

**Irish healthcare workers experiences of anti-abortion protesters and the case for safe access zones.**



*Dr Camilla Fitzsimons, July 2022*

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## *Executive summary of findings.*

This research adopts a pro-choice perspective and makes the case for legally imposed, clearly defined perimeters around Irish abortion providers within which anti-abortion protesters would be prohibited from harassing, intimidating, misleading and/or obstructing entrants. Since January 2019, there have been frequent media reports of these sorts of protests across the country.<sup>1</sup> Domestic and international research has found these protests are intimidating<sup>2</sup> and upsetting<sup>3</sup> for service users and are even a form of gender-based harassment.<sup>4</sup> They can deter doctors from become service providers.<sup>5</sup>

Findings come from an online, anonymous survey questionnaire completed by 75 providers in 2021. Most (77 percent) were GPs, seven percent worked within an outpatient reproductive healthcare provider (for example a Family Planning Clinic) and 16 percent worked within a maternity hospital. This non-representative sample relayed the following,

- Forty-five percent reported protests outside their place of work.
- These were across ten counties - Cork, Donegal, Dublin, Galway, Kildare, Limerick, Roscommon, Tipperary, Waterford and Wicklow.
- Types of protests were silent gatherings, people praying, holding up placards sometimes with graphic images, using props such as white crosses, distributing anti-abortion leaflets and entering surgeries to complain about the service.
- Frequency ranged from daily for five percent, to less than once a month for 55 percent.
- A majority 67 percent had taken no action, 19 percent contacted the Gardaí, eight percent asked protesters to move on and six percent reported the problem to hospital management.
- Over three quarters of providers (77 percent) would welcome laws to create safe access zones. Sixteen percent are against such laws because of a sense they could impede the right to free speech. Seven percent are not sure.

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<sup>1</sup> Cullen, 2020; McNulty, 2021; Coyne, 2019; O'Rourke, 2021; McGlynn, 2021; Kennedy, B. 2021.

<sup>2</sup> ARC & Rimes, 2021.

<sup>3</sup> Green Foster et al., 2013.

<sup>4</sup> Lowe & Hayes, 2019.

<sup>5</sup> Cozzarelli et al., 2000.

Since 2018, successive governments have promised this law. A legislative framework has been proposed, not by government but through a private members bill - *The Safe Access to Termination of Pregnancy Services Bill, 2021*. This was sponsored by the Limerick based Sinn Féin Senator Paul Gavan and which was designed in collaboration with Together for Safety.

At the time of writing, this bill is at the fourth state in the Seanad. It is unlikely the government will support this legislation rather the *Government Legislation Programme Summer 2022* has ensured their own legislation is forthcoming. A similar law has been passed in Northern Ireland however this has been appealed to the UK Supreme Court by the Attorney General of Northern Ireland. As this report asserts, all of these actions have been advanced because of consistent pressure from prochoice groups, a pattern that is repeated in other countries also.

In July 2022, the government finalised their own General Scheme of a Bill which will ban protesters within 100 metres. Senior counsel with constitutional expertise have reviewed this document as has the Attorney General and it has been reported the bill will be fast-tracked through the Dáil and Seanad.<sup>6</sup>

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<sup>6</sup> Loughlin, 2022b.

## *1. Overview of anti-abortion protests in Ireland.*

Gathering outside abortion providers to object to abortion care collides with a person's democratic right to access reproductive healthcare in a way that is safe, accessible and stigma-free. This isn't a universally held position. Ever since these protests were popularised in the US in the 1980s/90s, debates have ensued about whether their prohibition impacts the right to free speech.

Anti-abortion protesters and their supporters argue these gatherings are benign and that they fall within a person's right to free speech. They also posit they are an way to 'reach out' to people contemplating abortion and change their mind. Although there is no evidence of so-called 'pavement counselling' in Ireland to date, this practice is growing in other parts of the world.<sup>7</sup> This intervention is justified by claiming many people experience post-abortion regret. However, the reality is rarely regret rather research by Rocca et al. (2019) found the most frequently cited emotion was relief.

Advocates of the introduction of laws to prevent these protests is that their presence as more ominous. For example, the abortion Rights Campaign (ARC) argue they are there,

*“to intimidate and stigmatise people entering abortion care facilities” with tactics including “loud chanting, name-calling, making threats, physically blocking access to entrances, distributing false information, displaying obscene imagery, praying over/for people or even trying to photograph or record people”.*<sup>8</sup>

Decades of international research have evidenced the negative impact of these protests on the general public. A similar picture is emerging in Ireland where research undertaken by the Abortion Rights Campaign (ARC) found 14 percent of people who had an abortion complained about anti-abortion protesters. People reported these protests made their experience more difficult than it needed to be as it significantly encroached on their right to privacy and dignity. To illustrate,

*“One respondent said, ‘It’s hard enough for people seeking abortions to make the decision and go through with it with the stigma that already exists. To subject these*

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<sup>7</sup> For example, the American Life League offers training for this work. It is also a common part of the work of a growing number of Catholic influenced groups protesting outside clinic in the UK (Lowe & Page, 2022).

<sup>8</sup> ARC, 2020.

*people to the vile verbal abuse and intimidation those who protest spew at them is untenable.’ Safe Access Zone legislation is long overdue”.*<sup>9</sup>

Whilst these protests are clearly upsetting for those at the receiving end, research by Greene Foster et al. (2013) conclude they do not change a person’s decision either at the time of their abortion, or into the future. They also have a broader negative impact in that they violate social rules governing stranger encounters in a way that reinforces gender hierarchies.<sup>10</sup>

Since 2018, successive Irish governments have supported this latter perspective and there have been repeated promises that laws will be introduced to create safe access zones (or buffer zones) within which protesters would not be allowed to gather. Ireland would not be the first country to introduce safe access zones rather there are laws in parts of the US, Canada, Australia and the UK (albeit via bye-laws). All of these laws are designed to protect the rights of people to access abortion without having to endure misleading information, harassment and intimidation, and attempts to obstruct their entry. For example, the US *Freedom of Access to Clinic Entrances* (FACE) Act, which was introduced in 1994 “prohibits injuring, intimidating or interfering with any person who obtains or provides reproductive health services. It provides for civil and criminal penalties against violators”.<sup>11</sup> FACE has survived several first amendment challenges. There are also laws that criminalise attempts to prevent abortions more broadly in France, Croatia and Macedonia.

