Commissioned by















ABORTION AS A WORKPLACE ISSUE

A TRADE UNION SURVEY NORTH & SOUTH OF IRELAND

Authors

Fiona Bloomer Johanne Devlin Trew Claire Pierson Noirin MacNamara Danielle Mackle

Conducted by

Ulster University

Acknowledgements

The research team and steering group would like to express their heartfelt thanks and appreciation to all who took part in the study. In particular, we would like to express our gratitude to those who told us their personal stories. We know that for many of you this was the first time you had told anyone your story outside your immediate family and friends. Thank you for trusting us with your experiences. We would also like to thank those that funded the research: Unite the Union, Unison, Mandate Trade Union, the CWU Ireland and the GMB supported the project throughout by encouraging participation among union members.

The research team would also like to thank Caitlin McKernan, placement student from BSc Health and Social Care Policy degree (Ulster University), who assisted with data analysis.

Steering group members

Therese Caherty (Trade Union Campaign to Repeal the 8th¹)

Emma Campbell (Alliance for Choice²)

Laura Duggan (Trade Union Campaign to Repeal the 8th/Unite)

Mandy La Combre (Mandate Trade Union/Trade Union Campaign to Repeal the 8th)

Kellie O'Dowd (Alliance for Choice)

Carol Scheffer (CWU Ireland)

Anne Speed (UNISON)

Taryn Trainor (Unite)

Denise Walker (GMB)

Research Team

Dr Fiona Bloomer is a lecturer in social policy at Ulster University, specialising in abortion policy.

Dr Johanne Devlin Trew is a lecturer in social policy at Ulster University, specialising in migration, survey design and statistical analysis.

Dr Claire Pierson is a lecturer in Politics at the University of Liverpool, specialising in gender and comparative politics.

Dr Noirin McNamara is an independent researcher who specialises in gender and minority communities.

Danielle Mackle is a research associate at Ulster University, specialising in minority communities, equality and social policy.

Suggested Citation: Bloomer, F., Devlin-Trew, J., Pierson, C., MacNamara, N., Mackle, D., (2017) *Abortion as a Workplace Issue: Trade Union Survey - North And South Of Ireland.* Dublin: UNITE the Union, Unison, Mandate Trade Union, the CWU Ireland, the GMB, Alliance for Choice, Trade Union Campaign to Repeal the 8th.

¹ The Trade Union Campaign to Repeal the 8th is a group for organising trade union activists and members from all trade unions in the fight to repeal the constitutional ban on abortion (Article 40.3.3, known as the 8th Amendment) in the Republic of Ireland. The TUCR8A supports the Coalition to Repeal the 8th Amendment. The Coalition to Repeal the Eighth Amendment comprises 90-plus organisations campaigning together in the Republic for the deletion of Article 40.3.3 from the Irish Constitution.

² Alliance for Choice is an activist organisation that campaigns for abortion rights in Northern Ireland and supports the Coalition to Repeal the Eighth Amendment and its sister organisation, the Abortion Rights Campaign, in the rest of Ireland.

Preface

With more than 700,000 members in over 40 affiliated unions, the trade union movement is Ireland's largest civic society body. Over half our membership is women for whom highly repressive abortion laws in the Republic of Ireland and Northern Ireland are an impediment to full equality: without the right to make decisions about their own bodies, women are not truly equal.

We - Unite the Union, Unison, Mandate Trade Union, the CWU Ireland and the GMB - initiated and funded this unique cross-union, all-island survey to explore how such restricted access to abortion affects our working members.

The findings of our pioneering project give insight into how the need to travel abroad for medical treatment and the stigma that abortion carries are managed in the workplace. It considers how criminalisation impacts on access to abortion. The study gives us direct access to members' views on practical advice and assistance we can offer those workers faced with a crisis pregnancy. For instance, it highlights how issues of finance, access to sick pay and sick leave led to some returning to work too early. Further, the findings indicate that many had not thought of abortion as being a workplace issue until their participation in the research. Results also indicate that there was support for unions lobbying for legal reform and advocating policy changes.

In a broader sense, the survey provides information of use to the wider trade union movement's activities - and those of other civic society organisations across the island - on abortion and legislative reform.

During the online discussion element of this study, we noted with interest the role of experience in modifying views on abortion. Participants found that knowing of and listening to people's firsthand accounts caused them to reflect on their own positions.

This finding indicates the importance of listening to experience of abortion in any future debates, and concurs with outcomes of the recent Citizens' Assembly process in the Republic of Ireland (see Appendix 1). It also signals the potential value of more union-wide debate, internal and public, on the topic.

Abortion as a Workplace Issue is an essential and overdue piece of trade union research. In the words of one survey participant: "[it] is a perfect example of what unions can do to engage women ... drawing out the issues that impact on women directly."

Our movement has a long tradition of promoting and defending equality in the workplace, particularly gender equality. This study is a continuation of that tradition and goes some way to shedding a light on how we, as a movement, can work together to ensure full equality not just for women workers but for all women living on the island of Ireland.

Steering Group, 12 September 2017

Contents

Tables and Figures List	4
1.Introduction	5
1.1 Background to the Research	5
1.2 Research Aim	6
2. Methodology	7
2.1 Response Rates	7
2.2 Demographic Data of Survey Research Participants	8
2.3 Demographic Data of Online Discussion Forum Participants	10
2.4 Limitations of the Study	10
2.5 Report Format	
3. Findings Part 1 – Views on Abortion and Legal Reform	12
3.1 Overall Views of Abortion	12
3.2 Views on Abortion by Demographics	13
3.3 Attitudes to Legal Reform	16
3.4 Attitudes to Legal Reform by Demographics	18
3.5 Views on Abortion – Online Discussion Forum	22
3.6 General Themes	
4. Findings Part 2 – Abortion as a Workplace Issue	27
4.1 Introduction	27
4.2 Practical Work-Related Issues	27
4.3 Disclosure	
4.4 Advice and Support	
4.5 Role of Trade Unions	
4.6 Future Actions for Trade Unions	
5. Conclusions and Recommendations	
5.1 Overall Comments	
5.2 Overall Views on Abortion and Legal Reform	
5.3 Experience of Abortion as a Workplace Issue	
5.4 Recommendations	
5.5 Final Comment	
Appendix 1 Citizens' Assembly Recommendations	
Appendix 2 Survey Questions	39
Appendix 3 Online Discussion Forum Questions	42
Appendix 4 Selected List Of Previous Surveys And Polls	43

Tables and Figures List

List of Tables	Page
Table 1 Respondents' job type	10
Table 2 Views on abortion by place of residence	16
Table 3 Summary of survey responses on type of workplace experience encountered	34
List of Figures	
Figure 1 Age range of survey respondents	8
Figure 2 Northern Ireland respondents' religion	9
Figure 3 Republic of Ireland respondents' religion	9
Figure 4 Circumstances when abortion should be available	12
Figure 5 Views on abortion by age groups	13
Figure 6 Views on abortion by gender	14
Figure 7 Views on abortion by religion	15
Figure 8 Views on use of the abortion pill at home	17
Figure 9 Views on criminalisation of women who have abortions	17
Figure 10 Age range of those that agreed/strongly agreed with legal reform options	18
Figure 11 Gender of those that agreed/strongly agreed with legal reform options	19
Figure 12 Religion of those that agreed/strongly agreed with legal reform options	20
Figure 13 Views on use of the abortion pill at home by place of residence	21
Figure 14 Views on government removing criminalisation of abortion by place of residence	21

1. Introduction

This all-Ireland study of their members' views and experiences of abortion as a workplace issue was commissioned and funded by five trade unions: Unite the Union, Unison, Mandate Trade Union, the CWU Ireland and the GMB (see below). To our knowledge, it is the first such study in the English-speaking world that examines the impact of highly restricted access to abortion on people in the workplace.

Unite the Union – As the largest union in Britain and Ireland, Unite represents working people in all sectors throughout the island of Ireland. In addition to representing workers industrially, we campaign on wider issues affecting our members, their families and communities.

UNISON – UNISON is the UK's largest public sector union with more than 1.3 million members. UNISON Northern Ireland has over 40,000 members in health, education and the community and voluntary sectors. It also has membership in private providers to the health and education public sectors. UNISON with an 87% female membership is an organising and campaigning trade union challenging for social justice and demanding equality.

Mandate Trade Union – Mandate Trade Union is the retail, bar and administrative workers union, representing over 40,000 workers in Ireland. One of the key objectives of Mandate Trade Union is to promote and secure equality of opportunity for all working people in their sector and all people throughout the wider society. Mandate Trade Union is committed to advancing the equality agenda, wherever and whenever possible.

The CWU Ireland – the CWU is Ireland's premier union for the postal, telecommunications, and call centre sectors. With members in Eir, An Post, Vodafone, Meteor, UPS and many others, the CWU has a proven track record in representing members' interests. Today the union has over 14,000 members.

The GMB – GMB is a general union which means anyone can belong to it. It operates in the United Kingdom and Ireland and has more than 600,000 members. Founded over 127 years ago around the campaign for an eight-hour day, GMB continues to campaign for social justice and equality today.

1.1 Background to the Research

Within both legal jurisdictions on the island of Ireland abortion is highly restricted. These restrictions result in women travelling to access abortion elsewhere or purchasing the abortion pill online illegally.

Within Northern Ireland, the Offences Against the Person Act 1861 (OATP 1861) governs access to abortion. Under Section 58 a woman who has an abortion is criminalised and section 59 also criminalises anyone who assists a woman to abort. For both situations, the maximum sentence is "penal servitude for life". English case law from the 1930s (the Bourne judgment) also provides for circumstances when abortion may be provided in Northern Ireland, this is when a woman would become a "physical or mental wreck" as a result of the pregnancy. In Britain, the 1967 Abortion Act legalised abortion in certain circumstances with most abortions being undertaken by the National Health Service (NHS). However, this Act was not extended to Northern Ireland

and this, along with the lack of clarity from case law and healthcare guidance policy, has resulted in women in Northern Ireland having highly restricted access to abortion.

