           |                                  |   |
|---------------------------------------|----------------------------------|---|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |
| Vacuum aspiration                     | Yes                              | 12-14                                     |
| Dilatation and evacuation             | Yes                              | 14-22                                     |
| Combination mifepristone- misoprostol | Yes                              | 22  |
| Misoprostol only                      | Yes                              | 30 or over                                |
| Other method(s)                       | _                                | <del>-</del>                              |



### Rwanda

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |
|--|---|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |
| Misoprostol  | No  | <del>-</del>   |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | _                | <del>-</del>       |
| Secondary (district-level) health-care facilities | Yes              | <del>-</del>       |
| Specialized abortion care public facilities       | _                | <del>-</del>       |
| Private health-care centres or clinics            | _                | <del>-</del>       |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | _                | _                  |

| Health care personnel allowed to provide legal abortions |     |  |
|--|-----|--|
| Doctors (speciality not specified)                       | Yes |  |
| Specialist doctor, including OB/GYN                      | _   |  |
| Nurse  | No  |  |
| Midwife/nurse-midwife                                    | No  |  |
| Other provider(s)  | _   |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | Yes |
| National guidelines on clinical and service delivery of post-abortion care | _   |
| Restrictions on public information on legal abortion services              | Yes |
| Counselling for contraceptive methods during post-abortion care            | Yes |
|  |     |

| Service delivery requirements for providers or facilities |              |  |
|---|--------------|--|
| Referral linkage to a higher-level facility               | _            |  |
| Availability of a specialist doctor                       | <del>-</del> |  |
| Minimum number of beds                                    | _            |  |
| Other facility/provider requirements                      | _            |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to<br>alternative provider or facility |
|--|-------------------|--|
| Health-care facilities   | _                 | _  |
| Health-care providers  | _                 | _  |

#### Notes:

- 1. When a woman has been subjected to forced marriage.
  2. Authorization of a medical doctor is needed in case of for pregnancy termination when pregnancy poses serious risk to the health of the unborn baby or the pregnant woman. This medical doctor should seek advice from one other doctor where possible.



Prohibition of sex-selective abortion

# Abortion laws and policies, 2017

### **Saint Kitts and Nevis**

| LAWS ON ABORTION                                 |   |   |
|--|---|---|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |
| To save life                                     | Yes                                     | _   |
| To preserve health                               | Yes                                     | _   |
| To preserve physical health                      | Yes                                     | _   |
| To preserve mental health                        | Yes                                     | _   |
| In cases of intellectual or cognitive disability | No                                      | _   |
| In cases of incest                               | No                                      | _   |
| In cases of rape                                 | No                                      | _   |
| In cases of foetal impairment                    | No                                      | _   |
| For economic or social reason                    | No                                      | _   |
| On request                                       | No                                      | _   |
| For other reason(s)                              | _                                       | _   |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |   |  |   |
|--|---|--|---|
| Authorizations required                      |   | Consent required                             |   |
| Authorization of health care professional(s) | _ | Spousal consent                              | _ |
| Number of authorizations                     | _ | Parental consent for minors                  | _ |
| Cadre of health care professional            |   | Consent by another adult                     | _ |
| Doctor (specialty not specified)             | _ |  |   |
| Specialist doctor, including OB/GYN          | _ | Other requirements                           |   |
| Nurse  | _ | Gestational age limits                       | _ |
| Midwife/nurse-midwife                        | _ | Compulsory counselling                       | _ |
| Other providers                              | _ | Compulsory waiting period                    | _ |
| Authorized in specially licensed facilities  | _ | Length of waiting period (days)              | _ |
| Judicial authorization                       |   | Mandatory screening test                     |   |
| For minors                                   | _ | HIV test                                     | _ |
| In case of rape                              | _ | Other STI test(s)                            | _ |
| Police report in case of rape                | _ | Ultrasound viewing or listening to heartbeat | _ |

| Age limit for parental consent (years) | Age limit for judicial consent (years) |
|--|--|
|  |  |
|  | Sex-selective abortion                 |

Restrictions on the methods to detect the sex

| ACCESS TO ABORTION SERVICES           |                                  |   |
|---------------------------------------|----------------------------------|---|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |
| Vacuum aspiration                     | <del>-</del>                     | <del>-</del>                              |
| Dilatation and evacuation             | _                                | <del>-</del>                              |
| Combination mifepristone- misoprostol | _                                | _   |
| Misoprostol only                      | _                                | _   |
| Other method(s)                       | _                                | _   |



### **Saint Kitts and Nevis**

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |
|--|---|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |
| Mifepristone and/or combination mifepristone-misoprostol | No  | <del>-</del>   |
| Misoprostol  | Yes <sup>2</sup>                                  | <del>_</del>   |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | _                  |
| Specialized abortion care public facilities       | <del>-</del>     | _                  |
| Private health-care centres or clinics            | <del>-</del>     | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | <del>-</del>     | _                  |

| Health care personnel allowed to provide legal abortions |   |
|--|---|
| Doctors (speciality not specified)                       | _ |
| Specialist doctor, including OB/GYN                      | _ |
| Nurse  | _ |
| Midwife/nurse-midwife                                    | _ |
| Other provider(s)  | _ |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| fe | ormation and guidelines on abortion services                               |
|----|--|
|    | National guidelines on clinical and service delivery of induced abortion   |
|    | National guidelines on clinical and service delivery of post-abortion care |
|    | Restrictions on public information on legal abortion services              |
|    | Counselling for contraceptive methods during post-abortion care            |

| Service delivery requirements for providers or facilities |   |  |  |
|---|---|--|--|
| Referral linkage to a higher-level facility               | _ |  |  |
| Availability of a specialist doctor                       | _ |  |  |
| Minimum number of beds                                    | _ |  |  |
| Other facility/provider requirements                      | _ |  |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | _                 | _   |

#### Notes:

- Indicates that data are not available, not applicable or not specified.
- 1. Follows the holding of the 1938 English Rex v. Bourne decision on the performance of abortion for health reasons.
  2. For non-gynaecological indications only.



### **Saint Lucia**

| LAWS ON ABORTION                                 |                                      |   |  |
|--|--------------------------------------|---|--|
| egal grounds for induced abortion                | Currently permissible in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                  | No limit  |  |
| To preserve health                               | Yes                                  | No limit  |  |
| To preserve physical health                      | Yes                                  | No limit  |  |
| To preserve mental health                        | Yes                                  | No limit  |  |
| In cases of intellectual or cognitive disability | No                                   | _   |  |
| In cases of incest                               | Yes                                  | 12  |  |
| In cases of rape                                 | Yes                                  | 12  |  |
| In cases of foetal impairment                    | No                                   | _   |  |
| For economic or social reason                    | No                                   | _   |  |
| On request                                       | No                                   | <del>-</del>                                    |  |
| For other reason(s)                              | _                                    | _   |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

|  | REQUIREMENTS FOR INDUCED ABORTION |                                |  |
|--|-----------------------------------|--------------------------------|--|
| Authorizations required                      |                                   | Consent required               |  |
| Authorization of health care professional(s) | Yes                               | Spousal consent                |  |
| Number of authorizations                     | 2 1                               | Parental consent for minors    |  |
| Cadre of health care professional            |                                   | Consent by another adult       |  |
| Doctor (specialty not specified)             | Yes                               |                                |  |
| Specialist doctor, including OB/GYN          | _                                 | Other requirements             |  |
| Nurse  | _                                 | Gestational age limits         |  |
| Midwife/nurse-midwife                        | _                                 | Compulsory counselling         |  |
| Other providers                              | _                                 | Compulsory waiting period      |  |
| Authorized in specially licensed facilities  | Yes                               | Length of waiting period       |  |
| Judicial authorization                       |                                   | Mandatory screening test       |  |
| For minors                                   | _                                 | HIV test                       |  |
| In case of rape                              | _                                 | Other STI test(s)              |  |
| Police report in case of rape                | Yes                               | Ultrasound viewing or listenin |  |

| Consent by another adult                     |                |
|--|----------------|
| Other requirements                           |                |
| Gestational age limits                       | Yes            |
| Compulsory counselling                       | No             |
| Compulsory waiting period                    | Yes            |
| Length of waiting period (days)              | 2 <sup>2</sup> |
| Mandatory screening test                     |                |
| HIV test                                     | _              |
| Other STI test(s)                            | _              |
| Ultrasound viewing or listening to heartbeat | <del>_</del>   |

No

Yes

| Age when a woman can obtain an abortion without parental or judicial consent |  |   |  |  |
|--|--|---|--|--|
| Age limit for parental consent (years)                                       | <ul> <li>Age limit for judicial consent (years)</li> </ul> | _ |  |  |

|                                       | Sex-selective abortion |   |
|---------------------------------------|------------------------|---|
| Prohibition of sex-selective abortion | No                     | Restrictions on the methods to detect the sex of the foetus |

| ACCESS TO ABORTION SERVICES           |                                  |   |  |  |
|---------------------------------------|----------------------------------|---|--|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |  |
| Vacuum aspiration                     | _                                | <del>-</del>                              |  |  |
| Dilatation and evacuation             | <del>-</del>                     | <del>-</del>                              |  |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | <del>-</del>                              |  |  |
| Misoprostol only                      | <del>-</del>                     | _   |  |  |
| Other method(s)                       | <del>-</del>                     | <del>-</del>                              |  |  |



### **Saint Lucia**

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |  |
|--|---|--|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | <del>-</del>   |  |  |
| Misoprostol  | Yes <sup>3</sup>                                  | <del>-</del>   |  |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | _                | <del>-</del>       |
| Secondary (district-level) health-care facilities | _                | <del>-</del>       |
| Specialized abortion care public facilities       | _                | <del>-</del>       |
| Private health-care centres or clinics            | _                | <del>-</del>       |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | Yes <sup>4</sup> | _                  |

| Health care personnel allowed to provide legal abortions |                  |  |
|--|------------------|--|
| Doctors (speciality not specified)                       | Yes              |  |
| Specialist doctor, including OB/GYN                      | _                |  |
| Nurse  | _                |  |
| Midwife/nurse-midwife                                    | _                |  |
| Other provider(s)  | Yes <sup>5</sup> |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |   |
|--|---|
| National guidelines on clinical and service delivery of induced abortion   | _ |
| National guidelines on clinical and service delivery of post-abortion care | _ |
| Restrictions on public information on legal abortion services              | _ |
| Counselling for contraceptive methods during<br>post-abortion care         | _ |

| Service delivery requirements for providers or facilities |   |  |
|---|---|--|
| Referral linkage to a higher-level facility               | _ |  |
| Availability of a specialist doctor                       | _ |  |
| Minimum number of beds                                    | _ |  |
| Other facility/provider requirements                      | _ |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to<br>alternative provider or facility |
|--|-------------------|--|
| Health-care facilities   | _                 | _  |
| Health-care providers  | _                 | _  |

#### Notes:

- Indicates that data are not available, not applicable or not specified.
- 1. One or two depending on the ground. This does not apply when the abortion is needed to save the life of the woman or prevent grave permanent injury to her physical or mental health, then only a single medical practitioner may authorise the treatment.

  2. From the time the woman made the request.

  3. For non-gynaecological indications only.

  4. Abortions must be performed at an approved institution certified by the Minister for health by order in the Gazette.

  5. Must be performed by a medical practitioner.



Prohibition of sex-selective abortion

# Abortion laws and policies, 2017

### **Saint Vincent and the Grenadines**

| LAWS ON ABORTION                                 |   |   |  |
|--|---|---|--|
| Legal grounds for induced abortion               | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | <del>-</del>                                    |  |
| To preserve health                               | Yes                                     | <del>-</del>                                    |  |
| To preserve physical health                      | Yes                                     | <del>-</del>                                    |  |
| To preserve mental health                        | Yes                                     | <del>-</del>                                    |  |
| In cases of intellectual or cognitive disability | No                                      | _   |  |
| In cases of incest                               | Yes                                     | <del>-</del>                                    |  |
| In cases of rape                                 | Yes                                     | _   |  |
| In cases of foetal impairment                    | Yes                                     | _   |  |
| For economic or social reason                    | No                                      | _   |  |
| On request                                       | No                                      | <del>-</del>                                    |  |
| For other reason(s)                              | _                                       | _   |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| Authorizations required                      |     | Consent required                             |              |
|--|-----|--|--------------|
| Authorization of health care professional(s) | Yes | Spousal consent                              | <del>_</del> |
| Number of authorizations                     | 2 2 | Parental consent for minors                  | _            |
| Cadre of health care professional            |     | Consent by another adult                     | <del>_</del> |
| Doctor (specialty not specified)             | Yes |  |              |
| Specialist doctor, including OB/GYN          | _   | Other requirements                           |              |
| Nurse  | _   | Gestational age limits                       | No           |
| Midwife/nurse-midwife                        | _   | Compulsory counselling                       | No           |
| Other providers                              | Yes | Compulsory waiting period                    | No           |
| Authorized in specially licensed facilities  | _   | Length of waiting period (days)              | _            |
| Judicial authorization                       |     | Mandatory screening test                     |              |
| For minors —                                 |     | HIV test                                     | _            |
| In case of rape                              |     | Other STI test(s)                            | _            |
| Police report in case of rape                | _   | Ultrasound viewing or listening to heartbeat | _            |

| Age limit for parental consent (years) | _ | Age limit for judicial consent (years) | <del>-</del> |
|--|---|--|--------------|
|  |   |  |              |
|  | 0 | and and an                             |              |

Restrictions on the methods to detect the sex

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | _                                | <del>-</del>                              |  |
| Dilatation and evacuation             | <del>-</del>                     | <del>-</del>                              |  |
| Combination mifepristone- misoprostol | _                                | _   |  |
| Misoprostol only                      | _                                | <del>-</del>                              |  |
| Other method(s)                       | _                                | <del>-</del>                              |  |



### Saint Vincent and the Grenadines

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |  |
| Misoprostol  | Yes <sup>3</sup>                                  | <del>-</del>   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | _                  |
| Specialized abortion care public facilities       | <del>-</del>     | _                  |
| Private health-care centres or clinics            | <del>-</del>     | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | _                  |
| Other settings or facilities                      | Yes <sup>4</sup> | _                  |

| Doctors (speciality not specified)  | _           |  |
|---|-------------|--|
| Specialist doctor, including OB/GYN   | _           |  |
| Nurse   | _           |  |
| Midwife/nurse-midwife   | _           |  |
| Other provider(s)   | _           |  |
| formation and guidelines on abortion services   |             |  |
|   |             |  |
| formation and guidelines on abortion services  National guidelines on clinical and service delivery of induced abortion   | _           |  |
| National guidelines on clinical and service   | -           |  |
| National guidelines on clinical and service<br>delivery of induced abortion<br>National guidelines on clinical and service  | -<br>-<br>- |  |
| National guidelines on clinical and service delivery of induced abortion  National guidelines on clinical and service delivery of post-abortion care  Restrictions on public information on legal | -<br>-<br>- |  |

Health care personnel allowed to provide legal abortions

| pes of insurance or other coverage for abortion                 |     |
|---|-----|
| Public health coverage for induced abortion for all women       | _   |
| Public health coverage for induced abortion for poor women only | _   |
| Public health coverage for abortion complications               | _   |
| Private health coverage for induced abortion                    | _   |
| Other type of coverage  | _   |
|   |     |
| rvice delivery requirements for providers or facilit            | ies |
| Referral linkage to a higher-level facility                     | _   |

Availability of a specialist doctor Minimum number of beds

Other facility/provider requirements

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health care providers  |                   |   |

#### Notes:

- In determining, whether the continuance of a pregnancy would involve such risk of injury to health, account may be taken of the pregnant woman's actual or reasonably foreseeable environment.
   The opinion of two medical practitioners and an approved hospital or other establishment shall not apply to the termination of a pregnancy by a registered medical practitioner in a case in which he is of the opinion, formed in good faith, that the termination is immediately necessary to save the life of, or to prevent grave permanent injury to the physical or mental health of, the pregnant woman.
   For gynaecological indications.
   Hospital or other establishment approved for that purpose by the Chief Medical Officer.



### Samoa

| LAWS ON ABORTION                                 |   |   |  |
|--|---|---|--|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | 20  |  |
| To preserve health                               | Yes                                     | 20  |  |
| To preserve physical health                      | Yes                                     | 20  |  |
| To preserve mental health                        | Yes                                     | 20  |  |
| In cases of intellectual or cognitive disability | No                                      | _   |  |
| In cases of incest                               | No                                      | _   |  |
| In cases of rape                                 | No                                      | <del>-</del>                                    |  |
| In cases of foetal impairment                    | No                                      | _   |  |
| For economic or social reason                    | No                                      | _   |  |
| On request                                       | No                                      | _   |  |
| For other reason(s)                              | _                                       | _   |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |     |                                 |
|--|-----|---------------------------------|
| Authorizations required                      |     | Consent required                |
| Authorization of health care professional(s) | Yes | Spousal consent                 |
| Number of authorizations                     | _   | Parental consent for minors     |
| Cadre of health care professional            |     | Consent by another adult        |
| Doctor (specialty not specified)             | _   |                                 |
| Specialist doctor, including OB/GYN          | _   | Other requirements              |
| Nurse  | _   | Gestational age limits          |
| Midwife/nurse-midwife                        | _   | Compulsory counselling          |
| Other providers                              | _   | Compulsory waiting period       |
| Authorized in specially licensed facilities  | _   | Length of waiting period        |
| Judicial authorization                       |     | Mandatory screening test        |
| For minors                                   | _   | HIV test                        |
| In case of rape                              | _   | Other STI test(s)               |
| Police report in case of rape                | _   | Ultrasound viewing or listening |
|  |     |                                 |

| Consent by another adult                     | _            |  |
|--|--------------|--|
|  |              |  |
| Other requirements                           |              |  |
| Gestational age limits                       | Yes          |  |
| Compulsory counselling                       | <del>-</del> |  |
| Compulsory waiting period                    | <del>-</del> |  |
| Length of waiting period (days)              | <u> </u>     |  |
| Mandatory screening test                     |              |  |
| HIV test                                     | <del>_</del> |  |
| Other STI test(s)                            | <del>-</del> |  |
| Ultrasound viewing or listening to heartbeat | _            |  |

| Age when a woman can obtain an abortion without parental or judicial consent |   |  |   |  |
|--|---|--|---|--|
| Age limit for parental consent (years)                                       | _ | Age limit for judicial consent (years) | _ |  |

|                                       | Sex-selective abortion                                      |
|---------------------------------------|---|
| Prohibition of sex-selective abortion | Restrictions on the methods to detect the sex of the foetus |

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | _                                | <del>-</del>                              |  |
| Dilatation and evacuation             | <del>-</del>                     | <del>-</del>                              |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | <del>-</del>                              |  |
| Misoprostol only                      | <del>-</del>                     | _   |  |
| Other method(s)                       | <del>-</del>                     | <del>-</del>                              |  |



### Samoa

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | <del>-</del>                                      | _  |  |
| Misoprostol  | <del>-</del>                                      | _  |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | _                  |
| Specialized abortion care public facilities       | <del>-</del>     | _                  |
| Private health-care centres or clinics            | <del>-</del>     | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | _                  |
| Other settings or facilities                      | _                | _                  |

| Health care personnel allowed to provide legal abortions |       |  |
|--|-------|--|
| Doctors (speciality not specified)                       | _     |  |
| Specialist doctor, including OB/GYN                      | _     |  |
| Nurse  | _     |  |
| Midwife/nurse-midwife                                    | _     |  |
| Other provider(s)  | Yes ¹ |  |
|  |       |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |   |
|--|---|
| National guidelines on clinical and service delivery of induced abortion   | _ |
| National guidelines on clinical and service delivery of post-abortion care | _ |
| Restrictions on public information on legal abortion services              | _ |
| Counselling for contraceptive methods during<br>post-abortion care         | _ |

| Service delivery requirements for providers or facilities |   |  |
|---|---|--|
| Referral linkage to a higher-level facility               | _ |  |
| Availability of a specialist doctor                       | _ |  |
| Minimum number of beds                                    | _ |  |
| Other facility/provider requirements                      | _ |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | _                 | _   |

#### Notes:

- Indicates that data are not available, not applicable or not specified.
- 1. Registered medical practitioners.



### San Marino

| LAWS ON ABORTION                                 |   |   |
|--|---|---|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |
| To save life                                     | Yes                                     | _   |
| To preserve health                               | No                                      | _   |
| To preserve physical health                      | No                                      | _   |
| To preserve mental health                        | No                                      | _   |
| In cases of intellectual or cognitive disability | No                                      | _   |
| In cases of incest                               | No                                      | <del>-</del>                                    |
| In cases of rape                                 | No                                      | _   |
| In cases of foetal impairment                    | No                                      | _   |
| For economic or social reason                    | No                                      | _   |
| On request                                       | No                                      | _   |
| For other reason(s)                              | _                                       | _   |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |   |  |   |
|--|---|--|---|
| Authorizations required                      |   | Consent required                             |   |
| Authorization of health care professional(s) | _ | Spousal consent                              | _ |
| Number of authorizations                     | _ | Parental consent for minors                  | _ |
| Cadre of health care professional            |   | Consent by another adult                     | _ |
| Doctor (specialty not specified)             | _ |  |   |
| Specialist doctor, including OB/GYN          | _ | Other requirements                           |   |
| Nurse  | _ | Gestational age limits                       | _ |
| Midwife/nurse-midwife                        | _ | Compulsory counselling                       | _ |
| Other providers                              | _ | Compulsory waiting period                    | _ |
| Authorized in specially licensed facilities  | _ | Length of waiting period (days)              | _ |
| Judicial authorization                       |   | Mandatory screening test                     |   |
| For minors                                   | _ | HIV test                                     | _ |
| In case of rape                              | _ | Other STI test(s)                            | _ |
| Police report in case of rape                | _ | Ultrasound viewing or listening to heartbeat | _ |

| Age limit for parental consent (years) | <ul><li>Age limit for judicial consent (years)</li></ul> |
|--|--|
|  |  |
|  | Sex-selective abortion                                   |
| Prohibition of sex-selective abortion  | Restrictions on the methods to detect the sex            |

| ACCESS TO ABORTION SERVICES           |                                  |   |
|---------------------------------------|----------------------------------|---|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |
| Vacuum aspiration                     | _                                | _   |
| Dilatation and evacuation             | <del>-</del>                     | _   |
| Combination mifepristone- misoprostol | <del>-</del>                     | _   |
| Misoprostol only                      | _                                | _   |
| Other method(s)                       | <del>-</del>                     | _   |



### San Marino

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |
|--|---|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |
| Mifepristone and/or combination mifepristone-misoprostol | <del>-</del>                                      | _  |
| Misoprostol  | <del>-</del>                                      | _  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | _                  |
| Specialized abortion care public facilities       | <del>-</del>     | _                  |
| Private health-care centres or clinics            | <del>-</del>     | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | _                  |
| Other settings or facilities                      | _                | _                  |

| Poctors (speciality not specified)  | _ |
|-------------------------------------|---|
| specialist doctor, including OB/GYN | _ |
| Nurse                               | _ |
| /lidwife/nurse-midwife              | _ |
| Other provider(s)                   | _ |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abort                                | tion services |
|--|---------------|
| National guidelines on clinical and delivery of induced abortion   | d service     |
| National guidelines on clinical and delivery of post-abortion care | d service     |
| Restrictions on public information abortion services               | on legal      |
| Counselling for contraceptive met<br>post-abortion care            | hods during   |

| Service delivery requirements for providers or facilities |              |  |
|---|--------------|--|
| Referral linkage to a higher-level facility               | _            |  |
| Availability of a specialist doctor                       | <del>-</del> |  |
| Minimum number of beds                                    | _            |  |
| Other facility/provider requirements                      | _            |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to<br>alternative provider or facility |
|--|-------------------|--|
| Health-care facilities   | _                 | _  |
| Health-care providers  | _                 | _  |

#### Notes:

- Indicates that data are not available, not applicable or not specified
- 1. Abortion is generally illegal in the country. However, under the general criminal law principles of necessity, it is allowed to be performed to save the life of the pregnant woman.



Prohibition of sex-selective abortion

# Abortion laws and policies, 2017

### **Sao Tome and Principe**

| LAWS ON ABORTION                                 |   |   |  |
|--|---|---|--|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | No limit  |  |
| To preserve health                               | Yes                                     | No limit  |  |
| To preserve physical health                      | Yes                                     | No limit  |  |
| To preserve mental health                        | Yes                                     | No limit  |  |
| In cases of intellectual or cognitive disability | _                                       | _   |  |
| In cases of incest                               | <del>-</del>                            | No limit  |  |
| In cases of rape                                 | Yes                                     | No limit  |  |
| In cases of foetal impairment                    | Yes                                     | 16  |  |
| For economic or social reason                    | _                                       | _   |  |
| On request                                       | Yes                                     | 12  |  |
| For other reason(s)                              | _                                       | _   |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |  |
|---|-----|----------|-----|------------------------------------|-----|--|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |  |

| REQUIREMENTS FOR INDUCED ABORTION            |     |  |     |  |
|--|-----|--|-----|--|
| Authorizations required                      |     | Consent required                             |     |  |
| Authorization of health care professional(s) | Yes | Spousal consent                              | No  |  |
| Number of authorizations                     | 1   | Parental consent for minors                  | Yes |  |
| Cadre of health care professional            |     | Consent by another adult                     | Yes |  |
| Doctor (specialty not specified)             | Yes |  |     |  |
| Specialist doctor, including OB/GYN          | _   | Other requirements                           |     |  |
| Nurse  | _   | Gestational age limits                       | Yes |  |
| Midwife/nurse-midwife                        | _   | Compulsory counselling                       | No  |  |
| Other providers                              | _   | Compulsory waiting period                    | Yes |  |
| Authorized in specially licensed facilities  | Yes | Length of waiting period (days)              | 3 1 |  |
| Judicial authorization                       |     | Mandatory screening test                     |     |  |
| For minors                                   | No  | HIV test                                     | _   |  |
| In case of rape                              | _   | Other STI test(s)                            | _   |  |
| Police report in case of rape                | _   | Ultrasound viewing or listening to heartbeat | _   |  |

| Age limit for parental consent (years) | 16                 | Age limit for judicial consent (years) | <del>-</del> |
|--|--------------------|--|--------------|
|  |                    |  |              |
|  | Coura de la estica | abautan                                |              |

Restrictions on the methods to detect the sex

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | _                                | _   |  |
| Dilatation and evacuation             | <del>-</del>                     | _   |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | _   |  |
| Misoprostol only                      | _                                | _   |  |
| Other method(s)                       | _                                | _   |  |



### **Sao Tome and Principe**

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | _   | _  |  |
| Misoprostol  | _   | <del>-</del>   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | <del>-</del>       |
| Specialized abortion care public facilities       | _                | <del>-</del>       |
| Private health-care centres or clinics            | _                | <del>-</del>       |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | Yes <sup>2</sup> | _                  |

| Health care personnel allowed to provide legal abortions |              |  |
|--|--------------|--|
| Doctors (speciality not specified)                       | Yes          |  |
| Specialist doctor, including OB/GYN                      | _            |  |
| Nurse  | <del>-</del> |  |
| Midwife/nurse-midwife                                    | _            |  |
| Other provider(s)  | _            |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services  National guidelines on clinical and service delivery of induced abortion  National guidelines on clinical and service delivery of pools abortion corp. |  |   |
|---|--|---|
| delivery of induced abortion  National guidelines on clinical and service   | Information and guidelines on abortion services                            |   |
|   |  | _ |
| delivery of post-abortion care  | National guidelines on clinical and service delivery of post-abortion care | _ |
| Restrictions on public information on legal abortion services   | 1  | _ |
| Counselling for contraceptive methods during post-abortion care   |  | _ |

| Service delivery requirements for providers or facilities |   |  |
|---|---|--|
| Referral linkage to a higher-level facility               | _ |  |
| Availability of a specialist doctor                       | _ |  |
| Minimum number of beds                                    | _ |  |
| Other facility/provider requirements                      | _ |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to<br>alternative provider or facility |
|--|-------------------|--|
| Health-care facilities   | _                 | _  |
| Health-care providers  | _                 | _  |

### Notes:

- Indicates that data are not available, not applicable or not specified.
- From the day the woman goes to a facility to seek abortion.
   Only in authorized medical facilities.



