

IN BRIEF: UNVEILING THE REALITIES OF LAWS ON ABORTION IN THE PHILIPPINES

I. Introduction

The Philippines has been both a global and regional leader in advancing human rights as a signatory and party to major international human rights treaties and agreements and commits to respect, protect, and fulfill human rights The Philippines has also consistently ranked high in addressing gender equality. (1) The country's constitution and other national laws advance and seek to fully realize fundamental sexual and reproductive rights such as the rights to life, liberty, equality and non-discrimination, privacy, health, and freedom from torture and ill-treatment. (2) However, a deeply discriminatory law in the country persists, causing significant harm to the lives, health, and well-being of Filipinos. The country's penal code unnecessarily restricts access to abortion, negatively impacting the rights of millions of Filipinos.

Over the past 30 years, there has been a significant global shift towards the liberalization of abortion laws, with over 60 countries expanding their legal frameworks regarding abortion access. 60% of the world's population live in countries where abortion is broadly legal. (3)

II. Abortion under the law

Under the Revised Penal Code (RPC), an individual found guilty of having an abortion or performing or aiding an abortion with the consent of the woman, may be imprisoned for up to six years. (4) The RPC, an almost century-old colonial law which took effect in 1932, is based on the Spanish Penal Code of 1870. The abortion-related provisions under the 1870 law can be further traced back to the Spanish Penal Code of 1848. (5)

The 1987 Philippine Constitution lays down a state policy to "equally protect the life of the mother and the life of the unborn from conception." (6) This, however, does not exclude abortion access when necessary to save the life or health of the pregnant person. The



Fact Sheet

Any person who, in order to avoid an evil or injury, does an act which causes damage to another do not incur any criminal liability provided that the following requisites are present: (1) the evil sought to be avoided actually exists; (2) the injury feared be greater than that done to avoid it; (3) there be no other practical and less harmful means of preventing it.

- Article 11 (4) of the RPC (9)

Philippine government acknowledged that Article 11 (4) of the RPC may justify abortion to protect the life and health of pregnant women. (7) In its 2022 report to the United Nations Human Rights Committee, the Philippine government took note of a Supreme Court ruling permitting abortion when necessary to save the pregnant person's life. (8)

"The Supreme Court ruled in Imbong vs. Ochoa (G.R. No. 204819, April 8, 2014) that '[i]n a conflict situation between the life of the mother and the life of a child, the doctor is morally obliged always to try to save both lives.' Hence, 'where it is necessary to save the life of a mother, procedures which endanger the life of the child may be resorted to, even if it is against the religious sentiments of the medical practitioner."'

- Replies of the Philippines to the list of issues in relation to its fifth periodic report to the UN Human Rights Committee (10)

III. Abortion in Numbers



Abortion is a safe medical procedure when done according to the standards set by the World Health Organization (WHO). (11) Increased legal restrictions however can result in delayed access to abortion care. Such delays may be associated with unsafe abortion or increased risks of maternal mortality or morbidity, with negative implications for rights. (12)

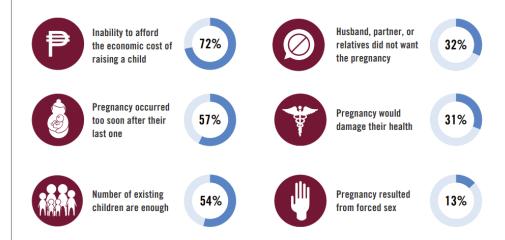
Three Filipinos die every day due to unsafe abortions.

Unnecessary legal restrictions on abortion care cause many women in the Philippines to suffer life-threatening complications. Induced abortion has been reported as one of the leading causes of maternal deaths in the Philippines. (13) Unsafe abortions can lead to physical and mental health complications as well as social and financial burdens for women, communities, and health systems. (14)

In the Philippines, around 610,000 induced, and potentially unsafe, abortions took place in 2012, an increase from 560,000 in 2008. (15) Recent estimates indicate that abortion rates increased by 51% between 1990-1994 and 2015-2019. (16) According to the Guttmacher Institute, a total of 3,770,000 pregnancies occurred annually between 2015-2019 with 1,930,000 of these considered as unintended and 973,000 ending in abortion. (17) Further, because of the COVID-19 pandemic, these figures were projected to have increased in 2020 from an estimated 1.1 million induced abortions without the lockdown restrictions to 1.26 million. There were an additional 17,000 abortions for every month of community quarantine across 2020. (18)

