

ABORTION AS AN ETHICAL PROBLEM

Introduction

This paper deals with a very topical subject which is abortion, alias a termination of pregnancy. The first part of this paper deals with the definition, the basic legislation, and the characteristics of the procedure itself in the Czech Republic. Furthermore, the paper focuses on a perception of abortions not only in Europe but also in the rest of the world. There is also a description of the so-called Hot Line, and the program called harm reduction. The paper also brings out a topical subject which is abortions in Poland.

What is an abortion?

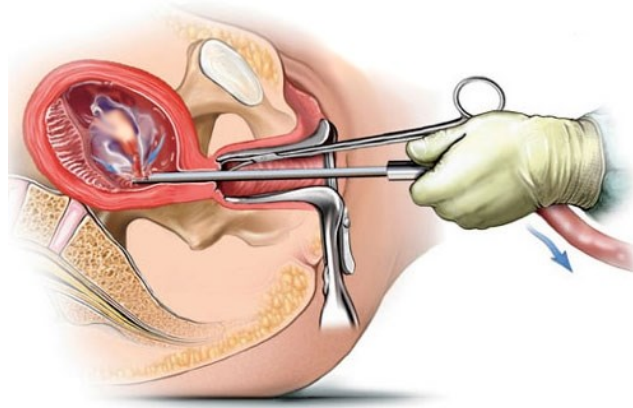
An abortion or an artificial termination of pregnancy can be performed due to health conditions, or social conditions. Needless to add, social conditions are a very delicate issue that raises many questions (e.g., political, ethical, or even professional). Abortions due to a social condition can be considered as a very often repeated procedure. There was a proposal in the Czech Republic, that every doctor who performs a procedure of abortion should be punished. This, luckily, did not pass, however, this does not mean that similar discussion cannot occur again (Hašková, 2004, st. 1)

An abortion is a medical surgery when the pregnancy is artificially and intentionally terminated. Time is also a very important feature, since the sooner the patient makes the decision, the better – also from the point of view of recovery. The Czech Republic's law which concerns abortions is the law n. 66/1986 defined as follows: Women can ask for a termination of pregnancy until the 12. Week of pregnancy. Women need to undergo an ultrasound screening, as the size, and the age of the fetus is very important in this procedure. In case that the woman gets pregnant, and she is not an adult, the approval of parents is necessary for the abortion. If she is 16 years older, then she can do the decision by herself, however, the parents need to be informed about the health condition of the patient. The law forbids the abortion in following cases:

1. An abortion was performed in the last six months
2. If the age of the fetus is more than 12. Weeks of pregnancy, proven by the ultrasound screening

3. If the woman is a foreigner outside the EU, and she does not dispose of a permanent, or long-term residency (the necessity of a written document)

The procedure is advised to be performed until 8-9. Week of pregnancy is the best. It can be stated that the later the surgery is performed, the higher the risks for the patient are. The procedure is performed within a day (online, 2021).



Picture 1 Abortion (<https://interupce.info/miniinterupce-jak-probiha-cena>)

Abortion as an ethical problem

In the past, abortion was perceived as a delicate issue, and it was defined by the socio-economic conditions, moral, and religious norms of different cultures. It was performed throughout the time in all nationalities. Nevertheless, nowadays, the global approach is extremely inconsistent – from the complete ban to full acceptance. A restrained approach admits an abortion in a particular form, as per the phase of pregnancy, and the complete liberalization refuses as non-ethical. Optional abortion is legal in twenty European countries, in the next seven countries (UK, Finland, and Cyprus) there are a restrictive list of reasons for the refusal of abortion, and in the remaining three countries (Ireland, Poland, and Luxembourg) there is the full interpretation of reasons for the refusal, and the dismay, and the unwillingness to perform an abortion which leads to the minority of legal abortions if there are any.

In Bulgaria, there is progress from the complete ban to a gradual liberalization. In the 50`s, abortions were forbidden, except for serious medical reasons. Later, there was a discussion on the issue, and in the 90`s, the liberalization for optional abortions came into effect.

During 2015-2019, there was an annual number of abortions 73 million, and even though there is such a huge number, access to the abortion complex care is in jeopardy. Various factors, such as poor accessibility to fine services, high costs, stigmatic issues, and the conscience of the providers reach into high mortality and sickness rate of women worldwide. Restrictive laws, regulations, and useless demands which aim are to pull away and restrict access to abortions cause a deeper problem with an effect on those, who are already marginalized.

