

A Critical Introspection of Abortion Laws in Nigeria

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Abstract

An abortion is a procedure to end pregnancy, either by surgery or Medicine. The procedure is expected to be done by a licensed health care professional. Abortion is however illegal in Nigeria as there are legislations which prohibit abortion except in cases where the carriage of the pregnancy to term is detrimental to the health and life of the mother. Statistics has shown that 1,000 out of 100,000 maternal deaths stem from the estimated 1,000,000 abortions done in the country annually. Unfortunately, the law on abortion in Nigeria fails to recognize the actual state of happenings, this has in a way given room for illegal abortion and high maternal mortality rate in Nigeria. The main focus of this paper is to explore abortion practices and it's regulation in Nigeria, how the laws on abortion in Nigeria affects healthcare and maternal mortality rates and whether or not the present abortion laws are still relevant to the milieu of the average Nigerian woman. This paper relies on existing literature for data and this literature suggests that the present abortion laws are heavily influenced by religion and faux morality rather than empirical evidence to the effects of abortions in the society. This paper investigates both influences and recommends a different approach to abortion legislation and calls for a reformation of the laws on abortion in Nigeria. It concludes that abortions should be made legal in the first trimester of pregnancy when it is safe for the mother.

Keywords: Abortion, Pregnancy, Health, Law, Nigeria

Introduction

Giving a succinct and detailed definition of the concept of abortion has remained an arduous task despite the efforts of bioethicists, philosophers, and other scholars. This is because abortion remains a controversial topic in different climes. The perception of different scholars has been divergent when it comes to the meaning of abortion, however, a common denominator in the definition of abortion is the ethics of destruction. Pro-lifers hold a perception that a fetus is a person the moment fertilization occurs while proponents of abortion argue that the woman has the right to decide pregnancy termination since the embryo is a part of her body¹. The abortion debate continues to shows no sign of ending due to the different perceptions from the different stakeholders, and the extent to which these views are held indicates that reaching a consensus on the definition of the concept is highly unlikely. However, philosophers have

contributed their bits in clarifying the philosophical and moral aspects of the debate, and they are unrelenting in their efforts as they continue to engage in one of the most popular moral debates of the twenty-first century. Gert Bernard in his book *Common Morality. Deciding What to Do* explained that what the law decides regarding abortion does not settle the moral issue attached to it². In regards to the origin and historical development of the concept, the term abortion is gotten from the Latin word *aboriri*, which means perish, but the literal translation means miscarry or abort³.

Abortion can be concisely defined as the ending of a pregnancy before it attains viability⁴. In other words, it is the termination of pregnancy before the fetus is able to attain an independent existence⁵. Pregnancy might end without external interference (for instance, spontaneous abortion or miscarriage) or it might be induced due to external intervention. For the context of this paper, the term abortion is used in reference to induced abortion type. In ethical discussions, induced abortion is understood to be the intentional decision to remove a pregnancy via an action that destroys the fetus directly or leads to its removal from the uterus before it reaches maturity⁶. Opponents of abortion regard fetuses and embryos as pre-born children, as such, pregnant women are under the moral obligation of taking care of fetuses the same way they will take care of their born children. Pro-lifers believe abortion is as wrong as killing an infant and that it is not morally acceptable to engage in actions that will result in the death of a fetus⁷.

In Nigeria, it is generally illegal to engage in any form of induced abortion unless it is done to save the life of the expectant mother⁸. No legislation specifically regulates abortion in Nigeria. However, sections 232, 233, 234, 235, and 236 of the Penal Code and sections 228, 229, 230, 297, and 328 of the Criminal Code used in the Northern and Southern part of Nigeria respectively penalizes abortion unless it is done to save the life of the woman. As a result of this restriction, it is impossible for any pregnant woman that is not interested in becoming a mother even for the most justifiable reasons to obtain an abortion in a government-owned clinic except when her life is threatened by the pregnancy. An average woman in Nigeria cannot afford the medical cost of a willing private clinic, this is because 40.1 percent of Nigerians make less than \$361 per annum⁹ and the average cost of consulting a general practitioner is between \$27.5 and \$110 depending on the physician and clinic, this excludes the cost of medical examinations and treatment¹⁰. Thus, most are forced to practice unsafe abortion by patronizing quack health care providers who more often than not perform the abortion with contaminated and inappropriate instruments. The outcome is the astonishing statistics that indicate that 1,000 out of 100,000 maternal deaths stem from the estimated 1,000,000 abortions done in the country annually¹¹. In the same vein, engaging in unsafe abortion may jeopardize the reproductive health of females, especially young women, this will be duly discussed later in this paper. This is the reality which no restrictive abortion law, regardless of the penalty can prevent, it is important to note that the restrictive abortion law is also responsible for this predicament.

