



Abortion in South Africa is legal South Africa. Yet most women do not know where to access safe abortion services, how to obtain information about abortion facilities in South Africa or that they are legally entitled to a free abortion in the public health care facilities.

The SRJC, together with partners and allies, has put together this pamphlet to ensure that you have basic information on your right to access safe and legal abortion, as well as helping you assess whether abortion providers you see advertised are legal and safe or not.

Reproductive Rights are Human Rights.

We firmly believe and agree with the Choice of Termination of Pregnancy Act that:

The decision to have children is part of to women's access to reproductive health care services. This also includes contraception, termination of pregnancy, as well as sexuality education and counselling programmes and services.

Women and girls have the right to be informed of and to have access to safe, effective, affordable and acceptable methods of fertility regulation of their choice,

Women have the right to access to appropriate health care services and the government has the responsibility to provide reproductive health to all, and also to provide safe conditions under which the right of choice can be exercised without fear or harm or stigma;

All women have the right to access safe and legal abortions (termination of pregnancy), for free at a government hospital or clinic during the first 3 months of pregnancy. Before the end of the first 3 months of pregnancy, an abortion can be carried out by a doctor OR a trained registered nurse or midwife – therefore making an abortion more accessible earlier in the pregnancy.

Health workers CANNOT refuse to perform an abortion because of:

- Your age
 If you are under 18, you can ask a trusted adult for example, a parent, aunt or teacher, for support and to accompany you while you have the abortion, if you want to. No one, including your parents, has the right to say you cannot have the abortion if you want it.
- 2. It is your decision not your family or husband or boyfriend or partner's
- Any other reason not related to your physical health -- such as being a sex worker, being married, or being a migrant, refugee or asylum seeker.
- There is no limit on the amount of abortions that you allowed to have under South African law. Remember, you always have the right to choose what is best for you and your body.

HOW TO ACCESS SAFE AND LEGAL ABORTION SERVICES

To have a free abortion at a public health clinic or hospital:

First, you need to go to a local primary healthcare clinic. The primary health care clinic must:

- Examine you to confirm that you are pregnant by doing a urine test
- Provide counselling services, if you choose to have counselling
- Make an appointment for the abortion; or give you a referral letter to a public health clinic or hospital where the abortion can be performed.

If you are HIV positive, it is important to ensure your health care provider knows about your status as they may need to give you antibiotics when you have the procedure. This is for your own personal health and safety during the procedure.

NOTE: The law says health workers MUST inform you of your rights and MUST refer you to a public health clinic or hospital where you can get these services. Health workers CANNOT refuse to help you have an abortion for any reason. Health workers who are unwilling to give the service for any reason must refer you to a colleague who is willing to do so; or to the appropriate health care facility near you with a referral letter and a booking.

Administrative staff, pharmacists, security, or other clinic staff have no right to refuse to assist you. When you arrive for services they are obliged to assist you.

Second, you will have an appointment to have the abortion at a clinic or hospital that has trained staff and equipment to do this safely.

Where else can you go to have a safe abortion?

Private doctors and non-profit organisations who are trained and qualified to do abortions also provide safe and legal abortions. Private health facilities and organisations do charge fees for this (sometimes thousands of rands).

Timeline for pregnancy:	Conditions:	Abortion performed by:
First 12 weeks of pregnancy	No conditions – available on request	A doctor, a nurse or a registered midwife
13-20 weeks of pregnancy	Abortion available under the following conditions: - Rape or incest - Danger to your mental or physical health - The fetus is not viable - If the pregnancy would significantly affect your economic or social circumstances	A doctor
After 20 weeks of pregnancy	Abortion is only available in limited circumstances, namely: - If the pregnancy is a danger to your life or the health of the fetus	A doctor

Even though the law says you have a right to an abortion at a public clinic, for free, many women in South Africa still have informal/illegal abortions. This happens because:

- The health workers at the public clinic refuse to give abortions, or to send you to another health provider (this is illegal)
- Private legal abortion providers may charge more money, and they may be far away or hard to reach
- You have been pregnant for more than 3 months; after this time only a medical doctor can perform this procedure and there are not many doctors providing this service.
- Many of the illegal providers offer this service as it the Department of Health does not have enough doctors providing services for women who are over three months pregnant.

An abortion done by a person who is not trained and unqualified and has not been designated as an abortion service provider by your provincial Department of Health can be a danger to your health and your life.

Some ways to tell if the provider is "illegal" or "informal":

- They only provide a cell phone number
- They do not provide a landline number
- They do not advertise their physical address
- They do not tell you about the methods they use
- They want you to pay cash up front and do not offer other payment methods
- They use medical abortion tablets, but only give one kind of tablet. For a medical abortion you need two different types of tablets taken at different times.
- They tell you to not come back but rather to go to a government hospital if you have a problem.
- They tell you that they can do the abortion up to 20 weeks 10 weeks after your last period or more.

Abortion methods:

If you are considering going for an abortion, speak to a medical practitioner about the best methods available to you. With a legal provider, abortion is a very safe procedure.

