



CAMPAIGN REPORT

The law, trials and imprisonment for abortion in Malaysia



Nirmala and her lawyer. SOURCE: [Malay Mail](#)

by Nandini Archer
Edited by Marge Berer

June 2018

Introduction

In spite of sustained advocacy from sexual and reproductive health (SRH) and human rights advocates, and penal code amendments in 1971 and 1989, which opened up more grounds for abortion, access to safe, legal abortion remains heavily restricted in Malaysia. Before these changes, several prosecutions were taken against medical professionals. Since then, only one woman has been prosecuted for abortion – a Nepali migrant worker named Nirmala in 2014, who spent four months in prison and was acquitted on appeal.

This report looks at the abortion law and access to abortion in Malaysia and reviews calls to change the law and access by SRH and human rights advocates. The report ends with a discussion of the cases against medical professionals, prosecutions of women for infanticide and the case of Nirmala.¹

Abortion law in Malaysia

Abortion law originally came to Malaysia under the British Empire's Indian 1871 penal code, which criminalised abortion on all grounds.² Other laws and regulations have come in since then. For example, the 1956 Medicines Advertisement and Sale Act prohibited the publication of advertisements relating to abortion. This carries a sentence of up-to two years' imprisonment, and/or a fine of US\$1,316.³

There have been two ground-breaking amendments to section 312 of the penal code – one in 1971 to permit abortion to save a woman's life, and another in 1989 to allow abortion to preserve a woman's physical and mental health.⁴

Since these reforms, section 312 of the penal code states that apart from these grounds, those who cause an abortion with a woman's consent can be sentenced up to three years' imprisonment, and/or fined. If the woman is "quick with child", meaning beyond her fourth month of pregnancy, the woman or provider can be sentenced to up to seven years' imprisonment, and fined. Section 313 states that those who cause an abortion without the woman's consent can be sentenced to up to 20 years' imprisonment, and fined.⁵

Only a registered medical practitioner has the power to determine "in good faith" whether the pregnant woman's life or health is at risk if she continues the pregnancy. Abortions on the grounds of rape or incest and in cases of fetal impairment are still prohibited.⁶ Section 315 of the penal code states that an "act done with intent to

¹ We have purposely not provided Nirmala's surname, even though it was reported in the media at the time. We do not see why she should be easily identifiable.

² Women on Waves (2018) Abortion Law in Malaysia <https://www.womenonwaves.org/en/page/4880/abortion-law-malaysia>

³ Center for Reproductive Rights (CRR) (2005) Women of the World: Laws and Policies Affecting their Reproductive Lives. p.96

⁴ Women on Waves (2018) Abortion Law in Malaysia <https://www.womenonwaves.org/en/page/4880/abortion-law-malaysia>

⁵ Penal Code Malaysia <http://www.agc.gov.my/agcportal/uploads/files/Publications/LOM/EN/Penal%20Code%20%5BAct%20574%5D2.pdf>

⁶ UN Population Division - Department of Economic and Social Affairs (2002) Abortion Policies - A Global Review. Malaysia Country Profile. www.un.org/esa/population/publications/abortion/ p.1

prevent a child being born alive or to cause it to die after birth” is an offence “unless it is for the purpose of saving the life of the mother.”⁷

As a Muslim majority country, Malaysia has a dual legal system, with Sharia law functioning alongside the civil law described above. In 2002, the National Fatwa Committee issued a *fatwa* which permits abortion up to 120 days of gestation in cases where the woman’s life is at risk, or in cases of fetal impairment.⁸ Nonetheless, the penal code still applies universally and in 2005 the Center for Reproductive Rights (CRR) reported that the government had not publicised the *fatwa* due to concerns that it could be misused.⁹

Access to abortion

Although there is a scarcity of data on the prevalence of (illegal) abortions, the Federation of Reproductive Health Associations Malaysia (FRHAM) has estimated that there are about 90,000 abortions annually in Malaysia.¹⁰ The Reproductive Rights Advocacy Alliance Malaysia (RRAAM) report that there are an estimated 240 clinics nationwide offering abortion services, but not all have been vetted for quality of care or safety.¹¹

In the public sector, abortion access is limited. Generally, government health facilities only provide abortions where there are documented medical risks to the mother’s physical health; this usually excludes important factors affecting mental well-being, for instance, or for social reasons.¹²

