



## Clear and Compelling Evidence: The Polish Tribunal on Abortion Rights

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**Abstract** On 25 July 2001 the Polish Federation for Women and Family Planning organised a Tribunal on Abortion Rights in Warsaw, to publicise the negative consequences of the criminalisation of abortion in Poland. A panel of Polish and foreign experts heard the testimonials of seven Polish women's experiences under the 1993 "Anti-Abortion Act". Only two of the seven women were able to tell their stories in person. One died in 2001, at the age of 21, of an unsafe abortion. One is legally blind after having carried her last pregnancy to term. One is in prison for infanticide, which in all likelihood was committed by her boyfriend. National and foreign journalists were in attendance, as well as observers from all walks of life – writers, students, mothers, activists, feminists, husbands. The evidence was clear and compelling. Restrictive abortion laws make abortion unsafe by pushing it underground, endanger women's health, create a climate where even those services that are allowed by law become unavailable, and contravene standards set by international human rights law. The restrictive abortion law in Poland has not increased the number of births; it has only caused women and their families suffering. The Tribunal brought the issue of abortion into the media prior to an election campaign and galvanised Polish and other Eastern European women's groups to become more active in defence of abortion rights. © 2002 Reproductive Health Matters. Published by Elsevier Science Ltd. All rights reserved.

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FROM 1956 until 1993, abortion in Poland was widely accessible on therapeutic and socio-economic grounds. Terminations were performed free of charge in public hospitals, or could be obtained in private clinics for a relatively low fee.

The 1993 Act on Family Planning, Human Embryo Protection and Conditions for Legal Pregnancy Termination, commonly known as the Polish Anti-Abortion Act, was adopted by the Polish Parliament following a systematic anti-abortion campaign by the Roman Catholic Church, supported by conservative political forces in the Solidarity movement and many in the medical profession. It took the anti-abortion movement four years to succeed in having a law passed; several previous bills were rejected by the Parliament due to strong opposition

from a few women's organisations. The majority of Polish society was (and still is) pro-choice (65%) [1], although mostly Catholic (95%), and at that time was not in favour of a restrictive law. However, civil society proved incapable of standing up publicly to enormous and persistent pressure from the Church and its beloved head – John Paul II – which was exercised on a daily basis in religious services, school religious instruction and the media, and through regular visits by the Pope. A society that had been living under liberal abortion legislation for almost 40 years was completely unprepared for and inexperienced in debating and defending a pro-choice position against often violent and unfair anti-abortion rhetoric. Besides, very few people actually believed the danger was real or that the law could be restricted, since abortion was such

a common method of birth control. The situation worsened immeasurably when the medical community got involved in the debate and began collaborating with the Church; the Extraordinary National Assembly of Physicians introduced their own restrictions in a newly adopted Medical Code of Ethics in 1991, two years before the Anti-Abortion Act. The Code claims that abortion on social grounds and in cases of fetal malformation is against medical ethics [2].

The 1993 Anti-Abortion Act, in its Preamble, recognised that: *“life is a fundamental human good, and care for life and health are basic duties of the state, society and its citizens. Therefore, it is decided that: (Article. 1) 1. Every human being has an inherent right to life from the moment of conception. 2. The life and health of the child are protected by law from the moment of conception.”*

The Act allows abortions to be performed legally in three circumstances:

1. where the pregnancy constitutes a threat to the life or health of the woman, and this threat is confirmed by a physician other than the one who is to perform the abortion; the abortion must be performed in a public hospital, and is free of charge;
2. where antenatal screening or other medical evidence indicates a high probability of severe, irreversible damage to the fetus or an incurable, life-threatening disease affecting the fetus; this probability must be confirmed by a physician other than the one who is to perform the abortion; the abortion must be performed in a public hospital, and is free of charge; and
3. where there is a confirmed suspicion that the pregnancy is a result of a criminal act. The criminal circumstances have to be confirmed by a prosecutor, and the woman must be less than 12 weeks pregnant; the abortion may be performed free of charge in a public hospital, or for a fee in a private clinic.