Another reason why such laws are urgently needed in Ireland draws from overseas research that determines these protests can deter doctors from providing abortion services.<sup>12</sup> General Practitioners (GPs) are the main providers of early medical abortions (EMAs) in Ireland where they are cared for amidst the general patient population. This model helps normalise abortion care and is somewhat different to many other countries including the US and the UK where dedicated reproductive healthcare providers are more commonplace.<sup>13</sup> However, only c10

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<sup>9</sup> ARC and Grimes, 2021, p. 78.

<sup>10</sup> Lowe and Hayes, 2019.

<sup>11</sup> Hudson, 2011. Several US states have also introduced buffer zone legislation see, <https://www.guttmacher.org/state-policy/explore/protecting-access-clinics> accessed 5th September 2021. Some laws have been successfully overturned by anti-abortion campaigners but this isn’t always the case. In March 2021, a New York federal appeals court ruled against anti-abortion protesters trying to discourage people from entering a reproductive healthcare provider when it rejected their claims that their constitutional right to free speech was violated (Stempel, 2021).

<sup>12</sup> Cozzarelli et al. 2000.

<sup>13</sup> There are some specialist providers, for example the Irish Family Planning Association (IFPA).

percent of Irish GPs have registered with *myoptions.ie*; the public support service that provides information on abortion providers.<sup>14</sup> Amongst these providers, research by Dempsey et al. (2021) found one in six have experienced a “verbal threat or attack”. Moreover, at the time of writing, just 11 out of 19 of Ireland’s publicly funded maternity hospitals offer full abortion services. These hospitals provide secondary care for people requiring abortion after 12 weeks therefore those who have a confirmed case of foetal fatality, or those whose own life or health is at risk. These pregnant people attend people with high-risk pregnancies, gynaecological problems and those receiving care during and after miscarriage.

This research makes the case for safe access zones in Ireland by exploring the experiences of 75 abortion providers (GP clinics, reproductive healthcare providers and maternity hospitals). I made contact with providers through identifiable gatekeepers namely START – a voluntary network of GPs and Obstetric providers, and the Midwives Association of Ireland. Both organisations circulated a link to an online anonymous survey-questionnaire amongst their members. Information was also circulated via social media. Participation was once off and people were asked to consent to a statement,

*“To be eligible to participate you must be a healthcare worker providing abortion services”.*

All data was managed and stored in accordance with the Maynooth University Research Integrity policy.<sup>15</sup>

The 75 valid responses<sup>16</sup> received create a non-representative, convenience sample meaning statistics generated are not inferential as they do not represent the broad experience of all abortion services providers. However they give us a snapshot of the experiences of these providers thereby offering valuable insight into the way anti-abortion protests can impact those at the coal-face.

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<sup>14</sup> Kennedy, 2021.

<sup>15</sup> This can be viewed at

[https://www.maynoothuniversity.ie/sites/default/files/assets/document/MU%20Research%20Integrity%20Policy%20September%202016%20\\_2.pdf](https://www.maynoothuniversity.ie/sites/default/files/assets/document/MU%20Research%20Integrity%20Policy%20September%202016%20_2.pdf) Accessed 06 November 2021. The survey used the online surveys platform licenced to Maynooth University.

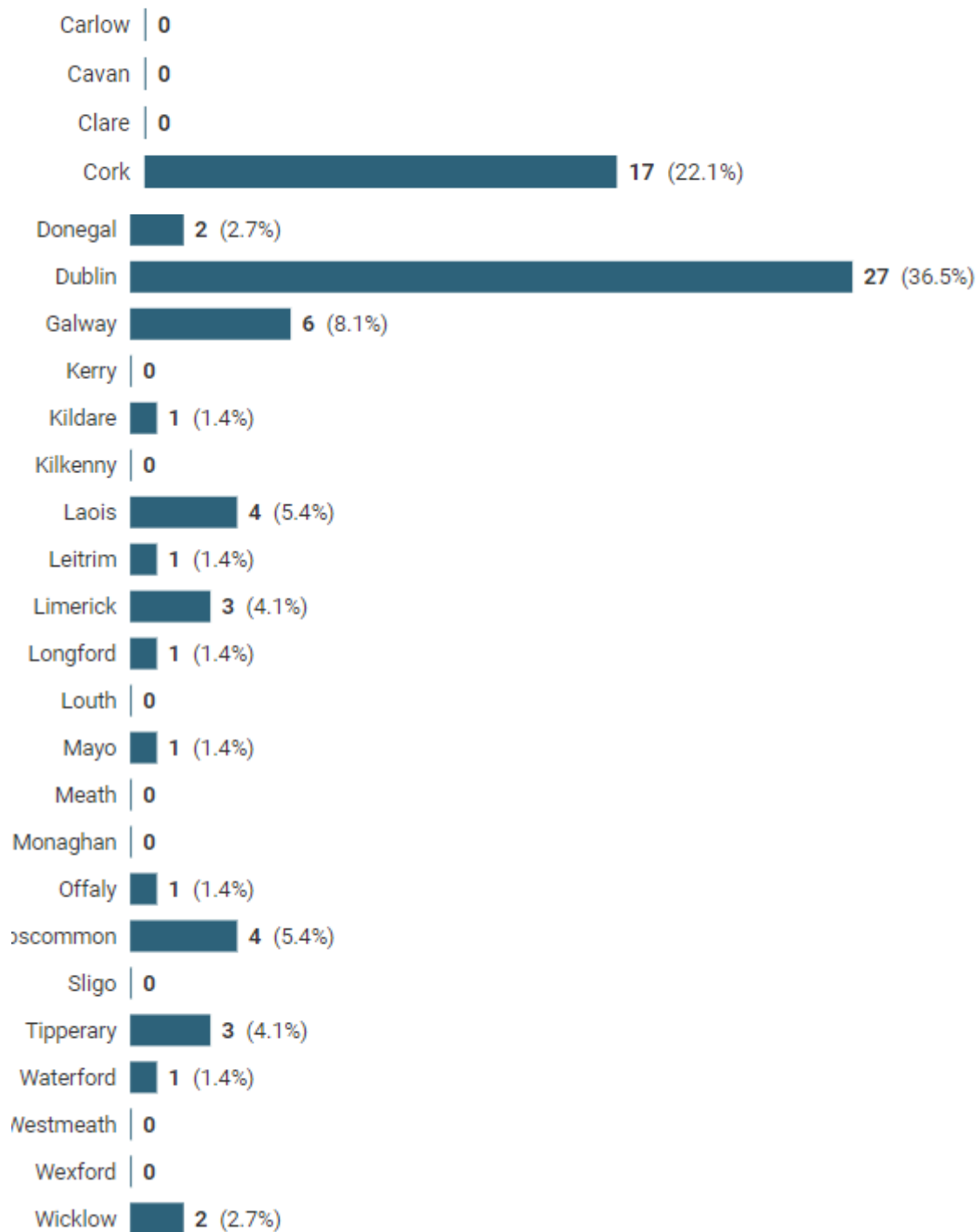
<sup>16</sup> Twenty-eight responses were determined to be invalid and were deleted because the respondents were not abortion care providers.