In the private sector, abortions are unregulated. Private practitioners will frequently take advantage¹³ and fees can vary anywhere from US\$60-\$800, which is unaffordable particularly for poor Malaysians and migrant women.¹⁴ The use of MVA under light sedation and local anaesthesia on an outpatient basis are still not widely accepted; hence, D&C under general anaesthesia are particularly expensive.¹⁵

Malaysia suffers from a lack of clear interpretation and understanding of these laws and policies, resulting in poor implementation and limited safe, accessible services.¹⁶ A 2007 RRAAM survey of 120 doctors and nurses found that 43% did not know on what grounds abortion is legal, and 41% of women who had legal abortions in private

⁷ Penal Code Malaysia

<http://www.agc.gov.my/agcportal/uploads/files/Publications/LOM/EN/Penal%20Code%20%5BAct%20574%5D2.pdf>

⁸ Wah Yun Low, Wong Yut Lin, Wen Ting Tong, Sim-Poey Choong (2014) ‘Access to Safe Legal Abortion in Malaysia.’ *Asia-Pacific Journal of Public Health* 27 (1), p.4

⁹ Center for Reproductive Rights (CRR) (2005) *Women of the World: Laws and Policies Affecting their Reproductive Lives*. p.96

¹⁰ Federation of Reproductive Health Associations Malaysia (FRHAM) (2015) Country Profile. On universal access to sexual and reproductive rights - Malaysia, p.4

¹¹ Reproductive Rights Advocacy Alliance Malaysia (RRAAM) (nd) Statistics www.rraam.org/resources/statistics/

¹² Email exchange with Dr Sim-Poey Choong, RRAAM, May 2018

¹³ Federation of Reproductive Health Associations Malaysia (FRHAM) (2015) Country Profile. On universal access to sexual and reproductive rights - Malaysia, p.4

¹⁴ Asia Safe Abortion Partnership (ASAP) (nd) Country profile, Malaysia <http://asap-asia.org/country-profile-malaysia/>

¹⁵ Interview with Dr Sim-Poey Choong, RRAAM, May 2018

¹⁶ Wah Yun Low, Wong Yut Lin, Wen Ting Tong, Sim-Poey Choong (2014) ‘Access to Safe Legal Abortion in Malaysia.’ *Asia-Pacific Journal of Public Health* 27 (1), p.2

clinics did not know what the law permitted either. The same study found that inaccurate statements on the legality of abortion could be found in some government publications and NGO websites, as well as in the Malaysian Medical Council Code of Ethics and in news articles.¹⁷

Dr Sim-Poey Choong, Co-Chair, RRAAM explained that although in some ways the private sector considers mental health issues more sympathetically than the public sector does, many still fear the stigma of being abortion providers. Thus, many doctors and clinics provide abortions 'on the quiet'. For example, out of hundreds providing safe abortions, very few are willing to be included in RRAAM's list of providers on their website. (Out of 80 interviewed by RRAAM throughout the country during a UNFPA project, only 20 were willing to come on board).¹⁸

In 2012, FRHAM highlighted the urgent need for standardised guidelines on safe abortion service provision. The Ministry of Health subsequently released *Guidelines on the Termination of Pregnancy in Government Hospitals*, based on the guidelines of the UK Royal College of Obstetricians and Gynaecologists. The guidelines aim to:

*“Create awareness among government health care professionals of the complexity of the issues of induced abortion and to be mindful of the existing provisions given by the professional ethics, legislation, religion and reproductive rights during consultation with the woman client.”*¹⁹

Although the contribution they make has been praised,²⁰ there has been very little change in access to abortion in government facilities since then. Dr Choong said that many pro-choice advocates believe this lack of change is due to the attitudes of some senior government gynaecologists.²¹

Mifepristone is not registered in Malaysia, while misoprostol is officially available only on prescription.²² Access to abortion pills online however, means that women are taking matters into their own hands. Women on Web (an online abortion-pill provider) found that in 2015, 33,781 Malaysian women visited their online portal, while 1,109 contacted their helpdesk. Their study revealed that there is a great need for accurate information on and better access to medical abortion pills in Malaysia.²³

Calls for change

There has been support for abortion law reform for over four decades in Malaysia. As far back as 1974, a national fertility and family survey found that 71% of women

¹⁷ Rashidah Abdullah (2009) 'Abortion in Malaysia: legal yet still inaccessible.' *Arrows for Change*. <https://www.thefreelibrary.com/Abortion+in+Malaysia%3A+legal+yet+still+inaccessible.-a0227461623>

¹⁸ Email exchange with Dr Sim-Poey Choong, May 2018.

