**The impact of Ireland’s abortion law – Cases**

**“These people would let me die, just as they did with Savita”**  
  
Little has changed in recent years despite the public outrage at the 2012 death of Savita Halappanavar in University Hospital Galway from infection after medical staff refused to induce an abortion because the foetus had a heartbeat.   
  
Another woman, **Lupe**, told Amnesty International that staff in the same hospital refused her an abortion despite her arriving with heavy bleeding, just a few months after Savita’s death. She had to travel to her native Spain to receive an abortion. Lupe said that the foetus showed no signs of life, but doctors said they couldn’t do anything:

“We could see the embryo perfectly. It was a tiny 3mm embryo… dead, I was destroyed. The embryo stopped growing when it was four or five weeks. That means I had had a dead embryo inside my womb for more than two months…During that time I was feeling really scared since it had become clear to me that, if any complication raised, these people would let me die, just as they did with Savita...”  
  
In December 2014, healthcare providers said the law obliged them to keep a clinically-dead pregnant woman on life support, against her family’s wishes, until the 15-week foetus had reached the point of viability. Doctors spoke to Amnesty International of their frustration with Ireland’s vague law that allows abortion when there is an immediate risk to a woman’s life, but not to her health. They said it forces them to walk a legal and ethical tightrope in deciding when the health risk is great enough to warrant intervention without running the risk of prosecution or professional sanction. One Irish physician, Dr. Peadar O’Grady explained how hard it is to draw the line:

“If you are in a Savita situation you either call a lawyer, call the media or get on a plane. You get out of here [Ireland]. The women who are actively bleeding, they are Savita. There is always risk of infection when there is bleeding, that is what happened to Savita.”

**Out of sight, out of mind**  
Women told Amnesty International about the trauma of secretly travelling to Britain, the financial burden and the stigma they felt when they returned.

**Ava**, whose name has been changed, said she travelled to England for an abortion after receiving a diagnosis of fatal foetal impairment in September 2014:

*“In the midst of all this pain and grief you have to scramble around to get money and flights and childcare and organize yourself, whereas it should be a simple trip down to the hospital. The worst point, when you are in so much pain, is … you have to organize it yourself, you know the hospital won’t do it for you.”*

**Kally**, Unit Manager at a clinic that provides abortion services in Liverpool, UK and often deals with women from Ireland, spoke of the negative health consequences for women who struggle to afford the journey:

“We have had women who have travelled and…they’ve been too late in their pregnancy so we couldn’t treat them because they were waiting to save up money to get the treatment.”

**Law condemns those who cannot travel to be treated like criminals**

Women and girls who are unable to travel are most at risk: the poor, asylum seekers lacking paperwork, people in remote areas or people who are simply too unwell to travel.

The draconian nature of Ireland’s law was yet again revealed in the 2014 “**Y case**” when doctors coerced a young, suicidal asylum seeker, pregnant after she was raped, to continue with her pregnancy and deliver by caesarean section.

Pregnant after being kidnapped, held against her will, beaten and raped repeatedly by the head of a paramilitary organization in her country, after she arrived in Ireland to claim asylum she found out she was pregnant. She tried to travel to Britain for an abortion but was denied entry. Unmoved even by her continual threats of committing suicide and her going on hunger strike before giving birth, health authorities coerced her to continue with the pregnancy until viability and was given a c-section.   
  
In 2009, **Nicola** was 19 weeks into her second pregnancy when she learned the foetus had a fatal impairment and there was no chance of survival, but staff told her inducing labour was not allowed.

Unable to afford the cost of travelling outside of Ireland in order to procure an abortion, Nicola would go to the hospital every week for a scan, and only received treatment several weeks later after medical staff confirmed that the foetus had died.

“Most women are getting scans to make sure their baby is alive. I was getting a scan to see if my baby had died.”

Following her induction and delivery, Nicola developed an infection due to a retained placenta, which required further hospitalization and care.

**‘I would fear for my life to have another child in Ireland’**

Throughout her pregnancy **Rebecca H.** suffered from *hyperemesis gravidarum,* a condition characterized by a continuous feeling of nausea, severe vomiting, and dehydration. At 14 weeks, she could no longer care for herself and moved in with family. She says she asked for mental health support to help her cope but was never provided with any counselling. She told Amnesty International:

“I truly believed I was dying and I wanted to. …I couldn’t live another day in this hell. … At 36 weeks … I spent most days lying in my hospital bed with my fists clenched and my eyes shut tight begging for the world to stop spinning, the nausea was so crippling it was worse than the constant vomiting. … I could barely walk to the end of the hall most days.”

Although her health care team told her that she could have an early delivery, it was repeatedly denied to her:

“They would lie to me about when [delivery] would be, first it would be next Tuesday and then it would be next Thursday, then it would be comments about ‘well you say you love your baby, but you can’t love your baby if you want to deliver him early… You are putting your baby’s life at risk…’ all these sort of things. It was completely insane. They said they would induce at 35 weeks then it was 36 and then 37 and then 38… it was just always next week.”

The hospital staff denied her request to be discharged and go home:

“I said to them just let me go home, if you can’t help me I will find another way. And then they said ‘well that’s it you can’t go anywhere.’ They said ‘it’s our job to look after the baby, the baby comes first.’ I told them that his safety was the utmost priority to me but at the same time, this is torture. Absolute torture.”

Eventually, the doctors agreed to induce Rebecca at 38 weeks. However, they “then started pressuring me to have a natural birth. I was so weak and despondent and I asked them for a C-section and they said ‘absolutely not, you would be putting the life of your baby in danger.’” Rebecca expressed that she didn’t feel physically capable of a labour and delivery, but the doctors refused her request for a planned C-section. Instead, Rebecca was induced and forced to labour for over 36 hours. Ultimately, Rebecca received an emergency C-section as the baby was having a stress response to labour. Her son spent his first few days in the neo-natal unit, recovering.

Rebecca told Amnesty International:

“The 8th amendment is currently being abused. It is being used to treat women as objects and not as human beings anymore. I would fear for my life to have another child in Ireland.”