An Illustrative Guide to Safe Abortion for Young Women and Girls Seeking Asylum.

Young women & girls seeking asylum are entitled to formal sexual and reproductive healthcare ….....

Safe Abortion is healthcare

…..as a human right.



My right to decide!

A Critical Lack of Access to Sexual And Reproductive Health Resources in Asylum Settings

Safe Abortion Day

observed annually on 28th September

EQUALITY

Advancing the right to safe, high-quality, non-judgmental sexual and reproductive health care



The pictures and guidance in this publication make it much easier for young women and girls seeking asylum to understand when, where, how, and what to do in case of an unwanted pregnancy.

Rights associated with sexual and reproductive health (SRHR) are fundamental human rights. They guarantee everyone the autonomy, dignity, and freedom to make choices about their body, sexuality, and reproduction without discrimination, coercion, or violence.

This guide is produced by the Global Asylum Seeker Human Rights Defenders Committee (GASHDC). GASHDC operates within a resource-constrained environment and prioritizes allocating secured funding where it is most critical to reduce suffering and save the lives of young women and girls seeking asylum, and of course in strict alignment with agreed donor protocols.

The information and illustrations herein are adapted from certified educational materials and feedback from trained sexual and reproductive health and rights (SRHR) professionals. Designed for asylum seekers from diverse backgrounds, this highly visual guide is tailored to include those with low or no literacy. It uses clear illustrations and stimulates peer discussion to help clarify more on the content.

GASHDC gratefully acknowledges the support of Echoing Green (USA) and the Guerrilla Foundation (Germany) to develop and disseminate this guide. Thank you!

Global Asylum Seeker
Human Rights Defenders Committee

echoing green

GUERRILLA FOUNDATION
ACT. AFFECT. CHANGE

Table of Contents

About this Publication	2
Using this Publication	3
Possibility of pregnancy and visiting a Clinic	4 - 10
Making decision	11 - 14
Medical abortion (Mifeprostone + Misoprostol)	15 - 18
Medical abortion (Misoprostol only)	19 - 20
Medical abortion, possibility of side effects & resting	21 - 22
Surgical abortion	23 - 33
After surgical procedure/post abortion care	34 - 35
All abortion procedures/in case of complications	36 - 37
Contraception	38 - 39
Questions and sex after abortion	40 - 41
Continuing with Pregnancy	42 - 43
Relief, empathy, and no judgement	44

About this Publication

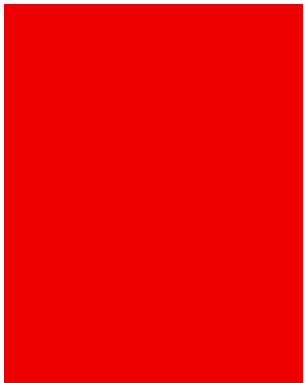
This publication aims to bridge the gap in safe abortion communication for women and girls in asylum seekers' communities citing illiteracy and language barriers that may surround abortion messaging in these communities. It can also be used with a range of different audiences in the process of making an informed and consensual decision and to destigmatize abortion.

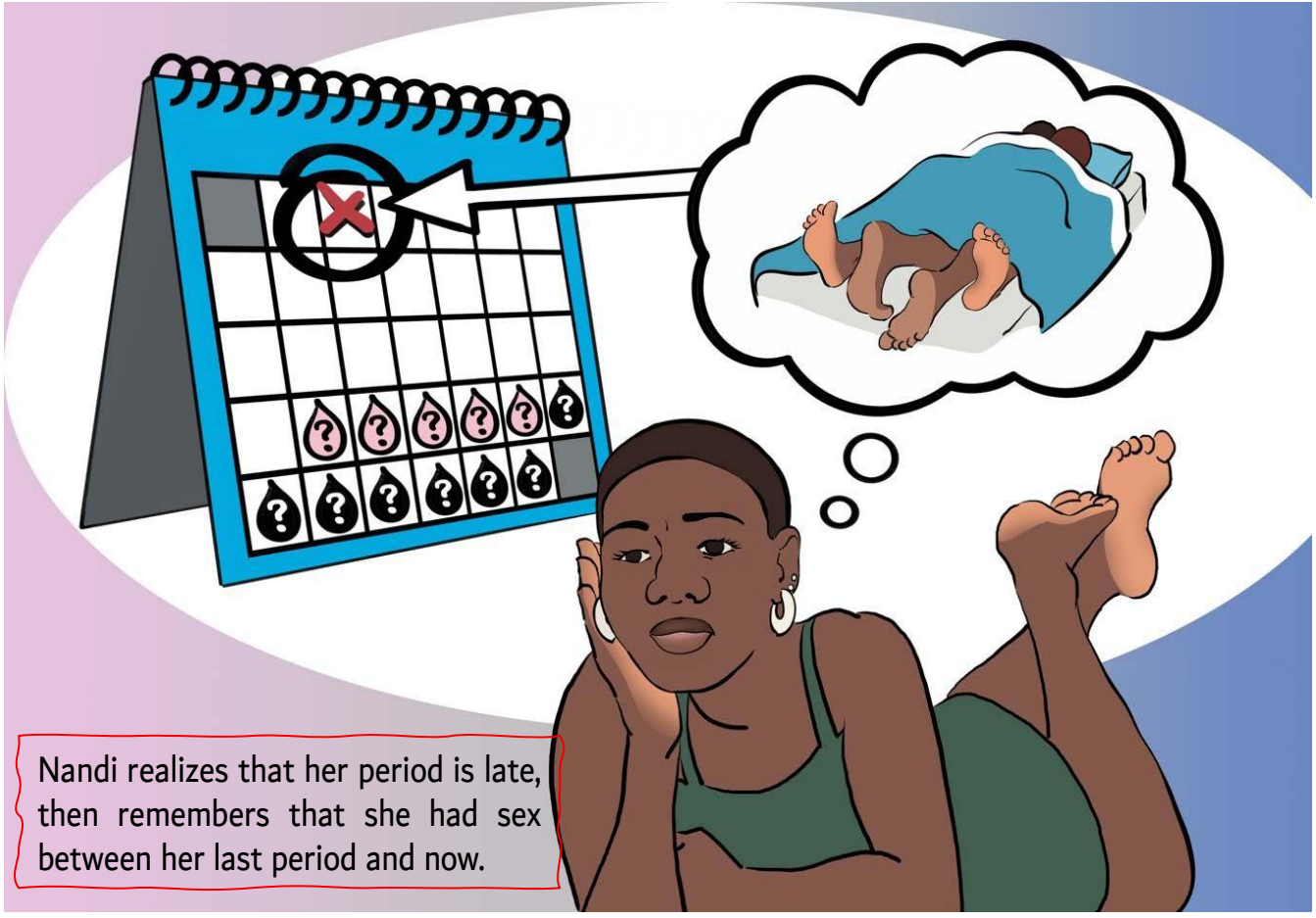
The publication offers insight into the abortion process. It uses images to tell the story of Nandi, a young woman who finds herself pregnant, showing her what the journey would look like if she decided to have an abortion. It also supports community health workers, young people, and others advocating for an increase in knowledge and information on abortion and reducing the stigma surrounding safe abortion. We hope this visual narrative serves as a resource to help young women and girls trapped in the asylum system safely navigate abortion services.

Using this publication

The content in this publication can be understood quickly by looking at the images in the order that they have been laid out while reading the brief statements that have been included beside or beneath the pictures.

For more detailed information on an abortion with pills, safe abortion and/or contraception, you can visit Safe2Choose (https://safe2choose.org/), or Women on Web (https://www.womenonweb.org/en/), who both have useful resources and are part of the international movement to provide information on reproductive health and access to safe abortion.

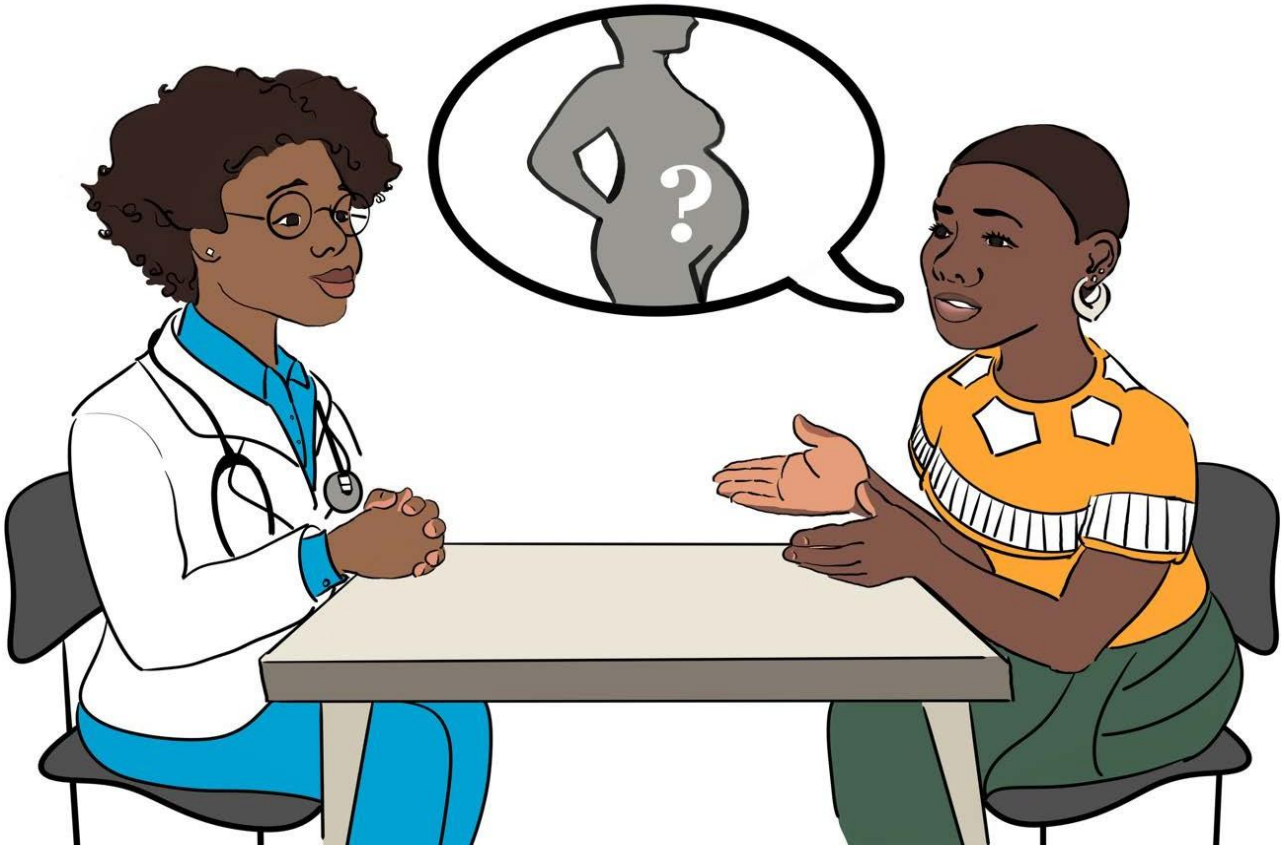




Nandi realizes that her period is late, then remembers that she had sex between her last period and now.

