

**Decriminalization of Abortion
 #Take Abortion Out of the Penal
 Code
 #Save Women's Lives
 #Decriminalize Abortion Now**



EnGendeRights, Inc.
Asserting Gender Equality



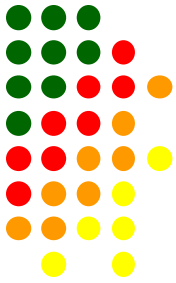
**PROTOCOL TO ADDRESS
 DOMESTIC VIOLENCE AND FAMILY VIOLENCE
 EXPERIENCED BY
 LESBIAN, GAY, BISEXUAL, TRANSGENDER,
 AND INTERSEX (LGBTI) PERSONS
 IN THE PHILIPPINES**



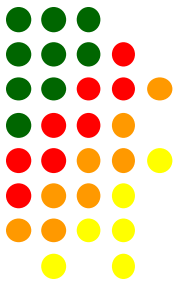
Atty. Clara Rita A. Padilla
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PHILIPPINE SAFE ABORTION ADVOCACY NETWORK



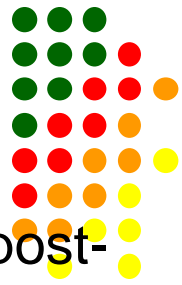
- Restrictive, colonial, and archaic 1930 Revised Penal Code abortion
 - 1870/1822 Old Spanish Penal Codes
- No express exceptions
 - even in case of rape/incest, risks to life and health of the woman, pregnancy condition/fetal condition
- At least 3 women/persons with diverse gender identities die from complications from unsafe abortions
- 1.2 million induce abortion (half of unintended/unwanted pregnancies); risk to lives & health
- High unintended/unwanted pregnancies
 - Gender-based violence
 - Adolescent pregnancies



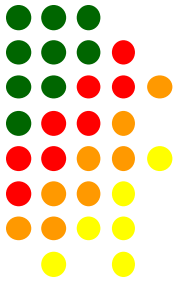
Reasons to Decriminalize Abortion

- Penal law is not the answer; Current restrictive law is outdated & ineffective

- Penalizing abortion does not stop women from inducing abortion - it just endangers the lives & health of women
- No restrictive law nor religious dogma stopped Filipino women to discontinue their unintended or unwanted pregnancies
- Prosecution of women who induce abortion and those assisting them is not the answer

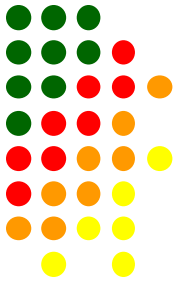


- Lack of access to safe abortion, emergency abortion care, and post-abortion care
 - induced (viable)
 - medical reasons/therapeutic (woman, pregnancy condition/fetal condition)
 - naturally occurring medical conditions (not penalized)
 - spontaneous abortion/miscarriage
 - incomplete abortion
 - intra-uterine fetal demise
 - even in cases where the fetal demise was caused by violence committed by abusive partners
- Harsh, Discriminatory and Delayed Treatment
- Threats of prosecution
- **Despite existing laws**
 - Reproductive Health (RH) Law, Magna Carta of Women, Anti-Hospital Deposit Law, and DOH AO ensuring access to post-abortion care



- **P**enal law is not the answer
- **P**ublic Health and Medical **E**thics
 - Top five leading cause of maternal death
- **H**uman **R**ights – Save the lives of women and persons with diverse gender identities
 - Constitutional guarantees, Secular standards, and International Human Rights Standards
 - Abortion is a fundamental human right
 - SRHR Issues, Gender Relations, and Gender-based Violence
- **S**ocial Costs
 - Adolescent girls die during childbirth; stop schooling
- **S**ocial Justice – two-thirds are poor

*Historical fight for women's rights



- Sept. 28 – launched the proposed Decriminalize Abortion Bill:

