



Training abortion doulas in Northern Ireland: lessons from a COVID-19 context

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Historically, societies have long-standing traditions of birth doulas, as lay persons who support the pregnant woman/person during the birthing process, with contemporary studies affirming their positive impact.¹

In parallel, abortion doulas have held roles in assisting in abortion.² The role centres on emotional and social support, with evidence of their impact increasing in the last decade.^{3–5} While some doulas operate within specific roles, a full-spectrum doula is involved in all reproductive health outcomes.³

While the COVID-19 pandemic presented challenges for sexual and reproductive healthcare (SRH) broadly and in particular abortion services,^{6–8} it also presented opportunities including abortion doulas working alongside clinical services to complement and be integrated within SRH. In this article we set out the development of abortion doula training in Northern Ireland (NI), within the pandemic context.

As co-convenors of the activist organisation Alliance for Choice (AfC), two of the authors (NC and EC) have been supporting abortion seekers in NI for a combined total of 16 years, assisting approximately 700 abortion cases during this time. Providing this help or even information about abortions risked criminalisation prior to the October 2019 decriminalisation of abortion legislation in NI. Having encountered abortion doulas at an international conference in 2016, AfC found a name for the work they were already doing. In the following 4 years they continued to provide the grassroots service alongside their role as activists and engaging in intensive political campaigning.⁹

COVID-19, coupled with refusal of the NI Health Minister to commission abortion services, gave a heightened impetus to this work. Despite his refusal, the

five Health and Social Care Trusts in NI responsible for delivering care proceeded with limited interim services.⁸ Subsequently, services in three Trusts have been interrupted due to capacity and staffing issues. This has increased the numbers of those accessing abortion from online non-government organisations outside of the official provision.

Additionally, the frequency of calls to AfC from abortion seekers requiring medication and access increased significantly following decriminalisation. The introduction of abortion regulations in March 2020¹⁰ saw a further uplift in calls, coupled with the COVID-19 lockdown, and calls increased from an average of four per week to 14. The time spent supporting these cases ranged from a few hours to days. Pastoral support was urgently needed as well as guidance on using the abortifacient pills, in particular for those who found the system confusing and stressful due to a lack of public information on abortion services. Abortion seekers' needs vary widely, and doula support was tailored to their emotional, logistical, practical and accompaniment requirements. Support ranged from reassurance before, during and after using abortion medication, information sharing, and accompanying abortion seekers to clinics.

As the demand for services increased, provision needed development beyond current resources. With advice from Mara Clarke (Abortion Support Network) and Siobhan Clancy (founding member of Abortion Rights Campaign) the "Lucht Cabhrach: Abortion Doula" programme was designed (translated from the Irish as 'helpers'). The content was informed by the World Health Organization and International Planned Parenthood Federation resources, as well as activists' experiences.

This course provided an opportunity to learn and connect with others also



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carrying out this work. The course was delivered online, with two sessions per week over 7 weeks. It was designed to encourage self-reflection, drawing on participants' experiences, with a focus on individualised doula support.

Inclusion criteria for participants required completion of one previous AfC workshop. The doula programme was promoted via a dedicated website and AfC Instagram page. A number of full-spectrum doulas, who were unable to find training specifically on abortion, joined the programme. The participants came from a range of demographics; all were women or non-binary people. All had directly supported abortions, were health professionals or had personal experience. Among participants there was a collective desire and commitment to support people through their abortions. An evaluation of the programme informed a training manual to be launched in Summer 2021, to support a newly established abortion doula network.

Looking to the future, a trained abortion doula network provides an opportunity to complement the professional workforce in the delivery of abortion services. This person-centred collective approach could potentially facilitate better continuity of care and ultimately improve the overall abortion experience.

While the Lucht Cabrach programme was initially developed for a NI context, there are learning opportunities for similar programmes internationally that want to support abortion seekers.

Twitter Emma Campbell @frecklescorp

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