Age limit for parental consent (years)

# Abortion laws and policies, 2017

### Saudi Arabia

| LAWS ON ABORTION                                 |   |   |  |
|--|---|---|--|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | 16  |  |
| To preserve health                               | Yes                                     | 16  |  |
| To preserve physical health                      | _                                       | _   |  |
| To preserve mental health                        | <del>-</del>                            | _   |  |
| In cases of intellectual or cognitive disability | No                                      | _   |  |
| In cases of incest                               | No                                      | _   |  |
| In cases of rape                                 | No                                      | _   |  |
| In cases of foetal impairment                    | No                                      | _   |  |
| For economic or social reason                    | No                                      | _   |  |
| On request                                       | No                                      | _   |  |
| For other reason(s)                              | Yes 1                                   | _   |  |

| Persons who can be criminally charged for an illegal abortion |            |     |                                    |   |
|---|------------|-----|------------------------------------|---|
| Woman -   | — Provider | Yes | Other person who assists the woman | _ |

| And and and an amount of the                 |              | Output to the last                           |     |
|--|--------------|--|-----|
| Authorizations required                      |              | Consent required                             |     |
| Authorization of health care professional(s) | Yes          | Spousal consent                              | Yes |
| Number of authorizations                     | 3            | Parental consent for minors                  | Yes |
| Cadre of health care professional            |              | Consent by another adult                     | Yes |
| Doctor (specialty not specified)             | <del>_</del> |  |     |
| Specialist doctor, including OB/GYN          | Yes          | Other requirements                           |     |
| Nurse  | _            | Gestational age limits                       | Yes |
| Midwife/nurse-midwife                        | _            | Compulsory counselling                       | _   |
| Other providers                              | _            | Compulsory waiting period                    | _   |
| Authorized in specially licensed facilities  | _            | Length of waiting period (days)              | _   |
| Judicial authorization                       |              | Mandatory screening test                     |     |
| For minors                                   | _            | HIV test                                     | _   |
| In case of rape                              | _            | Other STI test(s)                            | _   |
| Police report in case of rape                | _            | Ultrasound viewing or listening to heartbeat | _   |

|                                       | Sex-selective abort | tion  |
|---------------------------------------|---------------------|---|
| Prohibition of sex-selective abortion | _                   | Restrictions on the methods to detect the sex of the foetus |

Age limit for judicial consent (years)

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | <del>-</del>                     | _   |  |
| Dilatation and evacuation             | <del>-</del>                     | _   |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | _   |  |
| Misoprostol only                      | _                                | _   |  |
| Other method(s)                       | <del>-</del>                     | <del>-</del>                              |  |



### Saudi Arabia

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |  |
| Misoprostol  | Yes <sup>2</sup>                                  | No   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | _                  |
| Specialized abortion care public facilities       | <del>-</del>     | _                  |
| Private health-care centres or clinics            | <del>-</del>     | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | _                  |
| Other settings or facilities                      | _                | _                  |

| ealth care personnel allowed to provide legal abortions |     |  |
|---|-----|--|
| Doctors (speciality not specified)                      | _   |  |
| Specialist doctor, including OB/GYN                     | Yes |  |
| Nurse   | _   |  |
| Midwife/nurse-midwife                                   | _   |  |
| Other provider(s)                                       | _   |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Info | ormation and guidelines on abortion services                               |
|------|--|
|      | National guidelines on clinical and service delivery of induced abortion   |
|      | National guidelines on clinical and service delivery of post-abortion care |
|      | Restrictions on public information on legal abortion services              |
|      | Counselling for contraceptive methods during post-abortion care            |

| Service delivery requirements for providers or facilities |              |  |
|---|--------------|--|
| Referral linkage to a higher-level facility               | _            |  |
| Availability of a specialist doctor                       | <del>-</del> |  |
| Minimum number of beds                                    | _            |  |
| Other facility/provider requirements                      | _            |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | _                 | _   |

#### Notes:

- Indicates that data are not available, not applicable or not specified.
- Abortion for a 'legitimate reason' that does not include economic hardship may be performed during the first 40 days of pregnancy.
   For gynaecological indications.



Age limit for parental consent (years)

## Abortion laws and policies, 2017

### Senegal

| LAWS ON ABORTION                                 |                                      |   |  |
|--|--------------------------------------|---|--|
| egal grounds for induced abortion                | Currently permissible in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                  | _   |  |
| To preserve health                               | No                                   | _   |  |
| To preserve physical health                      | No                                   | _   |  |
| To preserve mental health                        | No                                   | _   |  |
| In cases of intellectual or cognitive disability | No                                   | _   |  |
| In cases of incest                               | No                                   | _   |  |
| In cases of rape                                 | No                                   | _   |  |
| In cases of foetal impairment                    | _                                    | _   |  |
| For economic or social reason                    | No                                   | _   |  |
| On request                                       | No                                   | _   |  |
| For other reason(s)                              | _                                    | _   |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |  |   |
|--|--|---|
| Authorizations required                      | Consent required                             |   |
| Authorization of health care professional(s) | — Spousal consent                            | _ |
| Number of authorizations                     | Parental consent for minors                  | _ |
| Cadre of health care professional            | Consent by another adult                     | _ |
| Doctor (specialty not specified)             | _  |   |
| Specialist doctor, including OB/GYN          | Other requirements                           |   |
| Nurse  | — Gestational age limits                     | _ |
| Midwife/nurse-midwife                        | <ul> <li>Compulsory counselling</li> </ul>   | _ |
| Other providers                              | Compulsory waiting period                    | _ |
| Authorized in specially licensed facilities  | Length of waiting period (days)              | _ |
| Judicial authorization                       | Mandatory screening test                     |   |
| For minors                                   | HIV test                                     | _ |
| In case of rape                              | — Other STI test(s)                          | _ |
| Police report in case of rape                | Ultrasound viewing or listening to heartbeat | _ |

|                                       | Sex-selective abortion |   |
|---------------------------------------|------------------------|---|
| Prohibition of sex-selective abortion | _                      | Restrictions on the methods to detect the sex of the foetus |

Age limit for judicial consent (years)

| ACCESS TO ABORTION SERVICES           |                                  |   |
|---------------------------------------|----------------------------------|---|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |
| Vacuum aspiration                     | <del>-</del>                     | _   |
| Dilatation and evacuation             | <del>-</del>                     | _   |
| Combination mifepristone- misoprostol | <del>-</del>                     | <del>-</del>                              |
| Misoprostol only                      | _                                | _   |
| Other method(s)                       | <del>-</del>                     | <del>-</del>                              |



## Senegal

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |
|--|---|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |
| Misoprostol  | No  | <del>-</del>   |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | Yes                |
| Secondary (district-level) health-care facilities | _                | Yes                |
| Specialized abortion care public facilities       | _                | Yes                |
| Private health-care centres or clinics            | _                | Yes                |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | _                | _                  |

| Health care personnel allowed to provide legal abortions |   |  |
|--|---|--|
| Doctors (speciality not specified)                       | _ |  |
| Specialist doctor, including OB/GYN                      | _ |  |
| Nurse  | _ |  |
| Midwife/nurse-midwife                                    | _ |  |
| Other provider(s)  | _ |  |
|  |   |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | _   |
| National guidelines on clinical and service delivery of post-abortion care | Yes |
| Restrictions on public information on legal abortion services              | Yes |
| Counselling for contraceptive methods during<br>post-abortion care         | Yes |

| Service delivery requirements for providers or facilities |   |  |
|---|---|--|
| Referral linkage to a higher-level facility               | _ |  |
| Availability of a specialist doctor                       | _ |  |
| Minimum number of beds                                    | _ |  |
| Other facility/provider requirements                      | _ |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to<br>alternative provider or facility |
|--|-------------------|--|
| Health-care facilities   | _                 | _  |
| Health-care providers  | _                 | _  |

#### Notes:

- Indicates that data are not available, not applicable or not specified.
- 1. Abortion is permitted for therapeutic purposes.



### Serbia

| LAWS ON ABORTION                                 |   |   |  |
|--|---|---|--|
| Legal grounds for induced abortion               | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | No limit  |  |
| To preserve health                               | Yes                                     | No limit  |  |
| To preserve physical health                      | _                                       | <del>-</del>                                    |  |
| To preserve mental health                        | <del>-</del>                            | <del>-</del>                                    |  |
| In cases of intellectual or cognitive disability | _                                       | <del>-</del>                                    |  |
| In cases of incest                               | Yes                                     | No limit  |  |
| In cases of rape                                 | Yes                                     | No limit  |  |
| In cases of foetal impairment                    | Yes                                     | No limit  |  |
| For economic or social reason                    | <del>-</del>                            | <del>-</del>                                    |  |
| On request                                       | Yes                                     | 10  |  |
| For other reason(s)                              | _                                       | _   |  |

| Persons who can be criminally charged for an illegal abortion |   |          |     |                                    |     |  |
|---|---|----------|-----|------------------------------------|-----|--|
| Woman   | _ | Provider | Yes | Other person who assists the woman | Yes |  |

| REQUIREMENTS FOR INDUCED ABORTION            |     |  |     |  |
|--|-----|--|-----|--|
| Authorizations required                      |     | Consent required                             |     |  |
| Authorization of health care professional(s) | Yes | Spousal consent                              | No  |  |
| Number of authorizations                     | 1   | Parental consent for minors                  | Yes |  |
| Cadre of health care professional            |     | Consent by another adult                     | Yes |  |
| Doctor (specialty not specified)             | _   |  |     |  |
| Specialist doctor, including OB/GYN          | Yes | Other requirements                           |     |  |
| Nurse  | _   | Gestational age limits                       | Yes |  |
| Midwife/nurse-midwife                        | _   | Compulsory counselling                       | Yes |  |
| Other providers                              | _   | Compulsory waiting period                    | No  |  |
| Authorized in specially licensed facilities  | Yes | Length of waiting period (days)              | _   |  |
| Judicial authorization                       |     | Mandatory screening test                     |     |  |
| For minors                                   | Yes | HIV test                                     | No  |  |
| In case of rape                              | _   | Other STI test(s)                            | Yes |  |
| Police report in case of rape                | _   | Ultrasound viewing or listening to heartbeat | _   |  |

| Age when a woman can obtain an abortion without parental or judicial consent |    |  |   |
|--|----|--|---|
| Age limit for parental consent (years)                                       | 16 | Age limit for judicial consent (years) | _ |
|  |    |  |   |

|                                       | Sex-selective abortion |   |
|---------------------------------------|------------------------|---|
| Prohibition of sex-selective abortion | No                     | Restrictions on the methods to detect the sex of the foetus |

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | Yes                              | 14  |  |
| Dilatation and evacuation             | Yes                              | 14 or over                                |  |
| Combination mifepristone- misoprostol | Yes                              | 24  |  |
| Misoprostol only                      | Yes                              | 7   |  |
| Other method(s)                       | <del>-</del>                     | <del>-</del>                              |  |



### Serbia

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | Yes   | _  |  |
| Misoprostol  | No  | <del>-</del>   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | <del>-</del>       |
| Specialized abortion care public facilities       | <del>-</del>     | <del>-</del>       |
| Private health-care centres or clinics            | <del>-</del>     | <del>-</del>       |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | Yes <sup>2</sup> | <del>-</del>       |

| Health care personnel allowed to provide legal abortions |     |
|--|-----|
| Doctors (speciality not specified)                       | No  |
| Specialist doctor, including OB/GYN                      | Yes |
| Nurse  | No  |
| Midwife/nurse-midwife                                    | No  |
| Other provider(s)  | _   |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | Yes |
| National guidelines on clinical and service delivery of post-abortion care | Yes |
| Restrictions on public information on legal abortion services              | _   |
| Counselling for contraceptive methods during post-abortion care            | Yes |

| Service delivery requirements for providers or facilities |                  |
|---|------------------|
| Referral linkage to a higher-level facility               | Yes              |
| Availability of a specialist doctor                       | Yes              |
| Minimum number of beds                                    | _                |
| Other facility/provider requirements                      | Yes <sup>3</sup> |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | Yes <sup>4</sup>  | Yes   |

#### Notes:

- Indicates that data are not available, not applicable or not specified.
- 1. Authorisation at gestational ages of less than ten weeks need to be authorized by an obstetrician gynaecologist. Between ten and twenty weeks of gestation, the authorization is done by a panel of doctors and after twenty weeks by an ethics committee.

  2. Abortion up to 20 weeks of gestation is carried out in a medical institution that has hospital services in gynaecology and obstetrics, emergency room and blood transfusion service. Termination of pregnancy after the age of twenty weeks of pregnancy is carried out in the clinic, institute, Clinical Hospital Center and Clinical Center. Abortion up to ten weeks of gestation can be done in a health centre or octor's office specialist in gynaecology and obstetrics,

  3. Availability of anaesthesiologist (if abortion is done also under general anaesthesia). Abortion up to twenty weeks of gestation is carried out in a medical institution that has hospital services in gynaecology and obstetrics,
- transfusion service.
  4. Provider type not specified.



## **Seychelles**

| LAWS ON ABORTION                                 |   |   |
|--|---|---|
| Legal grounds for induced abortion               | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |
| To save life                                     | Yes                                     | 12  |
| To preserve health                               | Yes                                     | 12  |
| To preserve physical health                      | Yes                                     | 12  |
| To preserve mental health                        | Yes                                     | 12  |
| In cases of intellectual or cognitive disability | Yes                                     | <del>-</del>                                    |
| In cases of incest                               | Yes                                     | 12  |
| In cases of rape                                 | Yes                                     | 12  |
| In cases of foetal impairment                    | Yes                                     | 12  |
| For economic or social reason                    | _                                       | _   |
| On request                                       | _                                       | _   |
| For other reason(s)                              | _                                       | _   |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORT               |                  | R INDUCED ABORTION    |
|--|------------------|-----------------------|
| Authorizations required                      |                  | Consent required      |
| Authorization of health care professional(s) | Yes              | Spousal consent       |
| Number of authorizations                     | 3                | Parental consent for  |
| Cadre of health care professional            |                  | Consent by another    |
| Doctor (specialty not specified)             | Yes              |                       |
| Specialist doctor, including OB/GYN          | Yes              | Other requirements    |
| Nurse  | _                | Gestational age limit |
| Midwife/nurse-midwife                        | <del>-</del>     | Compulsory counsel    |
| Other providers                              | Yes <sup>2</sup> | Compulsory waiting    |
| Authorized in specially licensed facilities  | Yes              | Length of waitin      |
| Judicial authorization                       |                  | Mandatory screening   |
| For minors                                   | _                | HIV test              |
| In case of rape                              | Yes              | Other STI test(s      |
| Police report in case of rape                | _                | Ultrasound viewing of |
|  |                  |                       |

| Parental consent for minors                  | Yes      |  |
|--|----------|--|
| Consent by another adult                     | _        |  |
|  |          |  |
| Other requirements                           |          |  |
| Gestational age limits                       | Yes      |  |
| Compulsory counselling                       | _        |  |
| Compulsory waiting period                    | _        |  |
| Length of waiting period (days)              | _        |  |
| Mandatory screening test                     |          |  |
| HIV test                                     | _        |  |
| Other STI test(s)                            | <u> </u> |  |
| Ultrasound viewing or listening to heartbeat | _        |  |

| Age when a woman can obtain an abortion without parental or judicial consent |    |  |   |
|--|----|--|---|
| Age limit for parental consent (years)                                       | 18 | Age limit for judicial consent (years) | _ |

|                                       | Sex-selective abortion                                      |
|---------------------------------------|---|
| Prohibition of sex-selective abortion | Restrictions on the methods to detect the sex of the foetus |

| ACCESS TO ABORTION SERVICES           |                                  |   |
|---------------------------------------|----------------------------------|---|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |
| Vacuum aspiration                     | <del>-</del>                     | _   |
| Dilatation and evacuation             | <del>-</del>                     | _   |
| Combination mifepristone- misoprostol | <del>-</del>                     | _   |
| Misoprostol only                      | _                                | _   |
| Other method(s)                       | <del>-</del>                     | <del>-</del>                              |



### **Seychelles**

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |  |
|--|---|--|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |  |  |
| Misoprostol  | Yes <sup>3</sup>                                  | <del>-</del>   |  |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | No               | <del>-</del>       |
| Secondary (district-level) health-care facilities | No               | <del>-</del>       |
| Specialized abortion care public facilities       | No               | _                  |
| Private health-care centres or clinics            | No               | <del>-</del>       |
| NGO health-care centres or clinics                | No               | <del>-</del>       |
| Other settings or facilities                      | Yes <sup>4</sup> | _                  |

| Health care personnel allowed to provide legal abortions |     |  |
|--|-----|--|
| Doctors (speciality not specified)                       | _   |  |
| Specialist doctor, including OB/GYN                      | Yes |  |
| Nurse  | _   |  |
| Midwife/nurse-midwife                                    | _   |  |
| Other provider(s)  | _   |  |
| Other provider(3)  |     |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |              |
|--|--------------|
| National guidelines on clinical and service delivery of induced abortion   | _            |
| National guidelines on clinical and service delivery of post-abortion care | _            |
| Restrictions on public information on legal abortion services              | _            |
| Counselling for contraceptive methods during<br>post-abortion care         | <del>-</del> |

| Service delivery requirements for providers or facilities |   |  |
|---|---|--|
| Referral linkage to a higher-level facility               | _ |  |
| Availability of a specialist doctor                       | _ |  |
| Minimum number of beds                                    | _ |  |
| Other facility/provider requirements                      | _ |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | Yes <sup>5</sup>  | _   |

#### Notes:

- A person is not criminally responsible for performing in good faith and with reasonable care and skill a surgical operation upon any person for the patient's benefit, or upon an unborn child for the preservation of the mother's life, if the performance of the operation is reasonable, having regard to the patient's state at the time and to all circumstances of the case.

  2. The Director of Health Services.

  3. For gynaecological indications.

  4. Victorial Hospital, Mahe.

  5. Provider type not specified. Health providers have the right to conscientious object shall not affect any duty to participate in treatment which is necessary to save the life, or to prevent grave permanent injury to the physical or mental health, of a pregnant



Age limit for parental consent (years)

# Abortion laws and policies, 2017

### Sierra Leone

| LAWS ON ABORTION                                 |   |   |  |
|--|---|---|--|
| Legal grounds for induced abortion               | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | _   |  |
| To preserve health                               | Yes                                     | _   |  |
| To preserve physical health                      | Yes                                     | _   |  |
| To preserve mental health                        | Yes                                     | _   |  |
| In cases of intellectual or cognitive disability | No                                      | _   |  |
| In cases of incest                               | No                                      | <del>-</del>                                    |  |
| In cases of rape                                 | No                                      | _   |  |
| In cases of foetal impairment                    | No                                      | _   |  |
| For economic or social reason                    | No                                      | _   |  |
| On request                                       | No                                      | _   |  |
| For other reason(s)                              | _                                       | _   |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |   |
|---|-----|----------|-----|------------------------------------|---|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | _ |

| REQUIREMENTS FOR INDUCED ABORTION            |     |  |     |  |
|--|-----|--|-----|--|
| Authorizations required                      |     | Consent required                             |     |  |
| Authorization of health care professional(s) | Yes | Spousal consent                              | _   |  |
| Number of authorizations                     | 2   | Parental consent for minors                  | Yes |  |
| Cadre of health care professional            |     | Consent by another adult                     | _   |  |
| Doctor (specialty not specified)             | _   |  |     |  |
| Specialist doctor, including OB/GYN          | _   | Other requirements                           |     |  |
| Nurse  | _   | Gestational age limits                       | _   |  |
| Midwife/nurse-midwife                        | _   | Compulsory counselling                       | No  |  |
| Other providers                              | Yes | Compulsory waiting period                    | No  |  |
| Authorized in specially licensed facilities  | Yes | Length of waiting period (days)              | _   |  |
| Judicial authorization                       |     | Mandatory screening test                     |     |  |
| For minors                                   | _   | HIV test                                     | _   |  |
| In case of rape                              | _   | Other STI test(s)                            | _   |  |
| Police report in case of rape                | _   | Ultrasound viewing or listening to heartbeat | _   |  |

|                                       | Sex-selective a | bortion                                       |
|---------------------------------------|-----------------|---|
| Prohibition of sex-selective abortion | Yes             | Restrictions on the methods to detect the sex |

Age limit for judicial consent (years)

| ACCESS TO ABORTION SERVICES           |                                  |   |
|---------------------------------------|----------------------------------|---|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |
| Vacuum aspiration                     | <del>-</del>                     | _   |
| Dilatation and evacuation             | <del>-</del>                     | _   |
| Combination mifepristone- misoprostol | <del>-</del>                     | _   |
| Misoprostol only                      | _                                | _   |
| Other method(s)                       | <del>-</del>                     | <del>-</del>                              |



### Sierra Leone

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |
|--|---|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |
| Misoprostol  | No  | <del>-</del>   |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | _                  |
| Specialized abortion care public facilities       | <del>-</del>     | _                  |
| Private health-care centres or clinics            | <del>-</del>     | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | _                  |
| Other settings or facilities                      | _                | _                  |

| ealth care personnel allowed to provide legal abortions |   |  |
|---|---|--|
| Doctors (speciality not specified)                      | _ |  |
| Specialist doctor, including OB/GYN                     | _ |  |
| Nurse   | _ |  |
| Midwife/nurse-midwife                                   | _ |  |
| Other provider(s)                                       | _ |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |   |
|--|---|
| National guidelines on clinical and service delivery of induced abortion   | _ |
| National guidelines on clinical and service delivery of post-abortion care | _ |
| Restrictions on public information on legal abortion services              | _ |
| Counselling for contraceptive methods during post-abortion care            | _ |

| Service delivery requirements for providers or facilities |              |  |
|---|--------------|--|
| Referral linkage to a higher-level facility               | _            |  |
| Availability of a specialist doctor                       | <del>-</del> |  |
| Minimum number of beds                                    | _            |  |
| Other facility/provider requirements                      | _            |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to<br>alternative provider or facility |
|--|-------------------|--|
| Health-care facilities   | _                 | _  |
| Health-care providers  | _                 | _  |

#### Notes:

- Indicates that data are not available, not applicable or not specified.
- 1. Abortion is permitted for therapeutic purposes.



## **Singapore**

| LAWS ON ABORTION                                 |   |   |  |
|--|---|---|--|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | No limit  |  |
| To preserve health                               | Yes                                     | No limit  |  |
| To preserve physical health                      | Yes                                     | No limit  |  |
| To preserve mental health                        | Yes                                     | No limit  |  |
| In cases of intellectual or cognitive disability | _                                       | _   |  |
| In cases of incest                               | <del>-</del>                            | _   |  |
| In cases of rape                                 | _                                       | _   |  |
| In cases of foetal impairment                    | _                                       | _   |  |
| For economic or social reason                    | _                                       | _   |  |
| On request                                       | Yes                                     | 24  |  |
| For other reason(s)                              | _                                       | _   |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

|  | REQUIREMENTS FOR INDUCED ABORTION |                                |
|--|-----------------------------------|--------------------------------|
| Authorizations required                      |                                   | Consent required               |
| Authorization of health care professional(s) | _                                 | Spousal consent                |
| Number of authorizations                     | _                                 | Parental consent for minors    |
| Cadre of health care professional            |                                   | Consent by another adult       |
| Doctor (specialty not specified)             | _                                 |                                |
| Specialist doctor, including OB/GYN          | _                                 | Other requirements             |
| Nurse  | _                                 | Gestational age limits         |
| Midwife/nurse-midwife                        | _                                 | Compulsory counselling         |
| Other providers                              | _                                 | Compulsory waiting period      |
| Authorized in specially licensed facilities  | Yes                               | Length of waiting period       |
| Judicial authorization                       |                                   | Mandatory screening test       |
| For minors                                   | _                                 | HIV test                       |
| In case of rape                              | _                                 | Other STI test(s)              |
| Police report in case of rape                | _                                 | Ultrasound viewing or listenin |

| Consent by another adult                     | _   |
|--|-----|
| Other requirements                           |     |
| Gestational age limits                       | Yes |
| Compulsory counselling                       | _   |
| Compulsory waiting period                    | Yes |
| Length of waiting period (days)              | 2 2 |
| Mandatory screening test                     |     |
| HIV test                                     | _   |
| Other STI test(s)                            | _   |
| Ultrasound viewing or listening to heartbeat | _   |

| Age when a woman can obtain an abortion without parental or judicial consent |  |   |  |  |
|--|--|---|--|--|
| Age limit for parental consent (years)                                       | <ul> <li>Age limit for judicial consent (years)</li> </ul> | _ |  |  |

|                                       | Sex-selective abortion                                      |
|---------------------------------------|---|
| Prohibition of sex-selective abortion | Restrictions on the methods to detect the sex of the foetus |

| ACCESS TO ABORTION SERVICES           |                                  |   |  |  |
|---------------------------------------|----------------------------------|---|--|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |  |
| Vacuum aspiration                     | <del>-</del>                     | _   |  |  |
| Dilatation and evacuation             | <del>-</del>                     | _   |  |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | _   |  |  |
| Misoprostol only                      | <del>-</del>                     | _   |  |  |
| Other method(s)                       | _                                | <del>-</del>                              |  |  |



### **Singapore**

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |  |
|--|---|--|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |  |
| Mifepristone and/or combination mifepristone-misoprostol | _   | _  |  |  |
| Misoprostol  | _   | <del>-</del>   |  |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |  |
|---|------------------|--------------------|--|
| Primary health care centres                       | Yes              | _                  |  |
| Secondary (district-level) health-care facilities | _                | _                  |  |
| Specialized abortion care public facilities       | <del>-</del>     | _                  |  |
| Private health-care centres or clinics            | _                | _                  |  |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |  |
| Other settings or facilities                      | Yes <sup>3</sup> | _                  |  |

| Health care personnel allowed to provide legal abortions |     |  |
|--|-----|--|
| Doctors (speciality not specified)                       | Yes |  |
| Specialist doctor, including OB/GYN                      | Yes |  |
| Nurse  | _   |  |
| Midwife/nurse-midwife                                    | _   |  |
| Other provider(s)  | _   |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | Yes |
| National guidelines on clinical and service delivery of post-abortion care | Yes |
| Restrictions on public information on legal abortion services              | _   |
| Counselling for contraceptive methods during<br>post-abortion care         | Yes |

| Service delivery requirements for providers or facilities |                  |  |  |
|---|------------------|--|--|
| Referral linkage to a higher-level facility               | _                |  |  |
| Availability of a specialist doctor                       | _                |  |  |
| Minimum number of beds                                    | _                |  |  |
| Other facility/provider requirements                      | Yes <sup>4</sup> |  |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |  |
|--|-------------------|---|--|
| Health-care facilities   | _                 | _   |  |
| Health-care providers  | Yes <sup>5</sup>  | _   |  |

#### Notes:

- Indicates that data are not available, not applicable or not specified.

- 1. Termination of pregnancy can be carried out after 24 week if "the treatment is immediately necessary to save the life or to prevent grave permanent injury to the physical or mental health of the pregnant woman."

  2. From the end of first counselling session.

  3. Medical facilities other than hospitals which have been approved by the Ministry of Health.

  4. An approved institution must maintain its premises in a reasonable state of cleanliness and to provide a qualified medical practitioner, a nurse, a trained counsellor and, where general anaesthesia is to be induced, an anaesthetist during the termination of
- a pregnancy.
  5. Provider type not specified.



Prohibition of sex-selective abortion

## Abortion laws and policies, 2017

### Slovakia

| LAWS ON ABORTION                                 |   |   |  |
|--|---|---|--|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | No limit  |  |
| To preserve health                               | Yes                                     | 24  |  |
| To preserve physical health                      | Yes                                     | 24  |  |
| To preserve mental health                        | Yes                                     | 24  |  |
| In cases of intellectual or cognitive disability | _                                       | _   |  |
| In cases of incest                               | Yes                                     | _   |  |
| In cases of rape                                 | Yes                                     | _   |  |
| In cases of foetal impairment                    | Yes                                     | _   |  |
| For economic or social reason                    | _                                       | _   |  |
| On request                                       | Yes                                     | 12  |  |
| For other reason(s)                              | Yes 1                                   | _   |  |

| Persons who can be criminally charged for an illegal abortion |   |          |     |                                    |     |  |
|---|---|----------|-----|------------------------------------|-----|--|
| Woman   | _ | Provider | Yes | Other person who assists the woman | Yes |  |

| REQUIREMENTS FOR INDUCED ABORTION            |                  |  |              |  |
|--|------------------|--|--------------|--|
| uthorizations required                       | Consent required |  |              |  |
| Authorization of health care professional(s) | Yes              | Spousal consent                              | <del>_</del> |  |
| Number of authorizations                     | 3                | Parental consent for minors                  | Yes          |  |
| Cadre of health care professional            |                  | Consent by another adult                     | Yes          |  |
| Doctor (specialty not specified)             | Yes              |  |              |  |
| Specialist doctor, including OB/GYN          | Yes              | Other requirements                           |              |  |
| Nurse  | _                | Gestational age limits                       | Yes          |  |
| Midwife/nurse-midwife                        | _                | Compulsory counselling                       | Yes          |  |
| Other providers                              | _                | Compulsory waiting period                    | Yes          |  |
| Authorized in specially licensed facilities  | _                | Length of waiting period (days)              | 2 2          |  |
| Judicial authorization                       |                  | Mandatory screening test                     |              |  |
| For minors                                   | _                | HIV test                                     | _            |  |
| In case of rape                              | _                | Other STI test(s)                            | _            |  |
| Police report in case of rape                | _                | Ultrasound viewing or listening to heartbeat | _            |  |

| Age limit for parental consent (years) | — Age limit for judicial consent (years) —    |
|--|---|
|  |   |
|  | Sex-selective abortion                        |
| Prohibition of cov coloctive chartien  | Restrictions on the methods to detect the sex |

| ACCESS TO ABORTION SERVICES           |                                  |   |
|---------------------------------------|----------------------------------|---|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |
| Vacuum aspiration                     | _                                | _   |
| Dilatation and evacuation             | <del>-</del>                     | <del>-</del>                              |
| Combination mifepristone- misoprostol | <del>-</del>                     | <del>-</del>                              |
| Misoprostol only                      | _                                | <del>-</del>                              |
| Other method(s)                       | _                                | _   |



### Slovakia

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |  |
| Misoprostol  | No  | <del>-</del>   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | _                  |
| Specialized abortion care public facilities       | <del>-</del>     | _                  |
| Private health-care centres or clinics            | <del>-</del>     | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | _                  |
| Other settings or facilities                      | _                | _                  |

| Doctors (speciality not specified)   | _        |
|--|----------|
| Specialist doctor, including OB/GYN  | _        |
| Nurse  | _        |
| Midwife/nurse-midwife  | _        |
| Other provider(s)  | _        |
|  |          |
| Information and guidelines on abortion services                            |          |
| National guidelines on clinical and service delivery of induced abortion   | <u> </u> |
| National guidelines on clinical and service delivery of post-abortion care | _        |
|  |          |

Health care personnel allowed to provide legal abortions

| Public health coverage for induced abortion for all women       | No |
|---|----|
| Public health coverage for induced abortion for poor women only | _  |
| Public health coverage for abortion complications               | _  |
| Private health coverage for induced abortion                    | _  |
| Other type of coverage  | _  |

| Service delivery requirements for providers of | iaciilles |
|--|-----------|
| Referral linkage to a higher-level facility    | _         |
| Availability of a specialist doctor            | _         |
| Minimum number of beds                         | _         |
| Other facility/provider requirements           | _         |
|  |           |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | Yes <sup>3</sup>  | _   |

#### Notes:

The designations employed in this publication and the material presented in it do not imply the expression of any opinion whatsoever on the part of the Secretariat of the United Nations concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries.

