

RESPONSE TO CALL FOR EVIDENCE FROM THE NORTHERN IRELAND ASSEMBLY COMMITTEE FOR HEALTH IN RELATION TO THE ABORTION SERVICES (SAFE ACCESS ZONES) BILL

Who we are

- 1.1 Informing Choices NI (ICNI) are a sexual and reproductive health charity. We champion informed choices around sex, sexuality and reproductive health and emotional wellbeing through advocacy, counselling, education, information and training. Underpinning our work is the principle that all citizens have the right to access high-quality information, education, and sexual and reproductive services without prejudice or discrimination.
- 1.2 We provide a sexual health helpline, which offers information and support across a range of sexual health issues; provide contraception and sexually transmitted infection leaflets; produce a bi-annual regional sexual health newsletter; offer pregnancy choices and post pregnancy counselling; provide Relationships and Sexuality Education (RSE) programmes to parents and individuals with a learning disability, difficulty or autism; offer Open College Network accredited training to health, social services and education professionals; and advocate for sexual and reproductive health services to meet the needs of all citizens in Northern Ireland.

Impact of protests

- 2.1 ICNI have a proud history, formerly the Family Planning Association in Northern Ireland (FPA NI), of providing counselling, information and support to individuals with an unplanned or crisis pregnancy. Our work is based on a pro-choice ethos. We believe:
 - 2.1.1 Clients have the right to acknowledge all of their experiences of pregnancy and to have those experiences valued;
 - 2.1.2 Counselling and support should be non-directive and respect the client's own value system;
 - 2.1.3 Individuals have the right to access accurate information about pregnancy and abortion;
 - 2.1.4 Women and pregnant people have the right to have an abortion;
 - 2.1.5 Abortion is a healthcare issue; and
 - 2.1.6 Those who choose abortion have a right to acknowledge loss and grief.
- 2.2 As ICNI offers non-directive pregnancy choices counselling which provides information and support on all pregnancy options - continuing with the pregnancy, adoption and abortion – we have experienced protestors outside our offices, and previously those of FPA NI, for over twenty years.

- 2.3 Prior to the outbreak of Covid-19 individuals assembled around the entrance to our building on a daily basis and attempted to start unsolicited conversations with women on their reasons for entering. They also forced misleading and potentially distressing leaflets on to them which contained inaccurate information and potentially distressing language such as, 'Abortion does not unrape the mother – it makes her the mother of a dead baby.'
- 2.4 They displayed graphic images, held prayer vigils, blessed the entrance of the building with holy water and wrote messages in chalk on the pavement outside which included, 'FPA, how many kids have you killed today' being written in front of the doorway.
- 2.5 Protestors followed clients and their families as they left the building and used emotive and coercive language to dissuade visitors from medical treatment, under the assumption that any woman entering or leaving the building was pregnant and considering an abortion.
- 2.6 On one occasion protestors turned up outside dressed in black robes with their faces painted white with black tears, carrying a baby's coffin.
- 2.7 Experiencing these behaviours impacts negatively on clients and their families and influences their decision to access, or not access, counselling support. ICNI are aware of clients who have been attending counselling and the sessions were proving beneficial, but the activities of individuals outside the building adversely affected them and, as a result, they decided not to continue with counselling. Below is an extract from a client evaluation of our pregnancy choices counselling service:
- 2.7.1 *"I think it's a real shame there are protestors outside the building. It is very intimidating and I feel it could put a lot of vulnerable girls off going to discuss their options, or to have a counselling session. I was told if I wanted, I could return for a further session, but I definitely wouldn't feel comfortable to do so. I think it is difficult enough without having to face questioning and judgements along with accusations from people who have absolutely no idea what each person is going into the building for."*
- 2.8 Often the start of a counselling session was taken up with discussing an incident which had occurred on the way into the building. A comment book was also left in the waiting room in our office in which individuals could record their thoughts or mention an incident that has occurred. Below are extracts from this book:
- 2.8.1 *"Leaving the building with sister, mother and uncle at approximately 12.30pm. Sister has been attending for counselling sessions for previous few weeks (which are really helping her)! Accosted outside door by red haired woman. Told her we didn't need her advice. She told me, rudely, that she wasn't speaking to me, she wanted to speak to my sister. I told her we'd phone her if we wanted her advice. She proceeded to follow us up the street, trying to push her leaflets on us. In the meantime, the man who was with her followed our uncle shouting about how this would be his grandchild! Very intimidating, pure harassment and the first week it happened my sister didn't want to come back. Something needs to be done to remove these people."*