### *Geographical location of participants.*

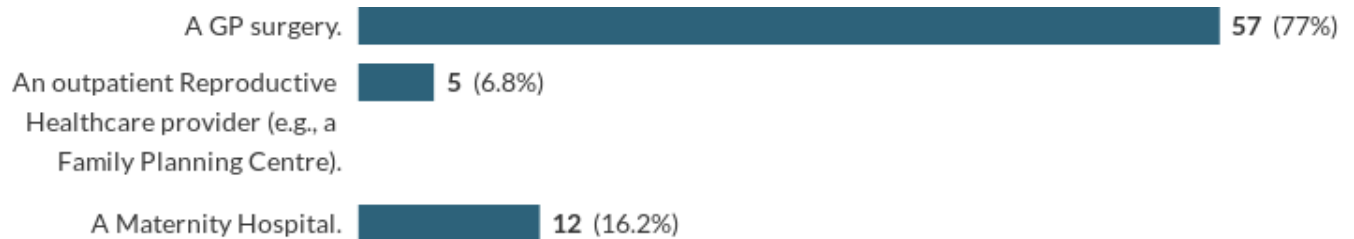
Participants were recruited from 15 counties across the Republic of Ireland. Over one third were in Dublin and over one fifth were in Cork.

**Figure 1 -Location of respondents by county.**



Of those to complete the questionnaire, the majority (77 percent) were GPs.

**Figure 2 - Which of these answers best describes your place of work.**



The 12 respondents working in maternity hospitals named these as:

1. Cork University Hospital (CUH),
2. The National Maternity Hospital NHM (often called Holles Street) in Dublin,
3. The Coombe Hospital in Dublin,
4. University Hospital Galway, Cork University Maternity Hospital (CUHG),
5. University Maternity Hospital Limerick and,
6. The Rotunda in Dublin.

### *The prevalence of protests*

The research asked whether there had been protests outside of a provider's service. The majority had not been directly impacted however a sizable minority had experienced protests.

**Figure 3 – Have there been protests outside your service.**



Cross-tabulation of these responses gives further insight into where these protests happen.

**Table 1- Location of protests by provider type.**

Have there been street protests outside your healthcare provider?	Which of these answers best describes your place of work.			No answer	Totals
	A GP surgery.	An outpatient Reproductive Healthcare provider (e.g., a Family Planning Centre).	A Maternity Hospital.		
Yes	20	3	10	0	33
No	37	2	1	0	40
Don't Know	0	0	1	0	1
No answer	0	0	0	1	1
<b>Totals</b>	<b>57</b>	<b>5</b>	<b>12</b>	<b>1</b>	<b>75</b>

All participating providers from hospital settings report protests therefore there have been gatherings outside Cork University Hospital (CUH), The National Maternity Hospital NHM (often called Holles Street), The Coombe Hospital, University Hospital Galway, Cork University Maternity Hospital (CUHG), University Maternity Hospital Limerick and The Rotunda.

These are not the only hospitals impacted as other sources have reported protests outside Lifford hospital in Donegal<sup>17</sup> and Our Lady of Lourdes Hospital in Drogheda Co. Louth.<sup>18</sup> There are also regular protests outside health clinics in Kilkenny.<sup>19</sup> Overall, there are reports of protests in two-thirds of all counties where providers responded namely,

1. Cork
2. Donegal
3. Dublin
4. Galway
5. Kildare
6. Limerick
7. Roscommon
8. Tipperary
9. Waterford
10. Wicklow.

<sup>17</sup> McNulty, 2021.

<sup>18</sup> Coyne, 2019.

<sup>19</sup> The Irish Examiner, 2019b.