¹⁹ Ministry of Health (2012) Guidelines on the Termination of Pregnancy in Government Hospitals www.moh.gov.my/images/gallery/GarisPanduan/Guideline%20On%20TOP%20for%20Hospitals%20in%20MOH.pdf

²⁰ Wah Yun Low, Wong Yut Lin, Wen Ting Tong, Sim-Poey Choong (2014) 'Access to Safe Legal Abortion in Malaysia.' *Asia-Pacific Journal of Public Health* 27 (1), p.1

²¹ Email exchange with Dr Sim-Poey Choong, May 2018.

²² Reproductive Rights Advocacy Alliance Malaysia (RRAAM) (nd) FAQs <http://www.rraam.org/questions/health-body/faq/>

²³ Amalia Puri Handayani and Rebecca Gomperts (2017) 'Need for Tele medical Abortion Services in Indonesia and Malaysia: Study on Women on Web.' *Indonesian Feminist Journal* 22 (2) www.indonesianfeministjournal.org/index.php/IFJ/article/view/1766

endorsed abortion on the grounds of rape or incest; 54.3% endorsed abortion for unmarried women; 52.2% endorsed abortion for health reasons, and 34.5% endorsed abortion for economic and social reasons.²⁴

Indeed, there has been sustained advocacy from doctors, lawyers, academics and women's rights, SRH and human rights activists as well. In addition, the Asia Safe Abortion Partnership (ASAP), the Asian-Pacific Resource and Research Centre for Women (ARROW), the Joint Action Group for Gender Equality (JAG) and the Reproductive Rights Advocacy Alliance Malaysia (RRAAM) all work to encourage the government to meet its reproductive health obligations under the Convention on the Elimination of Discrimination Against Women (CEDAW).

In 2016 RRAAM facilitated a policy discussion attended by various high-level governmental and non-governmental stakeholders.²⁵ Among many topics of discussion, the meeting questioned why medical abortion pills were difficult to access in Malaysia and why mifepristone was not registered, despite clear evidence of its safety.

There has also been resistance to this progressive narrative, however. In January 2017 for example, it was widely reported in the Malaysian press that the Minister of Health, Datuk Seri Subramaniam, threatened the investigation and prosecution of anyone selling or purchasing medical abortion pills online. He said that it is difficult to detect when orders are placed online for purchases from abroad, but that the MoH was working with the police and customs to detect packages containing such pills coming into the country, and also to establish whether the pills were being sold locally. In response, RRAAM said:

"We recognise the proliferation of many unethical sellers of medical abortion pills, but the proposed action by the Minister may also end up threatening the provision of genuine non-profit suppliers..."

"We are uncertain how effective the Customs department will be, but we expect most of the supplies will still get through. But if a prosecution takes place, it will be a real threat to continuing access."

"The only logical and effective step to cut out the demand for online abortion pills... is to fast-track the approval and supply of both these medications to doctors so that they can be legally prescribed to clients after a proper assessment, as proposed by the Minister."²⁶

Court cases against medical practitioners before 1989

²⁴ UN Population Division - Department of Economic and Social Affairs (2002) Abortion Policies - A Global Review. Malaysia Country Profile. www.un.org/esa/population/publications/abortion/ p.1

²⁵ Reproductive Rights Advocacy Alliance Malaysia (RRAAM) (2016) 'The Legal and Policy Environment of Safe Abortion in Malaysia.' *International Campaign for Women's Right to Safe Abortion*. 30 August 2016. www.safeabortionwomensright.org/the-legal-and-policy-environment-of-safe-abortion-in-malaysia/

²⁶ International Campaign for Women's Right to Safe Abortion (2017) 'A threat to abortion pill access in Malaysia.' 31 January 2017. www.safeabortionwomensright.org/a-threat-to-abortion-pill-access-in-malaysia/

We found three cases taken up against medical professionals before 1989. In *Munah Binti AH v Public Prosecutor* (1958), the lower court held that the accused had caused an abortion by inserting an instrument into a woman's vagina, and was sentenced to three months' imprisonment, which was upheld by the High Court of Malaysia.²⁷ Similarly, the court in *Mary Shim v Public Prosecutor* (1962)²⁸ found the accused guilty of causing an abortion by inserting a stick into a woman, who consequently contracted septicaemia and died.

Twenty years later, in the case *Public Prosecutor v Dr Nadason Kanagalingam* (1985)²⁹ a pregnant woman was found to have enlarged varicose veins. The accused gave her a saline injection to cause an abortion. Though he argued that he performed the abortion in good faith to save the woman's life, the court held that he had not given reasonable thought and had not taken enough steps to examine the woman further. It held that there was no indication that the woman's life was or would have been in danger if the pregnancy was allowed to continue.