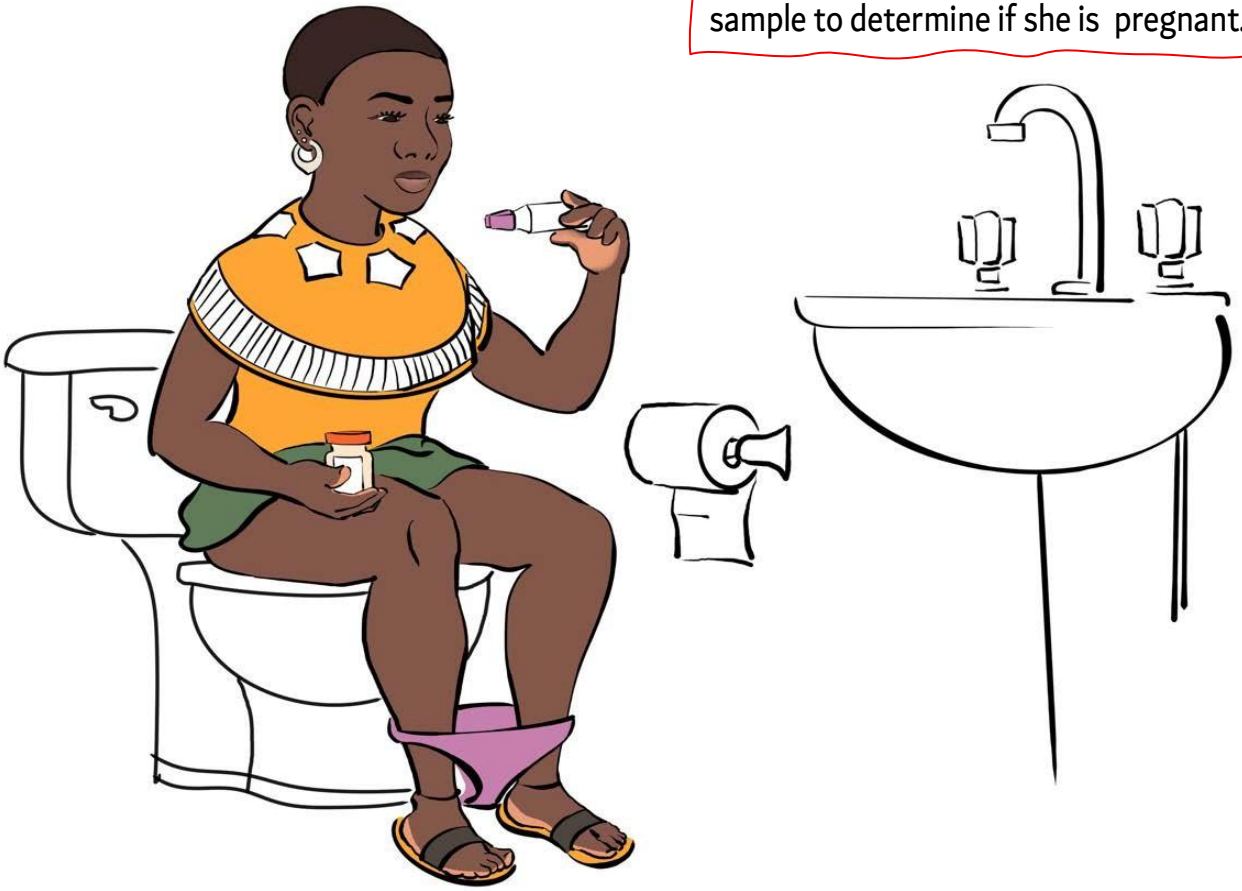

Accompanied by a trusted friend, sister, partner, or boyfriend, Nandi visits the clinic.


The doctor welcomes Nandi in and takes her to a private space



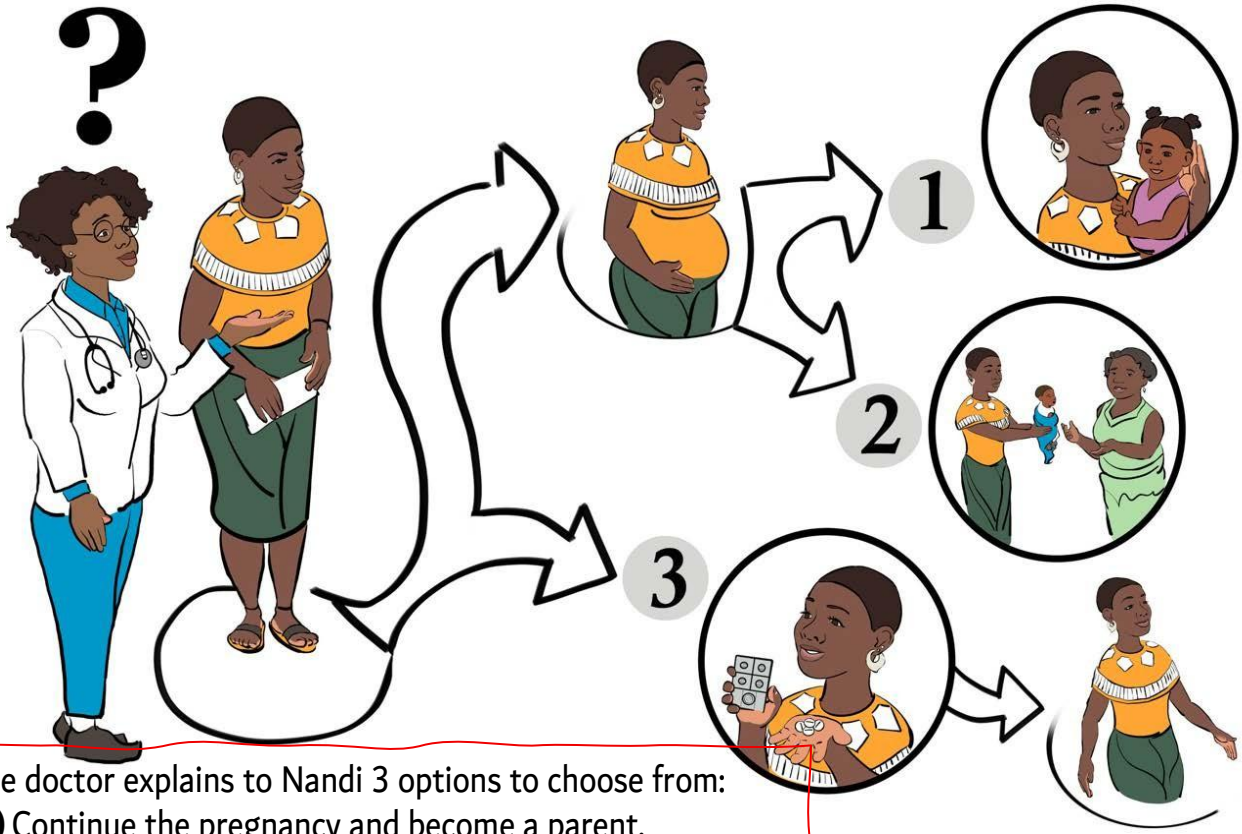
Nandi tells the doctor that her periods are delayed, she thinks she may be pregnant.

The doctor asks her to give a urine sample to determine if she is pregnant.

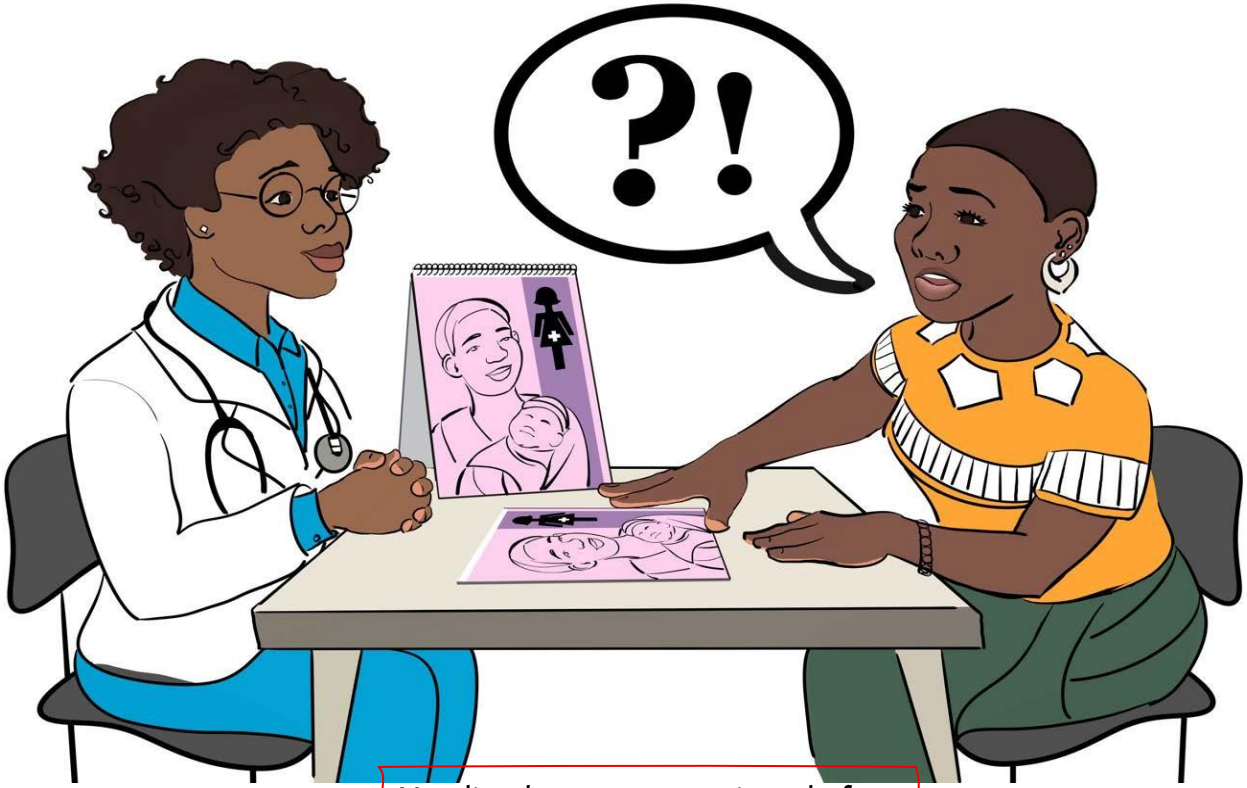




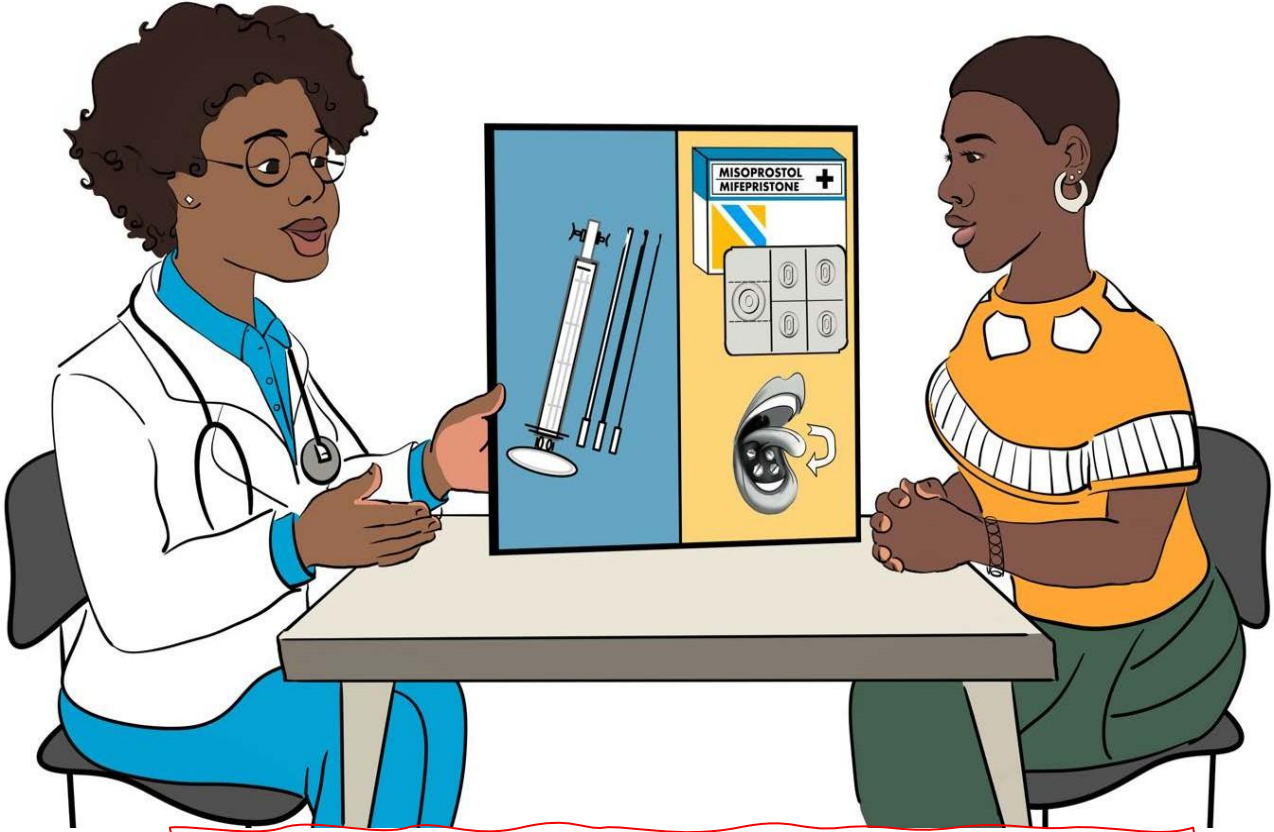
The pregnancy test shows that the result is positive, which means Nandi is pregnant.