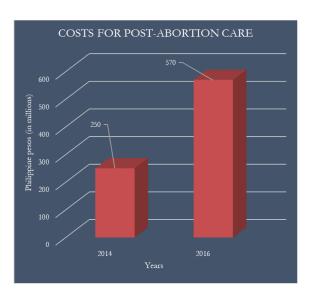
The number of women hospitalized for abortion complications increased from 90,000 in 2008 to 100,000 in 2012. (19) The most common complications from unsafe abortions include blood loss, hemorrhage, sepsis, infection, perforation of the uterus, damage to other internal organs, and even death. (20) An estimated 1,000 maternal deaths were attributed to abortion complications in 2008 translating to around three women dying every day because of unsafe abortions. (21) [See chart on Annual Number of Abortions]

IV. Reasons for Seeking Abortion (22)



Data obtained from the Bureau of Jail Management and Penology revealed at least 22 cases of abortion-related charges between January 2015-May 2022. In 2019, one person was detained under Article 259 for physician/midwife-assisted abortion, and from Jan-May 2022, at least one was detained under Article 258 for self/parent-assisted abortion. (23)

V. Public Health Care Costs of Abortion Restrictions



From 2014 to 2016, payments for post-abortion care by the Philippine Health Insurance Corporation (PHIC) have more than doubled i.e., from Php 250 million (approximately USD 4.5 million) (24) to Php 570 million (approximately USD 10 million). [See chart on Costs for Post-Abortion Care]

In 2021, the total claims payment by PHIC for dilation and curettage (often used for incomplete abortion) amounted to almost Php 440 million (approximately USD 7.8 million). (25) Between January-June 2022, the total claims payment for the same procedure cost the state party almost Php400 million (approximately USD 7 million) for 36,903 number of claims. (26)

VI. Abortion and human rights

Everyone has the right to make their own decisions about their bodies and lives—and to live in a society that supports their ability to exercise this right. A right to life with dignity requires States to create the social, political, and economic conditions to allow people to fully control their reproductive capacities. This includes the right to decide whether and when to continue a pregnancy. (27) Forcing someone to carry a pregnancy to term against their will violates their human rights — and can amount to cruel, inhumane, and degrading treatment. (28)

What is decriminalization of abortion?

Decriminalization is "removing abortion from all penal/ criminal laws, not applying other criminal offences (e.g., murder, manslaughter) to abortion, and ensuring there are no criminal penalties for having, assisting with, providing information about, or providing abortion, for all relevant actors."

- WHO, Abortion Care Guideline (2022) (40) International and regional human rights bodies have steadily taken more progressive stances on abortion, contributing to advances in national legal frameworks through legislative and policy reforms, as well as through judicial decisions on abortion. (29) United Nations (U.N.) treaty bodies, which oversee states' compliance with international human rights treaties, have recognized the criminalization of abortion as a violation to the right to life, health, privacy, information, freedom from ill-treatment, and non-discrimination and equality. (30) They have repeatedly acknowledged the direct relationship between laws that criminalize or restrict abortion and their negative physical and mental health outcomes, including maternal mortality and morbidity resulting from unsafe abortion. (31)

The U.N. Committee on the Elimination of All Forms of Discrimination Against Women (CEDAW Committee) has also recognized that criminalizing abortion is a form of genderbased violence. (32) The CEDAW Committee urged states to repeal criminal provisions to address the disproportionate impact criminalization of abortion has on certain groups, including rural women (33) and people with disabilities. (34) Further, the U.N. Committee on Economic, Social, and Cultural Rights noted that laws criminalizing sexual and reproductive health services, including abortion, violate the obligation of States to respect the right to sexual and reproductive health. (35) In the cases of Mellet v. Ireland and Whelan v. Ireland, the U.N. Human Rights Committee recognized that prohibiting and criminalizing abortion can amount to cruel, inhumane, and degrading treatment and can result in discrimination against women and inequality before the law. It also explicitly called on states, in its General Comment No. 36 on the Right to Life, not to "apply criminal sanctions against women and girls undergoing abortions, or against medical service providers assisting them in doing so" and at a minimum, governments "must provide access to safe, legal and effective access to abortion where the life and health of the pregnant woman or girl is at risk, or where carrying a pregnancy to term would cause the pregnant woman or girl substantial pain or suffering, most notably where the pregnancy is the result of rape or incest or is not viable." (36) This formulation allows for a broad interpretation of the minimum grounds under which abortion should be made legal and also calls on states to take affirmative steps to provide access to abortion.

