Summary

- This briefing focuses on the experiences of women affected by the law in Northern Ireland.
- The actions of anti-abortion activists have a significant impact on the wellbeing of women seeking abortion in Northern Ireland and those who try to support them. The current legal position creates a stigmatising environment exacerbating their impact on women.
- In Northern Ireland, the sustained campaign of anti-abortion activities has included targeting organisations that provide non-directive pregnancy counselling, as well as the Marie Stopes abortion clinic whilst it was open. Women and pregnant people who travel may also have to encounter anti-abortion activities outside clinics on the mainland.
- Research by Aston University has shown that anti-abortion activities lead to significant distress. This is due to both being watched and approached by strangers and a loss of healthcare privacy. This experience feels like a ‘paparazzi’ like encounter, which makes their private decision into a public spectacle.
- Claims that anti-abortion groups are offering support are based on specific religious beliefs about women as natural mothers, which lead to a distrust of abortion service providers and assumptions about unprofessional practice ‘pressurising’ women to have abortions.
- The lack of ‘bufferzones’ around abortion clinics and pregnancy advisory services has a significant detrimental impact on the experiences of Northern Ireland women both before and whilst traveling for abortion.

Background

1. The historical political context of Northern Ireland (NI) has given a disproportionate influence to an anti-abortion position. It is common in conflict situations for a strong pro-natal position to be adopted, in order to encourage women to bear children for the ‘right’ side of the conflict. In NI, this meant that one of the few areas of agreement across the political divide was to restrict or eliminate abortion. Moreover, politicians have often stated or believed that increasing access to abortion would be a ‘threat’ to security, despite the fact that there is little evidence that this would be the case, and strong evidence of public support for the liberalisation of abortion law has been ignored.

2. In this political context, anti-abortion activism in NI has been able to create a difficult environment for those seeking abortion and staff and volunteers who seek to provide non-directive counselling or abortion services. Unlike on the mainland, sexual health organisations in NI have been the target of anti-abortion activities. The Marie Stopes abortion clinic in Belfast was also a significant site of activities during the period it was open. It is important to remember that the harassment and intimidation of organisations giving non-directive abortion counselling has been present for decades. In the 1990s, anti-abortion activists demonstrated outside abortion counsellors’ homes and sent unpleasant letters to their
neighbours. The Ulster Pregnancy Advisory Service closed after arson at its office. Anti-abortion groups denied involvement, but celebrated its closure. The current issues need to be considered in this historical and political context.

3. We suggest it is important to understand anti-abortion activism outside abortion clinics as a form of gendered harassment which arises from the specific religious beliefs of the majority of anti-abortion activists. Their attitudes to abortion and motivation for clinic activism usually stems from their faith position which has a specific understanding about women as ‘natural’ mothers and pregnancy as a gift from God. They believe that no woman would naturally choose abortion, so it is understood as always the outcome of pressure or coercion, from partners, family or wider society. This understanding leads to a presumption that abortion is always harmful to women as well as ending the life of a foetus.

4. Whilst anti-abortion activists believe or claim that their actions are supportive of women, their presence outside of clinics creates an intimidating, hostile, and humiliating environment. The purpose of anti-abortion activism around abortion clinics is for strangers to watch and approach women, as well as drawing public attention to the site of abortion service providers. The distress and anxiety that women feel is linked to broader fears about, and experiences of, gendered harassment when using public space.

5. Our understanding of anti-abortion activism outside clinics arises from ethnographic research at over 20 different sites across the UK, including Belfast, where anti-abortion activists organise activities outside abortion service providers. Many of the sites were visited more than once and we included sites where anti-abortion activists are present daily to those with less frequent activities; we also included sites linked to all the main organisations who arrange activities outside clinics. At each site, we observed and recorded the activities, and, where the anti-abortion activists consented, conducted informal and formal interviews. We also interviewed people who acted as abortion clinic escorts for Marie Stopes Belfast. In addition, the researchers undertook an analysis of comments submitted to bpas by individuals accessing their services, and made about the anti-abortion activities, between August 2011 and April 2015.

Anti-abortion targeting of Family Planning Association and Marie Stopes Belfast

6. Although abortion remains stigmatised across the UK, current abortion law in NI adds to the perception that abortion is a deviant activity. This creates a challenging environment for organisations that support women considering abortion.

7. The Family Planning Association (FPA) offers non-directive abortion counselling, alongside other sexual health services. An anti-abortion activist convicted of assault of an FPA staff member continued to stand outside the FPA office. Other activities including anti-abortion groups chalking messages outside the FPA offices, such as ‘FPA, how many kids have you killed today’ and accosting staff whilst they were shopping in Belfast city centre.

8. During the period of the operation of the Marie Stopes abortion clinic in Belfast, the intimidation felt by clients led to the introduction of volunteer escorts to assist women getting in and out of the building. The escorts were trained in conflict de-escalation
techniques and personal safety. They would operate in pairs, with one acting as a barrier between the anti-abortion activist and the client, and the other helping the client get away. Despite their presence, they reported that the harassment of clients continued. Anti-abortion activists would shout things like ‘We want to help you, please don’t kill your baby; we have named your baby Mary; what you are doing is illegal; we are going to upload you to social media’.

9. The current law means that abortions in NI can only be carried out if there is a serious risk to a woman’s health. Thus women able to qualify for access abortion at the Marie Stopes clinic would have been extremely vulnerable. The escorts reported extreme levels of distress and more than one incident of women running into oncoming traffic to try to get away from the anti-abortion activists.

