Abortion In Lebanon: Practice and Legality?

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Induced abortion refers to the voluntary interruption of pregnancy (CDC, 2001). The debate whether it should be legal or not has become a political issue all over the world, particularly that social changes resulted in a continuous modification of legislation and social attitudes concerning abortion. However, in Lebanon, though a major public health concern, this issue does not seem to be of interest to the public or to policy makers. The Lebanese law declared abortion illegal decades ago. The virtual absence of attempts to amend this law ever since, as well as the absence of research concerning its effect on the community, reflects that abortion does not seem to be a public issue of concern. In theory, this law addresses the needs of the Lebanese community and everybody appears to be abiding by it. However, the real picture seems far from this. Experts in the field believe that Lebanese women are constantly breaking the law to accommodate their actual needs (LFPA, 2001). They also claim this violation is well known to policy makers. Yet, they are not willing to act accordingly. For many reasons, they are not ready to modify the law; at the same time, they are not enforcing its implementation but rather turning a blind eye to the perpetrators.

The Lebanese law states that "Any woman who, by whatever means, whether utilized by herself or a third person with her consent, aborts herself, shall be punished by imprisonment from six months to three years" (Nazer, 1971). It also punishes whoever aborts, or attempts to abort, a woman (Nazer, 1971). Abortion is permitted if it is only the means of saving the life of the pregnant woman with the consent of two physi-

cians other than the attending one (Dib, 1975). These acts reveal that any woman aborting and any person aborting her, except in specified situations, would be both committing an illegal act that deserves punish-

Induced abortion, according to reproductive health experts, is practiced in Lebanon (LFPA, 2001). However, accurate numbers regarding its prevalence are virtually absent. In the developing countries, 36% of pregnancies are unwanted, and 20% of them end in abortion (AGI, 1999). Among the 46 million women having abortion each year worldwide, 20 million of them live in countries where abortion is restricted or prohibited by law (AGI, 1999). These abortions are thought to be performed by unskilled persons mainly in the developing world (Kleinman, 1989). More recently, the WHO report on abortion estimated the incidence of unsafe abortion in Western Asia to be 500,000 in the years between 1995 and 2000. Those abortions have resulted in 1,100 maternal deaths (WHO, 1998).

Many social and economic factors stand behind the need of Lebanese women to seek abortion. Social factors, for unmarried women, arise mainly from the community's intolerance of premarital sex or cases of rape or incest that may result in an unwanted pregnancy. For married women, social and economic factors such as being too poor to raise a child, reaching their desired family size, or wanting to space their pregnancies interplay in forming the need for abortion (Atwi, 2001). In addition, a deformed fetus may be a suffiFile File

cient reason for some couples to resort to abortion. There are also some couples that may choose to abort the female baby even when it is against the law because they are waiting for the male child." As a result of pressures caused by the low status of females in her society, a woman may well wish to practice selective abortion of female fetuses. This is not in the interest of the community as a whole, and certainly will do nothing to advance the cause of women in general" (Brown, 1999).

Those women who choose to abort are bearing the consequences of committing an illegal act. These consequences may vary from mere medical complications and economic burden to social labeling and legal prosecution. Unsafe abortion accounts for many severe medical complications such as sepsis, hemorrhage, uterine perforation and reproductive tract infections (WHO, 1998). Where abortion is legal, maternal complications and mortality are generally lower, often because abortions are performed by trained medical professionals, which is safer and more readily available (Rahman et al, 1998).

The price of abortion is high. Medically trained practitioners are usually less willing to provide the service (Rahman et al, 1998). In addition, the specialist who performs it is charging for his work as well as for the risk of legal prosecution. A woman's inaccessibility to abortion will oblige her to pay any fee that is set by the person performing the procedure. To roughly obtain an idea about the cost of abortion in Lebanon, ten con-

sulted physicians practicing in Beirut identified the cost to be between 300 and 1200US\$, depending on the milieu of the operation whether in a clinic or a hospital operating room. Most of them charge 600 US\$ for an abortion performed in an operating room. One physician said that the price is negotiable according to the economic situation of the woman. It is important to note that this cost is not covered by any type of medical insurance.

A conservative community such as the Lebanese condemns a single

woman who gets pregnant, since it is an unquestionable indication of premarital sex. Abortion seems to be her only way out to avoid shame and social stigma. However, abortion by itself is condemned because it is considered unethical by the majority. Thus, the woman is left alone to decide how to deal with her situation. The illegality of abortion further aggravates the situation by exposing the woman to legal prosecution. All of this renders abortion a traumatic experience.

Unlike neighboring countries, there is no recent revision date for the abortion law in Lebanon. The Lebanese law was issued in 1949 and revised once in 1969; whereas, the Egyptian abortion law was passed in 1937 and revised in 1994 (AGI, 1990). Apparently, both the existing and the negative consequences of the current law are not a sufficient drive for policy makers to reconsider the issue of abortion. An interview with a representative of the Lebanese Family Planning Association (LFPA, 2001) showed that officials from the Ministry of Social Affairs and the Ministry of Public Health refuse to put the abortion issue on their agenda though they are well aware of its magnitude. In this manner, they are overlooking violations of the law; and at the same time, are not willing to modify it to meet the need they acknowledge. This discrepancy is a consequence of the complex political and religious structure of the Lebanese society.

