

Toward a Sustainable Abortion Ecosystem:

Progress on the domestication of the Maputo Protocol in the DRC



Abortion is a fundamental right for every woman.

Access to safe and legal abortion is an essential indicator of maternal health, bodily autonomy, and gender equality. Unsafe abortion is the second leading cause of maternal mortality in the Democratic Republic of Congo (DRC). While the penal code bans together abortion and contraception, the Maputo Protocol opens a window of opportunity to broaden access to safe abortion and contraceptive services, strengthening women's decision-making power, and guaranteeing gender equality, socio-economic empowerment, and education for girls, whose unwanted pregnancies are one of the main causes of school drop-out.



Making sexual and reproductive health rights a reality

The National Dialogue on Abortion organized by the Ministry of Health in 2021, where several stakeholders such as government representatives: the Minister of Gender, Youth, Justice, and Human rights; civil society organizations, youth-led and women-led movements, disabled-people organizations, journalists network, midwives and gynecologists organizations took part, shed light on three key components to improve women's bodily autonomy and access to legal and free-of-stigma abortion care.



STRENGTHENING THE JUDICIARY SYSTEM TO UPHOLD ABORTION RIGHTS

Fear of prosecution among women seeking abortion services, healthcare providers, and community health workers has reigned in the DRC since 1940 due to the penal code. This crippling fear has left providers with no option but to turn away women and girls, leaving them with no safe options to turn to.

In 2018, the groundbreaking Executive Order by the Superior Council of the Judiciary reinforced the Maputo Protocole (MP) provision. It paved the way for the its implementation leading to:

Read more:

https://bit.ly/4aKBYAm

Critical milestones achieved

- Developping the Training Guide on the Maputo Protocol (MP) for magistrates and judges
- Training of magistrates across the country on the MP
- Setting up a pool of magistrate's focal points to ensure better handling of abortion cases.
- Strengthening judiciary system accountability through regular monitoring in courts on the effective implementation of the MP



BUILDING A ROBUST AND RESILIENT HEALTH SYSTEM

The amalgamation of barriers to abortion care ranging from stigma, unskilled workforce, provide conscientious objection, limited access to information, lack of specific commodities, and inadequate health facilities left women and girls with unsafe choices.

Read more:

https://bit.ly/3KmcMFF

Critical milestones achieved

- Development of the National Comprehensive Abortion Care Standards & Guidelines
- Abortion training curriculum for healthcare providers, medical and midwifery students
- Abortion-related indicators integrated into the National Health Information System DHIS2
- Development of a self-management abortion care approach through the pharmacist strategy





FOSTERING COMMUNITY SUPPORT FOR WOMEN'S BODILY AUTONOMY

A deep silence about sexuality and reproduction, harmful social norms, stigma, and lack of access to accurate information have prevented women and girls from exercising their bodily autonomy, the agency to decide on their sexuality and reproductive health, and rights, including access to safe abortion care.

Read more:

https://bit.ly/4bEHE02

Critical milestones achieved

- Launch of the national campaign to popularize the Maputo Protocol by the Ministry of Gender
- Development of a National Communication Strategy on Comprehensive Abortion Care by the Ministry of Health
- Organization of provincial roundtables and community dialogues by civil society



INTEGRATING COMPREHENSIVE ABORTION CARE INTO THE HUMANITARIAN RESPONSE

The resurgence of violence in North Kivu has caused the displacement of more than seven million people. In Tshopo, Mai-Ndombe, and Ituri, inter-ethnic conflicts increased violence, including rape, as a weapon of war. In addition, in Tanganyika, flooding has affected more than 20.000 households. These unprecedented humanitarian situations increase the risk of gender-based violence, unintended pregnancies, profound psychological trauma, and the need for comprehensive SRH care in a context where the health system is weakened or destroyed.

Urgent responses are needed to protect the lives of women and girls.

Critical milestones achieved

- Integration by the Ministry of Health of comprehensive abortion care in the medical management of rape policy, thus improving the government's commitment to the Minimal Initial Service Package (MISP)
- Set up of mobile clinic in IDP camps and community outreach efforts to support access to SRHR services, including abortion care, family planning and counseling
- Strengthening the health system's resilience through capacity building and supply chain improvement

Read more:

https://bit.ly/3X1jWXr



The benefits of this progress in the lives of women and girls

Those progress greatly impacted the lives of Congolese women and girls.

- Access to accurate SRHR information including abortion and contraception through diversified sources of information.
- Ability to access high-quality comprehensive abortion care services in public health facilities or through the pharmacist network (self-managed abortion)
- Access to post-abortion counseling and contraception (family planning) 117,845 people living in IDP camps were reached through SRH information and community dialogues, of which 6,562 women and girls received SRH services

Looking ahead

The duty and urgent need are to support political and legislation leadership, maintain the momentum, explore the opportunity to harmonize the law and accelerate the process of transforming policy and advocacy wins into services for women and girls.

- Maintain government commitment and political and legislative leadership.
- Harmonize the domestic laws (penal code) with the provision of the Maputo Protocol
- Transform progress in the domestication of the PM into safe care for women and girls.
- Ensure SRH services are user-centered and rights-based
- Prioritize comprehensive SRH services in humanitarian responses