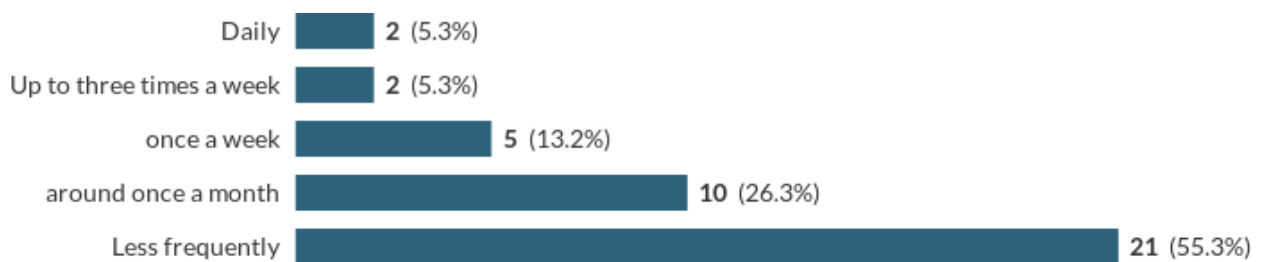
Some respondents believed rural clinics are more likely to be targeted. For example, one GP who hadn't had any protesters outside their surgery, wrote,

*"I think rural GPs are much more vulnerable, so they need safe zones to protect patients".*

However, of 16 Dublin-based GPs, half reported protests outside of their practice.

### *Frequency of protests.*

**Figure 4 - How often are these protests?**



As figure 4 demonstrates, frequency varies from daily (for two providers) and less than once a month for the majority (55 percent). Qualitative comments reveal the nuance behind this question. One provider responded,

*"I feel the frequency of gatherings isn't as relevant as it sounds, as every gathering is too much, and knowing they can pop up when they like is intimidating in itself. We need a clear and consistent zero tolerance approach".*

Several people reported a decrease in protests during the Covid-19 pandemic and of a more recent uptick in activity since restrictions have eased. For those who are not currently impacted by protests, there was a definite sense that this could happen in the future. This is captured in the following comment,

*"So far, I have not had any protests and I think that is because people don't know I am providing yet. I am worried about protests though as there are a few people living across*

*the road from surgery who are strongly against abortions. I would welcome a safe zone as I might need this one day soon.”*

### ***The types of protest.***

The most common form of protest reported was silent street gatherings. This was followed by reports of people displaying posters and placards often with graphic images of fetuses. Both actions often occurred simultaneously for example there were reports of people,

*“handing out anti-choice leaflets and praying and trying to influence clients as they approach the clinic”.*

And,

*“praying, displaying posters fetuses and passing out fliers”.*

There were also a report of people entering GP surgeries to complain about the fact that they prescribed the abortion pill and of,

*“little white crosses left outside for several weekends”,*

something many people find particularly distasteful given the way people experiencing pregnancy loss are often also entering and leaving maternity hospitals in particular but also GP surgeries.

### ***The situation in Northern Ireland.***

Although not captured in this report, there has also been an protests outside clinics in Northern Ireland (NI). There have been protests outside providers in Newry, Derry and Belfast and the numbers of protests is growing.<sup>20</sup> Members of the Alliance for Choice group are amongst those who offer their services as clinic escorts. Members relay how they have been spat at, assaulted, followed and filmed as they provided this service.<sup>21</sup>

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<sup>20</sup> <https://www.bbc.com/news/uk-62009477> Accessed 6th July 2022.

<sup>21</sup> [https://twitter.com/All4Choice/status/1507048169275858947?s=20&t=kwCgnEgsVoJ9VJ\\_Y7kBC0w](https://twitter.com/All4Choice/status/1507048169275858947?s=20&t=kwCgnEgsVoJ9VJ_Y7kBC0w)  
Accessed 6 July 2022

This is just one problem facing people who need abortion care as, despite being decriminalised in 2019, abortion services are yet to be fully commissioned. The NI Abortion and Contraception Taskgroup recommend the creation of exclusion zones outside sexual health clinics and pregnancy counselling centres asserting,

*“While NIACT believes in upholding the right to assemble and the right to freedom of speech, we assert that this should not interfere with the fundamental right for women, girls and pregnant people to seek scientifically valid information and receive reproductive health care. We believe that the space outside or in close proximity to an abortion service or pregnancy counselling centre is not an appropriate location to oppose abortion provision. Therefore, we would strongly recommend that safe access zones are introduced outside abortion services and pregnancy counselling centres.”<sup>22</sup>*

Section four of the report provides a timeline of events which include the state of play regarding legislation in both jurisdictions. This includes the status of legislation currently under consideration both North and South of the border.

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<sup>22</sup> NIACT, 2021, p. 7.

## *2. The impact on service providers.*

Despite the presence of protests, the dominant reaction to whether they had affected GPs' capacity to provide abortion services was that they were not deterred. One reported that the protesters reminded them of the importance of providing abortion care stating,

*“Unsettling but did not make me consider not providing. If anything, it strengthened my resolve. Lots of support from patients/staff made me worry for patients, however.”*

This concern for patients and staff was the strongest theme to emerge as well as some concerns for their own wellbeing. To give some examples one GP tells us,

*“It has not prevented me from continuing, but it is intimidating”.*

Another writes,

*“it caused staff in the surgery a lot of distress in the first few months of provision”.*

And again,

*“upsetting for our patients and staff”.*

Others reported a ‘chill effect’ as captured in these two comments.

*“the chilling effect on clients adds to their stress and worry levels”.*

And,

*“has a chilling effect on your provision as it impacts other non-providing doctors...”.*

Another GP shares how protests outside “another healthcare facility locally” led to an initial decision not to register with myoptions.ie which they later reversed.

