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DECRIMINALISATION OF ABORTION

Current UK Abortion Law

Abortion remains a criminal offence in the UK under the Offences Against the Person Act 1861, potentially punishable by life imprisonment. The 1967 Abortion Act brought in certain exemptions to this law, allowing a woman to access legal abortion provided two doctors agree that the grounds specified in the Act are met.

The 1967 Act was amended in 1990 when a general time limit of 24 weeks was established, with exceptions for certain circumstances - when there is a risk of death or serious permanent damage to a woman's physical or mental health or a serious fetal abnormality.

In 2019, abortion was decriminalised in Northern Ireland where women and pregnant people can access services on request up to 12 weeks with a further limit at 24 weeks if certified by two registered medical professionals (doctor, nurse or midwife), with exceptions for certain circumstances.

In 2022, Parliament voted to make permanent legislation put into place during the Covid pandemic, allowing people to take both abortion pills in a medical abortion at home via telemedicine, up to 10 weeks pregnancy duration in England and Wales and 12 weeks in Scotland.

Women and pregnant people in England, Scotland and Wales, as well as health professionals, can face prosecution if accessing abortion outside of the legal clauses of the Abortion Act. Many women have been investigated and prosecuted under this law and some women have been imprisoned for procuring their own abortion.

Abortion Today

Abortion is a common medical procedure and an important part of women's healthcare, with one in three women in the UK having an abortion in her lifetime. Abortion is a very safe procedure, with the risk of serious medical complications very low at all pregnancy durations. In 2021, 94% of abortions were carried out in the first trimester, with medical abortion being more common than surgical abortion (87% of abortions in 2021 were induced with medications).

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Our Beliefs

Doctors for Choice UK support the full decriminalisation of abortion in the UK. This would mean removing abortion from the criminal statute and regulating it like any other medical treatment. We believe that every woman and pregnant person should have the right to make decisions about their pregnancy according to their own circumstances, values and beliefs, with the support of health professionals and without interference from the government or legal system.

We believe that:

- Although the introduction of the Abortion Act 1967 was a great step forward and occurred as a result of the tireless efforts of committed groups and individuals, UK abortion law is now out-dated and does not reflect advances in abortion care particularly for medical abortion under 12 weeks.
- The current law is not evidence-based and prevents best practice.
- The mandatory requirement for two doctor's signatures can cause unnecessary delays, waste valuable resources and restrict access particularly in small or rural clinics.
- The mandatory requirement for two doctors' signatures is not in-keeping with the principle of autonomy, or the move towards more patient-centred care and away from paternalistic medical practice.
- Although specialist nurses and midwives are increasingly providing excellent care in other areas of medicine, their role is restricted in abortion care due to the law, which amounts to a waste of valuable resources and skills.
- The use of criminal law in healthcare sends a message of strong social disapproval and contributes to abortion stigma both for those who access abortion care as well as health professionals who provide it.
- The current laws put women and pregnant people at risk of prosecution if they procure an abortion outside of the stipulations of the law e.g., using abortion pills bought online, having an abortion that has not been authorised by two doctors, having an abortion outside of legal time limits. We believe that no one should ever face prosecution and imprisonment for ending their pregnancy.
- The law plays no role in the safeguarding of women and pregnant people and

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decriminalisation would in no way threaten their safety or increase their risk of being pressured into having an abortion against their will. What does protect people is education and training of staff, an open and non-judgemental approach, access to counselling if needed and policies on screening for evidence of reproductive coercion or child sexual exploitation (CSE), including the use of evidence-based tools.

• Decriminalisation would not mean deregulation as a multitude of local and national guidelines and standards already exist that govern healthcare and hold health professionals to account.

Decriminalisation of abortion is supported by numerous professional medical bodies including the British Medical Association, the Royal College of Obstetricians and Gynaecologists, The Faculty of Sexual and Reproductive Health, The Royal College of Nursing, the Royal College of Midwives and the Royal College of General Practitioners.