The debate over abortion, as being evident from other countries, reflects struggles over gender roles, laws, relations between religious leaders and the state, and the way the policymaking system works (Kulczycki, 1999). In Lebanon, as well as in many other developing countries, the present system is characterized by limited participation, lack of responsiveness to public needs and the almost total lack of public scrutiny and accountability (Iskandar, 1996). This leaves room for the political elite, which is closely associated and backed up by religious leaders for keeping abortion laws at its status quo without trying to adjust it according to the actual needs of the society.

> Power and efforts to enhance authority are key elements in local, national, or international policy debate involving gender concerns (Lane and Cibula, 2000). Abortion is a feminine issue, closely related to a woman's body in a male versus female sub-cultures. According to the current Lebanese abortion law, the decision to abort does not belong to the woman. Females in such a society lack the legal power to choose whether to stay pregnant or not. Consequently, they lack the privilege of practicing their repro-

ductive right that is defined as the right of the individual to decide "freely and responsively" (Obermeyer, 1995). This law generally favors the perspective of powerful men in such a patriarchal society. Changing it in favor of women would only imply empowering them, keeping in mind that not many women favor abortion. Some women who put their ethical and religious beliefs in the forefront, consider that abortion is killing an innocent soul. Accordingly, in order to pre-

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The exchange of power among religious leaders and politicians in Lebanon is also a key determinant in the policy making process. In a sectarian system, politicians rely on religious leaders for support. In return, policies are highly influenced by the aspirations of religious leaders. This leaves little room for

other pressure groups to interfere. Accordingly, the Lebanese abortion law is set in accordance to what the religious groups desire, though not all religious groups forbid abortion. In Islam, there are some groups that allow abortion before 120 days of pregnancy (Atwi, 2000). Christianity, most **Protestants** approve abortion and consider it a private decision; Roman Catholics see that although a sin, abortion must not be illegal because a "sin is not a crime" (AGI, 1990). Obermeyer (1995) argues that we should distinguish between the "ideal of religion" and its imple-

mentation by different sects. This is because we have militant groups that compete to reach absolute monopoly even if at the expense of truth. The fear of promoting premarital sex stands as a major factor behind the religious leaders' resistance to the legalization of abortion. Furthermore, they fear accusations which will risk their political power sharing. As Obermeyer (1995) puts it, women's roles and reproductive rights are influenced more by local and international politics than by religion.

On the other hand, abortion does not constitute a priority in a country politically unstable and suffering from major economic difficulties. Political instability directs the public attention away from less important issues such as abortion, towards more critical problems such as border disputes and the escalating political turmoil in the Middle East. The economy is deteriorating, the unemployment rate is rising, the percentage of people under the poverty line and the national debt (Korm, 2001) are increasing at an alarming rate. All of these factors have diverted public attention to the amelioration of the economy rather than trying to focus on details not on the official priority list.

Despite such problems, social change is needed to help pregnant women decide what to do; society as a whole must decide what range of options will be socially supported. The need for abortion arises most directly from the problem of unintended and burdensome pregnancies, which can be seen as both personal and economic. This is why creating awareness regarding sex education and family planning helps reduce the rate of unintended pregnancies, to start with.

However, the application of these issues may not always be practical. Introducing sex education in the Lebanese curricula at all levels of education and teacher training is not very feasible in Lebanon. Yet, government teachers, parents, and the community at large should be made aware of the importance of preparing young people for

> responsible sexual behavior. Lebanon, the extent of contraceptive use is determined less by individual preference and more by availability. Access to contraception varies widely according to region, income, peer and family approval, age, legal restrictions, and even the time at which a request is submitted. Therefore, structural and personal obstacles to the practice of contraception should be recognized. A woman may not actually prefer abortion, but may find it difficult or impossible to use contraception. There may be no methods, or no effective methods available at all in her locality, or if available, their cost

may be prohibitive, or she may be misinformed or actively discouraged from adopting contraception.

Regardless of all measures aimed at treating the problem of unwanted pregnancy at its roots, there is still a need to focus on the final stage where pregnancy has already occurred. Institutions may play a crucial role at this stage by providing medical and psychological support and taking care of the newborn after the mother leaves. "Le Bon Pasteur" is the only example of such institution in Lebanon. It provides shelter and support for unmarried females during their course of pregnancy. The expansion of these services to more people in the community may constitute an alternative to abortion. Therefore, more institutions of this kind are needed. They should be better promoted and more accessible. Speaking to the needs of working women, for instance, day care centers and child support institutions will reduce the tension between career and family and will render abortion less necessary.

Ideally, laws need to be tailored to meet people's need. However, law is conventionally distinguished from ethics and justice (Rodee et al, 1983). Social inertia acts as an impediment to changing an unjust law, and thus very persuasive arguments for change are not necessarily acceptable to policymakers. The arguments in favor of the status quo, contribute to the stability of the legal "apple cart" (Rodee et al, 1983). Therefore, the present Lebanese law on abortion does not necessarily suggest the prevailing public opinions. File

Restrictive laws that are widely ignored and unenforced remain on paper when public acceptance of abortion is widespread.

In conclusion, the desire for abortion entails failure, whether of personal relationships, contraception, or of society's ability to tolerate those who fail to keep its moral codes. The abortion issue is caught in a vicious circle: legislators who disregard the enforcement of the law and beneficiaries who are taking full advantage of the loose implementation and acting as if it

does not exist. At the same time, anti-abortion groups are constantly resisting any attempts to break this unspoken compromise. There seems to be an understanding among the different parties to keep the situation as is, a situation, which is most suitable to all of them.

Acknowledgment:

We would like to thank Ms. Suha Shidiac for her input in the paper. We would also like to thank Dr. Judy Makhoul for her valuable advice.

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