To put it succinctly, the restrictive abortion policies in Nigeria have an adverse effect on the

health and lives of women in Nigeria. Out of the estimated 6.8 million pregnancies that happen in the country annually, 63 percent result in planned births, 10 percent are unwanted or mistimed births, 11 percent are aborted and 16 percent are miscarriages and close to 40% of women exposed to unsafe abortion experience complications that warrant medical treatment¹². In Nigeria, abortion law is heartily defended in the national statute book but reality shows that it is the least enforced law in the country. This is why it is imperative to conduct a critical introspection into Nigeria's abortion laws, irrespective of personal belief on the sanctity of human life. The paper explores the need for reformations in the abortion laws in Nigeria. The paper will start this introspection with a brief insight into why abortion was criminalized to explain, in particular, that abortion was not always regarded as a criminal offense over the course of human history and that even the subsequent criminalization has been duly reformed when necessary. The paper will follow this up with an evaluation of the abortion laws in Nigeria. Thirdly, an analysis of the effects of criminalizing abortion in Nigeria. Finally, a case is made for the reformations of the abortion laws in Nigeria and why change is crucial by evaluating the effect of criminalizing abortion in the country.

Why Humanity Criminalized Abortion

Over the course of history, abortion is a common practice in different human communities. Indeed, abortion was practiced in different parts of the globe for many centuries as a means of removing an unwanted pregnancy. Historically, early fetus removal was accepted by the Catholic Church, and for many decades, it was not punishable under the Common Law of the United Kingdom (which has a historical impact on the legal system in Nigeria)¹³. Much earlier, St. Augustine (344-430 AD) a Christian theologian believed that a body without sensation does not have a soul, and therefore, engaging in abortion only requires penance for engaging in sexual activities¹⁴. In 1140 AD, the first set of authoritative Canon law approved by the Catholic Church used as a guide by priests concluded that early abortion cannot be regarded as murder until reformations were introduced in the 1917 Canon Law. Criminalization or restriction of abortion gained traction in the latter part of the 19th century, it was duly spread by the Western powers via their colonial activities in Africa and other continents across the globe¹⁴.

As opposed to saving the fetus, the introduction of laws restricting abortion during this period was to prevent women from meeting their untimely demise through abortion due to various reasons, such as the state of the medical institution at the time, which was not as advanced as modern-day facilities. However, despite the introduction of these restrictive laws, women in countries with these laws continue to carry out abortions, although, under unsafe conditions¹³. This has led to a high mortality rate among women and naturally generate several debates in society. This encourages the reformation of restrictive laws on abortion in most countries in Central and Eastern Europe in the 1950s, other developed countries followed suit in the 1960s and 1970s. A few developing nations such as India and China also reformed

their abortion laws around the same time¹⁵. This is an indication that the story had changed to liberalization on abortion and not criminalization in some countries.

Every day, close to 186 women lose their lives to complications from unsafe abortion in different parts of the world; the bulk of these deaths are in regions where abortion is criminalized¹⁶. Placing legal restrictions on abortion does not stop abortion from happening; the laws only drive it to the underground where it becomes more injurious to health, to explain succinctly, irrespective of legal restrictions and prohibitions on abortion, women still engage in abortion, and when abortion is criminalized, there is a high probability that it will be unsafe and dangerous to the well-being of women. Restrictions on abortion deny women's fundamental rights to health and control over their bodies. Unsafe and crude techniques include using different caustic substances and drugs by mouth; inserting objects into the vagina are used by women to induce an abortion¹⁷.

Laws Governing Abortion Practice in Nigeria

Abortion in Nigeria is a punishable offense and culpable individuals can be sentenced to as long as 14 years in jail unless it is done to keep the expecting mother alive⁸. The religious and traditional leaders in the country are against any changes in the country's abortion law¹⁸. They hold a perception that a reformation will put the morals of society in jeopardy. The group seeking the liberalization of abortion in Nigeria back their stance with empirical data and statistics deduced from years of research. Pro-reformation groups argue that despite the criminalization of abortion in the country, more than 600,000 abortions are carried out in Nigeria every year¹⁸. To further support their claims, they usually argue that the restrictive law puts women at risk since the majority of these abortions are covertly done by quacks doctors and nurses, this makes it an unsafe practice. The issue of criminalizing abortion usually led to a debate in most societies. Generating different perspectives and opposition from different quarters, ranging from the political to the moral, the medical, the religious, and feminist groups among others¹⁹.

