

Repealed the 8th: Self care for reproductive rights activists in Ireland

Doris Murphy

Abstract

This article investigates the experiences of activists during Ireland's Repeal the 8th campaign, which secured abortion rights in Ireland through a 2018 referendum. The focus is on activists' experiences of self-care and collective care during their activism. Differences between attitudes and approaches to self-care are investigated, the emphasis on work versus care in movement culture is explored, and the need for a move from self-care to collective care for continued feminist activism is suggested.

Keywords: Repeal; reproductive rights; activism; abortion rights; care; aftermath; sustainability; motivation; campaigning.

Introduction

I felt so deflated and lost after the campaign. After being part of such a monumentally important campaign, making positive changes for our country, having those conversations, meeting such incredible people... I questioned all aspects of my life. My work, hobbies... it all seemed vacuous and pointless in comparison. I also couldn't understand why I was so low when the result was better than I could ever have imagined. It took a while to shake off.

(Survey respondent, 2019).

Activists in the Republic of Ireland successfully achieved access to abortion services for the first time in a landmark Referendum campaign in 2018. This was a long-fought campaign, 35 years in the making, and should have resulted in complete euphoria in feminist circles. I was a member of the campaign, and despite our victory, I observed that many campaigners, including myself, experienced exhaustion and burnout in the aftermath of the campaign. This led me to conduct this research, with a view to investigating activists' experiences of caring for themselves and each other during the Repeal the 8th campaign.

Stories played a huge role in the success of the campaign. Many people told their personal stories of abortion and pregnancy loss, often at huge risk to themselves. While this was a successful strategy, I wondered what impact it might have on those people who laid themselves bare in the interest of political progress.

I was fortunate to be part of this wave of pro-choice activism. I was the co-founder of Pro-Choice Wexford. Wexford is a county in the South-East of the country, with a population of 150,000. Wexford town, where I was based, has a population of 20,000. It is a rural town, and would be considered a traditionally Catholic community, but it has a strong culture of arts and drama. As noted previously, I experienced burnout in the aftermath of the campaign. This prompted me to reflect on the impact that activism can have on the wellbeing of social justice campaigners, and how best activists can sustain themselves to continue their important work.

Flacks (2004) noted that attending to the self-understandings of activists is important when analysing social movements. Furthermore, Cooper (2007: 243) noted that ‘care has become a central frame for feminist scholarship, providing a primary term through which intimacy and labour are configured’. For this article, self-understandings of care during the Repeal the 8th campaign will be investigated. My central research question is thus: How did activists engage in self care during the Repeal the 8th campaign? Audre Lorde (1988) reflected on the political importance of self-care, noting ‘caring for myself is not self-indulgence, it is self-preservation, and that is an act of political warfare.’ I will consider how the Repeal activists understood care within the campaign.

I will first provide a brief history of abortion rights activism in the Republic of Ireland so as to situate the activists I interviewed within a broader context. I will then discuss my methodology and limitations. I will then look at differing practices of self care between groups within the campaign. Next I will look at attitudes to work versus self care in movement culture. I will then discuss the need for movements to shift focus from self care to collective or community care. I will conclude with a reflection on self-care within the movement. I will now begin with a discussion of pro-choice activism in the Republic of Ireland.

A brief history of abortion activism in Ireland

The 1861 Offences Against the Person Act in Britain rendered abortion services illegal in Ireland, and this remained the legal position in Ireland until 1983, when a referendum was announced. Ireland has traditionally been a majority Roman Catholic country, with conservative laws around women’s place in society, and their bodily autonomy. Conservative groups in Irish society worried that the successes of feminist groups in improving access to contraception, as well as the liberalising of abortion laws internationally, might lead to relaxation of Ireland’s abortion laws (Kennedy, 2018). These groups campaigned for the insertion of the eighth amendment to the constitution, Article 40.3.3, which said: ‘The State acknowledges the right to life of the unborn and, with due regard to the equal right to life of the mother, guarantees in its laws to respect, and, as far as practicable, by its laws to defend and vindicate that right’ (Wicks, 2011). This meant that there would be a constitutional ban on abortion in almost all circumstances.