Restrictions on public information on legal Counselling for contraceptive methods during

post-abortion care

- Conception before the age of 18 or over the age of 40. Contraceptive failure if there is a reasonable suspicion that the woman became pregnant as a result of a crime.
   From the moment when the doctor sends a notification to the National Health Information Center.
   Provider type not specified.



### Slovenia

| LAWS ON ABORTION                                 |   |   |  |
|--|---|---|--|
| Legal grounds for induced abortion               | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | No limit  |  |
| To preserve health                               | Yes                                     | No limit  |  |
| To preserve physical health                      | <del>-</del>                            | _   |  |
| To preserve mental health                        | <del>-</del>                            | _   |  |
| In cases of intellectual or cognitive disability | <del>-</del>                            | _   |  |
| In cases of incest                               | _                                       | _   |  |
| In cases of rape                                 | <del>-</del>                            | _   |  |
| In cases of foetal impairment                    | <del>-</del>                            | _   |  |
| For economic or social reason                    | _                                       | _   |  |
| On request                                       | Yes                                     | 10  |  |
| For other reason(s)                              | Yes <sup>1</sup>                        | _   |  |

| Persons who can be criminally charged for an illegal abortion |   |          |     |                                    |     |  |
|---|---|----------|-----|------------------------------------|-----|--|
| Woman   | _ | Provider | Yes | Other person who assists the woman | Yes |  |

| REQUIREMENTS FOR INDUCED ABORTION            |                  |  |     |  |
|--|------------------|--|-----|--|
| Authorizations required                      |                  | Consent required                             |     |  |
| Authorization of health care professional(s) | Yes              | Spousal consent                              | No  |  |
| Number of authorizations                     | 3 2              | Parental consent for minors                  | No  |  |
| Cadre of health care professional            |                  | Consent by another adult                     | _   |  |
| Doctor (specialty not specified)             | Yes              |  |     |  |
| Specialist doctor, including OB/GYN          | Yes              | Other requirements                           |     |  |
| Nurse  | _                | Gestational age limits                       | Yes |  |
| Midwife/nurse-midwife                        | _                | Compulsory counselling                       | No  |  |
| Other providers                              | Yes <sup>3</sup> | Compulsory waiting period                    | No  |  |
| Authorized in specially licensed facilities  | Yes              | Length of waiting period (days)              | _   |  |
| Judicial authorization                       |                  | Mandatory screening test                     |     |  |
| For minors                                   | No               | HIV test                                     | _   |  |
| In case of rape                              | _                | Other STI test(s)                            | _   |  |
| Police report in case of rape                | _                | Ultrasound viewing or listening to heartbeat | _   |  |

| Age when a woman can obtain an abortion without parental or judicial consent      |  |  |  |
|---|--|--|--|
| Age limit for parental consent (years) — Age limit for judicial consent (years) — |  |  |  |
|   |  |  |  |

|                                       | Sex-selective abortion |   |                  |
|---------------------------------------|------------------------|---|------------------|
| Prohibition of sex-selective abortion | Yes                    | Restrictions on the methods to detect the sex of the foetus | Yes <sup>4</sup> |

| ACCESS TO ABORTION SERVICES           |                                  |   |  |  |
|---------------------------------------|----------------------------------|---|--|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |  |
| Vacuum aspiration                     | _                                | _   |  |  |
| Dilatation and evacuation             | <del>-</del>                     | _   |  |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | _   |  |  |
| Misoprostol only                      | _                                | _   |  |  |
| Other method(s)                       | <del>-</del>                     | _   |  |  |



### Slovenia

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |  |
|--|---|--|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |  |
| Mifepristone and/or combination mifepristone-misoprostol | Yes   | <del>-</del>   |  |  |
| Misoprostol  | Yes <sup>5</sup>                                  | <u> </u>   |  |  |

| Settings for providing legal abortion services    | Induced abortion Post-abortion care |              |  |
|---|-------------------------------------|--------------|--|
| Primary health care centres                       | _                                   | <del>-</del> |  |
| Secondary (district-level) health-care facilities | _                                   | <del>-</del> |  |
| Specialized abortion care public facilities       | Yes                                 | _            |  |
| Private health-care centres or clinics            | _                                   | _            |  |
| NGO health-care centres or clinics                | <del>-</del>                        | <del>-</del> |  |
| Other settings or facilities                      | Yes                                 | _            |  |

| Doctors (speciality not specified) —  Specialist doctor, including OB/GYN —  Nurse — |
|--|
|  |
| Nurse —  |
|  |
| Midwife/nurse-midwife —  |
| Other provider(s)  |

| Types of insurance or other coverage for abortion                  |     |
|--|-----|
| Public health coverage for induced abortion for all women          | Yes |
| Public health coverage for induced abortion for<br>poor women only | No  |
| Public health coverage for abortion complications                  | Yes |
| Private health coverage for induced abortion                       | _   |
| Other type of coverage   |     |

| Information and guidelines on abortion                             | on services    |
|--|----------------|
| National guidelines on clinical and delivery of induced abortion   | service Yes    |
| National guidelines on clinical and delivery of post-abortion care | service Yes    |
| Restrictions on public information of abortion services            | n legal        |
| Counselling for contraceptive meth post-abortion care              | ods during Yes |

| Service delivery requirements for providers or facilities |                  |  |  |
|---|------------------|--|--|
| Referral linkage to a higher-level facility               | _                |  |  |
| Availability of a specialist doctor                       | _                |  |  |
| Minimum number of beds                                    | _                |  |  |
| Other facility/provider requirements                      | Yes <sup>6</sup> |  |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | Yes <sup>7</sup>  | Yes   |

#### Notes:

- Indicates that data are not available, not applicable or not specified.
- 1. Risk to woman's ruture momentood.

  2. Authorisation for abortions after 10 weeks of gestation is provided by a Commission of First Instance, which consists of a social worker and two doctors, one of whom must be a specialist in gynaecology and obstetrics. The Commission of First Instance also considers cases of women with pregnancies of less than 10 weeks where medical contraindications to abortion were found by the health care institution to which they have applied for pregnancy termination. Commissions of Second Instance are mandated to review negative decisions by Commissions of First Instance at the woman's request.
- 3. A social worker.

  4. Insemination of an oocyte with a spermatozoon specially selected to determine the child's gender shall not be permitted unless it is intended to prevent a severe gender-related hereditary disease.

  5. Indications not specified.

  6. Induced abortion is carried out in in general, specialty and clinical hospitals that have a gynaecological and obstetric or surgical department.

  7. Provider type not specified.



Prohibition of sex-selective abortion

## Abortion laws and policies, 2017

### **Solomon Islands**

| LAWS ON ABORTION                                 |   |   |  |  |
|--|---|---|--|--|
| Legal grounds for induced abortion               | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |  |
| To save life                                     | Yes                                     | <del>-</del>                                    |  |  |
| To preserve health                               | No                                      | _   |  |  |
| To preserve physical health                      | No                                      | <del>_</del>                                    |  |  |
| To preserve mental health                        | No                                      | _   |  |  |
| In cases of intellectual or cognitive disability | No                                      | <del>-</del>                                    |  |  |
| In cases of incest                               | No                                      | _   |  |  |
| In cases of rape                                 | No                                      | <del>-</del>                                    |  |  |
| In cases of foetal impairment                    | No                                      | <del>-</del>                                    |  |  |
| For economic or social reason                    | No                                      | <del>-</del>                                    |  |  |
| On request                                       | No                                      | <del>-</del>                                    |  |  |
| For other reason(s)                              | _                                       | _   |  |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |   |  |              |
|--|---|--|--------------|
| Authorizations required Consent required     |   |  |              |
| Authorization of health care professional(s) | _ | Spousal consent                              | _            |
| Number of authorizations                     | _ | Parental consent for minors                  | _            |
| Cadre of health care professional            |   | Consent by another adult                     | _            |
| Doctor (specialty not specified)             | _ |  |              |
| Specialist doctor, including OB/GYN          | _ | Other requirements                           |              |
| Nurse  | _ | Gestational age limits                       | <del>_</del> |
| Midwife/nurse-midwife                        | _ | Compulsory counselling                       | _            |
| Other providers                              | _ | Compulsory waiting period                    | _            |
| Authorized in specially licensed facilities  | _ | Length of waiting period (days)              | _            |
| Judicial authorization                       |   | Mandatory screening test                     |              |
| For minors                                   | _ | HIV test                                     | _            |
| In case of rape                              | _ | Other STI test(s)                            | _            |
| Police report in case of rape                | _ | Ultrasound viewing or listening to heartbeat | _            |

| · · · · · · · · · · · · · · · · · · ·  |                  |  |   |
|--|------------------|--|---|
| Age limit for parental consent (years) | _                | Age limit for judicial consent (years) | _ |
|  |                  |  |   |
|  | Sex-selective at | portion                                |   |

Restrictions on the methods to detect the sex

| ACCESS TO ABORTION SERVICES           |                                  |   |
|---------------------------------------|----------------------------------|---|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |
| Vacuum aspiration                     | _                                | _   |
| Dilatation and evacuation             | <del>-</del>                     | _   |
| Combination mifepristone- misoprostol | <del>-</del>                     | _   |
| Misoprostol only                      | _                                | _   |
| Other method(s)                       | <del>-</del>                     | _   |



### **Solomon Islands**

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |
|--|---|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |
| Misoprostol  | Yes <sup>2</sup>                                  | Yes <sup>3</sup>   |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | _                  |
| Specialized abortion care public facilities       | <del>-</del>     | _                  |
| Private health-care centres or clinics            | <del>-</del>     | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | _                  |
| Other settings or facilities                      | _                | _                  |

| Health care personnel allowed to provide legal abortions |     |  |
|--|-----|--|
| Doctors (speciality not specified)                       | Yes |  |
| Specialist doctor, including OB/GYN                      | _   |  |
| Nurse  | _   |  |
| Midwife/nurse-midwife                                    | _   |  |
| Other provider(s)  | _   |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | _   |
| National guidelines on clinical and service delivery of post-abortion care | _   |
| Restrictions on public information on legal abortion services              | Yes |
| Counselling for contraceptive methods during<br>post-abortion care         | _   |

| Service delivery requirements for providers or facilities |              |  |
|---|--------------|--|
| Referral linkage to a higher-level facility               | _            |  |
| Availability of a specialist doctor                       | <del>-</del> |  |
| Minimum number of beds                                    | _            |  |
| Other facility/provider requirements                      | _            |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | _                 | _   |

#### Notes:

- Indicates that data are not available, not applicable or not specified.
- 1. Surgical operation performed in good faith and with reasonable care and skill upon an unborn child for the preservation of the mother's life, if the performance of the operation is reasonable, having regard to the patient's state at the time and to all the circumstances of the case.

  2. For gynaecological indications.

  3. With prescription only.



Age limit for parental consent (years)

## Abortion laws and policies, 2017

### Somalia

| LAWS ON ABORTION                                 |   |   |  |
|--|---|---|--|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | No limit  |  |
| To preserve health                               | No                                      | _   |  |
| To preserve physical health                      | No                                      | <del>_</del>                                    |  |
| To preserve mental health                        | No                                      | _   |  |
| In cases of intellectual or cognitive disability | No                                      | _   |  |
| In cases of incest                               | No                                      | _   |  |
| In cases of rape                                 | No                                      | _   |  |
| In cases of foetal impairment                    | No                                      | _   |  |
| For economic or social reason                    | No                                      | _   |  |
| On request                                       | No                                      | _   |  |
| For other reason(s)                              | _                                       | _   |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |              |  |   |
|--|--------------|--|---|
| Authorizations required                      |              | Consent required                             |   |
| Authorization of health care professional(s) | <del>_</del> | Spousal consent                              | _ |
| Number of authorizations                     | _            | Parental consent for minors                  | _ |
| Cadre of health care professional            |              | Consent by another adult                     | _ |
| Doctor (specialty not specified)             | _            |  |   |
| Specialist doctor, including OB/GYN          | _            | Other requirements                           |   |
| Nurse  | _            | Gestational age limits                       | _ |
| Midwife/nurse-midwife                        | _            | Compulsory counselling                       | _ |
| Other providers                              | _            | Compulsory waiting period                    | _ |
| Authorized in specially licensed facilities  | _            | Length of waiting period (days)              | _ |
| Judicial authorization                       |              | Mandatory screening test                     |   |
| For minors                                   | _            | HIV test                                     | _ |
| In case of rape                              | _            | Other STI test(s)                            | _ |
| Police report in case of rape                | _            | Ultrasound viewing or listening to heartbeat | _ |

|                                       | Sex-selective abortion | 1   |
|---------------------------------------|------------------------|---|
| Prohibition of sex-selective abortion | _                      | Restrictions on the methods to detect the sex of the foetus |

Age limit for judicial consent (years)

Age when a woman can obtain an abortion without parental or judicial consent

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | <del>-</del>                     | _   |  |
| Dilatation and evacuation             | <del>-</del>                     | _   |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | _   |  |
| Misoprostol only                      | _                                | _   |  |
| Other method(s)                       | <del>-</del>                     | <del>-</del>                              |  |



## Somalia

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |  |
| Misoprostol  | No  | _  |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | _                  |
| Specialized abortion care public facilities       | <del>-</del>     | _                  |
| Private health-care centres or clinics            | <del>-</del>     | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | _                  |
| Other settings or facilities                      | _                | _                  |

| Health care personnel allowed to provide legal abortions |   |  |
|--|---|--|
| Doctors (speciality not specified)                       | _ |  |
| Specialist doctor, including OB/GYN                      | _ |  |
| Nurse  | _ |  |
| Midwife/nurse-midwife                                    | _ |  |
| Other provider(s)  | _ |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |   |
|--|---|
| National guidelines on clinical and service delivery of induced abortion   | _ |
| National guidelines on clinical and service delivery of post-abortion care | _ |
| Restrictions on public information on legal abortion services              | _ |
| Counselling for contraceptive methods during post-abortion care            | _ |

| Service delivery requirements for providers or facilities |   |  |
|---|---|--|
| Referral linkage to a higher-level facility               | _ |  |
| Availability of a specialist doctor                       | _ |  |
| Minimum number of beds                                    | _ |  |
| Other facility/provider requirements                      | _ |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | _                 | _   |

#### Notes:

- Indicates that data are not available, not applicable or not specified
- 1. Abortion is generally illegal in the country. However, under the general criminal law principles of necessity, it is allowed to be performed to save the life of the pregnant woman.



## **South Africa**

| LAWS ON ABORTION                                 |   |   |  |
|--|---|---|--|
| Legal grounds for induced abortion               | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | No limit  |  |
| To preserve health                               | Yes                                     | 20  |  |
| To preserve physical health                      | Yes                                     | 20  |  |
| To preserve mental health                        | Yes                                     | 20  |  |
| In cases of intellectual or cognitive disability | Yes                                     | 20  |  |
| In cases of incest                               | Yes                                     | 20  |  |
| In cases of rape                                 | Yes                                     | 20  |  |
| In cases of foetal impairment                    | Yes                                     | No limit  |  |
| For economic or social reason                    | Yes                                     | 20  |  |
| On request                                       | Yes                                     | 12  |  |
| For other reason(s)                              | _                                       | _   |  |

| Persons who can be criminally charged for an illegal abortion |            |     |                                    |   |  |
|---|------------|-----|------------------------------------|---|--|
| Woman -   | — Provider | Yes | Other person who assists the woman | _ |  |

| REQUIREMENTS FOR INDUCED ABORTION            |     |  |     |
|--|-----|--|-----|
| Authorizations required                      |     | Consent required                             |     |
| Authorization of health care professional(s) | Yes | Spousal consent                              | No  |
| Number of authorizations                     | 1   | Parental consent for minors                  | No  |
| Cadre of health care professional            |     | Consent by another adult                     | _   |
| Doctor (specialty not specified)             | Yes |  |     |
| Specialist doctor, including OB/GYN          | _   | Other requirements                           |     |
| Nurse  | _   | Gestational age limits                       | Yes |
| Midwife/nurse-midwife                        | Yes | Compulsory counselling                       | _   |
| Other providers                              | _   | Compulsory waiting period                    | _   |
| Authorized in specially licensed facilities  | Yes | Length of waiting period (days)              | _   |
| Judicial authorization                       |     | Mandatory screening test                     |     |
| For minors                                   | No  | HIV test                                     | _   |
| In case of rape                              | _   | Other STI test(s)                            | _   |
| Police report in case of rape                | _   | Ultrasound viewing or listening to heartbeat | _   |

| Age limit for parental consent (years) | _                | Age limit for judicial consent (years)        | _ |
|--|------------------|---|---|
|  |                  |   |   |
|  | Sex-selective al | portion                                       |   |
| Prohibition of sex-selective abortion  | No               | Restrictions on the methods to detect the sex | _ |

of the foetus

Age when a woman can obtain an abortion without parental or judicial consent

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | Yes                              | 20  |  |
| Dilatation and evacuation             | <del>-</del>                     | <del>-</del>                              |  |
| Combination mifepristone- misoprostol | Yes                              | 20  |  |
| Misoprostol only                      | Yes                              | 13  |  |
| Other method(s)                       | <del>-</del>                     | <del>-</del>                              |  |



### **South Africa**

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | Yes   | Yes 1  |  |
| Misoprostol  | Yes <sup>2</sup>                                  | Yes <sup>3</sup>   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | _                  |
| Specialized abortion care public facilities       | <del>-</del>     | _                  |
| Private health-care centres or clinics            | <del>-</del>     | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | _                  |
| Other settings or facilities                      | _                | _                  |

| Health care personnel allowed to provide legal abortions |     |   |
|--|-----|---|
| Doctors (speciality not specified)                       | Yes |   |
| Specialist doctor, including OB/GYN                      | _   |   |
| Nurse  | Yes | _ |
| Midwife/nurse-midwife                                    | Yes |   |
| Other provider(s)  | _   |   |
|  |     |   |

| Types of insurance or other coverage for abortion                  |     |
|--|-----|
| Public health coverage for induced abortion for all women          | _   |
| Public health coverage for induced abortion for<br>poor women only | _   |
| Public health coverage for abortion complications                  | _   |
| Private health coverage for induced abortion                       | Yes |
| Other type of coverage   | _   |

| Yes |
|-----|
| Yes |
| _   |
| Yes |
|     |

| Service delivery requirements for providers or facilities |                  |  |
|---|------------------|--|
| Referral linkage to a higher-level facility               | Yes              |  |
| Availability of a specialist doctor                       | _                |  |
| Minimum number of beds                                    | _                |  |
| Other facility/provider requirements                      | Yes <sup>4</sup> |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | _                 | Yes   |

#### Notes:

- With prescription only.
   For gynaecological indications.
   With prescription only.
   Any facility that meets the requirements indicated in the choice of termination of pregnancy act and is thus a designated facility.



Age limit for parental consent (years)

# Abortion laws and policies, 2017

### **South Sudan**

| LAWS ON ABORTION                                 |                                      |   |  |  |
|--|--------------------------------------|---|--|--|
| Legal grounds for induced abortion               | Currently permissible in the country | Gestational limit for each legal ground (weeks) |  |  |
| To save life                                     | Yes                                  | <del>-</del>                                    |  |  |
| To preserve health                               | No                                   | _   |  |  |
| To preserve physical health                      | No                                   | <u> </u>  |  |  |
| To preserve mental health                        | No                                   | _   |  |  |
| In cases of intellectual or cognitive disability | No                                   | _   |  |  |
| In cases of incest                               | No                                   | _   |  |  |
| In cases of rape                                 | No                                   | _   |  |  |
| In cases of foetal impairment                    | No                                   | _   |  |  |
| For economic or social reason                    | No                                   | _   |  |  |
| On request                                       | No                                   | _   |  |  |
| For other reason(s)                              | _                                    | _   |  |  |

|       |     | Persons who can be criminally cha | arged for | an illegal abortion                |     |
|-------|-----|-----------------------------------|-----------|------------------------------------|-----|
| Woman | Yes | Provider                          | Yes       | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |     |  |     |  |
|--|-----|--|-----|--|
| Authorizations required                      |     | Consent required                             |     |  |
| Authorization of health care professional(s) | Yes | Spousal consent                              | Yes |  |
| Number of authorizations                     | _   | Parental consent for minors                  | Yes |  |
| Cadre of health care professional            |     | Consent by another adult                     | _   |  |
| Doctor (specialty not specified)             | _   |  |     |  |
| Specialist doctor, including OB/GYN          | _   | Other requirements                           |     |  |
| Nurse  | _   | Gestational age limits                       | _   |  |
| Midwife/nurse-midwife                        | _   | Compulsory counselling                       | _   |  |
| Other providers                              | _   | Compulsory waiting period                    | _   |  |
| Authorized in specially licensed facilities  | Yes | Length of waiting period (days)              | _   |  |
| Judicial authorization                       |     | Mandatory screening test                     |     |  |
| For minors                                   | _   | HIV test                                     | _   |  |
| In case of rape                              | _   | Other STI test(s)                            | _   |  |
| Police report in case of rape                | _   | Ultrasound viewing or listening to heartbeat | _   |  |

|                                       | Sex-selective a | bortion                                       |
|---------------------------------------|-----------------|---|
| Prohibition of sex-selective abortion | Yes             | Restrictions on the methods to detect the sex |

Age limit for judicial consent (years)

Age when a woman can obtain an abortion without parental or judicial consent

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | <del>-</del>                     | _   |  |
| Dilatation and evacuation             | <del>-</del>                     | _   |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | _   |  |
| Misoprostol only                      | _                                | _   |  |
| Other method(s)                       | <del>-</del>                     | <del>-</del>                              |  |



### **South Sudan**

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |  |
| Misoprostol  | No  | _  |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | _                  |
| Specialized abortion care public facilities       | <del>-</del>     | _                  |
| Private health-care centres or clinics            | <del>-</del>     | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | _                  |
| Other settings or facilities                      | _                | _                  |

| Health care personnel allowed to provide legal abortions |   |  |
|--|---|--|
| Doctors (speciality not specified)                       | _ |  |
| Specialist doctor, including OB/GYN                      | _ |  |
| Nurse  | _ |  |
| Midwife/nurse-midwife                                    | _ |  |
| Other provider(s)  | _ |  |
|  |   |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| I | nformation and guidelines on abortion services                             |  |
|---|--|--|
|   | National guidelines on clinical and service delivery of induced abortion   |  |
|   | National guidelines on clinical and service delivery of post-abortion care |  |
|   | Restrictions on public information on legal abortion services              |  |
|   | Counselling for contraceptive methods during post-abortion care            |  |

| Service delivery requirements for providers or facilities |   |  |
|---|---|--|
| Referral linkage to a higher-level facility               | _ |  |
| Availability of a specialist doctor                       | _ |  |
| Minimum number of beds                                    | _ |  |
| Other facility/provider requirements                      | _ |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | _                 | _   |

Indicates that data are not available, not applicable or not specified



## **Spain**

| LAWS ON ABORTION 1                               |                                      |   |  |
|--|--------------------------------------|---|--|
| Legal grounds for induced abortion <sup>2</sup>  | Currently permissible in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                  | 22  |  |
| To preserve health                               | Yes                                  | 22  |  |
| To preserve physical health                      | <del>-</del>                         | <del>-</del>                                    |  |
| To preserve mental health                        | _                                    | <del>-</del>                                    |  |
| In cases of intellectual or cognitive disability | <del>-</del>                         | <del>-</del>                                    |  |
| In cases of incest                               | <del>-</del>                         | _   |  |
| In cases of rape                                 | <del>-</del>                         | _   |  |
| In cases of foetal impairment                    | Yes                                  | No limit  |  |
| For economic or social reason                    | <del>-</del>                         | _   |  |
| On request                                       | Yes                                  | 14  |  |
| For other reason(s)                              | _                                    | _   |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |   |
|---|-----|----------|-----|------------------------------------|---|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | _ |

|  | REQUIREMENTS FOR | INDUCED ABORTION      |
|--|------------------|-----------------------|
| Authorizations required                      |                  | Consent required      |
| Authorization of health care professional(s) | Yes              | Spousal consent       |
| Number of authorizations                     | 3                | Parental consent for  |
| Cadre of health care professional            |                  | Consent by another    |
| Doctor (specialty not specified)             | _                |                       |
| Specialist doctor, including OB/GYN          | Yes              | Other requirements    |
| Nurse  | _                | Gestational age limit |
| Midwife/nurse-midwife                        | _                | Compulsory counsel    |
| Other providers                              | _                | Compulsory waiting    |
| Authorized in specially licensed facilities  | Yes              | Length of waitin      |
| Judicial authorization                       |                  | Mandatory screening   |
| For minors                                   | _                | HIV test              |
| In case of rape                              | _                | Other STI test(s      |
| Police report in case of rape                | _                | Ultrasound viewing of |
|  |                  |                       |

| Parental consent for minors                  | Yes |  |
|--|-----|--|
| Consent by another adult                     | Yes |  |
|  |     |  |
| Other requirements                           |     |  |
| Gestational age limits                       | Yes |  |
| Compulsory counselling                       | Yes |  |
| Compulsory waiting period                    | Yes |  |
| Length of waiting period (days)              | 3 5 |  |
| Mandatory screening test                     |     |  |
| HIV test                                     | _   |  |
| Other STI test(s)                            | _   |  |
| Ultrasound viewing or listening to heartbeat | _   |  |

| Age when a woman can obtain an abortion without parental or judicial consent |    |  |   |  |
|--|----|--|---|--|
| Age limit for parental consent (years)                                       | 16 | Age limit for judicial consent (years) | _ |  |

|                                       | Sex-selective abortion                                      |
|---------------------------------------|---|
| Prohibition of sex-selective abortion | Restrictions on the methods to detect the sex of the foetus |

| ACCESS TO ABORTION SERVICES           |                                  |   |
|---------------------------------------|----------------------------------|---|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |
| Vacuum aspiration                     | _                                | _   |
| Dilatation and evacuation             | <del>-</del>                     | _   |
| Combination mifepristone- misoprostol | <del>-</del>                     | _   |
| Misoprostol only                      | _                                | _   |
| Other method(s)                       | <del>-</del>                     | _   |



### **Spain**

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | Yes   | _  |  |
| Misoprostol  | Yes <sup>6</sup>                                  | No   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | Yes              | _                  |
| Secondary (district-level) health-care facilities | _                | _                  |
| Specialized abortion care public facilities       | _                | _                  |
| Private health-care centres or clinics            | Yes              | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | _                  |
| Other settings or facilities                      | Yes <sup>7</sup> | _                  |

| Health care personnel allowed to provide legal abortions |                  |  |
|--|------------------|--|
| Doctors (speciality not specified)                       | _                |  |
| Specialist doctor, including OB/GYN                      | Yes              |  |
| Nurse  | _                |  |
| Midwife/nurse-midwife                                    | _                |  |
| Other provider(s)  | Yes <sup>8</sup> |  |
|  |                  |  |

| Types of insurance or other coverage for abortion                  |     |
|--|-----|
| Public health coverage for induced abortion for all women          | Yes |
| Public health coverage for induced abortion for<br>poor women only | No  |
| Public health coverage for abortion complications                  | _   |
| Private health coverage for induced abortion                       | _   |
| Other type of coverage   | _   |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | Yes |
| National guidelines on clinical and service delivery of post-abortion care | Yes |
| Restrictions on public information on legal abortion services              | _   |
| Counselling for contraceptive methods during<br>post-abortion care         | _   |

| Service delivery requirements for providers or facilities |     |  |
|---|-----|--|
| Referral linkage to a higher-level facility               | _   |  |
| Availability of a specialist doctor                       | Yes |  |
| Minimum number of beds                                    | _   |  |
| Other facility/provider requirements                      | _   |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | Yes <sup>9</sup>  | _   |

#### Notes:

- Indicates that data are not available, not applicable or not specified.

- Invariates that are into a variable, not applicable to not specialist.

  1. Varies by jurisdiction.
  2. The limit of 22 weeks in case of foetal impairment applies when there is a 'risk of serious anomaly in the foetus.' There is no limit of weeks in case of foetal abnormality incompatible with life or an extremely serious and incurable disease of the foetus.