The Criminal Code for Southern Nigeria has pertinent provisions on abortion in sections 228, 229, 230, 297, and 328.²⁰ while the Penal Code of Northern Nigeria has relevant provisions in sections 232, 233, 234, 235, and 236.²¹ The pertinent provisions of the Criminal Code have roots in section 58 of England's Offenses Against the Person Act, 1861, while the provisions of the Penal Code are based on the Common Law in Scotland. The main difference between the Criminal Code and Penal Code for abortion in Nigeria is that section 228 of the former is applicable to any individual that has the intention of procuring abortion for a woman irrespective of whether she is pregnant or not, while Section 232 of the latter applies to cases where the woman is already pregnant²². These laws are entrenched in the heritage of Nigeria as a former British colony. The 1861 Act passed by the parliament in Britain to criminalize abortion have since been reformed in 1967 to accommodate abortion, this law received a further revision in 1990.²² The problem with criminalizing abortion in Nigeria is beyond whether

the police do not arrest offenders or the law is restrictive. The major issue is that the law is not clearly understood, and subsequent paragraphs will give insights into every provision guiding the criminalization of abortion in Nigeria.

The Criminal Code

1. Section 228 – Attempt to Procure Abortion

“Any person who, with intent to procure miscarriage of a woman whether she is or is not with child, unlawfully administers to her or causes her to take any poison or other noxious thing, or uses any force of any kind, or uses any other means whatsoever, is guilty of a felony and is liable to imprisonment for fourteen years.”

This provision states that it is a punishable offense with 14 years’ jail term for any individual (including health care professionals) that attempts to terminate a pregnancy by any means whatsoever, even if the pregnancy was not confirmed.

2. Section 229 – Attempt to Procure Owns Miscarriage by a Woman

“Any woman who, with intent to procure her own miscarriage, whether she is or is not with child, unlawfully administers to herself any poison or other noxious thing, or uses any force of any kind, or uses any other means whatever, or permits any such thing or means to be administered or used to her, is guilty of a felony, and is liable to imprisonment for seven years.”

This provision states that it is a punishable offense with 7 years’ jail term for a woman to attempt the use of any means whatsoever to remove her pregnancy whether she is certified pregnant or not. Technically, this provision makes it an offense for a woman to take a noxious substance, upon suspicion that she is pregnant (perhaps experiencing a delay in menstruation) with the intent of terminating the pregnancy, even though the pregnancy is not confirmed by a medical practitioner.

3. Section 230 – Supplying Drugs or Instruments to Procure Abortion

“Any person who unlawfully supplies to or procures for any person anything whatever, knowing that it is intended to be unlawfully used to procure the miscarriage of a woman, whether she is or is not with child, is guilty of a felony, and is liable to imprisonment for three years.”

This provision makes it illegal for any person to supply or procure anything which he or she knows will be used to perpetrate an abortion irrespective of whether the woman is pregnant or not. Thus, local drugstores that knowingly sell abortion pills, may well be guilty of a punishable offense.

4. Section 328 – Killing Unborn Child

“Any person who, when a woman is about to be delivered of a child, prevents the child from being born alive by any act or omission of such a nature that, if the child

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had been born alive and had died, he would be deemed to have unlawfully killed the child, is guilty of a felony, and is liable to imprisonment for life.”

This provision makes it an unlawful act to kill a child when it is about to be delivered but before it is born. This provision is meant to make sure that every part of killing a child before delivery is covered by the Code.

5. Section 297 – Surgical Operation (Lawful Abortion)

“Any person is not criminally responsible for performing in good faith and with reasonable care and skill a surgical operation upon any person for his benefit, or upon an unborn child for the preservation of the mother’s life if the performance of the operation is reasonable, having regard to the patient’s state at the time and to all the circumstances of the case.”

Two major problems are associated with the interpretation of this provision. First, what can be defined as a surgical operation? For instance, does it include the use of prostaglandins that is widely regarded by physicians to be one of the most effective and safest means of procuring abortion or other types of abortion such as the use of abortion pills or menstrual extraction?¹³ In this context, the term “surgical operation”, was deliberately used to indicate the importance of saving the life of the mother. Secondly, what is deemed to be lawful abortion performed to preserve the mental and physical health of the pregnant woman in Nigeria remains unclear. It is imperative for courts in Nigeria to interpret this provision.