Pro-choice activists formed the Anti-Amendment Campaign (AAC) in 1982, to oppose the insertion of the eighth amendment for a variety of reasons (Anti-Amendment Campaign, 1982). Muldowney (2015: 130) in her discussion of pro-choice activism in Ireland in the 1980s noted ‘the anti-Amendment campaigners were portrayed and for the most part saw themselves as the harbingers of a more open, liberal society’. The Catholic Church still held a lot of power at this time in Ireland, so these activists were brave in their opposition to the amendment. The referendum passed with a 2:1 majority, meaning that the 8th Amendment was added to the Irish Constitution. In her discussion of abortion rulings in Ireland, Ciara Staunton (2011: 208) noted:

Prior to the passing of the Bill to amend the Constitution, the Attorney General voiced his concern that the wording was ambiguous and would lead to confusion and uncertainty among the medical profession, lawyers and judiciary.

It took 35 years for this amendment to be repealed, despite concerted pressure from feminist activists in the intervening years. The Anti-Amendment Campaign was understandably dejected after the Referendum. The next wave of pro-choice activism was surrounding the X case in 1992, when the term “Repeal the 8th” was first used. A 14 year old girl who had been raped and became pregnant was forbidden to travel to England for an abortion by a court injunction. She became suicidal, and at appeal in the Supreme Court it was decided that she could be permitted to travel for an abortion because of the risk to her life.

There were mass protests from both pro- and anti-choice activists in 1992. A referendum in November 1992 enshrined the right to travel for an abortion, as well as the right to information about abortion. The Irish Government did not legislate for these situations despite sustained pressure from pro-choice activists. Ruth Fletcher (1995) noted that many pro-choice activists had suggested Irish women should tell their abortion stories, however ‘Irish society’s negative view of abortion, which has developed without listening to women’s words, now inhibits Irish women voicing their experience of abortion’ (1995: 63). Abortion was so stigmatised that people were reluctant to tell their stories in the 1990s.

The latest wave of pro-choice activism began in 2012, when the death of Savita Halappanavar resulted in renewed momentum. Savita Halappanavar was an Indian woman living in Galway, who in 2012 experienced a miscarriage. When it became clear that her foetus had no chance of survival, she and her husband Praveen requested a termination of pregnancy. This request was denied, as there was still a foetal heartbeat. Savita developed sepsis and died as a result of the inaction of her doctors. Inquiries into the death afterwards found that the 8th Amendment resulted in a chilling effect which meant that doctors were afraid to take action even when the life of the mother was at risk. Savita’s death angered the Irish public, and precipitated a new wave of pro-choice activism.

The Abortion Rights Campaign, and the Coalition to Repeal the 8th Amendment, along with the National Women's Council of Ireland put pressure on the Irish Government to Repeal the 8th Amendment. Decisions from the European Court of Human Rights also supported this, noting that Ireland was contravening human rights protocols by not providing abortions when a woman's life was at risk. Enda Kenny, Taoiseach (Government leader) at the time, recommended that the Citizens' Assembly (a group of 99 citizens) look at suggested changes to the abortion legislation. The Citizens' Assembly considered the issue from November 2016 to June 2017 and recommended radical changes to the legislation. These recommendations were debated in both houses of the government, and a referendum was announced in February 2018, to take place in May 2018. This resulted in a frenzy of campaigning by pro-choice activists.

On May 25th 2018, 66.4% of the Irish public voted Yes in a referendum to "Repeal the 8th". Legislation was enacted on 1st of January 2019, and abortion services became available from then. There are still many issues with this legislation, including a 12 week gestational limit for most abortions, a mandatory three day waiting period, and barriers that migrant women face in accessing abortion. Service provision varies across regions, with many doctors and hospitals refusing to provide abortions. In the rest of the paper I will discuss the research that I conducted into activists' experiences of care within the Repeal the 8th campaign. This was mostly focused on the latest wave of activism (2012 onwards), but some activists had been involved for decades longer. I will begin by discussing my methodology and its limitations.

Methodology

Hemmings (2005: 121) notes that 'nostalgia smoothes away the rough edges of this particular history; an innocent essentialism can be seamlessly integrated into a feminist progress narrative'. This is applicable to the Repeal campaign, as it would be easy to reflect on the campaign as a complete success. While this is one facet of the story, it does not preclude other more complicated factors. The personal cost of change can be high, and through surveys and interviews I hoped to document a variety of experiences that would contribute to the complex story of the Repeal campaign. I circulated an online survey to activist organisations, and received 221 responses. I completed nine oral history interviews, all with women who were active with different organisations during the Repeal campaign.