While the Act specifies only that a physician should perform these abortions, regulations under the Act require that they be performed by an obstetrician–gynaecologist. The Act does not provide for a particular format for the confirmation of health risk, fetal malformation or criminal circumstances. In all cases, the written consent of the woman (aged 13 and over) must be obtained. Where the woman is a minor, the Act also requires the written consent of

her legal guardian. A court may also issue an order allowing the abortion if no legal guardian gives consent.

Illegal termination of pregnancy before viability of the fetus (viability is not defined) carries a penalty of up to three years' imprisonment for the person who performs the abortion. Beyond viability, the penalty is a maximum of eight years' imprisonment. A person who helps a woman to obtain an abortion is subject to a similar penalty. The Act, however, imposes no penalties on women who undergo illegal abortions.

Briefly liberalised in 1996 by the left-wing Parliament elected in 1994,<sup>1</sup> abortion was once again restricted in 1997 when the Polish Constitutional Court declared the liberalised Act unconstitutional [3]. Family planning and sex education were subject to similar restrictive pressures by conservative forces. As a result, state subsidies for most contraceptive methods were withdrawn in 1997; only three types of hormonal contraceptive pill continue to be subsidised by the State Health Insurance scheme. Sex education has been replaced in schools by “family life education” which exhorts young people to remain sexually abstinent until marriage, while perpetuating myths and misconceptions related to gender, sexuality and family planning [4].

The Federation for Women and Family Planning has been monitoring the implementation of the law since its inception. Findings [5] show that:

- The Anti-Abortion Act did not eliminate, and probably did not reduce, the prevalence of abortions.
- There is now an ‘abortion underground’, and the majority of illegal abortions are conducted by doctors in their private clinics or offices.
- After the law was adopted, illegal abortions rapidly became very expensive. They now cost between 2000 and 4000 PLN (US\$500–1000). The average monthly Polish salary is 2000 PLN.
- Some women go abroad to have an abortion, a phenomenon known as ‘abortion tourism’. While common in the years immediately following the

<sup>1</sup> Article 1 of the 1993 Anti-Abortion Act was amended in 1996, when the law was liberalised, to remove the notion of life beginning at conception. Article 1.1 now reads: “The right to life, including in the prenatal phase, is protected as provided for in the present law”. Article 1.2 was repealed.

adoption of the law, it appears to be decreasing and currently has more of an individual than organised character.

- Restrictive regulations have resulted in serious limitations on access to legal abortion. Public hospitals terminate fewer pregnancies every year. Women who have a right to abortion according to the law, but for various reasons cannot exercise this right, turn to the abortion underground for solutions.
- Health providers and the public in general have little knowledge of the content of the law or the circumstances in which abortion is legal.
- The anti-abortion law results in personal trauma and causes substantial health problems for hundreds of thousands of women in Poland every year.

### Organising the Tribunal on abortion rights

Since its creation in 1992, the Polish Federation for Women and Family Planning has been fighting to defend women's right to abortion in Poland, and to promote modern contraception and comprehensive sex education. Today, the Federation is comprised of nine non-governmental organisations, which are among the few groups that have campaigned actively for women's choice on abortion over the years. The Federation played an important role in securing the (brief) liberalisation of the Anti-Abortion Act by Parliament in 1996, and, has regularly published a number of reports highlighting the discriminatory consequences of the 1993 law. In 1999, they submitted a shadow report to the UN Committee on Human Rights entitled *Gender Discrimination in Poland*, which described the effects on women of the Anti-Abortion Act.

When national elections were scheduled for September 2001, the Federation decided to seize the opportunity to bring to the attention of a wider public the personal tragedies of women who had been adversely affected by the Act. Over the years, the Federation has been contacted for advice by numerous women in distress about obtaining abortion services they were entitled to under the law. Whenever they could, staff of the Federation helped women work through the system to obtain legal abortion services. Their stories of pain, anxiety and humiliation, and in some cases injury and death, needed to be told.

