International Humanitarian Law and Access to Abortion

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International Humanitarian Law and Access to Abortion

COMPILATION OF CITATIONS

Sexual violence in today's armed conflicts is systematically used against civilians to demoralize, destroy, terrorize, and even change the ethnic compositions of entire communities. For instance, the ongoing Syrian civil war has seen an estimated 50,000 rapes. Women there describe being drugged, blindfolded, and raped in groups. In Iraq, ISIS has systematically abducted girls and women, held them in captivity, and repeatedly subjected them sexual violence including rape and sexual slavery. In Darfur, Sudan, where sexual violence has been used as a tactic of war for over 12 years, a 2015 attack in Tabit included the mass rape of over 200 women and girls in the span of three days. Finally, in Nigeria, Boko Haram openly targets young girls for kidnappings, forced marriage, rape, sexual slavery and other forms of gender-based violence.

Today, thousands of girls and women raped and impregnated in armed conflict are routinely denied abortions with devastating consequences. A girl or woman who is a victim of war rape and is denied an abortion when she wants one often has three options: (1) undergoing an unsafe abortion; (2) carrying to term an unwanted pregnancy; or (3) committing suicide. The denial of abortion services to these victims is both illegal and inhumane.

In the context of armed conflict, the rights of war victims are protected under international humanitarian law. Specifically, victims of war rape are part of a special class of people called "wounded and sick in armed conflict." This status means they are entitled to comprehensive and non-discriminatory medical care provided solely on the basis of their condition. Failing to provide – or denying – a medical service needed only by one gender (i.e. abortion) violates these absolute rights.

Abortion as protected medical care under international humanitarian law has increasingly been recognized by states, international policy makers, and legal experts on international humanitarian law. This document complies language and citations of laws, policies, authoritative declarations of public officials, and legal treatises, that affirm abortion as protected medical care for girls and women raped in war under IHL.

BOOKS

The 1949 Geneva Convention: A Commentary, ed. Andrew Clapham, Paola Gaeta and Marco Sassòli, Oxford University Press (October 2015).

Gabor Rona and Robert McGuire, *The Principle of Non-Discrimination*

"A related, more isolated, and novel line of argument concerns claims made by advocacy groups as to the potentially discriminatory implementation of humanitarian aid delivery by the United States (US). As a matter of fact, humanitarian aid delivered by the US is subject to a 'no abortion clause', which requires that this aid will not be used for abortion services. Critics argue that this policy discriminatorily limits access to comprehensive medical care for women victims of sexual violence in armed conflicts. In 2010, the UN Human Rights Council Working Group on the Universal Periodic Review suggested that the US '[remove] blanket abortion restrictions on humanitarian aid covering medical care given women and girls who are raped and impregnated in situations of armed conflict'. The suggestion was offered by Norway, citing to a non-governmental organization report asserting that access to abortion is part of the medical treatment for rape and that the US restriction violates Common Article 3. The US responded that such action would be impermissible under domestic law; the US did not advance an international law argument. More recently, Louise Doswald-Beck also urged the President of the United States to life these abortion restrictions, emphasizing that this policy contravenes the prohibition of adverse distinction found in Common Article 3 of the Geneva Conventions.

The United Kingdom also recently clarified its position on the issue of non-discrimination in humanitarian aid distribution, stating that abortion services may be required by Common Article 3, if they are deemed medically necessary. The spokesperson stated that such obligations under Common Article 3 must be fulfilled despite conflicts with domestic law."

Annyssa Bellal, *The Wounded and Sick*

"The UK has recognized that its policy would permit the provision of abortion services in line with international humanitarian law:

It is the UK's view that in situations of armed conflict or occupation where denial of abortion threatens the woman's or girl's life or causes unbearable suffering, international humanitarian law principles may justify offering a safe abortion rather than perpetuating what amounts to inhumane treatment in the form of an act of cruel treatment or torture.

This policy was first announced in the January 9, 2013 House of Lords debate led by Lord Lester. During that debate Baroness Northover, representing the Government, underlined that:

As the [UK military] manual notes, and as my noble friend Lord Lester pointed out, where there is a direct conflict between national law and the fundamental obligation on parties to a conflict under Common Article 3 of the Geneva Conventions, the obligation is to comply with Common Article 3…The denial of abortion in a situation that is life threatening or causing unbearable suffering to a victim of armed conflict may therefore contravene

Common Article 3. Therefore, an abortion may be offered despite being in breach of national law by parties to the conflict or humanitarian organisations providing medical care and assistance.