Historically in the Republic of Ireland, legislation was also framed within the Offences Against the Person Act 1861 (OATP 1861). Following five referendums in 1992 and 2002 (concerning information giving on abortion and the right to travel) and a number of high publicity cases, the Protection of Life During Pregnancy Act 2013 was introduced. It provides for abortion specifically where a woman's life is in danger, including the risk of suicide. Legal access to abortion is also affected by Article 40.3.3 (1983) in the Constitution, known as the Eighth Amendment; this equates the life of a pregnant woman with that of an embryo or foetus. Access to abortion has also been limited by the absence of guidelines for health professionals on implementing the law, with the first guidelines only introduced in 2014 following the Protection of Life During Pregnancy Act. Medical staff are prohibited from providing information on where to procure an abortion. International human rights organisations recognise that this has a chilling effect and prevents women/girls from receiving adequate medical care. In addition, anyone having or helping someone to have an abortion in the Republic faces a 14-year jail sentence.

Women and girls unable to access abortion in the Republic and Northern Ireland must travel elsewhere to obtain one or procure the abortion pill, which is illegal. The need to travel presents particular challenges for those on lower incomes and for asylum seekers/refugees in the Republic whose right to travel is restricted and who are without an income.

Since the research was commissioned in autumn 2016, developments in England, Scotland and Wales mean those travelling from Northern Ireland will in the near future no longer have to pay for abortion services. The exact details of how this will work in practice, whether it will include travel and accommodation costs for instance, have yet to be announced. This is a significant development that has been broadly welcomed, though for those unable to travel, barriers remain. In the Republic of Ireland, the Citizens' Assembly on abortion law reform has provided clear evidence of a willingness among the public for widening access to abortion (see Appendix 1 for Citizens' Assembly outcomes). A referendum on the matter is expected in 2018.

1.2 Research Aim

The purpose of this research is to provide an evidence base for Unite the Union, Unison, Mandate Trade Union, the CWU Ireland and the GMB on union members' views on abortion, how it affects them as workers and to explore members' views on legislative reform in the Republic of Ireland and Northern Ireland.

This evidence base will be utilised to inform the trade union movement's activities in the Republic of Ireland and Northern Ireland on abortion and legislative reform. Its aim in particular has been to identify specific workplace issues surrounding access to abortion which might affect women and/or their partners/families.

The research was funded by each union. The study was approved by the Faculty of Social Sciences Ethics Committee, Ulster University, Northern Ireland.

2. Methodology

The study comprised two approaches to data collection: a survey and an online discussion forum. It was specifically targeted at members of the following trade unions: Unite the Union, Unison, Mandate Trade Union, the CWU Ireland and the GMB.

The content of the survey, designed by the research team with advice from the steering group, sought to capture members' views on abortion, legal reform and experiences of abortion as a workplace issue. The survey was anonymous, capturing only general demographic questions such as age, gender and religion (see Appendix 2 for copy of survey).

The survey was pilot tested with 20 people nominated by the steering group. The pilot test resulted in small changes to improve the readability of questions. Each union then issued the survey via Survey Monkey (an online survey programme) to all members with a valid email address. The survey was open for four weeks. On average, two reminders were sent out to increase response rates. Survey respondents completed an online consent form that informed them about the study, its purpose and how the data would be utilised. Before the survey was issued, union members received information about the study with an option not to participate.

Those who completed the survey were invited to take part in an online discussion forum (hosted by software platform Discourse). Over a three-week period, participants in the discussion forum were asked to respond to a series of open-ended questions (see Appendix 3 for copy of key questions). Participants were encouraged to interact with each other in the discussion on each question. The research team moderated discussions, and any posts deemed to have used inappropriate terms were removed. Follow-up questions were asked to draw out issues as appropriate.

2.1 Response Rates

In total 3,180 trade union members completed the survey. The response rate was 10% across the unions. The response rate is broadly comparable to other online surveys of this type, dealing with sensitive issues and not offering incentives for completion. In relation to attitudes to abortion and views on legal reform, the findings are similar to public polls, other surveys conducted over the past decade including those conducted by Amnesty International, RTÉ / BBCNI, and Northern Ireland Life and Times Survey (see Appendix 4 for list of surveys).

Forty-eight participants took part in the online discussion forum. This number is regarded as typical for a qualitative study as a more in-depth approach to responding to key questions is required in order to provide insight into the themes of the study. In qualitative research, the emphasis in reporting the findings is not to count how many participants stated a point or agreed with a point; rather it is to help us understand people's views on the topic.

Limitations to the research included a number of invalid email addresses, while members with no email addresses were not included. Both these issues were minimised by general communication from the unions encouraging members who had not received an invite to contact a named person for follow up information.

2.2 Demographic Data of Survey Research Participants

Age - The age of survey respondents varied from 18 to 65-plus, with most in the range 25-44 years (Figure 1).

100
90
80
70
60
50
41
40
30
20
10
7
0
18-24 (n=200) 25-44 (n=1524) 45-64 (n=1241) 65+ (n=56)

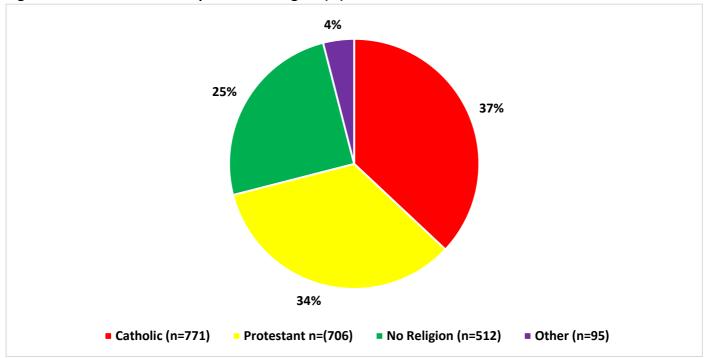
Figure 1 Age range of survey respondents (%)

Source: Bloomer et al (2017) Abortion as a Workplace Issue.

Gender - The majority of respondents were female (64%), 36% were male and less than 1% were transgender.

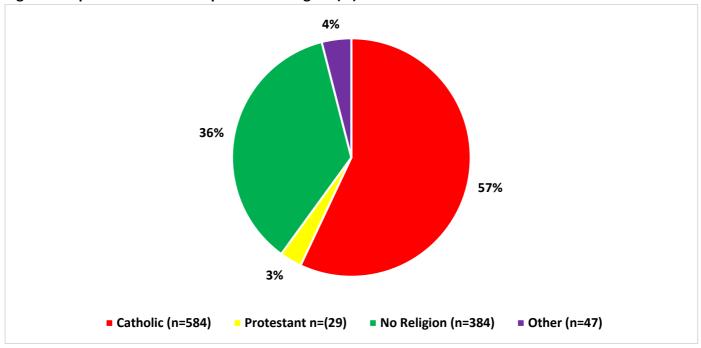
Religion - In terms of religious affiliation, 43% were Catholic, 23% were Protestant and 28% stated they had no religion. Remaining participants comprised those from a range of faiths including: Hindu, Jewish, Islam/Muslim, Buddhist and those who self-identified as "born again Christian". Figures 2 and 3 illustrate the profile of respondents by country of residence in terms of religion.

Figure 2 Northern Ireland respondents' religion (%)



Source: Bloomer et al (2017) Abortion as a Workplace Issue.

Figure 3 Republic of Ireland respondents' religion (%)



Source: Bloomer et al (2017) Abortion as a Workplace Issue.

Place of residence - two-thirds of respondents lived in Northern Ireland, with the remaining third in the Republic of Ireland.

Employment status - 66% of respondents were employed full time in permanent posts; 20% were employed part-time in permanent posts. The remainder comprised those who were on casual or temporary contracts, retired and unemployed.

Job type - respondents were employed in a range of different job types, including manual posts, administration, supervisory and professional (Table 1).

Table 1 Respondents' job type (%)

Table 1 Respondents job type (70)						
Job type	Republic of Ireland (n=1060)	Northern Ireland (n=2020)				
Manual/factory	9	10				
Low/mid administration	9	15				
Caring/customer services	35	30				
Manager/supervisor	23	15				
Professional	23	39				
Not stated	2	2				

Source: Bloomer et al (2017) Abortion as a Workplace Issue.

The research team used SPSS, a statistical data analysis software package, to analyse the survey data. The data was analysed in terms of respondent characteristics such as age, gender and religion. Where there are differences, these are reported in the following sections. All data is presented in percentage terms unless otherwise stated.

2.3 Demographic Data of Online Discussion Forum Participants

In total 48 participants took part in the online discussion forum:

- 34 were female; seven were male; seven did not state their gender.
- 27 participants were from Northern Ireland, 14 from the Republic of Ireland, seven did not provide a country of residence.

The text from the discussion forum was analysed by the research team to identify common themes. Specific extracts from the discussion forum are provided in this report in order to offer insight into the views held by those who took part in the study.

2.4 Limitations of the Study

Study participants were self-selecting and as a result the findings may not be representative. Findings are, however, similar to other recent similar surveys (see chapter 5: Conclusion and Recommendations; appendix 3). Because more union members from Northern Ireland responded to the study than those in the Republic of Ireland this may have an impact on overall results. Thus, where relevant, the analysis of data has been provided by place of residence. Finally, the small number of transgender respondents, three in total, precludes any detailed statistical analysis of their responses.

2.5 Report Format

In the pages that follow, the findings are divided into two sections:

- 1. Overall views on abortion and attitudes to legal reform;
- 2. Experience of abortion as a workplace issue.

In each section, we first present the overall data from the survey and then proceed with participants' views from the online forum and responses to open-ended questions from the survey.