The Tribunal took place on 25 July 2001. It was modelled on similar tribunals organised by feminist groups and networks, often at international meetings or UN conferences, to document violations and provide a high-profile venue for women's voices to be heard and women's human rights to become more visible. Perhaps the best known of these tribunals is the Global Tribunal on Violations of Women's Human Rights in 1993 at the UN World Conference on Human Rights in Vienna, which led to recognition by the international community that violence against women is a human rights violation, and also helped to galvanise political will to ensure that steps such as the appointment of a Special Rapporteur on Violence Against Women and the adoption of the UN Declaration on the Elimination of Violence Against Women were taken. Another example is the Women's International War Crimes Tribunal organised in Tokyo by Asian human rights organisations in December 2000 to highlight cases of sexual slavery and violence against women by Japan during World War II.

A panel of Polish and international "judges" with varied perspectives and experience were invited to hear the testimonials. Those from Poland were Marek Balicki, a physician, former Deputy Minister of Health and current director of the Bielski Hospital in Warsaw; Eleonora Zielinska, professor of law at Warsaw University; Leszek Kubicki, professor of law and former Minister of Justice; Krystyna Kofta, a well-known writer; Kinga Dunin, also a well-known writer and journalist; and Ewa Dabrowska-Szulc, a feminist activist and member of the organisation Pro-Femina. The international panel members were Rebecca Gomperts, a physician and executive director of Women on Waves Foundation, Netherlands; Ann Snitow, a lecturer in philosophy and gender studies in the USA and director of the Network of East-West Women; Christina Zampas, staff attorney at the Center for Reproductive Law and Policy, USA; and Françoise Girard, lawyer and senior program officer at the International Women's Health Coalition, USA.

Seven testimonials were presented over the course of the day. They were selected to illustrate what happened to women who were entitled to an abortion under the Act and those who were not, and women who had managed to obtain an abortion, legally or illegally, and those who had not. Some of the women had previously been in contact with the Federation for help in securing a legal

abortion. The cases of others had been reported in the media, and they or their families had agreed to participate when invited.

The Federation opened the proceedings by presenting the judges with demographic data on births and abortions in Poland. The practice at previous tribunals has been that at least some of the women present their stories in person. In this instance, two of the seven, Barbara and Bożena,<sup>2</sup> did so. Their personal accounts, related in their own voices, conveyed an almost unbearable level of human distress and outrage. A third woman, Alicja, was present but did not present her own case. Of those who did not attend, Magda was worried that she would be harassed for having undergone an illegal abortion, while Maria did not wish to reveal her HIV status. Wioleta was in jail. The testimonies of Alicja, Magda, Maria and Wioleta were presented by Polish feminist activists or Federation staff. Kasia is deceased; her testimony was presented by a family member.

The judges commented in turn on the testimonials, addressing the health and other consequences suffered by the witnesses, the political and social impact and ethical implications of the Anti-Abortion Act for Polish society, and the relationship between the Polish law and international agreements.

The proceedings were open to the public and recorded by television, radio and newspaper journalists, who were in attendance throughout the day, in such a way that the women's identities were not revealed. The Associated Press and Agence France Presse sent a piece down the international wire on the day, and Polish television and radio interviewed several of the judges as well as the executive director of the Polish Federation for Women and Family Planning. The organisers issued press releases and a statement.

A book launch and press conference were held following the Tribunal. Entitled *Women's Hell – Contemporary Stories*, the book presents the stories of nine women, including the seven testimonials from the Tribunal. The dedication reads: "To all those who thought there were more important issues". The title refers to the well-known Polish book *Women's Hell* published in 1929. Its author, the doctor Tadeusz Boy-Zelenski, is criticised by the Roman Catholic Church to this day for his public

account of the terrible consequences of restrictions on abortion for women's lives and health in the early 20th century. The tragedies of many women, forced to have unsafe abortions underground, are described in dramatic detail in his book. Until 1993, they had been past history for 50 years in Poland. Today they have once again become the dangerous reality of women's lives.

### Findings of the Tribunal

#### ***Abortion has gone underground and become unsafe and unaffordable***

Demographic data suggest that 80,000 to 200,000 clandestine abortions are currently being performed every year in Poland, with an estimated birth to abortion ratio of 2:1 [5]. Ample evidence was presented that the abortion underground has flourished in Poland as a direct result of the restrictive law. All over Poland, women seeking abortion who are not legally entitled to one under the Act are turning to clandestine abortion providers. Some of these abortions are carried out in good conditions by qualified practitioners; others are not.

