

## ***To Abort or not to Abort: That is the Question in South Korea***

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### INTRODUCTION

The debate over abortion and contraception continues to this day, even here in the United States.<sup>1,2</sup>

However, unlike the United States, there are some countries where abortion is illegal. One of those countries is South Korea. Although abortions are illegal in South Korea (except in certain circumstances), they are not a rare occurrence. For several reasons, legalizing abortion in South Korea has recently been a topic of great debate. Korean women have expressed their desire to legalize abortion, yet the government, the social expectations of women, and some groups in the medical community hinder them from having this right to choose and being in charge of their own reproductive capability.

### ANALYSIS

#### An Anti-Abortion Government

In 1953, the Korean Criminal Code made abortions illegal. In 1973, the Maternal and Child Health Act allowed doctors to perform abortions within the first 28 weeks of pregnancy in cases of rape or incest, when a woman's health is in danger, or when a pregnant woman or her spouse has certain communicable or hereditary diseases. In 2009, the abortion law in South Korea was revised so that the deadline for a legal abortion was moved from 28 weeks to 24 weeks, and certain diseases (such as viral hepatitis) were removed from the list of accepted reasons for abortion. In late 2009, a report on declining birth rates was released by the Presidential Council for Future & Vision. In the Council's report, various suggestions for increasing the birth rate were proposed, one of them being an anti-abortion campaign. At this point, the debate on abortion became much more heated, and legislators were motivated to stringently enforce punishments for illegal abortions.<sup>1</sup>

Unlike in the United States, the issue of abortion has not been politically charged in South Korea, until 2010. There was even an article in the *New York Times* around this time, discussing the growing and intensifying debate in South Korea.<sup>2</sup> In January 2010, President Lee Myung Bak scheduled public hearings to discuss a revised abortion law. The government also ran a campaign to discourage abortions. Subway ads stated, "With abortion, you are aborting the future." In the past, the government provided family planning services free of charge. Due to a significant decrease in fertility rates, the government now charges fees for family planning services, hoping this will discourage couples from practicing any form of birth control.<sup>3</sup>

If a woman gets an illegal abortion, she could be sentenced to prison for up to a year and fined the equivalent of about \$2,000. A physician who performs an illegal abortion could be punished with up to two years in prison, although if the woman was harmed from the abortion, the sentence could be up to three years; if the woman died, the sentence could be up to five years. In addition, a physician can lose his or her license for up to seven years.<sup>3</sup>

Although these laws are in place, these punishments are rarely enforced. From the early 1960s to late 1990s, the Korean government actually encouraged women to get abortions to prevent overpopulation. The Korean government no longer encourages abortions, but the abortion rate seems to have increased substantially. Since many abortions go unreported, the actual abortion rate is likely higher. Since 1971, the Korea Institute for Health and Social Affairs (KIHASA) has attempted to estimate the rate of induced abortion. The KIHASA does this every three years by using the National Family Health and Fertility Survey. In 2006, the estimated rate of induced abortion in South Korea was 105 cases per 1,000 married women aged 15 to 44 years.<sup>3</sup> Since this survey included only married women, it underestimates the rate of induced abortions in other groups of women, such as single women or teenagers. This seems to emphasize the government's implicit disapproval of premarital sex, which is in line with societal prejudices.

Because induced abortions are illegal in Korea (except in a few special cases, as noted), and reporting is not mandatory, it is difficult to estimate the number of abortions performed yearly. Ahn and colleagues published an article in 2012 that gives estimates of induced abortions in South Korea. They surveyed 25 hospitals and 176 private clinics in 2005 and found that an estimated 342,433 induced abortions were performed in South Korea (rate of 29.8 per 1000 women aged 15 to 44 years). They found that the abortion rate was slightly higher in women who were single (31.6 per 1000 women) versus married (28.6 per 1000 women).<sup>5</sup>

South Korea is thought to have one of the highest abortion rates in the world. There are many reasons for this, but one important issue is the stigma associated with taking oral contraceptive pills (OCPs), particularly for unmarried women. Therefore, Korean women may use abortion as a form of birth control rather than preventing pregnancy with OCPs.

## Stigma Associated with Oral Contraceptive Use

Negative attitudes toward contraception are still prevalent in many countries. In Asian countries the use of OCPs is very low, with only 1.8 percent of married Korean women reporting use of OCPs. Oral contraceptives have been the least preferred method of contraception in Korea despite their availability without a prescription (as of last year, OCPs are no longer available over the counter, however).<sup>4</sup> There are many reasons that contribute to this, including the belief that OCPs are not safe, and women not having adequate or accurate information about them.

What is encouraging is that the more knowledgeable young Korean women are about OCPs, the more positive attitudes they have toward using them.<sup>5</sup> Overall, OCP use is increasing as well. However, it seems that young adults need to be better informed about contraception. A study of college students in Korea found that they generally lacked knowledge regarding emergency contraceptive pills (ECP) and had misconceptions about their safety. Of these college students, 76.3 percent of them had heard of ECPs, and of sexually active students 13.2 percent of them used ECPs.<sup>6</sup>

Additionally, a large reason for the hesitance in using oral contraceptives is the stigma associated with taking OCPs. The societal assumption is that a single or unmarried woman should not need OCPs because she should not be sexually active. Many Korean women also believe that OCP use is appropriate only for married women. Therefore, a single or unmarried woman asking for OCPs is viewed negatively, which can discourage her from obtaining them. To complicate matters, on May 7, 2012, the Korean Food and Drug Administration (KFDA) announced that OCPs, which used to be available over the counter, now must be obtained with a prescription. This makes them even more inaccessible for Korean women, since they usually do not see a gynecologist on a regular basis. On the other hand, emergency contraception, or the morning-after-pill, is now available over the counter. However, emergency contraception is a less effective way of preventing pregnancy and can cause more side effects, compared to OCPs.