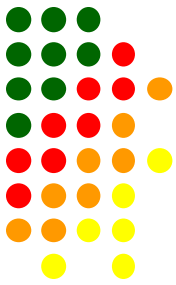
“Act Decriminalizing **Induced** Abortion to **Save The Lives of Women, Girls, Persons of Diverse Gender Identities**, Amending Articles 256-259 of the Revised Penal Code”

#SaveWomen’sLives/#SavePeople’sLives

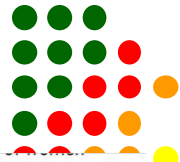
#DecriminalizeAbortionNow

#DecriminalizeAbortionCampaignPH

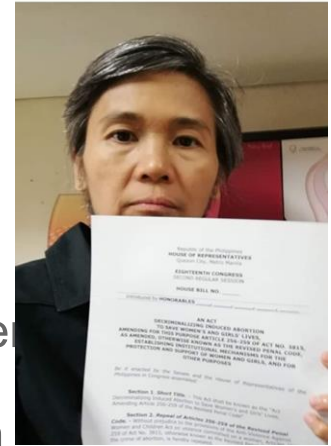
- Legal exceptions (legalization on certain grounds) would not work
 - because of strict legal regulations, refusals (providers and legal system), non-registration of pills/VA, etc.; Irish dentist case



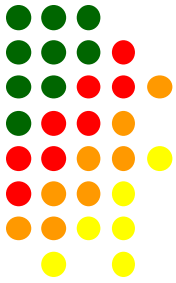
- Campaign/Coalition Building
 - Launch (women, youth, media, artists, etc.)
 - Sign-on petition
 - <https://www.change.org/decriminalizeabortionph>
 - Read & Support the #DecriminalizeAbortionBill
 - <https://decriminalizeabortion.ph/2020/09/read-the-full-text-of-the-bill/>
 - Article on Rappler “Why We Need to Decriminalize Abortion”
 - 15k-word article Reasons Why We Need to Decriminalize Abortion on Univ of Toronto
- Make it a buzz word : dinner table, taxi drive, work, school, salon
- Support candidates who fight for rights to safe abortion, divorce, SOGIE



inducing abortion. It has only made it dangerous... See More



- Campaign/Coalition Building
 - **Historical op-eds, press releases, FB posts**
 - Rappler article on abortion for **rape survivors**
 - 2015 – **10k** mostly likes, loves, wows
 - 2018 – over 2k mostly likes
 - Rappler article on abortion as a **right** – **1k**
 - 2018 Polls by Yahoo (yes to decriminalize won) and Rappler to decriminalize abortion (900 plus shares in three days)
 - EnGendeRights FB post on my POGS talk on post-abortion & safe abortion (Nov 2018) – over 2k likes
 - **Revision of Health Dept. post-abortion care policy**
 - **May 28, 2020 viral FB post (12k+, 2k-)**
 - **Millenials and Gen Z; I befriended 3k+ on FB**
 - **Consultations (PINSAN, CSOs/women/RH, youth, academe, workers, IPs, gov't reps, etc.)**



• Campaign/Coalition Building

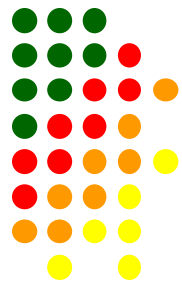
- **Forums/speaking engagements, interviews** (media/students), school projects/thesis; Art and Songs (*Pasya* music album)
- **Media workshop**
- **Election issue**
 - Call to support women's legislative agenda (abortion, divorce, SOGIE); challenge to political parties
- **Copies sent to gov't officials, legislators**
- **PAC ordinance drafting**
- **Press releases; position papers; Shadow reports**
- **Send pro forma letters of support to congressional reps, party-list reps, senators**
- **Gather support; engage political parties and vast social movements**
- **Events**
 - HR Day concert;
 - Jan-Feb #End Rape Culture discussion series of EnGendeRights (students/academe and PWDs, many deaf and FSL interpreters)
 - Women's Month discussions
 - May 28, 2021 online rally