On 18 October 2013, the UN Security Council adopted Resolution 2122 (2013) which recognized 'the importance of Member States and United Nations entities seeking to ensure humanitarian aid and funding includes provision for the full range of medical, legal, psychosocial and livelihood services to women affected by armed conflict and post-conflict situations, and noting the need for access to the full range of sexual and reproductive health services, including regarding pregnancies resulting from rape, without discrimination'. Subsequently, the EU, aligned with the United Kingdom, France and the Netherlands, recognized the right to abortion for victims of rape in armed conflicts under international humanitarian law.

It is not possible, within the framework of this chapter, to comment further on this issue. Let us simply note that rape victims can be qualified as 'wounded and sick' within the meaning of the Geneva Conventions."

The War Report: Armed Conflict in 2014, ed. Annyssa Bellas, Oxford University Press (December 2015).

Alice Priddy, *Tacking Impunity for Sexual Violence*

"For a woman or girl who has been raped the ability to freely access medical services, including emergency contraception and termination is vital. Yet in States where conflict-related sexual violence is more prevalent women and girls are still being denied access to safe and legal termination services. The risks associated with pregnancy are real for all women: maternal mortality is so grave a problem that everyday 800 women die as a result of complications in pregnancy and childbirth. The risks will be even greater in States where health care services are not available and for young girls whose underdeveloped bodies struggle to cope with pregnancy-aside from the internal injuries sustained during rape. I would argue that any policy that denies access to emergency contraception and termination services, thereby failing to take into account the often inevitable consequences of the rape of females, it is prohibited under international law as equates to discrimination on the grounds of gender, and amounts to cruel, inhuman, or degrading treatment where this forces a female to either undergo a dangerous illegal termination or carry an unwanted pregnancy. As asserted by Louise Doswald-Beck, women raped in armed conflict are also entitled to treatment under international humanitarian law as 'wounded and sick' and '[e]xclusion of one medical service, abortion, from the comprehensive medical services provided to the "wounded and sick" in armed conflict, where such service is only needed by one gender, is not only a violation of their [females] right to medical care, but also a violation of the prohibition on "adverse distinction" found in common Article 3, the Additional Protocols to the Geneva Conventions, and customary international law."

COUNTRY POLICIES

United Kingdom

Department for International Development, Safe and unsafe abortion, June 2014

"The UN Security Council Resolution 2122 notes the need for access to comprehensive sexual and reproductive health services for women affected by armed conflict and post conflict situations. It is the UK's view that in situations of armed conflict or occupation where denial of abortion threatens the woman's or girl's life or causes unbearable suffering, international humanitarian law principles may justify offering a safe abortion rather than perpetuating what amounts to inhumane treatment in the form of an act of cruel treatment or torture. Clearly this will depend on the woman's choice, her condition and the safety and security of the humanitarian staff, as well as other contextual factors."

Netherlands

Written answers to parliamentary questions, March 2013

"[I]t is a humanitarian law duty to provide medical care, including abortion for victims of rape, if and when there is a medical necessity regardless of national law . . . It is our [government's] opinion that raped women and girls in war zones have the right to any and all necessary medical care of great quality, this includes safe abortion."

France

Statement of Ambassador Araud at the United Nations Security Council, 25 April 2014

"The refusal to provide abortion services [to victims of war rape] represents a violation of one of the principles of international humanitarian law, which covers non-discrimination with respect to the provision of medical services to victims. Such discrimination, which adds a terrible injustice to women who have been the victims of sexual violence, must be brought to an end."

EUROPEAN UNION

Policy Position of the European Commission, September 2015

"In cases where a pregnancy threatens a woman's or a girl's life or causes unbearable suffering, international humanitarian law and/or international human rights law may justify offering a safe abortion rather than perpetuating what amounts to inhumane treatment. Women and girls who are pregnant as a result of rape should first receive appropriate and comprehensive information and be provided access to the full range of sexual and reproductive health services. Naturally, these will depend on the woman's wishes, on her condition, on the security of the humanitarian workers, as well as on other context related factors."

List of texts adopted by the European Parliament

on the subject of access to full medical care, including abortion, for female war rape victims in humanitarian contexts.