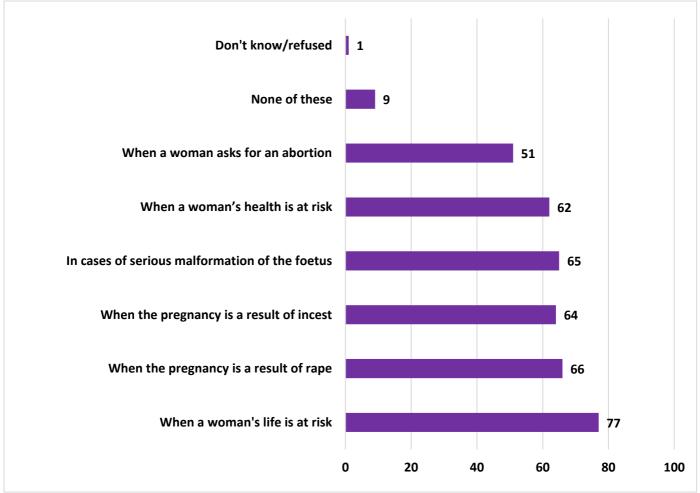
3. Findings Part 1 – Views on Abortion and Legal Reform

3.1 Overall Views of Abortion

Survey respondents were asked to consider a list of circumstances under which they thought abortion should be made available (Figure 4). There was broad support across a range of options. "A woman's life being at risk" was the most common option (77%). Just over half (51%) stated abortion should be provided "when a woman asks".

A small minority of respondents replied "none of these" (9%).

Figure 4 Circumstances when abortion should be available (%) (Multiple answers allowed)



3.2 Views on Abortion by Demographics

No major differences were noted in terms of the age of respondents for many of the options listed such as abortion on the grounds of serious malformation of the foetus³, incest or when a woman's health is at risk. However, some variation was noted between age groups in the options contained in Figure 5 below. For instance, in relation to the option of access in circumstances "when a woman asks for an abortion" the younger age groups were more supportive of this view than older age groups; on the matter of rape there was a broader cohesion in all groups though this did not follow a clear age pattern.

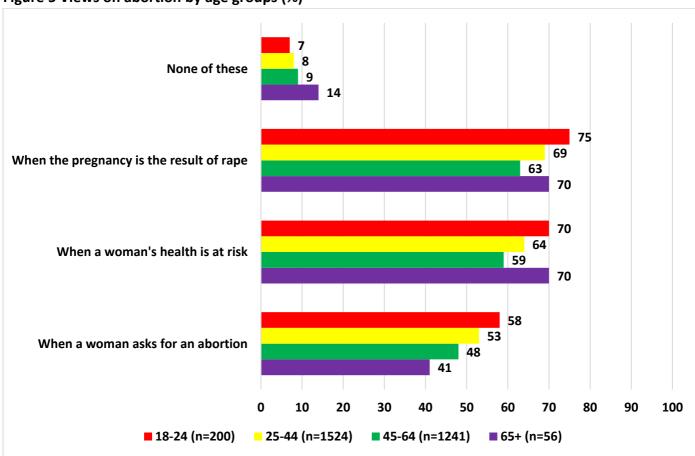


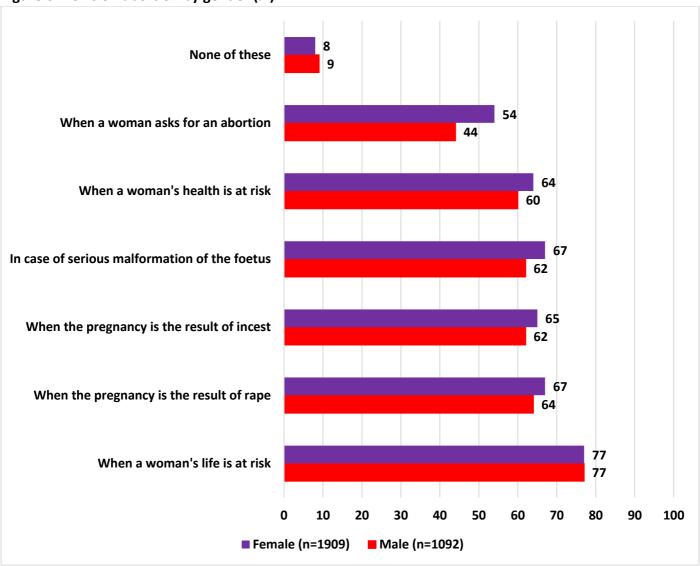
Figure 5 Views on abortion by age groups (%)4

³ The term "serious malformation of the foetus" has been used throughout the study as it is the one commonly used by the medical community (alongside terms such as foetal anomaly, serious abnormality, foetal abnormality, fetal malformations, foetuses with chromosomal and/or structural abnormalities). Source: https://www.rcpi.ie/faculties/obstetricians-and-gynaecologists/; https://rcpi-live-cdn.s3.amazonaws.com/wp-content/uploads/2016/05/23.-Fetal-Growth-Restriction-Recognition-Diagnosis-and-Management.pdf; http://www.nhs.uk/conditions/pregnancy-and-baby/pages/termination-abortion-foetal-abnormality.aspx; https://www.rcog.org.uk/en/news/campaigns-and-opinions/human-fertilisation-and-embryology-bill/qa-abortions-for-fetal-abnormality/.

⁴ In figures/tables the number of respondents to particular questions in sub groups is referred to as "n=xxxx". Any non-replies are not detailed in the figures/tables.

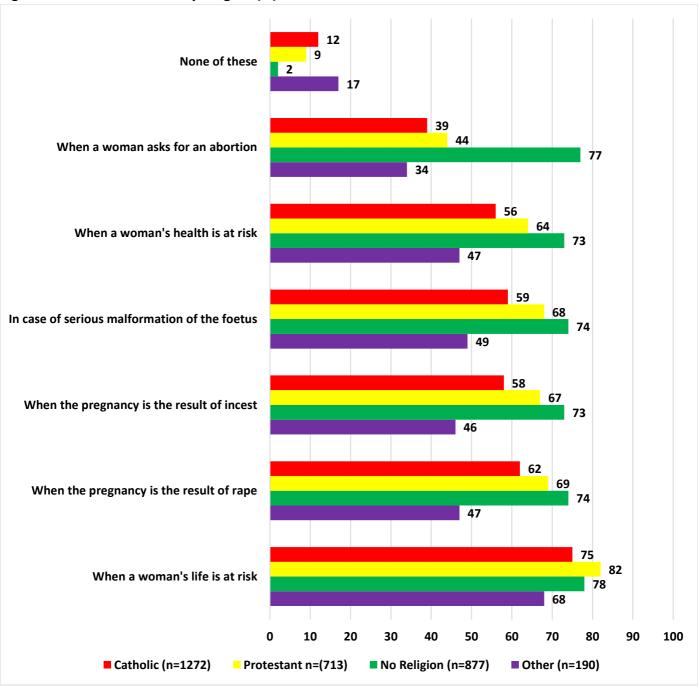
In terms of gender there is little variation in male and female attitudes, the only notable difference was on the option of "when a woman asks for an abortion" (Figure 6). There was no variation among those who were transgender with 100% supporting any reason for abortion (though it should be noted that the transgender category comprised only three respondents):

Figure 6 Views on abortion by gender (%)



In terms of religion, those with no religion tended to be more liberal in their views, followed by Protestants, then Catholics, then those of other religions (Figure 7):

Figure 7 Views on abortion by religion (%)



In terms of place of residence, those residing in the Republic tended to exhibit more liberal views than those in Northern Ireland. This was particularly notable in the option "when a woman asks for an abortion" (Table 2):

Table 2 Views on abortion by place of residence

Options	Republic of Ireland (n=1016)	Northern Ireland (n=2007)
When a woman's life is at risk	78	77
When the pregnancy is a result of rape	69	65
When the pregnancy is a result of incest	66	63
In cases of serious malformation of the foetus	68	63
When a woman's health is at risk	66	60
When a woman asks for an abortion	58	47
None of these	4	11
Don't know/refused	1	1

Source: Bloomer et al (2017) Abortion as a Workplace Issue.

3.3 Attitudes to Legal Reform

Survey respondents were provided with a series of statements on legal reform and asked to what extent they agreed or disagreed with each. Overwhelmingly respondents expressed views in favour of reform. These positions are in line with most European countries' legal positions on abortion⁵.

- 62% agreed/strongly agreed that expanding access to abortion should be a priority issue for the government.
- 72% agreed/strongly agreed that politicians should show leadership and deal proactively with the issue of widening access to abortion.
- 80% agreed/strongly agreed that women's health should be the priority in any reform of the abortion law.
- 76% agreed/strongly agreed that the criminal punishment for abortion should be removed.
- Only 17% agreed/strongly agreed that the law should remain as it is.

⁵ Sedgh, G., Bearak, J., Singh, S., Bankole, A., Popinchalk, A., Ganatra, B., Rossier, C., Gerdts, C., Tunçalp, Ö., Johnson, B.R. and Johnston, H.B., 2016. Abortion incidence between 1990 and 2014: global, regional, and subregional levels and trends. The Lancet, 388(10041), pp.258-267.

On the matter of women being able to use the abortion pill at home⁶ respondents' views were mixed (Figure 8). It is of note that 18% neither agreed nor disagreed with being able to use the abortion pill at home, and almost 50% agreed or strongly agreed with this.

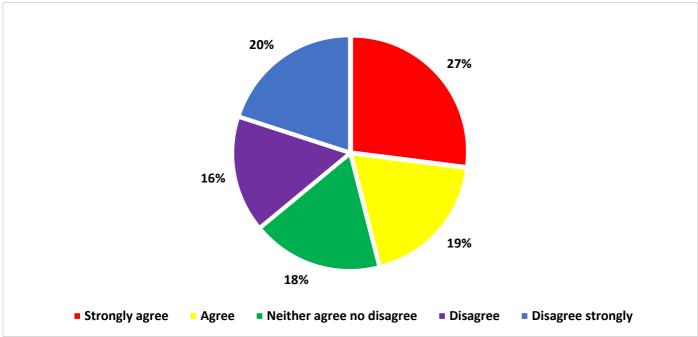


Figure 8 Views on use of the abortion pill at home (%)

Source: Bloomer et al (2017) Abortion as a Workplace Issue.

The majority of respondents (87%) also disagreed with women being arrested and prosecuted for having an abortion (Figure 9). This finding is consistent with outcomes in Figure 4, where only 9% opposed abortion in any circumstance.

