

# *Abortion Democracy*: Sarah Diehl's advocacy documentary film for women's rights in Poland and South Africa

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## Abstract

**Objective:** Analyze the content of the documentary film *Abortion democracy – Poland / South Africa* (2008) directed by Sarah Diehl, its main points, hypothesis, conclusion and style. Provide update on abortion access in these countries since 2008. Assess its effectiveness in raising awareness about paradoxes of legality and access in an undergraduate class in the Global Health Program at the University of Iowa in Spring 2017.

**Outcome measurements:** Students had a choice of media to reflect on abortion issues in various countries and cultures.

**Results and limitations:** Diehl convincingly shows that in Poland where abortion is largely illegal, underground abortions by trained providers are relatively easy to obtain and frequent but they are exploiting women; in South Africa, the law is very liberal, but providers are reluctant and there is an unmet need for safe abortion. When becoming more democratic both countries limited women's rights and the ability to safely terminate a pregnancy. Discussion in the class of 37 students as well as the elective response paper showed that they were very affected by the documentary and understood the need for abortion access. This group may not be representative of the larger audience, especially on internet platforms because they were already interested in global health issues and generally pro-choice.

**Further research:** Several more documentary films about abortion access have been made since which deserve to be analyzed.

**Abbreviations and symbols:** The film is referenced with timestamps according to the upload in 5 parts on Youtube (part, min. seconds).

## Introduction

This article examines the independent documentary film *Abortion Democracy* (2008) made by German author and filmmaker Sarah Diehl which is available on DVD but also for free on several film platforms such as Vimeo, Youtube, Abortion films, and Culture unplugged [1]. The documentary is in English and Polish and provided with subtitles in English, German, French, Spanish and Polish and is marketed on its website for medical staff/students, politicians, lawyers, and “any audience interested in the international struggle for human rights” (*Abortion Democracy* n. d.) [2]. The documentary has been praised as groundbreaking in its effort to advocate for women's rights to contraception and access to legal and safe abortion. It has preceded scholarly studies on the subject (Keinz 2015 [3], Mishtal 2015 [4], Okonofua 2014 [5]). In addition, this paper assesses reactions of students in an undergraduate Global Health Studies course on contraception issues in world cultures at the University of Iowa.

Abortion in Poland was in the news again in fall 2016. Major international papers and news channels such as *The Guardian*, *BBC*, and the *New York Times* reported on strikes and rallies against a proposal for a total abortion ban in Polish cities in early October, resulting in the government stepping back (Lyman and Berendt 2017) [6], making the issue of the documentary discussed here, still timely. Tens of thousands, mostly women, protested on October 3rd against the ban, and the proposal was withdrawn at the end of the week. US president Donald Trump signed the executive order to stop federal money going to international groups which perform or provide information on abortions (known as the global gag rule) in January 2017 during

his first week in office, and global health organizations immediately pointed out that “it will unintentionally lead to more abortions and more deaths in Africa” (Soy 2017) [7]. This rule also features in the documentary film to be analyzed.

Sarah Diehl (born 1978) is a German filmmaker and writer of fiction and non-fiction living in Berlin. She has degrees in Museum Studies, African Studies, and Gender Studies. Diehl mostly writes about feminism, reproductive rights, abortion, and women without children. The self-financed *Abortion Democracy – Poland / South Africa* premiered in 2008 and won the award for the best German contribution at the Black International Cinema Berlin 2009. In the year before the documentary, in 2007, she edited a collection of scholarly articles on *Abortion in International Context*, to which women from various countries and continents contributed [8].

Is abortion still a feminist issue? Why is abortion still an issue in Europe? According to European treaties, the right to an abortion does not lie within EU's competences, and remains an issue regulated by the member states. Therefore, EU institutions, such as the European Commission and the European Parliament, cannot authorize the legalization, or the restriction, of abortion. Among the 28 European Union countries, only three severely limit access to abortion, namely Malta, Ireland, and Poland. The abortion pill is not legal in Poland, and

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the "ACT of 7<sup>th</sup> January, 1993 on Family-Planning, Human Embryo Protection and Conditions of Legal Pregnancy Termination" restricts legal abortions to "doctor[s] acting in a public health care institution" if the pregnant woman's life or health is at grave risk (diagnosed by two other doctors), a "grave and irreversible injury of the fetus" (making it unclear whether a genetic defect would count; again diagnosed by two other doctors), and the pregnancy being the result of a proven criminal act (Government of Poland 1993)[9].<sup>1</sup> The adjectives are important in assessing an exception, making it difficult to obtain abortions even in these cases. In addition, there is a conscience clause that allows a doctor to refuse a medical service, such as abortion, for reasons of conscience. Fear of the EU's liberal abortion law was a major factor in the debates before the accession and the platform of the anti-EU league in Poland (Szczerbiak 2012) [10].

