Northern Ireland’s Abortion Laws Have Negative Consequences for Women’s Health and Wellbeing

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INTRODUCTION

Northern Irish abortion law is currently in the international spotlight, now that the Republic of Ireland recently repealed its constitutional amendment prohibiting abortion, and the Isle of Man passed a bill to legalize abortion. The United Kingdom’s 1967 Abortion Act made legal abortion widely available in England, Scotland, and Wales. However, the Abortion Act was not adopted in Northern Ireland, where abortion is permitted only to preserve a pregnant woman’s life or to prevent permanent damage to physical or mental health. In addition, providing or having an abortion outside the law is a criminal offense in the UK and carries a maximum penalty of life imprisonment. However, healthcare professionals in Northern Ireland are not required to report women they suspect have self-managed an abortion.

Despite these laws, women who live in Northern Ireland have abortions. Unless they qualify for one of the few legal exceptions, women obtain a clinic-based abortion by traveling to a country where abortion is legal, most commonly England, or they use telemedicine to access medication abortion in the form of mifepristone and misoprostol, tablets which are mailed to women’s homes. This second pathway allows women to self-manage a safe and effective medication abortion at home with instructions and support provided by a telemedicine service. One such service, Women on Web, is a non-profit organization that since 2006 has provided medication abortion in settings worldwide where abortion is not available through the formal healthcare system.

This research brief describes the abortion experiences of women living in Northern Ireland. Focusing on women’s decision-making around how to obtain an abortion and their experiences accessing care, 30 women were interviewed in-depth. Interviews were conducted before and after a policy change by the UK government in July 2017 that allowed women from Northern Ireland to access to free abortion services in Great Britain.

KEY FINDINGS (see figure)

> Despite free abortion care available to women traveling from Northern Ireland to clinics in Great Britain, Northern Irish women still experience multiple barriers to travel.
> The number of women who received abortion medications from Women on Web in the year after the policy change decreased by only 3% compared to the year before the policy change.
> Many women find self-managed medication abortion using online telemedicine more acceptable than traveling overseas, but the experience is dominated by fear and isolation due to the risk of prosecution.
> The documented obstruction of abortion medications by Northern Ireland Customs officials engenders fear and anxiety in women who are waiting for their shipment. Many fear that their package will be delayed or will never arrive. Some women try less effective methods (such as high doses of vitamin C or parsley pessaries) or unsafe methods (such as drinking large amounts of alcohol or engaging in physical harm) while waiting for their abortion medication.
> Many women who have self-managed an abortion believe that healthcare professionals in Northern Ireland are required to report them to authorities. As a result of fears of being reported and potentially prosecuted, women feel forced to lie about having had a self-managed abortion or avoid seeing a healthcare professional altogether.
Northern Ireland’s Abortion Laws Negatively Impact Women

Women experience barriers to clinic travel despite free abortion care

Even though the procedure is covered now for Northern Irish women in England, there’s other factors as well. It would have been a whole host of lies: ‘Why are you getting up so early? Where are you going? Why will you not be back until late? Where have you been?’ I speak to people in my family two or three times a day, and to have no contact with them would have made them suspicious.

Sonya, 40, mother of two

Self-managed abortion is preferred but fear of criminalization exacts a price

There would be such a traumatic side to having to travel instead of being in the comfort of your own home. But I was absolutely frightened. … I just thought, my god, is this really what it could actually come to? Where you can get an hour’s flight and not get into any trouble. But you get it sent to your home and you could be arrested.

Pearl, 36, mother of five

Northern Irish Customs officials obstruct and delay care

My first packet got seized and I went into a state of panic … I rung up customs and asked them did they know where my package was because it was taking weeks. The person on the phone asked me if I knew that [misoprostol] was a Class A drug. He actually said to me it’s in the same Class as heroin. [Note: Misoprostol is not classed as a Drug of Misuse and is on the WHO List of Essential Medicines.]

Ruth, 18, about to start university

Women reluctant to seek care from Northern Irish healthcare providers

I knew that I wanted to have an abortion, but I didn’t know how to go about it… But you can’t go to your doctor because if you say that you’re going to order pills, they have to report it and you can’t go and see them afterwards either if you need help.

Samantha, 20, self-managed her abortion

This figure shows four key ways that Northern Ireland’s abortion laws affect women’s decision-making and experiences.

Women experience barriers to clinic travel despite free abortion care — barriers include more cost, limited experience with travel, confidentiality concerns, child care issues, and stigma surrounding abortion.

Self-managed abortion is preferred because of perceived advantages of comfort, privacy, and autonomy but fear of criminalization exacts a price and prevents women from seeking support from friends and family.

Northern Irish Customs officials obstruct and delay care — women experience fear and anxiety while waiting for abortion pills to clear Customs; some try less effective or dangerous methods while waiting for packages to arrive.

Women are reluctant to seek care from local healthcare providers — women are unclear what information and support healthcare providers can legally provider; many avoid contact because of fear of prosecution.

*Names are pseudonyms.
POLICY IMPLICATIONS

Northern Ireland’s current restrictive abortion laws are not preventing all Northern Irish women from having abortions. Women living in Northern Ireland are accessing abortion either by traveling overseas or by self-managing using abortion medications at home. Policies to make abortion care free at clinics in Great Britain are not sufficient to ensure access. Self-management at home using abortion medications provided through online telemedicine is a safe and effective option, often preferred over travel. But the criminalization of these abortions harms and stigmatizes women by creating a climate of shame, fear, and isolation. The obstruction of abortion medications by Customs officials also puts women’s health at risk. Finally, the current abortion laws harm the doctor-patient relationship and isolate women from seeking care and support through the Northern Irish healthcare system. Decriminalizing abortion would allow women to access safe and effective abortion care without fear of prosecution and would pave the way for affordable, accessible, and acceptable clinic-based services in Northern Ireland.

REFERENCE


SUGGESTED CITATION


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