European Parliament recommendation of 14 February 2017
on priorities for the 61th session of the UN Commission on the Status of Women, 2017/2001(INI)

"Strongly condemn the 'global gag' rule, which prohibits international organisations from receiving US family planning funding if they provide, counsel for, refer to or lobby for abortion services; consider this rule as a direct attack on and a setback for gains made for women's and girls' rights; call, as a matter of urgency, on the EU and its Member States to counter the impact of the gag rule by significantly increasing sexual and reproductive health and rights funding and launching an international fund to finance access to birth control and safe and legal abortion, using both national as well as EU development funding, in order to fill the financing gap left after the Trump administration's moves to cease funding all overseas aid organisations that provide sexual and reproductive health and rights services;"

ACP-EU Joint Parliamentary Assembly Resolution 15 June 2017
on rape and violence against women and children in armed conflicts

"[…] whereas international humanitarian law requires that abortion be treated as necessary medical care for girls and women impregnated by rape in war, which means that war rape victims have a right of access to abortion as part of necessary medical care…whereas international humanitarian law, including the Geneva Conventions and the additional protocols thereto, applies in times of conflict and supersedes national or local law."

"[…]Calls on all states to adopt and enforce legislative, administrative and social measures aimed at preventing rape and violence against women and children in conflict and post-conflict situations, and to ensure that the victims receive rehabilitation, adequate support and healthcare and psychological assistance services, including sexual and reproductive healthcare…Calls on all states and international actors taking part in conflict and

humanitarian aid, including the European Commission to commit to ensuring that women and girls are safe from the start of every emergency or crisis by addressing the risk of sexual and gender-based violence, by raising awareness, by taking steps to prosecute the perpetrators of such violence, and by ensuring that women and girls have access to the full range of sexual and reproductive health services, including safe abortions, in humanitarian crises, rather than perpetuating what amounts to inhumane treatment, as provided for in the Geneva Conventions and the Additional Protocols thereto."

European Parliament resolution of 28 April 2016
on attacks on hospitals and schools as violations of international humanitarian law (2016/2662(RSP))

"[…] calls for a global commitment to ensuring that women and girls are safe from the start of every emergency or crisis by addressing the risk of sexual and gender-based violence, by raising awareness, by taking steps to prosecute the perpetrators of such violence, and by ensuring that women and girls have access to the full range of sexual and reproductive health services, including safe abortions, in humanitarian crises, rather than perpetuating what amounts to inhumane treatment, as required by international humanitarian law and as foreseen in the Geneva Conventions and their Additional Protocols;"

European Parliament resolution of 17 December 2015
on the Annual Report on Human Rights and Democracy in the World 2014 and the European Union's policy on the matter (2015/2229(INI))

"[…] stresses the need for women, girls and children abused in conflicts to have access to health and psychological care, in line with international law; takes note in this context of the VP/HR letter regarding humanitarian aid policy, in particular preventing sexual violence and providing women with appropriate support and access to health and psychological care in case of rape in conflict situations;"

European Parliament resolution of 16 December 2015
on preparing for the World Humanitarian Summit: Challenges and opportunities for humanitarian assistance (2015/2051(INI))

"Urges that the provision of humanitarian aid follows international humanitarian law, and that EU humanitarian aid not be subject to restrictions imposed by other partner donors; expresses its concerns over, and condemns, the continued use of rape and other forms of sexual and gender-based violence against women and girls as a war weapon in humanitarian emergencies; emphasises that this violence, along with its physical and psychological consequences, needs to be addressed; calls for a global commitment to ensure that women and girls are safe from the start of every emergency or crisis by addressing the risk of sexual and gender-based violence, by raising awareness, by assuring

the prosecution of the perpetrators of such violence, and by ensuring that women and girls have access to the full range of sexual and reproductive health services, including safe abortions, in humanitarian crises, rather than perpetuating what amounts to inhumane treatment, as required by international humanitarian law and as foreseen in the Geneva Conventions and their Additional Protocols;"

European Parliament resolution of 8 October 2015
on the mass displacement of children in Nigeria as a result of Boko Haram attacks (2015/2876(RSP))

"[…] appeals to the authorities in the sub-region to ensure ease of access to the full range of sexual and reproductive health services for women and girls who have been raped, in accordance with the common Article 3 of the Geneva Conventions; stresses the need to implement a universal standard for the treatment of war rape victims and to ensure the primacy of international humanitarian law in situations of armed conflict; […]"

European Parliament resolution of 9 July 2015
on the security challenges in the Middle East and North Africa region and the prospects for political stability (2014/2229(INI))