The doctor explains to Nandi 3 options to choose from:
(1) Continue the pregnancy and become a parent.
(2) Continue the pregnancy and give the child for adoption.
(3) Interrupt the pregnancy with an abortion.

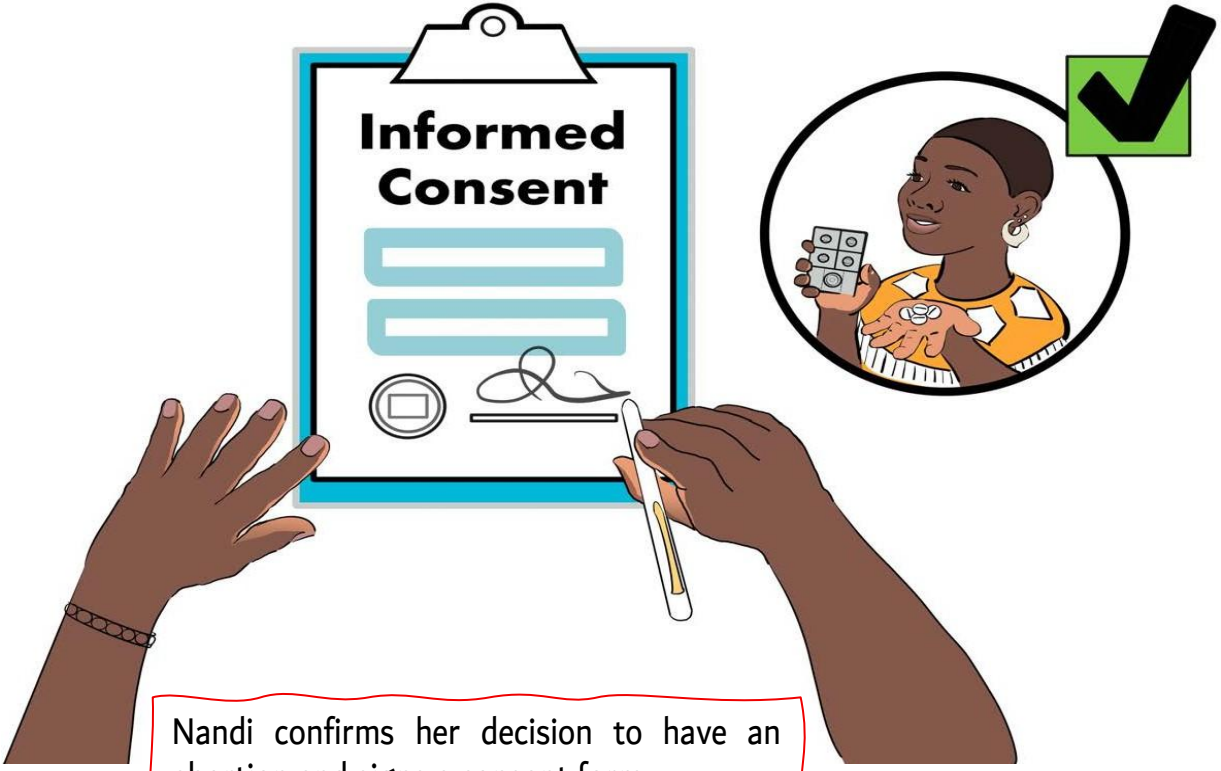


Nandi asks many questions before making an informed decision.

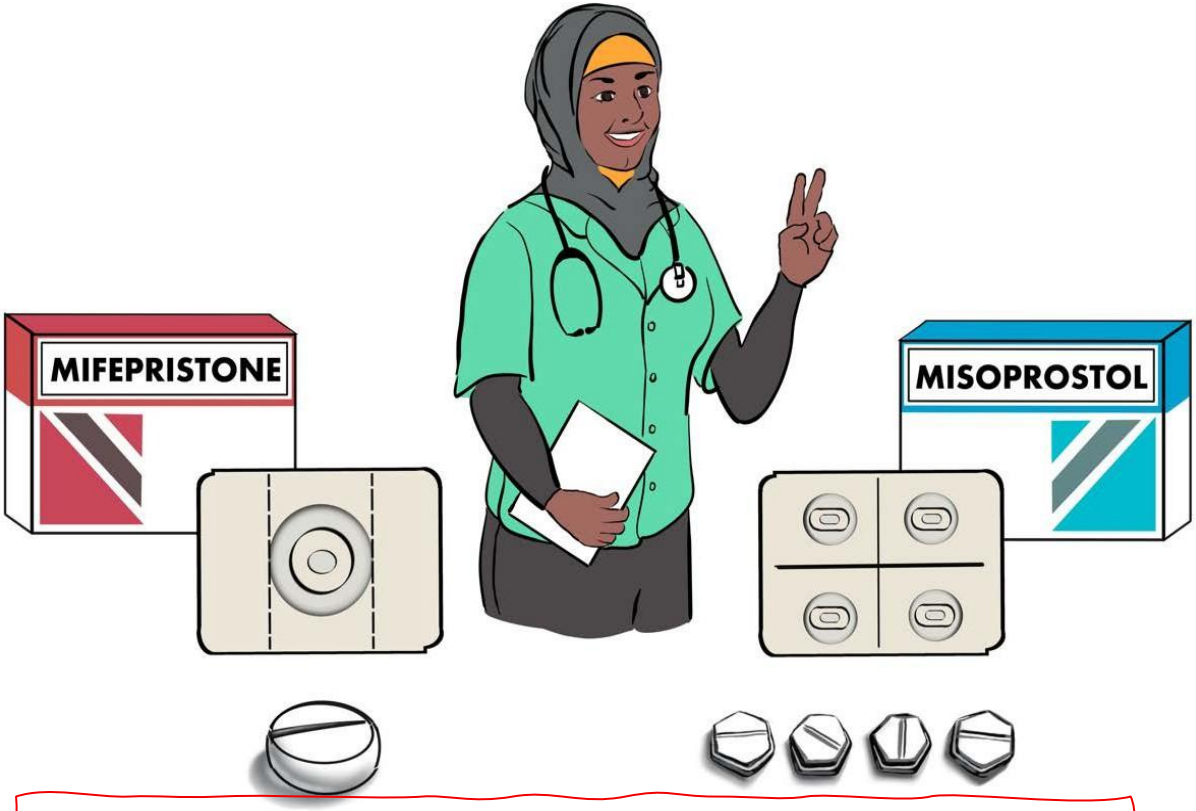


The doctor explains to Nandi about the two ways of having a safe abortion: Medical abortion (with pills) or Surgical abortion (by suction).

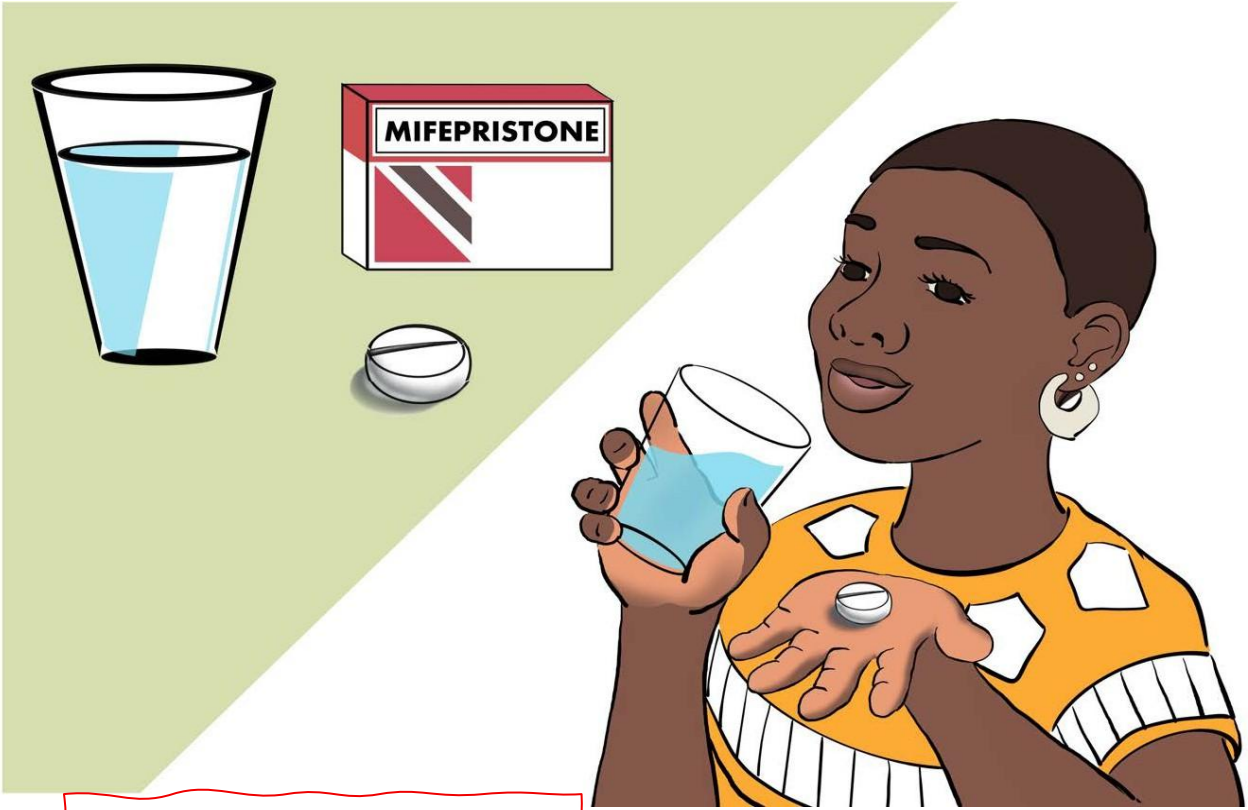

1
2
3
Nandi decides to have an abortion.



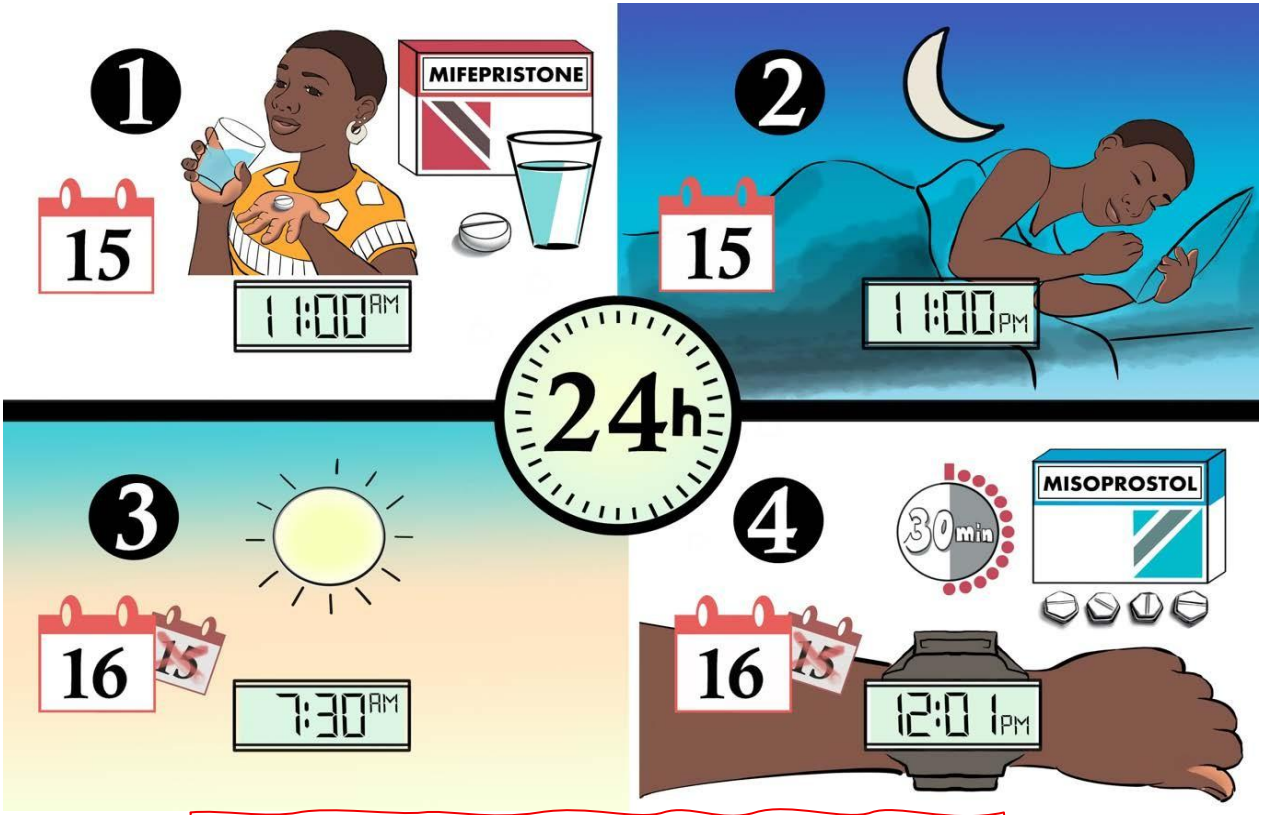
Nandi confirms her decision to have an abortion and signs a consent form.



