

JOINT CIVIL SOCIETY ORGANIZATIONS STATEMENT ON INTERNATIONAL SAFE ABORTION DAY 2026: SAFE ABORTION IS ESSENTIAL HEALTHCARE: A CALL TO ACTION

We join women, girls, and human rights defenders across Africa and the globe on this 28th day of September to commemorate the 2026 International Safe Abortion Day, reaffirming a simple truth: safe abortion is essential healthcare.

We are reminded of the transformative power of the Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa (the Maputo Protocol), which is lauded as one of the most progressive and comprehensive legal instruments for the promotion and protection of women's rights globally, particularly in the area of sexual and reproductive health and rights (SRHR). Adopted in 2003 by the African Union, the Protocol goes beyond existing international human rights standards by explicitly articulating a wide array of SRHR protections that are often left ambiguous or unstated in other international and regional human rights instruments.

Article 14 of the Maputo Protocol guarantees women's rights to health and reproductive autonomy, including the right to control their fertility, decide on family size and spacing, and to choose their method of contraception. Most critically, Article 14 makes the Maputo Protocol the first and only binding international human rights treaty to explicitly guarantee access to safe medical abortion in specific circumstances—namely, where the continued pregnancy endangers the mental or physical health of the mother or the life of the mother or the fetus, or in cases of sexual assault, rape, or incest. This article also mandates access to comprehensive reproductive health services, including antenatal care, safe delivery, family planning, and sexual and reproductive health education. In doing so, the Protocol moves abortion access from a matter left to state discretion to one of binding treaty obligation — a distinction that remains central to the advocacy for its full domestication across the continent.

Currently, 46 of the 55 African states have ratified the Maputo Protocol, while nine - Burundi, Chad, Egypt, Eritrea, Madagascar, Morocco, Niger, Somalia, and Sudan - are yet to ratify it. Bringing these final states on board is vital because over 150 million African women and girls currently live outside the protective legal framework of the Maputo Protocol.

Despite its progressiveness, 9 out of the 46 member states have placed reservations to various provisions of the Maputo Protocol, with Article 14 being the most reserved provision. The consequences of a reservation to human rights treaties lower the minimum human rights standards contained in a particular treaty for the reserving states and enable the reserving states to escape international accountability for [human rights violations](#).

Currently, Africa accounts for 70% of global maternal deaths. These preventable deaths are compounded by persistent gaps in access to sexual and reproductive health and rights (SRHR) services, which are essential to safeguarding the lives and dignity of [women, children and](#)

[adolescents](#). Unsafe abortions continue to claim the lives of thousands of African women and girls, while millions more are left with severe injuries and long-term health complications. According to the World Health Organization, nearly half of all abortions worldwide are unsafe, with Sub-Saharan Africa carrying the highest burden. The [Guttmacher Institute](#) further estimates that three-quarters of all abortions in the region are unsafe, making unsafe abortion one of the leading, and entirely preventable, causes of maternal death.

The tragedy is not that abortion exists, but that safe abortion is denied. Restrictive laws, vague penal code provisions, and systemic barriers mean that even where abortion is legally permitted, women often cannot access it. The existence of contradictory or vague national laws not only stifles advocacy efforts but also dissuades individuals from seeking or providing (in the case of healthcare workers) necessary health services, as they may fear legal repercussions or stigma.

By maintaining the reservations on Article 14 (2) (c), governments deny women and girls access to lifesaving healthcare and perpetuate a cycle of preventable maternal death.

This year's theme, "*Solidarity in Action: Advance Reproductive Justice and Urgently Strengthen Health Systems for Comprehensive Abortion Care (CAC)*," compels us to confront the undeniable reality: when abortion is safe, legal, and accessible, maternal deaths decline. When abortion is restricted, stigmatized, or criminalized, women's lives are placed at risk. To deny access to safe abortion is to deny healthcare. To deny healthcare is to deny the right to life.

On this International Safe Abortion Day, we call on African governments to act with urgency:

- Review and withdraw reservations to Article 14(2)(c) of the Maputo Protocol and fully implement its provisions on women's reproductive rights.
- Reform national laws to remove vague and restrictive abortion provisions, and instead establish clear, rights-based frameworks that guarantee safe access to abortion care.
- Recognize safe abortion as an integral part of public health systems — delivered without stigma, judgement, or discrimination, and accessible to all women and girls regardless of geography or socio-economic status.
- Strengthen healthcare systems and train providers to deliver abortion and post-abortion care in line with WHO guidelines.
- Invest in comprehensive sexuality education and contraceptive access to reduce unintended pregnancies and expand reproductive choices.



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Safe abortion saves lives. It is not a matter of ideology, but of public health, human rights, and justice. On this day, and every day, we stand united in demanding that no woman or girl should lose her life for lack of access to a safe medical procedure.

Signed by:



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