Magda testified that she became pregnant three months into a relationship as a result of contraceptive failure. She was quickly referred to an abortion provider by her family physician, had a safe abortion under general anaesthesia and has had no health problems or regrets since.

In contrast, Kasia, 20, became pregnant soon after the birth of her first child, but did not realise it until four months into the pregnancy. She and her husband agreed she would seek a clandestine abortion. In spite of how advanced the pregnancy was, the physician performed the procedure in her office. When complications occurred, the physician took Kasia to a hospital 20 km away, rather than to the hospital emergency ward next door, to protect herself from exposure. She left Kasia's husband waiting in her office without telling him what was happening. Kasia died of a haemorrhage due to a perforated uterus and intestine. The physician is being prosecuted for performing an illegal abortion rather than for malpractice; the case is still pending. Kasia's husband is also facing prosecution for helping his wife to obtain an illegal abortion.

Clandestine abortion services are apparently widely available, but they are very expensive for the average Polish worker. The negative impact of the Act is therefore disproportionately greater on

<sup>2</sup> All names of women testifying are pseudonyms.

poorer women, and on those who do not live in large towns where services are more easily found. It takes women time to find the money and identify a willing provider, thus delaying the abortion and making it potentially riskier. In Magda's case, the Tribunal was told, friends took a collection to help her pay the 2000 PLN for her abortion.

The judges commented that the Act "has created criminal acts where none should be" and "damages the State".

### ***The Act has had negative health consequences for women***

The impact of the Anti-Abortion Act on women's health was found to be extremely negative. Alicja became pregnant for the third time aged 31; her eyesight had deteriorated with each of her two previous pregnancies. A number of ophthalmologists agreed that another pregnancy could irremediably damage her eyesight, but they refused to write a letter to that effect. One did finally write the requisite letter, but Alicja was turned away from the public hospital where she sought an abortion. The obstetrician-gynaecologist she saw there told her that the letter was "not enough" and destroyed it to prevent her from using it elsewhere. Because she could not raise the money to pay for a clandestine abortion, she was forced to carry her third pregnancy to term. As a result, she is now legally blind and unable to work or care fully for the child.

The judges commented that this case demonstrated an appalling lack of respect for women. The humiliation of women needing abortions appears to be routine; indeed, the stress and anxiety experienced by all the witnesses was high.

### ***The Act has had a "chilling effect" on legal abortion services***

In the year 2000, only 151 legal abortions were performed in Poland's public hospitals, compared to 105,333 in 1988 [6], the year before the anti-abortion debate first started. This figure, from official government statistics, is believed to be under-reported by as much as three times because private clinics, where most abortions were performed, are not required to report. A 1999 survey of Polish physicians [5] found that they were intensely preoccupied with being judged by their peers if they performed legal abortions in the public hospitals. At

the same time, many of them were performing illegal abortions in their private clinics.

In spite of their best efforts, many women, like Alicja, are simply not able to exercise their right to a legal abortion, even though they are entitled to it because pregnancy presents a risk to their life or health. Others are only able to secure a legal abortion with great difficulty, after much humiliation. Knowing this, many women in difficult life circumstances do not even attempt to seek an abortion.

Thus, the spokesperson for Wioleta, mother of one, battered and pregnant as a result of rape by her partner, testified that she could not find the wherewithal even to begin to take the steps necessary to terminate her second pregnancy. The infant was killed, in all likelihood by Wioleta's partner, a few minutes after she gave birth at home. Wioleta is now in jail serving a sentence of 10 years for the child's death; her partner received a suspended sentence and custody of their surviving child.

The Criminal Code was amended in 1999 to increase the penalties for infanticide [7]. However, the issue of infanticide is not acknowledged as related in any way to the restrictive abortion law. As with abortion, women are the only ones blamed as "stupid" and "irresponsible" mothers, who should be punished. Male partners are rarely mentioned. Nor is the State seen as even partly responsible, even though it neither helps women to avoid unwanted pregnancy nor gives sufficient support to women who decide to continue their pregnancies [8].

