

***“They told me that if I abort, they’ll report me”*. Understanding how reproductive injustice can lead to infanticide**

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Background

Infanticide - the intentional killing or fatal neglect of a child under the age of one year - is a tragic and complex reality in countries such as Senegal. Infanticide is one of the top five reasons why women are detained in prisons in Senegal, accounting for 22.13% of all cases. These statistics, along with media articles about dumped babies, demonstrate the recurrent nature of this phenomenon, and raise questions about the factors underlying such a practice. However, the problem continues to receive limited attention in terms of scientific research, and policy and programmatic frameworks for prevention.

Objectives

We aimed to explore the complex web of factors leading to infanticide, the decision-making process, and the impact of infanticide and its associated legal and social sanctions on the lives of the girls and women involved.

Methods

Between May 2020 and January 2022, we conducted an ethnographic study on the lived experiences of 18 women and girls criminalized for infanticide in Dakar, Senegal. Data were collected through participant observation in prisons and the neighbourhoods the women and their relatives lived, as well in-depth interviews with 18 women involved in infanticide, their relatives, healthcare providers, judiciaries, and civil society and community actors.

Findings

The findings provide insights into the complex and multi-layered factors that contribute to the occurrence of infanticide. Participants described the circumstances in which the index pregnancy took place - circumstances characterized by fragile social and family structures, precarious employment conditions, transactional sex and low use of contraceptives. Moreover, some participants experienced sexual violence that they failed to report to avoid shame, while those who dared to report faced doubts *“He told me how can a woman of my age be raped?”*, or experienced vendetta from their relatives and perpetrators.

The resulting pregnancies were unwanted or un-continuable for multiple reasons, including the fear of stigma and social sanctions resulting from a premarital or extramarital pregnancy, the absence or rejection of the pregnancy by the partner, or a pregnancy as a result of rape. Yet, because of severe legal restrictions and stigma, participants could not access abortion services. With abortion being allowed only to save the life of the pregnant woman in Senegal, participants described the extreme

challenges in finding information about abortion providers or safe abortion methods to terminate the pregnancy. The few participants who spoke to their partners or providers about abortion faced threats of violence or being reported to police. Left with no other choice, participants were forced to continue their pregnancies - usually in secret and depressed - and thus to give birth, in almost all cases, alone, frightened and at risk of complications (e.g., haemorrhage, retained placenta, infection).

Of the 19 participants, seven admitted to having killed the infant (accidentally or intentionally). In most cases, the infanticide happened after delivery - sometimes in apparent cases of extreme post-partum distress, and other times due to accidental smothering of the infant in an attempt to stop the new-born from crying so as not to be discovered. The remaining eleven assert that the child was stillborn. The infanticide was discovered due to complications resulting from unassisted delivery, denunciations by health care providers or relatives. This was followed by traumatic arrests, lengthy preventive detention, and isolation and ostracism accompanied by mental health issues.

Conclusion

Patriarchal norms and the stigmatization of pre/extramarital pregnancies force girls and women with unwanted pregnancies into social and economic isolation, and create the conditions that lead to infanticide. Restriction and stigmatization of abortion make infanticide the only option for women to escape "social disqualification" and reintegrate into their networks. Yet infanticide exacerbates this disqualification, turning them from "deviant" to "criminal", with all the legal and social sanctions that this entails. These findings call for community and policy level interventions to shift attitudes towards pre/extramarital pregnancies, sexual violence, and improve the legal frameworks and policies regarding access to safe abortion.