10. The escorts reported how the anti-abortion activists would be aggressive, volatile and would block the paths of those seeking to exit the clinic. Some of the escorts sustained injuries whilst trying to prevent the anti-abortion activists from following women, as they exited the clinic. Many reports of the more serious incidents were given to the police, yet even where there was video footage of the encounter, little action was taken.

11. The encounters outside the FPA and, whilst it was in operation, Marie Stopes Belfast, are extreme examples of the gendered harassment outside of abortion clinics which occurs throughout the UK. However, the highly stigmatised environment supported by many NI politicians and current NI abortion law, coupled with lower population density which increases the chances of public recognition, is likely to exacerbate the intimidation and fear experienced by women.

Impact of anti-abortion activists whilst travelling for abortions

12. Anti-abortion vigils outside abortion clinics are a source of significant distress to many women. Many of the abortion clinics targeted by anti-abortion groups in England will be larger versions that women travelling from NI will be attending. There are three main activities that take place outside abortion clinics: ‘public witnessing’, ‘pavement counselling’ and ‘graphic displays’.

13. Public witnessing is an act that arises from a faith position. Its purpose is to draw attention to the ‘evil’ and/or ‘sinfulness’ of abortion through the presence of activists outside the clinic and the prayers and religious rituals that they perform there. As it has been described to us by one anti-abortion group:

‘Know where you are – Calvary is happening again at each abortion centre. When Jesus was being crucified Mary didn’t stay at home (...) but publically witnessed (...) We follow her example’ (Pavement counselling’ guide, Birmingham)
Through public witnessing, anti-abortion activists seek to publicly oppose abortion as well as asking for God to intercede to prevent abortions from taking place. Religious iconography is often displayed, and hymns may be sung, sometimes loud enough to be heard inside a clinic.

14. Women experience the groups that gather outside abortion clinics as intimidating both in themselves as well as being upset by the way their presence invites passers-by to observe that women are seeking an abortion. Whilst it is the case that anyone could see people entering and exiting a building, anti-abortion activists who stand outside clinics are expressly there to draw attention to the building as part of their mission to bear witness making it into a public spectacle.

15. ‘Pavement Counselling’ is the way that anti-abortion activists describe their actions when they make a direct approach to women. They will usually try to speak to people entering the clinic. Some try to start the conversation in quite a neutral way, and they may not make their intentions known until further into the conversation. Others are more forceful, and can, for example, address women as ‘mum’ and/or tell them that the abortion clinic will lie to them about the risks of the procedure. They also often try to give people leaflets. The pavement counsellors will also occasionally follow women, usually for a short distance as they are entering or leaving an abortion clinic:

‘She was actually standing in front the clinic when I left and followed me all the way and talking about my personal issue in front of many people on the street’. (Client comment, Stratford, 2015).

Pavement counsellors are often seen as potentially dangerous strangers by women. Their approaches are experienced as unwanted and unwarranted encounters:

‘When I walked up to the clinic and saw people protesting the entrance I was scared that I would be harassed or injured by an over-zealous extremist’. (Client comment, Richmond, 2014)

16. There are significant variations over the scale of the activities, ranging from some clinics in London which have anti-abortion activists outside nearly every day, and others that might only have them for a few hours a week or at specific times in the year (such as the 40 Days for Life campaign during Lent). Likewise the numbers outside clinics vary, most will have 2-4 anti-abortion activists, but the numbers can swell to 50-60 people on occasions.

17. Many women experience the presence of anti-abortion activists as a form of gendered harassment. Women are all too often the subject of unwanted attention in public spaces and are often wary of strangers. In this context, encountering anti-abortion activists outside of clinics (whether male or female) is seen as threatening as they cannot predict what the anti-abortion activists will say or do to try to stop them entering the clinic. This uncertainty is a source of anxiety. Given the additional political positioning of abortion in NI, this is likely to create additional stress for women travelling for abortion.

18. Women also experience anti-abortion activism as an invasion of healthcare privacy. Their actions are seen as drawing public attention to clinics and making a public spectacle of women’s decisions. Entering a clinic becomes a ‘paparazzi’ encounter, regardless of what
type of action is taking place. Their presence and actions draws public attention to women seeking abortion, and thus the actions of anti-abortion activists outside clinics can be felt as a public shaming exercise.

19. The encounters outside clinics reassert gendered power relationships by subjecting women to unwelcome attention in a way that they have no control over. They have little choice but to walk through or past the anti-abortion activists who are watching them or trying to talk to them. Whilst they may take steps to try to avoid or minimise the encounters (such as by covering their faces), there is still a situation of surveillance, loss of privacy, and fear.

20. Whilst anti-abortion groups often state that they are offering support for women, this is based on a presumption that abortion is always harmful to women. This belief stems from their faith position which has a specific understanding about women as ‘natural’ mothers and pregnancy as a gift from God. As they believe no woman would naturally choose abortion, they assume considering abortion is always the outcome of pressure or coercion, from partners, family or wider society. This also results in extreme distrust of abortion service providers who they believe are motivated primarily by profit, and mislead women rather than seeking informed consent. Their leaflets often make false claims about the harms of abortion. Seeing abortion as inevitably harmful is in line with their beliefs, and they distrust any evidence which suggests otherwise.

**Overall impact on NI women seeking abortion**

21. The politically hostile environment towards abortion fostered by the current legal situation in NI exacerbates the negative impact of anti-abortion activities on women and pregnant people. The lack of ‘bufferzones’ around abortion clinics and pregnancy advisory services has a significant detrimental impact on the experiences of Northern Ireland women both before and whilst traveling for abortion.

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