The Penal Code

1. Section 232 – Causing a Woman to Miscarry

“Whoever voluntarily causes a woman with child to miscarry shall, if such miscarriage is not caused in good faith for the purpose of saving the life of the woman, be punished with imprisonment for a term which may extend to fourteen years or with fine or with both.”

The provision makes abortion unlawful unless it is conducted with the aim of keeping the mother alive. The provision is also applicable to a pregnant woman that engages in activities that will cause abortion. This offense is punishable with a jail term or fine.

2. Section 233 – Causing Death of a Woman with the Intent of Causing Her Miscarriage

“Whoever with intent of causing the miscarriage of a woman, whether with child or not does any act which causes the death of such woman, shall be punished- a. with imprisonment for a term which may extend to fourteen years and shall also be liable to fine; and b. if the act is done without the consent of the woman, with imprisonment for life, or any less term and shall also be liable to fine.”

This provision makes a case for the specific offense of mortality during the process of

terminating a pregnancy, in comparison to the Criminal Code where death caused by abortion is regarded as either murder or manslaughter and the penalty is duly based on the situation. In both cases, the consent of the women cannot be used as a defense. However, consent can be a mitigating factor in the Penal Code.

3. Section 234 – Using Force on a Woman to Cause Her Miscarriage

“Whoever uses force to any woman and thereby unintentionally causes her to miscarry, shall be punished, with imprisonment for a term which may extend to three years or with fine or with both; and if the offender knew that the woman was with child he shall be punished with imprisonment for a term which may extend to five years or with fine or with both.”

This provision makes it a punishable offense for an individual to unintentionally cause the termination of a pregnancy through the use of force. The miscarriage might not be intended, the use of force need not be unlawful and the offender might not know that the woman is pregnant. The offense is punishable by three years’ imprisonment and a fine, even though the offender need not know that the woman is pregnant.

4. Section 235 – Preventing a Child from Being Born Alive

“Whoever before the birth of any child does any act with the intention of thereby preventing that child from being born alive or causing it to die after its birth, shall if such act be not caused in good faith for the purpose of saving the life of the mother, be punished with imprisonment for a term which may extend to fourteen years or with fine or with both.”

This provision makes it a punishable offense to try and prevent a child from being delivered unless the decision was made to keep the mother alive. Preventing a child from being born is a culpable offense, and offenders might bag a 14 years’ jail term. The second part of the provision related to the outright murder of the child after delivery, as such, this is not a case of abortion but homicide.

5. Section 236 – Causing the Death of Unborn Child

“Whoever does any act in such circumstances that if he thereby caused death he would be guilty of culpable homicide, and does by such act cause the death of a quick unborn child shall be punished with imprisonment for life or for a less term and shall also be liable to fine.”

This provision makes it a punishable act to terminate a viable pregnancy.

Effects of Criminalization of Abortion in Nigeria

Over the course of human history, the criminalization of abortion has compelled women in different parts of the world to use unsafe and unreliable means of terminating unplanned pregnancies¹³. Women use potions and pills or other types of drugs, many of which are not

safe for use, this can lead to extreme irritation to the bowel and stomach; others used dangerous materials such as knitting needles, crochet hooks, lead or soap solution via syringes; blow to the back, hot baths and heavy pressure or kicks on the abdomen were used to force pregnancy termination²³. Women in Nigeria have tried different things to achieve their aims except visiting a qualified physician in a certified clinic. Using dangerous practices to remove fetuses can have harmful side effects on the health of women. For instance, abortion through dilation and curettage might weaken and damage the cervix²³. This usually causes spontaneous miscarriages or premature delivery in subsequent pregnancies.

Also, unsafe abortion practices might damage the cavity of the uterus causing the formation of scar tissues and secondary infertility²⁴. Even pregnancy terminated through suction might lead to the displacement of the womb from its normal position. When the womb is not in the natural position, conception might occur in the fallopian tube but the zygote cannot survive in this situation because nourishment is not available in the uterine wall²⁴. Some women experience frequent pains in the abdomen, this pain might lead to miscarriage because it is not conducive for pregnancy. The debilitating effect of abortion is more pronounced in some young girls. Some are exposed to mental and psychological disturbances while others cast aspersions on themselves. Not only do the moral consequences of engaging in abortion weigh them down, but it can also mar their social relationship with others²⁵. As such, some need proper counseling and other types of mental health treatment to boost their self-esteem and confidence. According to the Society of Gynecologists and Obstetricians of Nigeria, between 20-40 percent of maternal death in the country are caused by unsafe and illegal abortion¹⁷. This suggests that the risk associated with complications arising from unsafe abortion practices is much higher than that of an abortion that is conducted in a safe and conducive environment.

