

PE2126/D: Ensure abortion services are available up to 24 weeks across all parts of Scotland

Abortion Rights Scotland written submission, 25 May 2025

In Scotland, the NHS provides free and local abortion care to over 18,000 people each year. The majority of these abortions are carried out within the first 12 weeks of pregnancy, with most people choosing home based medical abortion with tablets. Hospital based NHS care is available for those who choose this, or who require admission for medical reasons. This is currently available up to 20 weeks of pregnancy.

A very small number of women present for abortion between 20-24 weeks of pregnancy. Reasons for later presentation can be complex, for example significant mental health problems, a serious change in personal circumstances or a pregnancy within an abusive relationship. None of the health boards in Scotland currently provides local abortion care for these women. Instead, the health board funds a third-party organisation to provide care. This care is usually in London, meaning travel and time away from home. Some women may be unable to make this journey, meaning they have no option other than to continue the pregnancy. Nonetheless, around 80 women travelled to England for NHS funded later abortion care last year.

Pregnancy care in Scotland is almost universally provided by the NHS, whether it be antenatal care, miscarriage care, abortion care, labour and delivery care or post birth care. Pregnancy care is not outsourced to either the private sector, or to third party providers. Outsourcing the care of vulnerable women needing an abortion at 20-24 weeks to a non-NHS provider in England stigmatises and punishes these women, at what is already a very difficult time.

In the past, this out-sourcing has been justified by stating that doctors in Scotland are unable to provide this care, due to a lack of clinical skill. This is not the case – later abortion is provided in Scotland, in NHS hospitals, for those who need an abortion due to a fetal abnormality, or when the woman has very serious medical problems. There are NHS doctors who have the skills and training to provide care to the women who are currently having to travel to England.

We are aware that NHS Scotland National Services Division and a Scottish Government Short Life Working Group have already examined the challenges of later abortion provision. We understand that the National Planning and Delivery Board is to establish a task and finish group to establish a later abortion service in Scotland.

Abortion Rights Scotland strongly believe that this service should be provided within the NHS by NHS staff. Continuing to out-source care to a non-NHS provider, albeit within Scotland in future, will continue to stigmatise these patients. We provide all other aspects of pregnancy care in the NHS, so should not exceptionalise this small group. Indeed, contracting out the service will likely require the doctors who have the required skills to move some of their time to the contracted service, thus depleting NHS capacity. Supporting these doctors to provide this care within the NHS means that they can provide training to other staff, ensuring that future staffing needs can be met. The care of these vulnerable women should be within the NHS, meaning that care is subject to our NHS confidentiality, governance and child protection standards.

Recent media coverage has called upon the Scottish Government to 'buy-in' later abortion treatment from non-NHS providers. Abortion Rights Scotland urges the National Planning and Delivery Board to establish this service within NHS Scotland. The small number of people who need later abortions should be able to be cared for by NHS doctors and nurses, in keeping with the rest of pregnancy care in this country.