  3. Depends on indication. An authorisation by one doctor or specialist is required in case of serious risk to the life or health of the woman, except in case of emergency. Two specialists must issue an opinion in case of risk of serious anomalies in the foetus. Where foetal anomalies are found to be incompatible with life and are recorded in an opinion previously issued by a doctor or specialist or when an extremely serious and incurable disease is detected in the foetus, confirmation by a multidisciplinary Clinical Committee is required. The authorizing doctors or specialists must be different from the person undertaking the abortion procedure.

  4. The parents, tutors or guardians must be informed of the decision of the minor. In exceptional circumstances, this requirement can be walved.

  5. The mandatory waiting period begins when the woman is given advice about abortion, rights and support.

  6. Indications not specified.

  7. Abortion is to be provided in public hospitals that fulfil the legal requirements established in the Annex of the Quality of Care Guidelines or in private hospitals that, fulfilling the same requirements, obtain an authorisation from a local authority.

  8. Abortion is to be provided directly by a specialist or under their direction.

  9. Provider type not specified.



### Sri Lanka

| LAWS ON ABORTION                                 |   |   |
|--|---|---|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |
| To save life                                     | Yes                                     | No limit  |
| To preserve health                               | No                                      | <del>-</del>                                    |
| To preserve physical health                      | No                                      | <del>-</del>                                    |
| To preserve mental health                        | No                                      | <del>-</del>                                    |
| In cases of intellectual or cognitive disability | No                                      | <del>-</del>                                    |
| In cases of incest                               | No                                      | <del>-</del>                                    |
| In cases of rape                                 | No                                      | _   |
| In cases of foetal impairment                    | No                                      | <del>-</del>                                    |
| For economic or social reason                    | No                                      | _   |
| On request                                       | No                                      | <del>-</del>                                    |
| For other reason(s)                              | _                                       | _   |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |     |  |    |
|--|-----|--|----|
| Authorizations required                      |     | Consent required                             |    |
| Authorization of health care professional(s) | Yes | Spousal consent                              | No |
| Number of authorizations                     | _   | Parental consent for minors                  | _  |
| Cadre of health care professional            |     | Consent by another adult                     | _  |
| Doctor (specialty not specified)             | _   |  |    |
| Specialist doctor, including OB/GYN          | _   | Other requirements                           |    |
| Nurse  | _   | Gestational age limits                       | No |
| Midwife/nurse-midwife                        | _   | Compulsory counselling                       | _  |
| Other providers                              | _   | Compulsory waiting period                    | _  |
| Authorized in specially licensed facilities  | _   | Length of waiting period (days)              | _  |
| Judicial authorization                       |     | Mandatory screening test                     |    |
| For minors                                   | No  | HIV test                                     | _  |
| In case of rape                              | _   | Other STI test(s)                            | _  |
| Police report in case of rape                | _   | Ultrasound viewing or listening to heartbeat | _  |

| Age when a woman can obtain an abortion without parental or judicial consent |  |  |
|--|--|--|
| Age limit for parental consent (years)                                       | Age limit for judicial consent (years) |  |
|  |  |  |
|  |  |  |

|                                       | Sex-selective abortion                                      |
|---------------------------------------|---|
| Prohibition of sex-selective abortion | Restrictions on the methods to detect the sex of the foetus |

| ACCESS TO ABORTION SERVICES           |                                  |   |
|---------------------------------------|----------------------------------|---|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |
| Vacuum aspiration                     | Yes                              | _   |
| Dilatation and evacuation             | Yes                              | <del>-</del>                              |
| Combination mifepristone- misoprostol | <del>-</del>                     | _   |
| Misoprostol only                      | No                               | <del>-</del>                              |
| Other method(s)                       | <del>-</del>                     | <del>-</del>                              |



### Sri Lanka

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |
|--|---|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |
| Misoprostol  | <del>-</del>                                      | _  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | _                | Yes                |
| Secondary (district-level) health-care facilities | _                | Yes                |
| Specialized abortion care public facilities       | _                | <del>-</del>       |
| Private health-care centres or clinics            | _                | <del>-</del>       |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | _                | _                  |

| Doctors (speciality not specified) —  Specialist doctor, including OB/GYN —  Nurse — |
|--|
|  |
| Nurse —  |
|  |
| Midwife/nurse-midwife —  |
| Other provider(s)  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | Yes |
| National guidelines on clinical and service delivery of post-abortion care | Yes |
| Restrictions on public information on legal abortion services              | _   |
| Counselling for contraceptive methods during post-abortion care            | Yes |

| Service delivery requirements for providers or facilities |              |  |
|---|--------------|--|
| Referral linkage to a higher-level facility               | _            |  |
| Availability of a specialist doctor                       | <del>-</del> |  |
| Minimum number of beds                                    | _            |  |
| Other facility/provider requirements                      | _            |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | _                 | _   |

Indicates that data are not available, not applicable or not specified.



### **State of Palestine**

| LAWS ON ABORTION 1                               |   |   |  |
|--|---|---|--|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | _   |  |
| To preserve health                               | No                                      | _   |  |
| To preserve physical health                      | No                                      | <del>-</del>                                    |  |
| To preserve mental health                        | No                                      | _   |  |
| In cases of intellectual or cognitive disability | _                                       | _   |  |
| In cases of incest                               | No                                      | <del>-</del>                                    |  |
| In cases of rape                                 | No                                      | _   |  |
| In cases of foetal impairment                    | _                                       | _   |  |
| For economic or social reason                    | No                                      | _   |  |
| On request                                       | No                                      | _   |  |
| For other reason(s)                              | _                                       | _   |  |

| Persons who can be criminally charged for an illegal abortion |   |          |     |                                    |     |  |
|---|---|----------|-----|------------------------------------|-----|--|
| Woman   | _ | Provider | Yes | Other person who assists the woman | Yes |  |

| REQUIREMENTS FOR INDUCED ABORTION            |     |  |     |
|--|-----|--|-----|
| Authorizations required                      |     | Consent required                             |     |
| Authorization of health care professional(s) | Yes | Spousal consent                              | Yes |
| Number of authorizations                     | _   | Parental consent for minors                  | Yes |
| Cadre of health care professional            |     | Consent by another adult                     | _   |
| Doctor (specialty not specified)             | _   |  |     |
| Specialist doctor, including OB/GYN          | _   | Other requirements                           |     |
| Nurse  | _   | Gestational age limits                       | Yes |
| Midwife/nurse-midwife                        | _   | Compulsory counselling                       | Yes |
| Other providers                              | _   | Compulsory waiting period                    | _   |
| Authorized in specially licensed facilities  | Yes | Length of waiting period (days)              | _   |
| Judicial authorization                       |     | Mandatory screening test                     |     |
| For minors                                   | Yes | HIV test                                     | _   |
| In case of rape                              | _   | Other STI test(s)                            | _   |
| Police report in case of rape                | _   | Ultrasound viewing or listening to heartbeat | _   |

| Ago when a wellian our obtain an abortion without parental or judicial consent |               |  |   |  |
|--|---------------|--|---|--|
| Age limit for parental consent (years)   | _             | Age limit for judicial consent (years) | _ |  |
|  |               |  |   |  |
|  | Sex-selective | abortion                               |   |  |

| Prohibition of sex-selective abortion | Yes | Restrictions on the methods to detect the sex of the foetus |  |
|---------------------------------------|-----|---|--|
|                                       |     |   |  |
| 100700 TO 100771011070                |     |   |  |

| ACCESS TO ABORTION SERVICES           |                                  |   |
|---------------------------------------|----------------------------------|---|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |
| Vacuum aspiration                     | _                                | _   |
| Dilatation and evacuation             | <del>-</del>                     | <del>-</del>                              |
| Combination mifepristone- misoprostol | <del>-</del>                     | <del>-</del>                              |
| Misoprostol only                      | _                                | _   |
| Other method(s)                       | _                                | _   |



### **State of Palestine**

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | _   | _  |  |
| Misoprostol  | <del>-</del>                                      | <del>-</del>   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>_</del>     | <del>_</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | _                  |
| Specialized abortion care public facilities       | <del>-</del>     | _                  |
| Private health-care centres or clinics            | <del>-</del>     | <del>-</del>       |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | _                | _                  |

| Health care personnel allowed to provide legal abortions |   |
|--|---|
| Doctors (speciality not specified)                       | _ |
| Specialist doctor, including OB/GYN                      | _ |
| Nurse  | _ |
| Midwife/nurse-midwife                                    | _ |
| Other provider(s)  | _ |
|  |   |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

|   | Information and guidelines on abortion services                            |   |  |
|---|--|---|--|
| , | National guidelines on clinical and service delivery of induced abortion   | _ |  |
|   | National guidelines on clinical and service delivery of post-abortion care | _ |  |
|   | Restrictions on public information on legal abortion services              | _ |  |
|   | Counselling for contraceptive methods during<br>post-abortion care         | _ |  |

| Service delivery requirements for providers or facilities |   |  |
|---|---|--|
| Referral linkage to a higher-level facility               | _ |  |
| Availability of a specialist doctor                       | _ |  |
| Minimum number of beds                                    | _ |  |
| Other facility/provider requirements                      | _ |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to<br>alternative provider or facility |
|--|-------------------|--|
| Health-care facilities   | _                 | _  |
| Health-care providers  | _                 | _  |

#### Notes:

- Indicates that data are not available, not applicable or not specified
- 1. Varies by jurisdiction.



### Sudan

| LAWS ON ABORTION                                 |   |   |  |
|--|---|---|--|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | No limit  |  |
| To preserve health                               | No                                      | _   |  |
| To preserve physical health                      | No                                      | <del>-</del>                                    |  |
| To preserve mental health                        | No                                      | _   |  |
| In cases of intellectual or cognitive disability | No                                      | _   |  |
| In cases of incest                               | No                                      | _   |  |
| In cases of rape                                 | Yes                                     | 13  |  |
| In cases of foetal impairment                    | No                                      | _   |  |
| For economic or social reason                    | No                                      | _   |  |
| On request                                       | No                                      | _   |  |
| For other reason(s)                              | _                                       | _   |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |              |  |  |
|--|--------------|--|--|
| Authorizations required                      |              | Consent required                             |  |
| Authorization of health care professional(s) | <del>-</del> | Spousal consent                              |  |
| Number of authorizations                     | _            | Parental consent for minors                  |  |
| Cadre of health care professional            |              | Consent by another adult                     |  |
| Doctor (specialty not specified)             | _            |  |  |
| Specialist doctor, including OB/GYN          | _            | Other requirements                           |  |
| Nurse  | _            | Gestational age limits                       |  |
| Midwife/nurse-midwife                        | _            | Compulsory counselling                       |  |
| Other providers                              | _            | Compulsory waiting period                    |  |
| Authorized in specially licensed facilities  | _            | Length of waiting period (days)              |  |
| Judicial authorization                       |              | Mandatory screening test                     |  |
| For minors                                   | _            | HIV test                                     |  |
| In case of rape                              | _            | Other STI test(s)                            |  |
| Police report in case of rape                | _            | Ultrasound viewing or listening to heartbeat |  |

| Age when a woman can obtain an abortion without parental or judicial consent |  |              |  |
|--|--|--------------|--|
| Age limit for parental consent (years)                                       | <ul> <li>Age limit for judicial consent (years)</li> </ul> | <del>-</del> |  |
|  |  |              |  |

Yes

|                                       | Sex-selective abortion                                      |
|---------------------------------------|---|
| Prohibition of sex-selective abortion | Restrictions on the methods to detect the sex of the foetus |

| ACCESS TO ABORTION SERVICES           |                                  |   |  |  |
|---------------------------------------|----------------------------------|---|--|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |  |
| Vacuum aspiration                     | _                                | _   |  |  |
| Dilatation and evacuation             | <del>-</del>                     | _   |  |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | _   |  |  |
| Misoprostol only                      | _                                | _   |  |  |
| Other method(s)                       | <del>-</del>                     | _   |  |  |



### Sudan

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |  |
| Misoprostol  | No  | _  |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | _                  |
| Specialized abortion care public facilities       | <del>-</del>     | _                  |
| Private health-care centres or clinics            | <del>-</del>     | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | _                  |
| Other settings or facilities                      | _                | _                  |

| lealth care personnel allowed to provide legal abortio | ns |
|--|----|
| Doctors (speciality not specified)                     | _  |
| Specialist doctor, including OB/GYN                    | _  |
| Nurse  | _  |
| Midwife/nurse-midwife                                  | _  |
| Other provider(s)                                      | _  |
|  |    |
| Information and guidelines on abortion services        |    |
| National guidelines on clinical and service            | _  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Inform | ation and guidelines on abortion services                                  |   |
|--------|--|---|
|        | ational guidelines on clinical and service<br>elivery of induced abortion  | _ |
|        | ational guidelines on clinical and service<br>livery of post-abortion care | _ |
|        | estrictions on public information on legal ortion services                 | _ |
|        | ounselling for contraceptive methods during strabortion care               | _ |

| Service delivery requirements for providers or facilities |   |  |
|---|---|--|
| Referral linkage to a higher-level facility               | _ |  |
| Availability of a specialist doctor                       | _ |  |
| Minimum number of beds                                    | _ |  |
| Other facility/provider requirements                      | _ |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to<br>alternative provider or facility |
|--|-------------------|--|
| Health-care facilities   | _                 | _  |
| Health-care providers  | _                 | _  |

#### Notes:

- Indicates that data are not available, not applicable or not specified
- 1. Abortion is permitted for therapeutic purposes. The circumstances under which abortions are permitted within 90 days of conception have been temporarily expanded to include rape.



Prohibition of sex-selective abortion

# Abortion laws and policies, 2017

### **Suriname**

| LAWS ON ABORTION                                 |   |   |
|--|---|---|
| Legal grounds for induced abortion               | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |
| To save life                                     | Yes                                     | <del>-</del>                                    |
| To preserve health                               | No                                      | _   |
| To preserve physical health                      | No                                      | <del>_</del>                                    |
| To preserve mental health                        | No                                      | _   |
| In cases of intellectual or cognitive disability | No                                      | <del>-</del>                                    |
| In cases of incest                               | No                                      | _   |
| In cases of rape                                 | No                                      | <del>-</del>                                    |
| In cases of foetal impairment                    | No                                      | <del>-</del>                                    |
| For economic or social reason                    | No                                      | <del>-</del>                                    |
| On request                                       | No                                      | <del>-</del>                                    |
| For other reason(s)                              | _                                       | _   |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |   |  |   |
|--|---|--|---|
| Authorizations required                      |   | Consent required                             |   |
| Authorization of health care professional(s) | _ | Spousal consent                              | _ |
| Number of authorizations                     | _ | Parental consent for minors                  | _ |
| Cadre of health care professional            |   | Consent by another adult                     | _ |
| Doctor (specialty not specified)             | _ |  |   |
| Specialist doctor, including OB/GYN          | _ | Other requirements                           |   |
| Nurse  | _ | Gestational age limits                       | _ |
| Midwife/nurse-midwife                        | _ | Compulsory counselling                       | _ |
| Other providers                              | _ | Compulsory waiting period                    | _ |
| Authorized in specially licensed facilities  | _ | Length of waiting period (days)              | _ |
| Judicial authorization                       |   | Mandatory screening test                     |   |
| For minors                                   | _ | HIV test                                     | _ |
| In case of rape                              | _ | Other STI test(s)                            | _ |
| Police report in case of rape                | _ | Ultrasound viewing or listening to heartbeat | _ |

| Age limit for parental consent (years) | <ul><li>Age limit for judicial consent (years)</li></ul> |
|--|--|
|  |  |
|  | Sex-selective abortion                                   |
| Prohibition of say coloctive abortion  | Restrictions on the methods to detect the sex            |

Age when a woman can obtain an abortion without parental or judicial consent

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | _                                | <del>-</del>                              |  |
| Dilatation and evacuation             | _                                | <del>-</del>                              |  |
| Combination mifepristone- misoprostol | _                                | <del>-</del>                              |  |
| Misoprostol only                      | _                                | <del>-</del>                              |  |
| Other method(s)                       | _                                | <del>-</del>                              |  |



### **Suriname**

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | Yes   | _  |  |
| Misoprostol  | Yes <sup>2</sup>                                  | <del>-</del>   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | _                | <del>-</del>       |
| Specialized abortion care public facilities       | <del>-</del>     | <del>-</del>       |
| Private health-care centres or clinics            | <del>-</del>     | <del>-</del>       |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | _                | _                  |

| Health care personnel allowed to provide legal abortions |                                       |  |
|--|---------------------------------------|--|
| [  | Doctors (speciality not specified) —  |  |
| 9  | Specialist doctor, including OB/GYN — |  |
| 1  | Nurse —                               |  |
| ľ  | Midwife/nurse-midwife                 |  |
| (  | Other provider(s)                     |  |
| (  | Other provider(s)                     |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Info | rmation and guidelines on abortion services                                |
|------|--|
|      | National guidelines on clinical and service delivery of induced abortion   |
|      | National guidelines on clinical and service delivery of post-abortion care |
|      | Restrictions on public information on legal abortion services              |
|      | Counselling for contraceptive methods during post-abortion care            |

| Service delivery requirements for providers or facilities |              |  |  |
|---|--------------|--|--|
| Referral linkage to a higher-level facility               | _            |  |  |
| Availability of a specialist doctor                       | <del>-</del> |  |  |
| Minimum number of beds                                    | _            |  |  |
| Other facility/provider requirements                      | _            |  |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | _                 | _   |

#### Notes:

- Indicates that data are not available, not applicable or not specified.
- 1. Abortion is generally Illegal in the country. However, under the general criminal law principles of necessity, it is allowed to be performed to save the life of the pregnant woman.
  2. For gynaecological indications.



### Sweden

|  | LAWS ON ABORTION                        |   |
|--|---|---|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |
| To save life                                     | Yes                                     | No limit  |
| To preserve health                               | Yes                                     | No limit  |
| To preserve physical health                      | Yes                                     | <del>_</del>                                    |
| To preserve mental health                        | Yes                                     | _   |
| In cases of intellectual or cognitive disability | <del>-</del>                            | _   |
| In cases of incest                               | <del>-</del>                            | _   |
| In cases of rape                                 | <del>-</del>                            | _   |
| In cases of foetal impairment                    | <del>-</del>                            | _   |
| For economic or social reason                    | _                                       | _   |
| On request                                       | Yes                                     | 18  |
| For other reason(s)                              | _                                       | _   |

| Persons who can be criminally charged for an illegal abortion |   |          |     |                                    |   |  |
|---|---|----------|-----|------------------------------------|---|--|
| Woman   | _ | Provider | Yes | Other person who assists the woman | _ |  |

| REQUIREMENTS FOR INDUCED ABORTION            |              |                                 |
|--|--------------|---------------------------------|
| Authorizations required                      |              | Consent required                |
| Authorization of health care professional(s) | Yes          | Spousal consent                 |
| Number of authorizations                     | 2            | Parental consent for minors     |
| Cadre of health care professional            |              | Consent by another adult        |
| Doctor (specialty not specified)             | _            |                                 |
| Specialist doctor, including OB/GYN          | <del>-</del> | Other requirements              |
| Nurse  | _            | Gestational age limits          |
| Midwife/nurse-midwife                        | _            | Compulsory counselling          |
| Other providers                              | _            | Compulsory waiting period       |
| Authorized in specially licensed facilities  | Yes          | Length of waiting period        |
| Judicial authorization                       |              | Mandatory screening test        |
| For minors                                   | No           | HIV test                        |
| In case of rape                              | _            | Other STI test(s)               |
| Police report in case of rape                | _            | Ultrasound viewing or listening |
|  |              |                                 |

| Consent by another adult                     | _   |  |
|--|-----|--|
| Other requirements                           |     |  |
| Gestational age limits                       | Yes |  |
| Compulsory counselling                       | No  |  |
| Compulsory waiting period                    | No  |  |
| Length of waiting period (days)              | _   |  |
| Mandatory screening test                     |     |  |
| HIV test                                     | _   |  |
| Other STI test(s)                            | _   |  |
| Ultrasound viewing or listening to heartbeat | _   |  |

No

| Age when a woman can obtain an abortion without parental or judicial consent |  |   |  |  |  |
|--|--|---|--|--|--|
| Age limit for parental consent (years)                                       | <ul> <li>Age limit for judicial consent (years)</li> </ul> | _ |  |  |  |

|                                       | Sex-selective abortion |   |
|---------------------------------------|------------------------|---|
| Prohibition of sex-selective abortion | No                     | Restrictions on the methods to detect the sex of the foetus |

| ACCESS TO ABORTION SERVICES           |                                  |   |  |  |
|---------------------------------------|----------------------------------|---|--|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |  |
| Vacuum aspiration                     | <del>-</del>                     | <del>-</del>                              |  |  |
| Dilatation and evacuation             | <del>-</del>                     | _   |  |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | <del>-</del>                              |  |  |
| Misoprostol only                      | <del>-</del>                     | _   |  |  |
| Other method(s)                       | <del>-</del>                     | _   |  |  |



### **Sweden**

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | Yes   | _  |  |
| Misoprostol  | Yes <sup>3</sup>                                  | <del>-</del>   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | _                | _                  |
| Secondary (district-level) health-care facilities | Yes              | _                  |
| Specialized abortion care public facilities       | Yes              | _                  |
| Private health-care centres or clinics            | _                | <del>-</del>       |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | _                | _                  |

| lealth care personnel allowed to provide legal abortions |     |  |
|--|-----|--|
| Doctors (speciality not specified)                       | Yes |  |
| Specialist doctor, including OB/GYN                      | _   |  |
| Nurse  | _   |  |
| Midwife/nurse-midwife                                    | _   |  |
| Other provider(s)  | _   |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | _   |
| National guidelines on clinical and service delivery of post-abortion care | _   |
| Restrictions on public information on legal abortion services              | _   |
| Counselling for contraceptive methods during post-abortion care            | Yes |
|  |     |

| Service delivery requirements for providers or facilities |              |  |
|---|--------------|--|
| Referral linkage to a higher-level facility               | _            |  |
| Availability of a specialist doctor                       | <del>-</del> |  |
| Minimum number of beds                                    | _            |  |
| Other facility/provider requirements                      | _            |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | _                 | _   |

### Notes:

- 1. An abortion may not be procured after eighteenth week of pregnancy without permission by the National Board of Health and Welfare. Such permission may only be granted if there are special reasons for the abortion. Permission may not be granted if there is reason to suppose that the embryo is viable.

  2. National Board of Health and Welfare.

  3. Indications not specified.



Prohibition of sex-selective abortion

Other method(s)

# Abortion laws and policies, 2017

### **Switzerland**

| LAWS ON ABORTION 1                               |   |   |  |
|--|---|---|--|
| Legal grounds for induced abortion <sup>2</sup>  | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | No limit  |  |
| To preserve health                               | Yes                                     | No limit  |  |
| To preserve physical health                      | Yes                                     | No limit  |  |
| To preserve mental health                        | Yes                                     | No limit  |  |
| In cases of intellectual or cognitive disability | <del>-</del>                            | <del>-</del>                                    |  |
| In cases of incest                               | <del>-</del>                            | <del>-</del>                                    |  |
| In cases of rape                                 | <del>-</del>                            | <del>-</del>                                    |  |
| In cases of foetal impairment                    | <del>-</del>                            | <del>-</del>                                    |  |
| For economic or social reason                    | _                                       | <del>-</del>                                    |  |
| On request                                       | Yes                                     | 12  |  |
| For other reason(s)                              | _                                       | _   |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |  |
|---|-----|----------|-----|------------------------------------|-----|--|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |  |

| Authorizations required                      |     | Consent required                             |     |
|--|-----|--|-----|
| Authorization of health care professional(s) | Yes | Spousal consent                              | No  |
| Number of authorizations                     | 1   | Parental consent for minors                  | No  |
| Cadre of health care professional            |     | Consent by another adult                     | _   |
| Doctor (specialty not specified)             | Yes |  |     |
| Specialist doctor, including OB/GYN          | _   | Other requirements                           |     |
| Nurse  | _   | Gestational age limits                       | Yes |
| Midwife/nurse-midwife                        | _   | Compulsory counselling                       | _   |
| Other providers                              | _   | Compulsory waiting period                    | _   |
| Authorized in specially licensed facilities  | Yes | Length of waiting period (days)              | _   |
| Judicial authorization                       |     | Mandatory screening test                     |     |
| For minors                                   | No  | HIV test                                     | _   |
| In case of rape                              | _   | Other STI test(s)                            | _   |
| Police report in case of rape                | _   | Ultrasound viewing or listening to heartbeat | _   |

| Age when a woman can obtain an abortion without parental or judicial consent |   |  |   |
|--|---|--|---|
| Age limit for parental consent (years)                                       | _ | Age limit for judicial consent (years) | _ |
|  |   |  |   |
| Say coloctive shortien   |   |  |   |

Restrictions on the methods to detect the sex

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | _                                | _   |  |
| Dilatation and evacuation             | <del>-</del>                     | <del>_</del>                              |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | _   |  |
| Misoprostol only                      | _                                | <del>-</del>                              |  |



### **Switzerland**

| ACCESS TO AE   |   |  |
|--|---|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |
| Mifepristone and/or combination mifepristone-misoprostol | Yes   | No   |
| Misoprostol  | Yes <sup>3</sup>                                  | No   |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | _                  |
| Specialized abortion care public facilities       | <del>-</del>     | _                  |
| Private health-care centres or clinics            | <del>-</del>     | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | _                  |
| Other settings or facilities                      | _                | _                  |

| Health care personnel allowed to provide legal abortions |     |  |
|--|-----|--|
| Doctors (speciality not specified)                       | Yes |  |
| Specialist doctor, including OB/GYN                      | _   |  |
| Nurse  | _   |  |
| Midwife/nurse-midwife                                    | _   |  |
| Other provider(s)  | _   |  |

| Types of insurance or other coverage for abortion                  |     |  |
|--|-----|--|
| Public health coverage for induced abortion for all women          | Yes |  |
| Public health coverage for induced abortion for<br>poor women only | No  |  |
| Public health coverage for abortion complications                  | _   |  |
| Private health coverage for induced abortion                       | _   |  |
| Other type of coverage   | _   |  |

| Information and guidelines on abortion services                            |   |  |
|--|---|--|
| National guidelines on clinical and service delivery of induced abortion   | _ |  |
| National guidelines on clinical and service delivery of post-abortion care | _ |  |
| Restrictions on public information on legal abortion services              | _ |  |
| Counselling for contraceptive methods during post-abortion care            | _ |  |

| Service delivery requirements for providers or facilities |   |  |
|---|---|--|
| Referral linkage to a higher-level facility               | _ |  |
| Availability of a specialist doctor                       | _ |  |
| Minimum number of beds                                    | _ |  |
| Other facility/provider requirements                      | _ |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to<br>alternative provider or facility |
|--|-------------------|--|
| Health-care facilities   | _                 | _  |
| Health-care providers  | _                 | _  |

#### Notes:

- 1. Varies by jurisdiction.
  2. An abortion can be performed when a woman is in a state of extreme distress. Abortion in cases where the woman alleges she is in distress may be provided in the twelve weeks since the start of the last period.
  3. For gynaecological indications.



