I am a medical student at Queen’s University Belfast
I am also a pro-choice activist in Belfast
This evidence comprises my experience of being an activist in the medical school and my own personal experience of the abortion laws in Northern Ireland

My name is Jill McManus. I am in my fourth year of my studies at Queen’s University Belfast. My main degree is medicine, but I am currently taking a year break between third and fourth year to complete a Master’s degree in Public Health.

I am an activist, based in Belfast. I am active with Alliance for Choice, I am the president of the Medical Students for Choice chapter at QUB and I write articles for the British Society of Abortion Care Providers. I am also the Northern Ireland representative for Doctors for Choice UK, and the Secretary of the Queen’s University Belfast Pro-Choice Society.

I first learned about our abortion laws as a teenage girl living in Northern Ireland. My mother had her first pregnancy when she was 17, and coming from a working-class background, I understood that if I got pregnant at a young age, my parents could not afford for me to travel to England for a termination, and I would have to give up any aspirations of studying at university, effectively ending my chances at education. This knowledge made me terrified and put me at odds with my own body. This fear still rules a lot of my life - I am extremely scared of experiencing an unplanned pregnancy, because if that were to happen to me, my academic life and future would be over. Living with this stress in the back of my mind has impacted on how I see my body and deal with sex and relationships.

This is my third year being President of the student society Medical Students for Choice QUB, a group specifically formed at Queen’s to promote education on contraception and abortion. Abortion is not part of the core curriculum in a medical context at any point during the five-year course at QUB. It has been included from an ethical perspective during the fourth year General Practice placement, however the medical part of termination of pregnancy (TOP) is not taught. This omission continues despite the number of women and pregnant people travelling from Northern Ireland every year, and despite the fact that abortion methods are all methods to evacuate the uterus and are therefore necessary for medical students to know from a patient safety standpoint.

I have had a lot of mixed experiences being an openly pro-choice medical student at QUB. Our group has been called killers in training and called ‘vile and disgusting’ by the QUB Pro-Life Society. After the referendum on the 8th Amendment, I saw medical students sharing articles lamenting the win of the Yes campaign as a win for ‘consumerism’. I frequently see people talk about the abortion ‘industry’, the implication being that I am only interested in this career for personal or financial gain and not a genuine desire to help women. There is little to no academic support for those keen on a career in sexual and reproductive health from the QUB medical school. We have had academic staff cancel on speaking at our events, because they have concerns for their careers. All of this sends a message to pro-choice medical students: you cannot be openly pro-choice and have a successful medical career in Northern Ireland.
Medical students are encouraged to advocate for their patients, except the women, girls and pregnant people travelling every day to access termination of pregnancy care in Britain. Things have opened up since the success of the Together for Yes campaign in the Republic of Ireland. With more doctors openly advocating for a change in the law, many medical students have become less reluctant to discuss abortion. However, there is still stigma around talking about abortion, and even using the word ‘abortion’ openly at a Freshers event. I have noticed even within my own committee (Medical Students for Choice) there is a hesitance to use the word abortion at student-facing events, despite the fact that it is a core part of the society.

The medical school at Queen’s also fails in their duty to make students aware of the legal context of abortion care in Northern Ireland. Many students I’ve spoken to aren’t aware of what the current guidelines are regarding TOP or the legal duties of medical staff when it comes to disclosure of the use of abortion pills. Students are not made aware that if they do not report their patients’ use of abortion pills to the police, they themselves may be liable to prosecution.

I do feel like the stigma surrounding abortion is being reduced somewhat at QUB medical school. This year MSFC has had a very positive response from first year students and I feel that this is because of the Repeal movement in the Republic of Ireland and the spotlight now being put on Northern Ireland to change our laws on abortion. The vast majority of medical students are pro-choice, despite there being a vocal minority of anti-abortion students. Even the medical school is conceding ground and providing education about abortion in an ethical context. Even though this is nowhere near enough, the fact that they have added this to the General Practice module this year is a positive step.

I believe that abortion is a medical issue. I think it’s private and should be kept between a woman or pregnant person and a healthcare professional. I don’t think people who experience unplanned pregnancies or healthcare staff should be at risk of prosecution. People will always experience unplanned pregnancy, and when they do, I believe they should be able to access termination services local to them, without travelling or stigma. People who access pills online shouldn’t be at risk of prosecution. I believe that criminalisation of the use of abortion pills is dangerous and that forcing medical staff to report patients to the police undermines public trust in healthcare professionals. I think the 1861 Offences Against the Person Act should not be used to govern an important part of sexual and reproductive healthcare. I think enshrining abortion in criminal law doesn’t allow for medical and technological advances or the changing landscape in which medical staff work. Patient-doctor relationships change, access to healthcare and medication change and societal norms change. I believe sections 58 and 59 of the 1861 Offences Against the Person Act should be repealed. I think that Westminster must uphold its duties to protect the human rights of the citizens of Northern Ireland, and therefore devolution is not a barrier to this or a reason to deflect the issue.

December 2018