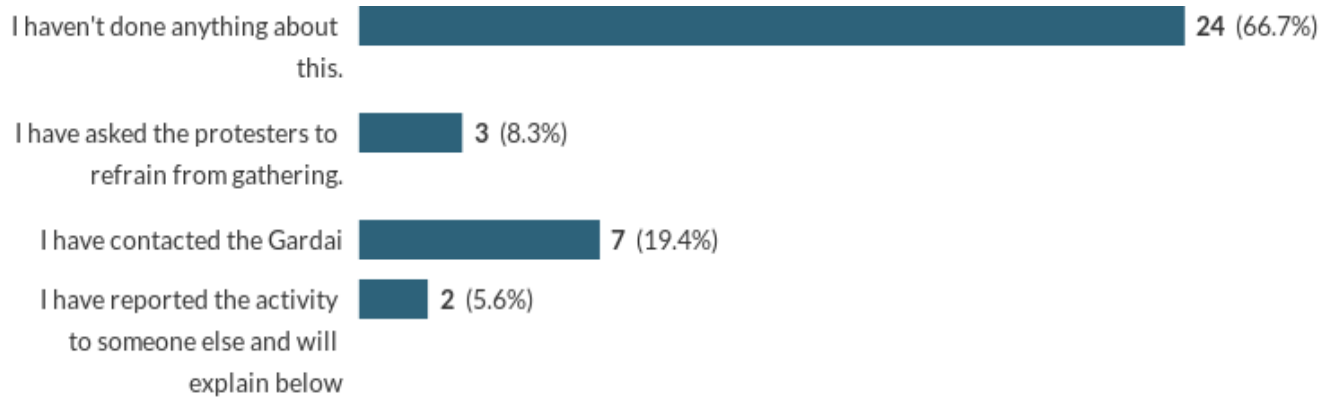
One GP also rescheduled some appointments because of the presence of protesters (although it is not clear if this relates to all patients or those seeking abortion services).

There are concerns about the negative impact for a psychology service that one GP surgery shares a premises with. Another raises a similar concern as follows,

*“The protest did not affect our practice but was upsetting to co-located pharmacy. Other practices a lot more severely affected”.*

The research asked providers had done about the presence of protesters.

**Figure 5 - Have you taken any of the following actions? Please tick as many as apply.**



As you can see, eight percent approached the protesters themselves and 19 percent contacted the Gardaí. Those who reported that they had done ‘something else’, two had informed hospital management and one person had posted on social media.

One respondent, who is not against SAZs justified their reason for not taking action as follows,

*“more than 20m from the surgery therefore not trespassing so choose to do nothing”.*

Where people did report protests to the Gardaí, one Dublin-based GP described the Gardaí as *“very receptive and helpful”* and explains that they arranged to drive by the clinic which did appear to deter protesters. Another urban based GP provider shared,

*“Local community gardaí did walk by and ring me when there was a large protest in the city early 2019, they were supportive and advised make contact if any trouble”.*

Others reported being told there was little that could be done because the actions are not illegal, or, as one person puts it,

*“They advised that nothing could be done as no law was being broken so we have opted to ignore the prayers!”*



### 3. Provider support for legislation.

There was majority support (77 percent) for the introduction of safe access zones. Sixteen percent were not in favour of such a law and the remaining 7 percent were not sure.

**Figure 6 – Are you in favour of legislation on Safe Access Zones.**



Of the 77 percent who supported calls for legislation, the same issues and concerns are repeated with the most common response is because of the impact on their patients. For example, one respondent shared buffer zones are,

*“Absolutely essential and needed urgently to protect the vulnerable patients who are doing something legal and emotionally taxing”.*

For someone else,

*“the groups are intimidating for staff and for all using our services – affects privacy of our patients”.*

Others too are concerned about the impact on staff with one writing,

*“it is extremely upsetting for my staff”.*

One GP expresses their own worry,

*“that the protests could get more physical or aggressive”.*

Given Ireland’s model of primary care where the GPs are the principal provider, part of the problem is that protesting outside a provider impacts a much broader range of people than those seeking an abortion. One doctor notes that protests can be,

*“profoundly upsetting for women who are seeking family planning health care”.*

Some acknowledge the tension between the right to protest but are nonetheless supportive. This is best captured in the comment,

*“I believe in free speech but there may be an exception made for protesting outside health care provision facilities some of whose users may be very vulnerable.”*

The reasons some providers are unsure is best summed up by this comment,

*“I’m not sure if such an exclusion zone would be constitutional, or even conform to international standards of freedom of assembly and freedom of expression.”*

Where providers were against the introduction of SAZs. Two comments capture the reasons why,

*“I am a GP provider, founder member of START and see a large cohort of women for TOP (Termination of Pregnancy). However, I believe in the absolute right to assemble / protest with freedom of speech. This should of course have consequences if hateful. I do not believe offensive speech should be banned. I have some concern about captive audiences but not for GP.”*

And again,

*“I believe in the freedom of assembly & free speech, as long as nobody is intimidated. This then could be handled by the Gardaí, if it occurred.”*

Another makes the point,

*“respect for differences should be hallmark for modern Ireland”.*

Minority objections from some providers is not uncommon and has been captured internationally where some suggest the way to combat the issue is to move abortion care inside large hospitals.<sup>23</sup>

Twelve providers answered a final question inviting further comments. Some were grateful that the research was being carried out, others use the space to share examples where their own population of patients has taken the time to offer support to GPs for continuing to offer abortion services despite protests. Some use the space to affirm their commitment to abortion access and some to again make the case for safe access zones.

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<sup>23</sup> Robinson, 2017.

#### 4. *Timeline to date.*

Across the globe, the introduction of abortion services has, in the main, been pushed forward by prochoice activists.<sup>24</sup> The same thing can be said of safe access zones. For example, the byelaws first introduced in Ealing in the UK were because of a sustained campaign by the group *Sister Supporter*. Their work has since extended to support successful campaigns in Richmond upon Thames and Manchester in 2020. However there are reports of these being defied.<sup>25</sup> Similarly, in Scotland, current attempts to introduce legislation has been spearheaded by the campaign group *Back off Scotland*.<sup>26</sup> Further afield, it was *Our Choice WA* who forced changes to laws in Western Australia.<sup>27</sup>

A similar pattern has emerged in Ireland where there has been sustained pressure from prochoice activists including *The Abortion Rights Campaign (ARC)*, *The National Women's Council*, and the Limerick-based campaign group *Together for Safety*. This has been alongside consistent work by some journalists and some opposition TDs in highlighting the ongoing presence of protesters. Many journalistic sources have been referenced through this paper.