## **Syrian Arab Republic**

| LAWS ON ABORTION 1                               |   |   |  |  |
|--|---|---|--|--|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |  |
| To save life                                     | Yes                                     | No limit  |  |  |
| To preserve health                               | No                                      | _   |  |  |
| To preserve physical health                      | No                                      | <del>-</del>                                    |  |  |
| To preserve mental health                        | No                                      | <del>-</del>                                    |  |  |
| In cases of intellectual or cognitive disability | No                                      | _   |  |  |
| In cases of incest                               | No                                      | <del>-</del>                                    |  |  |
| In cases of rape                                 | No                                      | _   |  |  |
| In cases of foetal impairment                    | No                                      | _   |  |  |
| For economic or social reason                    | No                                      | _   |  |  |
| On request                                       | No                                      | _   |  |  |
| For other reason(s)                              | _                                       | _   |  |  |

|       |     | Persons who can be criminally cha | arged for | an illegal abortion                |     |
|-------|-----|-----------------------------------|-----------|------------------------------------|-----|
| Woman | Yes | Provider                          | Yes       | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |                |  |     |  |
|--|----------------|--|-----|--|
| Authorizations required                      |                | Consent required                             |     |  |
| Authorization of health care professional(s) | Yes            | Spousal consent                              | Yes |  |
| Number of authorizations                     | 2 <sup>2</sup> | Parental consent for minors                  | Yes |  |
| Cadre of health care professional            |                | Consent by another adult                     | Yes |  |
| Doctor (specialty not specified)             | Yes            |  |     |  |
| Specialist doctor, including OB/GYN          | _              | Other requirements                           |     |  |
| Nurse  | _              | Gestational age limits                       | _   |  |
| Midwife/nurse-midwife                        | _              | Compulsory counselling                       | _   |  |
| Other providers                              | _              | Compulsory waiting period                    | _   |  |
| Authorized in specially licensed facilities  | Yes            | Length of waiting period (days)              | _   |  |
| Judicial authorization                       |                | Mandatory screening test                     |     |  |
| For minors                                   | Yes            | HIV test                                     | _   |  |
| In case of rape                              | _              | Other STI test(s)                            | _   |  |
| Police report in case of rape                | _              | Ultrasound viewing or listening to heartbeat | _   |  |

| Ago when a woman out obtain an abort |  | obtain an abortion without parental or judicial consent |  |
|--------------------------------------|--|---|--|
|                                      | Age limit for parental consent (years) | Age limit for judicial consent (years)                  |  |
|                                      |  |   |  |
|                                      |  |   |  |

|                                       | Sex-selective abortion |   |
|---------------------------------------|------------------------|---|
| Prohibition of sex-selective abortion | Yes                    | Restrictions on the methods to detect the sex of the foetus |

| ACCESS TO ABORTION SERVICES           |                                  |   |  |  |
|---------------------------------------|----------------------------------|---|--|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |  |
| Vacuum aspiration                     | _                                | <del>-</del>                              |  |  |
| Dilatation and evacuation             | <del>-</del>                     | <del>-</del>                              |  |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | <del>-</del>                              |  |  |
| Misoprostol only                      | _                                | <del>-</del>                              |  |  |
| Other method(s)                       | _                                | _   |  |  |



## **Syrian Arab Republic**

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |  |
|--|---|--|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |  |  |
| Misoprostol  | Yes <sup>3</sup>                                  | <del>-</del>   |  |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | _                | <del>-</del>       |
| Specialized abortion care public facilities       | _                | _                  |
| Private health-care centres or clinics            | _                | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | _                | <del>-</del>       |

| Doctors (speciality not specified)  | Yes |
|-------------------------------------|-----|
| Specialist doctor, including OB/GYN | Yes |
| Nurse                               | _   |
| Midwife/nurse-midwife               | _   |
| Other provider(s)                   | _   |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | _   |
| National guidelines on clinical and service delivery of post-abortion care | _   |
| Restrictions on public information on legal abortion services              | Yes |
| Counselling for contraceptive methods during<br>post-abortion care         | _   |

| Service delivery requirements for providers or t | facilities   |
|--|--------------|
| Referral linkage to a higher-level facility      | _            |
| Availability of a specialist doctor              | <del>-</del> |
| Minimum number of beds                           | _            |
| Other facility/provider requirements             | _            |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | _                 | _   |

#### Notes:

- 1. Varies by jurisdiction.
  2. The law on the exercise of health professions allows an abortion to be performed by a medical specialist when continuation of the pregnancy poses a danger to the life of the woman. In this case, the performance of the abortion must also be approved by another physician. Before the operation, a record must be drawn up certifying the necessity of the abortion; and the record must be signed by the two physicians and the patient or her spouse or guardian.
  3. For gynaecological indications.



## **Tajikistan**

| LAWS ON ABORTION                                 |   |   |  |
|--|---|---|--|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | _   |  |
| To preserve health                               | Yes                                     | _   |  |
| To preserve physical health                      | Yes                                     | _   |  |
| To preserve mental health                        | Yes                                     | _   |  |
| In cases of intellectual or cognitive disability | _                                       | _   |  |
| In cases of incest                               | <del>-</del>                            | <del>-</del>                                    |  |
| In cases of rape                                 | Yes                                     | _   |  |
| In cases of foetal impairment                    | _                                       | _   |  |
| For economic or social reason                    | Yes                                     | _   |  |
| On request                                       | Yes                                     | _   |  |
| For other reason(s)                              | _                                       | _   |  |

| Persons who can be criminally charged for an illegal abortion |   |          |     |                                    |     |  |
|---|---|----------|-----|------------------------------------|-----|--|
| Woman   | _ | Provider | Yes | Other person who assists the woman | Yes |  |

| REQUIREMENTS FOR INDUCED ABORTION            |  |     |  |
|--|--|-----|--|
| Authorizations required                      | Consent required                             |     |  |
| Authorization of health care professional(s) | Spousal consent                              | _   |  |
| Number of authorizations                     | — Parental consent for minors                | Yes |  |
| Cadre of health care professional            | Consent by another adult                     | Yes |  |
| Doctor (specialty not specified)             | _  |     |  |
| Specialist doctor, including OB/GYN          | Other requirements                           |     |  |
| Nurse  | — Gestational age limits                     | _   |  |
| Midwife/nurse-midwife                        | Compulsory counselling                       | _   |  |
| Other providers                              | Compulsory waiting period                    | _   |  |
| Authorized in specially licensed facilities  | Length of waiting period (days)              | _   |  |
| Judicial authorization                       | Mandatory screening test                     |     |  |
| For minors                                   | — HIV test                                   | _   |  |
| In case of rape                              | — Other STI test(s)                          | _   |  |
| Police report in case of rape                | Ultrasound viewing or listening to heartbeat | _   |  |

| Age when a woman can obtain an abortion without parental or judicial consent |   |  |   |
|--|---|--|---|
| Age limit for parental consent (years)                                       | _ | Age limit for judicial consent (years) | _ |
|  |   |  |   |
|  |   |  |   |

|                                       | Sex-selective abortio | on.   |
|---------------------------------------|-----------------------|---|
| Prohibition of sex-selective abortion | Yes                   | Restrictions on the methods to detect the sex — of the foetus |
|                                       |                       |   |

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | _                                | _   |  |
| Dilatation and evacuation             | <del>-</del>                     | <del>-</del>                              |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | <del>-</del>                              |  |
| Misoprostol only                      | _                                | <del>-</del>                              |  |
| Other method(s)                       | _                                | _   |  |



## **Tajikistan**

| ACCESS TO ABORTION SERVICES (continued)   |   |   |  |  |  |
|---|---|---|--|--|--|
| Drugs for inducing abortion Included in the official list Allowed to be sold or of authorized drugs distributed by pharmacies or drug sto |   |   |  |  |  |
| Mifepristone and/or combination mifepristone-misoprostol  | _ | _ |  |  |  |
| Misoprostol   | _ | - |  |  |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | _                  |
| Specialized abortion care public facilities       | <del>-</del>     | _                  |
| Private health-care centres or clinics            | <del>-</del>     | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | _                  |
| Other settings or facilities                      | _                | _                  |

| Health care personnel allowed to provide legal abortions |              |
|--|--------------|
| Doctors (speciality not specified)                       | _            |
| Specialist doctor, including OB/GYN                      | _            |
| Nurse  | <del>-</del> |
| Midwife/nurse-midwife                                    | _            |
| Other provider(s)  | <del>-</del> |
|  |              |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |   |
|--|---|
| National guidelines on clinical and service delivery of induced abortion   | _ |
| National guidelines on clinical and service delivery of post-abortion care | _ |
| Restrictions on public information on legal abortion services              | _ |
| Counselling for contraceptive methods during post-abortion care            | _ |

| Service delivery requirements for providers or | facilities   |
|--|--------------|
| Referral linkage to a higher-level facility    | _            |
| Availability of a specialist doctor            | _            |
| Minimum number of beds                         | <del>-</del> |
| Other facility/provider requirements           | _            |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | _                 | _   |

Indicates that data are not available, not applicable or not specified.



Age limit for parental consent (years)

## Abortion laws and policies, 2017

### **Thailand**

| LAWS ON ABORTION                                 |   |   |  |  |
|--|---|---|--|--|
| Legal grounds for induced abortion               | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |  |
| To save life                                     | Yes                                     | No limit  |  |  |
| To preserve health                               | Yes                                     | No limit  |  |  |
| To preserve physical health                      | Yes                                     | No limit  |  |  |
| To preserve mental health                        | Yes                                     | No limit  |  |  |
| In cases of intellectual or cognitive disability | No                                      | _   |  |  |
| In cases of incest                               | No                                      | _   |  |  |
| In cases of rape                                 | Yes                                     | No limit  |  |  |
| In cases of foetal impairment                    | Yes                                     | No limit  |  |  |
| For economic or social reason                    | No                                      | _   |  |  |
| On request                                       | No                                      | <del>-</del>                                    |  |  |
| For other reason(s)                              | _                                       | _   |  |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| 4 1 4 1 1                                    |     |  |     |
|--|-----|--|-----|
| Authorizations required                      |     | Consent required                             |     |
| Authorization of health care professional(s) | Yes | Spousal consent                              | _   |
| Number of authorizations                     | 2   | Parental consent for minors                  | _   |
| Cadre of health care professional            |     | Consent by another adult                     | _   |
| Doctor (specialty not specified)             | Yes |  |     |
| Specialist doctor, including OB/GYN          | _   | Other requirements                           |     |
| Nurse  | _   | Gestational age limits                       | Yes |
| Midwife/nurse-midwife                        | _   | Compulsory counselling                       | _   |
| Other providers                              | _   | Compulsory waiting period                    | _   |
| Authorized in specially licensed facilities  | No  | Length of waiting period (days)              | _   |
| Judicial authorization                       |     | Mandatory screening test                     |     |
| For minors                                   | _   | HIV test                                     | _   |
| In case of rape                              | _   | Other STI test(s)                            | _   |
| Police report in case of rape                | _   | Ultrasound viewing or listening to heartbeat | _   |

|                                       | Sex-selective abortion |   |
|---------------------------------------|------------------------|---|
| Prohibition of sex-selective abortion | _                      | Restrictions on the methods to detect the sex |

Age limit for judicial consent (years)

Age when a woman can obtain an abortion without parental or judicial consent

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | Yes                              | _   |  |
| Dilatation and evacuation             | Yes                              | _   |  |
| Combination mifepristone- misoprostol | Yes                              | _   |  |
| Misoprostol only                      | Yes                              | _   |  |
| Other method(s)                       | _                                | _   |  |



### **Thailand**

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | <del>-</del>                                      | _  |  |
| Misoprostol  | No  | <del>-</del>   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | Yes              | <del>-</del>       |
| Secondary (district-level) health-care facilities | Yes              | <del>-</del>       |
| Specialized abortion care public facilities       | _                | <del>-</del>       |
| Private health-care centres or clinics            | _                | <del>-</del>       |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | _                | _                  |

| Health care personnel allowed to provide legal abortions |                  |  |
|--|------------------|--|
| Doctors (speciality not specified)                       | Yes              |  |
| Specialist doctor, including OB/GYN                      | _                |  |
| Nurse  | _                |  |
| Midwife/nurse-midwife                                    | _                |  |
| Other provider(s)  | Yes <sup>2</sup> |  |
|  |                  |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | Yes |
| National guidelines on clinical and service delivery of post-abortion care | Yes |
| Restrictions on public information on legal abortion services              | _   |
| Counselling for contraceptive methods during post-abortion care            | _   |

| Service delivery requirements for providers or | facilities       |
|--|------------------|
| Referral linkage to a higher-level facility    | _                |
| Availability of a specialist doctor            | <del>-</del>     |
| Minimum number of beds                         | <del>-</del>     |
| Other facility/provider requirements           | Yes <sup>3</sup> |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to<br>alternative provider or facility |
|--|-------------------|--|
| Health-care facilities   | _                 | _  |
| Health-care providers  | _                 | _  |

#### Notes:

- Indicates that data are not available, not applicable or not specified.
- 1. The limit of 12 weeks gestational period applies to clinics outside hospitals. There is no gestational limit set for abortions done in hospitals. The gestational limit is specific to the site where the abortion is conducted.

  2. The physician who performs the therapeutic termination of pregnancy according to this regulation shall be the medical practitioner under the law (according to the Medical Professional Act).

  3. The therapeutic termination of pregnancy must be performed in the following medical premises: (1) A government hospital or government agency that provides overnight admission service to patients, or a medical infirmary that has beds for patients for overnight stay in accordance with the Medical Premise Act, is allowed to perform therapeutic termination of pregnancy; (2) A medical clinic in accordance with the Medical Premise Act, is allowed to perform therapeutic termination of pregnancy where the gestational age is not over twelve weeks.



Age limit for parental consent (years)

# Abortion laws and policies, 2017

### **Timor-Leste**

| LAWS ON ABORTION                                 |   |   |
|--|---|---|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |
| To save life                                     | Yes                                     | _   |
| To preserve health                               | Yes                                     | _   |
| To preserve physical health                      | Yes                                     | _   |
| To preserve mental health                        | Yes                                     | _   |
| In cases of intellectual or cognitive disability | No                                      | _   |
| In cases of incest                               | No                                      | _   |
| In cases of rape                                 | No                                      | <del>-</del>                                    |
| In cases of foetal impairment                    | Yes                                     | _   |
| For economic or social reason                    | No                                      | _   |
| On request                                       | No                                      | _   |
| For other reason(s)                              | _                                       | _   |

|       |     | Persons who can be criminally charged fo | r an illegal abortion              |   |
|-------|-----|--|------------------------------------|---|
| Woman | Yes | Provider Yes                             | Other person who assists the woman | _ |

| REQUIREMENTS FOR INDUCED ABORTION            |     |  |              |  |
|--|-----|--|--------------|--|
| Authorizations required                      |     | Consent required                             |              |  |
| Authorization of health care professional(s) | Yes | Spousal consent                              | Yes          |  |
| Number of authorizations                     | 1 1 | Parental consent for minors                  | <del>_</del> |  |
| Cadre of health care professional            |     | Consent by another adult                     | <del>_</del> |  |
| Doctor (specialty not specified)             | Yes |  |              |  |
| Specialist doctor, including OB/GYN          | _   | Other requirements                           |              |  |
| Nurse  | _   | Gestational age limits                       | _            |  |
| Midwife/nurse-midwife                        | _   | Compulsory counselling                       | _            |  |
| Other providers                              | _   | Compulsory waiting period                    | _            |  |
| Authorized in specially licensed facilities  | _   | Length of waiting period (days)              | _            |  |
| Judicial authorization                       |     | Mandatory screening test                     |              |  |
| For minors                                   | _   | HIV test                                     | _            |  |
| In case of rape                              | _   | Other STI test(s)                            | _            |  |
| Police report in case of rape                | _   | Ultrasound viewing or listening to heartbeat | _            |  |

|                                       | Sex-selective abortion                   |                      |
|---------------------------------------|--|----------------------|
| Prohibition of sex-selective abortion | Restrictions on the methor of the foetus | ds to detect the sex |

Age limit for judicial consent (years)

Age when a woman can obtain an abortion without parental or judicial consent

| ACCESS TO ABORTION SERVICES           |                                  |   |  |  |
|---------------------------------------|----------------------------------|---|--|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |  |
| Vacuum aspiration                     | _                                | _   |  |  |
| Dilatation and evacuation             | <del>-</del>                     | _   |  |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | _   |  |  |
| Misoprostol only                      | _                                | _   |  |  |
| Other method(s)                       | <del>-</del>                     | _   |  |  |



### **Timor-Leste**

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |  |
|--|---|--|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |  |  |
| Misoprostol  | Yes <sup>2</sup>                                  | No   |  |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | _                | Yes                |
| Secondary (district-level) health-care facilities | _                | Yes                |
| Specialized abortion care public facilities       | _                | <del>-</del>       |
| Private health-care centres or clinics            | No               | <del>-</del>       |
| NGO health-care centres or clinics                | No               | <del>-</del>       |
| Other settings or facilities                      | _                | <del>-</del>       |

| Doctors (speciality not specified)                                       | _ |
|--|---|
| Specialist doctor, including OB/GYN                                      | _ |
| Nurse  | _ |
| Midwife/nurse-midwife  | _ |
| Other provider(s)  | _ |
| nformation and guidelines on abortion services                           |   |
| National guidelines on clinical and service delivery of induced abortion | _ |
| National guidelines on clinical and service                              |   |

Health care personnel allowed to provide legal abortions

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            | Service delivery requirements for providers or facilities |
|--|---|
| National guidelines on clinical and service delivery of induced abortion   | Referral linkage to a higher-level facility —             |
| National guidelines on clinical and service delivery of post-abortion care | Availability of a specialist doctor —                     |
| Restrictions on public information on legal abortion services              | Minimum number of beds —                                  |
| Counselling for contraceptive methods during post-abortion care Yes        | Other facility/provider requirements —                    |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to<br>alternative provider or facility |
|--|-------------------|--|
| Health-care facilities   | _                 | _  |
| Health-care providers  | _                 | _  |

#### Notes:

- 1. Abortion in specific circumstances is not punishable "as long as performed pursuant to authorization and supervision of a medical panel, professional physician or health professional in a public health institution."
  2. For gynaecological indications.



## Togo

| LAWS ON ABORTION                                 |   |   |  |
|--|---|---|--|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | _   |  |
| To preserve health                               | Yes                                     | _   |  |
| To preserve physical health                      | <del>-</del>                            | <del>-</del>                                    |  |
| To preserve mental health                        | No                                      | <del>-</del>                                    |  |
| In cases of intellectual or cognitive disability | No                                      | _   |  |
| In cases of incest                               | Yes                                     | <del>-</del>                                    |  |
| In cases of rape                                 | Yes                                     | _   |  |
| In cases of foetal impairment                    | Yes                                     | _   |  |
| For economic or social reason                    | No                                      | _   |  |
| On request                                       | No                                      | _   |  |
| For other reason(s)                              | _                                       | _   |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR                             |     | R INDUCED ABORTION    |
|--|-----|-----------------------|
| Authorizations required                      |     | Consent required      |
| Authorization of health care professional(s) | Yes | Spousal consent       |
| Number of authorizations                     | 3   | Parental consent for  |
| Cadre of health care professional            |     | Consent by another    |
| Doctor (specialty not specified)             | Yes |                       |
| Specialist doctor, including OB/GYN          | _   | Other requirements    |
| Nurse  | _   | Gestational age limit |
| Midwife/nurse-midwife                        | _   | Compulsory counsel    |
| Other providers                              | _   | Compulsory waiting    |
| Authorized in specially licensed facilities  | Yes | Length of waitin      |
| Judicial authorization                       |     | Mandatory screening   |
| For minors                                   | No  | HIV test              |
| In case of rape                              | _   | Other STI test(s      |
| Police report in case of rape                | _   | Ultrasound viewing of |

| Parental consent for minors     | No           |  |
|---------------------------------|--------------|--|
| Consent by another adult        | _            |  |
|                                 |              |  |
| Other requirements              |              |  |
| Gestational age limits          | No           |  |
| Compulsory counselling          | No           |  |
| Compulsory waiting period       | No           |  |
| Length of waiting period (days) | _            |  |
| Mandatory screening test        |              |  |
| HIV test                        | <del>_</del> |  |
| Other STI test(s)               | _            |  |

Ultrasound viewing or listening to heartbeat

No

| Age when a woman can obtain an abortion without parental or judicial consent |   |  |   |
|--|---|--|---|
| Age limit for parental consent (years)                                       | _ | Age limit for judicial consent (years) | _ |

|                                       | Sex-selective abortion |   |
|---------------------------------------|------------------------|---|
| Prohibition of sex-selective abortion | No                     | Restrictions on the methods to detect the sex of the foetus |

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | _                                | <del>-</del>                              |  |
| Dilatation and evacuation             | <del>-</del>                     | <del>-</del>                              |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | <del>-</del>                              |  |
| Misoprostol only                      | <del>-</del>                     | _   |  |
| Other method(s)                       | <del>-</del>                     | <del>-</del>                              |  |



## Togo

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |  |
| Misoprostol  | Yes <sup>2</sup>                                  | <del>-</del>   |  |

| Settings for providing legal abortion services    | ng legal abortion services Induced abortion Post-abortion |              |  |
|---|---|--------------|--|
| Primary health care centres                       | _   | <del>-</del> |  |
| Secondary (district-level) health-care facilities | Yes   | _            |  |
| Specialized abortion care public facilities       | _   | _            |  |
| Private health-care centres or clinics            | _   | _            |  |
| NGO health-care centres or clinics                | <del>-</del>  | <del>-</del> |  |
| Other settings or facilities                      | _   | _            |  |

| Doctors (speciality not specified)  | Yes |
|-------------------------------------|-----|
| Specialist doctor, including OB/GYN | _   |
| Nurse                               | _   |
| Midwife/nurse-midwife               | _   |
| Other provider(s)                   | _   |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |   |
|--|---|
| National guidelines on clinical and service delivery of induced abortion   | _ |
| National guidelines on clinical and service delivery of post-abortion care | _ |
| Restrictions on public information on legal abortion services              | _ |
| Counselling for contraceptive methods during post-abortion care            | _ |

| Service delivery requirements for providers or facilities |   |  |
|---|---|--|
| Referral linkage to a higher-level facility               | _ |  |
| Availability of a specialist doctor                       | _ |  |
| Minimum number of beds                                    | _ |  |
| Other facility/provider requirements                      | _ |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | <del>_</del>      | _   |
| Health-care providers  | _                 | <del>_</del>  |

#### Notes:

- Abortion is permitted for therapeutic purposes.
   Indications not specified.



## Tonga

| LAWS ON ABORTION                                 |   |   |  |  |
|--|---|---|--|--|
| Legal grounds for induced abortion               | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |  |
| To save life                                     | Yes                                     | <del>-</del>                                    |  |  |
| To preserve health                               | No                                      | _   |  |  |
| To preserve physical health                      | No                                      | <del>_</del>                                    |  |  |
| To preserve mental health                        | No                                      | _   |  |  |
| In cases of intellectual or cognitive disability | No                                      | <del>-</del>                                    |  |  |
| In cases of incest                               | No                                      | _   |  |  |
| In cases of rape                                 | No                                      | <del>-</del>                                    |  |  |
| In cases of foetal impairment                    | No                                      | <del>-</del>                                    |  |  |
| For economic or social reason                    | No                                      | <del>-</del>                                    |  |  |
| On request                                       | No                                      | <del>-</del>                                    |  |  |
| For other reason(s)                              | _                                       | _   |  |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |     |  |   |
|--|-----|--|---|
| Authorizations required Consent required     |     |  |   |
| Authorization of health care professional(s) | _   | Spousal consent                              | _ |
| Number of authorizations                     | _   | Parental consent for minors                  | _ |
| Cadre of health care professional            |     | Consent by another adult                     | _ |
| Doctor (specialty not specified)             | Yes |  |   |
| Specialist doctor, including OB/GYN          | _   | Other requirements                           |   |
| Nurse  | _   | Gestational age limits                       | _ |
| Midwife/nurse-midwife                        | _   | Compulsory counselling                       | _ |
| Other providers                              | _   | Compulsory waiting period                    | _ |
| Authorized in specially licensed facilities  | _   | Length of waiting period (days)              | _ |
| Judicial authorization                       |     | Mandatory screening test                     |   |
| For minors                                   | _   | HIV test                                     | _ |
| In case of rape                              | _   | Other STI test(s)                            | _ |
| Police report in case of rape                | _   | Ultrasound viewing or listening to heartbeat | _ |

| Age when a worr                        | nan can obtain an abortion without parental or judicial consent |  |
|--|---|--|
| Age limit for parental consent (years) | <ul><li>Age limit for judicial consent (years)</li></ul>        |  |
|  |   |  |
|  |   |  |

|                                       | Sex-selective abortion                                      |
|---------------------------------------|---|
| Prohibition of sex-selective abortion | Restrictions on the methods to detect the sex of the foetus |
|                                       |   |

| ACCESS TO ABORTION SERVICES           |                                  |   |
|---------------------------------------|----------------------------------|---|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |
| Vacuum aspiration                     | _                                | <del>-</del>                              |
| Dilatation and evacuation             | <del>-</del>                     | <del>-</del>                              |
| Combination mifepristone- misoprostol | <del>-</del>                     | <del>-</del>                              |
| Misoprostol only                      | <del>-</del>                     | _   |
| Other method(s)                       | <del>-</del>                     | <del>-</del>                              |



## Tonga

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |
|--|---|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |
| Misoprostol  | Yes <sup>2</sup>                                  | <del>-</del>   |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | _                  |
| Specialized abortion care public facilities       | <del>-</del>     | _                  |
| Private health-care centres or clinics            | <del>-</del>     | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | <del>-</del>     | _                  |

| Doctors (speciality not specified)  Specialist doctor, including OB/GYN | _            |
|---|--------------|
| Specialist doctor, including OB/GYN                                     | _            |
|   |              |
| Nurse   | _            |
| Midwife/nurse-midwife   | _            |
| Other provider(s)   | <del>_</del> |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | _   |
| National guidelines on clinical and service delivery of post-abortion care | Yes |
| Restrictions on public information on legal abortion services              | _   |
| Counselling for contraceptive methods during<br>post-abortion care         | _   |

| Service delivery requirements for providers or t | facilities   |
|--|--------------|
| Referral linkage to a higher-level facility      | _            |
| Availability of a specialist doctor              | <del>-</del> |
| Minimum number of beds                           | _            |
| Other facility/provider requirements             | _            |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | _                 | _   |

#### Notes:

- Indicates that data are not available, not applicable or not specified.
- 1. Abortion is generally Illegal in the country. However, under the general criminal law principles of necessity, it is allowed to be performed to save the life of the pregnant woman.
  2. For gynaecological indications.



Prohibition of sex-selective abortion

# Abortion laws and policies, 2017

## **Trinidad and Tobago**

| LAWS ON ABORTION                                 |   |   |
|--|---|---|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |
| To save life                                     | Yes                                     | _   |
| To preserve health                               | Yes                                     | _   |
| To preserve physical health                      | Yes                                     | _   |
| To preserve mental health                        | Yes                                     | _   |
| In cases of intellectual or cognitive disability | No                                      | _   |
| In cases of incest                               | No                                      | _   |
| In cases of rape                                 | No                                      | _   |
| In cases of foetal impairment                    | No                                      | _   |
| For economic or social reason                    | No                                      | _   |
| On request                                       | No                                      | _   |
| For other reason(s)                              | _                                       | _   |

|       | Persons who can be criminally charged for an illegal abortion |          |     |                                    |     |  |
|-------|---|----------|-----|------------------------------------|-----|--|
| Woman | Yes   | Provider | Yes | Other person who assists the woman | Yes |  |

| REQUIREMENTS FOR INDUCED ABORTION            |    |  |     |  |
|--|----|--|-----|--|
| Authorizations required                      |    | Consent required                             |     |  |
| Authorization of health care professional(s) | _  | Spousal consent                              | No  |  |
| Number of authorizations                     | _  | Parental consent for minors                  | Yes |  |
| Cadre of health care professional            |    | Consent by another adult                     | _   |  |
| Doctor (specialty not specified)             | _  |  |     |  |
| Specialist doctor, including OB/GYN          | _  | Other requirements                           |     |  |
| Nurse  | _  | Gestational age limits                       | No  |  |
| Midwife/nurse-midwife                        | _  | Compulsory counselling                       | No  |  |
| Other providers                              | _  | Compulsory waiting period                    | No  |  |
| Authorized in specially licensed facilities  | No | Length of waiting period (days)              | _   |  |
| Judicial authorization                       |    | Mandatory screening test                     |     |  |
| For minors                                   | No | HIV test                                     | _   |  |
| In case of rape                              | _  | Other STI test(s)                            | _   |  |
| Police report in case of rape                | _  | Ultrasound viewing or listening to heartbeat | _   |  |

| Age limit for parental consent (years) | <ul><li>Age limit for judicial consent (years)</li></ul> |
|--|--|
|  |  |
|  | Sex-selective abortion                                   |
| Prohibition of say coloctive abortion  | Restrictions on the methods to detect the sex            |

Age when a woman can obtain an abortion without parental or judicial consent

No

| ACCESS TO ABORTION SERVICES           |                                  |   |  |  |
|---------------------------------------|----------------------------------|---|--|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |  |
| Vacuum aspiration                     | _                                | <del>-</del>                              |  |  |
| Dilatation and evacuation             | <del>-</del>                     | <del>-</del>                              |  |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | <del>-</del>                              |  |  |
| Misoprostol only                      | <del>-</del>                     | _   |  |  |
| Other method(s)                       | <del>-</del>                     | <del>-</del>                              |  |  |



## **Trinidad and Tobago**

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |
|--|---|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |
| Misoprostol  | No  | <del>-</del>   |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | _                  |
| Specialized abortion care public facilities       | <del>-</del>     | _                  |
| Private health-care centres or clinics            | <del>-</del>     | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | _                  |
| Other settings or facilities                      | _                | _                  |

| Doctors (speciality not specified)  | _ |
|-------------------------------------|---|
| Specialist doctor, including OB/GYN | _ |
| Nurse                               | _ |
| Midwife/nurse-midwife               | _ |
| Other provider(s)                   | _ |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |   |
|--|---|
| National guidelines on clinical and service delivery of induced abortion   | _ |
| National guidelines on clinical and service delivery of post-abortion care | _ |
| Restrictions on public information on legal abortion services              | _ |
| Counselling for contraceptive methods during<br>post-abortion care         | _ |

| Service delivery requirements for providers or facilities |   |  |
|---|---|--|
| Referral linkage to a higher-level facility               | _ |  |
| Availability of a specialist doctor                       | _ |  |
| Minimum number of beds                                    | _ |  |
| Other facility/provider requirements                      | _ |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | _                 | _   |

#### Notes:

Indicates that data are not available, not applicable or not specified

<sup>1.</sup> Abortion is generally illegal in the country. The common law doctrine of necessity, however, recognizes that an abortion can be lawfully performed by a physician, in a medically appropriate setting, if the procedure is performed in good faith to preserve the life or health (including the mental health), of the mother. It is advisable for the physician performing the procedure to obtain agreement in writing from at least one senior colleague that the procedure is warranted.