While reading the literature on activism and social movements research, I became aware of autoethnography, and of its use as a feminist research methodology. Autoethnography transforms 'personal stories into political realities' (Ettorre, 2017: 2). With this in mind, I endeavoured to intertwine my own personal story of the Repeal campaign with the stories of my interviewees and survey respondents, and with the objective outcomes of the campaign. The importance of storytelling as a feminist methodology exists here on several

levels: the stories that were told during the campaign, the stories that interviewees told me about their experiences, my story of the campaign, and how they all intermingle to provide a complex and often contradictory story of the Repeal campaign as it was experienced by the activists within it. In the next section I will consider limitations to my research methodology.

Limitations

There were several limitations to my chosen methodology. Firstly, the survey contained only one qualitative question, and many of the respondents noted that they wanted to provide further information. Secondly, due to time constraints only nine activists were interviewed. While this covered a cross section of different activists, there were some groups who were not represented. Ideally, I would have liked to interview multiple members of various communities, as I do not think that one member of a community is representative of the whole group. One of my interviewees, who has a disability noted:

The experience of disability is so diverse, for me while I have experience of mental health difficulties, vision impairment and blindness, and physical impairment, there's so much disability experience I don't have, so it's very important that there isn't just one voice at the table.

She made that comment in relation to committees and working groups, but it is applicable to research projects also. Thus, while I tried to interview a variety of people with different life experiences and viewpoints, it was not possible to cover every group in society. I decided to interview only women due to my limited time, so further research into the experiences of men involved in the Repeal campaign would be enlightening. Throughout the surveys and interviews, themes around self-care emerged. In the following section I will discuss the first theme, which is differing practices of self-care.

Differing Practices of Self Care

Gender and generation

While analysing survey responses and interview transcripts it became apparent that self-care was viewed and practised differently by activists within the campaign. Gilligan (1995: 124) problematised the gendered association of women with care, when care is framed as 'an ethic of selflessness and self-sacrifice'.

Interestingly, this idea was echoed by one of the survey respondents, when she commented:

Because the organisations were mostly made up of women, there was an expectation that everyone would be “mothered” in some way ... I believe this to be an internalised sexist response where, as women, we are conditioned to feel entitled to unreasonable amounts of emotional labour from each other. I believe this is a recurring problem in women-led movements and should be critically analysed within movements so that unreasonable expectations of quasi-maternal care from comrades can be mitigated.

Another activist and organiser who provided an in-depth comment on the survey also raised this issue:

I think it's also interesting to consider the gendered element to this - because it was women led, we were possibly better at considering care, but also was the expectation of care higher because we were women led?

These comments raise interesting questions about the gendered lens through which we view women’s rights movements. It is possible that social movements made up primarily of men, or with a balance of men and women, would not be expected to provide care to their activists.

Another interesting comment which suggested a generational difference in attitudes to self care was the following, which was made by an older activist who has campaigned since 1983:

To be honest the focus on self-care amongst some of the younger activists involved was quite amusing and at times frustrating as they had to go to yoga or mindfulness sessions rather than campaign and canvas.

Another respondent noted that she hadn’t realised how much of an issue self-care was for younger activists, suggesting that generational differences might have presented in a variety of organisations. A comparative study of older versus younger activists’ experiences or expectations of care within social movements could be an area of further study. In the next section I will consider individual differences in approaches to self-care.

Individual differences

It was clear when analysing survey responses and interview transcripts that people had varying ideas of what self-care looked like for them, for example one activist who is based in Northern Ireland noted:

A lot of sea-swimming went on during Repeal as well in Donegal, a lot of us just needed to get in the sea. So I do think that nature, and tapping into our inner Celtic goddesses and all ... it was earthy, for me anyway, really earthy and in

touch with something more primal, which is maybe where I drew a lot of strength from as well.

Thus, for this activist, self-care was a spiritual endeavour, which helped her feel connected to her past, and also energised her for the campaign. Another activist spoke of more hedonistic ways of practising self care:

Drugs and alcohol! [laughing]. My need to unwind was growing exponentially with the amount of work that I was doing... So if I'm carrying a lot of stress, I have to relax that much harder. So that for me is super indulgent, it's music and getting a buzz on, it's just really immersive, losing myself in music and dancing and stuff like that. At the end of every single night. That's what I found, I'd be going home and I would need like four hours at the end of every night to go somewhere else.

