

## **REPRODUCTIVE HEALTH SERVICES IN POLAND**

### **country report**

#### **Access to contraception and family planning services**

Family planning counseling is not included in the health care system. Also, it happens sometimes that doctors deny prescriptions for contraceptives, as well as lack of the modern contraceptive methods, e.g. post-coital contraception (so called "day-after" pill). There is no register of the contraception counselling services in Poland. There has also been no complex research conducted on the issue. The results of surveys show that the use of modern contraception is still relatively rare and that the large part of the society use ways that are not acknowledged as methods of contraception (such as rhythm based method or withdrawal). Research on "Pro health and sexual behaviors in an aspect of HIV / AIDS in Poland" conducted by Zbigniew Izdebski (Warsaw 1997) shows, that out of 1963 respondents (1001 women, 960 men, lack of data on gender in two cases), 55% did not use any method or used the above-mentioned ineffective ways of prevention. Being more specific, 30% did not use any method, 15% used withdrawal, and 10% used a calendar-based method. Out of modern methods, condoms were used most often, by almost 21% of respondents. The birth-control pill is used only by 8,3% of respondents, the IUD by almost 5%.

There are only three contraceptives partially financed from health insurance, all of them of similar characteristics, and none of them is one of the most modern. Thus, access to modern contraception is limited to those who can afford to buy it paying the market price (+ costs of the visit).

#### **Abortion**

Abortion was legal during Poland's communist era, but came under immediate legislative assaults following the country's transition to democratic governance. A 1993 law sanctioned by Poland's Catholic Church severely limited the grounds for legal abortion. Under the law, pregnancy can only be terminated if the pregnancy constitutes a threat to the life or health of the woman; if there is damage to the fetus; or if the pregnancy is the result of a criminal act such as rape or incest.

Women's health is not a priority for governmental health programs. The primary healthcare and education systems provide almost no health education. Nor do they promote a concept of health as well-being rather than the absence of disease (the WHO definition of health). Preventive measures, including counseling on family planning and information on diseases of the reproductive system are almost nonexistent in the public healthcare system, while sex education in public schools is provided to the most insufficient degree. This shows that reproductive health counseling and services need considerable reforming.

The anti-abortion law which was in force in Poland since 1993 resulted in many negative consequences for women's reproductive health, such as:

- many women who are entitled to legal abortions are often denied this right in their local hospitals
- abortions on social grounds are not stopped but simply pushed "underground", as women seeking abortions can find a doctor who would perform it illegally or go abroad
- the effects of the law are felt primarily on the poorest and uneducated members of the society, as illegal abortions are expensive.

Lack of knowledge about family planning lowers women's quality of life. Their sexuality is endangered either by constant fear of unwanted pregnancies or by seeking unsafe abortion.

There is a strong disapproval and obstruction toward those who choose abortions under the few conditions that still allow for it to occur. Doctors and hospitals frequently misguide or misinform women, who are legally entitled to terminate pregnancies, thereby placing the health of the women at serious risk.

Doctors (and even whole hospitals, even though they have no right to do so) often refuse performing abortion in hospitals they work in, calling so called clause of conscience – the right to refuse performing abortion due to one's religious beliefs or moral objections – or even giving no justifications,

creating problems as long, as it is needed to make performing abortion impossible under the law. There exists however a well organised abortion underground – terminations are performed illegally in private cabinet, very often by the same doctors who refuse performing abortions in hospitals. The average cost of abortion is ca 2000 PLN (equivalent of country's average gross salary). Federation for Women and Family Planning estimates that the real number of abortions in Poland amounts to 80,000-200,000 each year.

Official statistics on abortion are highly inaccurate and strongly depend on the legal context at the given time, as shown below:

Year	Total amount of abortions	Abortions related to social conditions	Abortions related to the threat to life or health of the woman	Abortions related to severe and irreversible damage of the foetus	Abortions related to pregnancy resulting from a criminal act
1987	123534				
1997	3047	2542*	409	107	7
2000	138	-	94	50	1
2001	124	-	63	56	5
2002	159	-	71	82	6

Source: Central Statistical Office; Annual reports of the Council of Ministers concerning the execution of the Family Planning, Protection of Human Fetus and Conditions of Termination of Pregnancy Act.

