August 2009

Dear Colombian Government:

We represent two physician organizations, one in the United States—Physicians for Reproductive Choice and Health—and one international—Global Doctors for Choice, which is active in Argentina, Brazil, Chad, Colombia, England, Ghana, Guatemala, Ireland, Italy, Nigeria, Portugal, South Africa, Uganda, United States, Uruguay. Through medical research and advocacy for evidence-based policy, both groups strive to protect and expand women’s access to comprehensive reproductive health care. We work to ensure that women get the medical attention they need to stay healthy and alive.

We were very concerned to learn that some in Colombia wish to place gestational age limits on rape victims’ access to legal abortion. Gestational age limits will aggravate the suffering of those who have been victims of a terrible crime.

Women and girls who have been raped often repress the experience because it is too hurtful to remember. They may overlook or misinterpret early signs of pregnancy and may delay seeking medical help. These are frequently observed reactions to rape and can lead to late diagnosis of pregnancy.

In addition to post traumatic stress and related psychological barriers to seeking medical care, many rape victims delay because they are terrified that their rapists will retaliate for reporting them to the authorities. For example, a 13-year-old girl has been raped by a family member or a neighbor. Because her rapist lives with her or near her, she must manage to get to the doctor without being seen, something that involves time and planning and money. If gestational age limits were to be in effect, she might finally manage to reach a physician, only to learn that she is a day late for a legal abortion. She is now trapped into giving birth to her rapist’s child. She might suffer significant psychiatric consequences or decide instead to seek an illegal abortion, risking serious injury or death.

Gestational limits would also harm the women and girls who are raped during acts of conflict. In their attempts to get medical assistance, they face recrimination from the armed men who raped them, not to mention the difficulty of traveling to a physician during conflict. Likewise, poor women who have been raped, especially those in remote areas, can have a hard time getting to a doctor and could miss a deadline imposed by a gestational limit.

Three years ago, Colombia’s Constitutional Court gave pregnant rape victims something they desperately needed: the option to have a safe, legal abortion. We urge you to maintain that right as it stands. Moreover, the health framework established in Colombia applies here as the mental health consequences of rape can be significant and severe. The American Psychiatric Association has stated: “... the freedom to act to interrupt pregnancy must be considered a mental health imperative with major social and mental health implications.” Gestational age limits would restrict that option unjustly, giving it to some
rape victims but not others. For instance, those whose circumstances enable them to visit a
doctor promptly would still be able to end their pregnancies, while other women and girls
might very well miss the deadline.

Please do not victimize rape victims twice by imposing gestational age limits on abortion.

Sincerely,

Global Doctors for Choice