Though abortion was previously legal in Laos, it was highly restricted. In practice, the provision of Manual Vacuum Aspiration (MVA) and Medical Abortion (MA) was widespread, but without the legal framework to support them, access to safe procedures was limited and providers were left untrained and unmonitored. As a result, many women turned to dangerous methods to end their pregnancies.

In 2016, Laos completed the first Maternal Death Review (MDR) which showed that 54% of maternal deaths were due to post-partum hemorrhage, of which the many cases the Ministry of Health attributed to unsafe abortion. The MDR provided the catalyst for the Ministry of Health (MoH) to address the barriers that were preventing optimal maternal outcomes.

Key stakeholders and technical experts arrived at the consensus that clinical guidelines needed to be created as a tool to enhance legal protections, to advocate for better policy, and to ensure all women had access to safe abortion services.

The Guidelines to Prevent Unsafe Abortion are now considered the legal framework and clinical standard for safe abortion services. They empower individual providers to give women the highest quality of care where they previously needed to perform procedures secretly. They strengthen the quality of services through the inclusion of mifepristone in the clinical guidelines. They liberalize the indications for accessing services and allow women the autonomy to make decisions about their own healthcare where they previously needed the consent of their family or a village authority before being allowed services.

PSI has supported the MoH to disseminate the new guidelines to providers in all 17 provinces and Vientiane Capital.

BACKGROUND

The working group prioritized three essential components for inclusion in the national guidelines:

- “contraceptive failure” as an approved criterion for service provision;
- removal of the need of any third-party approval before safe abortion services could be provided;
- clear clinical guidelines on the provision of MVA and self-administered MA with both Misoprostol alone and Mifepristone/Misoprostol combination therapy.

It was believed that these criteria would empower women to make their own reproductive health decisions and could do so with the support and skill of a trained provider.

METHODS

The drafting of the new guidelines was a collaborative effort between key government stakeholders, the National OB/GYN Association, the World Health Organization (WHO), the United National Population Fund (UNFPA) and Population Services International (PSI).

Through consultative meetings over a three-year period, the MoH approved the guidelines in 2016.

Guideline implementation and dissemination began at the provincial level in 2017 after the rollout workplan was approved by the Ministry of Health (MoH).

PSI and the MoH conduct regular supportive supervision for providers.

RESULTS

The Guidelines to Prevent Unsafe Abortion are now considered the legal framework and clinical standard for safe abortion services. They empower individual providers to give women the highest quality of care where they previously needed to perform procedures secretly. They strengthen the quality of services through the inclusion of mifepristone in the clinical guidelines. They liberalize the indications for accessing services and allow women the autonomy to make decisions about their own healthcare where they previously needed the consent of their family or a village authority before being allowed services.

PSI has supported the MoH to disseminate the new guidelines to providers in all 17 provinces and Vientiane Capital.

CONCLUSION

The adoption of the Guidelines to Prevent Unsafe Abortion align Ministry of Health policy with WHO recommendations. With these updated guidelines, PSI and the MoH now have an instrument to ensure that providers across Laos can be comprehensively trained in safe abortion services, including MVA, mifepristone, and misoprostol for safe abortion services. Most importantly, women’s risk of unsafe abortion has been reduced and they are empowered to access quality information and services.

As a result of the new guidelines, PSI/Laos has the ability to continue to enhance women’s abortion care through:

- Continue to conduct training of trainers and healthcare ethics workshops for providers
- Introduce a legally registered mifepristone product and advocate for the inclusion of a misoprostol and mifepristone combo-pack
- Advocate with decision-makers to ensure that a safe, legally registered MA product is also available for sale in the private sector