This quote really highlighted for me how personal self-care is, and how much it differs from person to person. Another activist, who now campaigns with a group of women with disabilities, noted that following the Repeal campaign, her group are cognisant of minding themselves and each other:

It's not just about your workload personally, it's about where your energy levels are at, we're very conscious of trying to mind ourselves and mind each other, I suppose because we were born out of the whole Repeal thing, and it was very traumatic for a lot of us, that self-preservation, minding each other, minding ourselves is at the heart of everything we do... Yeah, it's a serious focus because I think we all got burned. We learned in the trenches, and it's like ok, going forward this is something we really need to be conscious of.

Thus, this organisation learnt the importance of caring for each other, and how it should be a primary focus for activist groups. One area in which some groups succeeded more than others was in assisting members with practicalities such as childcare and transport. I will discuss this further in the next section.

Practicalities

Motta et al. (2011) considered care as it applied to women's movements. They questioned whether movements consider the individual needs of activists, and also what organisational practicalities allow or prevent certain people from participating in organisations e.g. childcare, time of meetings etc. (Motta et al., 2011). In my research, many activists noted that practical support from their organisations allowed them to be active in the Repeal campaign. One activist, who is a single mother and a migrant noted:

Yeah, there's that solidarity within MERJ [Migrants and Ethnic minorities for Reproductive Justice], we know that we have other challenges, so we looked after each other. So say for example if there's a meeting in Dublin, most of the girls will make sure that I get a bus ticket, a place to stay over, they understand that I'm a single mother, you know? Just my struggles as a migrant woman, who has no family support.

The fact that her colleagues understood the challenges she faced, and tried to mitigate them by providing material support allowed her to be an active member of the group. Similarly, an activist in another group noted "I think as a parent for me, sometimes I needed to be able to bring my kids to meetings and stuff, and that was ok". The knowledge that her group was receptive to children made it easier for her to maintain her activism.

Another practical aspect of caring within activism was clear communication between organisation members. Good working relationships allowed activists to communicate clearly with each other, and to be mindful of each other's boundaries and limitations, as was expressed by one of the interviewees:

We worked really well together. And I think that was really important, there was no big egos or expectations, we constantly communicated, and we knew if someone had something on, or needed some time away, that was accepted, and that was the way it was. So I think that was the main thing, communicating well, and taking personal responsibility for not burning yourself out, and I think we all had to do that.

Thus, good group dynamics allowed activists to care for themselves and each other. This is a good example of the relationship between organisational and personal sustainability, as the structures put in place by the members of the organisation allowed the group to function at its optimum level, while ensuring that all members were cared for personally also.

Another practical area that a lot of activists mentioned was food, and the difficulty of cooking when activists were so busy in the campaign. One activist mother noted "I think we all gained a good few pounds, and had plenty of burning dinners while you're trying to work, and you're on your phone, yeah it was very intense." In a similar vein, another activist noted:

I don't think I cooked for myself once. If it wasn't for my best friend being like "Come eat", or just turning up with food, like I was eating a pack of biscuits in the car for dinner. Eighteen months ago I was two and a half stone lighter.

This shows how the practical and routine aspects of people's daily lives were disrupted by their involvement in the campaign, and how this affected their

health. It also speaks to the importance of social networks, which I will discuss further in the next section.

Social networks

Many of the activists who I interviewed spoke about the importance of support from their social networks. This included husbands, partners, families, and friends. As one activist, who is a migrant said:

I was saying to someone, they were saying how do you get on with all those things that you're doing, I said I'm relying on my social networks, otherwise I would have long collapsed. What keeps me going is my social networks and the support that is there. And if I didn't have that, I wouldn't be doing what I'm doing.

This quote encapsulates the importance of social networks, they provide support and encouragement when activists need it. Another activist noted that she relied on her social networks for practical childcare when it was not appropriate to bring her children with her:

When we started the canvassing I set up with my girls' dad that there was one night a week that he was always going to take them for the duration of the campaign, and then that was going to be my night to go canvassing, and obviously then towards the end of the campaign, when we were out maybe four nights a week, I just relied on friends to help out with childcare.