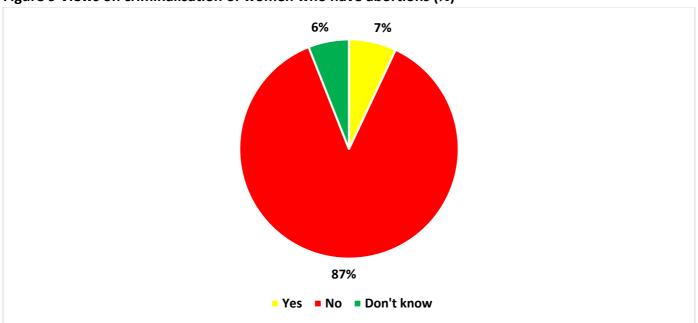


Figure 9 Views on criminalisation of women who have abortions (%)

⁶ This question was included as recent research suggests that use of the abortion pill is prevalent in Northern Ireland and the Republic of Ireland (Aiken *et al*, 2017).

3.4 Attitudes to Legal Reform by Demographics

In reference to age, the analysis indicates some differences, with younger age groups tending to be slightly more in favour of legal reform (Figure 10). For instance, in terms of the option "the law should remain as it is" on abortion, younger age groups were less supportive of this position.

The law should remain as it is Women's health should be a priority in any reform of the abortion law Politicians should show leadership and deal proactively with the issue of widening access to abortion Expanding access to abortion should be a priority issue for the government ■ 18-24 (n=200) 25-44 (n=1524) ■ 45-64 (n=1241)

Figure 10 Age range of those that agreed/strongly agreed with legal reform options (%)

In relation to gender, there were few differences between female and male respondents (Figure 11):

0 The law should remain as it is 20 33 Women should be able to use the abortion pill at home 45 100 The government should remove the criminal 79 punishment for abortion 73 33 Women's health should be a priority in any reform of the abortion law 100 Politicians should show leadership and deal proactively 75 with the issue of widening access to abortion 69 100 Expanding access to abortion should be a priority issue 64 for the government 0 10 100 20 30 40 50 60 70 80 90 Transgender (n=3) ■ Female (n=1909) ■ Male (n=1092)

Figure 11 Gender of those that agreed/strongly agreed with legal reform options (%)

Source: Bloomer et al (2017) Abortion as a Workplace Issue.

In terms of religion, those with no religion expressed views more favourable towards legal reform, but few differences were observed between Protestants and Catholics (Figure 12). For instance on the matter of the abortion pill, 38% of Catholics and 40% Protestants agreed/strongly agreed that a woman should be able to use the abortion pill at home. There was notable agreement from both Catholics and Protestants that women's health should be a priority in reforming abortion law (76%, 75%); though support for abortion reform as a priority issue for government was less evident among both.

The law should remain as it is Women should be able to use the abortion pill at home The government should remove the criminal punishment for abortion Women's health should be a priority in any reform of the abortion law Politicians should show leadership and deal proactively with the issue of widening access to abortion Expanding access to abortion should be a priority issue for the government **■** Catholic (n=1272) Protestant n=(713) ■ No Religion (n=877) ■ Other (n=190)

Figure 12 Religion of those that agreed/strongly agreed with legal reform options (%)

Source: Bloomer et al (2017) Abortion as a Workplace Issue.

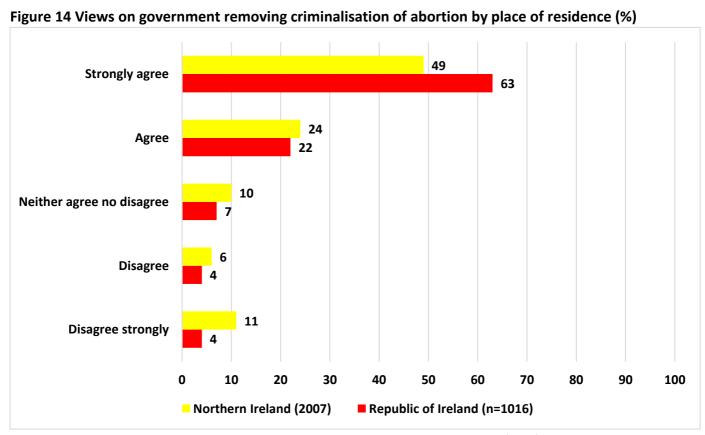
Place of residence – In terms of use of the abortion pill at home, some differences were noted between the jurisdictions, though notably in both uncertainty was evident (Figure 13). In terms of age there was little difference between the groups.

Results indicate that those living in the Republic of Ireland were more in favour of legal reform (Figure 14).

Strongly agree Agree Neither agree no disagree Disagree **Disagree strongly** Northern Ireland (n=2007) ■ Republic of Ireland (n=1016)

Figure 13 Views on use of the abortion pill at home by place of residence (%)

Source: Bloomer et al (2017) Abortion as a Workplace Issue.



3.5 Views on Abortion - Online Discussion Forum

In the online discussion forum trade union members responded to a series of open-ended questions on abortion. These included questions ranging from views about abortion to experiences of abortion as a workplace issue. As this was a discussion forum, participants were encouraged to discuss issues as a group and a number of general themes emerged from these discussions. We have included in this section excerpts from open-ended questions in the survey where relevant⁷.

3.5.1 Overall views on abortion

In terms of overall views of abortion, a range of perspectives was discussed, from those who were clearly pro-choice, to those who were undecided and those who were anti-choice, though overwhelmingly most were pro-choice:

Any woman who has an abortion should be whipped publicly. (45-64/male/NI)

I believe in the right for life, from conception to natural death. (45-64/male/NI)

The 8th should be left as is giving equal right to baby and mother is of paramount importance. (25-44/male/ROI)

Having lived in England for a long period of time and to move back to my home country of NI, the culture shock I feel at politicians (male and female) being allowed to use their religion and prejudice to maintain a law that allows them more control over my body than I am allowed, both horrifies and disgusts me that we are still such a backward country. (25-44/female/NI)

Human rights advocates and legal associations should be taken into account and they have commented many times on the inhumane treatments of women requiring abortion both in ROI and NI. It is an issue that has been postponed for too long and people deserve prompt responses. (25-44/female/ROI)

My personal stance is that of pro-life, however I refuse to accept that my personal views should be forced on a woman. I firmly believe that women should have the final decision on what their bodies go through. (25-44/male/ROI)

...NI is "supposed" to be a developed society, it has some way to go to claim this. Women don't even talk about miscarriage as that is seen in the same light as abortion. There is a great don't tell/don't talk attitude in NI which shows, how repressed a society we are. (25-44/female/NI)

...Women should not have to ask permission of the government, men or general public. A women's life is important, it's time for freedom from guilt for women.

(45-64/female/NI)

⁷ The participants' age range/gender/place of residence are provided at the end of excerpts. Note age groups were recorded differently in the survey.

This country doesn't trust women to know what is right for them and their choice of family planning. We don't have the freedom men do in walking away from this issue. If it was men that got pregnant there would be a clinic on every corner. (25-44/female/ROI)

As a woman, I am offended by the unequal treatment I receive in this country in relation to abortions. I also feel that public protests from the anti-abortion lobby are more readily considered by government than the views of the silent pro-choice population. Those who shout the loudest should not have the right to infringe the rights of others. Abortion will never be an easy decision for a woman and society should trust women to make the choice necessary for them (just as anti-abortion lobbyists have the right not to choose an abortion). (25-44/female/NI)

I am sick of living in a country where my bodily rights are breached. (45-64/female/ROI)

This Survey is important for Women's reproductive rights and the full implementation of the 67 Act will ensure that women are to be trusted with their bodies and not criminalised for seeking a right that should be their own. Current governments should not have a personal opinion on beliefs but to work for the greater wider public which currently is not the case. I say this as a man who sees strong women being criminalised for doing what they believe is right. (25-44/male/NI)

I work in maternity services and have encountered numerous women who had babies with congenital abnormalities. Due to laws in Northern Ireland these women could not terminate pregnancy. They have to carry to full term unless the baby died in utero first then they have to endure a Labour to deliver a deceased baby. This can cause more pressure on their mental health. The government needs to wake up and get with the times. (25-44/female/NI)

3.6 General Themes

The general themes identified in the research included discussion of a range of issues including how abortion is framed as an issue, myths about abortion, sex and relationship education, personal experience, class and equality concerns in Northern Ireland.

3.6.1 Framing the issue

There was disagreement among participants about how abortion is framed - as an issue of morality, with those advocating morality tending to be anti-choice, or as a health issue. Several participants also asserted that the morality perspective had been dominated by churches and how the role of religion in society was changing.

I am a Christian so my views would be totally based on biblical teaching. I believe other Roman Catholic countries would also have the same public opinion on abortion... places like Poland where I think they also defend the right to life of unborn baby. (50s/female/NI)

Our patriarchal society and some deeply religious right wing factions are inextricably linked. The influence of the Catholic Church is interwoven into every part of Irish life – healthcare, education. It causes the breach of women's human rights, as the UN has stated. There's increasing calls for the influence of the church to be removed from how the country is run, and for increased secularism,

since the story of the Tuam babies⁸ broke a few weeks ago. Yet still, there is inertia from our weak government. The state seems terrified of upsetting Catholic Ireland. They don't want to alienate any voters. They're terrified of the inevitable divisiveness that the debate on abortion will bring. (30s/female/ROI)

3.6.2 Myths

There were a lot of myths present in the debate - these tended to portray those who sought abortions as young women, abortion being used as a contraception, negative mental and physical effects of abortion, foetuses being aborted because of their gender. The myths also included a focus on abortions occurring because of minor disabilities and that any change would lead to "abortion on demand".

