

Repeal the 8th Press Conference

2nd July 2015

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The IFPA receives over 2,000 calls to our helpline each year; last year we provided counselling services to over 3,300 women, girls and couples, in relation to a pregnancy which is unplanned, unwanted or has become a crisis, for health or other reasons.

These women are from all walks of life and all stages of life. What they have in common is that unless their life is at risk, they must leave the state to access abortion abroad, as at least 3,735 women did last year.

They must do so because Article 40.3.3, or the Eighth Amendment, of the Constitution gives the right to life of the foetus precedence over the right to health of a pregnant woman.

While there is now legislation regulating access to abortion in cases of risk to life, its procedures are cumbersome and discriminatory. And the Guidance Document for its implementation makes no reference to women's right to health or to bodily integrity or autonomy in medical decision-making. It is, as the state confirmed to a UN Committee last month, entirely procedural guidance, there is still no clinical guidance on how doctors are to distinguish risk to life from risk to health.

The State has reported this week that 26 women accessed terminations of pregnancy under the Act. That's less than 1% of the minimum number of women from Ireland who had abortions last year.

Each woman who travels for abortion, regardless of her personal and financial circumstances, or of any health condition, must carry the entire financial, practical and emotional burdens of doing so.

These burdens fall most heavily on minors, women on low incomes, and women who cannot travel freely to another state; these women disproportionately experience delays in accessing abortion services, and these delays have significant impacts on women's health.

We welcome the recommendations by the expert working group on direct provision for attention to the support services for women asylum seekers experiencing a crisis pregnancy, including the need for financial assistance.

But fundamentally, the State's reliance on the rights to travel and to obtain information in relation to abortion services is inadequate to give effect to women's right to the highest standard of health and results in cruel, inhuman and degrading treatment. And in cases of conflict with the foetal right to life, doctors are prevented from making clinical decisions in the best interests of a woman's health.

Three weeks ago, the UN Committee on Economic, Social and Cultural Rights repeatedly asked about Article 40.3.3, the constitutional provision that allows foetal right to life to 'trump' a woman's right to health. Committee members asked why the Government does not call a referendum to repeal Article 40.3.3. They asked how the State can reconcile this constitutional provision with women's right to reproductive health. The State gave no explanation.

Because Article 40.3.3 can't be reconciled with women's right to health.

It must be repealed.

Ireland isn't the only country where abortion is a sensitive issue or where it is politically controversial. But it is the only country except for Malta and San Marino that has failed to provide access to abortion services. In its ruling on the A, B and C case in 2010, the European Court of Human Rights recommended that the state looked to the legislative, health policy and practice of other European countries. The State could also look to the World Health Organisation Safe Abortion Guidelines. And the state must place women's right to appropriate health care at the centre. And women's right to health will not be served by legislation only for abortion in exceptional circumstances or by enacting slightly less restrictive criminal laws on abortion.

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