Overleaf you will find a selected history of key events.

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<sup>24</sup> In the UK, the ALRA, National Council of Women, Women's Cooperative Guild and the Family Planning Association, were all instrumental in introducing abortion law in 1967. In the US, the now overturned *Roe v. Wade* Supreme Court ruling didn't happen in a vacuum but was in the context of what Leslie Reagan (1997, p. 217) describes as "a mass movement for women's reproductive rights" that developed as part of wider anti-war and civil rights activism. In Ireland, sustained pressure from a persistent 'repeal movement' undoubtedly influenced the eventual decision to call a referendum on abortion in 2018 (Fitzsimons, 2021).

<sup>25</sup> <https://twitter.com/swoopingdeath/status/1388167275417686019> Accessed 9th September 2021

<sup>26</sup> <https://www.backoffscotland.com/> Accessed July 2 2022.

<sup>27</sup> This was by convincing the government to launch a public consultation which then led to the *Public Health Amendment (Safe Access Zones) Bill 2020*. This brought WA in line with other Australian territories and followed High Court proceedings that unanimously determined that safe Access Zones "do not impermissibly infringe the implied freedom of political communication" (Marie Stopes Australia, 2020).

## December 2018

- Simon Harris Minister for Health for a Fine Gael led government pledges to bring forward standalone legislation on safe access zones by the summer of 2019. This will address the absence of such protections within the *Health (Regulation of Termination of Pregnancy) Act*. Harris claimed its inclusion could have slowed down the legislation therefore delaying the introduction of abortion services.

## January 2019

- On the 3<sup>rd</sup> of January, the first protest was reported outside a GP clinic in Galway. This was just two days after services were introduced. In a radio interview that day, Ailbhe Smyth, the convenor of the Coalition to Repeal the Eighth and the Co-Director of the Together for Yes campaign described the protests as “public harassment ... deliberately seeking to deter women from accessing an entirely lawful health service”.<sup>28</sup> Since then protests have continued with predictable regularity across a range of counties.<sup>29</sup>
- The government’s *Legislative Programme Spring Session 2019* document lists the ‘Safe Access Bill’ as included in their plans and states “work is underway”.<sup>30</sup>
- The abortion Rights Campaign (ARC) Ireland’s largest voluntary reproductive rights organisation encouraged people to directly contact the Minister for Justice as well as their local TD (Irish Member of Parliament) to ask TDs to raise the absence of safe access zones in the Dáil.<sup>31</sup>

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<sup>28</sup> The Irish Examiner, 2019a.

<sup>29</sup> For an example see McGlynn 2021

<sup>30</sup> Office of the Government Chief Whip, 2019, p. 6.

<sup>31</sup> <https://www.abortionrightscampaign.ie/2019/01/08/lets-talk-about-why-safe-access-zones-are-urgently-needed-outside-health-care-facilities-providing-abortion/>. Accessed 2 July 2022.

## *February 2019*

- A bye-law is successfully proposed to Louth county council to prevent protests outside reproductive healthcare providers.<sup>32</sup> This is the first of a number of bye-laws also passed in Dublin, Wicklow, Sligo, Galway and Limerick. Ultimately these bye-laws have not had an impact as legal advice given to councils is that central legislation from the Oireachtas is needed.

## *May 2019*

- Louise O'Reilly, TD for Sinn Féin, raises a question in the Dáil about the absence of promised legislation. She is assured by Simon Harris that this would be forthcoming.
- Members of the Irish College of General Practitioners (ICGP) call for the introduction of legislation at their annual general meeting.<sup>33</sup>
- Representatives from the HSE meet with Garda representatives during which Gardaí relayed their opinion that legislation is not necessary. The course of action agreed is a letter to each local superintendent advising them of the services in their area and suggesting they meet with providers to discuss any issues.<sup>34</sup>

## *June 2019*

- Harris commissions a report on the experience of SAZs in other countries (Reddy, 2019) and a rapid evidence assessment (REA) of peer-reviewed articles on the impact of anti-abortion protesters (Reddy and Nolan, 2019) which concurs with international evidence on the negative impacts of protests.

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<sup>32</sup> Coyne, 2019

<sup>33</sup> Cullen, 2019.

<sup>34</sup> Loughlin, 2022a.

## September 2019

- Garda commissioner Drew Harris wrote to Simon Harris to assure him that safe access zones are not required rather public offence laws are sufficient. Drew Harris stated, “*no incidence of criminality has been reported or observed*” and that there was “*no evidence to suggest that there is threatening, abusive or insulting behaviour directed towards persons utilising such services*”.<sup>35</sup>

## January 2020

- Around one-hundred protesters gather outside the National Maternity Hospital, some wielding mini-coffins. Health Minister Simon Harris says he is “*appalled*” by the actions of the protesters and again promises action on safe access zones.<sup>36</sup>
- Fine Gael led government is dissolved without advancing this promise and despite repeated condemnations of protesters by senior political figures.
- The Irish Council for Civil Liberties publish a rights-based analysis of safe access zones. They dismiss suggestions this would negatively impact the right to assemble and speak freely.<sup>37</sup> They state,

*“The Irish Government has a duty to protect women and pregnant people from unwanted harassment, intimidation and distress when accessing abortion services and it has a similar duty to those providing such services. It must take steps to prevent such activities and to protect the fundamental right to safe access to private medical care. ICCL recommends that, in line with previous commitments, the Minister for Health should introduce legislation providing for safe zones around abortion providers in Ireland”.*<sup>38</sup>

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<sup>35</sup> Bray, 2019.

<sup>36</sup> Ryan P. 2020.

<sup>37</sup> ICCL, 2020.