For an abortion with pills, the most effective method is with two types of pills: Mifepristone and Misoprostol. This is referred to as “medical abortion”.

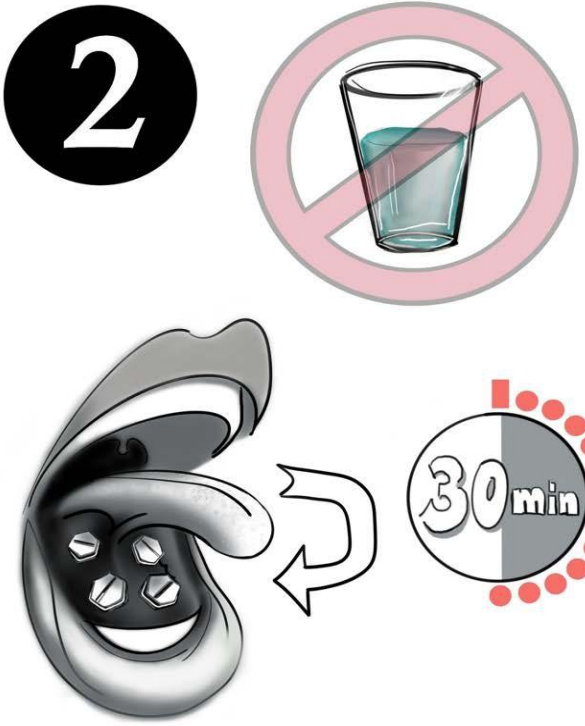


The first step is to take one pill of Mifepristone



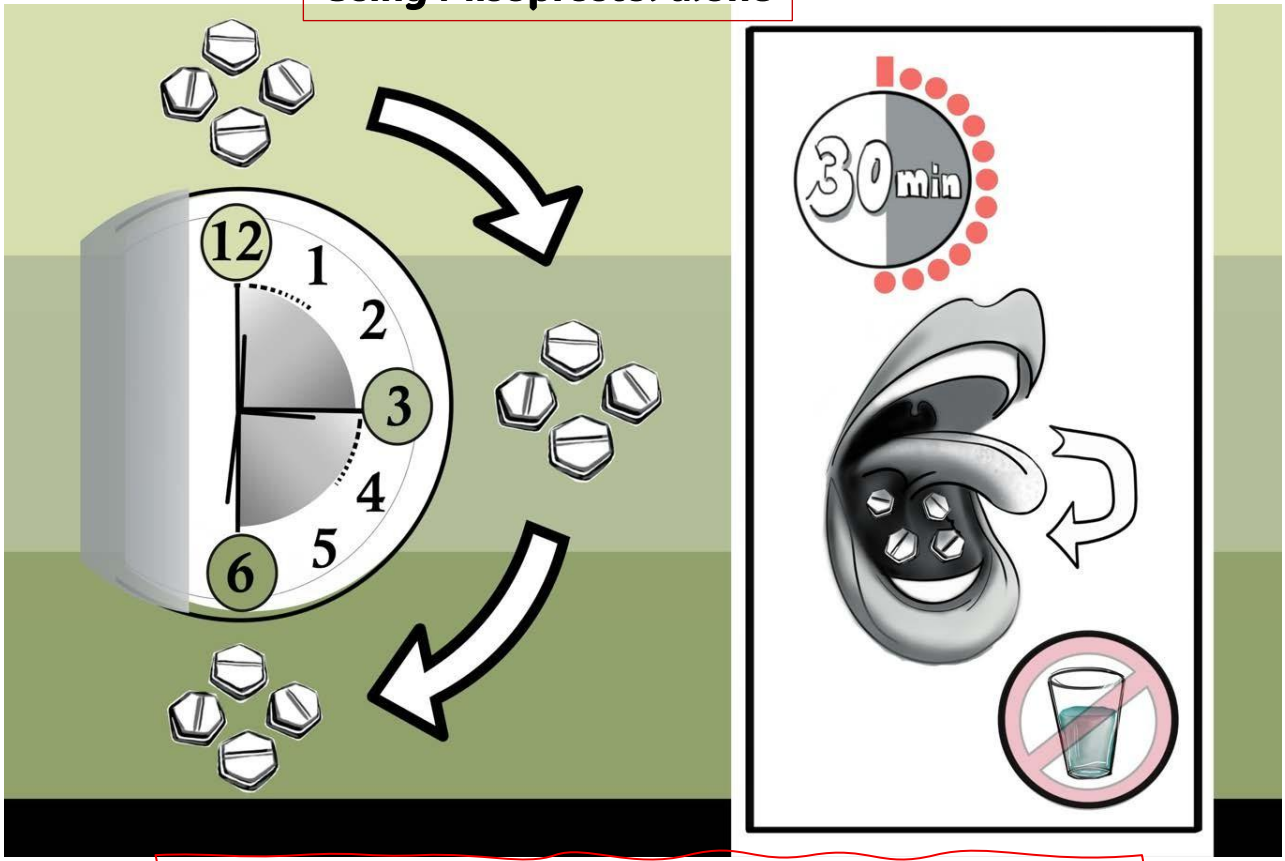
After taking Mifepristone, wait at least 24h (24-48h) to take the next pills, called Misoprostol. (see next page)





First, drink some water. After, put 4 Misoprostol pills under your tongue and let them dissolve for 30 minutes. If the abortion is not complete after 4 hours, repeat this step.

Using Misoprostol alone



For an abortion with Misoprostol only, take 4 pills every 3 hours in a 12-hour period. Put the pills under your tongue and let them dissolve.



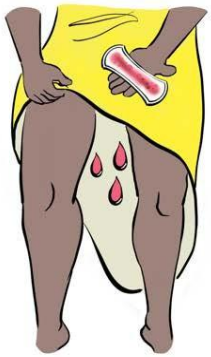


Never swallow the misoprostol pills with water. Put the pills under your tongue and let them dissolve for 30 minutes.









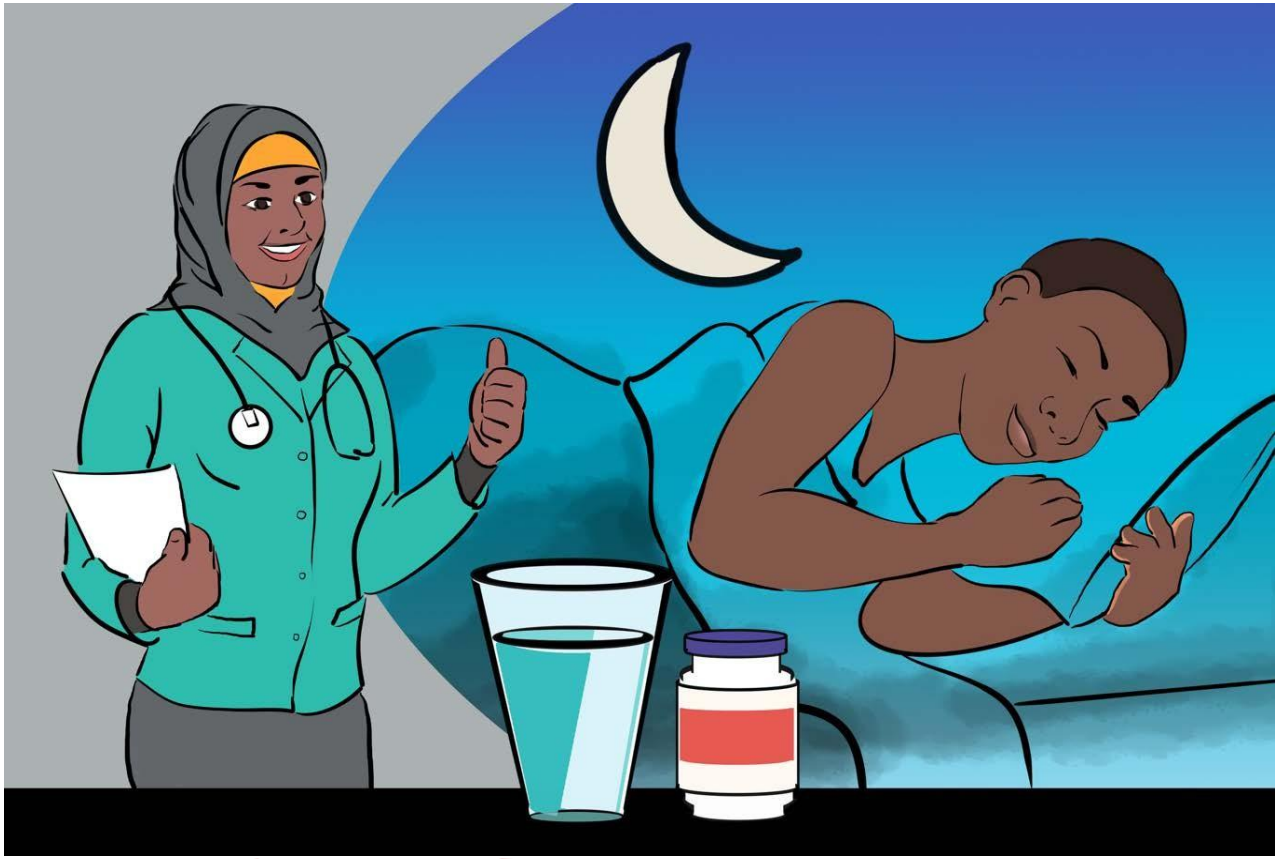




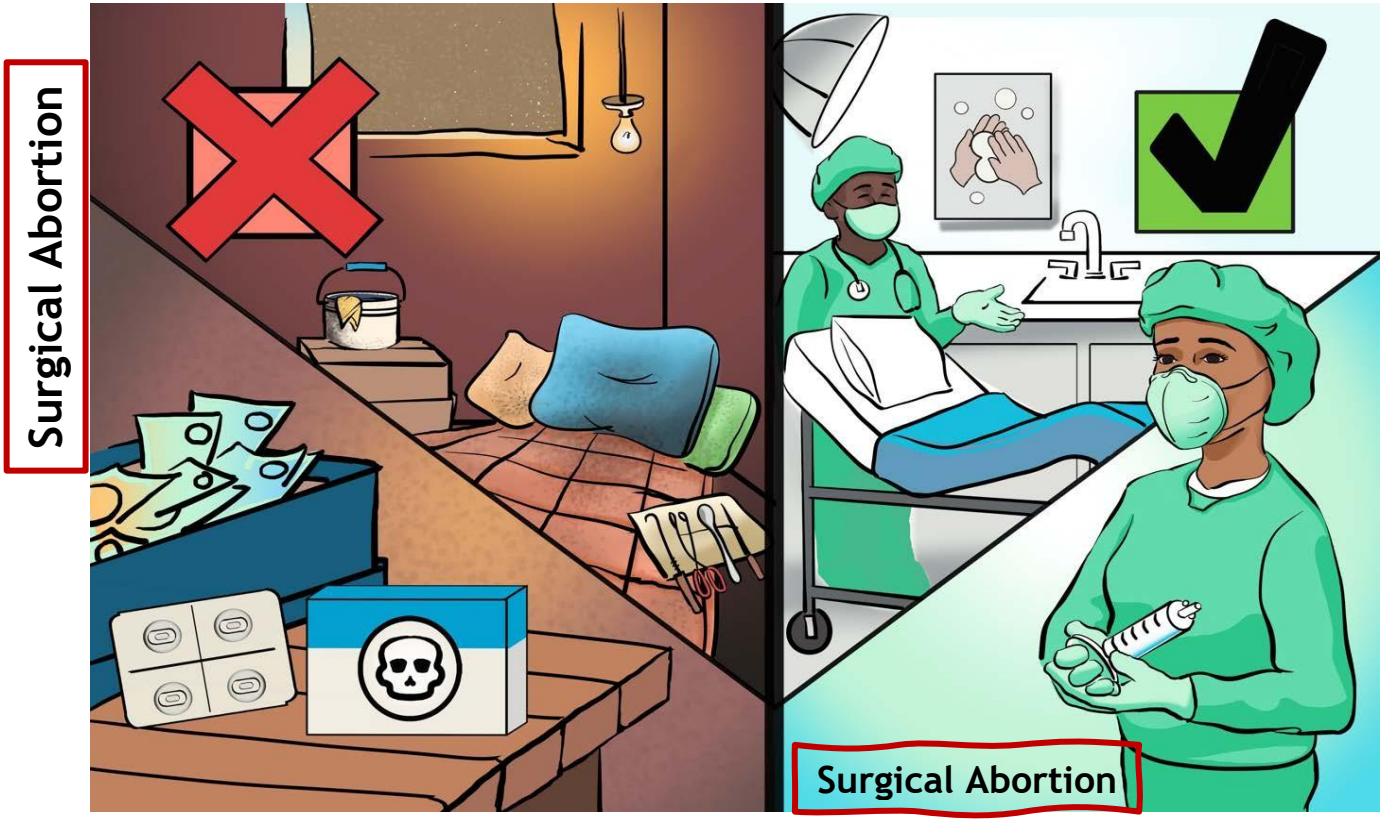




You could experience some side effects after an abortion with pills. This is common. But you may also not experience any side effects.