### Sex education

There is no sex education curriculum in Polish schools. The existing subject is called "education for the family life" and is based on Catholic vision of human sexuality. Such topics as contraception are included, but information about modern contraception methods are often untrue, while so-called "natural methods" are strongly recommended. "Natural methods" are also promoted during lessons of religious instruction classes at school. Thus, adolescents have limited access to the knowledge about human sexuality, as well as about modern family planning methods. They lack knowledge about modern contraceptives and on how properly to use them.

### Teen pregnancies

Lack of adequate sex education and access to (and information on) contraception results in a high number of teen pregnancies, as shown below:

age of the mother	live births in 2002	live births in 1999	live births in 1998
12	2	-	1
13	9	10	7
14	50	59	62
15	318	346	305
16	1425	1427	1365
17	4003	4011	4091

18	8105	8308	9041
19	13859	14608	15541

Source: Central Statistical Office

The number of live births given by girls of age group 15-19 constituted over 7% of all live birth in Poland in 2001.

## **HIV/AIDS**

Official statistics show that there are 8,340 persons infected with HIV (at least 4,910 persons infected due to a drug use), 1,314 persons acquired AIDS, 644 persons died of AIDS. The data have been collected since the beginning of the epidemic in Poland, i.e. since 1985, by the National Institute for Hygiene. The real number of HIV infections is estimated to be 2,5 times higher than the one cited in the official statistics.

## **Legal provisions concerning equality between women and men**

Poland will soon access the European Union. Due to this fact Polish law has been modified to meet EU requirements, including legal provisions assuring equal treatment of women and men.

Recent changes to the Labour Code prohibit any form of discrimination on the labour market (including sex, age, race, religion and sexual orientation). There exists also the Office of the Government Plenipotentiary for the Equal Status of Women and Men (it was established on 25 June, 2002), but plenipotentiary's position is not strong enough to encourage legal changes or to help in execution of already existing provisions.

## **Main field of activity of the organisation**

The Federation for Women and Family Planning defends the right to legal and safe abortion, to full accessibility of all medically accepted family planning methods and to modern gender-sensitive sex education. The Federation advocates for better reproductive health and rights standards and practices towards women within the healthcare system. It provides education and counseling services for women and youth with respect to family planning, sexually transmitted diseases including HIV/AIDS and other related issues.

The Federation defends women's reproductive rights through lobbying and advocacy activities aimed at:

- raising awareness and initiating activities concerning reproductive and sexual rights and health;
- reintroducing safe and legal abortion;
- legalising voluntary sterilisation as a contraceptive method;
- improving access to family planning information and services;
- promoting sex education;
- promoting patients' rights and partnership model of relations between medical personnel and clients;
- supporting initiatives to improve the quality of health care for women;
- promoting the concept of health as well-being and as a human right based on WHO definition adopted by the ICPD and FWCW.

The Federation publishes reports (e.g. on the consequences of the Anti-Abortion Law), papers, fact sheets, and a quarterly bulletin.

In the previous year, the Federation, in co-operation with women's NGOs, prepared a project of a bill

on reproductive health and rights which are meant to replace existing so-called anti-abortion bill. The project is a basis for further works in co-operation with the Parliamentary Group of Women. Currently, Polish ruling party agreed to support enacting a bill in case they gain enough support in the Parliament (which is not likely to happen in current political situation in Poland).

### **Support from donors to implement the projects\_**

Federation for Women and Family Planning is a non-profit organisation. Financial support from donors' is needed in order to realise its mission and goals, i.e. to co-ordinate and implement its activities, services and projects. Due to the fact that the reproductive rights and health are not a priority for Polish government, it is extremely important that the Federation is able to operate and continue its activities and advocacy efforts.

### **Conclusions and recommendations**

- The government should develop a high quality national policy on sexual and reproductive health, in co-operation with social partners
- The government should implement a health and social policy which will lead to a lower incidence to abortion, through the provision of family planning counselling and services and ensuring equal access to a range of high quality contraceptive methods
- In order to safeguard women's reproductive health and rights, abortion should be made legal, safe and accessible to all women
- Modern sex education should be introduced to school curricula

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