Several testimonies indicated that physicians do not know the terms of the Anti-Abortion Act. Other physicians, however, were obviously disregarding its provisions with total impunity, often in an ideologically motivated way.

A number of hospitals have issued a blanket refusal to perform any abortions, or to provide services such as amniocentesis that might lead to a woman seeking a legal abortion [9]. Some hospitals have created additional, arbitrary requirements that are not provided for in the Act. Many physicians do not respond to requests for abortions or refer women to other providers when they refuse to perform abortions themselves, on the grounds of conscience, though many will perform illegal abortions for a fee in their offices. This makes women confused about their own rights. Furthermore, there is no rapid legal mechanism to enable women to exercise their right to a legal abortion.

Maria is a young woman with an HIV-related illness; she testified that she had obtained written confirmation from a specialist that pregnancy presented a danger to her health. The Federation helped her to obtain a legal abortion in a public hospital by writing to 12 hospitals in Warsaw requesting an urgent abortion for Maria. Six hospitals did not even reply. Five refused, giving a variety of excuses; two of them said they “do not perform services of that kind,” although they are registered under the State Health Insurance Scheme as hospitals where abortion is available. The director of one hospital replied that “this woman does not qualify” because “HIV positive women all over the world have babies and most of those babies are healthy”, thus disregarding the fact that it was Maria’s health that was at stake. One claimed it did not have the necessary “antiseptic unit” to control HIV infection. Maria was able to obtain a legal abortion in the last hospital that replied.

Barbara testified that when she sought antenatal screening for a hereditary joint disease, from which her first child is severely disabled, several physicians refused to carry out the necessary test. The director of one hospital told her that even if the test were performed and the presence of disease confirmed, the hospital would not provide her abortion services because “nobody wants to have problems”. Another physician told her that she was “imbalanced” and that the defect was “in her imagination”. Screening did show that the congenital defect was present. When she sought an abortion in another city, she was told that it was too late to do an abortion. Barbara now has a second severely disabled child.

Bozena testified that an amniocentesis revealed she was carrying a fetus with Down’s syndrome. She was admitted to hospital with the requisite written medical opinion entitling her to an abortion. Once in hospital, however, Bozena was asked by physicians for a second and third medical letter. As she could not produce these, she was discharged. Bozena persisted and obtained a legal abortion in another hospital soon afterwards. She told the Tribunal: “I don’t want to become a political cause, but women in this country are being used by ideologues for political ends.”

The judges noted that because the Anti-Abortion Act is not being enforced to allow women to have abortion to which they are entitled, both the law and the medical profession are being discredited.

***Polish abortion law and practice violate standards set by international treaties and treaty bodies***

The Tribunal judges noted that Poland is a party to the major international human rights treaties, such as the International Covenant on Civil and Political Rights, the International Covenant on Economic, Social and Cultural Rights, and the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW). Together, these treaties guarantee (to human beings or persons, including women) the right to life, liberty and security of the person, privacy, the highest attainable standard of health, and access to health care services without discrimination on the basis of sex. “As stipulated by the Universal Declaration of Human Rights, a human being or person must be *born*.” Moreover, the Polish Constitution itself at Article 68 guarantees the right to health, without discrimination.

Until the 1990s, international human rights documents did not have much to say about child-bearing, let alone abortion. This changed at the International Conference on Population and Development (ICPD) in 1994 in Cairo, where the world’s nations, including Poland, explicitly recognised that international human rights guarantee the right of all couples and individuals to decide freely and responsibly the number, spacing and timing of their children, and to have the information and means to do so. Governments also recognised that international human rights include the right to make decisions concerning reproduction, free of discrimination (para 7.2) [10]. With regard to abortion, they agreed that they had to deal with the health impact of unsafe abortion as a major public health concern, to reduce recourse to abortion through expanded and improved family planning services, and to provide ready access to reliable information and compassionate counselling to women with unwanted pregnancies. Moreover, governments including Poland, agreed that “in circumstances where abortion is not against the law, such abortion should be safe” (para 8.25). Yet the Tribunal heard about humiliating, inhumane treatment of pregnant women, and limited access to legal abortions, which were found by the Tribunal judges to be in direct violation of the obligations of the Polish government. In 1999, at ICPD+5, governments, again including Poland, specified that “in circumstances where abortion is not against the law, health systems should train and equip health

service providers . . .” [11] to ensure that such abortion is not only safe but accessible to women.