Another activist noted her husband had to take on more caring responsibilities than he would usually have, to allow her the time to be active in the campaign:

My husband was a really good support, like brilliant, so he was taking over minding the kids, I mean I was still breastfeeding around the clock but yeah, he just stepped in, and knew this was important, and let me off with it.

Thus all of these activists benefited from the strong social networks that they had built up outside of their activist circles. It is clear that there is an overlap between the efforts made at self care, the practical support offered both within organisations and outside them, and the support that activists received from their social networks. Unfortunately, many groups found that the urgency of the campaign pushed caring for oneself and one's colleagues into second place. I will discuss this further below.

Attitudes to work versus self-care in movement culture

There were external constraints that set limits to the movement's capacity to balance productivity with care, especially the short time frame between the announcement of the referendum and the date of referendum. This meant activists had an enormous work to do in a short time frame not set by them. While this was one element of the overwork that activists experienced, there was also a sense that the movement culture expected overwork. Individual activists dealt with this differently, some thrived. Downton and Wehr investigated traits that allowed some activists to persist in social movements, and noted that "they got a 'second wind'... For a renewal of commitment of this kind, the new challenge had to be met with a sense of inner motivation" (1997: 108). Many of the activists I interviewed noted that their motivation was so strong, it sustained them throughout the campaign. One activist encapsulated this when she said:

I think what kept me going was that I'm making a difference, I'm making a difference to someone's life, it might not be seen immediately, but along the line. Yes, it was very stressful, very stressful, and also to be told "this is not your country, it's not your issue" was very stressful.

She went on to say that despite the racism and misogyny she faced, she had to continue, because "this is a fight that I have to fight for my people". Another interviewee, who is a doctor and long time advocate for reproductive choice noted:

It was never hard because there was loads happening, the sheer momentum of it, in that you'd be wrecked by it, but it won't go on forever, it is a once-in-a-lifetime event.

Thus her awareness of the importance and historic nature of the campaign allowed this activist to stay motivated, even when she was exhausted. I will investigate further how activists stayed involved in the campaign, and what contributed to their personal and collective sustainability.

Barry and Dordevic (2007) wrote a book about human rights activists and their ability to sustain themselves. They noted:

Quite simply, rest seems selfish. It's the context. How could anyone take a break, take time for themselves, when all around them others are suffering? When there is so much work to be done? When everyone around you expects you to work without stopping... (Barry and Dordevic, 2007: 26).

This quote resonated with me, as it encapsulated my own experience during the campaign, and echoed the attitudes of many of my survey respondents and interviewees. Do activists put pressure on themselves to keep working in the face of burnout? Or is there a collective pressure applied by other activists within the movement? An in-depth analysis of the contributing factors to burnout is outside the scope of this article, but I have discussed some of the barriers to care in the following paragraphs. The main barrier mentioned by interviewees and survey respondents was the lack of time for self-care. One interviewee noted:

So self-care is very paramount, but also it becomes the last thing on your mind as well, because you are so struggling just to have that time until something major happens and you think oh I have to look after myself.

This interviewee knew on an intellectual level how important self-care is, but highlighted the reality that when activists are in the midst of a frantic campaign, care is often relegated to the end of one's list of priorities. Another interviewee evoked the frantic nature of the campaign when she said:

There was zero self-care during it, none. And there were reminders, you know, be kind to yourself, remember to take time for yourself, but there is no time, there is no time, I can't.

This relates to the external factors noted at the start of this section, external time constraints made it difficult to prioritise self-care. One survey respondent noted that this was the case in her experience also:

Although organisations talked about the importance of balance and looking after your mental health there was very little time for practice but even short debriefs and cups of tea after canvasses helped.

Thus, while there was no time for organised activities, even short conversations and shared beverages were seen to positively impact on campaigners. However, one survey respondent also noted that they had a lack of personnel for organising self-care: "The entire organisation of our regional campaign fell to two individuals who were already stretched; should those two have organised self-care days too?"

Kennelly (2014) studied the interactions of global justice activists in Canada, who were engaged in anti-globalisation, antipoverty, anti-colonialism and anti-war organising. She found that young women put a lot of pressure on themselves to care for their fellow activists, as well as continuing all of their organising work. She noted that this pressure often led to burnout:

Amongst the women, I noted professions of an overwhelming – at times even crippling – sense of responsibility and culpability. They regularly commented on the powerful sway of negative emotions (feeling upset, outraged, angry) acting as both motivators and self-flagellation devices for their activism. In both field observations and interviews, I witnessed their tense negotiation between ‘caring for self’ and ‘caring for others’. (Kennelly, 2014: 243).

