

Abortion is a deeply complex social issue that brings together a number of factors. With the law, religion, and culture dominating the narrative, it is easy to just gloss over the people who come in direct contact with abortion – either as a personal experience, or provided service. Meanwhile, they are the ones who can tell us the most about pregnancy termination as an existing part of reality.

This study aims to take a closer look into the abortion experiences of people in Poland. Women and medical professionals are often forced to navigate in stigma, institutions, and multifaceted obstacles in order to either have an abortion or even learn how to perform it. The study's focus is put especially on strategies undertaken to achieve these goals and regain reproductive agency despite the anti-abortion Polish law.

While certainty will be difficult to achieve, we can estimate the number of pregnancy terminations carried out in Poland. A study conducted in 2013 (CBOS) revealed that between 25-33% of Polish women have had an abortion at least once in their lives. A different study published in 2012 in *The Lancet* indicates that globally between 10 to 40 (on average) out of 1000 pregnancies will be intentionally terminated. That translates to around 100,000 abortions annually in Poland. Meanwhile, before the further tightening of the already restrictive Polish abortion law by the Constitutional Tribunal in 2021, state healthcare facilities reported approximately 1200 abortions carried out in public hospitals yearly. The data indicates that the Polish state is officially aware of only 1 in 100 abortions - Polish women must then be extremely resourceful and independent when it comes to obtaining an abortion.

Due to the highly restrictive legal setting of Polish anti-abortion law, the medical personnel can also be in a difficult position. Gynaecologists are often forced to balance between the institutionalised aspects of abortion in Poland, especially since they are a part of the medical system themselves, and abortion as an experience that often transcends the institutional limitations of the network. Their dual position as those who at times even play important roles within the network (ie. through advisory on public policy or standards of care regarding abortion), and those who come in contact with their patients' experiences, makes gynaecologists experiences worth exploration as well.

This study is designed to not only explore individual experiences but also seek common denominators and patterns within them. It is also to show how different abortion experiences may be for different members of society. It explores the role of power, hierarchy, and agency in making decisions despite difficulties or possible consequences.

Abortion research in the Polish case should be of special interest to both native and foreign researchers. With a visible global tendency to introduce alterations to the systemic aspect of abortion (from restrictions introduced in countries like the USA, Senegal, or Honduras, to liberalisation in the legislations of Ireland and Argentina), Poland remains an example of a country with a legal system starkly different from the regional standard. A better understanding of the situation in Poland could therefore prove valuable for further international comparative analysis of societal, cultural, and legal contexts regarding abortion laws and experiences in different countries, as well as add to discussions about the design of healthcare systems responsive to their potential recipients' needs.