Two international treaty bodies,<sup>3</sup> the UN Committee on Economic, Social and Cultural Rights and the UN Human Rights Committee have made the following statements, respectively, about abortion law and practice in Poland in recent years:

*“The Committee notes that the recent imposition of legal restrictions on abortion has excluded economic and social conditions as grounds for abortion. The Committee expresses its concern that because of this restriction, women in Poland are now resorting to unscrupulous abortionists and risking their health in doing so.”* [12]

*“The Committee notes with concern: (a) strict laws on abortion which lead to high numbers of clandestine abortions with attendant risks to life and health of women; (b) limited accessibility for women to contraceptives due to high prices and restricted access to suitable prescriptions; (c) the elimination of sexual education from the school curriculum; and (d) the insufficiency of family planning programmes”* [13].

In 2000, the Committee on Economic, Social and Cultural Rights issued a General Comment [14] that women’s right to health requires the removal of all barriers interfering with access to health services, including sexual and reproductive health services. The Committee identifies excessively high payment for health care services, whether private or public, as a barrier. It goes on to say that retrogressive measures taken in relation to the right to health are not permissible and that States have the obligation to ensure that “medical practitioners and other health professionals meet . . . ethical codes of conduct” and “must abstain from imposing discriminatory practices relating to women’s health status and needs”.

The exorbitant fees for clandestine abortions were considered by the Tribunal judges to constitute one such barrier in Poland. The Tribunal judges found that the Anti-Abortion Act is clearly retrogressive, that many Polish physicians were disregarding their ethical and professional obligations

to women who had a right to legal abortions, and that only individuals, not hospitals or hospital wards, can invoke conscience.

In 2000, the UN Human Rights Committee urged governments to report on “any measures taken by the State to help women to prevent unwanted pregnancies, and to ensure that they do not have to undergo life-threatening clandestine abortions” [15]. The Tribunal judges noted that the Polish government has not complied with this.

Finally, the Tribunal judges noted that the Anti-Abortion Act criminalises the provision of a medical procedure that only women need, which according to CEDAW constitutes discrimination on the basis of sex [16].

The evidence presented at the Tribunal was clear and compelling. Eight years on, the Anti-Abortion Act has tremendously negative consequences for Polish women and society. The Tribunal judges concluded that the Polish law and practice were in contravention of international human rights standards, and that both law and practice must be changed urgently to guarantee Polish women the right of access to safe and affordable abortion services.

## The future

The Tribunal was an important moment in abortion rights advocacy in Poland. The timing, two months before a general election, ensured that the question of abortion would have a higher profile. The effect lasted for quite some time; most national dailies, three out of five political weeklies and three women’s magazines published an article on the Tribunal, and it was covered on several radio and TV programmes. Some stations used individual cases in interviews, talk shows and documentaries. The direct effect on the parliamentary campaign seemed rather moderate, however. Although the parties differ significantly on the issue of abortion, they appeared to be in agreement not to bring it up during the elections.

On the other hand, abortion did become an issue again among the broader women’s movement after many years of inaction by mainstream women’s groups. As a result, International Women’s Day on 8 March 2002 was devoted entirely to the theme of reproductive rights, something unimaginable even a year ago. The main slogan was: “Yes to contraception, yes to sex education, yes to legal abor-

<sup>3</sup> Treaty bodies are committees of experts who monitor compliance with human rights treaties by the States who are parties to those treaties.

tion". The events were very successful, with high attendance and good press coverage.

