

# MUNAAA

Background Paper

## ECOSOC I

Legalization of  
abortion





**COLEGIO  
AMERICANO  
ANÁHUAC**



Welcome, delegates.

MUNAA 2018 secretariat, moderators, directors, staff and DIS directors have been working hard through the last few months to make this event possible. We are glad to have every single one of you here.

This November 29, 30 and December 1st you will employ and develop skills to implement solutions to current and relevant world problems. You will also have the opportunity to face and debate different ideas and practice tolerance and respect, and of course you'll have the opportunity to reconnect with old friends and make new ones.

Our goal is that every single one of us becomes aware that developing and improving different skills is only the beginning and that our ultimate objective is understanding that giving up is not an option, that there are possible solutions to every issue and knowing that every action has a global reaction.

We hope that you all have the best experience and a lot of fun. Thank you for making this event possible.

Let's change the world together!

Ana Sofia Juarez Villarreal

*Secretary General, MUNAA 2018*

Every action, a global reaction



**DIS**

Department of International Studies



**Committee:** ECOSOC

**Topic a):** Legalization of abortion

**Director:** Raúl Iván Álvarez Ramírez

**Moderator:** Vanessa Castillo Ruiz

## **I. Committee Background**

The Economic and Social Council (ECOSOC) deals with economic, social, cultural and health matters as well as human rights and fundamental freedoms. It also coordinates the work of the UN and the specialized agencies.

ECOSOC consists of 54 members, 18 of which are elected each year by the General Assembly for a three-year term.

Under General Assembly resolution 68/1, ECOSOC shifted its work programme to a July-July cycle but continues to hold one substantive and one organizational session per year as has been the practice.

**High-Level Segment** *high-Level Political Forum (HLPF)* provides political leadership, and recommendations for sustainable development.

**Integration Segment** promotes the balanced integration of the economic, social and environmental dimensions of sustainable development

**Humanitarian Affairs Segment** seeks to strengthen the coordination of the United Nations' humanitarian efforts.

**Operational Activities for Development Segment** provides overall coordination and guidance for U.N. funds and programmes on a system-wide basis.

**Coordination and Management Meetings (CMM)** review the reports of its subsidiary and expert bodies and promotes system-wide coordination and review of development issues; consider the country situation or regional issues.

**Youth Forum** brings out the voice of youth into the discussion of the Millennium Development Goals and post-2015 development agenda.

**Partnership Forum** aims at finding innovative ways to collaborate with the private sector and foundations in search of solutions for the many development challenges facing governments today.

## **II. History of the topic**

Abortion has been since thousands of years ago. It was legal in the United States from the time the earliest settlers arrived. At the time the Constitution was adopted, abortions before “quickening” were advertised and commonly performed.

In the mid-to-late 1800s, states began passing laws that made abortion illegal. The motivations for anti-abortion laws varied from state to state. One reason, included fears that the population would be dominated by the children of newly arriving immigrants.

During the 1800s, all surgical procedures, including abortion, were extremely risky. Hospitals were not found easily, STD's were not know yet, and even the most respected doctors had only primitive medical educations. Without today's current technology, maternal and infant mortality rates during childbirth were extraordinarily high. Abortion dangers were the same as surgeries that were not outlawed.

Scientific methods began to dominate medical practice, and technologies were developed to prevent infection, medical care, on the whole, became much safer and more effective. Women who needed abortion was obligated to look for a illegal

practitioner and with the medical disposal. The “back alley” abortion remained a dangerous, often deadly procedure, while areas of legally sanctioned medicine improved dramatically.

The strongest force behind the criminalization of abortion was the attempt by doctors to establish for themselves exclusive rights to practice medicine. They wanted to prevent “untrained” practitioners from competing with them for patients and for patient fees.

The best way to accomplish their goal was to eliminate one of the principal procedures that kept these competitors in business. Rather than openly admitting to such motivations, the newly formed American Medical Association (AMA) argued that abortion was both immoral and dangerous. By 1910 all but one state had criminalized abortion except where necessary, in a doctor’s judgment, to save the woman’s life.

Criminalization of abortion did not reduce the numbers of women who sought abortions. In 1973, the estimates of illegal abortions ranged as high as 1.2 million per year. Many thousands of women were harmed as a result of clandestine abortion.