There is no reason for abortion that can be justified; it's killing an unborn child, that's murder. 99% of all rapes, the woman's body is in shock which makes it impossible to be impregnable. (20-40s/male/NI)

Too many articles specially portray the mother as a victim for imperfections in her unborn baby, harelips etc. Real mothers love their children despite their imperfections. The issue can only be guided by mothers not mobs. We get the hard cases that are sad, they are about 0.01% of all pregnancies. An abortion clinic needs 15,000 mothers to go through their doors each year to be commercially viable. (60s/male/ROI)

I think cases like this [serious malformation of the foetus] are extremely emotive and if challenged on their views lay people may feel pressurised to say they would have allowed abortion in this case so as not to appear unfeeling. I feel cases like this should not be used to change the law. I do not think this case should have politicised but was probably unavoidable as the woman concerned approached the media to raise her case publicly. Extreme cases like this are presented by politicians to influence public opinion and if the law was changed would effectively allow for abortion on demand. (30s/male/NI)

3.6.3 Sex and relationship education

Several participants commented on what they viewed as the poor quality/absence of sex and relationship education, and restricted access to contraception, and said both of these needed attention.

I agree with xxx [another participant] in that the best measures here is prevention. We shouldn't become a heartless society promoting abortion almost before contraception. I think education in schools and to adults should be on contraception, helping girls to have the confidence to say no, and also what to do if you have sex when you are young. I remember in schools it was always taught not to do it, it was never really assumed people our age were doing it when in reality half the class was at it!! There was never a normalisation of being able to talk about concerns over being pregnant or about having sex or needing contraception with anyone other than your school mates who also had no clue. I've also been happy recently to see a few campaigns on what is consent. (20s/female/NI)

⁸ The Tuam babies reference relates to the discovery of a significant quantity of human remains found buried under the site of a former institution for unmarried mothers run by the Sisters of the Bon Secours in Tuam, Co Galway.

There's always a fear if you go to the doctor when you are young for contraception your parents will find out or you'll be seen by someone who knows you in the shop buying condoms and the morning-after pill. There's a shame that comes with having sex at a young age or even for some adults having sex in an uncommitted relationship. (50s/female/NI)

3.6.4 Personal experience

The role of experience in modifying people's views on abortion was evident in the discussion. Participants said that knowing of and/or listening to people's firsthand experiences caused them to reflect on their own position. Participants also stated that the research project itself, the reasoned debate and discussion on the forum had facilitated this.

My general views on abortion changed since I had limited personal experience of the distress caused to someone I know. She was very young and was devastated to find out she was pregnant. She considered her options carefully, listened to all opinions and decided that an abortion was the best way forward for her, given her circumstances at that time. Prior to this I would have been very much in the "let the law stand as it is" camp, but the distress that she suffered in the next few weeks changed my opinion completely. She had to make various appointments with healthcare professionals, was harangued while leaving an office in Belfast, followed all the way back to her car by a placard waving individual who claimed to have her best interests at heart. That was before she had to travel to England to have the actual procedure. Then having to travel back home with not only the physical issues, but the emotional trauma to me is not acceptable. I now believe that the law in NI should come into line with the UK. (50s/male/NI)

(The following comment was directed to a participant who had disclosed they had an abortion) I am truly sorry for the loss you have had and the anger and PTSD that has come with your experiences. What you have just posted goes a long way to understanding the emotions you have now about your experiences. I accept that you will not appreciate my being on this forum as I have not experienced a termination of pregnancy personally. However, please understand that from my point of view, by relaxing the laws on abortion, we are actually giving women autonomy over their bodies. If perhaps you had full access to information in NI and did not feel rushed and pressured into going to the mainland for abortions, then you would have had better counselling and aftercare, whatever your choices on both occasions and would not have gone on to have the emotional pain and trauma that you experience and continue to experience. I think in the present situation, where women have less time to make a decision and seek advice, then hasty decisions can be made and regretted, which is why perhaps we need to consider changing the law to facilitate this. I do not believe it will open the floodgates to abortion as a form of contraception, but may result in more women being assisted to make informed decisions at a stressful time in their life. (40s/female/NI)

This has been a brilliant forum to have these discussions and learn from others. I am in awe and admiration of the strength of character of all the women who have made the decisions they have made and the emotions they have dealt with following those decisions. I have not had to make these decisions and nor will I because of me own fertility problems. However, I have not changed my opinion that the right should remain with a woman to make a choice when faced with decisions like these... Everything I have read on here will influence my practice as a nurse and if I am ever aware of a forum such as this for women to come to for anonymous and non-judgemental support and information, then I will surely pass the web address to them. (40s/female/NI)

3.6.5 Class

A number of participants considered the issue of class. It was highlighted how those with money could not only readily access abortion but did not have to reveal that they were seeking an abortion in order to access funds/resources.

I would like to discuss how access to abortion is a socio-economic issue. If you have money and means to travel without anybody taking note, then you can go to the UK and have an abortion and no one is any wiser – no embarrassment or public stigma. If you are in a low paid job or unemployed you could end up trapped in an unwanted pregnancy or have to turn to friends, family, money lenders for finance. (40s/female/ROI)

3.6.6 Equality of access to abortion care

Finally, for those in Northern Ireland the matter of equality of access to abortion care with the rest of the UK was raised.

I agree with the legal issue of discrimination. I can empathise with people who are pro-life and pro-choice. It's a very sensitive topic and I know people feel very passionately about it. However I would try and put aside my own personal views and look at it subjectively. Is it not a case of women in mainland UK have access to a service that women in Northern Ireland do not? A service they can refer themselves to without needing a doctor to validate the circumstances. Therefore, to me, I feel it is important the law changes to extend the same rights to women here. Regardless of personal views we should have the same opportunities afforded to us as another woman would have. Our personal views may then dictate what we do with the opportunities. (20s/female/NI)

4. Findings Part 2 – Abortion as a Workplace Issue

4.1 Introduction

In the second part of the survey, respondents were asked if they had experience of abortion as a workplace issue. In total 597 respondents (20%) stated they had direct experience of a range of scenarios including issues related to disclosure, advice and support, time off and sick pay. In the sections that follow, we take each of these issues and explore them in more depth, presenting the survey results alongside illustrative extracts from the online discussion forum. In this section, the percentages referred to in the text relate to this subgroup of 20% of the overall respondents.

Of note on demographics is that regarding religion and age no major differences were observed around having direct experience of abortion as a workplace issue. In terms of gender, 13% of males had direct experience, compared to 23% of females. One transgender person had direct experience.

4.2 Practical Work-Related Issues

The survey and online discussion forum both provide clear evidence of a series of practical issues experienced by those who have had abortions.

4.2.1 Sick pay and time off

Of those with direct experience of abortion as a workplace issue, almost half (42%) stated that the person concerned had struggled to pay for the costs of the abortion. Often related to this were the issues of time off and sick pay, with 23% wanting time off after the abortion but unable to afford to lose wages, while 20% stated the person had wanted sick leave after the abortion but could not take it. A further 11% needed time off and were able to get sick pay, whereas 10% needed time off and used unpaid leave. In addition, 28% stated that the person had needed time off and used annual leave.

I personally had an abortion just last year and struggled to afford it. I couldn't get any time off after either as I work as an agency nurse and do full time hours and could not afford to take the time off afterwards. (25-44/female/NI)

I am completely supportive of the decriminalisation of abortion. In the workplace, given that abortion is a taboo, those people who are undergoing the procedure struggle to ask for the support they need (eg time off, understanding from management). When my colleague underwent the procedure and returned to work, I saw my colleague spend her lunch-times crying and she was unable to perform well at her job. She would have needed more paid leave or sick leave, but she didn't want to use her annual leave and she was worried that taking sick leave might leave her employment position vulnerable. (25-44/female/NI)

As a woman in the workplace, I would worry that if I took abortion pills illegally in Ireland and I needed sick leave afterwards that it would be detailed in my sick leave note. If my manager held opposing views regarding abortion this would leave me open to discrimination and potentially bullying in the workplace as a result. (25-44/female/ROI)

It is evident in the results that time off after the abortion is a particular problem and one that warrants attention in terms of policy. Some participants also stated that unions should take a

clear position on abortion rights, arguing for bodily autonomy, and include related policy issues such as FGM (female genital mutilation) and forced marriage.

I think the Irish Congress of Trade Unions (ICTU) should table a motion for all members and take it from there. It is widespread at once and will need some careful wording – something along the lines of ensuring women have great autonomy over their bodies – this is going to cause offence I know, but the wording could also go some way to protecting young girls and women who are refusing FGM and enforced marriages. I know there are laws against FGM and enforced marriages, but no laws protecting the autonomy of women. This is not going to have an easy or fast answer, but we could do with a start to empower women to have the knowledge to make informed decisions. (40s/female/ROI)

This survey is a perfect example of what unions can do to engage women and drawing out the issues that impact on women directly. Unions could encourage or facilitate discussions forums, there are many gynaecological issues that women may face which they are not comfortable addressing, unions could focus on how this impacts on their members, unions could develop guidelines [to] identify areas where their female members use generic sickness excuses to disguise their true reasons for absence. Education around fertility and gynaecological issues should be part of employees' training, it should be included in part of standard health and safety guidelines, I have worked in a [predominantly] female environment for [the] past 25 years. I have witnessed gossip regarding pregnancy, bullying because of morning sickness and heavy periods, and a wide range of subtle bullying and mistreatment as a result of all of the above. As far as I am concerned it should [be addressed and eliminated] from all workplaces, in the same manner as sexual harassment has been tackled. (40s/female/ROI)

Abortion is a health care issue therefore it is a workplace issue. (25-44/female/NI)

Linked to these practical issues, as demonstrated in the following sections, the results also indicate that stigma about abortion affects disclosure and prevents many from seeking advice and support.

4.3 Disclosure

Of the 20% of respondents who had direct experience of abortion as a workplace issue, 73% (n=397) stated that the person concerned had not disclosed the abortion to anyone in the workplace.

4.3.1 Stigma

In the online discussion forum, participants shared their own experiences of either having had an abortion or knowing of someone who had had one. For those with direct experience, stigma played a key role in disclosure about abortion; for others the absence of disclosure was due to specific circumstances such as the person's own state of well-being.