In all other EU countries except Malta and Ireland, the law is much more liberal, and abortion on demand is possible within the first twelve weeks of pregnancy, including for socioeconomic circumstances. According to the Guttmacher Institute's fact sheet based on a study by G. Sedgh on "Abortion incidence between 1990 and 2014" (2016), "abortion rates declined significantly in developed countries but remained unchanged in developing countries" [11]. In the previous study of 2007 [12], reflecting the time of the documentary, both the lowest and highest subregional abortion rates worldwide were in Europe. In Western Europe, the rate was between 7 (Switzerland) to 17 (France) per 1,000 women of childbearing age—i.e., those aged 15–44, while in Eastern Europe it was 43. In Eastern Europe, the abortion rate held steady at 43 per 1,000 women between 2003 and 2008, after a period of steep decline between the mid-90s and the early 2000s. In 2008 Western Europe, Southern Africa and Northern Europe had the lowest abortion rates in the world, at 12, 15 and 17, respectively; in 2014, the "number of legal abortions per 1,000 women of reproductive age was highest in Cuba (57) and the Russian Federation (45). The legal abortion rate was lowest in Nepal (five) and South Africa (six), both countries where abortion was recently legalized and unreported, illegal abortions are still common. Other than these two countries, abortion rates were lowest in Belgium, Germany, Switzerland and Tunisia (7–8), where reported rates more accurately reflect the level of abortion because illegal abortions are rare" (Sedgh 2016) [11].

However, there is one country in central Europe where official abortion rates are even lower than in Western Europe, namely Poland which boasts a rate of 0 to 2% (UN Department of Economic and Social Affairs 2011) [13].<sup>2</sup> The government reports at most a few hundred abortions per year. However, the real numbers are estimated at about 200,000 to 240,000 illegal abortions per year, raising the abortion rate to 44 per 1000 women which is about the same as in countries such as Romania and Russia (World Health Organization Europe 2013; Sedgh 2007) [14,12]. Women's rights groups have pointed out that women often pay exorbitant fees and subject themselves to dangerous procedures. In the late 90s, there were efforts to revise the bill and allow abortion also in cases where the mother was or felt too poor to raise the child. It failed in the legislature in 2001 (Sierzpowska-Ketner 2004) [15].

It was in 2007 when the Polish abortion law and the situation of Polish women received international attention: Alicja Tysia, a 35-year-old single mother of three from Warsaw, took her legal case against a doctor and the Polish government to the European Court of Human Rights and won, based on the ruling that obliges all 46 member states

of the Council of Europe to ensure abortions are available where they are legal (Traynor 2007; Easton 2007) [16,17]. Tysia's case qualified for one of the exceptions in the Polish abortion law. She was denied a legal abortion in 2000 despite medical testimony that her pregnancy would seriously impair her failing eyesight. She could not afford an underground abortion. Tysia went nearly blind and was in danger of completely losing her eyesight after the birth of the baby. The Strasbourg-based court awarded damages to Tysiac based on the finding that she had been denied a legal right.

In addition to scholarly studies on the effects of the Anti-abortion law [18,19], the Polish Federation for Women and Family Planning published a booklet, *Contemporary Women's Hell: Polish Women's Stories* [20], and made a documentary film based on it with cases from Poland, Georgia, Moldavia, and the Ukraine, *Breaking the Silence. Women's Rights in Central and Eastern Europe* (2007/2013) [21]. Both were published in English to draw international attention to the issue. They are both mentioned and acknowledged in the documentary. In 2008 a new bill went into effect, in spite of protests, requiring doctors to register pregnant women in order to eliminate illegal abortions [22].