"Points out that war rape against women and girls has been documented, notably in Syria, Iraq, and territories controlled by Da'esh; urges that female victims of rape in the context of armed conflict be offered the full range of sexual and reproductive health services, including abortion, in EU-funded humanitarian facilities, in accordance with international humanitarian law, UN Security Council resolutions, and the common Article 3 of the Geneva Conventions, guaranteeing all necessary medical care required by the wounded and sick without any adverse distinction;"

European Parliament resolution of 9 June 2015
on the EU Strategy for equality between women and men post 2015 (2014/2152(INI))

"Calls on the Commission to promote the establishment of an action plan based on UN Security Council Resolutions 1325 and 1820 on women, peace and security, by the Member States; reminds the international community of the necessary safeguards for women and girls, notably protection against rape used as a weapon of war and forced prostitution; strongly condemns the continued use of sexual violence against women as a weapon of war; stresses that more needs to be done to ensure respect for international law, protection of victims, and access to medical and psychological support for women and girls abused in conflicts;

Urges that the provision of humanitarian aid by the EU and the Member States should not be subject to restrictions imposed by other partner donors regarding necessary medical treatment, including access to safe abortion for women and girls who are victims of rape in armed conflicts;"

European Parliament resolution of 30 April 2015
on the situation in Nigeria (2015/2520(RSP))

"Urges that wounded soldiers receive the appropriate treatment, and that girls and women who are victims of rape in the context of armed conflict be offered the full range of sexual and reproductive health services, in EU-funded humanitarian facilities, in accordance with common Article 3 of the Geneva Conventions, which guarantees all necessary medical care required by the condition of the wounded and sick, without making adverse distinctions;"

European Parliament resolution of 30 April 2015
on the situation of the Yarmouk refugee camp in Syria (2015/2664(RSP))

"Strongly condemns the abuses against children, massacres, torture, killings and sexual violence to which the Syrian population is victim; stresses the importance of taking appropriate steps to ensure the safety of innocent civilians, including women and children; acknowledges that women and girls are frequent victims of war rape in the Syrian conflict, including in regime prisons; underlines the Geneva Conventions' common Article 3 guaranteeing the wounded and sick all the necessary medical care required by their condition without adverse distinction; urges humanitarian aid providers to provide the full range of health services in EU-funded humanitarian facilities;"

European Parliament resolution of 13 June 2013
on the Millennium Development Goals – defining the post-2015 framework (2012/2289(INI)

"Urges that the provision of EU humanitarian aid that contributes to the attainment of the MDGs and should effectively be excluded from the restrictions on humanitarian aid imposed by the USA or other donors, in particular by ensuring access to abortion for women and girls who are victims of rape in armed conflicts;"

European Parliament resolution of 13 March 2012
on equality between women and men in the European Union – 2011 (2011/2244(INI))

"Reminds the Commission and the Member States of their commitment to implement UN Security Council Resolution 1325 on Women, Peace and Security, and urges the provision of EU humanitarian aid to be made effectively independent from the restrictions on humanitarian aid imposed by the USA, in particular by ensuring access to abortion for women and girls who are victims of rape in armed conflicts;"

UNITED NATIONS

Security Council Resolutions on Women, Peace and Security

UN Security Council Resolution 2242 (2015), U.N. Doc S/RES/2242 (13 October 2015)

"Calls upon Member States, the United Nations, and other relevant actors to ensure due consideration is given to the Women, Peace and Security agenda in the process and outcome of the World Humanitarian Summit in Istanbul, Turkey, in 2016, further recognises the importance of integrating gender considerations across humanitarian programming by seeking to ensure the provision of access to protection and the full range of medical, legal and psychosocial and livelihood services, without discrimination, and through ensuring women and women's groups can participate meaningfully and are supported to be leaders in humanitarian action, and urges the Secretary General to strengthen leadership and political will at all levels on this issue and ensure accountability to existing humanitarian frameworks related to women's empowerment and gender equality which contribute to the implementation of the Women, Peace and Security agenda;"

UN Security Council Resolution 2122, preamble, U.N. Doc. S/RES/2122 (18 October 2013)

"Recognizing the importance of Member States and United Nations entities seeking to ensure humanitarian aid and funding includes provision for the full range of medical, legal, psychosocial and livelihood services to women affected by armed conflict and post-conflict situations, and noting the need for access to the full range of sexual and reproductive health services, including regarding pregnancies resulting from rape, without discrimination."

