

After the Referendum Abortion in Ireland

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8th Amendment to the Constitution

- *“The State acknowledges the right to life of the unborn and, with due regard to the equal right to life of the mother, guarantees in its laws to respect, and, as far as practicable, by its laws to defend and vindicate that right”.*

1983 Referendum Result

- The country voted by 66.9% to 33.1% to insert the amendment into the constitution.
- Turnout of 53%.
- The outcome was no surprise. The surprise was that with the might of the Catholic Church and almost every political party in favour of the amendment, one third voted against it.
- This third, despite attempts to further restrict Irish women's access to abortion, despite political inertia, continued to work towards change and reform.

2018 Referendum Result

- The country voted by 66.4% to 33.6% to remove the amendment with more than two million votes cast.
- At 64.1%, the turnout was one of the highest ever recorded for a referendum in this country.
- After 35 years, the door has been opened to legislate for abortion services in Ireland.



Dublin Castle May 26th, 2018



How did we get there?

Slowly!

- Working continuously on a combination of political, legal and medical levels at home and internationally. (Change of focus)
- Doctors for Choice provided valuable support to enable doctors to declare and defend a pro-choice position.
- IFPA and others relentlessly presented the evidence of harm caused to women by our restrictive abortion law to legislators at home and to expert human rights bodies at European and United Nations platforms.
- Risks to health from denial of abortion, from being forced to travel for abortion and from illegal abortion, the harmful effect of stigma, the barriers to travel faced disproportionately by the most disadvantaged women.

Key moments

- X Case 1992: Ultimately led to a ruling stating that if the mother's life was at risk, in this case by suicide, she had a constitutional right to an abortion in Ireland.
- Three further amendments were proposed following this judgement:
 - Right to travel abroad for abortion
 - Right to information about abortion services abroad
 - Removal of suicide as grounds for abortion
- The removal of suicide as grounds for abortion was again put to a referendum in 2002 and also defeated.

First opportunity for reform

- Many referenda but not to increase access
- In fact all about further restriction

Crisis Pregnancy Agency, 2001

- Acknowledged a state responsibility for crisis pregnancy
- Provided state funded free pregnancy counselling services
- Promoted contraception
- However, abortion continued to be stigmatised:
 - One of the three objectives of the CPA was to achieve “a reduction in the number of women with crisis pregnancies who opt for abortion by offering services and supports which make other options more attractive”.

ABC Case, Ruling, 2010

- 3 women brought cases to the European Court of Human Rights relating to denial of abortion services
- In the case of C, the court ruled that the Government had violated the European Convention on Human Rights by failing to provide an accessible and effective procedure by which a woman can establish whether she qualifies for a legal abortion under current Irish law.
- A government-appointed Expert Group on Abortion recommended that Ireland was obliged to implement the court's decision and recommending legislative and statutory reform. November 2012

Death of Savita Halappanavar, 2012

- Story broke the day after the Expert group report
- Public outrage and horror
- Mass mobilisation
- Injected urgency and put pressure on the government to enact legislation to allow for abortion in the very limited circumstances allowed by the constitution.
- Protection of Life During Pregnancy Act (PLDPA) 2013
- Also brought the abortion issue back into the public domain



Since PLDPA, 2013

- Notable shift in the abortion debate.
- Doctors' voices became more prominent.
- Abortion at last began to be seen as a women's health issue rather than an ideological one.
- The silence around abortion began to break down.
- Women began to tell their stories, particularly tragic stories of traveling for abortions in cases of Fatal Foetal Anomalies.

Peer Support

- Doctors for Choice provided a network to allow doctors to learn about and discuss abortion in a professional capacity.
- IFPA held a number of educational events for medical, legal and political professionals inviting international experts such as Prof Sabaratnam Arulkumaran, Prof Rebecca Cook, Dr Gilda Sedgh and Prof Sharon Cameron.
- As well as providing valuable learning opportunities, the value of identifying colleagues who had a pro-choice position and being liberated to openly discuss the topic in a constructive rather than a defensive way, was key to building the confidence of doctors to become public advocates for Repeal.

