

8th Amendment - Racism and reproductive health: migrant rights and the Irish abortion referendum

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Luke Butterly reports on the work of Migrants and Ethnic Minorities for Reproductive Justice (MERJ) in organising around the upcoming Irish abortion referendum.

Contents

- [Not Taking The Boat](#)
- [Direct Provision](#)
- [Racism and reproductive health](#)
- [Referendum](#)
- [Solidarity](#)

"A lot of people have heard internationally about the 8th Amendment, but don't know the issues of our communities," says Emily Waszak, a co-founder of Migrants and Ethnic Minorities for Reproductive Justice (MERJ).

Like most of Ireland, Emily is busy ahead of Friday's referendum in the Republic of Ireland, where citizens will vote whether or not to repeal the 8th Amendment to the Constitution. Introduced in 1983, it enshrined in to the constitution an effective ban on all legal abortions. If successfully repealed this week, it would allow parliament to pass legislation regulating abortion.

MERJ describes themselves as: "a platform for and of migrant and ethnic minority women who speak for ourselves on the issues around reproductive justice in Ireland." Only Irish citizens have a vote in the referendum, so many of those affected by the laws won't have a say in them. Moreover, as Emily says, offering such a platform is necessary "because even though obviously most of the high profile cases are migrant women, you don't hear the migrant voice about those cases very often."

Not Taking The Boat

Due to the restrictive laws in Ireland, around 12 women a day make the difficult journey to England to access abortion. But, between the costs of travel, accommodation, the fees of a private clinic (£1000+), getting time off-work, and arranging care for dependents, for many the costs of accessing abortion are prohibitive.

Emily: "These are all barriers that a lot of people face - especially these economic barriers - but that really affect migrants more acutely because of the ways that immigration status and visa restrictions affect travel and freedom of movement."

Introduced in 1992 following the 'X Case' where a suicidal teenager, pregnant as the result of rape,

was ultimately allowed to travel to England to procure an abortion, the 13th Amendment allows women to legally travel abroad for abortions. Yet Cristina, also a member of MERJ, notes how the safety valve of this amendment discriminates against those who can't travel.

Cristina highlights the case of Aisha Chithira, a Malawi born woman who settled in Ireland, who died in a taxi after leaving an English hospital for treatment she should not get at home.

Aisha had a history of fibroids and became pregnant. She decided to have an abortion having miscarried twins at 30 weeks and feared complications having had a child already by C-section. She could not procure this procedure in Ireland and so had to wait a month to get a visa to travel to the UK.

At 22 weeks she was at a late stage in the pregnancy and her fibroids made the procedure more complex. Aisha complained of dizziness and pain but was told she could not stay overnight in the clinic and so left to stay in her cousin's house. She had suffered a tear to her uterus and bled to death overnight.

Having to wait for a visa to travel to the UK heightened the risk of complications for her and ultimately caused her death. Had she been able to procure an abortion in Ireland, she would probably be alive today.

Direct Provision

The issues around reproductive health can be most acute for those seeking asylum in Ireland. Along with its abysmal record on abortion and women's rights, Ireland's Direct Provision asylum system has received sustained local and international criticism. People live in cramped conditions, with little privacy and often far from local communities. Asylum cases are lengthy (average is almost four years, although many are longer), people have no right to work or access to benefits, and must live off £20 a week. Getting permission to leave Ireland - and separate permission to enter the UK - is timely and complicated.

Two decades after the 'X' case, which gave women the right to travel for abortions, 'Ms Y' was denied this right. Like the young woman in the X case, Ms Y was also a suicidal teen pregnant as a result of rape. She attempted to cross the border but, as she was seeking asylum in Ireland and did not have permission to enter the UK, she was turned back. Forced to carry the pregnancy to term, Ms. Y went on hunger strike. She was hydrated against her will, and the baby was delivered via caesarian section at 25 weeks.

Cristina emphasizes the effect of being forced to wait: "In Ms. Y's case, waiting forced a rape victim to carry the pregnancy to term. In Savita's case, waiting was a death sentence."

Savita Halappanavar is perhaps the most known woman to die as a consequence of our laws. A young dentist living in Galway in 2012, Savita requested several times for her pregnancy to be terminated because she was miscarrying. Even with her life in danger, her requests for abortion were refused; with hospital staff tell her Ireland is "a Catholic country". Days later, she died from septicaemia. Her death sparked mass vigils and demonstrations across the country, and was a pivotal moment in the fight for repeal.