Age limit for parental consent (years)

# Abortion laws and policies, 2017

### Tunisia

| LAWS ON ABORTION                                 |                                      |   |  |  |
|--|--------------------------------------|---|--|--|
| egal grounds for induced abortion                | Currently permissible in the country | Gestational limit for each legal ground (weeks) |  |  |
| To save life                                     | Yes                                  | No limit  |  |  |
| To preserve health                               | Yes                                  | No limit  |  |  |
| To preserve physical health                      | Yes                                  | No limit  |  |  |
| To preserve mental health                        | Yes                                  | No limit  |  |  |
| In cases of intellectual or cognitive disability | <del>-</del>                         | _   |  |  |
| In cases of incest                               | _                                    | _   |  |  |
| In cases of rape                                 | _                                    | _   |  |  |
| In cases of foetal impairment                    | Yes                                  | No limit  |  |  |
| For economic or social reason                    | _                                    | _   |  |  |
| On request                                       | Yes                                  | 12  |  |  |
| For other reason(s)                              | _                                    | _   |  |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |     |  |     |
|--|-----|--|-----|
| Authorizations required                      |     | Consent required                             |     |
| Authorization of health care professional(s) | Yes | Spousal consent                              | _   |
| Number of authorizations                     | 1   | Parental consent for minors                  | _   |
| Cadre of health care professional            |     | Consent by another adult                     | _   |
| Doctor (specialty not specified)             | Yes |  |     |
| Specialist doctor, including OB/GYN          | _   | Other requirements                           |     |
| Nurse  | _   | Gestational age limits                       | Yes |
| Midwife/nurse-midwife                        | _   | Compulsory counselling                       | _   |
| Other providers                              | _   | Compulsory waiting period                    | _   |
| Authorized in specially licensed facilities  | Yes | Length of waiting period (days)              | _   |
| Judicial authorization                       |     | Mandatory screening test                     |     |
| For minors                                   | _   | HIV test                                     | _   |
| In case of rape                              | _   | Other STI test(s)                            | _   |
| Police report in case of rape                | _   | Ultrasound viewing or listening to heartbeat | _   |

Age when a woman can obtain an abortion without parental or judicial consent

|                                       | Sex-selective abortion |   |
|---------------------------------------|------------------------|---|
| Prohibition of sex-selective abortion | _                      | Restrictions on the methods to detect the sex of the foetus |

Age limit for judicial consent (years)

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | <del>-</del>                     | _   |  |
| Dilatation and evacuation             | <del>-</del>                     | _   |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | _   |  |
| Misoprostol only                      | _                                | _   |  |
| Other method(s)                       | <del>-</del>                     | <del>-</del>                              |  |



#### Tunisia

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | Yes   | _  |  |
| Misoprostol  | Yes <sup>2</sup>                                  | <del>-</del>   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | _                  |
| Secondary (district-level) health-care facilities | Yes              | _                  |
| Specialized abortion care public facilities       | _                | _                  |
| Private health-care centres or clinics            | _                | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | _                  |
| Other settings or facilities                      | Yes <sup>3</sup> | _                  |

| lealth care personnel allowed to provide legal abortions |     |  |
|--|-----|--|
| Doctors (speciality not specified)                       | Yes |  |
| Specialist doctor, including OB/GYN                      | _   |  |
| Nurse  | _   |  |
| Midwife/nurse-midwife                                    | _   |  |
| Other provider(s)  | _   |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Info | rmation and guidelines on abortion services                                |
|------|--|
|      | National guidelines on clinical and service delivery of induced abortion   |
|      | National guidelines on clinical and service delivery of post-abortion care |
|      | Restrictions on public information on legal abortion services              |
|      | Counselling for contraceptive methods during post-abortion care            |

| Service delivery requirements for providers or facilities |              |  |  |
|---|--------------|--|--|
| Referral linkage to a higher-level facility               | _            |  |  |
| Availability of a specialist doctor                       | <del>-</del> |  |  |
| Minimum number of beds                                    | _            |  |  |
| Other facility/provider requirements                      | _            |  |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | _                 | _   |

### Notes:

- When the mother's psychological equilibrium risks being compromised by the continuation of the pregnancy.
   For gynaecological indications.
   Health facility or an authorized clinic in the first three months of gestation, after three months gestation in an explicitly authorised institution.



### Turkey

| LAWS ON ABORTION                                 |   |   |  |
|--|---|---|--|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | _   |  |
| To preserve health                               | Yes                                     | _   |  |
| To preserve physical health                      | Yes                                     | _   |  |
| To preserve mental health                        | Yes                                     | _   |  |
| In cases of intellectual or cognitive disability | _                                       | _   |  |
| In cases of incest                               | <del>-</del>                            | <del>-</del>                                    |  |
| In cases of rape                                 | Yes                                     | 20  |  |
| In cases of foetal impairment                    | Yes                                     | _   |  |
| For economic or social reason                    | <del>-</del>                            | <del>-</del>                                    |  |
| On request                                       | Yes                                     | 10  |  |
| For other reason(s)                              | _                                       | _   |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |     |  |     |
|--|-----|--|-----|
| Authorizations required                      |     | Consent required                             |     |
| Authorization of health care professional(s) | Yes | Spousal consent                              | Yes |
| Number of authorizations                     | 2 1 | Parental consent for minors                  | Yes |
| Cadre of health care professional            |     | Consent by another adult                     | Yes |
| Doctor (specialty not specified)             | _   |  |     |
| Specialist doctor, including OB/GYN          | Yes | Other requirements                           |     |
| Nurse  | _   | Gestational age limits                       | Yes |
| Midwife/nurse-midwife                        | _   | Compulsory counselling                       | _   |
| Other providers                              | _   | Compulsory waiting period                    | _   |
| Authorized in specially licensed facilities  | _   | Length of waiting period (days)              | _   |
| Judicial authorization                       |     | Mandatory screening test                     |     |
| For minors                                   | Yes | HIV test                                     | _   |
| In case of rape                              | _   | Other STI test(s)                            | _   |
| Police report in case of rape                | _   | Ultrasound viewing or listening to heartbeat | _   |

| Age when a woman can obtain an abortion without parental or judicial consent |    |  |    |  |
|--|----|--|----|--|
| Age limit for parental consent (years)                                       | 18 | Age limit for judicial consent (years) | 18 |  |
|  |    |  |    |  |

|                                       | Sex-selective abortion                                      |
|---------------------------------------|---|
| Prohibition of sex-selective abortion | Restrictions on the methods to detect the sex of the foetus |

| ACCESS TO ABORTION SERVICES           |                                  |   |
|---------------------------------------|----------------------------------|---|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |
| Vacuum aspiration                     | _                                | _   |
| Dilatation and evacuation             | <del>-</del>                     | _   |
| Combination mifepristone- misoprostol | <del>-</del>                     | _   |
| Misoprostol only                      | _                                | _   |
| Other method(s)                       | <del>-</del>                     | _   |



### Turkey

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |  |
|--|---|--|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |  |  |
| Misoprostol  | Yes <sup>3</sup>                                  | <del>_</del>   |  |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | Yes              | _                  |
| Secondary (district-level) health-care facilities | Yes              | _                  |
| Specialized abortion care public facilities       | Yes              | <del>-</del>       |
| Private health-care centres or clinics            | Yes              | _                  |
| NGO health-care centres or clinics                | _                | _                  |
| Other settings or facilities                      | _                | <del>-</del>       |

| Health care personnel allowed to provide legal abortions |              |  |
|--|--------------|--|
| Doctors (speciality not specified)                       | Yes          |  |
| Specialist doctor, including OB/GYN                      | Yes          |  |
| Nurse  | <del>-</del> |  |
| Midwife/nurse-midwife                                    | _            |  |
| Other provider(s)  | _            |  |
|  |              |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                             |   |
|---|---|
|   |   |
| National guidelines on clinical and service<br>delivery of induced abortion | _ |
| National guidelines on clinical and service delivery of post-abortion care  | _ |
| Restrictions on public information on legal abortion services               | _ |
| Counselling for contraceptive methods during post-abortion care             | _ |

| Service delivery requirements for providers or facilities |                  |
|---|------------------|
| Referral linkage to a higher-level facility               | _                |
| Availability of a specialist doctor                       | Yes              |
| Minimum number of beds                                    | _                |
| Other facility/provider requirements                      | Yes <sup>4</sup> |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | _                 | _   |

#### Notes:

- 1. Authorisation is needed for abortion at gestational ages of more than ten weeks.
  2. Minors need the permission of a parent. In the case of minors under legal guardianship, the consent of the minor and the consent of the legal guardian, as well as the permission of a Justice of the Peace, are required. The requirement of obtaining permission from a parent or from a justice of the peace may be waived if there could be a danger to life or to a vital organ unless urgent action is taken.
  3. Indications not specified.
  4. Instruments and equipment.



### Turkmenistan

| LAWS ON ABORTION                                 |   |   |
|--|---|---|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |
| To save life                                     | Yes                                     | No limit  |
| To preserve health                               | Yes                                     | No limit  |
| To preserve physical health                      | <del>-</del>                            | _   |
| To preserve mental health                        | -                                       | _   |
| In cases of intellectual or cognitive disability | _                                       | _   |
| In cases of incest                               | _                                       | _   |
| In cases of rape                                 | _                                       | _   |
| In cases of foetal impairment                    | _                                       | _   |
| For economic or social reason                    | Yes                                     | 22  |
| On request                                       | Yes                                     | 12  |
| For other reason(s)                              | _                                       | _   |

| Persons who can be criminally charged for an illegal abortion |   |          |     |                                    |   |  |
|---|---|----------|-----|------------------------------------|---|--|
| Woman   | _ | Provider | Yes | Other person who assists the woman | _ |  |

| REQUIREMENTS FO                              |     | OR INDUCED ABORTION            |
|--|-----|--------------------------------|
| Authorizations required                      |     | Consent required               |
| Authorization of health care professional(s) | _   | Spousal consent                |
| Number of authorizations                     | _   | Parental consent for minors    |
| Cadre of health care professional            |     | Consent by another adult       |
| Doctor (specialty not specified)             | _   |                                |
| Specialist doctor, including OB/GYN          | _   | Other requirements             |
| Nurse  | _   | Gestational age limits         |
| Midwife/nurse-midwife                        | _   | Compulsory counselling         |
| Other providers                              | _   | Compulsory waiting period      |
| Authorized in specially licensed facilities  | Yes | Length of waiting period       |
| Judicial authorization                       |     | Mandatory screening test       |
| For minors                                   | _   | HIV test                       |
| In case of rape                              | _   | Other STI test(s)              |
| Police report in case of rape                | _   | Ultrasound viewing or listenir |

| Consent by another adult                     | _   |  |
|--|-----|--|
|  |     |  |
| Other requirements                           |     |  |
| Gestational age limits                       | Yes |  |
| Compulsory counselling                       | _   |  |
| Compulsory waiting period                    | _   |  |
| Length of waiting period (days)              | _   |  |
| Mandatory screening test                     |     |  |
| HIV test                                     | _   |  |
| Other STI test(s)                            | _   |  |
| Ultrasound viewing or listening to heartbeat | _   |  |

| Age when a woman can obtain an abortion without parental or judicial consent |  |   |
|--|--|---|
| Age limit for parental consent (years)                                       | <ul> <li>Age limit for judicial consent (years)</li> </ul> | _ |

|                                       | Sex-selective abortion                                      |
|---------------------------------------|---|
| Prohibition of sex-selective abortion | Restrictions on the methods to detect the sex of the foetus |

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | _                                | _   |  |
| Dilatation and evacuation             | <del>-</del>                     | _   |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | _   |  |
| Misoprostol only                      | _                                | _   |  |
| Other method(s)                       | <del>-</del>                     | _   |  |



#### Turkmenistan

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | <del>-</del>                                      | _  |  |
| Misoprostol  | <del>-</del>                                      | _  |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | No               | _                  |
| Secondary (district-level) health-care facilities | Yes              | _                  |
| Specialized abortion care public facilities       | _                | _                  |
| Private health-care centres or clinics            | _                | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | Yes <sup>1</sup> | _                  |

| Health care personnel allowed to provide legal abortions |     |
|--|-----|
| Doctors (speciality not specified)                       | Yes |
| Specialist doctor, including OB/GYN                      | _   |
| Nurse  | _   |
| Midwife/nurse-midwife                                    | _   |
| Other provider(s)  | _   |
|  |     |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services  National guidelines on clinical and service delivery of induced abortion  National guidelines on clinical and service delivery of pools abortion corp. |  |   |
|---|--|---|
| delivery of induced abortion  National guidelines on clinical and service   | Information and guidelines on abortion services                            |   |
|   |  | _ |
| delivery of post-abortion care  | National guidelines on clinical and service delivery of post-abortion care | _ |
| Restrictions on public information on legal abortion services   | 1  | _ |
| Counselling for contraceptive methods during post-abortion care   |  | _ |

| Service delivery requirements for providers or | facilities |
|--|------------|
| Referral linkage to a higher-level facility    | _          |
| Availability of a specialist doctor            | _          |
| Minimum number of beds                         | _          |
| Other facility/provider requirements           | _          |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | _                 | _   |

#### Notes:

- Indicates that data are not available, not applicable or not specified.
- 1. Abortions are to be performed in hospitals that have received a license to perform abortions.



#### Tuvalu

| LAWS ON ABORTION                                 |   |   |  |
|--|---|---|--|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | _   |  |
| To preserve health                               | No                                      | _   |  |
| To preserve physical health                      | No                                      | _   |  |
| To preserve mental health                        | No                                      | _   |  |
| In cases of intellectual or cognitive disability | No                                      | _   |  |
| In cases of incest                               | No                                      | _   |  |
| In cases of rape                                 | No                                      | _   |  |
| In cases of foetal impairment                    | No                                      | _   |  |
| For economic or social reason                    | No                                      | _   |  |
| On request                                       | No                                      | _   |  |
| For other reason(s)                              | _                                       | _   |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |  |   |  |
|--|--|---|--|
| Authorizations required                      | Consent required                             |   |  |
| Authorization of health care professional(s) | — Spousal consent                            | _ |  |
| Number of authorizations                     | Parental consent for minors                  | _ |  |
| Cadre of health care professional            | Consent by another adult                     | _ |  |
| Doctor (specialty not specified)             | _  |   |  |
| Specialist doctor, including OB/GYN          | Other requirements                           |   |  |
| Nurse  | — Gestational age limits                     | _ |  |
| Midwife/nurse-midwife                        | — Compulsory counselling                     | _ |  |
| Other providers                              | Compulsory waiting period                    | _ |  |
| Authorized in specially licensed facilities  | Length of waiting period (days)              | _ |  |
| Judicial authorization                       | Mandatory screening test                     |   |  |
| For minors                                   | - HIV test                                   | _ |  |
| In case of rape                              | — Other STI test(s)                          | _ |  |
| Police report in case of rape                | Ultrasound viewing or listening to heartbeat | _ |  |

| Age when a woman can obtain an abortion without parental or judicial consent |   |  |   |  |
|--|---|--|---|--|
| Age limit for parental consent (years)                                       | _ | Age limit for judicial consent (years) | _ |  |
|  |   |  |   |  |
| Sex-selective abortion   |   |  |   |  |

| Prohibition of sex-selective abortion | Restrictions on the methods to detect of the foetus | the sex                                   |  |  |
|---------------------------------------|---|---|--|--|
| ACCESS TO ABORTION SERVICES           |   |   |  |  |
| Methods for induced abortions         | Currently allowed in the country                    | Gestational limit for each method (weeks) |  |  |

| Methods for induced abortions         | Currently allowed in the country | Gestational limit for<br>each method (weeks) |
|---------------------------------------|----------------------------------|--|
| Vacuum aspiration                     | _                                | _  |
| Dilatation and evacuation             | <del>-</del>                     | _  |
| Combination mifepristone- misoprostol | <del>-</del>                     | <del>_</del>                                 |
| Misoprostol only                      | <del>-</del>                     | _  |
| Other method(s)                       | _                                | <u> </u>                                     |



#### Tuvalu

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |  |
| Misoprostol  | Yes <sup>2</sup>                                  | <del>-</del>   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | _                  |
| Specialized abortion care public facilities       | <del>-</del>     | _                  |
| Private health-care centres or clinics            | <del>-</del>     | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | _                  |
| Other settings or facilities                      | _                | _                  |

| Health care personnel allowed to provide legal abortions |                  |
|--|------------------|
| Doctors (speciality not specified)                       | _                |
| Specialist doctor, including OB/GYN                      | _                |
| Nurse  | _                |
| Midwife/nurse-midwife                                    | _                |
| Other provider(s)  | Yes <sup>3</sup> |
|  |                  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | _   |
| National guidelines on clinical and service delivery of post-abortion care | Yes |
| Restrictions on public information on legal abortion services              | Yes |
| Counselling for contraceptive methods during<br>post-abortion care         | _   |

| Service delivery requirements for providers or facilities |              |  |
|---|--------------|--|
| Referral linkage to a higher-level facility               | _            |  |
| Availability of a specialist doctor                       | <del>-</del> |  |
| Minimum number of beds                                    | _            |  |
| Other facility/provider requirements                      | _            |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to<br>alternative provider or facility |
|--|-------------------|--|
| Health-care facilities   | _                 | _  |
| Health-care providers  | _                 | _  |

#### Notes:

- 1. Surgical operation performed in good faith and with reasonable care and skill upon an unborn child for the preservation of the mother's life, if the performance of the operation is reasonable, having regard to the patient's state at the time and to all the circumstances of the case.

  2. For gynaecological indications.

  3. Only a qualified medical practitioner or person acting under the direction of such a medical practitioner can attend upon, prescribe for, or supply any article as a drug, medicine, instrument or appliance for the purpose of terminating a pregnancy.



Prohibition of sex-selective abortion

# Abortion laws and policies, 2017

## Uganda

| LAWS ON ABORTION                                 |                                      |   |  |
|--|--------------------------------------|---|--|
| Legal grounds for induced abortion               | Currently permissible in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                  | 28  |  |
| To preserve health                               | Yes                                  | 28  |  |
| To preserve physical health                      | Yes                                  | 28  |  |
| To preserve mental health                        | Yes                                  | 28  |  |
| In cases of intellectual or cognitive disability | No                                   | _   |  |
| In cases of incest                               | Yes                                  | 28  |  |
| In cases of rape                                 | Yes                                  | 28  |  |
| In cases of foetal impairment                    | Yes                                  | 28  |  |
| For economic or social reason                    | No                                   | _   |  |
| On request                                       | No                                   | _   |  |
| For other reason(s)                              | Yes <sup>2</sup>                     | _   |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |    |  |     |
|--|----|--|-----|
| Authorizations required                      |    | Consent required                             |     |
| Authorization of health care professional(s) | _  | Spousal consent                              | _   |
| Number of authorizations                     | _  | Parental consent for minors                  | No  |
| Cadre of health care professional            |    | Consent by another adult                     | _   |
| Doctor (specialty not specified)             | _  |  |     |
| Specialist doctor, including OB/GYN          | _  | Other requirements                           |     |
| Nurse  | _  | Gestational age limits                       | Yes |
| Midwife/nurse-midwife                        | _  | Compulsory counselling                       | No  |
| Other providers                              | _  | Compulsory waiting period                    | _   |
| Authorized in specially licensed facilities  | _  | Length of waiting period (days)              | _   |
| Judicial authorization                       |    | Mandatory screening test                     |     |
| For minors                                   | No | HIV test                                     | _   |
| In case of rape                              | _  | Other STI test(s)                            | _   |
| Police report in case of rape                | _  | Ultrasound viewing or listening to heartbeat | _   |

| Age limit for parental consent (years) | <ul><li>Age limit for judicial consent (years)</li></ul> |
|--|--|
|  |  |
|  | Sex-selective abortion                                   |
| Prohibition of say calcative abortion  | Restrictions on the methods to detect the sex            |

Age when a woman can obtain an abortion without parental or judicial consent

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | Yes                              | 12  |  |
| Dilatation and evacuation             | Yes                              | <del>-</del>                              |  |
| Combination mifepristone- misoprostol | Yes                              | <del>-</del>                              |  |
| Misoprostol only                      | Yes                              | <del>-</del>                              |  |
| Other method(s)                       | _                                | <del>-</del>                              |  |



### Uganda

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | <del>-</del>   |  |
| Misoprostol  | Yes <sup>3</sup>                                  | <del>-</del>   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | Yes              | Yes                |
| Secondary (district-level) health-care facilities | Yes              | Yes                |
| Specialized abortion care public facilities       | _                | <del>-</del>       |
| Private health-care centres or clinics            | <del>-</del>     | <del>-</del>       |
| NGO health-care centres or clinics                | _                | <del>-</del>       |
| Other settings or facilities                      | _                | _                  |

| Health care personnel allowed to provide legal abortions |     |  |
|--|-----|--|
| Doctors (speciality not specified)                       | Yes |  |
| Specialist doctor, including OB/GYN                      | Yes |  |
| Nurse  | Yes |  |
| Midwife/nurse-midwife                                    | Yes |  |
| Other provider(s)  | _   |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | Yes |
| National guidelines on clinical and service delivery of post-abortion care | Yes |
| Restrictions on public information on legal abortion services              | _   |
| Counselling for contraceptive methods during<br>post-abortion care         | Yes |

| Service delivery requirements for providers or facilities |     |  |
|---|-----|--|
| Referral linkage to a higher-level facility               | Yes |  |
| Availability of a specialist doctor                       | Yes |  |
| Minimum number of beds                                    | _   |  |
| Other facility/provider requirements                      | _   |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | Yes <sup>4</sup>  | Yes   |

#### Notes:

- 1. A person is not criminally responsible for performing in good faith and with reasonable care and skill a surgical operation upon any person for his or her benefit, or upon an unborn child for the preservation of the mother's life, if the performance of the operation is reasonable, having regard to the patient's state at the time, and to all the circumstances of the case.

  2. Cervical cancer. HIV-positive women.

  3. For gynaecological indications.

  4. Provider type not specified.



### Ukraine

| LAWS ON ABORTION                                 |   |   |  |
|--|---|---|--|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | 22  |  |
| To preserve health                               | Yes                                     | 22  |  |
| To preserve physical health                      | Yes                                     | 22  |  |
| To preserve mental health                        | Yes                                     | 22  |  |
| In cases of intellectual or cognitive disability | Yes                                     | 22  |  |
| In cases of incest                               | <del>-</del>                            | <del>-</del>                                    |  |
| In cases of rape                                 | Yes                                     | 22  |  |
| In cases of foetal impairment                    | Yes                                     | 22  |  |
| For economic or social reason                    | _                                       | _   |  |
| On request                                       | Yes                                     | 12  |  |
| For other reason(s)                              | Yes 1                                   | _   |  |

| Persons who can be criminally charged for an illegal abortion |            |     |                                    |   |
|---|------------|-----|------------------------------------|---|
| Woman -   | — Provider | Yes | Other person who assists the woman | _ |

| REQUIREMENTS FOR INDUCED ABORTION            |     |  |     |
|--|-----|--|-----|
| Authorizations required                      |     | Consent required                             |     |
| Authorization of health care professional(s) | _   | Spousal consent                              | No  |
| Number of authorizations                     | _   | Parental consent for minors                  | Yes |
| Cadre of health care professional            |     | Consent by another adult                     | Yes |
| Doctor (specialty not specified)             | _   |  |     |
| Specialist doctor, including OB/GYN          | _   | Other requirements                           |     |
| Nurse  | _   | Gestational age limits                       | Yes |
| Midwife/nurse-midwife                        | _   | Compulsory counselling                       | Yes |
| Other providers                              | _   | Compulsory waiting period                    | _   |
| Authorized in specially licensed facilities  | Yes | Length of waiting period (days)              | _   |
| Judicial authorization                       |     | Mandatory screening test                     |     |
| For minors                                   | No  | HIV test                                     | _   |
| In case of rape                              | _   | Other STI test(s)                            | _   |
| Police report in case of rape                | _   | Ultrasound viewing or listening to heartbeat | _   |

| Age limit for parental consent (years) | 14            | Age limit for judicial consent (years)        | _ |
|--|---------------|---|---|
|  |               |   |   |
|  | Sex-selective | abortion                                      |   |
| Prohibition of sex-selective abortion  | No            | Restrictions on the methods to detect the sex | _ |

Age when a woman can obtain an abortion without parental or judicial consent

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | Yes                              | 8   |  |
| Dilatation and evacuation             | _                                | <del>-</del>                              |  |
| Combination mifepristone- misoprostol | Yes                              | 7   |  |
| Misoprostol only                      | _                                | <del>-</del>                              |  |
| Other method(s)                       | Yes <sup>2</sup>                 | <del>-</del>                              |  |



#### Ukraine

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | Yes   | _  |  |
| Misoprostol  | Yes <sup>3</sup>                                  | <del>-</del>   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | _                | <del>-</del>       |
| Secondary (district-level) health-care facilities | _                | <del>-</del>       |
| Specialized abortion care public facilities       | _                | <del>-</del>       |
| Private health-care centres or clinics            | _                | <del>-</del>       |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | Yes <sup>4</sup> | _                  |

| Health care personnel allowed to provide legal abortions |     |  |
|--|-----|--|
| Doctors (speciality not specified)                       | Yes |  |
| Specialist doctor, including OB/GYN                      | Yes |  |
| Nurse  | _   |  |
| Midwife/nurse-midwife                                    | _   |  |
| Other provider(s)  | _   |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | Yes |
| National guidelines on clinical and service delivery of post-abortion care | _   |
| Restrictions on public information on legal abortion services              | _   |
| Counselling for contraceptive methods during<br>post-abortion care         | Yes |

| Service delivery requirements for providers or facilities |                  |  |
|---|------------------|--|
| Referral linkage to a higher-level facility               | _                |  |
| Availability of a specialist doctor                       | Yes              |  |
| Minimum number of beds                                    | _                |  |
| Other facility/provider requirements                      | Yes <sup>5</sup> |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to<br>alternative provider or facility |
|--|-------------------|--|
| Health-care facilities   | _                 | _  |
| Health-care providers  | _                 | _  |

#### Notes:

- Indicates that data are not available, not applicable or not specified.

- 1. The woman is below the age of 15 or over the age of 49.
  2. Dilation and curettage.
  3. Indications not specified.
  4. Abortion by aspiration is to be performed in day care Women's Consultation Offices. Abortion by curettage is to be performed in gynaecology department of an accredited health institution. Abortions from 12 to 22 weeks are to be performed in "the gynaecological department of health institution level III hospital providing obstetric gynaecological and neonatal care".
  5. Medical abortion can be performed in an accredited health institution of any form of ownership and departmental subordination, in which there are opportunities to provide emergency medical care.



### **United Arab Emirates**

| LAWS ON ABORTION                                 |                                      |   |  |
|--|--------------------------------------|---|--|
| egal grounds for induced abortion                | Currently permissible in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                  | No limit  |  |
| To preserve health                               | No                                   | _   |  |
| To preserve physical health                      | No                                   | <del>-</del>                                    |  |
| To preserve mental health                        | No                                   | <del>-</del>                                    |  |
| In cases of intellectual or cognitive disability | No                                   | <del>-</del>                                    |  |
| In cases of incest                               | No                                   | <del>-</del>                                    |  |
| In cases of rape                                 | No                                   | <del>-</del>                                    |  |
| In cases of foetal impairment                    | Yes                                  | 16  |  |
| For economic or social reason                    | No                                   | <del>-</del>                                    |  |
| On request                                       | No                                   | <del>-</del>                                    |  |
| For other reason(s)                              | _                                    | _   |  |

| Persons who can be criminally charged for an illegal abortion |   |          |     |                                    |     |  |
|---|---|----------|-----|------------------------------------|-----|--|
| Woman   | _ | Provider | Yes | Other person who assists the woman | Yes |  |

| uthorizations required                       |     | Consent required                             |              |
|--|-----|--|--------------|
| Authorization of health care professional(s) | Yes | Spousal consent                              | Yes          |
| Number of authorizations                     | 1 1 | Parental consent for minors                  | _            |
| Cadre of health care professional            |     | Consent by another adult                     | <del>-</del> |
| Doctor (specialty not specified)             | _   |  |              |
| Specialist doctor, including OB/GYN          | Yes | Other requirements                           |              |
| Nurse  | _   | Gestational age limits                       | Yes          |
| Midwife/nurse-midwife                        | _   | Compulsory counselling                       | _            |
| Other providers                              | _   | Compulsory waiting period                    | _            |
| Authorized in specially licensed facilities  | _   | Length of waiting period (days)              | _            |
| Judicial authorization                       |     | Mandatory screening test                     |              |
| For minors                                   | _   | HIV test                                     | _            |
| In case of rape                              | _   | Other STI test(s)                            | _            |
| Police report in case of rape                | _   | Ultrasound viewing or listening to heartbeat | _            |

| Age when a woman can obtain an abortion without parental or judicial consent |   |  |   |
|--|---|--|---|
| Age limit for parental consent (years)                                       | _ | Age limit for judicial consent (years) | _ |
|  |   |  |   |

|                                       | Sex-selective abortion                                      |
|---------------------------------------|---|
| Prohibition of sex-selective abortion | Restrictions on the methods to detect the sex of the foetus |

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | <del>-</del>                     | _   |  |
| Dilatation and evacuation             | <del>-</del>                     | _   |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | _   |  |
| Misoprostol only                      | _                                | _   |  |
| Other method(s)                       | <del>-</del>                     | <del>-</del>                              |  |



#### **United Arab Emirates**

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |  |
| Misoprostol  | Yes <sup>2</sup>                                  | <del>-</del>   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | _                  |
| Specialized abortion care public facilities       | <del>-</del>     | _                  |
| Private health-care centres or clinics            | <del>-</del>     | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | <del>-</del>     | _                  |

| Doctors (speciality not specified)  | _   |
|-------------------------------------|-----|
| Specialist doctor, including OB/GYN | Yes |
| Nurse                               | _   |
| Midwife/nurse-midwife               | _   |
| Other provider(s)                   | _   |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |   |
|--|---|
| National guidelines on clinical and service delivery of induced abortion   | _ |
| National guidelines on clinical and service delivery of post-abortion care | _ |
| Restrictions on public information on legal abortion services              | _ |
| Counselling for contraceptive methods during<br>post-abortion care         | _ |

| Service delivery requirements for providers or facilities |              |  |
|---|--------------|--|
| Referral linkage to a higher-level facility               | _            |  |
| Availability of a specialist doctor                       | <del>-</del> |  |
| Minimum number of beds                                    | _            |  |
| Other facility/provider requirements                      | _            |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to<br>alternative provider or facility |
|--|-------------------|--|
| Health-care facilities   | _                 | _  |
| Health-care providers  | _                 | _  |

#### Notes:

- Depends on indication.
   For non-gynaecological indications only.