Reasons to Decriminalize Abortion

- Human Rights; Comply with International Human Rights Obligations



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- UN recommendations
 - CEDAW Committee
 - 2006 (NY), 2015 (Inquiry), 2016 (GVA) CEDAW Committee recommendations to make abortion legal in the Phils.
 - decriminalize all other cases where women undergo abortion (2015 Inquiry recommendations)
 - 2018 (GVA) - 2-year follow up for Phil. gov't to submit a report to the CEDAW Committee on the steps it has taken to make abortion legal
 - HRC, CESCR, CAT, CRC
 - UN Special Rapporteurs

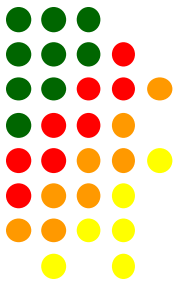


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Key Advocacy Points to Decriminalize Abortion



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1) Sign the [change.org petition](https://www.change.org/p/save-womens-lives) to support the #DecriminalizeAbortionBill #SaveWomensLives:

<https://www.change.org/decriminalizeabortionph>

2) Read the [full text](https://decriminalizeabortion.ph/2020/09/read-the-full-text-of-the-bill/) of the #DecriminalizeAbortionBill #SaveWomensLives here:

<https://decriminalizeabortion.ph/2020/09/read-the-full-text-of-the-bill/>

3) Watch the [video of the Sept. 28 launch of the bill](https://m.facebook.com/story.php?story_fbid=1182113208839918&id=855898747825862) and the Q&A portion

https://m.facebook.com/story.php?story_fbid=1182113208839918&id=855898747825862

4) Read the [opinion editorial of Clara Rita A. Padilla, "Reasons Why We Need to Decriminalize Abortion"](https://www.rappler.com/voices/thought-leaders/opinion-why-we-need-decriminalize-abortion), citing seven reasons (1,500 words)

<https://www.rappler.com/voices/thought-leaders/opinion-why-we-need-decriminalize-abortion>

5) Watch the [International Commission of Jurists Sept. 28 webinar on decriminalization of abortion](https://m.facebook.com/story.php?story_fbid=388215342186837&id=111426183627388) featuring Clara Rita Padilla of EnGendeRights/PINSAN (who drafted the #decriminalizeabortionbill), Dr. Heisoo Shin (member, UN CESCR), Minhee Hyun (co-counsel in abortion law court challenge)

https://m.facebook.com/story.php?story_fbid=388215342186837&id=111426183627388

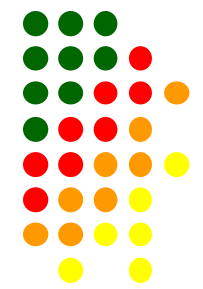
6) Read [other resources](https://engenderights.com) on decriminalization of abortion/reproductive rights, gender, gender-based violence (primer to assist rape survivors (with regimen on emergency contraception); primer to assist gender-based violence survivors), and diverse sexual orientation and gender identities at:

<https://engenderights.com>

Thank you!



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POST-ABORTION CARE-FRIENDLY HEALTH FACILITY

As health care professionals providing quality and ethical care to post-abortion care patients, it is our duty:

