



30 FACTS

ABOUT ABORTION

FACEBOOK: VOICE FOR CHOICE - L-GHAZLA TAGHNA

EMAIL: VFCMALTA@GMAIL.COM

QUESTION 1

MYTH: Abortion is not a healthcare issue.

FACT: The World Health Organisation (WHO) and other international bodies define abortion as a health care issue. Pregnancy can be tough on someone's physical or mental health, and medical issues can arise or worsen at any point in pregnancy. Legal restrictions on abortion can lead doctors being unable to or afraid to provide proper information and care for pregnant women in such circumstances.



QUESTION 2

MYTH: Abortions are unsafe and harm a woman's health.

FACT: Abortions are safe if they are done with a method recommended by WHO that is appropriate to the pregnancy duration and if the person providing the abortion is trained. Such abortions can be done using pills or a simple outpatient procedure. Where abortion is illegal, abortions are more likely to be unsafe. In Malta, as the situation stands, women who have an abortion without any medical supervision may be afraid to go their doctor for after care if complications.



QUESTION 3

Q: What is a medical abortion?

A: Medical abortion is the use of abortion pills (Mifepristone and Misoprostol) to end a pregnancy. It is a safe and effective way to end an early pregnancy. It is routinely used up to 9 weeks of pregnancy and can be used later in pregnancy in a hospital environment and results in the same physical process as a miscarriage.



QUESTION 4

Q: When do most abortions occur?

A: When given the choice, women access abortion services as early as possible. In the UK, two thirds of abortion are carried out within the first 8 weeks of pregnancy, 80% until week 10 and 92% are carried out within the first 13 weeks of pregnancy. Delays associated with finding information, travel and financing the procedure is likely to lead Maltese women to have abortions later than women resident in countries where abortion care is accessible.



QUESTION 5

Q: Is it true that some countries allow abortion right up to the moment of birth?

A: Abortion after 24 weeks is very rare (only 0.1%) and is only allowed if the health of the mother is at serious risk or if the foetus is not viable. If birth is possible without endangering the woman and the foetus is viable, then abortion is not permitted. Doctors usually either induce labour or perform a C-section and the premature baby is attended by the neonatal intensive care unit.



QUESTION 6

Q: What is a fatal foetal anomaly?

A: Many medical diagnoses are included under this umbrella term. A diagnosis of a fatal foetal anomaly (or abnormality) means that a foetus will die in the womb, during delivery or shortly after birth. It is a devastating diagnosis for a woman and her family to receive. In Malta, a woman facing these circumstances is expected to carry a pregnancy to term regardless of her own wishes. If she decides to end the pregnancy, she must travel to access abortion care elsewhere.



QUESTION 7

Q: Does a foetus feel pain when aborted.

A: The scientific literature from respectable medical journals on this subject shows that the brain connections required to feel pain are not formed until at least 24 weeks. In the rare cases when abortion takes place after 22 weeks (due to fatal foetal anomaly or serious health risk for the pregnant woman), an injection is given to stop the foetal heartbeat before the procedure takes place.



QUESTION 8

Q: What does the law in Malta say about abortion?

A: Abortion is illegal and a crime in Malta in all circumstances with no exceptions, not even to save the woman's life or safeguard her health, nor in cases of fatal foetal anomaly or rape. According to Article 241 of the Criminal Code, if a woman takes or does something to cause the termination of a pregnancy, then she can face up to 3 years in prison. If another person helps someone to end her pregnancy in Malta, then they can be liable for up to 4 years in prison.



QUESTION 9

Q: Can someone be prosecuted in Malta if they have an abortion in a country where it is legal?

A: No. If someone has an abortion in another country, she cannot and will never be prosecuted in Malta.



QUESTION 10

Q: Can I be legally liable if I give information about abortion care services abroad?

A: No. In Malta there is no law criminalising the dissemination of information on abortion. In fact, the European Convention of Human Rights guarantees any person's right to impart or receive information. This right is sanctioned in the Maltese Constitution. Maltese women thus have a right to receive information about abortion services, more so when these are legal in other countries that are party to the human rights convention.



QUESTION 11

Q: Can a pregnant person be stopped from leaving the Maltese Islands to terminate their pregnancy?

FACT: : No. Adults cannot be prohibited from leaving the Maltese Islands even if the authorities know that they have intention to terminate a pregnancy.



