

Abortion

August 2010

This factsheet covers law, policy, guidance and key statistics on abortion in the United Kingdom (England, Wales, Scotland, Northern Ireland). Please note that the data for each country may not be strictly comparable due to differences in methods of data collection and analysis.

Great Britain (England, Wales, Scotland)

Law

In Great Britain, legal termination of pregnancy may be carried out provided that two registered medical practitioners agree that:

a) Up to 24 weeks:

- the continuance of the pregnancy would involve risk, greater than if the pregnancy were terminated, of injury to the physical or mental health of the pregnant woman or any existing children of her family.

The woman's actual or reasonably foreseeable future environment may be taken into account.

b) With no time limits:

- the termination is necessary to prevent grave permanent injury to the physical or mental health of the pregnant woman
- there is a risk to the life of the pregnant woman, greater than if the pregnancy were terminated
- there is substantial risk that if the child were born it would suffer from such physical or mental abnormalities as to be seriously handicapped.

(Abortion Act 1967, amended by the Human Fertilisation and Embryology Act 1990)

In 2008 the Human Fertilisation and Embryology (HFE) Bill provided an opportunity to modernise abortion law, and various amendments to the 1967 Abortion Act were tabled. Due to a procedural motion, there was no time to debate or vote on the abortion issue and this law was unchanged.

The Science and Technology Committee carried out a separate investigation into scientific developments relating to abortion law in 2007¹.

In June 2007, doctors at the BMA conference voted in favour of removing two doctors' signatures for first trimester abortion². In 2005, conference had debated the evidence³ and voted in support of the current time limit.

- A young woman under 16 may consent to an abortion without parental knowledge or consent if both the doctors concerned agree that she has sufficient maturity and understanding to appreciate what is involved.
- No person is obliged to perform or participate in an abortion to which they have a conscientious objection, but they still have a duty to participate in treatment which is necessary to save the life of or to prevent grave permanent injury to the woman. Any doctor or nurse who feels unable to give information or counselling to a woman seeking an abortion, because of conscientious objection, should refer her to another doctor without delay^{4,5}.

Policy and guidance

Governments in England⁶, Wales⁷ and Scotland⁸ have published policy documents which address sexual health issues and services. These include recommendations for improving abortion services, and ensuring equitable access and minimum waiting times between the initial referral and the abortion.

Detailed guidance from the Royal College of Obstetricians and Gynaecologists⁹ aims to ensure that all women considering abortion have access to a service of uniformly high quality. This guidance should be used as the basis for the development of local protocols or guidelines in the United Kingdom.

Abortion (cont)

Abortion services are also included in broader recommended standards for sexual health services from the Medical Foundation for AIDS and Sexual Health¹⁰. Although specifically intended to support the implementation of the Government's sexual health policy in England, they can be applied elsewhere.

Statistics

England and Wales (resident women)¹¹

In 2009:

- around one in five pregnancies (21.8 per cent in 2008) end in abortion every year. This proportion has remained constant for several years¹²
- the total **number** of abortions was 189,100, a fall of 3.2 per cent compared with 2008
- the abortion **rate** was 17.5 per 1,000 women aged 15–44, compared with 18.2 in 2008
- the abortion **rate** was highest, at 33.0 per 1,000, for women aged 19, 20 and 21
- teenage abortion **rates** were lower than in 2008: the under-16 rate was 4.0 and the under-18 rate was 17.6
- 91 per cent of abortions were carried out under 13 weeks **gestation**, and 75 per cent under ten weeks
- less than 2 per cent were carried out over 20 weeks **gestation**. This percentage has remained fairly consistent over the last ten years
- **medical abortion** accounted for 40 per cent of all abortions, compared with 37 per cent in 2008
- nearly half of **early** abortions were **medical**: 48 per cent of those carried out under ten weeks gestation
- 94 per cent of abortions were either provided or funded by the **National Health Service** (NHS), compared with 87 per cent in 2005. **NHS** provision varied between primary care organisations (PCOs), and ranged from 73 per cent to 99 per cent

- three out of four (74.0 per cent) of all **NHS**-funded abortions were carried out **under ten weeks**. This varied between PCOs, and ranged from 49 per cent to 85 per cent.

