How Irish Women Are Getting Around Abortion Laws

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A new study provides insight into women's use of the abortion pill

The Republic of Ireland and Northern Ireland have some of the most restrictive laws surrounding abortion in the world. The procedure is illegal in both countries; the exception is only to save a pregnant woman's life. In the midst of a debate in Ireland over whether abortion prohibitions should be reconsidered, a new study released on Monday provides insight into how women on both sides of the border are obtaining abortions—despite the restrictions.

In Northern Ireland, obtaining an abortion is punishable by a life sentence, which is the strictest criminal penalty for abortion in Europe. In Ireland, women could face a 14-year prison sentence, according to Amnesty International. That prompted close to 15,500 women to travel to England or Wales -where it is not illegal to terminate a pregnancy-for the procedure between 2010-2012. If traveling abroad isn't an option, Irish and Northern Irish women with unwanted pregnancies reportedly seek out ways to self-induce an abortion, like with medication, or carry the fetus to term.

Others avail themselves of telemedicine. Since 2006, Women on Web, a Netherlands-based nonprofit group, has provided abortion pills—mifepristone and misoprostol —to women living in countries where they cannot access the procedure safely or legally. Since 2006, Women on Web says around 50,000 women worldwide have received abortion pills from a doctor through the mail. They are then guided through the process via online materials.

Taking—but not obtaining mifepristone and misoprostol for a medical abortion is illegal in Ireland and Northern Ireland. That is in part why public outrage exploded recently



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when a woman was charged in Northern Ireland for helping her daughter access abortion pills. But Women on Web says customs regulations in most countries around the world allow for people to have medicine for personal use sent to them, and mifepristone and misoprostol are on the list of essential medicines of the World Health Organization.

The women in the study were diverse: They included married mothers, single mothers, migrant workers, young women completing their education, and rape victims. Some of the women were proabortion rights, and some were not. "A lot is assumed about women who have abortions, and I hope this [study] will inform the debate," says Dr. Abigail R.A. Aiken, an assistant professor at the University of Texas



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at Austin who was born in Northern Ireland. "These are women from all demographic and age groups—you can't pin it down to a particular group."

In the new report, published Monday in the *British Journal of Obstetrics and Gynecology*, Aiken and her coauthors also analyzed women's experiences using at-home medication abortion via Women on Web in both Ireland and Northern Ireland. Between Jan. 2010 and Dec. 2015, 5,650 women requested the abortion pill online. The researchers then looked at the demographics and circumstances of more than 1,000 women who completed their abortion with the help of Women on Web.

Most of women requesting medication abortion said they had gotten pregnant because they'd used contraception incorrectly, or because it didn't work. Sixty-two percent of the women said their reason for ending the pregnancy was that they could not cope with a child at this point in their life, followed by not having enough money to raise a child. Among the over 5,600 women who requested the medication, 99.8% said they could cope with their feelings regarding their decision.

Ninety-four percent of the 1,023 women who completed the at-home abortion said they felt grateful for the option, 97% said at-home mediation abortion was the right choice for them, and 98% said they would recommend the option to other women with unwanted pregnancies.

When asked about their feelings after completing the abortion, 70% of the women said they felt relieved, which was the most common sentiment expressed, followed by 35% who said they felt satisfied. "This was a difficult decision to have to make because of my religious beliefs but I feel it is very important that women should have the same choice regardless of where in the world they live. This website made the process so much less stressful than having to travel," read one of the women's comments in an email follow-up.

"What I think is most striking is that women reported these clear benefits for their health and wellbeing and anatomy," says Aiken. "I think it really demonstrates that women can make the best choice for themselves when it comes to their own reproduction. The only negative thing about this is that women reported they had to do it against the law, and they went through considerable stress and anxiety and secrecy and isolation and shame."

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