Resting is important, so you can feel better soon. Pain killers may help with moderate pain, take them if needed.



Suction abortion is not recommended for certain individuals, such as those with large fibroids in the uterus or a history of cervical surgery, but it is a safe option for most people. Complications are rare, but like any medical procedure, it is important to discuss your specific medical history and any concerns with a healthcare provider to determine the most suitable option for you.

Before a surgical abortion (by suction), the doctor gives painkillers to the patient. Do not eat from 6 hours before the surgery, and do not drink liquids from 2 hours before the surgery.



Avoid unsafe abortions. When having a surgical abortion, this should be provided by qualified medical professionals, in clean, safe, hygienic, sanitary conditions to minimize risks like infections and other complications.



The doctor and Kofi discuss the procedure and what support Nandi wants and agree how they would request help for pain if needed.

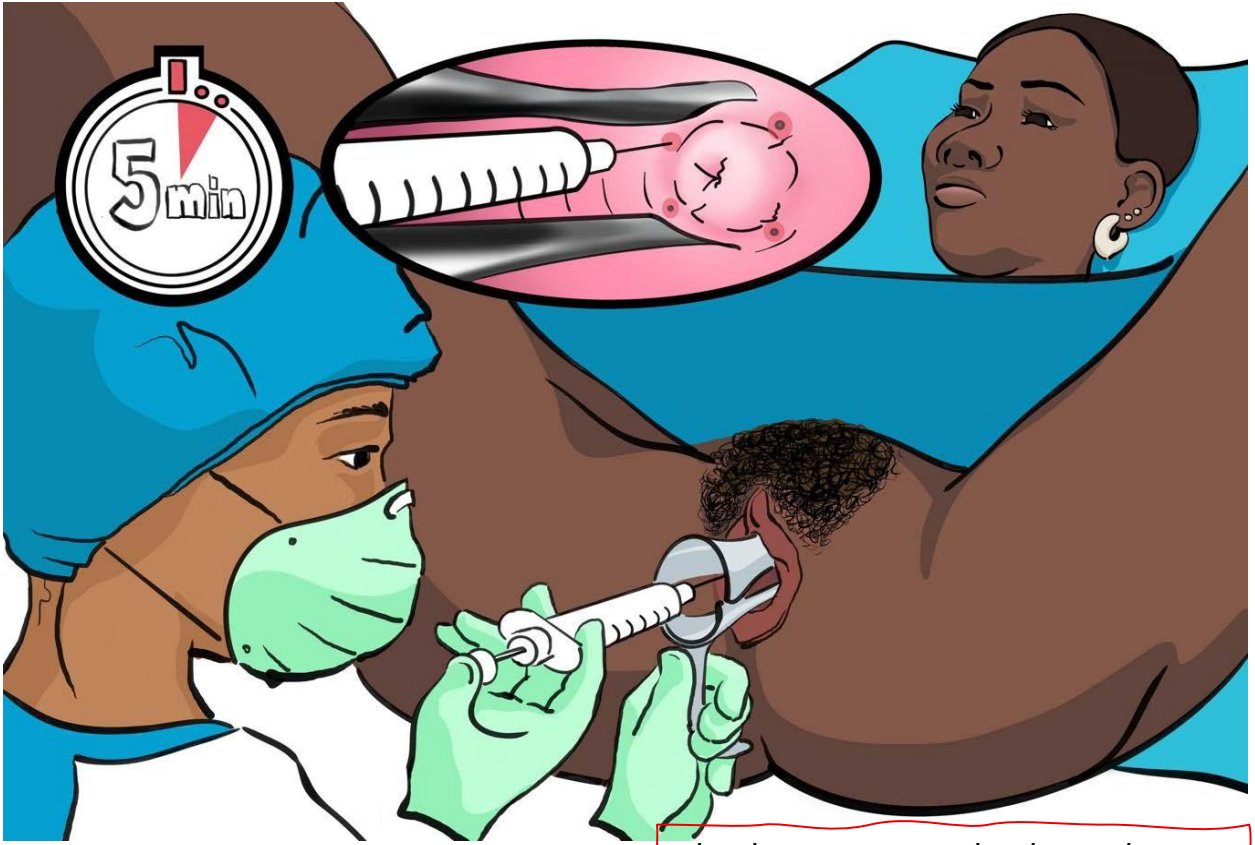




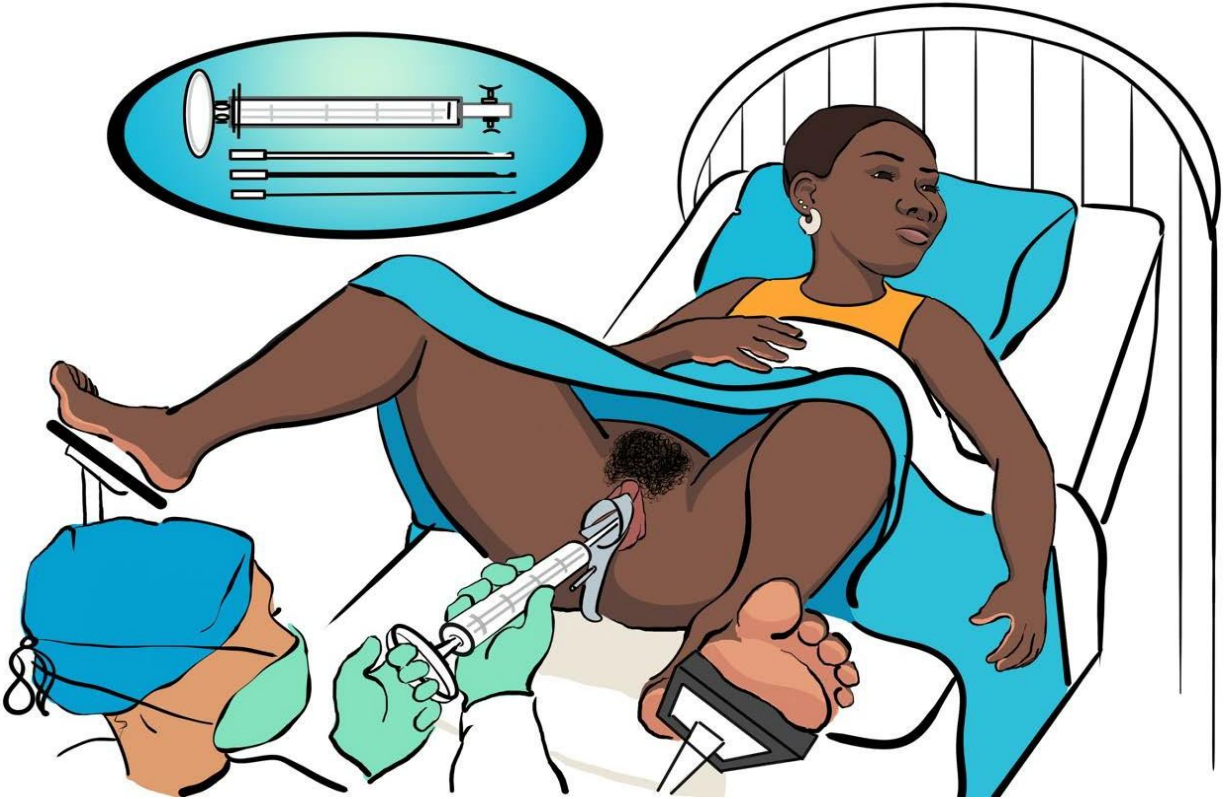
For a surgical abortion, Nandi takes their underwear off and lays down on a hospital bed.



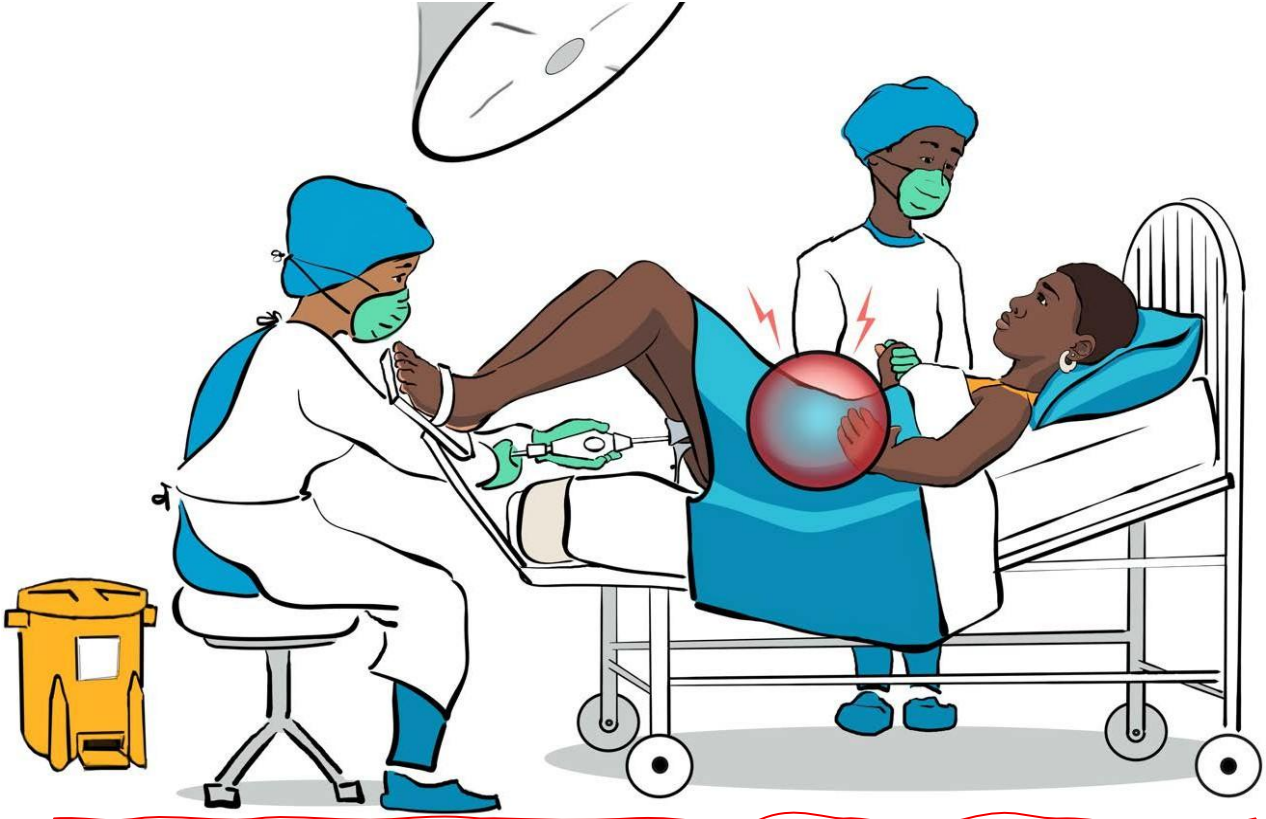
The doctor will use a tool called a speculum that helps open Nandi's vagina.