QUESTION 12

Q: How does Malta's ban affect women?

A: Some women are unable to travel for various reasons. For such women the effects of being forced to proceed with an unwanted pregnancy can be traumatising. The experience of travelling abroad to have an abortion is painful for all women who are forced to travel. Travelling to access abortion care is a lonely, costly and humiliating experience, and frequently gives rise to feelings of shame that comes from the stigma associated with abortion.



QUESTION 13

Q: Is it true that women who have abortions always regret it and develop psychological problems?

FACT: No, the medical evidence is clear and agreed throughout the medical world. Abortion does NOT threaten or damage women's mental health, at the time of abortion, or at any subsequent time. The most common feeling expressed after abortion is relief. Those women who have mental health problems after an abortion are understandably those that had those problems before, and in addition those who have an abortion in a situation of coercion or shaming silence.



QUESTION 14

Q: Does an unwanted pregnancy damage a woman's mental health?

A: Yes. Having an unwanted pregnancy increases the risk of perinatal depression by 50%. Being depressed during pregnancy is a very serious problem because depressed women are often unable to attend to their own health needs while the foetus is developing in a high stress environment.



QUESTION 15

Q: What is the average current cost for a woman travelling for an abortion?

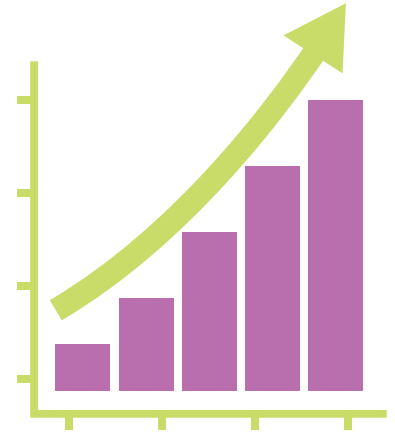
A: Many countries provide abortion services as part of their healthcare system but women from Malta travelling for an abortion usually pay between 600 Euro and 2000 Euro for a procedure. Factors that increase the costs are the number of weeks someone has been pregnant, child care costs, needing to take time off work, travel costs (flights, ferries, taxis), accommodation and food costs.



QUESTION 16

Q: How many Maltese women have abortions?

A: The truthful answer is “We don’t know.” Only the UK officially documents abortions from Malta, averaging 60 per year. We know through abortion pill providers that the number of women accessing the abortion pill online are increasing sharply. We also know that women travel to Holland, Spain, Belgium, Italy (Sicily in particular) and other countries and that some women don’t give their Maltese address at UK clinics. We estimate that at least each day, ONE Maltese woman will have an abortion but while abortion remains illegal, the figures we have will always be an estimate.



QUESTION 17

Q: Can't women just go to Europe? Why do we have to have abortions in Malta?

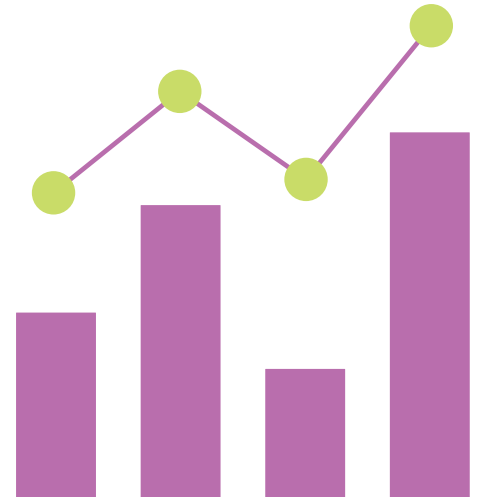
A: Not everyone can afford to travel. They may have caring responsibilities for children or family members which make travel difficult. Migrant women may not be able to travel due to their legal status. Some women may be in abusive or controlling relationships where the partner controls their movement. Expecting women to travel for healthcare that could be easily provided at home is not only unfair and unnecessary but discriminates against women who cannot travel.



QUESTION 18

Q: If abortion becomes legal, will more women have abortions?

A: No. Abortion rates tend to be higher in places where abortion is illegal because these countries also have limited access to contraception. Malta has no free contraception and there are no family planning clinics. Legalising abortion tends to be followed by better sex education and access to contraception, meaning abortion rates actually fall after abortion is made legal in most countries. Switzerland has the lowest abortion rate in the world and their rate has been falling since 2002, when abortion became largely unrestricted.