These cases show how medical practitioners were criminalised in Malaysia for abortion in the past. No other cases post-1989 have been found, suggesting a more progressive stance, albeit an unspoken one, on the part of the government.

Cases of infanticide

Infanticide is often a direct result of the criminalisation and inaccessibility of abortion. Section 309 of the penal code states that punishment for infanticide is imprisonment of up to 20 years, and a fine. Between 2005 and 2011, there were 517 cases of abandoned babies recorded in Malaysia. In 2016, the number of abandoned babies recorded was 115.

In 2010, the Women, Family and Community Development Minister, Datuk Seri Shahrizat Abdul Jalil, reported that the government had decided to classify "baby dumping" that resulted in the death of the baby as a crime that warranted the death sentence. The Prime Minister clarified the following day that the minister had in fact intended to say that cases of such deaths should be "investigated" as murder, but that it was for the Attorney-General to determine whether the circumstances justified a murder charge.³⁰

An example of a prosecution for infanticide long before 2010 was in 1987 in the case *Public Prosecutor vs Zamihyah*. The court held that the accused was suffering from puerperal psychosis when she killed her two-month-old girl by throwing her from a moving car. Initially charged with murder and remanded in custody for three years, the charge was amended to infanticide when she appeared in court. The judge gave her

²⁷ K. D. Gaur (1995) 'Abortion and the law in countries of Indian subcontinent, ASEAN region, United Kingdom, Ireland and United States of America.' *Journal of the Indian Law Institute* 37 (3), p.296

²⁸ Nur Anees Syafwah (nd) Legal Issues of Abortion in Malaysia.

www.academia.edu/7691081/Legal_Issues_of_Abortion_in_Malaysia

²⁹ *Public Prosecutor v. Dr. Nadason Kanagalingam*, 9 June 1984. Malaysia High Court.

<https://www.ncbi.nlm.nih.gov/pubmed/12346715>

³⁰ Datuk Mahadev Shankar (2010) 'Looking at the bigger picture.' *The Star Online*. 19 April 2010.

<https://www.thestar.com.my/news/nation/2010/08/19/looking-at-the-bigger-picture/#hTDp75koy3wpLgQC.99>

a sentence equal to the remand period that she had already served and she was released.³¹

However, in 2012, in a far more severe judgement, a 19-year-old was sentenced to 12 years in jail for killing her baby by throwing it out of a second-floor window.³²

Similarly, in 2014, a 26-year-old maid from Indonesia faced an infanticide charge. Her lawyer had tried to plead that this was an act of desperation, as she feared losing her job if her employer found out that she was pregnant and had had a baby. Her lawyer explained: *“She is her family’s sole breadwinner and has to support her aged mother and father in Indonesia. If she loses her job, her family would lose their source of income.”* However, the judge was not sympathetic, commenting: *“Killing your own child will not solve your problems, let this punishment be a lesson to you.”* She was sentenced to eight years imprisonment for infanticide.³³

The case of Nirmala

Nirmala migrated to Malaysia from Nepal with her husband and was working at the Sony factory; her husband was working as a security guard. When she was 24 years old, Nirmala got pregnant and opted for an abortion at six weeks into her pregnancy, as she feared losing her job. It so happened that the authorities raided the health clinic where she had her abortion on 9th October 2014 in Penang, and she was arrested. The doctor who provided the abortion was also arrested.³⁴ The case garnered a great deal of attention both nationally and internationally, not least because it was a bona fide clinic and the grounds for abortion were legal.

Nirmala was brought before the court to face a charge under Section 315 of the penal code for committing “an act done with intent to prevent a child being born alive”. There is a legal argument that this can only be applied in cases where the baby is viable; otherwise, it would nullify section 312.³⁵

Her doctor reported that he had considered the risks of Nirmala losing her job, having to pay compensation to her employer, and being sent back home if found pregnant – and that he had decided in good faith she was legally justified to have a termination. Nonetheless, Nirmala was swiftly charged and convicted one month after her arrest, in the absence of legal representation. She was sentenced to a year's imprisonment, thus becoming the first woman in Malaysia to be sent to prison for abortion.³⁶

³¹ Datuk Mahadev Shankar (2010) ‘Looking at the bigger picture.’ *The Star Online*. 19 April 2010. <https://www.thestar.com.my/news/nation/2010/08/19/looking-at-the-bigger-picture/#hTDp75koy3wplgQC.99>