<sup>38</sup> Ibid, p. 8

- Research carried out by The journal.ie found 80 percent of women and 74 percent of men supported the creation of buffer zones.<sup>39</sup>

## June 2020

- Ireland's new Programme for Government (which guides the work of a coalition government of Fine Gael/Fianna Fail and The Green Party) commits to the introducing legislation in the lifetime of this government.<sup>40</sup> Its inclusion was insisted on by the minority Green Party with TD Nessa Horgan describing it as "*one of the most important commitments*" in the programme for the Greens and something they "*fought hard for*".<sup>41</sup>

## October 2020

- The first series of '40 days for life' vigils are organised in Cork, Dublin, Limerick and Waterford.<sup>42</sup> *40 days for life* originates in the US and is the banner under which a growing number of protests in the UK have been organised outside abortion care providers.

## March 2021

- Holly Cairns, TD with the Social Democrats questions the Minister for Health Stephen Donnelly about his plans. He appears to suggest a change of tone responding, "... *there has been a limited number of reports of protests or other actions relating to termination of pregnancy*" describing this as "*an extremely positive development!*" He further stated,

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<sup>39</sup> Ryan, 2020.

<sup>40</sup> Government of Ireland, 2020, p. 47.

<sup>41</sup> Burns, 2021.

<sup>42</sup> The Life Institute, 2020.

*“Where problems do arise with protests outside health care services, there is existing public order legislation in place to protect people accessing services, employees working in the service and local residents ... The Department of Health has previously liaised with An Garda Síochána around safe access to termination of pregnancy services, and the Garda National Protective Services Bureau issued a notice to all Garda Stations raising awareness about the issue. The notice directed that any protests be monitored, and breaches of existing law dealt with”*.<sup>43</sup>

## May 2021

Senator Paul Gavan of Sinn Féin raised the issue in the Seanad (the upper house of the Oireachtas) stating,

*“Protests by anti-choice campaigners are happening across the state outside maternity hospitals where women are accessing healthcare. Every single day over Lent there were protests outside the maternity hospital in Limerick. People should not have to access healthcare like this. Women should not have to experience protests as they enter or exit hospitals especially at such a vulnerable and sensitive time.”*<sup>44</sup>

## August 2021

- A newspaper report by Elaine Loughlin of the Irish Examiner claims the government has scrapped plans to introduce safe access zones.<sup>45</sup> Donnelly quickly responds saying he is “fully committed” and re-iterates that their exclusion from the *Health (Regulation of Termination of Pregnancy) Act 2018* was because of “a number of legal issues ... which necessitated further consideration”.<sup>46</sup>

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<sup>43</sup> <https://www.oireachtas.ie/en/debates/question/2021-03-03/section/870/> Retrieved 01 September, 2021.

<sup>44</sup> <https://www.sinnfein.ie/contents/60753>. Accessed 01 September 2021.

<sup>45</sup> Loughlin, 2021.

<sup>46</sup> Burns, 2021.



- Dr Mary Favier (Doctors for Choice) calls for safe access zones and describes protests outside her service as negatively impacting all her patients not just those seeking reproductive healthcare.<sup>47</sup>
- *Supporting Women Newry*, a campaign and support organisation established to counter the impacts of anti-abortion protests outside healthcare providers in Newry wrote an open letter to *Precious Life* urging them to stop their protests claiming their behaviour is “*impacting on the emotional and psychological well-being of people*”.<sup>48</sup>

## *September 2021*

- On the first day of the Dáil sitting for 2021-2022, Health Minister Stephen Donnelly once again promises to prioritise a bill to prevent anti-abortion protests outside healthcare providers.
- The Abortion Rights Campaign (ARC) organise a large demonstration outside the Dáil and make the introduction of such laws one of their principal demands. This is the first street demonstration since 2019 because of coronavirus restrictions.

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<sup>47</sup> McGlynn, 2019.

<sup>48</sup> O'Hare, 2019.

## October 2021

- Senator Paul Gavan introduced a private members bill - *The Safe Access to Termination of Pregnancy Services Bill, 2021* to the Seanad.<sup>49</sup> The bill is co-signed by Senators from the Labour Party, Fianna Fail, the Green Party and by some independents. It proposes a 100-meter area around healthcare providers within which protests are prohibited and where no communication relating to abortion can take place. This bill must pass through a series of Seanad phases before it moves to the Dáil where it will then be debated. Both houses of parliament must approve it before the President can sign it into law.
- Seanad Leader Lisa Chambers (Fianna Fail) repeats the Department of Health are in the process of drafting their own bill on the matter which would be put before the Dáil in due course.<sup>50</sup>

## February 2022

- Ivana Bacik, Leader of the Labour Party reported in the Dáil that, according to the campaign group Together for Safety, “*anti-choice activists have been obtaining information about dates and times of appointments for terminations so they can harass women*”. She criticises the government’s intention to bring forward its own legislation instead of supporting the private members bill currently making its way through the Oireachtas.<sup>51</sup>
- In moving his private members bill forward, Paul Gavan re-iterates the role of prochoice activists in advancing change stating “*all credit for this legislation belongs to Together for Safety and its tireless campaigners across the country*”.<sup>52</sup>

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<sup>49</sup> The bill and an update of its progression through the Oireachtas can be viewed here: <https://www.oireachtas.ie/en/bills/bill/2021/130/>. Accessed 6<sup>th</sup> July 2022.

<sup>50</sup> O'Halloran, 2021.

<sup>51</sup> <https://www.oireachtas.ie/en/debates/debate/dail/2022-02-09/10/> Accessed July 6 2022.

<sup>52</sup> <https://www.oireachtas.ie/en/debates/debate/seanad/2022-02-10/11/>. Accessed July 2 2022.

