

Ipas *in Asia*

Reproductive health in Asia

Almost two-thirds of the world's population live in Asia, and women living on this continent experience vastly different degrees of reproductive freedom. Countries like Vietnam and India have liberal abortion laws, while abortion laws in Bangladesh and Myanmar are among the strictest in the world. Women's reproductive health also varies from region to region. In Southeast and South-central Asia about two out of every 100 pregnancies end in unsafe abortions. Complications from these unsafe abortions cause painful or permanent injuries, or even death. Meanwhile, in East Asia, where access to safe and legal abortion is greater, fewer than one out of every 1,000 pregnancies ends in an unsafe abortion.

More than 28,000 women across Asia die each year from complications related to unsafe abortion. Access to safe abortion services and basic medical care could prevent almost all of these deaths. Many factors influence women's decisions to terminate a pregnancy using unsafe methods: limited access to contraception; insufficient numbers of safe health facilities, especially in rural, poor and urban areas; barriers that prevent women from accessing safe health facilities; a lack of knowledge among women that safe services are available or legal; and ignorance, or refusal to comply with the law, among health-care providers.

Ipas in Asia

Ipas has programs in India, Vietnam, Nepal, Pakistan and Cambodia. Additionally, Ipas distributes products for safe, effective abortion services in 17 Asian countries. Ipas's work in Asia varies from country to country but generally focuses on:

- Training doctors and other health-care providers in comprehensive abortion care (CAC). CAC provides safe abortions and addresses other sexual and reproductive health needs. Ipas helps establish permanent training sites and provides training sessions for health-care providers in both the public and private sectors. As of January 2008, Ipas offices in Asia had trained more than 1,877 public-sector providers in CAC. These providers, along with Ipas-supported sites, have facilitated more than 485,000 safe abortion services.
- Publishing and distributing CAC training curricula and manuals, including translating them into relevant languages.



- Ensuring safe, effective abortion-related technology availability by distributing MVA instruments and training health-care providers how to use medical abortion (MA).
- Increasing access to safe abortion services, in both the public and private sectors, by working with local and state governments. For example, government services throughout Nepal have reduced the proportion of deferred clients from nearly half to none by increasing clinic hours and including nurses as providers.
- Working with local partners to train providers to safely and effectively provide postabortion care (PAC), a model that provides medical care to women who have undergone abortions or have had miscarriages. For example, Pakistan has trained doctors in PAC and works to raise awareness of PAC services among women and communities.

Vital Statistics for Asia

Population: 4.01 billion

Total fertility rate for women ages 15-49: 2.4

Percentage of women currently married or in a union using modern contraception: 60%

Number of abortions each year: 25.9 million

Number of unsafe abortions each year: 9.8 million

Maternal mortality ratio: 330/100,000 live births

Statistics of Interest

About 40% of the 26 million abortions occurring in Asia every year are performed unsafely.

Between 1995 and 2003, Asia's abortion rate dropped from 33 to 29 per 1,000 women.

In 2005, women in Vietnam, India and Nepal respectively were more than 11, 40 and 75 times as likely to die during childbirth or from complications related to pregnancy than women in the United States.

Resources

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Protecting women's health
Advancing women's reproductive rights

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