Unplanned pregnancy is not a problem that is peculiar to Nigerians only, it is a common occurrence in every country in the world. The global rate of unplanned pregnancy was approximately 44% of every pregnancy between 2010 and 2014. Within this period, low-income places in Africa and Latin America recorded an estimated 89 and 96 unplanned pregnancies per 1000 women, respectively²⁶. However, unintended pregnancies and illegal abortions have negative impacts on Nigerian women because most of the abortion providers are not qualified to perform such a delicate medical procedure. Due to the criminalization of abortion, pregnant women that want an abortion might be compelled to use extreme measures to achieve their aims thus exposing their reproductive health to great risk. It is important to note that the criminalization of abortion does not stop people from engaging in the practice neither does it reduce the number of abortions procured in the country. For instance, the abortion rate in Africa is 29 per 1,000 matured women and 32 per 1,000 in South America—the majority of the countries in these regions criminalize abortion under most circumstances¹². In comparison to the countries in Western Europe where abortion is permitted, the abortion rate of 12 per 1,000 women. There are health risks associated with the procuring of unsafe induced abortion in Nigeria, and it can be divided into two major categories; infection and bleeding.

Infection

Infection is one of the main risks associated with illegal abortion practice in Nigeria. Research indicates 20-30 percent of unsafe abortions performed in the country usually lead to long-term consequences like Reproductive Tract Infection (RTIs)²⁷. Reproductive Tract Infections as the name implies are infections that affect the human reproductive system, they include sexually transmitted infections (STIs), and other infections not caused by sexual contact but by an overgrowth of bacteria living in the vagina. Between 20-40 percent of these RTIs pave the way for Pelvic Inflammatory Disease (PID) which affects the female reproductive organs like fallopian tubes, uterus, and ovaries, and finally infertility²⁷. In the same vein, PID is a risk factor for ectopic pregnancy, premature delivery due to cervical damages, and spontaneous miscarriages in subsequent pregnancies.

Bleeding

Bleeding is another major consequence of procuring an unsafe abortion in Nigeria because most of the abortion providers are not professional health care practitioners. Thus, the methods they use are crude and unethical, due to this, erosion of the uterine wall may occur causing profuse bleeding after the procedure or during childbearing. This can be dangerous because excessive bleeding after an induced abortion or post-natal bleeding may lead to death. Risk factors related to bleeding include; Hemorrhage, which is a medical term for losing a large amount of blood within a short period. In other words, hemorrhage means serious and severe bleeding. Technically, this is the escape of blood to extravascular space. Hemorrhage can be fatal as it causes low blood pressure (hypotension) or low blood volume (hypovolemia)²⁸.

The abortion law in Nigeria fails to take into cognizance the cultural, social, psychological, and even medical reasons why women with unintended pregnancies seek its termination. Women seek abortion for different reasons like emotional and financial inability to care for the child; fear of rejection and stigmatization by their parents, partners, friend, religious leaders and others in society; as a birth control means; mental and physical reasons; some are too young or not healthy to have a child; some victims of rape or sexual abuse desire to terminate pregnancies that resulted from such unfortunate experience; failure of contraceptives, etc²⁹. None of these reasons can be ignored or suppressed by stringent laws. It is the duty of the law to respond in accordance with these situations if it is to give liberty and freedom to the people in the society. This is why it is imperative to amend and reform the abortion laws in Nigeria to accommodate the present-day realities. This need is underscored by burgeoning population growth, little or no access to contraception, engaging in sexual activities at an early age, and the high rate of poverty and maternal mortality in the country.

Suggested Reforms to the Abortion Law in Nigeria

An obvious shortcoming in the present regulation on abortion in Nigeria today is that women are not protected from the actions of an unqualified abortion provider. Both the penal and criminal codes failed to clearly state who can perform an abortion. From this point of view, a

quack medical practitioner can perform the abortion and possibly have a defense in law if the individual can prove that the abortion was conducted to save the life of the mother. 60% of the abortions performed in Nigeria are provided by unqualified personnel resulting in 30–40% of maternal deaths through post-abortion complications in the country³⁰. The Nigeria abortion law gives leeway to unsafe abortion practices in its application or interpretation, the current regulation exposes women to the type of danger that calls for the reformation and implementation of government policies that protect the reproductive health of Nigerian women.