Tysia's case was an important impetus for Sarah Diehl's 2008 documentary film *Abortion Democracy* and covered extensively. The filmmaker who privately funded the film and also did the camera work herself, contrasts Poland and South Africa regarding abortion laws and their impact on the lives of women. In 1993, Poland made its abortion law very strict due to the increasing influence of the Catholic Church after the fall of communism. Prior, since 1956, abortion had not only been available upon demand but also paid for by the state. In contrast, around the same time at the end of the last century, South Africa legalized abortion in the context of reforming its health system after the fall of apartheid [23]. It has today one of the most liberal abortion laws in the world; in addition to abortion on request up to 12 weeks of gestation, the South African "Choice on Termination of Pregnancy Act. 1996" allows abortions up to 20 weeks for if a medical practitioner "is of the opinion" that there is risk to the woman's mental or physical health, a severe mental or physical abnormality of the fetus, the pregnancy is the result of rape or incest, or the pregnancy would "significantly affect the social or economic circumstances of the woman"; danger to the woman's life or severe malformations of the fetus (established by two practitioners) allow abortion even after the 20<sup>th</sup> week (Government of South Africa) [24]. A 2005 medical study found that from 1994 to 2001 the number of deaths in South Africa due to unsafe abortions sank drastically by 91percent [25]. However, in the first decade of the 21<sup>st</sup> century there was still a large unmet need because of a widespread lack of information and refusal of providers.

### Analysis of the documentary *Abortion democracy*

The paradox is the starting point for Diehl's investigation. The film examines why two very different countries limited women's rights in a time when they became more democratic overall. The 50-minute documentary consists mostly of interview sections in which women tell their stories, health care providers and advocates share their experiences and draw attention to major issues, and scholars provide analysis. The interviewer, Sarah Diehl, is never seen or heard. This may be due to her doing the camerawork herself but it results in an objective impression of the affected women addressing the viewer directly.

The segments are supplemented with informative blocks of text and graphs about the historical and political background, often against background of street scenes, images of events or documents mentioned. Section headings and textual information is inserted against simple

<sup>1</sup>In English translation on the website of Women on Waves, path abortion laws and on <http://www.legislationline.org/documents/section/criminal-codes>.

<sup>2</sup> Stan and Turcescu (2011) arrive at 139,000 to 249,000 for 2008 [15].

black background. The additional information is not narrated, but simply presented to the viewer, some of them accompanied by non-distracting music ("Nani" by electro Bamako, "Cryptozoology" by Paper Bird, "Sister is drowning" by Daniel Kahn, and "Condoleances" by Boy from Brazil). The documentary does not try to be very deep in its analysis but to be easily understood and clear in its message. The following brief overview recounts the main points.

The film's thesis, expressed through a narrative voice-over, is that the legal status of women is a direct result of the silencing or empowering of women's voices. While the film emphasizes the need for safe abortions and liberal abortion laws, it also illustrates the paradox that the implementation of such laws may have little effect on the actual accessibility of abortion services. It advocates for more awareness of limitations on women's rights globally, taking Poland and South Africa as examples but pointing to other countries such as Nicaragua in the conclusion.

The author allows streaming of the documentary and stated in an interview: "There is a lot of lobbying and misinformation about abortion online and it is crucial to use media in any way to oppose that ..." [26]. However, its viewing numbers are tiny in comparison with anti-abortion videos.

### Part 1: South Africa

At the beginning, Marion Stevens (Reproductive Right Alliance, Kapstadt) points out what makes South Africa's policy so liberal and the reason for it: abortions for health or socio-economic reasons are legal even in the second trimester. Before the 1996 reform, 50 % of gynecological cases in public hospitals were due to self-induced abortions, and hundreds of women died. Richard Burzelmann, coordinator of abortion doctors, explains that the implementation of the new statute did not work well. Awino Ockek (Mother Tongue Theater, Kapstadt) adds details about the access to abortions. Up until 2008, medical abortion was not available. Although not only medical doctors but also midwives and nurses were allowed to perform surgical abortions, only very few actually did them, often citing religious and conscience reasons. Also, since 1997 many social programs have been cut, and private clinics including Marie Stopes clinics charge for the procedure. Women are not aware of this fact.