- 2.8.2 *“My daughter, 15 years old, was approached by a blonde-haired woman and asked where she was going. I told her we were capable of making an educated choice. She then began a verbal tirade with comments such as ‘this is your grandchild’ and ‘what if your daughter dies during an abortion?’ Both my husband and I told her to stop but she continued and tried to block the door way entrance. In our opinion this is harassment and will cause emotional and mental strain on any woman and their partner/family attending the clinic.”*
- 2.8.3 *“Came to the centre with my mum for some advice and help regarding a crisis pregnancy and was greeted by an anti-abortion protestor with pictures. They stood at the door and I couldn’t get past her to get in and she told me that the picture was what my baby looked like in my womb. I was very upset by the incident and they have no right to do this, and I think something should be done about this.”*
- 2.9 As FPA NI and subsequently ICNI, share buildings with other organisations the negative impact of these protests extends beyond the organisation and our clients. Below is a testimony from one woman who worked for a different organisation within the same building:
- 2.9.1 *“I worked in an office in the same building as FPA for four years. During that time, I would have to walk past anti-abortion protesters at the front door of the building to get to work. It was such a daunting ordeal to walk past them. Sometimes the protesters would talk to me, telling me not to abort my baby. I wasn’t pregnant, and I wasn’t going to FPA. I can’t even imagine what it must have been like to have to walk past such hostility if I was a young, vulnerable woman trying to deal with a crisis pregnancy. I can only speak for myself, but I don’t think I’d have felt able to walk past them to get to the advice I needed. I would have felt too intimidated to walk through the door.”ⁱⁱ*
- 2.10 In 2015 a protestor was convicted for assaulting an FPA NI employee in the belief she was a pregnant woman leaving a counselling session.ⁱⁱⁱ The protestor followed the staff member down the street after she left the building, attempted to put leaflets into her handbag and eventually hit her with the clipboard she was carrying. Following the conviction, the individual continued to be present outside our office and now stands outside healthcare services providing early medical abortion (EMA) care.
- 2.11 Since the introduction of EMA services in Northern Ireland in April 2020, the Northern and Southern Health and Social Care (HSC) Trusts have been forced to move the location of their service because of the intimidation and fear staff and clients felt.^{iv} The relocation of the service caused additional work, much stress and exhaustion on an already stretched workforce.
- 2.12 The Belfast HSC Trust has needed to put on extra security which has included a security presence at the front door of their service.^v Within this HSC Trust many clients have been too frightened to attempt clinic entry and ring healthcare professionals for assistance. In turn staff have been subject to verbal abuse and called murders.^{vi}
- 2.13 In one HSC Trust a doctor reported that a woman failed to attend for a follow-up despite prolonged heavy bleeding reporting that she, *“could not face seeing the protestors again.”^{vii}*

- 2.14 EMA services in Northern Ireland are currently provided in hospital or community settings which provide a variety of healthcare services and the presence of protestors impacts on every individual and staff member accessing or providing services in these locations. In the Southern HSC Trust the use of voice amplifiers by protestors outside one community clinic made the work of some services, particularly speech language therapy, almost impossible.^{viii}
- 2.15 Weekly protests also continue to take place in the Western HSC Trust. Despite the EMA service being suspended since April 2021 protestors have continued to picket the multi-use healthcare centre in Derry/Londonderry.
- 2.16 As lockdown measures continue to ease the activities outside healthcare facilities could increase which will cause additional distress to service users and staff, and negatively impact on the legal provision of healthcare services.
- 2.17 While ICNI believes in upholding the right to assemble, this should not interfere with the fundamental right for women, girls and pregnant people to seek information and counselling or to make individual reproductive choices.