Each woman should choose the method that is best for her own circumstances. Medical abortion is more common now; but if you do not live where there is water and sanitation (a flushing toilet) you should tell your provider to make a plan for you. Similarly, if you have experienced sexual assault or are very young, a surgical method may be easier for you to cope with.

Whatever method is offered to you or you choose, it is really important to get to the clinic or provider early in your pregnancy.

On your first visit to the clinic, you should expect to be told what methods are going to be used and what may happen to you. If you are late and you need to have the procedure before the cut off of 12 weeks or 20 weeks, you may be required to have the procedure on the day that you arrive at the clinic.

WHAT HAPPENS DURING A MEDICAL ABORTION?

Medical abortions use medication (pills or tablets) only. In South Africa, medical abortion is generally available up until 10 weeks after your last period. In some provinces and hospitals, doctors do it till 13 weeks after your period and in certain circumstances possibly up until 18 weeks. The length of the process - from when you take the pill - is different for each woman but it usually takes a few days, during which some woman experience symptoms similar to a miscarriage.

Medical abortion requires the use of two drugs: mifepristone and misoprostol. One tablet of mifepristone is swallowed first, causing the embryo to stop growing. Two days later, the woman takes misoprostol, causing contractions of the uterus and expelling the embryo. The timing, dose and way of administering misoprostol may vary slightly. Studies have shown that these drugs effectively terminate more than 9 out of 10 pregnancies early in the first trimester. Medical abortion is not a good option if you previously have had a caesarean section.

You should have some follow-up exam one or two weeks after you have taken the drugs to ensure that the abortion has happened. If you take these drugs you must be prepared to have a surgical abortion if the pills did not work fully. The drugs that induce medical abortions cause birth defects if the embryo is not aborted.

Step 1: At the clinic

When a woman comes to the clinic, the doctor or nurse will explain the process and answer any questions that they have. After the woman's medical history has been reviewed and she has been examined, a pregnancy test will be done. If indicated, an ultrasound may be done, but not in all instances. After this, the first medicine will be given and swallowed at the clinic. The woman may experience some cramps and bleeding in the days after taking the first medicine, but very few women will have a complete abortion before taking the second medicine.

Step 2: As instructed, a day later - at home

The woman will swallow or place the tablets under her tongue or to the side of her cheek in her mouth - 2 to 4 tablets of the second medicine at home usually in the morning before having anything to eat or drink. Within 2 hours she can have breakfast and something to drink. Taking pain medication is advisable as she will start to have strong cramps and bleeding, which can be heavier than an ordinary period.

The woman should expect to bleed or spot for about 2 weeks after taking the tablets and she may see blood clots and tissue coming from the uterus.

This is an expected part of ending the pregnancy. The heaviest bleeding will happen while the abortion occurs, usually within the first 6 hours after taking the second tablets.

Step 3: 10 - 14 days later, follow-up visit to the clinic

The medicine causes bleeding and cramping - these symptoms mean that the treatment is working. Sometimes women can get cramping and bleeding and still be pregnant. This is why it is very important to return to the clinic 10 – 14 days after taking the first medicine to ensure that the pregnancy has ended. If you are still pregnant after taking the medicine, you must have a surgical procedure to complete the abortion.

SURGICAL ABORTIONS

WHAT ARE THE POSSIBLE SIDE EFFECTS OF A MEDICAL ABORTION?

COULD I GO BACK TO WORK AFTER TAKING THE MEDICINE?

Surgical abortions involve a nurse (up to 12 weeks of pregnancy) or a doctor (from 12 to 20 weeks). A surgical abortion is a same-day procedure that is done in a clinic or a hospital. You may be given some of the medical abortion drugs to start the process of opening your womb so it is easier to perform the procedure - this may cause cramping.

There are two methods:

- 1) Vacuum aspiration uses a machine to suck out the contents of the uterus through a thin tube. This can be either an electric or hand-held machine.
- 2) Dilation and Evacuation (D&E) is used after 15 weeks. These are mostly done if there has been an incomplete abortion, or in a very late pregnancy. A womb scrap or Dilation and Curettage is an old-fashioned method and should not be used these days.

You do not bleed as much with a surgical abortion compared to a medical abortion. You should discuss pain options and relief with your health provider before the procedure.

Bleeding and cramping are a normal part of the process and show that the medicines are working. Cramps generally last a few days. Bleeding is heavier at first but some bleeding or spotting may continue for as long as 12 days. A woman may also have some nausea, vomiting and diarrhoea on the days that she takes the medicines.

Occasionally some women will also have headaches, dizziness, chills or fever. These symptoms usually last a short time; you can take medicine for pain and nausea.

On the day you take the second set of tablets it would be best for you to take the day off if you can, snuggle in bed with a hot water bottle, take your pain meds, and change your pad regularly. You should expel the fetal sac that day and it would be good to be in a safe place, close to your toilet and comforts.

The following day you can go back to work but do continue to care for yourself, changing your pads and taking pain meds if needed.



SRJC Members involved in this pamphlet:









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