QUESTION 19

Q: Don't women have abortions because it's just not 'convenient' to have a child?

A: There is nothing convenient about having an abortion. The reality is, people get abortions for a myriad of reasons. Many people will choose to have an abortion because their social, economic, or health circumstances make them unable or unwilling to continue a pregnancy or raise a child. Others may feel it is important to time and space the number of children born into their. Others may have become pregnant following a sexual assault or reproductive coercion. Others may have been told the catastrophic news that the fetus they are carrying has a fatal abnormality. Others may be going through a disruption of some sort, like unemployment or domestic violence. Ultimately we cannot judge what constitutes a worthy reason for anyone else. It is a decision that no one else but the person having to make that choice is in a position to evaluate.

QUESTION 20

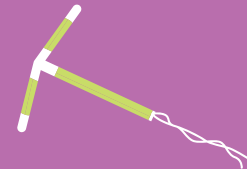
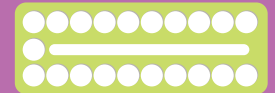
Q: Why should women who can't 'keep their legs closed' not suffer the consequences?

A: Studies about women's experience of abortion show that women of all ages, with or without children, in all occupations, religions, education levels, contraceptive practices, and marital status seek abortions. Most women are in long term relationships. More than half already have children. Most were using contraception. The ages vary between 12 and 50+. The myth that people who need abortions are promiscuous relies on the belief that sex is bad, and that if a woman has sex but is not prepared to have a child, she should be punished even if the 'punishment' is to have a child. It is clear that women are often judged harshly in relation to their sexuality, in ways in which men are not.

QUESTION 21

Q: Why do women need abortion when there are so many types of contraception?

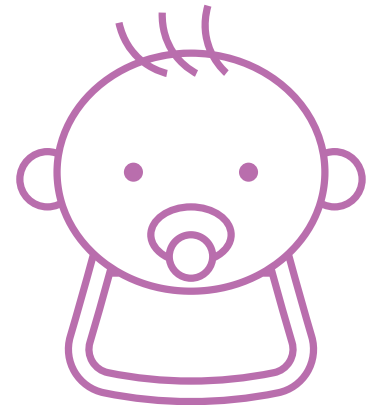
FACT: The majority of women experiencing unplanned pregnancy are using some form of contraception, yet we know that no form of contraception is 100% effective, finding suitable contraception is very difficult for some women, sexual behaviour is not always consensual or predictable and violence and control in relationships can make it difficult for women to use or access contraception. No one would choose abortion over contraception but unintended pregnancies can and do happen.



QUESTION 22

Q: Why can't women put their baby up for adoption, rather than have an abortion?

A: Adoption, just like abortion, is a personal and private decision. It is an alternative to parenthood, not to pregnancy. For many women the choice to have an abortion is because they cannot or do not want to continue to be pregnant, or to give birth or to relinquish a child. It is up to a woman, and nobody else, to make this decision and this requires services to be supportive in a non- judgemental approach.



QUESTION 23

Q: What about the rights of the unborn, aren't they the most vulnerable members in our society?

FACT: All human rights declarations are based on rights being inherent from birth. While some people believe that the embryo is a person from conception there is no consensus across medicine, philosophy and world religions about when foetus acquires rights. Pregnancy is a road of development and while foetal life has value, granting absolute right to life to foetuses deprives pregnant women of the ability to exercise their rights. The best way to protect foetal rights is to support a woman who wants to be pregnant, ensuring she has resources, secure housing and good maternal care.



QUESTION 24

Q: What about the father's rights?

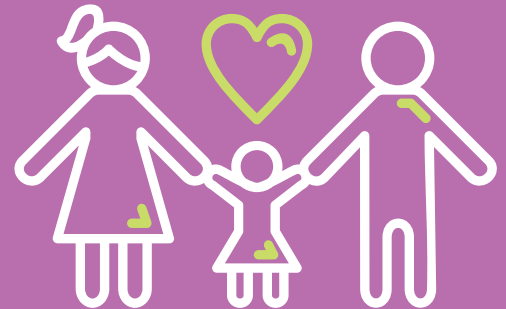
A: Men are also hurt by Malta's extreme laws, when they are unable to support their partner because they can't afford to travel with them, when their partner's health or life is endangered during pregnancy, when they suffer the pain of a FFA diagnosis, when they risk 4 years imprisonment by ordering abortion pills online for their partner or family members. Most people who get abortions are in long term relationships and will turn to their partner for help or advice. But the final decision should always rest with the person who is pregnant and a man should not have the right to force a woman to stay pregnant or give birth against her will.