I did not disclose to anyone in the workplace. This was not through any shame over my decision. It was because my case was very complicated due to fatal foetal abnormality and I was very low and could not face the several questions disclosing the information would entail. I also understood there would be judgement so I wasn't in a strong enough position to have to explain my actions nor did I feel I should justify them as it wasn't anyone's business. I feel it may have been handled differently

because I just told senior management I lost my baby when I was put under a lot of pressure to return to work after a short spell off. Their response was what I expected. They told me they would get help and support for me but nobody to this day ever contacted [me]. I definitely think unions need to have discussions with employers to put policies in place to keep them safe as well as employees. (30s/female/NI)

I have had both miscarriage and an abortion while an employee and the difference was striking – I could tell my employer about the miscarriage and got sick leave and support but felt there was no way I could tell my employer about the abortion. The stigma is still very strong. (25-44/female/NI)

I worked with a colleague who made the decision to have an abortion. We were friendly inside and outside of work so they disclosed this information to me. They did not disclose this information to our employer as they were so worried about the stigma. Instead my colleague took sick leave to travel to England for their procedure. As far as the issue being handled differently I don't think workplaces can do very much until wider society changes. The associated stigma with abortion means very few people would go to an employer and tell them that's why they need time off. This then adds to the pressure of an already stressful situation. Lying to your employer, taking sick leave, having to make travel arrangements while worrying if you get "caught" how will you explain yourself. Then the financial implications are another added pressure. (20s/female/NI)

4.3.2 Type of environment

Participants explained that the type of environment they worked in prevented them from disclosing details:

The abortion issue is made harder for any of my colleagues as we work for a religious order. (45-64/female/ROI)

I had an abortion last year, and it never once occurred to me to tell my employer. I work for an independent, owner run business, with no HR dept. The owner is far from approachable in any matter, let alone something so sensitive and personal. I found my employer to be very unhelpful throughout my pregnancy with my second child the previous year, regarding time off due to sickness and time off my feet throughout the day. (30s/female/ROI)

My supervisor came to me because he needed to talk to someone – his wife, who worked in another area of the company, had gone to the UK for an abortion and he hadn't gone with her because he disagreed with her decision. She took the time off as holidays – there's no way she would have told her supervisor why – she just said she was visiting relatives in England. I think that xxxxxx has hit the nail on the head when she said the social stigma is the problem. I know it would not have done any good for the Trade Union to talk to the employer in my job at the time as it was a government funded employment. (40s/female/ROI)

Because I felt I could not talk to anyone about my partner and my experience regarding her abortion, I feel I was outcast in my employment particularly by my manager... (25-44/male/ROI)

4.4 Advice and Support

In terms of advice, it is evident that almost all respondents did not use their union representative as a resource, with only 1% stating they had sought advice and 2% stating they were a union rep and had advised members.

4.4.1 Support from colleagues, managers

In relation to support, few respondents stated that they had been supported by colleagues (15%) and managers (7%).

4.4.2 Legal barriers

Some participants expressed the view that legal restrictions on abortion meant unions could not get directly involved in offering support to members:

I think, in ROI, abortion as a workplace issue is almost a moot point. As abortion is illegal, I doubt any Union members would even broach the subject on a personal level, with Union Reps etc. It's not an option, therefore not an issue. As a Shop Steward myself, I know that many of my Members have similar views on abortion as myself, that it is an equality issue & should be legalised. I get this impression just from our general conversations. If abortion was legalised in ROI, then I think it would defo become a workplace issue, similar to other medical issues or maternity/paternity leave etc. It could just be covered by the normal Staff Handbook, as any other procedure would be. But I do not foresee that happening anytime soon in the current climate. The 1st step with progress would be to have a referendum. Until then, it's like a secret club, everyone knows it is there looming, in the background, but no one really acknowledges it if it doesn't affect them directly. (30s/female/ROI)

I would be wary of encouraging anyone to discuss the procedure with an employer in the present climate as abortion is governed by criminal law in NI and the threat of prosecution is very real. Therefore it is not only extremely difficult for the person undergoing the procedure to discuss it openly but it may also put the employer in a position of having knowledge of a potentially criminal act. This situation emphasises the hypocritical state of abortion law in NI. (50s/female/NI)

4.4.3 Advocating for change

Largely though, there was broad support for union involvement in lobbying for change and/or supporting individual members:

Regarding abortion as a workplace issue, Trade Unions do have a role in advocating for employees, and I would be happy to [have] guidelines and procedures in place for how it should be dealt with by employers and colleagues. This is an issue which people naturally have a lot of strong feelings about, but I'm of the opinion that they do not have a place in the workplace, and a woman exercising her legal rights should not face repercussions at work. (30s/female/ROI)

As long as abortion is illegal in Ireland unions have no basis for intervening in workplaces on behalf of members. At the moment they have a very important role in lobbying for change. My own union, Mandate, is involved in the Repeal the 8th movement and is proactive in circulating information to members. This allows discussions to happen within workplaces and across workplaces between members and their friends and families. Unions are helping to lift the veil of secrecy and facilitating discussion by opening up the subject in a public forum – the first steps in the lobbying process for change to the laws in this country. One of the big problems some of the public service unions may

have could be that their rules may prohibit them from engaging in any public debate involving politics. (40s/female/ROI)

4.4.4 Conscientious objection

For those working in healthcare, the issue of conscientious objection was raised:

Worked as midwife and we were given the choice of working with the termination patient or not. (45-64/female/NI)

4.4.5 Working in abortion care

It was also noted that the study had not taken specific account of the experiences of working in abortion care:

This questionnaire fails to acknowledge the emotional impact that nurses experience when work issues represent a conflict of their beliefs. (25-44/female/NI)

4.5 Role of Trade Unions

In this final section of the findings, the role of trade unions is explored and consideration given as to what future actions they should take.

4.5.1 Trade union action

Participants discussed the implications of unions playing a role or not in the wider debate on abortion. As illustrated in the extracts below some participants expressed caution on this:

I would like to see TUs do more to promote the role of body autonomy and prochoice for women, but I wonder whether this falls into the remit of what a union's purpose is? I mean would it serve to alienate and exclude members who have a different belief set? Then it means that a TU becomes a different sort of animal in ...what it does. By having a generic counselling scheme available to members, then it can assist anyone who needs it, but I can see there may be problems in taking on the stigma of abortion but losing membership. For example, a few years ago, the RCN [Royal College of Nurses] balloted its members regarding assisted dying and moved its stance from anti-euthanasia to neutral on the matter of assisted dying, which subsequently caused an outcry and lost it some members. I just can't see why some TUs would dip their toes in what would appear to be murky waters and take a stand at the risk of losing income. Would be great if the progressive unions did more, but because of the question of legality in NI and RoI, I would imagine they have to be very careful and whether they would take the ostrich approach and ignore it because it may cause more problems than they consider it to be worth in terms of publicity and yield. So perhaps while they could play a role, I don't think they would. (40s/female/NI)

I'm really torn by this debate as regards the trade unions here making abortion a workplace issue. Even though I have had an abortion I accept that many people would be horrified and hold sincere beliefs. However did the Trade Unions shrink from their stance on gay rights when it was illegal and seen by many in N. Ireland as an abomination? The original debate about abortion was that rich women always had access to safe abortions and it was the poor who had to resort to back street abortions (and of course now have pay to get out of Ireland, find accommodation and miss out on the limited counselled that exists in some clinics) Also men still have the advantage of having personal choice of the extent of their involvement with a pregnancy. Shouldn't women also have

those choices about their own bodies? Why are women the ones that carry all the guilt? Are Trade Unions not at the forefront of campaigning for gender equality? Perhaps some work should be done by the unions to ask their members what they feel about abortion in all cases and open up the debate in a quiet way such as an anonymous survey. (50s/female/NI)

4.5.2 Is abortion a workplace issue?

Forum participants considered the issue of whether abortion was a workplace issue. In the next extract, it is evident that while the participant had not initially regarded abortion as a workplace issue he had now changed his mind:

Personally as a trade unionist myself, although I abhor abortion itself, I think the woman worker is entitled to full union protection after she has finished her deed. There is no point in compounding a difficult scenario... Thank you to you and your colleague for facilitating the discussions. I found the forum useful in the sense of clarifying for myself as a trade unionist what I think the correct political position of the union ought to be in this complex issue. Until the forum I had not considered abortion as a workplace matter. However now I do see it as a workplace matter that deserves union acknowledgement. Thank you again for inviting me to give my viewpoint. (30s/male/ROI)

In the following extract the participant also notes she had not regarded abortion as a workplace issue, but on reflection now does. She believes proceeding with caution is needed, recognising that workplaces can vary significantly and that a "one-size fits all" approach would be inappropriate.

I've never thought of Trade Unions being a resource or support in this situation, to be honest, although I suppose they do advocate for workers' rights, so it makes a kind of sense. Plus, I really respond to what other commenters have said about normalising and de-stigmatising abortions. I've kind of had a situation which was mediated and guided by the TU, and having guidelines and advice on how to come out together and work our differences really made a big difference. As I said however, I'm not a fan of "one size fit all" thinking — what works and is appropriate in one workplace may be disastrous in another, and TUs would need to be careful and considerate. A workplace abortion is not like mediating a conflict, where everyone has to work together and let's just bury the hatchet, etc. As other commenters have pointed out a small family-owned business cannot be treated the same as a massive multinational. (30s/female/ROI)

In relation to the role of the unions, a range of views was expressed. This included those who believed that abortion was of no concern to unions:

I do not think that trade unions have a role in promoting or restricting abortion. Their organisations ought to be neutral. This is because material issues and female empowerment issues are separate concerns with separate movements. By choosing to promote abortion the trade union risks turning husbands and wives into enemies of one another. It is clearly a strategy of some women's movements to use the labour movement to push for their abortion agenda. The trade union movement has no business intervening in the family life of its membership. If abortion comes up in the course of working life then it is only another advocacy role that the union should take insofar as it relates to work issues. Trade unions should stay out of the private lives of working people. (30s/male/ROI)

4.6 Future Actions for Trade Unions

The evidence presented in this section had identified a series of areas where members believe it is important for trade unions to intervene.