Scotland¹³

In 2009:

- the total **number** of abortions was 13,005, a fall of 5.9 per cent over 2008
- the abortion **rate** was 12.4 per 1,000 women aged 15–44, compared with 13.2 in 2008
- the abortion **rate** was highest for women aged 16–19 (22.3) and 20–24 (22.0)
- 93.6 per cent of abortions were carried out under 14 weeks **gestation**, and 74.0 per cent under ten weeks. This proportion has remained relatively stable over the last five years
- about 0.3 per cent were carried out over 20 weeks **gestation**
- **medical abortion** accounted for 69.9 per cent of all abortions, compared with 58.7 per cent in 2005
- four out of five (81.2 per cent) of abortions carried out at under nine weeks, were **medical**.
- the vast majority (99.7 per cent) of abortions were **NHS** funded and carried out in **NHS** premises.

Abortion (cont)

Northern Ireland (see separate factsheet on abortion in Northern Ireland for more detail)

Law

- The 1967 Abortion Act does not extend to Northern Ireland, and women from Northern Ireland are not entitled to an NHS abortion in Great Britain.
- Abortion is only legal in exceptional circumstances – if the life or the mental or physical health of the woman is at serious or grave risk, which has to be permanent or long term.
- An amendment to the Human Fertilisation and Embryology Bill was tabled in July 2008, to extend the 1967 Abortion Act to Northern Ireland. All amendments to the Bill were due to be debated at the Report Stage after the 2008 summer recess. However, due to a procedural motion, the amendments relating to abortion were not debated in the House of Commons.
- In June 2001, FPA won the right to the first Judicial Review of medical practice relating to abortion and the provision of abortion services in Northern Ireland. The Review took place in March 2002 and in July 2002 Mr Justice Kerr concluded that the Department of Health, Social Services and Public Safety (DHSSPS) was not failing in its statutory duty to issue guidelines, but he thought it prudent if they did. FPA immediately lodged an appeal and in October 2004 Belfast High Court of Appeal ruled that the DHSSPS had failed to perform its statutory duties. In response to this, in 2005 the DHSSPS instigated a formal investigation into the provision of abortion services in Northern Ireland. Draft guidelines were issued for consultation in early 2007, but rejected by the Northern Ireland Assembly later that year. The Assembly instructed the DHSSPS to redraft the guidelines. The redrafted guidance went out for consultation in 2008, and the final guidance published in March 2009, following Executive approval.
- The guidance document did not make any changes to the law governing abortion in Northern Ireland, and simply restated the existing legal position in relation to abortion services in Northern Ireland.

Since its publication, there have been several Judicial Reviews launched by the Society for the Protection of Unborn Children (SPUC), who argue that the guidance should not have been published. The latest Judicial Review is ongoing (2010) and revised guidance issued for consultation.¹⁴

Statistics

- In 2008/09 78 women had a legal **abortion in Northern Ireland**. These are categorized by the DHSSPS as medical abortions, which are defined as ‘the interruption of pregnancy for legally acceptable, medically approved indications’¹⁵.
- No statistics are available to indicate the age of the women, the legal grounds, where the abortion was carried out, the stage of pregnancy or the type of abortion.
- In 2009, 1,123 women **travelled to England** for an abortion¹¹. This figure, based on the addresses given by clients, is likely to be an underestimate.
- Around half (51 per cent) of those travelling to England were in their twenties, and one in six (16.5 per cent) were under 20.
- 87 per cent of these abortions were carried out under 13 weeks gestation and 70 per cent under ten weeks.

Abortion (cont)

References

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- 15 Northern Ireland. Department of Health, Social Services and Public Safety, 'Hospital Inpatients System' (Private communication, May 2010).

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