Laurence Cox (2011) noted that there can be ‘features of movement culture that directly contribute to burnout. Some of these have to do with the importation of productivist and / or patriarchal attitudes to work into movement contexts’ (2011: 14). One of the activists who responded to the survey noted this phenomenon during her work on the campaign, and especially during reflection after the campaign:

I also felt very much that in TFY [Together for Yes] (and in ARC [Abortion Rights Campaign], to a lesser extent), there was a culture of busy-ness and egoic burnout - as in, if you were tired and stressed and overworked, that meant you were an amazing activist and deserved praise for it. I think it is a dangerous territory to give someone praise for working themselves to the ground... It's a delicate subject matter because in one way, of course people deserve support and praise for all the hard work they've put in, but in another way, if we praise and value people working themselves to the bone, aren't we just continuing to propagate a patriarchal, capitalist culture, where "more work = better" and "taking time for reflection and care = weakness?".

This activist had reflected deeply on the culture within the main Repeal organisations. Her insight suggests that even within activist groups who aim for anarchist or socialist organisational structures, the neoliberal focus on overwork and achieving goals persists. As feminist organisers we must endeavour to operate in a way that rejects neoliberal and patriarchal organising, to create a more caring system. It is clear that this was not achieved for many activists during the Repeal campaign. One of the interviewees noted the level of overwork that she put herself through, and how it impacted on her health:

I was putting all of my energy, 24 hours, into this. So I wasn't sleeping, anxiety attacks, severe depression, but this was really important and I just knew that I had to do it. So it wasn't healthy, I wasn't coping, but I didn't feel like I had a choice.

It is clear that this activist was not operating at a sustainable level, and this had lasting consequences for her health. The absence of self-care was a significant contributing factor to this outcome.

Sharing personal stories versus protecting self

Another area that impacted on a lot of the activists was the campaign strategy of sharing personal stories. Quesney (2015) wrote about the campaign for abortion rights in Ireland, and noted that ‘speaking out in a hostile environment is an act of bravery not many women are prepared to undertake, and nor should they be expected to’ (2015: 160). While nobody forced women to share their story, a lot of women chose to share the traumatic impact of the 8th Amendment. Sharing personal stories was a particular type of campaign work which led to people experiencing trauma. One campaigner eloquently noted:

The problem was that traumatised women were forced to rip open their old scars and bleed in public, to put their most private business on full display, to watch as other women did the same, in order to beg people to vote for them to be legally human. There's no amount of self-care that could make that OK.

This sentiment was echoed by a number of respondents. The strategy to tell personal stories was successful, it made clear the extent of the problems with the 8th Amendment, but it had a lasting impact on a lot of the activists who shared their stories. Another respondent noted that “you gave a bit of yourself away at each door, at each debate, at each stall. Endlessly telling your truth to them, giving your hurt to them”. This response highlighted the visceral impact that the campaign strategy of telling personal stories had on the women who shared their own stories. Future campaigns will need to consider whether the work of telling personal stories can be balanced with collective care, so as to avoid trauma for the story tellers. I will consider collective care further in the next section.

Shifting focus from self-care to collective care

Sara Ahmed, following Audre Lorde, spoke about the political work of creating caring communities:

Self-care is about the creation of community, fragile communities, assembled out of the experiences of being shattered. We re-assemble ourselves through the ordinary, everyday and often painstaking work of looking after ourselves; looking after each other. (Ahmed, 2014).

It became clear through the course of my surveys and interviews that emphasising self-care was not sufficient to maintain activists’ wellbeing during the Repeal campaign. There has to be a focus on collective care in social movements if activists are to be able to continue their feminist activism. Nina Nijsten (2011: 222) noted that ‘activism shouldn’t be self-sacrifice. Feminist activists have the responsibility to look after each other and make sure we don’t

get discouraged'. Similarly, Mountz et al. (2015: 1251) remarked that 'a feminist ethics of care is personal and political, individual and collective. We must take care of ourselves before we can take care of others. But we must take care of others'.