In addition, the Parliamentary Women's Group and the Chair of the Commission on Health promised, on the same day, to begin a process to liberalise the Anti-Abortion Act. The latter promised to organise a hearing similar to the Abortion Tribunal in the upper house of parliament (Senat). This would be a great achievement. Several other legislative initiatives are being considered now that there is a new, more liberal Parliament. However, a radical change in the law is unlikely since pro-choice MPs do not have a majority, and the majority of the 15-member Constitutional Court, which could have the final say on any reformed law, is of right-wing persuasion.

Importantly, the Tribunal drew the attention of a group of activists from Slovakia who had just created Pro-Choice, a coalition of groups concerned about the increased activities of rightwing, anti-abortion groups in their country. They were galvanised by the proceedings and reinforced in their conviction to act decisively in order not to go "the Polish way". They have since organised a series of meetings in Slovakia to develop their strategy and will soon join ASTRA, the Central and Eastern European Women's Network for Sexual and Reproductive Health and Rights, formed in 1999. Poland was the first but hopefully the last country to restrict access to legal abortion in Central and Eastern Europe, but in order to maintain even the *status quo* more activism is needed.

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## Résumé

Le 25 juillet 2001 à Varsovie, la Fédération polonaise des femmes et de la planification familiale a organisé un tribunal sur les droits à l'avortement pour mettre en lumière les conséquences négatives de la pénalisation de l'avortement en Pologne. Un jury d'experts polonais et étrangers a reçu les témoignages de sept Polonaises sous la loi anti-avortement de 1993. Seules deux des sept femmes ont pu témoigner en personne. L'une est morte en 2001, à l'âge de 21 ans, d'un avortement non médi-

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## Resumen

El 25 de julio de 2001 en Varsovia, la Federación Polaca de la Mujer y la Planificación Familiar organizó un Tribunal sobre el Derecho al Aborto para dar a conocer las consecuencias negativas de la criminalización del aborto en Polonia. Un panel de expertos polacos y extranjeros oyeron testimonios de las experiencias de siete mujeres polacas bajo el "Acta Anti-aborto" de 1993. Solamente dos de las siete mujeres pudieron contar sus historias en persona. Una de ellas falleció en 2001, a la

calisé. Une autre est devenue aveugle après avoir mené sa dernière grossesse à terme. Une autre est en prison pour un infanticide commis, selon toutes probabilités, par son ami. Des journalistes nationaux et étrangers ont assisté au procès, ainsi que des observateurs de tous horizons – écrivains, étudiants, mères, militants, féministes, époux. Les preuves étaient claires et éloquentes. La législation restrictive rend l'avortement dangereux en le forçant à la clandestinité, met en danger la vie des femmes, crée un climat où même les services autorisés par la loi deviennent indisponibles, et enfreint les normes internationales des droits de la personne. Cette législation n'a pas augmenté le nombre de naissances en Pologne. Elle a seulement fait souffrir les femmes et leurs familles. Le tribunal a porté la question de l'avortement dans les médias avant une campagne électorale et a encouragé les groupes de femmes polonaises et d'autres pays d'Europe de l'Est à devenir plus actifs dans la défense des droits à l'avortement.

edad de 21 años, de un aborto malhecho. Otra quedó legalmente ciega después de haber llevado su último embarazo a término. Otra está presa por infanticidio, del cual a todas luces fue responsable su novio. Asistieron periodistas nacionales y extranjeros, además de observadores diversos – escritores, estudiantes, madres, activistas, feministas, esposos. Las pruebas eran claras y convincentes. Las leyes de aborto restrictivas hacen que el aborto sea un riesgo al relegarlo a la clandestinidad. Por lo mismo, ponen en peligro la salud de la mujer, crean un clima en el cual hasta los servicios que son permitidos no son disponibles, y contravienen las normas establecidas por las leyes de derechos humanos internacionales. La ley de aborto restrictivo en Polonia no ha aumentado el número de nacimientos; solo ha causado el sufrimiento de las mujeres y sus familias. Gracias al Tribunal, el tema del aborto apareció en los medios de comunicación previo a una campaña electoral y motivó a los grupos de mujeres polacas y de Europa Oriental a movilizarse en defensa del derecho al aborto.