4.6.1 Educating members, challenging stigma

Some participants contended that unions could play a vital role in educating members on abortion rights and challenging stigma:

I think that some unions are changing their attitude and approach to members' wants and needs. By becoming involved in campaigns such as Repeal the 8th they are helping to start a discussion that might not ordinarily happen. Something as simple as.... do you agree or disagree with Repeal the 8th?... can lead to a lot of information being passed on to people who might not have that kind of discussion normally. I know from speaking to other union members I know that having interacted with a gay member of the NEC of their union, it completely changed their attitude towards gay people – men especially. So from the education and information and just normalising the discussion I do think unions have an important role to play. After all it isn't just about servicing workplace needs; a progressive union looks at the wellbeing of its members at work and at home and within society. (40s/female/ROI)

I work in a male dominated workplace and have noticed that they seem afraid to discuss abortion and don't like when it is brought up. Maybe unions getting involved would open up the conversation more in the workplace, because the stigma definitely needs to be challenged. (20s/female/ROI)

Table 3 Summary of survey responses on type of workplace experience encountered

	% of those who had direct experience
Disclosure They did not disclose it to anyone in the workplace	73
Advice and support They sought advice from a union rep.	1
I am a union rep – I have provided advice to members on abortion	2
They were supported by colleagues	15
They were supported by their manager	10
Practical issues	
They struggled to pay for the costs	42
They wanted time off after the abortion but couldn't afford to lose wages	23
They wanted time off after the abortion but couldn't take sick leave	20
They needed time off and were able to get sick pay	11
They needed time off and used unpaid leave	10
They needed time off and used annual leave	28

5. Conclusions and Recommendations

5.1 Overall Comments

The results of the survey and focus group clearly show that abortion access and legal reform is an ongoing issue for society in general and the trade union movement in particular, in both Northern Ireland and the Republic of Ireland. It is evident that trade union members are supportive of legislative reform in some form. The results also clearly illustrate that lack of access to abortion in the Republic and Northern Ireland has effects in the workplace, both in terms of practicality and disclosure. While online discussions reflected differing levels of support from members for trade union involvement in issues surrounding abortion, it is apparent that open discussions are needed within unions to examine this issue in more depth.

5.2 Overall Views on Abortion and Legal Reform

In relation to overall views on abortion and legal reform, the findings mirror those of previous surveys and public opinion polls, with the majority favouring some form of legal reform and in favour of a woman having a right to choose. Of the 3,180 trade union members who completed the survey:

- 87% believe a woman should not be criminalised for having an abortion.
- 77% believe abortion should be available when a woman's life is at risk.
- 66% believe abortion should be available when the pregnancy is a result of rape.
- 64% believe abortion should be available when the pregnancy is a result of incest.
- 65% believe abortion should be available when there is serious malformation of the foetus.
- 62% believe abortion should be available when a woman's health is at risk.
- 48% were in favour of use of the abortion pill at home.
- 51% believe abortion should be available when a woman asks for one.
- 9% believe abortion should not be available for any of these options.

As the results indicate, the overwhelming majority of respondents (87%) did not believe a woman should be criminalised for having an abortion.

Over the last decade there have been numerous polls and surveys which all contribute to the growing body of evidence for public support of legal reform, that it is both wanted and necessary (Appendix 4). The Northern Ireland Life and Times Survey 2016 (released in June 2017) included a specific section on views of the legality of abortion. While the questions in the survey differed from those asked in our survey, the results show broadly comparable results in terms of support for legislative change. A poll by Amnesty International in the Republic of Ireland in 2016 also showed similar results, with the majority of those surveyed not in favour of criminalisation and wanting abortion to be a priority issue for the Irish government.

5.3 Experience of Abortion as a Workplace Issue

The findings also provide clear evidence that abortion is a workplace issue:

• 20% of respondents (597 respondents) to the survey had direct experience of abortion as a workplace issue. Direct experience includes those accessing abortion, their partners,

colleagues, managers or those who work in healthcare who may provide abortions or advise on abortions.

Of these:

- 73% stated that the person did not disclose the abortion to anyone in the workplace.
- 42% stated the person had struggled to pay for the costs.
- 28% stated the person needed time off and used annual leave.
- 23% stated the person wanted time off after the abortion but could not afford to lose wages.
- 20% stated the person wanted time off after the abortion but could not take sick leave.
- 11% stated the person wanted time off after the abortion and was able to get sick pay.
- 10% stated the person needed time off and used unpaid leave.
- 1% stated that the person sought advice from a union rep.

Results from the discussion forum highlight the following:

- Disclosure is problematic in workplaces, this is linked to stigma about abortion and can result in feelings of isolation.
- Many had not thought of abortion as being a workplace issue until their participation in the research.
- There were mixed views on what unions should do regarding the abortion issue, however largely there was support for unions in lobbying for legal reform and advocating policy changes.

One of the most notable findings from the discussion forum was the role of experience in modifying people's views on abortion. Participants explained how knowing of/listening to people's first hand experiences caused them to reflect on their own position. This finding indicates the importance of listening to experience about abortion in any future debates, a finding that would concur with the experience of the recent Citizens' Assembly in the Republic of Ireland (see Appendix 1 for Citizens' Assembly recommendations).

5.4 Recommendations

1. Policies

It is notable in the findings that even those participants who were anti-abortion could see a role for unions in dealing with the matter of abortion. Thus there is a need for unions to develop policies on dealing with abortion as a workplace issue. These policies should also contain information about support services such as the Abortion Support Network, the FPANI and IFPA.

2. Work in healthcare

In addition to accessing abortion, many union members work in healthcare and it was noted that the survey did not focus on their experiences of working in that environment. We would suggest further research is needed to explore the experiences of those working in abortion care specifically and the impact of restrictive law and unclear policy on their practice.

3. Union reps as resources

It is apparent that there are workplace issues relating to abortion in terms of disclosure, stigma and accessing employment rights. Unions need to make clear that their

representatives are sources of information and support in these instances, and that such support should be given regardless of personal opinion.

4. Education and awareness raising

Online discussions highlighted the role that unions could play in education and awareness raising - workshops, seminars and education programmes are potential future actions for unions. These are also important in highlighting the amount of misinformation that exists.

5. Trade union lobbying

In relation to lobbying on abortion law reform, mixed opinions are evident on the role of unions relating to abortion. However, given that the majority of union members supported legislative reform on the issue and since the issue affects those in the workplace, there is space for trade unions to begin discussing and developing a coordinated response on abortion laws.

6. Range of workplace issues

This study has identified a range of workplace issues which affect those seeking abortion. These situations will still exist even if abortion were more widely available. It is imperative that every trade union should address these issues.

5.5 Final Comment

What emerged clearly from the survey results and online discussion forum was that this is a crucial issue for contemporary society in Northern Ireland and the Republic of Ireland. As the trade union movement is the largest civil society organisation in Ireland, North and South, comprising over 700,000 individuals, 52% of whom are women, unions have a responsibility to help inform wider societal views on abortion, abortion access and legal reform.

Appendix 1 Citizens' Assembly Recommendations

In the first ballot, 87% of the members voted that Article 40.3.3 (the Eighth Amendment) of the Constitution should not be retained in full.

In the second ballot, 56% of the Members voted that Article 40.3.3 should be amended or replaced.

In the third ballot, 57% of the Members recommended that Article 40.3.3 be replaced with a Constitutional provision explicitly authorising the Oireachtas to address termination of pregnancy, any rights of the unborn and any rights of the pregnant woman. In other words, it would be a matter for the Oireachtas to decide how to legislate on these issues.

The Assembly members made recommendations by ballot to the Oireachtas about what should be included in this legislation. Specifically, what reasons, if any, for which termination of pregnancy should be lawful in Ireland, as well as any gestational limits that should apply.

64% of the Members have recommended that the termination of pregnancy without restriction should be lawful. Of that group of Members:

- 48% have recommended that the termination of pregnancy without restriction should be lawful up to 12 weeks gestation age only.
- 44 % have recommended that the termination of pregnancy without restriction should be lawful up to 22 weeks' gestation age only.
- 8% have recommended that the termination of pregnancy with no restriction to gestational age.

In addition, a majority of Assembly Members recommended by ballot the following reasons, for which termination of pregnancy **should be lawful** in Ireland:

- Real and substantial physical risk to the life of the woman (99%)
- Real and substantial risk to the life of the woman by suicide (95%)
- Serious risk to the physical health of the woman (93%)
- Serious risk to the mental health of the woman (90%)
- Serious risk to the health of the woman (91%)
- Risk to the physical health of the woman (79%)
- Risk to the mental health of the woman (78%)
- Risk to the health of the woman (78%)
- Pregnancy as result of rape (89%)
- The unborn child has a foetal abnormality that is likely to result in death before or shortly after birth (89%)
- The unborn child has a significant foetal abnormality that is not likely to result in death before or shortly after birth (80%)
- Socio-economic reasons (72%)

For all the above reasons Members made recommendations as to any gestational limits if any which should apply.

(Source: https://www.citizensassembly.ie/en/The-Eighth-Amendment-of-the-Constitution/)

Appendix 2 Survey Questions

The survey is divided into 3 sections

- 1. In the background section you will be asked questions about your age, gender and so on.
- 2. In the second section we ask about your overall views on abortion and the law on abortion.
- 3. In the last section we ask a series of questions about abortion as a workplace issue. We do not ask you to reveal if you had an abortion, the questions instead deal with issues regarding abortion that you may be familiar with in your workplace.

 Before the survey ends you will also have the opportunity to add in any other issues you wish to raise.

Before we begin the survey we would like to gather some background information:

Background information

- What age group do you belong to?
 18 24/25 44/45 64/65 74/75+/(Don't know/Refused)
- 2. What is your marital status?