When analysing the results of the survey, it became clear to me that people's awareness of self or collective care was not always matched by the resources available for this care, and that this differed across organisations. To highlight this, 61.5% of respondents thought that there was sufficient emphasis on caring for oneself and others during the campaign. Only 44.3% of respondents said that their organisations arranged self-care activities for campaigners. One activist who worked in the national office noted:

Efforts were made to promote care - there was a dedicated helpline available from the IFPA [Irish Family Planning Association], we did our best to check in with each other, a wonderful human organised yoga and chair massage, I did my best to flag care with canvassing groups.

It is worth noting that many of the official care activities were scheduled in Dublin (capital city of the Republic of Ireland), making it difficult for regional activists to attend. Some organisations provided support within their own groups, one activist noted that they "had a wellness team of trained counsellors on hand to support our volunteers and organising team". Other activists took it upon themselves to support the activists in their group, like the activist who commented:

I feel like I stressed to other people the need for basic self care and made sure plenty of water and fruit was available. I did not pressure people to attend and reassured them if they had to cancel. I checked in with people who I knew had a hard time e.g. antis shouting at them.

Thus, it appears that the efforts made at collective care varied across groups. Feminist organisers should consider embedding collective care within their activism from the start of campaigns, so that burnout can be avoided, and activists can continue to fight for reproductive justice, and other social justice issues.

Conclusion

In this article I have investigated and documented the experiences of activists involved in the Repeal the 8th campaign. I utilised a combination of surveys, in-depth interviews, and autoethnography to collect data, and then I used thematic analysis to identify common themes among campaigners. I discussed these themes further with reference to the social movements literature, situating these

experiences within the global abortion rights movement, but also within social justice movements more widely.

Oral history and ethnographies are valuable, because “so many of the actors are still on the stage” (Muldowney, 2015: 142). By documenting the experiences of these women, I have given activists a chance to tell their stories. Ireland was a beacon of light in challenging times for reproductive rights globally. Ordinary people were the lifeblood of this campaign, and by working together, they made extraordinary things happen. One of the survey respondents summed up the enormity of what we achieved:

I think we should not lose sight of what we did - we carried a referendum by 66.4%, we were a beacon of hope in a world where reproductive rights are being rowed back. I know people have enduring pain from the campaign - damaged or broken relationships, health issues, financial issues and unresolved trauma. But we changed Ireland. We changed our constitution. We gave a generation of young women female role models, we gave thousands of people (mainly women) a taste of activism and of politics, we did what everyone was so busy telling us we could not do.

In this article I focused on care within the Repeal campaign. I looked at the differing practices of self-care among activists, the movement culture of work versus self-care, and the need to move from self-care to collective care. One of the implications of lack of self-care for social movements is that ‘instead of figuring out ways to take care of ourselves and each other, social justice groups lose brilliant and committed activists to burnout, disillusionment and poor health’ (Plyler, 2006: 123). Feminist research requires practical applications. Increased care towards one another is essential for continued feminist activism. One interviewee, who is a sex worker, noted that we need to create space for the messiness of real life. Feminist activists need to create space, and endeavour to care for each other within that space. As Mac and Smith (2018: 6) succinctly say “caring for each other is political work”. By committing to engage in care-full activism, we will be able to continue to work towards a more socially just world for all.

References

- Ahmed, Sarah. 2014. Selfcare as warfare. Retrieved from <http://feministkilljoys.com/2014/08/25/selfcare-as-warfare/>
- Anti-Amendment Campaign 1982. *Anti-Amendment Campaign Leaflet* [political leaflet]. Attic Press Archive, BL/F/AP/1284/5. Cork: University College Cork.
- Barry, Jane and Jelena Dordevic 2007. *What's the Point of Revolution if We Can't Dance?* Boulder, CO: Urgent Action Fund for Women's Human Rights.