Jane Harris (Women's Health, College of Medicine, University of Kapstadt) elaborates on the lack of providers due to most doctors not being trained in surgical abortion or being unwilling because opponents of abortion are very active at universities. Marijke Alblas, a doctor who performs abortions in the province of Western Cape, provides more insights by describing how she drives from clinic to clinic in order to meet the demand which is high due to sexual violence. Her point leads to Nolothondo Ntlokwana (Women's Rights Advice, Kapstadt) elaborating on the necessity to emphasize and strengthen the rights of women.

Several scenes are devoted to the statement of a nurse—her face not shown—who testifies to performing abortions although they are against her religion and how she gets bullied. Marietta de Vos (Mosaic Women's Health Center, Kapstadt) expresses concerns about the high numbers of abortions in the second trimester because often the women don't have information and cannot find a provider.

The most emotional part of the part are statements of a young woman named Liz who is pregnant, homeless, and desperate; she describes that she discovered very late after being raped that she was pregnant, her family threw her out, she could not find a provider for an

abortion, and she is considering trying old methods or hurting herself because she cannot see a future for herself with a baby. Nurrudin Farrah, a Somalian-South African author, makes connections to issues such as sexual violence, HIV-Aids, unmet needs for contraception and stresses that abortion is still seen as a woman's issue. The documentary concludes with segments about the "Mosaic" women's health center which it praises as unique in its approach of offering abortion within a wider concept of women's health and sexual education. It is such private clinics that suffered most from the implementation of the gag rule in 2001 (to 2008).

### Part 2: Poland

For the section on Poland, the interviewees besides Alicja Tysia are Wanda Nowicka (Federation for Women and Family Planning, Warsaw), Anna Lipowska-Teutsch (a psychologist at the Crisis Intervention Center, Krakow), Beata Zaduminska and Agnieszka Szabla, also psychologists (from the Women's Center and Crisis Intervention Center, Krakow), Ewa Waszkiewicz (a social and legal historian at the University of Wroclaw), Anna Zawadzka is a journalist and editor of a popular Polish newspaper, *Gazeta Wyborcza*, and a representative, Michal Placzek, from the Pro-Choice Alliance, Warsaw.

There are four sections (shown as intertitles) to the film's discussion of abortion in Poland: democracy and the Church, the Women's Liberation Movement, Media and Public opinion, and finally the ideals of Anti-Choice. The section sets out with a brief reminder of Poland's cultural identity and the historical change in the 1990s, the overthrow of communism and the strong role of the Catholic church in the forming of a democracy, concluding: "Paradoxically, one of the first legal changes in Poland's new post-communist democracy was to deny women their freedom of choice." (Part 4, min. 1.16) [27].

In the first interview shot, two psychologists speak about their experiences with women seeking help. They point out that even rape victims do not seek legal abortions; the abortion bill is not taken advantage of for fear of consequences. Wanda Nowicka gives more historical background. The change met heavy resistance in the early 1990s, and 17 years of debates followed. However, the new generation does not remember the previous freedom during communism, and reform would now be radical change.

The historian Ewa Waszkiewicz points out that the family policy of the 2000s promotes having more children. However, the end of communism also brought the end of free daycare and in schools religious instruction has replaced sex education. Health staff members have the right to refuse treatments they deem immoral. The historian continues to explain that the family policy is not congruent with reality which consists of rising divorce numbers and emigration, and also the fact that in the early 21<sup>st</sup>-century Poland women are more educated and tend to work outside the home. Still, the Catholic church is an important part of Polish identity, and no party is in favor of the right to abort. Psychologist Agnieszka Szabla reminds us that in Poland the development of women's groups was interrupted by communism which closed them all, so there were not feminist groups throughout this era and there was no second-wave feminism in the 1970s. Since the turn of the century, all kinds of progressive movements have been working hand in hand, supporting each other, and women's groups grew with and participated for example in the Gay Pride movement. The representative from the Pro-Choice Alliance confirms that activists have strong connections to the working class and left-wing advocates. Agnieszka reminds the viewer that reproductive issues are connected with other forms of oppression.