Racism and reproductive health

Emily says MERJ “see the 8th as connected to a larger culture of misogyny and institutional & structural racism.” While that racism has made itself visible in the No campaign – like when Vicky Wall from the Life Institute told a BBC journalist that we should only be concerned with white or ‘native’ Irish women who access abortions – or in the vox-pop conspiracy theories about the ‘great replacement’, it is often unseen by those not affected.

MERJ are keen to highlight that the issues facing migrant and ethnic minority do not start and end with the 8th. Emily says it’s important for them to “shine a light on maternity services in Ireland, because there is this notion that Ireland has some of the safest maternity services – but that’s just not true – especially not for migrant women.”

Maternity Advocacy group AIMS have highlighted how “40 percent of maternal deaths in Ireland are migrant women, despite only making up 17 percent of the general population.” Again even outside of crisis pregnancies the high profile deaths in maternity hospitals have often been by migrant women, like Bimbo Onanuga, or Malak Thawley.

Emily stressed that even if the 8th is repealed, migrant women risk being unable to access abortion equally:

If you look at the proposed legislation, you still have waiting periods and conscientious objection. Which is going to disproportionately affect access for people in rural communities, for people seeking asylum, in Direct Provision, outside of Dublin.

Your medical card is tied to your GP, and you have to access health care through them. So if your GP conscientiously objects, how are you going to get that service?

You’ll have to travel, you’ll have to pay out of pocket. And there is a [72 hour] waiting period, so you might have to travel twice. Or arrange accommodation.

These costs will be a barrier to most, but if you are on £20 a week and can’t work – it will make it inaccessible. Further, if you leave your bed in Direct Provision for more than two nights you risk losing your place, and rehoused in a totally different part of the country.

Referendum

MERJ have been engaging with Together For Yes, the national civil society campaign, as well as engaging in their own work. They’ve been canvassing, running street stalls, having conversations with migrant groups and communities, and hosting awareness raising events.

As Emily says, “We also bring knowledge of the world beyond Ireland, which I think is really important.” Many members come from countries where abortion is legal. At a recent event in a Dublin City social centre, MERJ members from several countries – including Malaysia, Brazil, Poland, Romania, Ghana – spoke about the situation in their countries.

Traveller activist Eileen Flynn spoke about issues in her community, which faces pervasive discrimination in Ireland. Describing her own journey from anti-choice to pro-choice activist, she quoted research which showed that only 41% of Traveller women trust medical professionals on reproductive health issues, compared to 84% of settled women.

Solidarity

To MERJ, solidarity means “showing up for people on the sharp of oppression, even if their oppression doesn’t look the same as ours.”

This is illustrated regularly. Our Table - a refugee-led project that aims to “highlight the need to end Direct Provision in Ireland” - recently held a ‘Hummus for Repeal’ event to fund-raise for MERJ. And a recent MERJ meeting was cut short when they members went to help translate and support 40 Brazilian tenants resisting an eviction.

During this referendum and the decades that preceded it, there has also been constant support for repeal from activists in the north of Ireland. While legally part of the UK since the island was partitioned in the 1920s, Britain’s abortion legislation does not extend to Northern Ireland. Instead it has draconian abortion laws similar to those in the Republic.

MERJ are keen to play their part in returning that cross-border solidarity. They were part of the last annual Belfast Rally for Choice, and have plans to travel up after the referendum and help activists in their campaigning, where people have already reached out to explore how MERJ can help.

MERJ operate under the idea of “nothing about us without us”. As Emily says “we are marginalised within a larger campaign, and again within a larger feminist movement - I think one thing people who are not in Ireland can do is share our narrative.”

Cristina says that “needing outstanding legal and financial resources to take care of my reproductive health...is a constant pressure”. The road to reproductive justice is steep, but a Yes vote on Friday will go a long way to ease that pressure.

Luke Butterly

P.S.

* Verso, 23 May 2018:

<https://www.versobooks.com/blogs/3840-racism-and-reproductive-health-migrant-rights-and-the-irish-abortion-referendum>

* You can find more about MERJ here:

<https://www.facebook.com/MERJIreland/>

and can support by donating to Abortion Support Network who help people who need to travel for abortion care:

<https://www.asn.org.uk/support-us/>

and Alliance For Choice who campaign for reform in the north of Ireland:

<http://www.alliance4choice.com/donate-2/>