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United Nations Office of High Commissioner for Human Rights

Written Information Submitted for the Summary of the Human Rights Situation in Japan especially in the field of sexual reproductive rights to be Prepared by the United Nations Office of High Commissioner for Human Rights



NGO Space Allies
4-5-20 Minamiyawata, Ichikawa, Chiba, Japan
Email: allies@crux.ocn.ne.jp

Suggested Recommendations

Abortion should be decriminalized.

The provision requiring spousal consent for abortion should be removed.

Abortion methods should comply with the recommendations of the World Health Organization.

The cost-sharing of sexual reproductive health services, including abortion costs, should be reduced.

Barriers to access to sexual and reproductive health services should be removed.

The Penal Code contains abortion crimes that punish and prohibit women who have abortion and their practitioners (Penal Code Articles 212, 213, and 214).

The Maternal Protection Law also stipulates that, in principle, abortion requires spousal consent. This provision gives the husband the final decision to continue the pregnancy and women's body's decision (Maternal Protection Law, Article 14).

Although repeated recommendations for revision of these laws have been made by CEDAW, the government has shown no movement to even consider amending them.

Contrary to the abortion method recommended by the World Health Organization, the dilation and curettage (D&C) method, which is outdated, prone to bring complications, and considered dangerous, is the main method used in Japan, placing a physical and emotional burden on women. The vacuum aspiration (VA) method recommended by the World Health Organization is not widespread.

In principle, the cost for the first trimester abortion is not covered by health insurance and generally costs \$1,000 or more.

There is concern that abortion pills, which have been applied for regulatory approval but are not yet approved, may cost as much as \$1,000 or more, and there is also a concern that burdensome protocols may be implemented that would require taking the medication under physician supervision and waiting in a medical facility until the abortion is complete.

The policy about emergency contraceptive pills were also included in the fifth plan as a policy to be available at pharmacies without a prescription, but the Ministry of Health, Labor, and Welfare's study group opposed the idea, and the availability of emergency contraceptive pills at pharmacies without a prescription has not yet been realized.

In principle, Japan's health insurance covers injuries and sicknesses, and thus pregnancy and other conditions that do not require medical treatment are not covered. In principle, the cost of abortion, contraception, and other basic sexual and reproductive health services are financially borne by the women themselves who use these services.

In addition to economic barriers, there is also the issue of providing users with sufficient information about sexual reproductive health services in general.

Due to poor access to abortion services, there have been cases of women who are unable to have abortions, giving birth in isolation, and being arrested for abandoning their newborn babies.