Single (never married)

Married and living with husband/wife

A civil partner in a legally-registered civil partnership

Co-habiting with partner but not in registered civil partnership

Married and separated from husband\wife

Divorced

Widowed

(Don't know/Refused)

3. What is your gender

Male/Female/Transgender/(Don't know/Refused)

4. Do you have children/dependents? (this can include children under 18, adults living with you or living elsewhere)

Yes/no (Don't know/Refused)

- 5. Do you regard yourself as belonging to any particular religion? Yes/no. If yes, which? Catholic/Protestant/Hindu/Jewish/Islam/Muslim/Buddhist/Other please state (Don't know/Refused)
- 6. Which union do you belong to? GMB, UNITE, UNISON, Mandate, CWU [tick boxes]
- 7. What is your job title?
- 8. Are you employed? Full-time (permanent)/Full-time (fixed term)/Part-time (permanent)/Part-time (fixed term)/Casual (no set hours)/Other please state

9. Where do you live - in the Republic of Ireland, Northern Ireland? [tick boxes]

General questions on abortion

Now we would like to ask some general questions on abortion

10. When do you think should abortion be available? Tick the options you agree with:

When a woman's life is at risk

When the pregnancy is a result of rape

When the pregnancy is a result of incest

In cases of serious malformation of the foetus

When a woman's health is at risk

When a woman asks for an abortion

None of these

(Don't know/Refused)

11. Do you think a woman should be arrested and prosecuted for having an abortion? Yes/No (Don't know/Refused)

- 12. In Ireland and Northern Ireland, access to abortion is restricted. Can you tell me on a scale of 1 to 5 where 1 is disagree strongly and 5 is agree strongly, how much you agree or disagree that these statements reflect how you personally feel about these restrictions on access to abortion. (Disagree Strongly/Disagree Slightly/Neither agree or disagree/Agree Slightly/Agree Strongly)
- Expanding access to abortion should be a priority issue for the government.
- Politicians should show leadership and deal proactively with the issue of widening access to abortion.
- Women's health should be the priority in any reform of the abortion law.
- The fact that most women who want an abortion must travel abroad to access abortion unfairly discriminates against women who cannot afford or are unable to travel abroad.
- It is hypocritical that abortion is restricted but women are allowed to travel abroad for abortions.
- The current restrictions to abortion are cruel and inhumane.
- Women should be able to use the abortion pill at home
- The government should remove the criminal punishment for abortion.
- The law should stay as it is.

Abortion as a workplace issue

In this section we focus on issues related to abortion that may affect the workplace. We do not ask you to reveal if you have had an abortion. We are interested in if any of the following scenarios are familiar to you, if for instance you know of a colleague who had an abortion. If you would prefer not to answer these questions please go to question 15.

- 13. Have you encountered any of the following situations in your workplace?

 I know someone who has had an abortion these are the issues that arose in her workplace......
 - They did not disclose it to anyone in the workplace
 - They sought advice from a union rep

- They struggled to pay for the costs
- They were supported by colleagues
- They were not supported by colleagues
- They were supported by their manager
- They were not supported by their manager
- They wanted time off after the abortion but couldn't afford to lose wages
- They wanted time off after the abortion but couldn't take sick leave
- They needed time off and were able to get sick pay
- They needed time off and used unpaid leave
- They needed time off and used annual leave
- I am a union rep I have provided advice to members on abortion
- Other please explain ______
- 14. Would you be willing to discuss your experiences of abortion as a workplace issue further via an online, anonymous focus group? The focus group will be conducted using the format of a discussion forum. The research team will provide a set of key questions for you to answer and discuss with other participants. You participate by typing in, in text format, your response to the questions. The forum will be moderated by the research team - all posts will be verified by the research team before being posted to the forum. The forum will run for a period of 3 weeks. Over this time we estimate 20 minutes per week will be required from each participant. The forum will be hosted on a website which is very secure, and has been used for similar sensitive projects.

Would you be willing to take part on the discussion forum? Yes/No.

If yes - please follow this link [xxxxx]. You will then receive an invitation to take part in the online focus group.

15. Do you have any final comments you would like to add?

Thank you for taking part in this survey. If having taken part in the research you wish to talk to someone independently about your experiences for additional support/counselling the following numbers may be useful:

- Irish Family Planning Association 1850 49 50 51
- Family Planning Association (Northern Ireland) 0345 122 8687

Appendix 3 Online Discussion Forum Questions

- 1. To begin, what are you general views on abortion?
- 2. In the survey you indicated you had direct experience of dealing with abortion in the workplace can you explain what that experience was (please do not reveal any details that might identify you, the person concerned or your workplace)
- 3. How did your employer respond to this situation? What are your views on this response?
- 4. Do you think your employer could have taken a different approach? Why do you say that?
- 5. Do you think your trade union should talk to your employer about what provisions should be in place in the workplace in relation to abortion?
- 6. Do you have any final comments to add?

If having taken part in the research you wish to talk to someone independently about your experiences for additional support/counselling the following numbers may be useful:

- Irish Family Planning Association 1850 49 50 51
- Family Planning Association (Northern Ireland) 0345 122 8687

Appendix 4 Selected List of Previous Surveys and Polls

Republic of Ireland Selected list of Previous Surveys and Polls (in the past three years)

- 1. In March 2017 an Irish Times/Ipsos MRBI poll found 76% said that abortion should be legal in cases where the foetus will not survive outside the womb; 77% of respondents say abortion should be legal in cases of sexual crime. In relation to the Eighth Amendment: 38% favoured replacement to improve access to abortion; 28% favoured repeal.9
- 2. In October 2016, an Irish Times/Ipsos MRBI poll found almost 75% of respondents supported repeal of the Eighth Amendment.¹⁰
- 3. In July 2016, an Irish Times/Ipsos MRBI poll found 67% or two-thirds of respondents supported repeal of the Eighth Amendment to allow for abortion in cases of rape or fatal foetal anomaly.
- 4. In March 2016, a Red C poll commissioned by Amnesty International Ireland found 87% of respondents wanted abortion access expanded and 72% believed abortion should be decriminalised.
- 5. In February 2016, an Irish Times/Ipsos MRBI poll found 64% of people surveyed were in favour of repealing the Eighth Amendment. Support for repeal was highest among younger and middle-aged voters, with about 70% of those under the age of 49 supporting repeal.
- 6. In January 2016, a Newstalk/Red C poll found 78% of respondents supported abortion in cases of rape or incest and 76% in cases of fatal foetal anomaly. 41% agreed that abortion should be an option in all circumstances felt necessary by a woman, while 48% supported removal of the Eighth Amendment.
- 7. In November 2015 a poll conducted by on behalf of RTÉ / BBCNI found 64% of people said abortion should sometimes be available, 22% said it should always be available, whilst 14% thought it should never be allowed.¹¹
- 8. In August 2015, the majority of Fine Gael TDs who responded to a Sunday Times survey (63%) were in favour of a referendum to widen access to abortion in the lifetime of the next Dáil.
- 9. In July 2015, a Red C poll commissioned by Amnesty International Ireland found two-thirds (67%) of people surveyed believed the government should decriminalise abortion.
- 10. In June 2015, a Sunday Times Behaviour and Attitudes Poll found 76% of people surveyed were in favour of abortion in cases of fatal foetal anomaly, while 70% supported abortion in cases of rape or incest.

⁹ Source for survey 1: Irish Times, 3 March 2017; https://www.irishtimes.com/news/social-affairs/poll-shows-public-support-for-abortion-is-cautious-and-conditional-1.2995696;

 $^{^{10}}$ Source for surveys 2-6 and 8-12: https://www.ifpa.ie/Hot-Topics/Abortion/Public-Opinion

¹¹ Source for survey 7: http://www.bbc.co.uk/news/uk-northern-ireland-34725746

- 11. In April 2015, a Sunday Independent/Millward Brown poll found 70% of people surveyed supported abortion where there is a medical risk to a woman's life other than suicide. 63% of people supported abortion in cases of fatal foetal anomaly, while 60% were in favour of abortion in cases where a woman is suicidal.
- 12. In October 2014, an Irish Times/Ipsos MRBI poll found 68% of people surveyed were in favour of a referendum to be held on whether or not to allow for abortion in cases of rape and fatal foetal anomaly.

Northern Ireland Selected list of Previous Surveys and Polls (in the past three years)

- 1. In June 2017 the Northern Ireland Life and Times Survey reported: 83% of respondents believe abortion should definitely or probably be legal in cases where the woman's life is at risk; 76% if the woman's physical or mental health was affected; 73% if the foetus has a serious abnormality and may not survive beyond the birth; and 78% if the pregnancy was a result of a sexual crime. In addition, most respondents did not favour criminalisation of abortion. ¹²
- 2. In June 2017, a poll by Social Market Research Belfast on behalf of the ESRC Northern Ireland election studies project indicated that 49% of respondents support reforming the law on abortion; 29% opposed it, with the remaining respondents being uncertain.¹³
- 3. In October 2016, an opinion poll by Millward Brown Ulster for Amnesty International reported 72% of people think abortion should be available if the pregnancy is a result of rape or incest; 67% of people think abortion should be available in cases of fatal foetal abnormality; 58% of people think abortion should be decriminalised. ¹⁴
- 4. In November 2015, a poll conducted on behalf of RTÉ / BBCNI found 56% of respondents believed abortion should be available sometimes, 23% always and 20% never.¹⁵
- 5. In October 2014, an opinion poll by Millward Brown Ulster for Amnesty International reported 69% said there should be access to abortion where the pregnancy is the result of rape; 68% said abortion should be available where the pregnancy is the result of incest; 60% of people think abortion should be available where the foetus has a fatal abnormality.¹⁶

¹² Source for survey 1: http://www.ark.ac.uk/publications/updates/update115.pdf;

¹³Source for survey 2:http://www.belfasttelegraph.co.uk/news/northern-ireland/survey-voters-polarised-on-samesex-marriage-brexit-anirish-language-act-in-northern-ireland-35974992.htm

¹⁴Source for survey 3: https://www.amnesty.org.uk/press-releases/amnesty-launches-new-campaign-abortion-northern-ireland;

¹⁵Source for survey 4: http://www.bbc.co.uk/news/uk-northern-ireland-34725746

¹⁶Source for survey 5: https://www.amnesty.org.uk/press-releases/northern-ireland-nearly-34-public-support-abortion-law-change-new-poll-