### **United Kingdom**

| LAWS ON ABORTION 1                               |   |   |  |
|--|---|---|--|
| egal grounds for induced abortion 2              | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | No limit  |  |
| To preserve health                               | Yes                                     | No limit  |  |
| To preserve physical health                      | Yes                                     | No limit  |  |
| To preserve mental health                        | Yes                                     | No limit  |  |
| In cases of intellectual or cognitive disability | <del>-</del>                            | _   |  |
| In cases of incest                               | <del>-</del>                            | _   |  |
| In cases of rape                                 | <del>-</del>                            | _   |  |
| In cases of foetal impairment                    | Yes                                     | No limit  |  |
| For economic or social reason                    | Yes                                     | _   |  |
| On request                                       | No                                      | _   |  |
| For other reason(s)                              | Yes <sup>3</sup>                        | _   |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |  |
|---|-----|----------|-----|------------------------------------|-----|--|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |  |

No No

No No

| REQUIREMENTS FOR INDUCED ABORTION            |  |                                 |   |
|--|--|---------------------------------|---|
| Authorizations required                      |  | Consent required                |   |
| Authorization of health care professional(s) | Yes  | Spousal consent                 |   |
| Number of authorizations                     | 2 4  | Parental consent for minors     |   |
| Cadre of health care professional            |  | Consent by another adult        |   |
| Doctor (specialty not specified)             | _  |                                 |   |
| Specialist doctor, including OB/GYN          | _  | Other requirements              |   |
| Nurse  | _  | Gestational age limits          | • |
| Midwife/nurse-midwife                        | _  | Compulsory counselling          |   |
| Other providers                              | Yes <sup>5</sup>                             | Compulsory waiting period       |   |
| Authorized in specially licensed facilities  | Yes  | Length of waiting period (days) |   |
| Judicial authorization                       |  | Mandatory screening test        |   |
| For minors                                   | No   | HIV test                        |   |
| In case of rape                              | — Other STI test(s)                          |                                 |   |
| Police report in case of rape                | Ultrasound viewing or listening to heartbeat |                                 |   |

| Police report in case of rape  | Ultrasound viewing or listening to heartbeat — |  |  |
|--|--|--|--|
|  |  |  |  |
| Age when a woman can obtain an abortion without parental or judicial consent |  |  |  |
| Age limit for parental consent (years) —                                     | Age limit for judicial consent (years)         |  |  |
|  |  |  |  |

|                                       | Sex-selective abortion |   |
|---------------------------------------|------------------------|---|
| Prohibition of sex-selective abortion | Yes                    | Restrictions on the methods to detect the sex of the foetus |

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | _                                | <del>-</del>                              |  |
| Dilatation and evacuation             | <del>-</del>                     | <del>-</del>                              |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | <del>-</del>                              |  |
| Misoprostol only                      | <del>-</del>                     | _   |  |
| Other method(s)                       | <del>-</del>                     | <del>-</del>                              |  |



### **United Kingdom**

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | Yes   | No   |  |
| Misoprostol  | Yes <sup>6</sup>                                  | Yes 7  |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | _                  |
| Secondary (district-level) health-care facilities | Yes              | _                  |
| Specialized abortion care public facilities       | _                | _                  |
| Private health-care centres or clinics            | _                | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | Yes <sup>8</sup> | _                  |

| Health care personnel allowed to provide legal abortions |                  |  |
|--|------------------|--|
| Doctors (speciality not specified)                       | _                |  |
| Specialist doctor, including OB/GYN                      | _                |  |
| Nurse  | Yes              |  |
| Midwife/nurse-midwife                                    | Yes              |  |
| Other provider(s)  | Yes <sup>9</sup> |  |
|  |                  |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | _   |
| National guidelines on clinical and service delivery of post-abortion care | _   |
| Restrictions on public information on legal abortion services              | Yes |
| Counselling for contraceptive methods during post-abortion care            | Yes |

| Service delivery requirements for providers or facilities |     |  |
|---|-----|--|
| Referral linkage to a higher-level facility               | Yes |  |
| Availability of a specialist doctor                       | Yes |  |
| Minimum number of beds                                    | _   |  |
| Other facility/provider requirements                      | Yes |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | Yes <sup>10</sup> | _   |

#### Notes:

- 1. Varies by jurisdiction.
  2. The Abortion Act 1967 states that in determining whether the continuance of a pregnancy would involve a risk, greater than if the pregnancy were terminated, of injury to the physical or mental health of the pregnant woman or any existing children of her family or whether the termination is necessary to prevent grave permanent injury to the physical or mental health of the pregnant woman, account may be taken of the pregnant woman's actual or reasonably foreseeable environment.
  3. Risk of injury to the physical or mental health of any existing children of the family of the pregnant woman.
  4. The requirement for authorization by two registered medical practitioners does not apply in an emergency.

- Registered medical practitioner.
   For gynaecological indications.

- For gynaecological indications.
   With prescription only.
   Any treatment for the termination of pregnancy must be carried out in an NHS hospital or in a place approved by the Secretary of State for that purpose. This restriction does not apply where a registered practitioner is of the opinion, formed in good faith, that to save the life or prevent grave permanent harm to the health of the pregnant woman it is necessary to carry out the termination in another place.
   Registered medical practitioners.
   Provider type not specified.



Age limit for parental consent (years)

# Abortion laws and policies, 2017

## **United Republic of Tanzania**

| LAWS ON ABORTION                                 |   |   |  |
|--|---|---|--|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | _   |  |
| To preserve health                               | Yes                                     | <del>-</del>                                    |  |
| To preserve physical health                      | <del>-</del>                            | <del>-</del>                                    |  |
| To preserve mental health                        | <del>-</del>                            | <del>-</del>                                    |  |
| In cases of intellectual or cognitive disability | No                                      | <del>-</del>                                    |  |
| In cases of incest                               | No                                      | <del>-</del>                                    |  |
| In cases of rape                                 | Yes                                     | <del>-</del>                                    |  |
| In cases of foetal impairment                    | Yes                                     | _   |  |
| For economic or social reason                    | No                                      | _   |  |
| On request                                       | No                                      | _   |  |
| For other reason(s)                              | _                                       | _   |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |     |  |              |  |
|--|-----|--|--------------|--|
| Authorizations required                      |     | Consent required                             |              |  |
| Authorization of health care professional(s) | Yes | Spousal consent                              | Yes          |  |
| Number of authorizations                     | _   | Parental consent for minors                  | Yes          |  |
| Cadre of health care professional            |     | Consent by another adult                     | <del>_</del> |  |
| Doctor (specialty not specified)             | _   |  |              |  |
| Specialist doctor, including OB/GYN          | _   | Other requirements                           |              |  |
| Nurse  | _   | Gestational age limits                       | Yes          |  |
| Midwife/nurse-midwife                        | _   | Compulsory counselling                       | _            |  |
| Other providers                              | _   | Compulsory waiting period                    | _            |  |
| Authorized in specially licensed facilities  | Yes | Length of waiting period (days)              | _            |  |
| Judicial authorization                       |     | Mandatory screening test                     |              |  |
| For minors                                   | _   | HIV test                                     | _            |  |
| In case of rape                              | _   | Other STI test(s)                            | _            |  |
| Police report in case of rape                | _   | Ultrasound viewing or listening to heartbeat | _            |  |

|                                       | Sex-selective abortion |   |
|---------------------------------------|------------------------|---|
| Prohibition of sex-selective abortion | _                      | Restrictions on the methods to detect the sex of the foetus |

Age limit for judicial consent (years)

Age when a woman can obtain an abortion without parental or judicial consent

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | Yes                              | 7-12                                      |  |
| Dilatation and evacuation             | <del>-</del>                     | <del>-</del>                              |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | _   |  |
| Misoprostol only                      | <del>-</del>                     | _   |  |
| Other method(s)                       | Yes <sup>1</sup>                 | 7-12                                      |  |



### **United Republic of Tanzania**

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | <del>-</del>                                      | _  |  |
| Misoprostol  | <del>-</del>                                      | <del>-</del>   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | _                  |
| Specialized abortion care public facilities       | <del>-</del>     | _                  |
| Private health-care centres or clinics            | <del>-</del>     | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | _                  |
| Other settings or facilities                      | _                | _                  |

| Health care personnel allowed to provide legal abortions |   |  |
|--|---|--|
| Doctors (speciality not specified)                       | _ |  |
| Specialist doctor, including OB/GYN                      | _ |  |
| Nurse  | _ |  |
| Midwife/nurse-midwife                                    | _ |  |
| Other provider(s)  | _ |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Inf | ormation and guidelines on abortion services                               |              |  |
|-----|--|--------------|--|
|     | National guidelines on clinical and service delivery of induced abortion   | <del>_</del> |  |
|     | National guidelines on clinical and service delivery of post-abortion care | _            |  |
|     | Restrictions on public information on legal abortion services              | _            |  |
|     | Counselling for contraceptive methods during post-abortion care            | _            |  |

| Service delivery requirements for providers or | facilities |
|--|------------|
| Referral linkage to a higher-level facility    | _          |
| Availability of a specialist doctor            | _          |
| Minimum number of beds                         | _          |
| Other facility/provider requirements           | _          |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | _                 | _   |

#### Notes:

- Indicates that data are not available, not applicable or not specified
- 1. Dilation and curettage. Prostaglandin.



Age limit for parental consent (years)

# Abortion laws and policies, 2017

### **United States of America**

| LAWS ON ABORTION 1                               |   |   |  |
|--|---|---|--|
| egal grounds for induced abortion 2              | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | No limit  |  |
| To preserve health                               | Yes                                     | No limit  |  |
| To preserve physical health                      | Yes                                     | _   |  |
| To preserve mental health                        | Yes                                     | _   |  |
| In cases of intellectual or cognitive disability | _                                       | _   |  |
| In cases of incest                               | Yes                                     | _   |  |
| In cases of rape                                 | Yes                                     | _   |  |
| In cases of foetal impairment                    | Yes                                     | _   |  |
| For economic or social reason                    | Yes                                     | _   |  |
| On request                                       | Yes                                     | _   |  |
| For other reason(s)                              | _                                       | _   |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |  |
|---|-----|----------|-----|------------------------------------|-----|--|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |  |

| REQUIREMENTS FOR INDUCED ABORTION            |                        |  |                        |
|--|------------------------|--|------------------------|
| Authorizations required                      |                        | Consent required                             |                        |
| Authorization of health care professional(s) | Varies by jurisdiction | Spousal consent                              | No                     |
| Number of authorizations                     | _                      | Parental consent for minors                  | Varies by jurisdiction |
| Cadre of health care professional            |                        | Consent by another adult                     | _                      |
| Doctor (specialty not specified)             | _                      |  |                        |
| Specialist doctor, including OB/GYN          | _                      | Other requirements                           |                        |
| Nurse  | _                      | Gestational age limits                       | Varies by jurisdiction |
| Midwife/nurse-midwife                        | _                      | Compulsory counselling                       | Varies by jurisdiction |
| Other providers                              | _                      | Compulsory waiting period                    | Varies by jurisdiction |
| Authorized in specially licensed facilities  | Varies by jurisdiction | Length of waiting period (days)              | _                      |
| Judicial authorization                       |                        | Mandatory screening test                     |                        |
| For minors                                   | Varies by jurisdiction | HIV test                                     | _                      |
| In case of rape                              | _                      | Other STI test(s)                            | _                      |
| Police report in case of rape                | No                     | Ultrasound viewing or listening to heartbeat | Varies by jurisdiction |

| Sex-selective abortion                |                        |   |
|---------------------------------------|------------------------|---|
| Prohibition of sex-selective abortion | Varies by jurisdiction | Restrictions on the methods to detect the sex |

Age limit for judicial consent (years)

Age when a woman can obtain an abortion without parental or judicial consent

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | _                                | _   |  |
| Dilatation and evacuation             | Yes                              | <del>_</del>                              |  |
| Combination mifepristone- misoprostol | Yes                              | _   |  |
| Misoprostol only                      | Yes                              | _   |  |
| Other method(s)                       | <del>-</del>                     | _   |  |



#### **United States of America**

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | Yes   | No   |  |
| Misoprostol  | Yes <sup>3</sup>                                  | Yes <sup>4</sup>   |  |

| Settings for providing legal abortion services    | s for providing legal abortion services Induced abortion P |              |  |  |
|---|--|--------------|--|--|
| Primary health care centres                       | <del>-</del>   | <del>-</del> |  |  |
| Secondary (district-level) health-care facilities | <del>-</del>   | _            |  |  |
| Specialized abortion care public facilities       | <del>-</del>   | _            |  |  |
| Private health-care centres or clinics            | <del>-</del>   | _            |  |  |
| NGO health-care centres or clinics                | <del>-</del>   | _            |  |  |
| Other settings or facilities                      | _  | _            |  |  |

| Health care personnel allowed to provide legal abortions  |                  |  |
|---|------------------|--|
| Treatiti care personner anowed to provide legal abortions |                  |  |
| Doctors (speciality not specified)                        | _                |  |
| Specialist doctor, including OB/GYN                       | Yes              |  |
| Nurse   | _                |  |
| Midwife/nurse-midwife                                     | _                |  |
| Other provider(s)   | Yes <sup>5</sup> |  |
|   |                  |  |

| Types of insurance or other coverage for abortion                  |    |
|--|----|
| Public health coverage for induced abortion for all women          | No |
| Public health coverage for induced abortion for<br>poor women only | _  |
| Public health coverage for abortion complications                  | _  |
| Private health coverage for induced abortion                       | _  |
| Other type of coverage   | _  |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | _   |
| National guidelines on clinical and service delivery of post-abortion care | Yes |
| Restrictions on public information on legal abortion services              | _   |
| Counselling for contraceptive methods during<br>post-abortion care         | Yes |

| Service delivery requirements for providers or facilities |              |  |
|---|--------------|--|
| Referral linkage to a higher-level facility               | <del>-</del> |  |
| Availability of a specialist doctor                       | <del>-</del> |  |
| Minimum number of beds                                    | _            |  |
| Other facility/provider requirements                      | _            |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | 6                 | -   |

#### Notes:

- 1. Varies by jurisdiction.
  2. Abortion is governed by the Supreme Court decisions Roe v. Wade and Planned Parenthood v. Casey, which established a woman's right to terminate her pregnancy. States may impose a variety of limitations on access in the interest of protecting women's health and promoting potential life, and may completely proscribe abortion post-viability as long as there is an exception for the woman's life or health.
  3. For gynaecological indications.
  4. With prescription only.
  5. Physician's assistant.
  6. The regulations vary by jurisdiction, however the Religious Freedom Restoration Act, of which many states have their own version, stipulates that neutral laws need to be checked for their impact on religious freedoms. Under the auspices of this Act some hospitals and other entities have claimed a right to object to providing abortion services.



### Uruguay

| LAWS ON ABORTION                                 |   |   |
|--|---|---|
| Legal grounds for induced abortion               | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |
| To save life                                     | Yes                                     | No limit  |
| To preserve health                               | Yes                                     | No limit  |
| To preserve physical health                      | Yes                                     | No limit  |
| To preserve mental health                        | Yes                                     | No limit  |
| In cases of intellectual or cognitive disability | <del>-</del>                            | _   |
| In cases of incest                               | _                                       | _   |
| In cases of rape                                 | Yes                                     | 14  |
| In cases of foetal impairment                    | Yes                                     | No limit  |
| For economic or social reason                    | Yes                                     | No limit  |
| On request                                       | Yes                                     | 12  |
| For other reason(s)                              | _                                       | _   |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |  |
|---|-----|----------|-----|------------------------------------|-----|--|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |  |

|  | REQUIREMENTS FOR INDUCED ABO |                       |
|--|------------------------------|-----------------------|
| Authorizations required                      |                              | Consent required      |
| Authorization of health care professional(s) | Yes                          | Spousal consent       |
| Number of authorizations                     | 3 1                          | Parental consent for  |
| Cadre of health care professional            |                              | Consent by another    |
| Doctor (specialty not specified)             | _                            |                       |
| Specialist doctor, including OB/GYN          | Yes                          | Other requirements    |
| Nurse  | _                            | Gestational age limit |
| Midwife/nurse-midwife                        | <del>_</del>                 | Compulsory counsel    |
| Other providers                              | Yes <sup>2</sup>             | Compulsory waiting    |
| Authorized in specially licensed facilities  | Yes                          | Length of waitin      |
| Judicial authorization                       |                              | Mandatory screening   |
| For minors                                   | No                           | HIV test              |
| In case of rape                              | _                            | Other STI test(s      |
| Police report in case of rape                | Yes                          | Ultrasound viewing of |

| Parental consent for minors                  | No           |
|--|--------------|
| Consent by another adult                     | <del>-</del> |
|  |              |
| Other requirements                           |              |
| Gestational age limits                       | Yes          |
| Compulsory counselling                       | No           |
| Compulsory waiting period                    | Yes          |
| Length of waiting period (days)              | 5 4          |
| Mandatory screening test                     |              |
| HIV test                                     | _            |
| Other STI test(s)                            | _            |
| Ultrasound viewing or listening to heartbeat | _            |

No

| Age when a woman can obtain an abortion without parental or judicial consent |   |  |   |
|--|---|--|---|
| Age limit for parental consent (years)                                       | _ | Age limit for judicial consent (years) | _ |

|                                       | Sex-selective abortion |   |
|---------------------------------------|------------------------|---|
| Prohibition of sex-selective abortion | No                     | Restrictions on the methods to detect the sex of the foetus |

| ACCESS TO ABORTION SERVICES           |                                  |   |  |  |
|---------------------------------------|----------------------------------|---|--|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |  |
| Vacuum aspiration                     | Yes                              | <del>-</del>                              |  |  |
| Dilatation and evacuation             | _                                | <del>-</del>                              |  |  |
| Combination mifepristone- misoprostol | Yes                              | 14  |  |  |
| Misoprostol only                      | Yes                              | 14  |  |  |
| Other method(s)                       | Yes <sup>5</sup>                 | <del>-</del>                              |  |  |



### **Uruguay**

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |
|--|---|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |
| Misoprostol  | Yes <sup>6</sup>                                  | <del>-</del>   |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | _                | <del>-</del>       |
| Specialized abortion care public facilities       | _                | _                  |
| Private health-care centres or clinics            | _                | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | _                | <del>-</del>       |

| Health care personnel allowed to provide legal abortions |              |  |
|--|--------------|--|
| Doctors (speciality not specified)                       | No           |  |
| Specialist doctor, including OB/GYN                      | Yes          |  |
| Nurse  | <del>-</del> |  |
| Midwife/nurse-midwife                                    | _            |  |
| Other provider(s)  | _            |  |

| Types of insurance or other coverage for abortion                  |       |
|--|-------|
| Public health coverage for induced abortion for all women          | _     |
| Public health coverage for induced abortion for<br>poor women only | _     |
| Public health coverage for abortion complications                  | _     |
| Private health coverage for induced abortion                       | _     |
| Other type of coverage   | Yes 7 |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | Yes |
| National guidelines on clinical and service delivery of post-abortion care | Yes |
| Restrictions on public information on legal abortion services              | Yes |
| Counselling for contraceptive methods during<br>post-abortion care         | Yes |

| Service delivery requirements for providers or facilities |   |  |
|---|---|--|
| Referral linkage to a higher-level facility               | _ |  |
| Availability of a specialist doctor                       | _ |  |
| Minimum number of beds                                    | _ |  |
| Other facility/provider requirements                      | _ |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | Yes <sup>8</sup>  | _   |
| Health-care providers  | Yes <sup>9</sup>  | Yes   |

#### Notes:

- Indicates that data are not available, not applicable or not specified.

- A multidisciplinary team of professionals. The multidisciplinary committee is not required in cases of: rape, severe risk for health, foetal malformations incompatible with extra uterine life.

  2. Mental health professional and social worker.

  3. There is no general requirement of parental consent for girls and women below 18 years of age. Whether parental consent is required is determined on a case-by-case basis by the multidisciplinary team assessing whether an abortion request can proceed. Judicial authorization is required only in cases where the parents are involved and the parents and the girl or woman under the age of 18 are unable to reach an agreement.

  4. After first consultation.

  5. Dilation and curettage.

  6. For gynaecological indications.

  7. Women pay a fee for the first consultation and a regulated fee for the medication. No specification is included regarding costs of surgical abortion.

  8. Private facilities only.

  9. Provider type not specified.



### Uzbekistan

| LAWS ON ABORTION 1                               |                                      |   |  |  |
|--|--------------------------------------|---|--|--|
| Legal grounds for induced abortion <sup>2</sup>  | Currently permissible in the country | Gestational limit for each legal ground (weeks) |  |  |
| To save life                                     | Yes                                  | <del>-</del>                                    |  |  |
| To preserve health                               | Yes                                  | 22  |  |  |
| To preserve physical health                      | Yes                                  | 22  |  |  |
| To preserve mental health                        | Yes                                  | 22  |  |  |
| In cases of intellectual or cognitive disability | Yes                                  | 22  |  |  |
| In cases of incest                               | <del>-</del>                         | <del>-</del>                                    |  |  |
| In cases of rape                                 | Yes                                  | 22  |  |  |
| In cases of foetal impairment                    | Yes                                  | 22  |  |  |
| For economic or social reason                    | Yes                                  | 22  |  |  |
| On request                                       | Yes                                  | 12  |  |  |
| For other reason(s)                              | _                                    | _   |  |  |

| Persons who can be criminally charged for an illegal abortion |   |          |     |                                    |   |  |
|---|---|----------|-----|------------------------------------|---|--|
| Woman   | _ | Provider | Yes | Other person who assists the woman | _ |  |

|  | REQUIREMENTS FOR | MENTS FOR INDUCED ABORTION |  |
|--|------------------|----------------------------|--|
| Authorizations required                      |                  | Consent required           |  |
| Authorization of health care professional(s) | Yes              | Spousal consent            |  |
| Number of authorizations                     | 3                | Parental consent for       |  |
| Cadre of health care professional            |                  | Consent by another         |  |
| Doctor (specialty not specified)             | _                |                            |  |
| Specialist doctor, including OB/GYN          | Yes              | Other requirements         |  |
| Nurse  | _                | Gestational age limit      |  |
| Midwife/nurse-midwife                        | _                | Compulsory counsel         |  |
| Other providers                              | _                | Compulsory waiting         |  |
| Authorized in specially licensed facilities  | Yes              | Length of waitin           |  |
| Judicial authorization                       |                  | Mandatory screening        |  |
| For minors                                   | No               | HIV test                   |  |
| In case of rape                              | _                | Other STI test(s           |  |
| Police report in case of rape                | _                | Ultrasound viewing of      |  |

| Parental consent for minors                  | Yes |
|--|-----|
| Consent by another adult                     | Yes |
|  |     |
| Other requirements                           |     |
| Gestational age limits                       | Yes |
| Compulsory counselling                       | No  |
| Compulsory waiting period                    | No  |
| Length of waiting period (days)              | _   |
| Mandatory screening test                     |     |
| HIV test                                     | _   |
| Other STI test(s)                            | _   |
| Ultrasound viewing or listening to heartbeat | _   |

No

| Age when a woman can obtain an abortion without parental or judicial consent |    |  |   |
|--|----|--|---|
| Age limit for parental consent (years)                                       | 14 | Age limit for judicial consent (years) | _ |

|                                       | Sex-selective abortion |   |
|---------------------------------------|------------------------|---|
| Prohibition of sex-selective abortion | No                     | Restrictions on the methods to detect the sex of the foetus |

| ACCESS TO ABORTION SERVICES           |                                  |   |  |  |
|---------------------------------------|----------------------------------|---|--|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |  |
| Vacuum aspiration                     | Yes                              | 12  |  |  |
| Dilatation and evacuation             | <del>-</del>                     | <del>-</del>                              |  |  |
| Combination mifepristone- misoprostol | Yes                              | 22  |  |  |
| Misoprostol only                      | <del>-</del>                     | _   |  |  |
| Other method(s)                       | <del>-</del>                     | <del>-</del>                              |  |  |



#### Uzbekistan

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |  |
| Misoprostol  | No  | _  |  |

| Settings for providing legal abortion services    | services Induced abortion Post-abortion care |   |  |  |
|---|--|---|--|--|
| Primary health care centres                       | No   | _ |  |  |
| Secondary (district-level) health-care facilities | Yes  | _ |  |  |
| Specialized abortion care public facilities       | <del>-</del>                                 | _ |  |  |
| Private health-care centres or clinics            | _  | _ |  |  |
| NGO health-care centres or clinics                | <del>-</del>                                 | _ |  |  |
| Other settings or facilities                      | Yes <sup>4</sup>                             | _ |  |  |

| Health care personnel allowed to provide legal abortions |     |  |
|--|-----|--|
| Doctors (speciality not specified)                       | No  |  |
| Specialist doctor, including OB/GYN                      | Yes |  |
| Nurse  | No  |  |
| Midwife/nurse-midwife                                    | No  |  |
| Other provider(s)  | _   |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | Yes |
| National guidelines on clinical and service delivery of post-abortion care | Yes |
| Restrictions on public information on legal abortion services              | _   |
| Counselling for contraceptive methods during<br>post-abortion care         | Yes |

| Service delivery requirements for providers or facilities |     |  |
|---|-----|--|
| Referral linkage to a higher-level facility               | _   |  |
| Availability of a specialist doctor                       | Yes |  |
| Minimum number of beds                                    | _   |  |
| Other facility/provider requirements                      | _   |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |  |
|--|-------------------|---|--|
| Health-care facilities   | _                 | _   |  |
| Health-care providers  | _                 | _   |  |

#### Notes:

- 1. Varies by jurisdiction.
  2. The social indication comprises the following: the death of her husband during pregnancy; the woman or her husband being in prison; persons deprived of their right to motherhood; four or more existing children; divorce during this pregnancy; pregnancy after rape; pregnancy in adolescents under 17 years of age; women or husband are disabled; the presence of a disabled child in the family; malformations in the foetus confirmed by ultrasound. If the woman has other grounds for non-medical termination pregnancy her case is addressed by a Commission on an individual basis.
  3. Decisions on abortion access under medical indications are made by a commission consisting of three people: an obstetrician-gynaecologist, a physician with a specialisation relevant to the woman's health condition and the head of the institution.
  4. Medical termination of pregnancy before 8 weeks is carried out in outpatient polyclinic conditions or in gynaecological wards of clinics. Medication abortion from 9 weeks to 22 weeks is carried out in gynaecological wards of clinics. All surgical termination of pregnancy before 8 personal properties of gestational age is carried out in hospitals which have operating and intensive care units available.



