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“We are constantly on high alert”: activists and health professionals who defend the right to abortion are contending with growing risks

*By Lisa Maracani and Josefina Salomón**

There is rarely a dull day at work for Dr. Laura Gil, a Colombian gynecologist. But even for her, certain days stand out from the rest.

One morning in 2022, as she walked down the main hall of one of the clinics where she works in the Colombian capital of Bogotá, one of her colleagues stopped her and shook her violently in front of everyone, yelling, “Please stop doing abortions”!

Dr. Gil said everyone else just stood by and watched, doing nothing. The directors of the clinic took no action against the coworker who had harassed her.

“Just think if that had happened to a doctor with a different specialty. Nobody is going to grab and shake a cardiologist for helping a patient. I don’t let these situations get under my skin, but they are uncomfortable”, explained Dr. Gil, who is also a human rights activist.

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Dr. Laura Gil, a Colombian gynecologist

For 24 years, Dr. Gil has provided abortions throughout Colombia and trained young professionals in sexual and reproductive health services. She is also one of the faces of the movement behind the historic decision of Colombia’s Constitutional Court to decriminalize abortion in February 2022.

Though Latin America has made great strides in guaranteeing access to abortion in countries like Colombia, Argentina, and Mexico, an outright ban or tight restrictions persist in many other countries. Even in places where abortion has been decriminalized, there are still numerous barriers, especially for marginalized women. At the same time, aggression against those who provide abortions is on the rise.

“In Colombia, we’ve seen harassment, slander, and insults levelled against those who provide abortions, who are often ostracized at work. We always have to constantly be wary because the threats never stop”, explained Dr. Gil.

“For example, they slashed one of my friend’s car tires. They glued shut a different colleague’s padlock so she couldn’t open her locker. When another friend who is a psychiatrist stood up for a patient who was asking to terminate her pregnancy because of a health risk, one of her colleagues hit her with a folder. All this mistreatment stems from the idea that people who do abortions are morally inferior”.

Despite a gradual global trend towards decriminalizing abortion, it remains a crime and is strictly regulated throughout most of the world. It is fully banned in 22

countries. In places where progress has been made, anti-abortion groups strive to undermine those gains through well-funded campaigns with political backing that are often based on toxic narratives and disinformation.

Given these circumstances, those who defend the right to abortion or provide sexual and reproductive health services are under increasing strain, as a recent Amnesty International report found.

Dozens of health professionals told Amnesty International that they had regularly faced stigmatization, physical and verbal attacks, intimidation and threats, and that they are criminalized through prosecutions, investigations and unjust imprisonment.

Those working in fields like family planning, gynecology, obstetrics, or midwifery and who provide or facilitate access to abortions said that they are often shunned, attacked, or harassed at work. The situation leaves many deeply exhausted.

One such person is Dr. Guillermo Ortiz, an obstetrician from El Salvador, where abortion is banned in all circumstances and many women are unjustly imprisoned on charges of having induced a miscarriage. Dr. Ortiz was harassed for having advocated to save the life of Beatriz, a woman with a high-risk pregnancy that he helped her terminate in 2013.

“I experienced a very difficult period of attacks and stigmatization, even against my family, just for offering treatment to a young woman who absolutely needed it. I was stigmatized. [...] Then they stripped me of my position as Director of the Medical Division, a recent promotion I had earned. When I applied for other positions, they didn’t consider me [...]. It was a very painful time, a very difficult situation”.

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Dr. Guillermo Ortiz, an obstetrician from El Salvador

In the United States, where anti-abortion activists frequently protest outside of clinics that provide reproductive health services, human rights defender Grace Howard described a chilling but frequent scene:

“The fact that the physician is wearing a bullet proof vest and holding a gun while he's doing your abortion, [...] he's doing that because of the protesters outside who know his home address. Just that is so crazy and [...] should never happen. That's so intense and scary”.

Catalina Castillo, an activist in northern Mexico, told us about the attacks she had suffered for defending women's access to safe abortions.

“We work in a very conservative state. Our work is stigmatized because of false and wrong information spread by the authorities. I've received threats and been put under surveillance. So we've learned to work under the radar for our protection. We're not doing anything bad. We're simply trying to provide support and enable human rights and social justice. It's absurd that we face reprisals for something the government should be doing”, she said.

“The attacks against abortion providers, who are defenders of human rights, are a major and growing source of concern, both for the safety of the providers themselves and for how this affects the availability of life-saving abortion services. The math is simple: the fewer people offering these services, the greater the danger for patients”, said Guadalupe Marengo, head of Amnesty International's Global Human Rights Defenders team.

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Dr. Gil says that making work environments safer for health professionals and properly training more staff are key steps towards guaranteeing that life-saving abortion services are available to anyone who needs them.

"In Latin America, any effort to enforce the law is blocked by stigma. Even in Colombia, it is much harder to get an abortion outside of cities because there is less anonymity, among other reasons. Those who provide the service run a serious risk of social stigmatization, of losing patients, and of being singled out as providers", the doctor explained.

Apart from her work providing abortion services, Dr. Gil also trains young professionals to do what she does. She is worried that the level of harassment that these healthcare workers face dissuades others from learning how to do abortions, which in turn puts more women at risk.

"Why deal with stigma and a damaged reputation when you could choose a specialization where everyone will love you? Because of this dilemma, the only ones left to perform abortions are feminists with a strong human rights conviction. But that's not right, because it limits women's ability to access health services".

Dr. Gil says that governments could help by speaking up for those who provide abortion services and publicly acknowledging the importance of the work they do.

"That is an important part of this becoming normal. What happened in the United States, for example, where abortion services were segregated in specialized clinics, was a bad idea in the long run because it separated them out and made them a target of attacks. We need to make sure these services are accepted as normal and offered in all healthcare spaces. And we need stricter policies against harassment, both inside and outside of clinics".

**Lisa Maracani is an investigator at Amnesty International. Josefina Salomón is an independent journalist.*

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