The journalist Anna Zawadzka in her statement opposes the issue of abortion being absorbed by the radical right, promoting stereotypes about pro-choice women as bad, without feeling, etc. She started an "I had an abortion" campaign in her daily paper which failed because women did not want to publicly expose themselves. Agnieszka recalls the media attitude about women as much more positive immediately after the fall of communism, praising women's positions and lives. This has radically changed and instead in 2007 politicians speak in the media about and to women. The psychologist Lipowska-Teutsch elaborates that popular TV crime shows portray women as "embodiment of evil".

The last section, "The Ideals of Anti-Choice", begins with how the accession to the European Union in 2004 did not bring change because Poland (like Ireland and Malta) retained authority over abortion laws and met no resistance. Lipowska-Teutsch calls this political hypocrisy; she observes social energy being channeled, social dissatisfaction with many issues directed solely at women who abort. This often results in violence against women, and women being treated as murderers even when intercourse was forced. She continues that women tend to internalize such accusations and feel guilty, they are bombarded with information that abortion is murder. A still shot formulates the conclusion from her experiences: "The law allows exceptions but doctors refuse to perform legal abortions." (Part 5 min. 3).

Then Alicja starts telling her case how her doctor refused her an abortion in spite of her health issues. She claims that it is very common that some doctors advertise (under code as anonymous "gynecologist" with phone number only) the procedure privately services, often at very high prices. She could not afford such an underground abortion. She tells the viewer of her lasting damage to her sight, also that she cannot afford the medication. Then her lawsuits are reported. Alicja points out that the European Court only confirmed that Poland has to follow its own law, still the Polish government lodged appeal and delayed, knowing her difficult situation. She recalls that 68 Catholic organizations fought her and were not interested in her situation or in helping her and provide for her children. One of the stills informs the viewer that there was a public suggestion to have her children taken away because she had tried to kill one of them.

Wanda Nowicka, from the Womens group then explains that right-wing youth groups have gained popularity and in the meantime several of them are representatives in parliament. They oppose the queer rights movement and are violently against abortion. Often, the activities by the Federation for Women and Family Planning were blocked by such protesters.

The psychologist Lipowska-Teutsch explains how anti-abortionists adopt the language of the Holocaust and of survivorship. She informs the viewer of therapy groups for whole families where the women tried to abort another pregnancy and insists that such therapy that sees all children as survivors tries to install guilt in the women. Again, it is a still that gives the important numbers: "In 21<sup>st</sup> century Poland there are only 150 legal abortions per year, but up to 200 000 'illegal' ones for which doctors overcharge for their own profit and at the expense of the women in need." (Part 5 min. 8.05)

The next still draws attention to open advertising and excessive use of emergency contraception by Polish women. Lipowska-Teutsch points out that in the debate Christian values are quoted very selectively. Poland is still officially very Christian but these same people are not ready to distribute wealth, only the pregnant woman is supposed to carry out Christian values, not the man involved, not the politicians.

The second-to last still of the documentary draws the conclusion of Diehl's finding contrasting Poland and South Africa. "Illegal abortions are more readily available in Poland than are legal abortions in South Africa. / However, systematic hypocrisy about abortion is not restricted to these two countries, but can be found all over the world." (Part 5, min. 10.02)

## Student responses

Students<sup>3</sup> reacted most to the personal stories in the documentary film, found it "provoking and challenging" but also "dramatic." The historical background and paradox in the democratization process was not understood across board. The conscience clause was brought up. Because there was a choice of topics, only 8 students chose to reflect about "Abortion Democracy" in a paper, all of them very positively. They valued the documentary, although somewhat dated, for giving them insights into how culture affects access to abortion (as a component of women's rights) beyond legal access. One student concluded, "[t]hese [rape, health issues] are just some reasons why abortion should be legal in all countries and should be left to the mother to decide whether or not to terminate a pregnancy." Another student was impressed by the comprehensive approach of the Mosaic clinic, stressing sexual education, prevention of sexual violence, and inclusion of partners. One student regarded the documentary suitable not only for "clinicians and medical staff, but also for NGO's, men and women around the world to take notice and hopefully action against the unlawful disregard towards a human's right to terminate [a pregnancy] or gain the proper sexual health care." The question of what has changed since 2008 was answered with facts from the following.