The doctor injects a local anesthetic in the cervix so that Nandi won't feel pain.

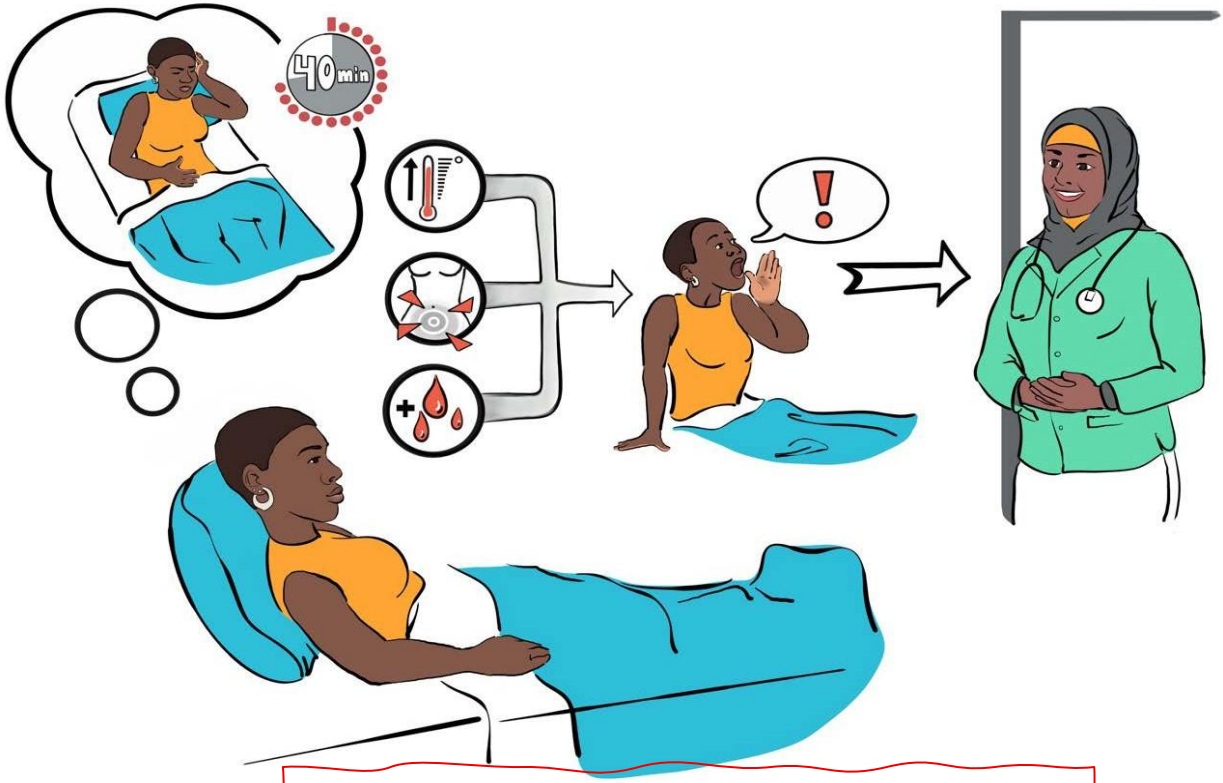


A thin tube called canula is inserted through the vagina to empty the uterus.

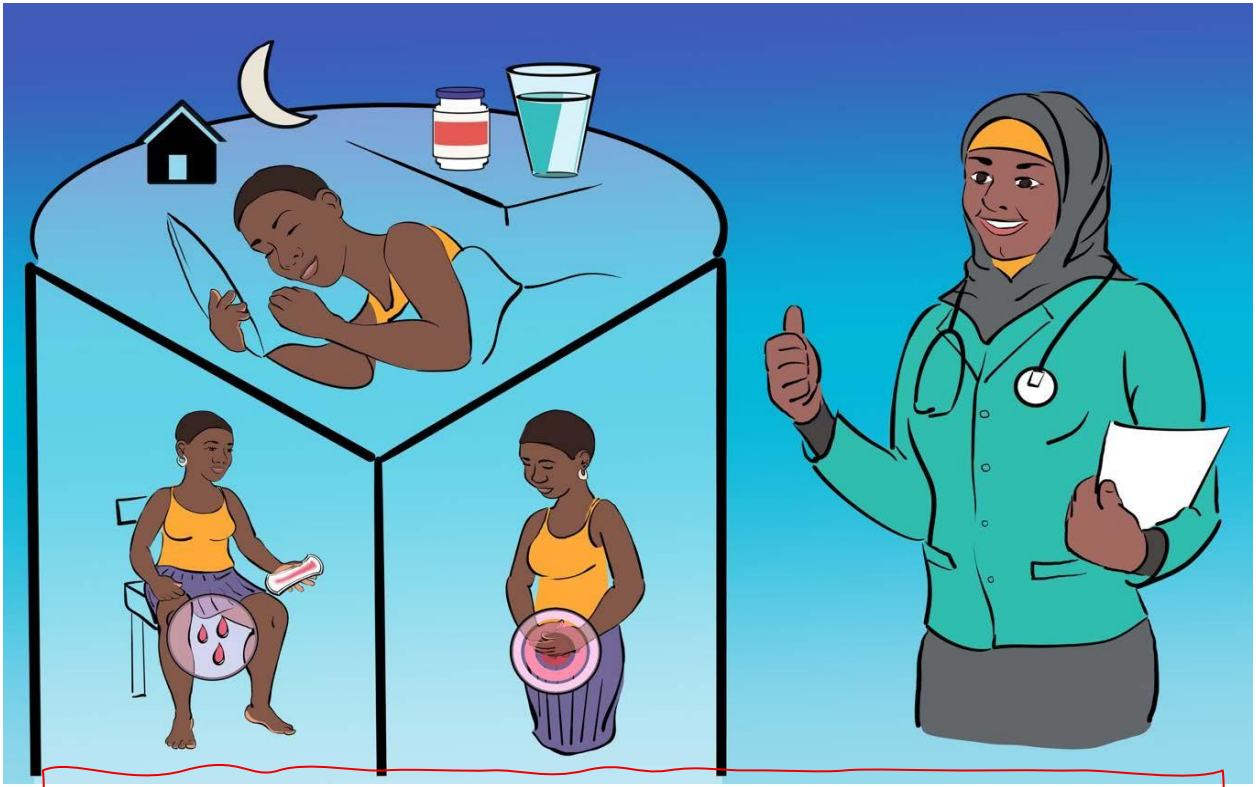


Whilst the abortion by suction (surgical abortion) is taking place, Nandi may feel discomfort, pressure and cramping pain similar to menstrual cramps in the abdomen.

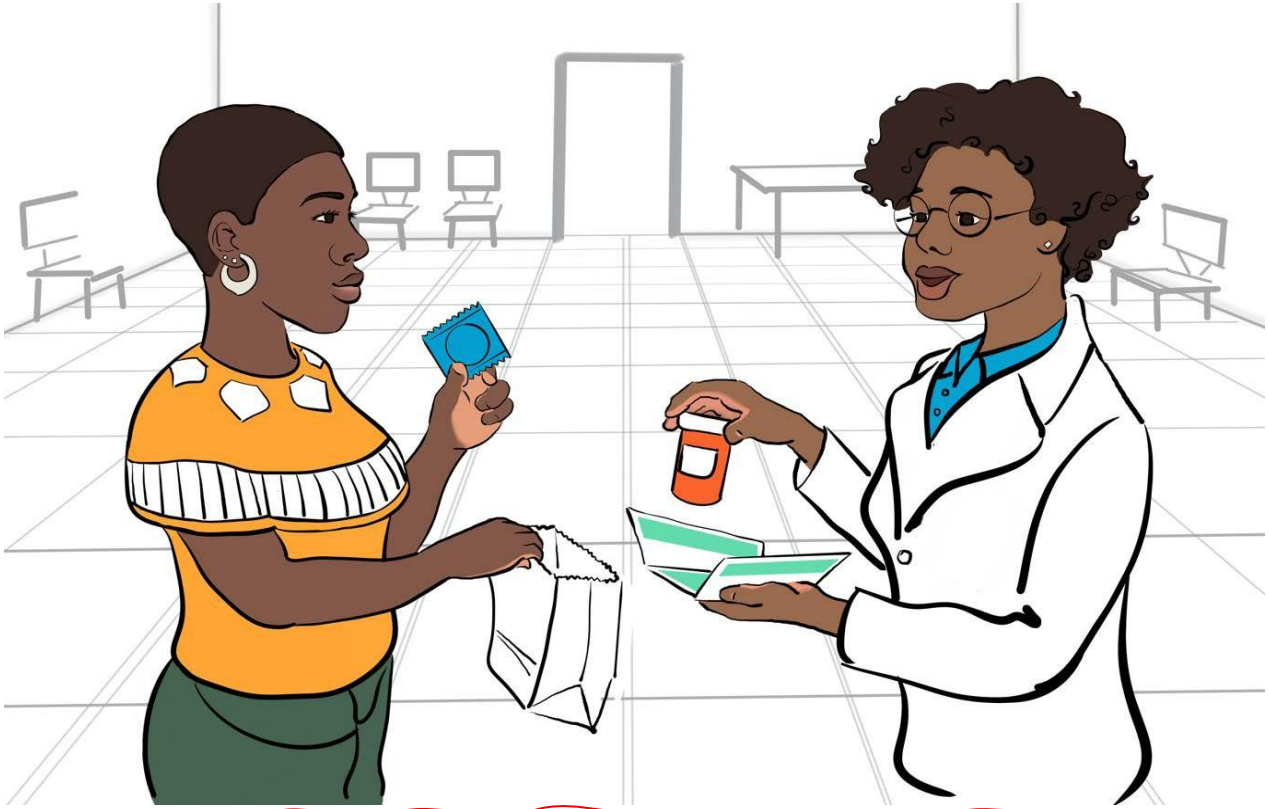

40 min
2:00 PM
Afterwards, Nandi should rest for 30-40 minutes.



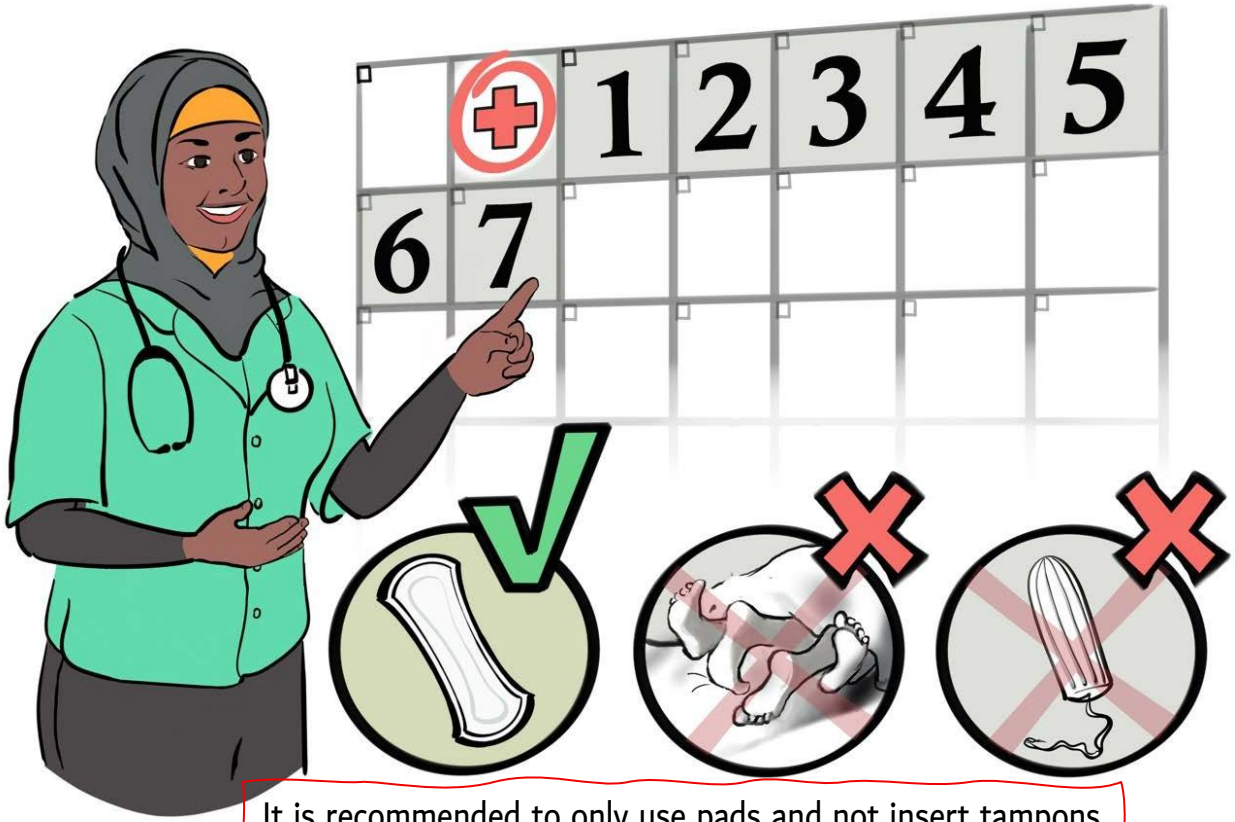
If Nandi feels pain, is bleeding or has high temperature while resting, they should call the doctor or nurse.