UN Security Council Resolution 2106, ¶ 19, U.N. Doc. S/RES/2106 (24 June 2013)

"Recognizing the importance of timely assistance to survivors of sexual violence, urges United Nations entities and donors to provide non-discriminatory and comprehensive health services, including sexual and reproductive health, psychosocial, legal, and livelihood support and other services for survivors of sexual violence, [...]"

Reports by the Secretary-General on Women, Peace and Security

Report by the Secretary-General on Women, Peace and Security U.N. Doc. S/2018/900 (9 October 2018)

I reiterate previous recommendations on the delivery of child- and adolescentfriendly, non-discriminatory holistic health-care and other services, including sexual and reproductive health care, particularly access to safe services for the termination of pregnancies and mental health and psychosocial support, which should be delivered in accordance with international human rights law. I continue to acknowledge the leadership of the Netherlands and the United Kingdom in prioritizing sexual and reproductive health and rights in humanitarian crises and call on other Member States to contribute to these efforts.

Report by the Secretary-General on Women, Peace and Security U.N. Doc. S/2017/861 (16 October 2017)

23. Investment in resources for survivors must span legal and essential services, addressing distinct vulnerabilities for those forcibly displaced and others. This necessarily includes access to mental health and psychosocial support, shelter, livelihood support, justice and reparations, and sexual and reproductive health services, including the treatment and prevention of HIV/AIDS and sexually transmitted infections and the safe termination of pregnancies resulting from rape, without discrimination and in accordance with international human rights and humanitarian law. Examples of such survivor-centred programmes include the integrated multisectoral gender-based violence prevention and response programmes of the United Nations Population Fund (UNFPA) in Myanmar and the work of the Office of the United Nations High Commissioner for Refugees (UNHCR) in creating and enhancing medical referral systems for sexual and gender-based violence in nine countries, which gave more than 485,000 refugees and other persons of concern access to health care. More than 60 countries, international and regional organizations and non-governmental organizations have united through the Call to Action on Protection from Gender-based Violence in Emergencies. I welcome efforts to address the stigma associated with conflict-related sexual violence, such as the Preventing Sexual Violence Initiative of the United Kingdom of Great Britain and Northern Ireland and principles on tackling stigma, launched this year.

Report by the Secretary-General on Women, Peace and Security U.N. Doc. S/2016/822 (10 November 2016)

The three peace and security reviews conducted in 2015 highlighted the centrality of a human rights-based approach for conflict prevention, peacebuilding and sustainable peace and the importance of working in complementarity with international human rights law to strengthen gender equality. I welcome the focus of the Security Council on protecting health-care workers, the sick and the wounded and medical facilities in war zones, in line with international humanitarian law and as expressed in its resolution 2286 (2016). Attacks on workers and facilities, as well as a lack of access to health-care services, including abortion- and HIV/AIDS-related reproductive health care, have a devastating impact in conflict-affected settings…I recognize the efforts by Member States and United Nations entities to respond to violence against women and girls in conflict by providing non-discriminatory, holistic health services, including sexual and reproductive health care and psychosocial support in line with international humanitarian law.

Report by the Secretary-General on Women, Peace and Security U.N. Doc. S/2015/716 (17 September 2015)

"I have emphasized the need to make available medical, legal, psychosocial, and livelihood services to survivors of rape, including access to emergency contraceptives and services for safe termination of pregnancies resulting from rape, without discrimination, and in accordance with international human rights, refugee and humanitarian law."

Report by the Secretary-General on Women, Peace and Security U.N. Doc. S/2014/693 (23 September 2014)

"In line with Security Council resolution 2122 (2013), I call on all actors to support improved access to comprehensive sexual and reproductive health services in conflict-affected settings. This must include access to HIV counselling and testing, which remains limited in many settings, and the safe termination of pregnancies for survivors of conflict-related rape."

"Legal, medical and psycho-social services for survivors of sexual and gender-based violence in conflict must be provided in a gender responsive and non-discriminatory manner and in accordance with international humanitarian law."

Report of the Secretary-General on Women, Peace and Security U.N. Doc S/2013/525 (4 September 2013)

"Ensure that humanitarian aid and funding includes provision for the full range of medical, legal, psychosocial and livelihood services to victims of rape, including access to services for safe termination of pregnancies resulting from rape, without discrimination and in accordance with international humanitarian law."