According to the Special Rapporteur on the right of everyone to the highest attainable standard of physical and mental health, "decriminalization of abortion coupled with appropriate regulation and provision of safe and accessible abortion services may be the most expeditious way of protecting the right to heath." (37) Meanwhile, the Special Rapporteur on torture and other cruel, inhuman or degrading treatment or punishment recommended that abortion should be decriminalized, and access to safe and legal abortions assured, at a minimum where there is a case of rape or incest, severe or fatal fetal impairment, or a risk to the life or physical or mental health of the woman. (38) For the U.N. Working Group on the issue of discrimination against women in law and in practice (now Working Group on discrimination against women and girls), the criminalization of behavior that is attributed only to women is discriminatory per se and the termination of pregnancy should be decriminalized. (39)

Decriminalization of abortion is a necessary step to fully realize Filipinos' fundamental human rights. It involves, at a minimum, the removal of abortion from the criminal law framework and the criminal justice system. (41) Based on public health evidence and human rights standards, the World Health Organization (WHO) recommended the decriminalization of abortion. More importantly, the Philippine government has been specifically called on by various United Nations treaty bodies to review its abortion laws and to decriminalize and legalize abortion. [See Annex: Abortion-related Recommendations from UN Treaty Bodies]

VII. Conclusion

The decriminalization of abortion aligns with international human rights law and standards, the Philippine Constitution, and other national laws seeking to fully realize Filipino's fundamental human rights including sexual and reproductive rights. To be a genuine champion in advancing human rights and promoter of gender equality, the Philippines must repeal its abortion provisions under the RPC and remove any unnecessary restrictions to access abortion.

In line with its Constitution providing for the separation of the Church and the State, ensure that State policies and legislation give priority to the protection of women's health rights, in particular their sexual and reproductive health rights, over any religious postulates that may lead to de facto or de jure discrimination against women and negatively impact their access to sexual and reproductive health services, commodities and information..."

- CEDAW Committee (42)

Annex: Abortion-related Recommendations from UN Treaty Bodies

The below reflects the recommendations received by the Philippines from five different treaty bodies calling for the review of the country's abortion laws, and the legalization and decriminalization of abortion.

A. COMMITTEE ON THE ELIMINATION OF DISCRIMINATION AGAINST WOMEN

2023

Ensure that women and girls, including rural women and girls, unmarried women and women and girls with disabilities, have adequate access to sexual and reproductive health services and information, including family planning, modern forms of contraception, and safe abortion and post-abortion services (43)

Amend articles 256 - 259 of the Revised Penal Code to legalize abortion in cases of risk to the life or health of the pregnant woman, rape, incest or severe foetal impairment and decriminalize it in all other cases (44)

Collect data, disaggregated by age and region, on unsafe abortion and its impact on women's health, including maternal mortality (45)

2016

Fully implement, without delay, all the recommendations issued by the Committee in 2015 in the report on its inquiry (CEDAW/C/OP.8/PHL/1, paras. 49-52), including access to modern contraceptives and the legalization of abortion under certain circumstances (46)

2015

Amend articles 256 to 259 of its Criminal Code in order to legalize abortion in cases of rape, incest, threats to the life and/or health of the mother, or serious malformation of the foetus and decriminalize all other cases where women undergo abortion, as well as adopt necessary procedural rules to guarantee effective access to legal abortion (47)

Ensure that non-biased, scientifically sound and rights-based counseling and information on sexual and reproductive health services, including on all methods of contraception, are provided in all governmental, provincial and municipal health facilities in the State party to address rampant misinformation and to ensure that women can make informed decisions about the number and spacing of children and do not have to resort to unsafe abortions. (48)

Provide women with access to quality post-abortion care in all public health facilities, especially in case of complications resulting from unsafe abortions, including by reintroducing misoprostol, in order to reduce women's maternal mortality and morbidity rates; ensure that women experiencing abortion-related complications are not reported to the law enforcement authorities, threatened with arrest, or subjected to physical or verbal abuse, discrimination, stigma, delays in access to or denial of care; adopt a patient privacy policy to ensure doctor-patient confidentiality, specifically when treating women for abortion-related complications; ensure effective reporting procedures, available for women in need of post-abortion care to complain about abuse and discrimination without fear of retaliation; and conduct research on the incidence of unsafe abortions in the State party and their impact on women's health and maternal mortality and morbidity, and make such information available to the Committee in its next periodic report (49)

2006

Consider reviewing the laws relating to abortion with a view to removing punitive provisions imposed on women who have abortions and provide them with access to quality services for the management of complications arising from unsafe abortions and to reduce maternal mortality rates in accordance with the Committee's general recommendation 24 on women and health and the Beijing Declaration and Platform for Action. (50)