Another shortcoming in the current abortion law in Nigeria is the silence on the minimum standards of medical institutions that can conduct an abortion. This shortcoming also exposes women to risks. Technically under the law, abortions can be conducted in places that do not have the proper medical equipment. An abortion law that does not state the minimum qualifications for abortion providers, facilities and even the procedures and equipment to be used is exposing the reproductive health of women to danger. In line with the reformations made to abortion laws in countries like the United States of American and Canada, and to safeguard the reproductive health of women, abortion in Nigeria should be decriminalized with the implementation of reformed abortion laws that will be suggested in subsequent paragraphs.

Proposals on the Abortion Law in Nigeria

The reformed law should give women the right to seek abortion in the first 3 months of pregnancy. Abortion is indisputably safe during this interval and the fetus is not viable yet. The law may restrict abortion in the second 3 months of pregnancy for the safety of the mother and the safety of the fetus in the final 3 months of the pregnancy. The abortion policy in Nigeria must be changed to accommodate other credible reasons apart from saving the life of the pregnant woman. The following reasons can be taken into consideration; preservation of physical health especially when the physician holds a perception that the continuance of the pregnancy can pose a great risk to the physical health of the pregnant woman; preservation of mental health, a woman that is mentally ill does not possess the sound mind required to cater for an infant; also a woman should be at liberty to seek an abortion if they are a victim of rape or sexual assault; impairment of the fetus is another conceivable reason for abortion, particularly if there is a high possibility that the child might be seriously handicapped; social and economic reasons should also be considered due to high level of poverty in the country, some pregnant women do not possess the financial capability to take care of an infant.

The law should also be amended to state the minimum qualification an abortion provider need to possess before such an individual can be given a license to perform an abortion procedure and the minimum standard of equipment that must be present in medical facilities (especially private medical institutions) that will be permitted to conduct abortion. The law should ensure abortion providers are duly supervised to prevent abuse and unsafe practices. The new laws should promote information dissemination on the importance of reproductive

health and the use of contraceptives to prevent unplanned pregnancies which plunge most women into a state of helplessness. Enforcing efficient and effective education on contraception can reduce the number of abortions in Nigeria. The law should ensure that access to contraceptives is relatively easy, this will reduce the high rate of maternal mortality in Nigeria, prevent unplanned pregnancies, unsafe abortions, and sexually transmitted infections. The new regulation should focus on integrated family health education, mass orientation campaigns on abortion laws, and the improvement of the present national health care services in bids to alleviate the problems associated with unsafe abortion practices in Nigeria.

Other regulations that can be vital in the reformation of the abortion laws in Nigeria include proper training of health care practitioners about the management of abortion and complications associated with abortion, family planning education should be available to every fertile woman, provision of family planning services and liberalization of the abortion laws (women can seek abortion in the early stage of pregnancy, but they are restricted from having an abortion once the fetus has attained viable independent existence until the actual birth). The reformation of the current abortion laws in Nigeria should be pursued from the standpoint of improving the reproductive health of Nigerian women. Governments and other related agencies need to intensify efforts towards safeguarding the health of women and handling the adverse effects associated with abortions performed in unsafe conditions as a major public health issue.

Conclusion

This paper shows that abortion has been a part of human history since time immemorial and the concept continues to be a sensitive one that has generated various debates. The criminalization of abortion stems from a comparatively recent development. However, most countries are shifting towards the liberalization and decriminalization of abortion because of the realization that it is safer to do so. Worldwide, approximately 68,000 women lose their lives due to complications from unsafe abortions annually. This prevalence translates into an estimated case-fatality rate of 367 deaths per 100 000 unsafe abortions, which is hundreds of times higher than the statistics for safe, legal abortion in developed nations³¹. The continued criminalizing of abortion in Nigeria is, thus, dangerous and unrealistic legislation. It is unrealistic because the law has failed to curb or reduce the rate of unsafe abortions from the statistics stated in the paper, but it has succeeded in making abortion a covert procedure with dire consequences on the reproductive health of women. It is dangerous because of the high rate of maternal death caused by unsafe abortion practices and the long-term damage to the reproductive health of women due to the inevitable use of unqualified personnel and self-medication. As opposed to perceiving abortion as a punishable offense, abortion should be considered as a human right, hence its criminalization violates that right. Overall, some suggestions were made on the approach to use for the reformation of the abortion law in the country. The implementation of these reformations will protect the present and oncoming generation of fertile Nigerian women from the negative impact of engaging in unsafe abortion practices.

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