- Cooper, Davina 2007. ‘Well, you go there to get off: Visiting feminist care ethics through a women’s bathhouse’, *Feminist Theory*, 8(3): 243–262. doi: 10.1177/1464700107082364.
- Cox, Laurence 2011. *How Do We Keep Going? Activist Burnout and Personal Sustainability in Social Movements*. Helsinki: Into-ebooks.
- Downton, James and Paul Wehr 1997. *The Persistent Activist: How Peace Commitment Develops and Survives*. Boulder, CO: Westview.
- Ettorre, Elizabeth 2017. *Autoethnography as Feminist Method: Sensitising the Feminist “I”*. London: Routledge.
- Flacks, Richard 2004. “Knowledge for What? Thoughts on the State of Social Movement Studies”, in J. Goodwin and J.M. Jasper (eds) *Rethinking Social Movements: Structure, Meaning and Emotion*, Maryland: Rowman and Littlefield Publishers Inc, 135-153, ch.10.
- Fletcher, Ruth 1995. Silences: Irish women and abortion. *Feminist Review*, 50(1), pp.44-66.
- Gilligan, Carol 1995. Hearing the difference: Theorizing connection. *Hypatia*, 10(2): 120-127.
- Hemmings, Clare 2005. ‘Telling Feminist Stories.’ *Feminist Theory* 6(2): 115-139.
- Kennedy, Sinead 2018. “‘#Repealthe8th’: Ireland, Abortion Access and the Movement to Remove the Eighth Amendment’. *Antropologia* 5(2 NS): 13-31.
- Kennelly, Jacqueline 2014. “It’s this pain in my heart that won’t let me stop’: Gendered affect, webs of relations, and young women’s activism’. *Feminist Theory* 15(3): 241-260.
- Lorde, Audre 1988. *A Burst of Light, Essays*. London: Sheba Feminist Publishers.
- Motta, Sara, Cristina Maria Flesher Fominaya, Catherine Eschle, and Laurence Cox 2011. ‘Feminism, Women’s Movements and Women in Movement’. *Interface: A Journal For and About Social Movements* 3(2): 1-32.
- Mountz, Alison, Anne Bonds, Becky Mansfield, Jenna Loyd, Jennifer Hyndman, Margaret Walton-Roberts, Ranu Basu, Risa Whitson, Roberta Hawkins, Trina Hamilton, and Winifred Curran 2015. ‘For slow scholarship: A feminist politics of resistance through collective action in the neoliberal university’. *ACME: an international E-journal for critical geographies*, 14(4).
- Muldowney, Mary 2015. ‘Pro-Choice Activism in Ireland since 1983’. In J. Redmond, S. Tiernan, S. McAvoy, and M. McAuliffe (2015). *Sexual Politics in Modern Ireland*. Kildare: Irish Academic Press, Ch 7.
- Nijsten, Nina 2011. ‘Some things we need for a feminist revolution’. *Interface: A Journal for and About Social Movements*, 3(2): 214-225.
- Plyler, Jen 2006. ‘How to keep on keeping on’. *Upping the anti*, 3: 123-134

Quesney, Anne 2015. 'Speaking Up! Speaking Out! Abortion in Ireland, Exploring Women's Voices and Contemporary Abortion Rights Activism'. In A. Quilty, S. Kennedy, and C. Conlon (2015), *The Abortion Papers, Ireland: Volume 2*. Cork: Attic Press, 150-163.

Smith, Molly and Juno Mac 2018. *Revolting Prostitutes: The Fight for Sex Workers' Rights*. London: Verso.

Staunton, Ciara 2011. 'News & Views As Easy as A, B and C: Will A, B and C v. Ireland Be Ireland's Wake-up Call for Abortion Rights?'. *European Journal of Health Law* 18(2): 205-219.

Wicks, Elizabeth 2011. 'A, B, C v Ireland: Abortion Law under the European Convention on Human Rights'. *Human Rights Law Review* 11(3): 556-566.

About the author

Doris Murphy completed her MA in Women's Studies in University College Cork, Ireland. Her thesis focused on the experiences of reproductive rights campaigners during the recent campaign to legalise abortion in Ireland, and underlying structures supporting feminist activism. Doris was the co-founder of Pro-Choice Wexford, a regional group which campaigned for abortion rights. Doris will complete her PhD research in University College Cork, exploring sex work and care through Participatory Action Research. She is an ardent supporter of the decriminalisation of sex work, and of full labour rights for sex workers. She also supports the abolition of Direct Provision, a system which segregates and incarcerates asylum seekers in Ireland. Doris advocates for full rights and appropriate healthcare for trans people. She provides space for marginalised people to tell their own stories, and is open to collaboration on projects in this area. She is an experienced group facilitator, presenter, and provides freelance transcription services. She is a qualified Speech and Language Therapist. She can be contacted at dormurf AT hotmail.com