Access to a safe, and effective abortion is a basic constituent part of the sexual and reproductive health of a society, and each and every individual has the right to decide whether they want to be pregnant, or not, and when.

Community organizations, attorneys, providers of a health care, and feministic groups all over the world have developed innovative models for the accessibility to abortion care in order to reduce problems already stated in this paper. They provide information based on evidence as they endeavor to make access to abortions easier. However, since there are many obstacles, those models work very often as a parallel to formal medical care, or they are integrated into it.

For instance, the program called harm reduction (some of them existing in some clinics) are accessible in some countries, including some programs which make the access to information dealing with the self-autonomy of medical abortions easier, broadens the knowledge of patients, and raises awareness of laws. Those and web platforms are widely used in countries such as the USA, Canada, and in many parts of Europe in order to ease providing of medical care, sometimes also with sharing tasks (defined as extending providers of medical care who can provide them) to direct access to medicaments to abortions. Some organizations even provide personal accompaniment, where advice and support are offered throughout the whole process of an abortion.

Hotlines were widely used as a tool designed for easier access to sexual and reproductive health. Hotlines for HIV/AIDS were originally designed in order to provide an intimate discussion about questions and even helped to overcome geographical obstacles to access to medical care. Hotlines are simple and accessible tools that can be used by everyone who disposes of a telephone, mobile phone, or digital device. It is based on an anonymous contact via a voice, text message, or chat. This is widely used for stigmatized issues of sexual and

reproductive character, such as HIV/AIDS, abortions, or issues of gender-abusive character.

There is also literature dealing with providing abortion via telemedicine, harm reduction, and the models of accompaniment, nevertheless, there are still some questions remaining about the hotlines. Hotlines, particularly designed for abortions, are defined as an “informative service which aim is to support the access to safe abortions and to provide information about how to terminate a pregnancy with use of medicaments established on reports based on evidence. Some studies have proven some positive impact, however, there is still a necessity of broadening of knowledge of how the hotlines work and make access to abortion easier. Simultaneously, they should provide a list of possible obstacles, or facilitators which are present due to a co-existence with formal medical systems. Hotlines are most often run by local feministic organizations, in order to fill the gap in the medical system and to guarantee the approach to safe abortion – from the procedure itself to advice and support.

However, there are some questions left. Those questions are mainly concerning the way how hotlines work, how a context affects their existence, and how the hotlines are perceived by users and providers (Roopan et al, online 2021).

The situation in Poland

It has not been so long ago when the Polish government refused life imprisonment for a performed abortion. Opponents could be found also in the conservative party. The omnibus bill which purpose was to prosecute for an artificial termination of pregnancy was not approved by the government. The punishment was supposed to be imprisonment for 5-25 years or even life imprisonment. A fetus should be marked as an unborn child. The omnibus bill was refused in the first reading by the government. Out of 421 the total, 361 deputies voted against.

Since January 2021, a woman can undergo an abortion only in cases of rape, incest, or if the pregnancy causes a high risk for the woman. Therefore, we discuss the strictest rules in Europe. Due to such restrictions, Polish women very often undergo an illegal abortion, or they are undergoing abortions abroad (online, 2021).

Poland nowadays deals with the case from the hospital in Bialystok (eastern Poland). A woman wanted to undergo an abortion, and despite the fact that the medical check has proven a terminal disease, the abortion was forbidden. The woman was depressed which was also approved by two independent psychiatrists, nevertheless, the hospital objected to it. They stated that according to the ruling of the constitutional court, which stopped abortions last year, put them aside. The woman was helped by the organization which arranged the procedure in another city. This organization also decided to run a legal dispute with the hospital. The CEO of the hospital defends his doctors – he states that they were afraid of losing the right to their jobs (online, 2021).

Conclusion

This paper can provide different approaches to the ethical issue which abortions are. It is noteworthy that the approaches differ in various nations. Most importantly, there are various programs, and hotlines that can even save a life. The situation in Poland is also problematical since polish women very often seek help in our country. The world should not definitely turn its back on this issue, as it needs to bring more attention to this.

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