Citizens' Assembly

- 99 citizens selected to reflect broad demographics (age, gender, county of residence) were convened to hear expert testimony as well as presentations from activists on the pro-choice and anti-choice sides, chaired by a senior judge.
- Meeting from November 2016 to April 2017, they read detailed submissions, heard evidence and questioned presenters, before deliberating among themselves.
- A report was produced, surprisingly liberal in nature, with several recommendations.

Citizens' Assembly: Key Recommendations

- 87% agreed that the 8th Amendment should not be retained in full.
- 64% of the Members recommended that the termination of pregnancy without restriction as to reason should be lawful.
- In addition, a majority of Members recommended 12 reasons, for which termination of pregnancy should be lawful in Ireland. They also made recommendations as to gestational limits, if any, in respect of each of those reasons.

Oireachtas Committee on the 8th Amendment

- A cross-party committee of 15 members, convened to examine the report of the Citizen's Assembly, they met from October to December, 2017.
- They also read detailed submissions and heard evidence from legal and medical experts as well as activists and individual women.
- A report was produced in December 2017, which was very similar in its recommendations to that of the Citizen's assembly.
- The Taoiseach announced that a referendum on repeal would take place in 2018.

ADVERTISMENT

As Doctors we
make difficult
decisions
every day.

1,517
of us are agreed
on this one.

Vote **Yes.** Friday 25 May

For the full list of doctors practising in
Ireland and signed up in support of a
Yes vote visit togetherforyes.ie/doctors

Sometimes a
private matter
needs public
support.

VOTE 

Yes.



35 Years
changed nothing.
One day can
change
everything.

Vote
Friday 25 May
Yes

A woman
you love
needs your
Yes.

Vote
Friday 25 May
Yes

Proposed Legislation Provisions

- Access to abortion without restriction as to reason up to 12 weeks of pregnancy
 - One medical practitioner must certify
 - 3 days must elapse between woman's request and TOP
- Abortion to be available on grounds of risk to life or of serious harm to health after that
 - Two medical practitioners must certify
 - Early delivery required if viability has been reached
 - In emergencies, only one medical practitioner must certify
- Abortion to be available for 'condition likely to lead to death of foetus', either before or within 28 days of birth
 - Two medical practitioners must certify
 - No gestational limit
- Refusal of care will be permitted, but there will be a duty to refer

Seismic Shift in Attitudes

- Move from difficult cases (rape, incest, FFA) only to an understanding of unmet abortion need.
- This has been largely created by organisations like the IFPA, doctors for choice and The Institute of Obstetrics and Gynaecology and particularly by some of the strong voices within those organisations, presenting evidence.
 - Explaining the difficulties of managing and assessing risk in pregnancy under the 8th
 - Explaining that abortion in cases of rape is best managed by easy early access.
 - Explaining and broadening the understanding of un-intended pregnancy, why it happens, what we should do to reduce it, why we need to care for women and families when it occurs.

Challenges and Opportunities

- No legislative change yet
- Final legislation will have a profound impact on what services we can provide.
- No specific information about funding.
- Resourcing issues have not been resolved:
 - Scanning availability
 - After hours emergency cover
 - Referral pathways for cases that are beyond a primary care remit
 - Training provision for medical staff
 - Provider capacity

Opportunity

- Fresh start rather than an evolving system with historic legislative and/or bureaucratic barriers
- Chance to build a woman-centred service, reflecting the ethos of the repeal movement, respecting and trusting women's choices, reducing stigma and providing equal access regardless of a woman's medical, financial or social situation.
- To reflect on and improve our sexuality education and contraception provision services in order not only to reduce un-intended pregnancy but also to improve the sexual health of our population.

Responsibility

- Use all available assistance to develop a quality assured woman-centred service
 - International expertise
 - Provider networks
- Accept that we may not get it right first time
- Robust monitoring, audit and implement change appropriately
- Deliver what the country voted for

Dublin Castle May 26th, 2018