## Recent developments and further research

In talking about her documentary in several interviews, Sarah Diehl has argued that liberals have left the topic of abortion to conservatives, and there needed to be counter-voices: "I want to bring different feminists together to join groups and networks against the backlash. ... to exchange information between pro-choice groups and join together to put pressure on the EU and national politicians. Rights are being chipped away here without women noticing" [28]. She shares her standpoint with the Amsterdam-based "Women on Waves" group, founded in 1999 by gynecologist Rebecca Gomperts, whose goal is "to pull the themes abortion and unwanted pregnancy out of the closet and onto the public agenda" [29].

The legal situation is unchanged. In 2014, there was another case in Poland which caused controversy because a woman was refused an abortion although she met the criteria for a medical indication; in response to her claims, the "Polish Episcopate produced a statement in support of pro-life doctors" [30]. The report continues: "In 2011, the "Yes for Women" (Tak dla Kobiet) campaign tried to introduce a law concerning conscious parenthood and other reproduction rights, including the liberalization of the abortion law. However, the project did not collect the required 100,000 signatures to be considered by parliament" (Kokoszczynski 2014). On the other hand, the anti-abortionists collected over 500,000 signatures for a proposed bill to ban abortion in Poland altogether [31]. The bill was rejected by a majority in the Parliament but was revisited in 2016 as already mentioned above.

<sup>3</sup> In the undergraduate class "Contraception across time and cultures" (offered by World Languages, Literatures, and Cultures; cross-listed with Global Health Studies, et al.), Spring 2017 (37 students) and 2016 (31 students); information available at [https://myui.uiowa.edu/my-ui/courses/details.page?\\_ticket=15\\_4ifZBt-1xCcd6UpDP17K7cVdtYnp&iid=820110&ci=169377](https://myui.uiowa.edu/my-ui/courses/details.page?_ticket=15_4ifZBt-1xCcd6UpDP17K7cVdtYnp&iid=820110&ci=169377).

There are many methods of terminating unwanted pregnancies used by women without legal access to abortion. In Europe, the most common one is traveling to another country, and the EU with its freedom to travel has made this much easier [32]. "For example, a Slovakian clinic was recently found to offer abortion service, including the transport of the patient from Poland" [31]. A 2010 advertising campaign by a pro-abortion group in Poland mimicked a Mastercard advertisement and offered services in the UK, stating "For everything you pay less than an underground abortion in Poland"; it elaborated: "An underground abortion in Poland costs 2,000-4,000 zlotys (\$640-\$1,270), compared to 400-600 euros (\$510-\$760) in Germany, 280 euros in the Netherlands and 450-2,000 pounds (\$700-\$3,120) in Britain" [33]. The ad caused controversy not in Poland but in the UK for selling out its health services.

Increasing access to contraception around the world is a priority of health organizations. The hope is that it will make cases like the ones Sarah Diehl's film exposes, a thing of the past. The reality, however, is that between 1990 and 2014 abortion rates have not declined significantly in developing countries. There is another development, however, that has significantly reduced the number of complications and deaths after self-induced abortions in Mexico and other countries especially in South America: Misoprostol, a prostaglandin and common medication treating ulcers and arthritis, is sold over-the-counter in Mexican pharmacies [34]. In the US as well as in Canada, it is known under the brand name Cytotec and requires a prescription. One of the side effects is contraction of the cervical muscles and thus abortion in the early stages of pregnancy up to 9 weeks of gestation. This information has spread since the late 1980s in Brazil and has led to an enormous underground phenomenon of self-administered medical abortion that has even extended to Texas and other parts of the United States where funding of clinics that provide abortion services has been cut [35].<sup>4</sup> Medical studies have investigated its impact on maternal mortality due to abortion [36,37] and argued for putting "Misoprostol in women's hands" as "a harm reduction strategy for unsafe abortion" [38]. While its success rate of eighty to eighty-five percent for inducing abortion is not as reliable as the misoprostol/mifepristone combination in the standard medical abortion, it is widely available [39] and relatively inexpensive, and many women see it as a safe alternative to seeking out a willing medical professional or trying their luck with a coat hanger or other blunt-force abdominal trauma [35]. The International Women's Health Coalition spreads information about aborting with Misoprostol [40]. Grassroots organizations such as the Dutch *Women on Web*, a subgroup of Women on Waves, advocate for and provide access to abortion with Misoprostol globally. They have set up telephone hotlines and websites informing women how to safely abort with misoprostol, watched critically by health organizations and researchers [41].