The Abortion Services (Safe Access Zones) Bill

- 3.1 ICNI agree with the overview of the Bill.
- 3.2 ICNI agree with the definition of 'protected premises.'
- 3.3 ICNI strongly support the inclusion of premises where information, advice and counselling about abortion treatments are provided. As an organisation with lived experience of witnessing these protests on a daily basis outside our premises we have seen the negative impact they have on our clients, staff and other employees who work in adjacent offices.
- 3.4 ICNI agree with the definition of a 'protected person', especially the recognition that this must include those 'working in, or providing services to, the protected premises.'
- 3.5 ICNI agree with the definition of a 'safe access zone' as described in Section 5, but would suggest that appropriate signage is displayed both inside and outside of the protected premises to ensure that those using the services, as well as those who may seek to obstruct them from doing so, are made aware of the designation of a protected premises and the area covered by the safe access zone. We would also advocate for a minimum size for a safe access zone of 100 metres, while noting that some premises may require a distance much greater than this depending on their location and surroundings.
- 3.6 ICNI agree with the provisions of Section 6, and in particular the recognition that the sanctions described in subsection (5) should be applied both to those who intentionally contravene the provisions of the Bill and to those who are reckless as to the effect of their actions. We support the proposal in subsection (3) that it will be an offence to record a protected person who is within a safe access zone thus providing reassurance to service users that their confidentiality won't be breached. The defence provided for in subsection (4) reinforces the need for clear signage both inside and outside protected premises which includes the area covered by the safe

access zone. It would also be helpful for the Department of Health to directly notify the organisations that regularly protest outside the premises that this Bill seeks to protect that a safe access zone has been put in place and remind them of the sanctions that may be imposed if their members breach the provisions outlined in the Bill.

- 3.7 ICNI agree with the provisions of Section 7.
- 3.8 ICNI agree with the provisions of Section 8. With regard to the requirement at subsection (6) that the Department of Health must publish the extent of the safe access one, I would refer to the previous comments above regarding the need for clear and appropriate signage and also the need to be proactive in informing organisations representing those who regularly protest of the introduction and effect of the legislation.
- 3.9 In relation to the exercise of functions contained in Section 9 as outlined above while ICNI believes in upholding the right to assemble, this should not interfere with the fundamental right for women, girls and pregnant people to seek information and counselling or to make individual reproductive choices. We support the freedom of speech but believe that the space outside or in close proximity to an abortion clinic or pregnancy counselling centre is not an appropriate location to oppose abortion provision. It should be noted that this Bill does not prevent the ability of people to protest against the availability of abortion services, it merely defines specific areas that this cannot take place.
- 3.10 ICNI agree with Section 10 and the importance of monitoring the effectiveness of each safe access zone.
- 3.11 ICNI have no comments to make regarding the interpretation, commencement or short title of the Bill.
- 3.12 In conclusion ICNI support this legislation, and the positive impact that it will have on service users accessing sexual and reproductive healthcare services, and to staff working within them.
- 3.13 ICNI would be happy to discuss the contents of this submission further and to give oral evidence to the Committee. In order to arrange please contact:

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ⁱ The Northern Ireland Abortion and Contraception Taskgroup, [Report on Sexual and Reproductive Health in Northern Ireland](#), March 2021

ⁱⁱ The Northern Ireland Abortion and Contraception Taskgroup, [Report on Sexual and Reproductive Health in Northern Ireland](#), March 2021

ⁱⁱⁱ The Irish News, [Anti-abortion campaigner convicted for assault](#), July 2015

^{iv} Committee for Health, [Severe Fetal Impairment Abortion \(Amendment\) Bill: Health and Social Care Trust Chief Executives](#), July 2021

^v Committee for Health, [Severe Fetal Impairment Abortion \(Amendment\) Bill: Health and Social Care Trust Chief Executives](#), July 2021

^{vi} Informing Choices NI, [Beyond Decriminalisation: pregnancy choices and abortion care in Northern Ireland](#), June 2021

^{vii} Informing Choices NI, [Beyond Decriminalisation: pregnancy choices and abortion care in Northern Ireland](#), June 2021

^{viii} Informing Choices NI, [Beyond Decriminalisation: pregnancy choices and abortion care in Northern Ireland](#), June 2021