Many women died or suffered serious medical problems after attempting to self-induce their abortions or going to untrained practitioners who performed abortions with primitive methods or in unsanitary conditions. During this time, hospital emergency room staff treated thousands of women who either died or were suffering terrible effects of abortions provided without adequate skill and care.

### **III. Topic information**

Abortion is when a pregnancy is ended so that it doesn't result in the birth of a child.

BPAS cares for women with an unplanned or unwanted pregnancy. They treat thousands of women who've decided that abortion is the right choice for them, and give advice and counselling to women who don't know what to do next.

There are two types of abortion treatment, 'Medical' and 'Surgical' abortion.

1. Medical abortion is the abortion pill, some women feel that a medical abortion is a more natural process. Separated into two.

- Abortion pill (also known as early medical abortion) up to 10 weeks
- Abortion pill from 10 weeks up to 24 weeks

Surgical abortion involves a quick, minor operation. In within two types.

- Vacuum aspiration up to 15 weeks
- Dilatation and evacuation between 15 and 24 weeks

The U.S. Supreme Court rules in *Roe v. Wade* that women, as part of their constitutional right to privacy, can terminate a pregnancy during its first two trimesters. Only during the last trimester, when the fetus can survive outside the womb, would states be permitted to regulate abortion of a healthy pregnancy.

The controversial ruling, essentially reversing a century of anti-abortion legislation in the United States, was the result of a call by many American women for control over their own reproductive processes. Although defended by the Supreme Court on several occasions, the legalization of abortion became a divisive and intensely emotional public issue. The debate intensified during the 1980s, and both pro-choice and pro-life organizations strengthened their membership and political influence.

Republican presidents Ronald Reagan and George Bush used their executive authority to legislate abortion clinic guidelines that restricted free practice of the procedure. However, in 1986, and again in 1989 and 1992, the Supreme Court narrowly reaffirmed the decision, and in 1993 President Bill Clinton, a Democrat, overturned his predecessors' anti-abortion legislation within days of taking office. In the 1990s, opponents of abortion rights increasingly turned to violent methods in their campaign to make abortion illegal again.

In 2005, the retirement of Supreme Court justice Sandra Day O'Connor, who though conservative had helped block efforts to overturn Roe v. Wade, led to fears that the historic legislation might be vulnerable to reversal.

#### **IV. UN Action**

Last Friday the U.N. human rights experts, to commemorate the “International Safe Abortion Day” urged the community to “guarantee access to safe and legal abortion.” The group further exhorted governments to take an active role in securing the availability of abortion by ensuring that women are “giving support and autonomy to undergo the procedure.”

Lately, U.N. human rights experts have used “International Safe Abortion Day” as a pretext for notice the international community to depenalize and legalize abortion. In 2016 had even called on all countries worldwide to legalize abortion “on request,” representing U.N. human rights body had explicitly called for the universal legalization of abortion on demand.

The U.N. human rights experts on Friday made a number of controversial claims, laws defending the right to life of the unborn are rooted in “discriminatory legacies supported by religious and cultural norms”. “Harmful stereotypes women’s roles in the family and society.”

Similar to statements made by other U.N., the group of experts asserted that the right of healthcare workers to thorough objection to abortion cannot be permitted to interfere with the availability of abortion, stating that thorough objection “cannot be a basis for prohibiting women access to abortion.”

U.N. took direct aim at pro-lifers, claiming that the ‘pro-life’ label is “misleading” and an inaccurate description of people who oppose the termination of the life of an unborn

child.

## **V. Conclusion**

The United Nations and ECOSOC committee have been making huge efforts to assure that every woman has a safe care of themselves. Still, statistics show these efforts have not been enough. Even though the UN has been applying a lot of pressure on this topic lots of young pregnant women have been dying because of the risk of having their baby.

ECOSOC is calling on world leaders to tackle this crisis and commit to the following:

- Decrease the death of women during pregnancy.
- To reduce women die after the operation.

The answer, therefore, has to be prevention, and, if that fails, the international community needs to act rapidly to protect vulnerable women.

## **VI. Guiding Questions**

1. What is the UN making to legalize abortion?
2. Which requirements does the government of each country ask so the women can abort?
3. What is your point of view on abortion?
4. Which article supports the legalization of abortion?

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