QUESTION 25

Q: Abortion is really anti family and anti-motherhood, isn't it?

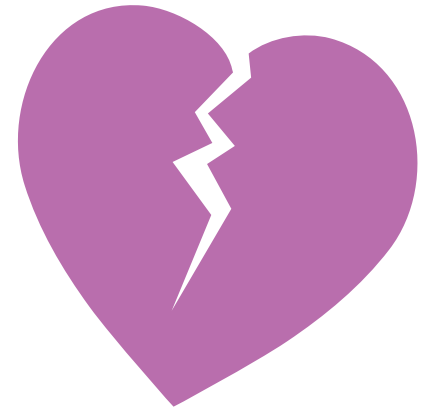
A: Abortion and parenthood are not in opposition to each other. Many of the people who access abortion are already parents. Their decision is often influenced by the desire to ensure they can take the best possible care of the children they already have. Parents who choose abortion fully understand what parenting entails and what is needed to adequately care for another child. For people who do not wish to become parents themselves, forcing pregnancy and parenthood on them would in no way strengthen the concept of family life. People are best positioned to decide how and with whom they wish to form a family.



QUESTION 26

Q: How can you support abortion when there are so many women who can't have babies or have had miscarriages?

A: Challenges with fertility and lost pregnancies can be a very painful experience. However, removing another woman's ability to make the best decision for herself or her family will not change the situation of a woman who has miscarried or has difficulty conceiving. Forcing someone to stay pregnant against their wishes will not change another woman's experience of loss. Everyone is going through their own struggles and deserves compassion.



QUESTION 27

Q: What about abortion in the case of disability or Down's Syndrome?

A: A diagnosis of Down Syndrome does not mean that a woman who is pregnant will inevitably decide to have an abortion. The majority of pre-natal diagnoses are made at 20 weeks and some countries such as Ireland, have a 12-week timeframe and no exceptions are made on the basis of a disability diagnosis. At the same time, there are already women in Malta who have travelled to England for an abortion based on a diagnosis of disability so the abortion ban is not effective. Providing better support would make parents more likely to continue with a pregnancy after a diagnosis of disability. The solution is not banning abortion but tackling the root cause: prejudice and lack of support for people with disabilities. Furthermore, one in five women lives with a disability and these women sometimes need abortions as well.

QUESTION 28

Q: If abortion is legal, will some women who society does not deem 'fit to be mothers' be pressured to have an abortion?

A: No. Being pro-choice means putting the decision making power firmly in the hands of a woman. We oppose any situation where people are pressured into abortions for any reason. Forcing an abortion on someone is as unjust as forcing someone to remain pregnant.



QUESTION 29

Q: I morally disagree with abortion. Is there a way to still be pro-choice if I am against abortion?

A: Yes. It is possible to believe that life starts at conception, that abortion would not be something you would choose and you'd hope others wouldn't choose under most circumstances but to still believe that abortion should be safe and legal. You might be pro-choice because you believe that keeping abortion illegal does not help to prevent abortion, on the contrary it drives it underground and makes it more dangerous for women. You might also acknowledge that abortion is a complex issue and that your anti-abortion views are based on your subjective moral beliefs so you don't think those beliefs should be imposed on other women who have different beliefs.

QUESTION 30

Q: How can i get help if i want an abortion?

A: Abortion Support Network (www.asn.org.uk/malta/) is open to people in Malta who need to travel to obtain a legal abortion or who seek information on the reputable provider of safe but illegal early medical abortion pills (Women on Web: www.womenonweb.org and Women Help Women: <https://womenhelp.org>). Abortion Support Network offer information about the least expensive way to arrange your travel and procedure, financial and other forms of assistance where needed and advice on accommodation. They also offer phone counselling in needed through the organisation BPAS. You can contact ASN helpline (+356 27780991), or email: malta@asn.org.uk. The website <http://abortion-clinics.eu> provides a comprehensive lists of clinics offering abortion services in EU countries.

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