³² The Star Online. (2012) ‘Teen seeks stay on jail term for infanticide.’ 25 April 2010. <https://www.thestar.com.my/news/nation/2012/04/25/teen-seeks-stay-on-jail-term-for-infanticide/#PiEypquADjJJBMD.99>

³³ The Malaysian Times (2014) ‘Indonesian maid jailed 8 years for infanticide.’ 28 March 2014. www.themalaysiantimes.com.my/indonesian-maid-jailed-8-years-for-infanticide/

³⁴ Center for Reproductive Rights (CRR) (2015) ‘Retrial Begins for Nepalese Migrant Worker Wrongfully Accused of Obtaining Illegal Abortion’ <https://www.reproductiverights.org/press-room/retrial-begins-for-nepalese-migrant-worker-wrongfully-accused-of-obtaining-illegal-abortion>

³⁵ Email exchange with Dr Sim-Poey Choong, May 2018.

³⁶ Center for Reproductive Rights (CRR) (2015) ‘Retrial Begins for Nepalese Migrant Worker Wrongfully Accused of Obtaining Illegal Abortion’ <https://www.reproductiverights.org/press-room/retrial-begins-for-nepalese-migrant-worker-wrongfully-accused-of-obtaining-illegal-abortion>

After repeated attempts to determine which prison Nirmala was being held in, abortion and human rights advocates found her and reported that she was in deep distress over her situation.

Advocates were shocked at the re-interpretation of the Penal Code and were worried that it paved the way for thousands more women to be subjected to prosecution. Melissa Upreti, then regional director at Center for Reproductive Rights, commented at the time she was imprisoned: "*The arrest and conviction of Nirmala reeks of discrimination and impunity. We are deeply concerned about Nirmala's safety and health.*"³⁷

Advocates found Nirmala a pro-bono legal team who submitted an appeal against the conviction and sentencing to the Penang High Court. They also applied for the court to exercise its judicial powers to review the whole case.³⁸

The Judicial Commissioner, Datuk Nordin Hassan, said on the basis of the evidence that he was giving Nirmala the benefit of the doubt. He said he had looked through the facts of the case in which three main issues emerged, namely, her lack of understanding of the import of her guilty plea, the lack of evidence of the offence she had pleaded guilty to, and the language used when she was charged and convicted.³⁹ The Penang High Court thus quashed the conviction and sent the case back to the lower court, where Nirmala was charged again. During the eight months that this trial lasted, Nirmala was released on bail, thanks to Dr Choong,⁴⁰ but she was left unemployed and had to live in a shelter for migrant workers.⁴¹

Dr Choong worked closely with Nirmala's lawyer and said that he urged him to use section 312 as a defence in the new case. However, the lawyer pursued a different approach and managed to get Nirmala acquitted on the ground that forcing her to continue the pregnancy posed a risk to her life, given her particular circumstances.⁴² The Bukit Mertajam Sessions Court under Judge M Vijayalakshmi acquitted and discharged Nirmala on 21st September 2015, saying that the prosecution had failed to present a *prima facie* case. Afterwards, Nirmala's lawyer said: "The court's decision has exonerated her, and it is an unprecedented case."⁴³

Following Nirmala's acquittal, a case against her physician, Dr NG, was pursued. It attracted a lot of attention from doctors, affecting their perception of what the law

³⁷ Center for Reproductive Rights (CRR) (2014) 'Imprisoned in Malaysia After Legal Abortion' <https://www.reproductiverights.org/feature/imprisoned-in-malaysia-after-legal-abortion>

³⁸ Opalyn Mok (2015) 'High Court sets aside Nepali's conviction in Penang abortion case.' *The Malay Online*. 12 January 2015. <https://www.malaymail.com/s/817965/high-court-sets-aside-nepalis-conviction-in-penang-abortion-case>

³⁹ Opalyn Mok (2015) 'High Court sets aside Nepali's conviction in Penang abortion case.' *The Malay Online*. 12 January 2015. <https://www.malaymail.com/s/817965/high-court-sets-aside-nepalis-conviction-in-penang-abortion-case>

⁴⁰ Opalyn Mok (2015) 'High Court sets aside Nepali's conviction in Penang abortion case.' *The Malay Online*. 12 January 2015. <https://www.malaymail.com/s/817965/high-court-sets-aside-nepalis-conviction-in-penang-abortion-case>

⁴¹ Center for Reproductive Rights (CRR) (2015) 'Retrial Begins for Nepalese Migrant Worker Wrongfully Accused of Obtaining Illegal Abortion' <https://www.reproductiverights.org/press-room/retrial-begins-for-nepalese-migrant-worker-wrongfully-accused-of-obtaining-illegal-abortion>

⁴² Interview with with Dr Sim-Poey Choong, May 2018.