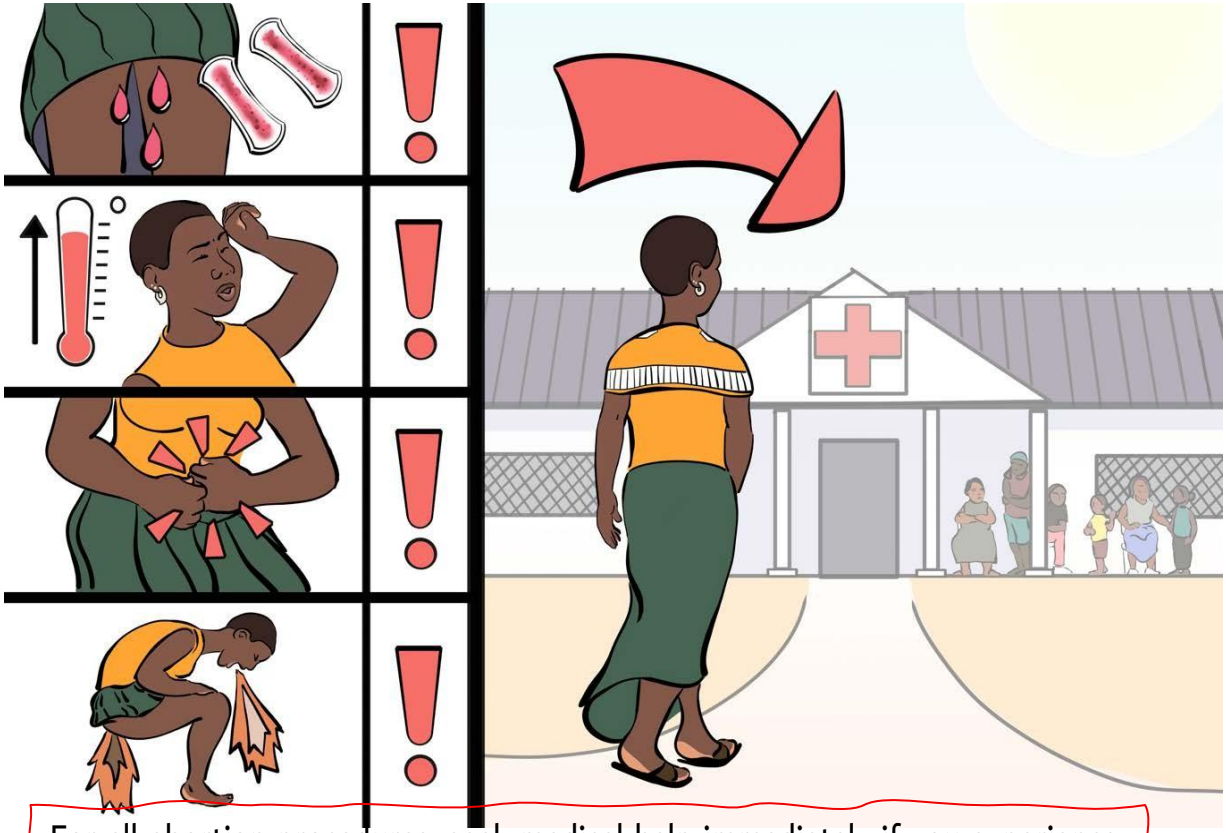
The doctor recommends that Nandi gets plenty of rest. She also indicates that some bleeding and cramps are normal symptoms that should not cause worry to Nandi.



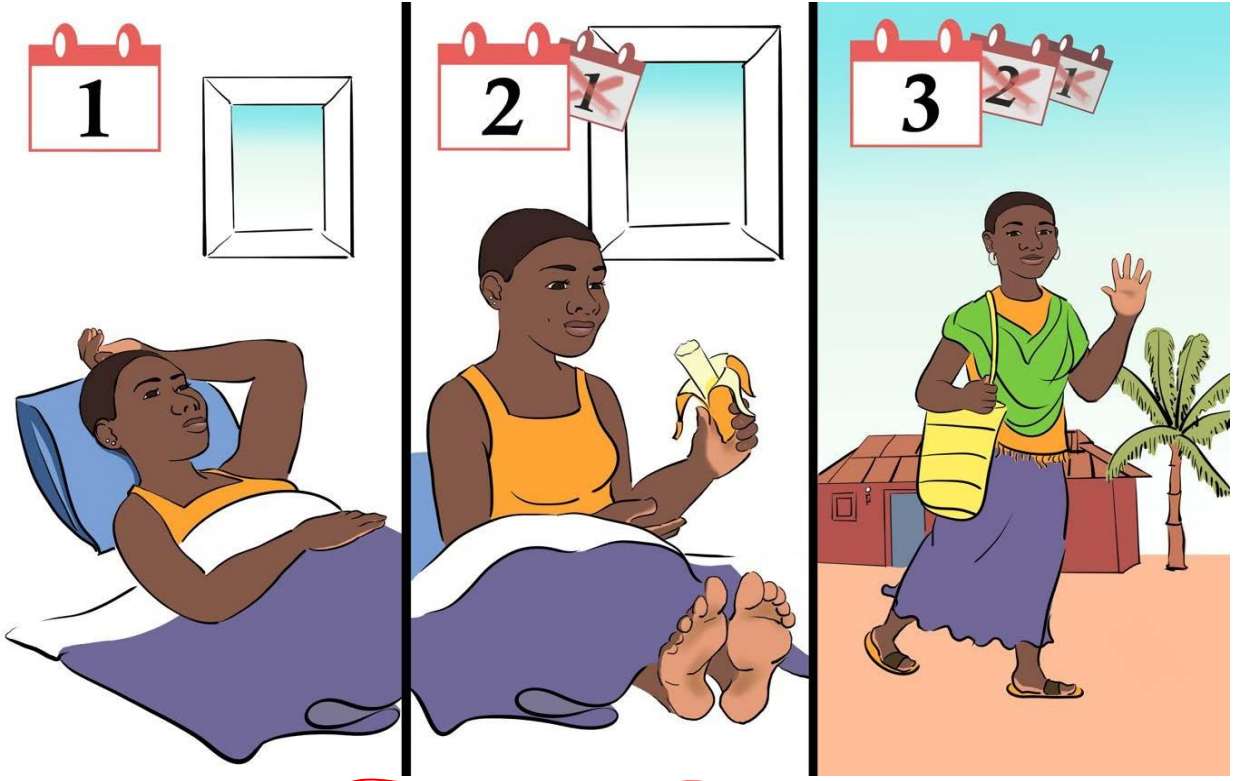
Before leaving, the doctor and Nandi discuss her sexual health care, and Nandi may be given information leaflets, painkillers and contraceptives.



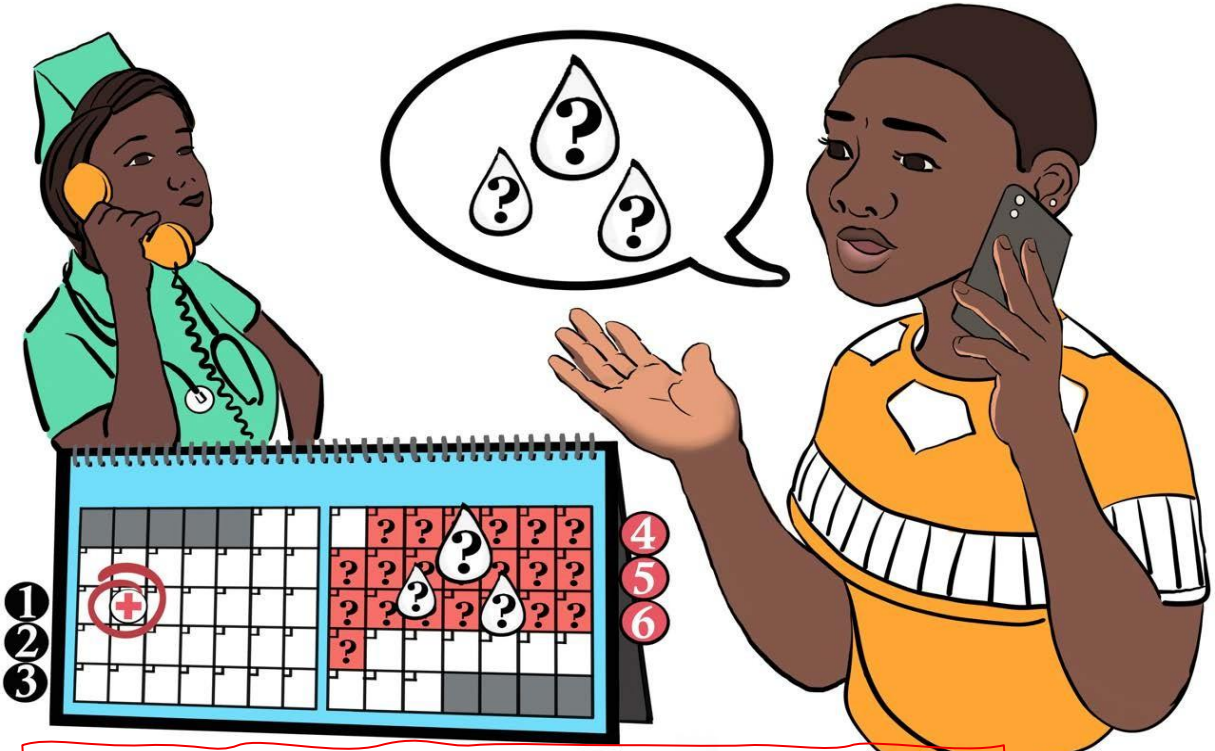
It is recommended to only use pads and not insert tampons or have sex during the first week after the procedure.



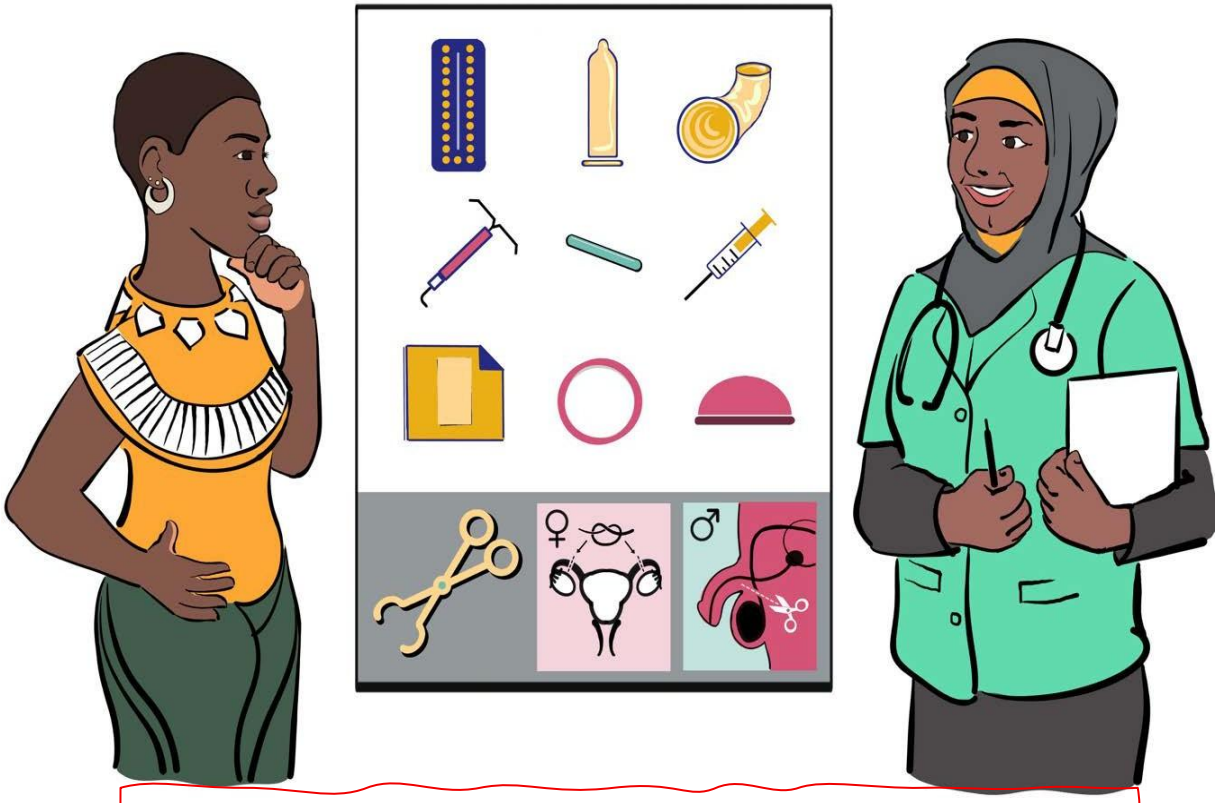
For all abortion procedures, seek medical help immediately if you experience: heavy bleeding (more than 2 pads in one hour), high fever (39°C or more), strong cramps, continuous vomiting and/or diarrhoea.