- 1) To provide immediate emergency treatment. Health care providers are required by law to stabilize post-abortion care patients and remove all uterine residue in a humane, nonjudgmental and compassionate manner (RA 8344, RA 9710, RA 10354, RA 2382, DOH MNCHN Strategy Manual of Operations).
 - We may face liability for not performing emergency care as required by law and the Supreme Court decision on the RH Law to provide emergency care;
 - 2) To provide the following medical treatment:
 - (a) Manual Vacuum Aspiration (MVA) whenever possible since MVA use results in faster recuperation period and the patient may opt to use little or no anesthesia;
 - (b) Dilation and Curettage (D&C) if MVA is not available or Dilation and Evacuation, as appropriate;
 - (c) Use of oxytocic drugs, anti-biotics and other medicines, as appropriate;
 - 3) To provide bedside information on post-abortion contraceptives and immediate access to contraceptives since pregnancy within six months after an abortion is not optimum;
 - 4) To maintain strict confidentiality and NOT to report the patient to law enforcement authorities since such breach of ethical duties results in women dying from post-abortion complications when they delay or forego access to medical care.
- Health providers are NOT required by law to report women who induce abortion. PD 169 does not apply because this covers serious (medical attention for over thirty days) or less serious physical injuries (medical attention for ten to thirty days) under the Articles 262-265 of the Revised Penal Code referring to injuries inflicted by another person to the patient. Also, recuperation period for MVA is about three hours while D & C can be overnight or at most three days;
- 5) To refer the women for post-abortion care counseling. They can be referred to the facility's trained social workers, women's groups, counseling centers for women, gender offices, centers providing reproductive health services and safe abortion advocacy groups such as the Philippine Safe Abortion Advocacy Network (PINSAN);
 - 6) Inform the patients that medical services reimbursement for MVA and D&C can be availed through PhilHealth

DID YOU HAVE AN ABORTION? ARE YOU BLEEDING?

In need of post-abortion care services? Act fast to save your life!

1) Go to the hospital to seek immediate emergency treatment. The providers are required to initiate immediate treatment and stabilize your condition.

Go to hospitals with "Post-Abortion Care-Friendly" posters and hospitals providing training on post-abortion care such as Fabella Hospital and Davao Regional and Medical Center;

- 2) Ask help from women's groups, counseling centers for women, gender offices, your friendly ob-gyne doctor, centers providing reproductive health services and the Philippine Safe Abortion Advocacy Network (PINSAN);
- 3) Ask for medical treatment such as Manual Vacuum Aspiration (MVA), D & C, medication and anti-biotics, as appropriate. MVA results in faster recuperation period and the patient may opt to use little or no anesthesia;
- 4) Get bedside information on post-abortion contraceptives and immediate access to contraceptives since pregnancy within six months after an abortion is not optimum;
- 5) Request/demand the health care provider to maintain strict confidentiality and NOT to report your emergency care to law enforcement authorities since such breach of professional ethics results in women dying from post-abortion complications when they delay or forego access to medical care. Health providers are NOT required by law to report women who induce abortion;
- 6) Ask for referral for post-abortion care counseling;
- 7) Avail of medical services reimbursement for MVA and D&C through PhilHealth

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As health care professionals providing quality and ethical care to post-abortion care patients, it is my duty:

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#Post-Abortion Care Patient Rights

#Save Women's Lives

#Right to Health



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- pinsan.ph

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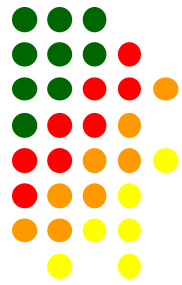


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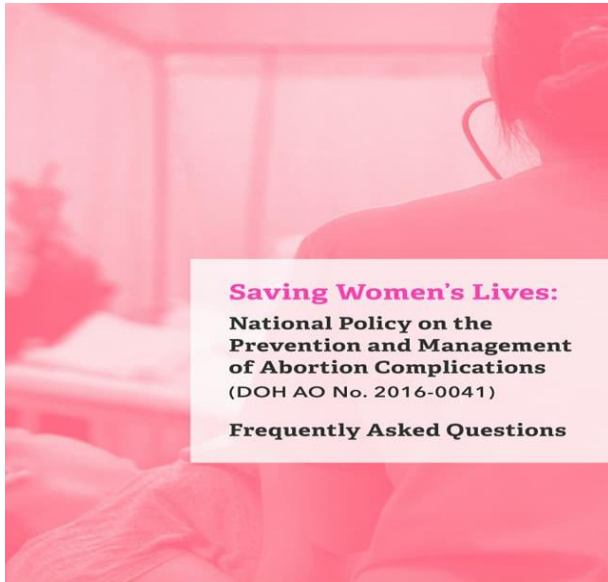
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