Prohibition of sex-selective abortion

# Abortion laws and policies, 2017

#### Vanuatu

| LAWS ON ABORTION                                 |                                      |   |  |  |
|--|--------------------------------------|---|--|--|
| Legal grounds for induced abortion               | Currently permissible in the country | Gestational limit for each legal ground (weeks) |  |  |
| To save life                                     | Yes                                  | <del>-</del>                                    |  |  |
| To preserve health                               | Yes                                  | _   |  |  |
| To preserve physical health                      | Yes                                  | <del>-</del>                                    |  |  |
| To preserve mental health                        | Yes                                  | <del>-</del>                                    |  |  |
| In cases of intellectual or cognitive disability | No                                   | <del>-</del>                                    |  |  |
| In cases of incest                               | No                                   | <del>-</del>                                    |  |  |
| In cases of rape                                 | No                                   | <del>-</del>                                    |  |  |
| In cases of foetal impairment                    | No                                   | <del>-</del>                                    |  |  |
| For economic or social reason                    | No                                   | <del>-</del>                                    |  |  |
| On request                                       | No                                   | <del>-</del>                                    |  |  |
| For other reason(s)                              | _                                    | _   |  |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |  |  |
|--|--|--|
| Authorizations required                      | Consent required                             |  |
| Authorization of health care professional(s) | Spousal consent —                            |  |
| Number of authorizations                     | Parental consent for minors                  |  |
| Cadre of health care professional            | Consent by another adult —                   |  |
| Doctor (specialty not specified)             | -  |  |
| Specialist doctor, including OB/GYN          | Other requirements                           |  |
| Nurse  | Gestational age limits —                     |  |
| Midwife/nurse-midwife                        | Compulsory counselling —                     |  |
| Other providers                              | Compulsory waiting period —                  |  |
| Authorized in specially licensed facilities  | Length of waiting period (days)              |  |
| Judicial authorization                       | Mandatory screening test                     |  |
| For minors                                   | – HIV test –                                 |  |
| In case of rape                              | Other STI test(s)                            |  |
| Police report in case of rape                | Ultrasound viewing or listening to heartbeat |  |

| Age when a woman can obtain an abortion without parental or judicial consent |  |  |
|--|--|--|
| Age limit for parental consent (years)                                       | <ul><li>Age limit for judicial consent (years)</li></ul> |  |
|  |  |  |
|  | Sex-selective abortion                                   |  |

Restrictions on the methods to detect the sex

| ACCESS TO ABORTION SERVICES  |              |              |  |  |
|--|--------------|--------------|--|--|
| Methods for induced abortions  Currently allowed in the country  Gestational limit for each method (weeks) |              |              |  |  |
| Vacuum aspiration  | _            | <del>-</del> |  |  |
| Dilatation and evacuation  | <del>-</del> | <del>-</del> |  |  |
| Combination mifepristone- misoprostol  | _            | _            |  |  |
| Misoprostol only   | _            | <del>-</del> |  |  |
| Other method(s)  | _            | <del>-</del> |  |  |



#### Vanuatu

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |
|--|---|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |
| Misoprostol  | Yes <sup>2</sup>                                  | <del>-</del>   |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | _                  |
| Specialized abortion care public facilities       | <del>-</del>     | _                  |
| Private health-care centres or clinics            | <del>-</del>     | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | _                  |
| Other settings or facilities                      | _                | _                  |

| Doctors (speciality not specified)  | _ |
|-------------------------------------|---|
| Specialist doctor, including OB/GYN | _ |
| Nurse                               | _ |
| Midwife/nurse-midwife               | _ |
| Other provider(s)                   | _ |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |   |
|--|---|
| National guidelines on clinical and service delivery of induced abortion   | _ |
| National guidelines on clinical and service delivery of post-abortion care | _ |
| Restrictions on public information on legal abortion services              | _ |
| Counselling for contraceptive methods during<br>post-abortion care         | _ |

| Service delivery requirements for providers or facilities |   |  |
|---|---|--|
| Referral linkage to a higher-level facility               | _ |  |
| Availability of a specialist doctor                       | _ |  |
| Minimum number of beds                                    | _ |  |
| Other facility/provider requirements                      | _ |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | _                 | _   |

#### Notes:

- 1. Surgical operation performed in good faith and with reasonable care and skill upon an unborn child for the preservation of the mother's life, if the performance of the operation is reasonable, having regard to the patient's state at the time and to all the circumstances of the case.

  2. For gynaecological indications.



Venezuela (Bolivarian Republic of)

|  | LAWS                     | ON ABORTION                                  |   |
|--|--------------------------|--|---|
| egal grounds for induced abortion                |                          | Currently permissible in the country         | Gestational limit for each legal ground (weeks) |
| To save life                                     |                          | Yes  | 22  |
| To preserve health                               |                          | No   | _   |
| To preserve physical health                      |                          | No   | _   |
| To preserve mental health                        |                          | No   | _   |
| In cases of intellectual or cognitive disability |                          | No   | _   |
| In cases of incest                               |                          | No   | _   |
| In cases of rape                                 |                          | No   | _   |
| In cases of foetal impairment                    |                          | No   | <del>-</del>                                    |
| For economic or social reason                    |                          | No   | <del>-</del>                                    |
| On request                                       |                          | No   | _   |
| For other reason(s)                              |                          | _  | _   |
| Persor   | s who can be criminally  | charged for an illegal abortion              |   |
| Woman Yes  | Provider                 | Yes Other person who                         | assists the woman Yes                           |
|  |                          |  |   |
|  | REQUIREMENTS             | FOR INDUCED ABORTION                         |   |
| uthorizations required                           |                          | Consent required                             |   |
| Authorization of health care professional(s)     | _                        | Spousal consent                              | <del>-</del>                                    |
| Number of authorizations                         | _                        | Parental consent for minors                  | <del>-</del>                                    |
| Cadre of health care professional                |                          | Consent by another adult                     | <del>-</del>                                    |
| Doctor (specialty not specified)                 | _                        |  |   |
| Specialist doctor, including OB/GYN              | _                        | Other requirements                           |   |
| Nurse  | _                        | Gestational age limits                       | Yes   |
| Midwife/nurse-midwife                            | _                        | Compulsory counselling                       | <del>-</del>                                    |
| Other providers                                  | _                        | Compulsory waiting period                    | <del>-</del>                                    |
| Authorized in specially licensed facilities      | _                        | Length of waiting period (d                  | lays) —   |
| Judicial authorization                           |                          | Mandatory screening test                     |   |
| For minors                                       | _                        | HIV test                                     | <del>-</del>                                    |
| In case of rape                                  | _                        | Other STI test(s)                            | <del>-</del>                                    |
| Police report in case of rape                    | _                        | Ultrasound viewing or listening              | to heartbeat —                                  |
|  |                          |  |   |
|  | man can obtain an aborti | on without parental or judicial consent      |   |
| Age limit for parental consent (years)           | _                        | Age limit for judicial consent (ye           | ears) —   |
|  | Sex-selectiv             | e abortion                                   |   |
| Prohibition of sex-selective abortion            | _                        | Restrictions on the methods to of the foetus | detect the sex                                  |
|  |                          |  |   |
|  | ACCESS TO                | ABORTION SERVICES                            |   |
|  |                          |  | Out of the set Posts for                        |

| ACCESS TO ABORTION SERVICES           |                                  |   |
|---------------------------------------|----------------------------------|---|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |
| Vacuum aspiration                     | <del>-</del>                     | _   |
| Dilatation and evacuation             | <del>-</del>                     | _   |
| Combination mifepristone- misoprostol | <del>-</del>                     | _   |
| Misoprostol only                      | _                                | _   |
| Other method(s)                       | _                                | _   |



### Venezuela (Bolivarian Republic of)

| ACCESS TO ABORTION SERVICES (continued)  |                  |              |  |  |
|--|------------------|--------------|--|--|
| Drugs for inducing abortion Included in the official list Allowed to be sold or of authorized drugs distributed by pharmacies or drug st |                  |              |  |  |
| Mifepristone and/or combination mifepristone-misoprostol   | No               | <del>-</del> |  |  |
| Misoprostol  | Yes <sup>2</sup> | <del>_</del> |  |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | Yes                |
| Secondary (district-level) health-care facilities | <del>-</del>     | Yes                |
| Specialized abortion care public facilities       | _                | <del>-</del>       |
| Private health-care centres or clinics            | <del>-</del>     | Yes                |
| NGO health-care centres or clinics                | <del>-</del>     | Yes                |
| Other settings or facilities                      | _                | _                  |

| Health care personnel allowed to provide legal abortions | ;            |
|--|--------------|
| Doctors (speciality not specified)                       | _            |
| Specialist doctor, including OB/GYN                      | _            |
| Nurse  | <del>_</del> |
| Midwife/nurse-midwife                                    | <del>_</del> |
| Other provider(s)  | _            |
|  |              |
| Information and guidelines on abortion services          |              |
| National guidelines on clinical and service              | _            |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | _   |
| National guidelines on clinical and service delivery of post-abortion care | Yes |
| Restrictions on public information on legal abortion services              | _   |
| Counselling for contraceptive methods during<br>post-abortion care         | Yes |

| Service delivery requirements for providers or | facilities |
|--|------------|
| Referral linkage to a higher-level facility    | _          |
| Availability of a specialist doctor            | _          |
| Minimum number of beds                         | _          |
| Other facility/provider requirements           | _          |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | _                 | _   |

#### Notes:

- Abortion is permitted for therapeutic purposes.
   For gynaecological indications.



### **Viet Nam**

| LAWS ON ABORTION   |              |              |  |  |  |
|--|--------------|--------------|--|--|--|
| Legal grounds for induced abortion Currently permissible Gestational limit for in the country each legal ground (weeks |              |              |  |  |  |
| To save life   | _            | _            |  |  |  |
| To preserve health   | <del>-</del> | <del>-</del> |  |  |  |
| To preserve physical health  | <del>-</del> | _            |  |  |  |
| To preserve mental health  | -            | _            |  |  |  |
| In cases of intellectual or cognitive disability   | _            | _            |  |  |  |
| In cases of incest   | _            | _            |  |  |  |
| In cases of rape   | _            | _            |  |  |  |
| In cases of foetal impairment  | _            | _            |  |  |  |
| For economic or social reason  | _            | _            |  |  |  |
| On request   | Yes          | _            |  |  |  |
| For other reason(s)  | _            | _            |  |  |  |

|       |   | Persons who can be criminally | / charged for ar | n illegal abortion                 |     |  |
|-------|---|-------------------------------|------------------|------------------------------------|-----|--|
| Woman | _ | Provider                      | Yes              | Other person who assists the woman | Yes |  |

|  | REQUIREMENTS FOR INDUCED ABORTION |  |  |
|--|-----------------------------------|--|--|
| Authorizations required                      |                                   | Consent required                             |  |
| Authorization of health care professional(s) | Yes                               | Spousal consent                              |  |
| Number of authorizations                     | _                                 | Parental consent for minors                  |  |
| Cadre of health care professional            |                                   | Consent by another adult                     |  |
| Doctor (specialty not specified)             | _                                 |  |  |
| Specialist doctor, including OB/GYN          | _                                 | Other requirements                           |  |
| Nurse  | _                                 | Gestational age limits                       |  |
| Midwife/nurse-midwife                        | <del>_</del>                      | Compulsory counselling                       |  |
| Other providers                              | _                                 | Compulsory waiting period                    |  |
| Authorized in specially licensed facilities  | Yes                               | Length of waiting period (days)              |  |
| Judicial authorization                       |                                   | Mandatory screening test                     |  |
| For minors                                   | Yes                               | HIV test                                     |  |
| In case of rape                              | _                                 | Other STI test(s)                            |  |
| Police report in case of rape                | _                                 | Ultrasound viewing or listening to heartbeat |  |

| Consent by another adult                     | _   |  |
|--|-----|--|
|  |     |  |
| Other requirements                           |     |  |
| Gestational age limits                       | Yes |  |
| Compulsory counselling                       | _   |  |
| Compulsory waiting period                    | _   |  |
| Length of waiting period (days)              | _   |  |
| Mandatory screening test                     |     |  |
| HIV test                                     | _   |  |
| Other STI test(s)                            | _   |  |
| Ultrasound viewing or listening to heartbeat | _   |  |
|  |     |  |

Yes

| Age when a woman can obtain an abortion without parental or judicial consent |   |  |   |
|--|---|--|---|
| Age limit for parental consent (years)                                       | _ | Age limit for judicial consent (years) | _ |
|  |   |  |   |

|                                       | Sex-selective abortion |   |       |  |
|---------------------------------------|------------------------|---|-------|--|
| Prohibition of sex-selective abortion | Yes                    | Restrictions on the methods to detect the sex of the foetus | Yes 1 |  |

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | Yes                              | 6-12                                      |  |
| Dilatation and evacuation             | Yes                              | 13-18                                     |  |
| Combination mifepristone- misoprostol | Yes                              | 13-22                                     |  |
| Misoprostol only                      | _                                | _   |  |
| Other method(s)                       | <del>-</del>                     | _   |  |



#### **Viet Nam**

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | <del>-</del>   |  |
| Misoprostol  | Yes <sup>2</sup>                                  | <del>-</del>   |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | Yes              | _                  |
| Secondary (district-level) health-care facilities | Yes              | _                  |
| Specialized abortion care public facilities       | Yes              | <del>-</del>       |
| Private health-care centres or clinics            | Yes              | _                  |
| NGO health-care centres or clinics                | _                | _                  |
| Other settings or facilities                      | _                | <del>-</del>       |

| Health care personnel allowed to provide legal abortions |                  |  |
|--|------------------|--|
| Doctors (speciality not specified)                       | Yes              |  |
| Specialist doctor, including OB/GYN                      | Yes              |  |
| Nurse  | _                |  |
| Midwife/nurse-midwife                                    | Yes              |  |
| Other provider(s)  | Yes <sup>3</sup> |  |
|  |                  |  |

| Types of insurance or other coverage for abortion                  |     |
|--|-----|
| Public health coverage for induced abortion for all women          | Yes |
| Public health coverage for induced abortion for<br>poor women only | _   |
| Public health coverage for abortion complications                  | _   |
| Private health coverage for induced abortion                       | _   |
| Other type of coverage   | _   |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | Yes |
| National guidelines on clinical and service delivery of post-abortion care | Yes |
| Restrictions on public information on legal abortion services              | _   |
| Counselling for contraceptive methods during<br>post-abortion care         | Yes |

| Service delivery requirements for providers or facilities |                  |  |  |
|---|------------------|--|--|
| Referral linkage to a higher-level facility               | Yes              |  |  |
| Availability of a specialist doctor                       | Yes              |  |  |
| Minimum number of beds                                    | _                |  |  |
| Other facility/provider requirements                      | Yes <sup>4</sup> |  |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | _                 | _   |

Notes:

- Doctor must not tell the woman about the sex of foetus. Diagnosis for foetal sex selection through measures identifying symptoms, pulse, blood tests, genetic, amniotic fluid cells, ultrasound is restricted.
   For gynaecological indications.
   Assistant obtor (Obstetric-Paediatric specialist) can provide manual vacuum aspiration (MVA).



### Yemen

| LAWS ON ABORTION                                 |   |   |  |
|--|---|---|--|
| egal grounds for induced abortion                | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | _   |  |
| To preserve health                               | No                                      | _   |  |
| To preserve physical health                      | No                                      | _   |  |
| To preserve mental health                        | No                                      | <del>-</del>                                    |  |
| In cases of intellectual or cognitive disability | No                                      | _   |  |
| In cases of incest                               | No                                      | _   |  |
| In cases of rape                                 | No                                      | _   |  |
| In cases of foetal impairment                    | No                                      | _   |  |
| For economic or social reason                    | No                                      | _   |  |
| On request                                       | No                                      | _   |  |
| For other reason(s)                              | _                                       | _   |  |

| Persons who can be criminally charged for an illegal abortion |     |              |                                    |   |
|---|-----|--------------|------------------------------------|---|
| Woman   | Yes | Provider Yes | Other person who assists the woman | _ |

| REQUIREMENTS FOR INDUCED ABORTION            |     |  |     |  |
|--|-----|--|-----|--|
| Authorizations required                      |     | Consent required                             |     |  |
| Authorization of health care professional(s) | Yes | Spousal consent                              | Yes |  |
| Number of authorizations                     | 2   | Parental consent for minors                  | Yes |  |
| Cadre of health care professional            |     | Consent by another adult                     | _   |  |
| Doctor (specialty not specified)             | Yes |  |     |  |
| Specialist doctor, including OB/GYN          | Yes | Other requirements                           |     |  |
| Nurse  | _   | Gestational age limits                       | _   |  |
| Midwife/nurse-midwife                        | _   | Compulsory counselling                       | _   |  |
| Other providers                              | _   | Compulsory waiting period                    | _   |  |
| Authorized in specially licensed facilities  | _   | Length of waiting period (days)              | _   |  |
| Judicial authorization                       |     | Mandatory screening test                     |     |  |
| For minors                                   | _   | HIV test                                     | _   |  |
| In case of rape                              | _   | Other STI test(s)                            | _   |  |
| Police report in case of rape                | _   | Ultrasound viewing or listening to heartbeat | _   |  |

| Age when a won                         | an ear obtain an abortion without parental or judicial consent | brain an abortion without parental or judicial consent |  |
|--|--|--|--|
| Age limit for parental consent (years) | <ul><li>Age limit for judicial consent (years)</li></ul>       |  |  |
|  |  |  |  |
|  |  |  |  |

|                                       | Sex-selective aborti | ion   |
|---------------------------------------|----------------------|---|
| Prohibition of sex-selective abortion | _                    | Restrictions on the methods to detect the sex of the foetus |
|                                       |                      |   |

| ACCESS TO ABORTION SERVICES           |                                  |   |  |  |
|---------------------------------------|----------------------------------|---|--|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |  |
| Vacuum aspiration                     | _                                | <del>-</del>                              |  |  |
| Dilatation and evacuation             | <del>-</del>                     | <del>-</del>                              |  |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | <del>-</del>                              |  |  |
| Misoprostol only                      | _                                | <del>-</del>                              |  |  |
| Other method(s)                       | _                                | _   |  |  |



#### Yemen

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |  |
|--|---|--|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |  |
| Mifepristone and/or combination mifepristone-misoprostol | No  | _  |  |  |
| Misoprostol  | Yes 1   | <del>_</del>   |  |  |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | <del>-</del>     | _                  |
| Specialized abortion care public facilities       | _                | _                  |
| Private health-care centres or clinics            | <del>-</del>     | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | Yes <sup>2</sup> | _                  |

| Health care personnel allowed to provide legal abortions                 |              |
|--|--------------|
| Doctors (speciality not specified)                                       | _            |
| Specialist doctor, including OB/GYN                                      | _            |
| Nurse  | _            |
| Midwife/nurse-midwife  | _            |
| Other provider(s)  | <del>-</del> |
|  |              |
| Information and guidelines on abortion services                          |              |
| National guidelines on clinical and service delivery of induced abortion |              |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                             |   |
|---|---|
|   |   |
| National guidelines on clinical and service<br>delivery of induced abortion | _ |
| National guidelines on clinical and service delivery of post-abortion care  | _ |
| Restrictions on public information on legal abortion services               | _ |
| Counselling for contraceptive methods during post-abortion care             | _ |

| Service delivery requirements for providers or facilities |   |  |
|---|---|--|
| Referral linkage to a higher-level facility               | _ |  |
| Availability of a specialist doctor                       | _ |  |
| Minimum number of beds                                    | _ |  |
| Other facility/provider requirements                      | _ |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | _                 | _   |

#### Notes:

- Indications not specified.
   Public health institutions.



Prohibition of sex-selective abortion

# Abortion laws and policies, 2017

#### Zambia

| LAWS ON ABORTION 1                               |   |   |  |
|--|---|---|--|
| egal grounds for induced abortion <sup>2</sup>   | Currently permissible<br>in the country | Gestational limit for each legal ground (weeks) |  |
| To save life                                     | Yes                                     | <del>_</del>                                    |  |
| To preserve health                               | Yes                                     | _   |  |
| To preserve physical health                      | Yes                                     | <del>-</del>                                    |  |
| To preserve mental health                        | Yes                                     | <del>-</del>                                    |  |
| In cases of intellectual or cognitive disability | <del>-</del>                            | <del>-</del>                                    |  |
| In cases of incest                               | No                                      | <del>-</del>                                    |  |
| In cases of rape                                 | Yes                                     | <del>-</del>                                    |  |
| In cases of foetal impairment                    | Yes                                     | <del>-</del>                                    |  |
| For economic or social reason                    | _                                       | _   |  |
| On request                                       | _                                       | <del>-</del>                                    |  |
| For other reason(s)                              | Yes <sup>3</sup>                        | _   |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |                  |  |     |  |
|--|------------------|--|-----|--|
| Authorizations required                      |                  | Consent required                             |     |  |
| Authorization of health care professional(s) | Yes              | Spousal consent                              | No  |  |
| Number of authorizations                     | 3                | Parental consent for minors                  | Yes |  |
| Cadre of health care professional            |                  | Consent by another adult                     | Yes |  |
| Doctor (specialty not specified)             | Yes              |  |     |  |
| Specialist doctor, including OB/GYN          | _                | Other requirements                           |     |  |
| Nurse  | _                | Gestational age limits                       | _   |  |
| Midwife/nurse-midwife                        | _                | Compulsory counselling                       | _   |  |
| Other providers                              | Yes <sup>4</sup> | Compulsory waiting period                    | _   |  |
| Authorized in specially licensed facilities  | Yes              | Length of waiting period (days)              | _   |  |
| Judicial authorization                       |                  | Mandatory screening test                     |     |  |
| For minors                                   | No               | HIV test                                     | _   |  |
| In case of rape                              | _                | Other STI test(s)                            | _   |  |
| Police report in case of rape                | _                | Ultrasound viewing or listening to heartbeat | _   |  |

|  | Sex-selective | abortion                               |   |
|--|---------------|--|---|
|  |               |  |   |
| Age limit for parental consent (years) | 18            | Age limit for judicial consent (years) | _ |

Restrictions on the methods to detect the sex

Age when a woman can obtain an abortion without parental or judicial consent

| ACCESS TO ABORTION SERVICES           |                                  |   |  |
|---------------------------------------|----------------------------------|---|--|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |  |
| Vacuum aspiration                     | _                                | _   |  |
| Dilatation and evacuation             | <del>-</del>                     | _   |  |
| Combination mifepristone- misoprostol | <del>-</del>                     | _   |  |
| Misoprostol only                      | _                                | _   |  |
| Other method(s)                       | <del>-</del>                     | _   |  |



#### Zambia

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |  |
|--|---|--|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |  |
| Mifepristone and/or combination mifepristone-misoprostol | Yes   | Yes <sup>5</sup>   |  |
| Misoprostol  | Yes <sup>6</sup>                                  | Yes <sup>7</sup>   |  |

| Settings for providing legal abortion services    | Post-abortion care |              |
|---|--------------------|--------------|
| Primary health care centres                       | No —               |              |
| Secondary (district-level) health-care facilities | _                  | _            |
| Specialized abortion care public facilities       | <del>-</del>       | _            |
| Private health-care centres or clinics            | _                  | _            |
| NGO health-care centres or clinics                | <del>-</del>       | <del>-</del> |
| Other settings or facilities                      | Yes <sup>8</sup>   | _            |

| Health care personnel allowed to provide legal abortions |                  |  |
|--|------------------|--|
| Doctors (speciality not specified)                       | _                |  |
| Specialist doctor, including OB/GYN                      | _                |  |
| Nurse  | _                |  |
| Midwife/nurse-midwife                                    | _                |  |
| Other provider(s)  | Yes <sup>9</sup> |  |
|  |                  |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |     |
|--|-----|
| National guidelines on clinical and service delivery of induced abortion   | _   |
| National guidelines on clinical and service delivery of post-abortion care | _   |
| Restrictions on public information on legal abortion services              | _   |
| Counselling for contraceptive methods during post-abortion care            | Yes |
|  |     |

| Service delivery requirements for providers or facilities |   |  |
|---|---|--|
| Referral linkage to a higher-level facility               | _ |  |
| Availability of a specialist doctor                       | _ |  |
| Minimum number of beds                                    | _ |  |
| Other facility/provider requirements                      | _ |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | Yes <sup>10</sup> | _   |

#### Notes:

- Indicates that data are not available, not applicable or not specified.
- Includes that dual are not available, not applicable or not specified.

  1. Varies by jurisdiction.
  2. A person is not criminally responsible for performing in good faith and with reasonable care and skill a surgical operation upon any person for his benefit, or upon an unborn child for the preservation of the mother's life, if the performance of the operation is reasonable, having regard to the patient's state at the time, and to all the circumstances of the case.

  3. Risk of injust to the physicial or mental health of any existing children of the pregnant woman.

  4. Registered medical practitioner registered as such under the provisions of the Medical and Allied Professions Act.

  5. With prescription only.

  6. Indications not specified.

  7. With prescription only.

  8. Hospital

  9. Registered medical practitioners.

  10. Provider type not specified.



Prohibition of sex-selective abortion

Other method(s)

# Abortion laws and policies, 2017

#### **Zimbabwe**

| LAWS ON ABORTION                                 |                                      |   |  |  |
|--|--------------------------------------|---|--|--|
| Legal grounds for induced abortion               | Currently permissible in the country | Gestational limit for each legal ground (weeks) |  |  |
| To save life                                     | Yes                                  | _   |  |  |
| To preserve health                               | _                                    | _   |  |  |
| To preserve physical health                      | Yes                                  | _   |  |  |
| To preserve mental health                        | -                                    | <del>-</del>                                    |  |  |
| In cases of intellectual or cognitive disability | No                                   | <del>-</del>                                    |  |  |
| In cases of incest                               | Yes                                  | <del>-</del>                                    |  |  |
| In cases of rape                                 | Yes                                  | <del>-</del>                                    |  |  |
| In cases of foetal impairment                    | Yes                                  | <del>-</del>                                    |  |  |
| For economic or social reason                    | No                                   | _   |  |  |
| On request                                       | No                                   | <del>-</del>                                    |  |  |
| For other reason(s)                              | _                                    | _   |  |  |

| Persons who can be criminally charged for an illegal abortion |     |          |     |                                    |     |
|---|-----|----------|-----|------------------------------------|-----|
| Woman   | Yes | Provider | Yes | Other person who assists the woman | Yes |

| REQUIREMENTS FOR INDUCED ABORTION            |     |  |   |
|--|-----|--|---|
| Authorizations required Consent required     |     |  |   |
| Authorization of health care professional(s) | Yes | Spousal consent                              | _ |
| Number of authorizations                     | 2   | Parental consent for minors                  | _ |
| Cadre of health care professional            |     | Consent by another adult                     | _ |
| Doctor (specialty not specified)             | Yes |  |   |
| Specialist doctor, including OB/GYN          | _   | Other requirements                           |   |
| Nurse  | _   | Gestational age limits                       | _ |
| Midwife/nurse-midwife                        | _   | Compulsory counselling                       | _ |
| Other providers                              | _   | Compulsory waiting period                    | _ |
| Authorized in specially licensed facilities  | _   | Length of waiting period (days)              | _ |
| Judicial authorization                       |     | Mandatory screening test                     |   |
| For minors                                   | _   | HIV test                                     | _ |
| In case of rape                              | Yes | Other STI test(s)                            | _ |
| Police report in case of rape                | _   | Ultrasound viewing or listening to heartbeat | _ |

|  |  | <u>/                                    </u> |
|--|--|--|
| Age limit for parental consent (years) | <ul> <li>Age limit for judicial consent (years)</li> </ul> | _  |
|  |  |  |
| Say calactive shortion                 |  |  |

Restrictions on the methods to detect the sex

Yes 1

Age when a woman can obtain an abortion without parental or judicial consent

| ACCESS TO ABORTION SERVICES           |                                  |   |
|---------------------------------------|----------------------------------|---|
| Methods for induced abortions         | Currently allowed in the country | Gestational limit for each method (weeks) |
| Vacuum aspiration                     | Yes                              | 13  |
| Dilatation and evacuation             | Yes                              | 13  |
| Combination mifepristone- misoprostol | <del>-</del>                     | <del>-</del>                              |
| Misoprostol only                      | <del>-</del>                     | _   |



#### **Zimbabwe**

| ACCESS TO ABORTION SERVICES (continued)                  |   |  |
|--|---|--|
| Drugs for inducing abortion                              | Included in the official list of authorized drugs | Allowed to be sold or distributed by pharmacies or drug stores |
| Mifepristone and/or combination mifepristone-misoprostol | Yes   | Yes <sup>2</sup>   |
| Misoprostol  | Yes <sup>3</sup>                                  | Yes <sup>4</sup>   |

| Settings for providing legal abortion services    | Induced abortion | Post-abortion care |
|---|------------------|--------------------|
| Primary health care centres                       | <del>-</del>     | <del>-</del>       |
| Secondary (district-level) health-care facilities | _                | <del>-</del>       |
| Specialized abortion care public facilities       | _                | _                  |
| Private health-care centres or clinics            | _                | _                  |
| NGO health-care centres or clinics                | <del>-</del>     | <del>-</del>       |
| Other settings or facilities                      | _                | <del>-</del>       |

| Health care personnel allowed to provide legal abortions |     |  |
|--|-----|--|
| Doctors (speciality not specified)                       | Yes |  |
| Specialist doctor, including OB/GYN                      | _   |  |
| Nurse  | _   |  |
| Midwife/nurse-midwife                                    | _   |  |
| Other provider(s)  | _   |  |

| Types of insurance or other coverage for abortion                  |   |
|--|---|
| Public health coverage for induced abortion for all women          | _ |
| Public health coverage for induced abortion for<br>poor women only | _ |
| Public health coverage for abortion complications                  | _ |
| Private health coverage for induced abortion                       | _ |
| Other type of coverage   | _ |

| Information and guidelines on abortion services                            |   |
|--|---|
| National guidelines on clinical and service delivery of induced abortion   | _ |
| National guidelines on clinical and service delivery of post-abortion care | _ |
| Restrictions on public information on legal abortion services              | _ |
| Counselling for contraceptive methods during<br>post-abortion care         | _ |

| Service delivery requirements for providers or facilities |   |  |
|---|---|--|
| Referral linkage to a higher-level facility               | _ |  |
| Availability of a specialist doctor                       | _ |  |
| Minimum number of beds                                    | _ |  |
| Other facility/provider requirements                      | _ |  |

| Conscientious objection to the provision of legally induced abortion | Allowed to object | Required to refer to alternative provider or facility |
|--|-------------------|---|
| Health-care facilities   | _                 | _   |
| Health-care providers  | Yes <sup>5</sup>  | _   |

#### Notes:

- Dilation and curettage.
   With prescription only.
   For gynaecological indications.
   With prescription only.
   Provider type not specified.