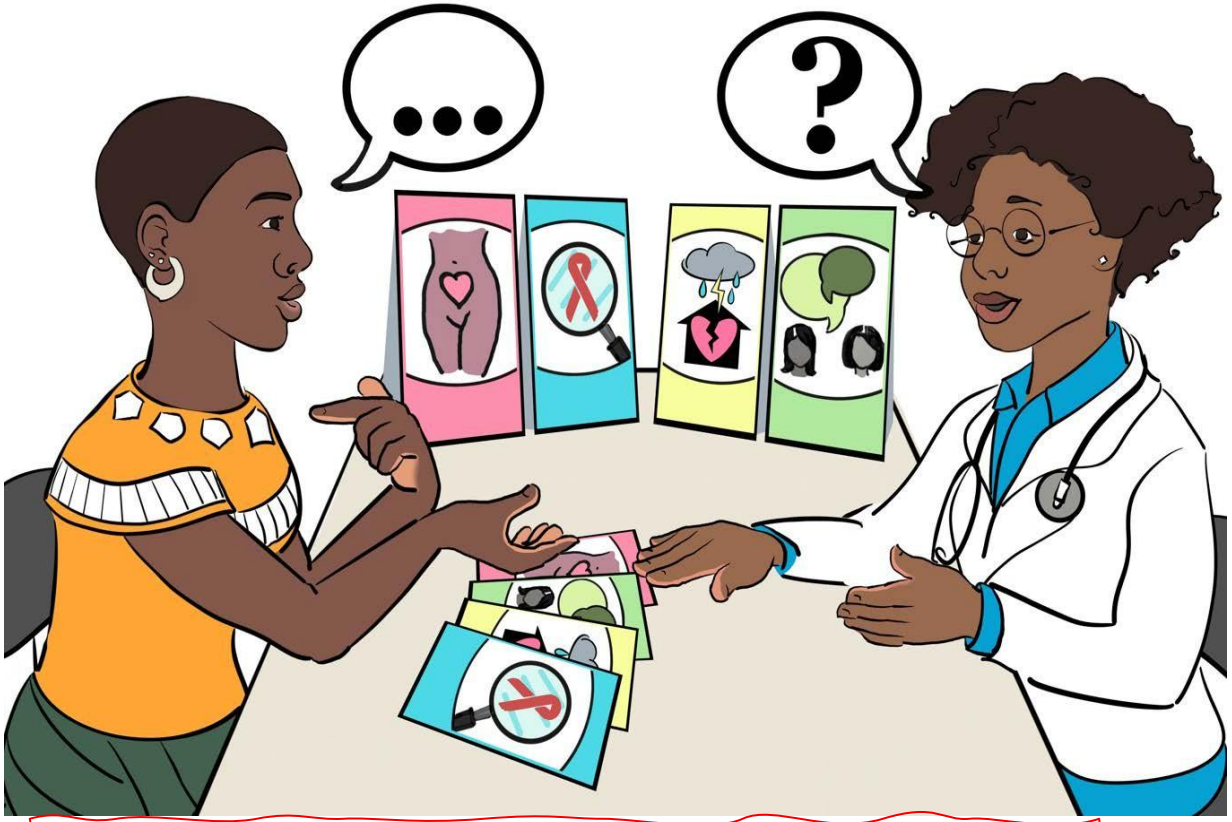
Most people feel fine to return to their daily routine after a couple of days of rest.



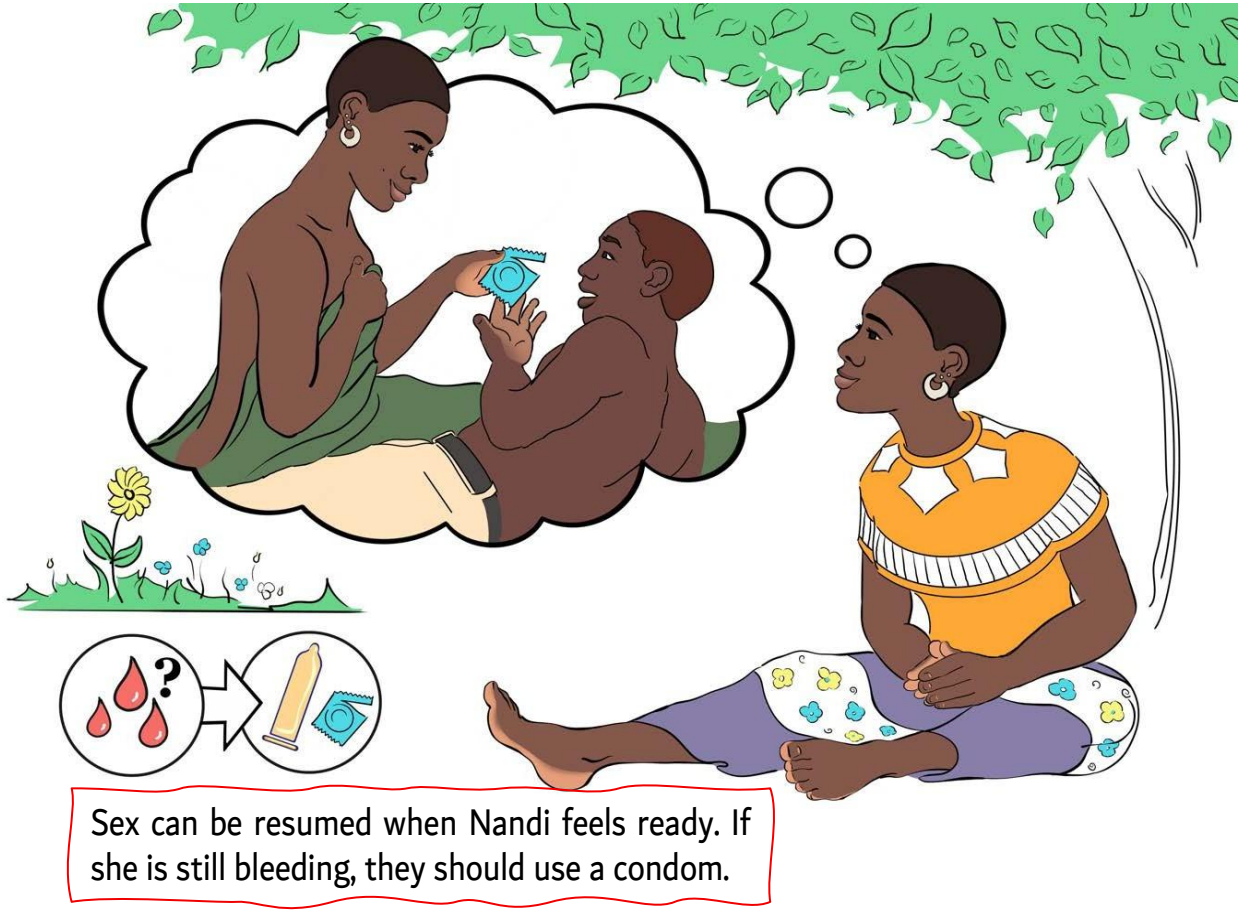
After having an abortion, periods should return to normal after 4 to 6 weeks. If your period is not back, consult a doctor.



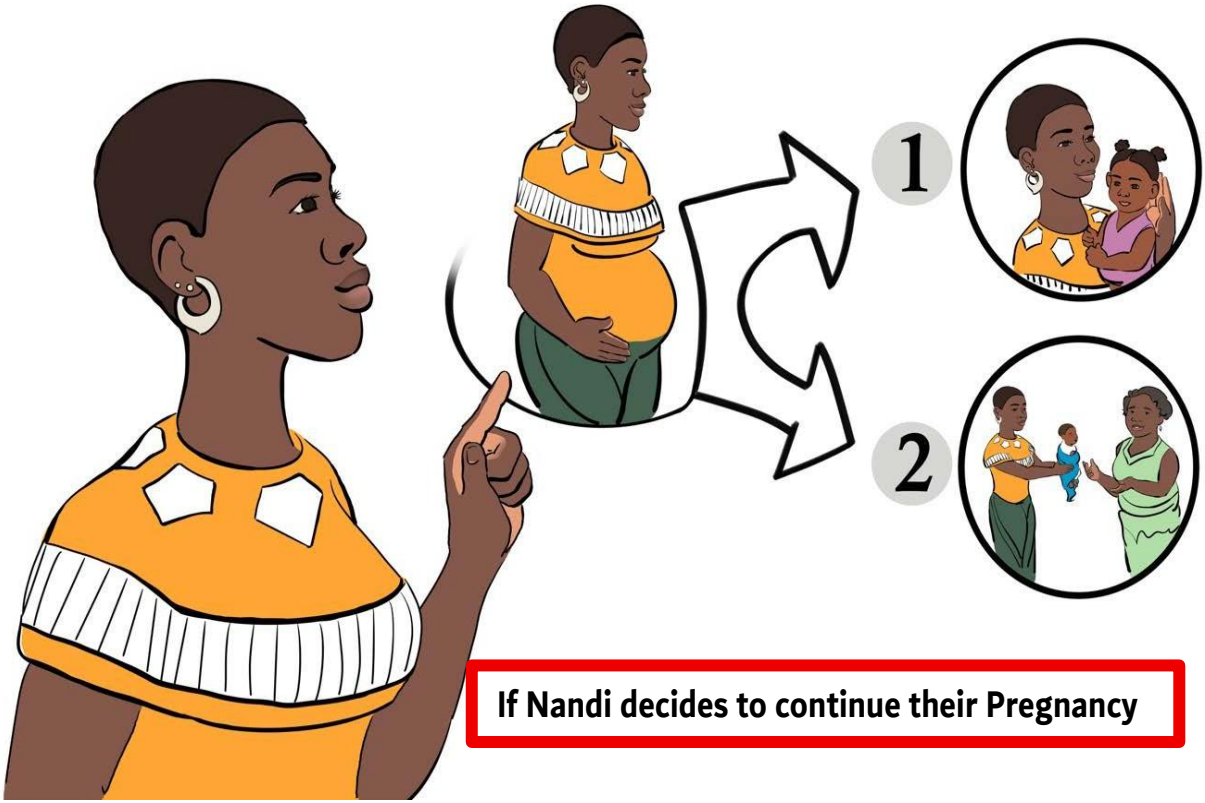
The doctor explains contraception options available to make it easier for Nandi to look after her reproductive choices and sexual health.



The doctor asks Nandi if she wants to talk about anything else.



Sex can be resumed when Nandi feels ready. If she is still bleeding, they should use a condom.



If Nandi decides to continue their Pregnancy



The doctor refers Nandi to antenatal



After safe abortion, Nandi feels relieved of having taken her own decision, she joins friends, who welcome her and don't judge her.

SDG 3 (Target 3.7)
To ensure universal access to sexual and reproductive health-care services, family planning, and education by 2030, alongside reducing maternal mortality (Target 3.1)



SDG 5 (Target 5.6)
Focuses on universal access to reproductive rights and health, measured by women's decision-making autonomy and supportive legal frameworks (Indicators 5.6.1 and 5.6.2)