## March 2022

- Minister for Health Stephen Donnelly launches the *Women’s Health Plan 2022-2023* in March 2022 which states, “we will advance proposals to safe access to termination of pregnancy services in 2022” as part of a promise to be “responsive to the emerging issues and develop policy and legislative responses to women’s health issues as they arise”.<sup>53</sup>
- The Minister for Health publicly indicates the government will vote against Paul Gavan’s private members bill, Stephen Donnelly claims to be “fully supportive of the spirit and intent” but cites shortfalls that could negatively impact a person’s right to have a supporter accompany them.<sup>54</sup>
- In Northern Ireland (NI), the *Abortion Services (Safe Access Zones) Bill* is approved by Members of the Legislative Assembly (MLAs). This bill was proposed by Clare Bailey the then leader of the NI Green Party

## April 2022

- Government legislation Programme Summer Session 2022 lists its own *Safe Access to Termination of Pregnancy Services Bill* and shares its status as “Heads in preparation”<sup>55</sup>

## May 2022

- The office of the Attorney General for Northern Ireland refers the *Abortion Services (Safe Access Zones) Bill* to the UK Supreme Court to determine if it is compatible with European human rights laws. The bill makes it an offence for anyone to seek influence

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<sup>53</sup> Department of Health, 2022, p. 31.

<sup>54</sup> Moore, 2022.

<sup>55</sup> Department of the Taoiseach, 2022, p. 5

directly or indirectly a person attending a designated abortion clinic. It also offers protections for staff.

## *July 2022*

- There are reports of an increase in protests in Northern Ireland spearheaded by the group Against Abortion NI who protested outside Newry's Daisey Hill hospital.
- The UK based human rights organisation JUSTICE are granted permission to intervene in the NI Supreme Court case. JUSTICE will argue the law does not impact the ECHR's protected rights to assembly and free speech.<sup>56</sup>
- The Irish Examiner reports a memo was circulated to cabinet ministers on the 11<sup>th</sup> July detailing a General Scheme of a Bill which has now been finalised. Senior council in human rights and the Attorney General were consulted in preparing this bill and it is to be fast tracked through the Dáil and Seanad.<sup>57</sup>

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<sup>56</sup> Irish Legal News, 2022

<sup>57</sup> Loughlin, 2022b

## 5. Conclusion

This small-scale study has evidenced negative impacts from some anti-abortion protesters who gather outside abortion care providers across Ireland. These protests impact 44 percent of surveyed providers and vary from silent gatherings to patients and staff being approached. They were reported across ten counties - Cork, Donegal, Dublin, Galway, Kildare, Limerick, Roscommon, Tipperary, Waterford and Wicklow with some surgeries enduring protests every day.

For those who did not have gatherings outside their clinics at the time of the research, there were fears these could happen in the future. This is an understandable concern given the recent erosion of reproductive healthcare rights most notably in the US. Even before the overturning of Roe in June 2022, there were increases in anti-abortion protests in the US<sup>58</sup> and in Britain.<sup>59</sup>

Seventy-seven percent of providers were in favour of legislation, a number not dissimilar to public opinion measured at 80 percent. Further research is required to quantify anti-abortion protests and to inquire into the extent to which these actions are contributing to the low uptake of GP providers in Ireland.

The timeline presented to date suggests that actions will not be forthcoming from government unless there is consistent pressure from the Irish prochoice movement.

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<sup>58</sup> Greene Foster et al. 2013; Glenza, 2021.

<sup>59</sup> Lowe & Hayes, 2019, Lowe & Page, 2022.

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## Appendix 1 – Letter of Approval Maynooth University

**MAYNOOTH UNIVERSITY RESEARCH ETHICS COMMITTEE**  
MAYNOOTH UNIVERSITY,  
MAYNOOTH, CO. KILDARE, IRELAND



Dr Carol Barrett  
Secretary to Maynooth University Research Ethics Committee

04 June 2021

Dr Camilla Fitzsimons  
Department of Adult and Community Education  
Maynooth University

**Re: Application for ethical approval for a Project entitled: Gathering information on Anti-Choice Protests**

Dear Camilla,

The above project has been evaluated under Tier 2 process, expedited review and we would like to inform you that ethical approval has been granted.

Any deviations from the project details submitted to the ethics committee will require further evaluation. This ethical approval will expire on 30/09/2021.

Kind Regards,

A handwritten signature in black ink, appearing to read "Carol Barrett".

Dr Carol Barrett  
Secretary,  
Maynooth University Research Ethics Committee

Appendix 2 – Questionnaire circulated to Healthcare Workers

What county are you in?

[drop down menu provided]

Which of these answers best describes your place of work.

- A GP surgery.
- An outpatient Reproductive Healthcare provider (e.g., a Family Planning Centre).
- A Maternity Hospital.

a. If you choose a maternity hospital, we would be grateful if you would name which hospital here.

b. Have there been street protests outside your healthcare provider?

- Yes
- No
- Don't Know

Which of these statements best describes the type of protest. (please note we have become aware that this question only allows one response and we are unable to change this setting, apologies). If possible please add additional information in the free-space below.

- Silent street gatherings.
- People praying loudly outside your service
- People handing out anti-choice leaflets
- People displaying posters and placards
- Protesters approaching and engaging with people entering your service
- something else that I will describe myself

a. If you have chosen something else, or are impacted by more than one type of protest, can you please explain this below.

1.

How frequent are these protests.

- Daily
- Up to three times a week
- once a week
- around once a month
- Less frequently

Have you taken any of the following actions? Please tick as many as apply.

- I haven't done anything about this.
- I have asked the protesters to refrain from gathering.
- I have contacted the Gardai
- I have reported the activity to someone else and will explain below

a. If you answered 'I have reported the protesters to someone else' could you explain whom below.

b. If you reported the protests (for example to Gardai), could you describe what, if any, feedback/response you received?

If you have been impacted by protests outside your clinic/surgery or hospital, in what way (if any) has this affected your capacity to provide abortion services.

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Are you in favour of the introduction of legislation for Safe Access Zones?

- Yes
- No
- Not sure

a. If you would like to say more about your answer please feel free to explain here.

What else would you like to say that we haven't thought to ask?

< Previous

Finish ✓