If taking oral contraceptives as an unmarried woman is considered shameful in South Korea, therefore hindering them from obtaining OCPs (women have blogged about how some pharmacists make ethical judgments about them when they ask for oral contraceptive medication), then more women will have unintended pregnancies

if they are unable to get an abortion. Since abortions are illegal in South Korea (except in rare circumstances), this only adds to the problem. The reproductive rights of Korean women are seriously undermined, since they may face cultural scorn if they use oral contraception, but are not allowed to undergo a legal abortion, except in a few rare instances. Still, many women in Korea illegally use abortion as the primary method of birth control. The KFDA's decision to make OCPs available only by prescription will further hinder South Korean women's access to OCPs.

## Views of the Medical Profession

The medical profession in Korea may also be indirectly (or directly) encouraging some of the culturally accepted beliefs about appropriate OCP use. Most of the OCP-related research is done with married women. Additionally, physician-based anti-abortion organizations have recently formed; they use ethical principles rather than low birth rates or religion to support their arguments. One such organization, known as GYNOB, was formed in October 2009. In 2010, there were 680 obstetricians and gynecologists in this organization. One of the objectives of this group is to end all abortions in Korea, except for those that are needed to save the mother's life. In December 2009, another anti-abortion physician group was formed, called the Korean Pro-life Doctors Association.

It is not completely clear if Korean physicians' reluctance to perform abortions is contributing to the availability of abortions in Korea. Unfortunately, the director of the Korea Sexual Violence Relief Center noted that of the women who came to the center for counseling, many were denied abortions (even in one rape case).<sup>3</sup>

The Korean Association of Obstetrics and Gynecologists, on the other hand, is opposed to GYNOB's objectives, fearing that if all abortions are made illegal, then there will be a rise in unsafe abortions, which could endanger the health of mothers, and in the number of abandoned children. It seems that the medical profession in Korea is very much divided on this issue as well.

## CONCLUSION

Women in South Korea are not given the right to choose to have an abortion; yet because of cultural stigma or fear of societal scorn, they may be less likely to use OCPs to prevent pregnancy. Additionally, the KFDA recently decided to make OCPs available by prescription only, which will only further discourage the use of them. By avoiding the use of OCPs, women then rely on induced abortion as their main form of birth control. If they are unable to receive an abortion (either legally or illegally), then they are basically forced to carry their pregnancy to term. This is especially damaging for an unmarried woman in Korea, since having a child outside of marriage is perceived as shameful. Although ECPs are now available over the counter, it is not yet clear what effect this will have on the rates of induced abortions or unintended pregnancies.

If society does not allow women to freely use OCPs without fear of being judged or marginalized, then abortion should be made legal. Alternatively, societal beliefs could be changed, but it could take generations for them to evolve. Allowing abortions may be the easiest way to preserve South Korean women's reproductive rights. Providing a safe, nonjudgmental, and easily accessible way of providing oral contraception could be another option. The KFDA's recent decision to make OCPs unavailable over the counter has made the latter option more difficult.

Currently, it seems that the government and society are viewing South Korean women more as bearers of children than as individuals with reproductive rights. The beliefs that society imposes on them only restrict women's rights to reproductive choice. South Korean women today are cornered with no real choices—or are faced with very difficult ones.

<sup>1</sup>Trubek, Louise, "The Unfinished fight over contraception" *The New York Times*, March 1, 2012, <http://www.nytimes.com/2012/03/02/opinion/contraception-war-goes-on.html>.

<sup>2</sup>Pear, Robert, "Senate Rejects Step Targeting Coverage of Contraception," *The New York Times*, March 1, 2012, <http://www.nytimes.com/2012/03/02/us/politics/senate-kills-gop-bill-opposing-contraception-policy.html>.

<sup>3</sup>Wolman, Andrew, "Abortion in Korea: A Human Rights Perspective on the Current Debate Over Enforcement of the Laws Prohibiting Abortion," *The Journal of International Business and Law* 9, no.1 (Spring 2010): 153-174.

<sup>1</sup>Choe, Sang-Hun, "South Korea Confronts Open Secret of Abortion," *The New York Times*, January 5, 2010, <http://www.nytimes.com/2010/01/06/world/asia/06korea.html>.

<sup>4</sup>Ahn HS, Seol HJ, Lim JE, et al., "Estimates of Induced Abortion in South Korea: Health Facilities Survey," *J Obstet Gynaecol Res* 38, no.1 (January 2012): 324-8.

<sup>5</sup>Lee J, Jezewski MA, "Attitudes toward oral contraceptive use among women of reproductive age: a systematic review," *ANS Adv Nurs Sci* 30, no.1 (January-March 2007): E85-103.

<sup>6</sup>Lim H, Cho Y, "A Study on Knowledge and Attitude about Oral Contraceptives in University Students," *J Korean Community Health Nurs Acad Soc* 16, no.2 (2002): 412-422.

<sup>7</sup>Kang HS, Moneyham L, "Use of emergency contraceptive pills and condoms by college students: a survey," *Int J Nurs Stud* 45, no.5 (May 2008): 775-83.