Since Diehl's film, major European television stations, a German-French TV producer and also the BBC, have produced their own documentary films advocating for abortion access: *Abortion, a Human Right* (2014) was advised by Vicky Claeys, director of the European section of the International Planned Parenthood Federation (IPPF) [42]. It examines how abortion law has changed within the European Union (especially in Poland and France) and draws attention to the fact that where conservative parties gained ground, access to abortion has become more difficult. The British documentary *Abortion: Ireland's Guilty Secret* of 2015 thematizes the battle over reforms in Ireland [43].

<sup>4</sup> This has led to headlines in 2015 when an Indiana woman was charged for feticide after using the medication; the verdict was overturned in 2016 (see Liss-Schultz 2016) [40].

Diehl's request that feminists may join groups and networks working for women's rights, and to use the media to advocate for the right to abortion, has been realized in several ways. I should mention in particular the Twitter movement #ShoutYourAbortion [44], started in September 2015 by two students, Lindy West and Amelia Bonow, who wanted to de-stigmatize abortion in the US where once again it was an issue in the US presidential election campaign. It received a lot of attention even in national news [45].

In 2011, the Director of the South African Mosaic Clinic appealed to the UN Commission on Population and Development at their meeting in New York, "medical abortion as a safe choice for women is still not freely and comfortably available" [46]. She conveyed recommendations as already addressed in Diehl's documentary, including targeted actions against the widespread illegal abortions, increasingly carried out unconcealed and with strong advertising, resulting in a high death rate of pregnant women. She cited persistent violence against women as a major factor which prevented progress in health services, and therefore a priority to combat.

Already in 1999, gynecologist Rebecca Gomperts in Amsterdam founded the non-profit association "Women on Waves"—which now includes "Women on Web"—with the goal to put the issues of abortion and unwanted pregnancy on political agendas and to help women in concrete ways. Gomperts is also practically active and running political actions with an abortion clinic on a ship which is registered in the Netherlands, as well as recently drones. On it, she has provided legal abortions in international waters off the coasts of countries where it is illegal such as Ireland and Poland, often with controversial informational events on land. Her activism was documented in the documentary film *Vessel* (2013) [47]. [Even medical literature politicians have begun to acknowledge her work on medical abortion [48]. „Women on Web“ provides Misoprostol over the internet to women all over the world after consultation with a medical doctor which makes it different from many other dubious sources.

One last fact about contraception and abortion in Poland since the documentary. In 2007, emergency contraception, although heavily advertised, could only be obtained with a prescription, as Diehl examined critically. In early 2015, Poland adopted the EU recommendation to make one brand (ellaOne®), available to all women over 15 without a prescription. Media reported that women bought the supplies within a few months, fearing it would be revoked [49]. And indeed after "sweeping to power" in elections later in 2015, "the right-wing Law and Justice party (PiS) has taken steps to redesign Poland's young democracy to reflect the country's traditional Catholic values and more independence from Brussels" [50], and once again women's rights and health took the cut. Goettig reports critical reception of this move because it reflects "Catholic Church pressure and may lead to unwanted pregnancies." In June of 2017, the Polish parliament voted in favor of a law that turned emergency contraception again into a prescription drug [51], and the president, Andrzej Duda, gave his official consent. Opinion polls had shown that most Poles opposed it and Amnesty International warned that it will have a "catastrophic impact on rape survivors" [52].

Also in South Africa, clinics such as Mosaic inform aggressively about emergency contraception and maintain hotlines, in order to lower the need for abortions. At the time of Diehl's filming, the abortion pill RU 486 (Mifegyne®) had just become legal. It is noteworthy that today, South African websites providing information about abortion are foregrounding the abortion pill and aborting early [53], some even offering online ordering and delivery of abortion pills, for example

the Womens [sic] Abortion Clinic in Pretoria. This development should drastically lower the need for surgical abortions and especially abortions after the first trimester. Studies on the effect of both emergency contraception and the abortion pill—legally in South Africa and via internet or other venues in Poland—in both are desirable.

## Authorship and contributorship

Waltraud Maierhofer is the sole author.

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