2. COMMITTEE ON ECONOMIC, SOCIAL, AND CULTURAL RIGHTS

2016

Take all measures necessary to reduce the incidence of unsafe abortion and maternal mortality by amending its legislation on the prohibition of abortion to legalize abortion in certain circumstances (51)

2008

Address, as a matter of priority, maternal deaths as a result of clandestine abortions and consider reviewing its legislation criminalizing abortion in all circumstances (52)

3. COMMITTEE AGAINST TORTURE

2016

Review its the Philippines' legislation to allow for legal exceptions to the prohibition of abortions in specific circumstances such as when the pregnancy endangers the life or health of the woman, when it is the result of rape or incest and in cases of fetal impairment (53)

Develop a confidential complaints mechanism for women subjected to discrimination, harassment or ill-treatment while seeking post-abortion or post-pregnancy treatment or other reproductive health services (54)

Investigate, prevent, and punish all incidents of ill-treatment of women seeking post-pregnancy care in government hospitals and provide effective legal remedies to victims (55)

4. COMMITTEE ON THE RIGHTS OF THE CHILD

2022

Legalize abortion and ensure access to safe abortion and post-abortion care services for adolescent girls, making sure that their views are always heard and given due consideration as a part of the decision-making process, and develop and implement a policy to protect the rights of pregnant teenagers (56)

5. HUMAN RIGHTS COMMITTEE

2022

Amend its legislation to guarantee safe, legal and effective access to abortion where the life and health of the pregnant woman or girl is at risk, or where carrying a pregnancy to term would cause the pregnant woman or girl substantial pain or suffering, most notably where the pregnancy is the result of rape or incest or where the pregnancy is not viable (57)

Repeal the criminal penalties imposed upon women and girls who undergo abortions and upon medical service providers who help them to do so (58)

Strengthen the provision of sexual and reproductive health services, including post-abortion healthcare in all circumstances on a confidential basis, especially for rural women, women living in poverty, women with disabilities and women from ethnic or religious minorities (59)

Further develop and implement comprehensive programs on sexual and reproductive health education, including with a view to preventing unintended pregnancies as well as stigmatization of women and girls who have recourse to abortion, and on the prevention of sexually transmitted infections throughout the country (60)

2012

Review its legislation with a view to making provision for exceptions to the prohibition of abortion, such as protection of life or health of the mother, and pregnancy resulting from rape or incest, to prevent women from having to seek clandestine harmful abortions (61)

Endnotes

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- 26. Id., Charts, 19.
- 27. See United Nations Working Group on Discrimination Against Women, Position Paper on Women's Autonomy, ("[T]he decision as to whether to continue a pregnancy or terminate it, is fundamentally and primarily the woman's decision, as it may shape her whole future personal life as well as family life and has a crucial impact on women's enjoyment of other human rights.").
- 28. See, e.g., Committee against Torture, Concluding Observations on the Combined Fifth and Sixth Periodic Reports of Poland, para. 23, U.N. Doc. CAT/C/POL/CO/5-6 (2013) (expressing concern "about restrictions on access to abortion, especially for victims of rape, due to the refusal of some physicians and clinics to perform legal operations on the basis of conscientious objection. This leads women to resort to clandestine, often unsafe abortions with all the health risks they entail (arts. 2 and 16)."). See also Human Rights Committee, Communication No. 1153/2003, Karen Noelia Llantoy Huamán (K.L.) v. Peru, para. 6.3, U.N. Doc. CCPR/C/85/D/1153/2003 (views adopted on Oct. 24 2005) (holding that the state was in violation of article 7 of the ICCPR upon denying the petitioner necessary SRH services: "The author also claims that, owing to the refusal of the medical authorities to carry out the therapeutic abortion, she had to endure the distress of seeing her daughter's marked deformities and knowing that she would die very soon. This was an experience which added further pain and distress to that which she had already borne during the period when she was obliged to continue with the pregnancy.... The omission on the part of the State in not enabling the author to benefit from a therapeutic abortion was, in the Committee's view, the cause of the suffering she experienced. The Committee has pointed out in its General Comment No. 20 that the right set out in article 7 of the Covenant relates not only to physical pain but also to mental suffering...").
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- 33. Id , Gen. Rec. No. 34 on the Rights of Rural Women, (38th Sess., 2016), in Compilation of General Com- ments and General Recommendations Adopted by Human Rights Treaty Bodies, para. 39(c), U.N. Doc. CEDAW/C/GC/34 (2016) (describing the criminalization of abortion is an obstacle to rural women's access to abortion and recommending countries repeal "laws that criminalize or require waiting periods or third-party consent...").
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