Report by the Secretary-General on Conflict Related Sexual Violence U.N. Doc. S/2019/280 (29 March 2019)

136. To strengthen services for all survivors, I recommend:

(a) Addressing funding shortfalls for programming relating to sexual and gender-based violence and sexual and reproductive health care in conflict-affected settings, given that these are lifesaving interventions;

(b) The delivery of multisectoral assistance for all survivors of sexual violence, including the clinical management of rape, medical, psychosocial and legal services, including comprehensive sexual and reproductive care such as access to emergency contraception and safe termination of pregnancy and HIV prevention, awareness and treatment, as well as reintegration support for survivors, including shelters, where appropriate, and economic livelihood programmes – particular attention should be paid to the diverse range of victims: ethnic or religious minorities; women and girls in rural or remote areas; those living with disabilities; female heads of households; widows; male survivors; women and children associated with armed groups; women and children released from situations of abduction, forced marriage, sexual slavery and trafficking by armed groups; children born of wartime rape; and lesbian, gay, bisexual, transgender and intersex persons, who may require specialized responses.

UN Global Study on the implementation of UN Security Council Resolution 1325 "Preventing conflict, transforming justice, and securing peace" (October 2015)

"Access to safe abortions and post-abortion care is a lifesaving part of comprehensive reproductive health care. Unsafe abortion is one of the five leading causes of maternal mortality, causing 13 per cent of maternal deaths worldwide. In conflict and postconflict settings, where pregnancy is particularly dangerous and is often the result of sexual violence, access to safe abortion is especially important. International humanitarian law protects the right of the wounded and sick to the medical care required by their condition. Pregnancy from conflict-related sexual violence aggravates the serious, sometimes lifethreatening injuries from the rapes themselves. Studies have shown that unwanted pregnancy through rape as well as the conditions imposed by war – malnutrition, anaemia, malaria, exposure, stress, infection, disease – increase the risks of maternal mortality. Exclusion of one medical service, abortion, from the comprehensive medical care provided to the wounded and sick in armed conflict, where such service is needed by only one gender, is a violation not only of the right to medical care but also of the prohibition on "adverse distinction" found in common Article 3, the Additional Protocols to the Geneva Conventions and customary international law. Importantly, it is also in violation of international human rights law. The Committee on the Elimination of Discrimination against Women (CEDAW Committee) has specified that "it is discriminatory for a State party to refuse to legally provide for the performance of certain reproductive health services for women". Also, the Committee establishes that "laws that criminalize medical procedures only needed by women and that

punish women who undergo those procedures" are a barrier to women's access to health care. The Committee on the Rights of the Child has also recommended that "States ensure access to safe abortion and post-abortion care services, irrespective of whether abortion itself is legal."

"In recent years, a growing chorus of actors have raised their voice in support of this position. To the Human Rights Committee, the Committee against Torture and the UN Special Rapporteur on this topic, denial of abortion to women and girls made pregnant by rape can constitute an act of torture or cruel, inhuman and degrading treatment. In 2013, in his report on women, peace and security, the Secretary-General urged that humanitarian aid and funding provide for the full range of medical, legal, psychosocial and livelihood services to victims of rape, "including access to services for safe termination of pregnancies resulting from rape, without discrimination, and in accordance with international human rights and humanitarian law." In Resolution 2122 (2013), the Security Council recognized the importance of medical services for women affected by armed conflict and specifically noted "the need for sexual and reproductive health services, including regarding pregnancies resulting from rape, without discrimination." Since 2012, the European Parliament has adopted at least four resolutions supporting this view. And in 2013, the CEDAW Committee recommended that States parties ensure that sexual and reproductive health care includes safe abortion services and post-abortion care. International human rights law and international humanitarian law apply universally, irrespective of national legislation. This includes the aid policy of the world's largest donor, the United States, and the restrictive effect it has on the provision of abortion by humanitarian agencies worldwide. In war zones, women who are raped almost never have access to emergency contraception. Supporting their choice to terminate their pregnancy safely would have an immeasurable impact on women's lives."

Guidance Note of the Secretary-General: Reparations for Conflict-Related Sexual Violence

"Administrative reparations programmes can also include fistula surgery, access to safe abortion services, psycho-social support and other relevant measures."

"Among other legislative measures that are needed, legislation reform is needed to further women's participation in all areas of post-conflict governance processes, including through the introduction of temporary special measures."

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