⁴³ Opalyn Mok (2015) 'Nepalese beats illegal abortion charge in Penang.' *The Malay Online*. 21 September 2015. www.themalaymailonline.com/malaysia/article/nepalese-beats-illegal-abortion-charge-in-penang

actually allowed. Dr Ng's prosecution was based on the Private Healthcare Facilities and Services Act. The police prepared a report which led to him being charged on the grounds that his clinic was unsuitable for abortion procedures under Clause 340b of the TOP guidelines, which stipulate that 'any procedure which involves prolonged invasion of body cavities, involves major blood vessels, that can result in extensive blood loss or to a life-threatening emergency' must be performed in a hospital.⁴⁴ This is certainly not an accurate description of Nirmala's abortion, alone the vast majority of others.

On the day of the hearing, when the defence went into chambers to seek a clarification of the charge against Dr Ng, the prosecution decided to reconsider the charge and after consultation with the Attorney General's Chamber, he decided to withdraw the charge completely.⁴⁵

Conclusion

Following Nirmala's acquittal, the Joint Action Group of Gender Equality (JAG) an umbrella body of 11 women's rights groups in Malaysia, issued a statement urging the government to take responsibility for what had happened to Nirmala and ensure that "no other woman will be hauled to court in the future over their decision to undergo an abortion."⁴⁶

Dr Prema Devaraj of the Women's Centre for Change (WCC) explained:

*"We are still concerned for the reproductive rights of women in Malaysia and we want to discuss Section 315 of the Penal Code with the relevant ministries so that this would not be used to criminalise women for having the procedure done."*⁴⁷

There has been no public response to these concerns to date, and it is still uncertain what will happen following the Minister's threat to crack down on medical abortion pills.

However, as Dr Sim-Poey Choong of RRAAM has commented:

*"If they want to prosecute women for having the procedure done, they will have to prosecute 90,000 women each year. If the medical practitioner feels that the pregnancy is a threat to the mental and physical health of the mother, he [or she] has the right to terminate the pregnancy."*⁴⁸

Nirmala's landmark case has still not been taken seriously by the government, even as advocates are pushing for it. A new change in government in Malaysia, however,

⁴⁴ Interview with with Dr Sim-Poey Choong, June 2018 through personal communication from the director Dr Razid.

⁴⁵ Email exchange with Dr Sim-Poey Choong, May 2018.

⁴⁶ Opalyn Mok (2015) 'After Nepalese acquitted, group tells ministry to ensure no more women criminalised for abortion.' *The Malay Online*. 21 September 2015. www.themalaymailonline.com/malaysia/article/after-nepalese-acquitted-group-tells-ministry-to-ensure-no-more-women-crimi

⁴⁷ Opalyn Mok (2015) 'After Nepalese acquitted, group tells ministry to ensure no more women criminalised for abortion.' *The Malay Online*. 21 September 2015. www.themalaymailonline.com/malaysia/article/after-nepalese-acquitted-group-tells-ministry-to-ensure-no-more-women-crimi

⁴⁸ Opalyn Mok (2015) 'After Nepalese acquitted, group tells ministry to ensure no more women criminalised for abortion.' *The Malay Online*. 21 September 2015. www.themalaymailonline.com/malaysia/article/after-nepalese-acquitted-group-tells-ministry-to-ensure-no-more-women-crimi

does bring hope, as it promises to pay more attention to human rights. Everyone agrees that until the law is changed in a positive way and the guidelines implemented, women and healthcare providers remain at risk of prosecution in Malaysia.

Acknowledgements

Many thanks to Saira Shameem and Dr Sim-Poey Choong for contributing information for this paper and for guidance in the research process. We laud the tireless campaigning and research carried out by the Reproductive Rights Advocacy Group Malaysia (RRAAM), the Joint Action Group for Gender Equality (JAG), the Asia Safe Abortion Partnership (ASAP), and the Asian-Pacific Resource and Research Centre for Women (ARROW), as well as the journalists who have sought to spotlight the continuing injustice.

Can you help?

We want to keep these reports as updated and as comprehensive as possible. If you have any more information regarding the above cases, or new cases that have come to light, please contact Nandini Archer: nandini@safeabortionwomensright.org.