# SPICe The Information Centre An t-Ionad Fiosrachaidh

# Briefing for the Citizen Participation and Public Petitions Committee on petition PE1969: 'Amend the law to fully decriminalise abortion in Scotland', lodged by Gemma Clark

<u>PE1969</u> calls on the Scottish Parliament to urge the Scottish Government to bring forward legislation to fully decriminalise abortion services in Scotland, and make provisions to ensure abortion services are available up to the twenty-fourth week of pregnancy across all parts of Scotland.

### Brief overview of issues raised by the petition

#### Legal status of abortion in Scotland

The petition references the criminalisation of abortion under the Offences Against the Person Act 1861. However, this Act does not apply in Scotland.

Prior to the introduction of the <u>Abortion Act 1967</u>, abortion in Scotland was considered a crime under common law when provided without medical sanction.

Under the Abortion Act 1967, which currently applies to Scotland, England, and Wales, an abortion can legally be accessed up to 24 weeks of pregnancy. The Abortion Act 1967 did not decriminalise abortion, but rather established conditions under which abortion can be performed. Abortion procedures performed outwith these conditions would remain subject to Scottish common law regarding abortion.

Abortion law <u>was devolved to Scotland</u> under Section 53 of the Scotland Act 2016.

#### Conditions for lawful abortion

Under the Abortion Act 1967, abortion procedures <u>must be conducted</u> in a hospital or other place approved by Scottish Government Ministers. However, in May 2022, <u>the Scottish Government confirmed</u> that the arrangements put in place during the COVID-19 pandemic to enable access to early medical abortion at home when clinically appropriate would

continue long-term, and would no longer be dependent on considerations associated with the pandemic.

Before an abortion is conducted, <u>two doctors must provide signatures</u> to confirm that the terms of the Abortion Act 1967 will not be breached by carrying out the procedure, and that continuing with a pregnancy would pose a greater risk to the pregnant person's mental or physical health than accessing an abortion. <u>98.6% of abortions</u> conducted before 24 weeks' gestation in Scotland in 2021 were performed under this criterion.

Abortions can be conducted at any point in pregnancy if there is a significant risk to the life of the pregnant person, or evidence of foetal abnormality.

#### Opinion on the current legal status of abortion

It is argued by some that the "two doctors rule" risks delaying access to abortion procedures and undermining the autonomy of people seeking abortions, as the final decision is placed in the hands of doctors rather than the pregnant person. In <a href="their 2016 report">their 2016 report</a> on access to abortion in Scotland, Engender, a Scotlish feminist policy and advocacy organisation, stated that in practice, this requirement criminalises abortion, as the power to decide whether a person can legally access an abortion rests with the doctors.

Engender further argued that access to abortion procedures should not be dependent on medical decision-making, as the decision to have an abortion is increasingly not informed by medical factors. The <u>most common reasons for seeking an abortion</u> are socioeconomic concerns, and the potential impact of a pregnancy on the person's future opportunities or existing family size.

In June 2022, The Royal College of Obstetricians & Gynaecologists and the Faculty of Sexual & Reproductive Healthcare <u>released a joint</u> statement calling for the decriminalisation of abortion across the UK.

The <u>British Medical Association's policy</u>, agreed in 2007 and still in place, is that abortion should be decriminalised, and the "two doctors rule" removed for first trimester abortions. The BMA stated that "no other medical procedure requires the agreement of two medical practitioners, making current abortion law increasingly out of step with the emphasis on patient autonomy elsewhere in medicine."

Anti-abortion groups such as the <u>Society for the Protection of Unborn</u>
<u>Children</u> have argued that the decriminalisation of abortion, and removing the "two doctors rule", could endanger pregnant people by removing criminal sanctions for abortions performed in unsafe settings or under coercion. The group also expressed that in their view, abortion involves

taking a human life, and the provision of abortion services should therefore be governed by criminal law, rather than medical regulation. However, both the British Medical Association and Engender emphasised that decriminalisation does not mean deregulation, and that legislation should ensure that the criminal law would still apply if other criminal offences, such as assault or reckless conduct, are conducted in the course of abortion provision.

#### Access to later gestation abortions in Scotland

Later gestation abortions are relatively uncommon in Scotland; <a href="Public Health Scotland's latest report">Public Health Scotland's latest report</a> on terminations states that of the 13,758 abortions that took place in 2021, 9.1% were performed between 10 and 17 weeks' gestation, and 0.9% at 18 weeks or over.

Second trimester abortions after 18-20 weeks require a more complex procedure called <a href="dilatation and evacuation">dilatation and evacuation</a>, which is performed under general anaesthetic. Some NHS Scotland boards, including NHS Lothian and NHS Greater Glasgow and Clyde, offer abortion services up to 20 weeks' gestation, but <a href="many of Scotland's NHS health boards">many of Scotland's NHS health boards</a> are currently only able to provide abortions until a lower gestation. Pregnant people in Scotland who need an abortion after 18-20 weeks' gestation are usually required to travel to British Pregnancy Advisory Service (BPAS) or other clinics in England for this specialist procedure.

It is unclear why late term abortions are not commonly available in Scotland, but <u>research suggests that</u> a lack of senior management support, a perceived lack of need due to low numbers of pregnant people accessing later abortions, and 'distaste' for performing the procedure among medical professionals, may be contributory factors

#### **Scottish Government action**

In response to question <u>S5W-16699</u>, lodged on 18 May 2018, the then Minister for Public Health and Sport, Aileen Campbell MSP, stated that the Scottish Government "had no current plans to change the law on abortion."

In response to written question <u>S6W-09073</u>, lodged on 10 June 2022, Maree Todd MSP, the Minister for Public Health, Women's Health and Sport, said that "The Scottish Government is continuing to work with NHS Boards to improve abortion services, including NHS Boards providing abortions up to the legal limit. Some NHS Boards provide abortion services up to the legal limit for fetal anomalies, however we are aware that women seeking abortions after 20 weeks' for other reasons are often referred to services in England. The Scottish Government is committed to progressing work which would allow women to access abortions services in a way that is right for them."

#### Scottish Parliament action

On 26 September 2019, Monica Lennon MSP lodged motion <u>S5M-19128</u> calling on the Scottish Parliament to consider that "the Scottish Government should take steps to decriminalise abortion and move towards removing the "two doctors rule" to ensure women's legal right to choose". However, this motion was not taken in the Chamber.

## Sarah Swift Researcher

19 October 2022

The purpose of this briefing is to provide a brief overview of issues raised by the petition. SPICe research specialists are not able to discuss the content of petition briefings with petitioners or other members of the public. However, if you have any comments on any petition briefing you can email us at <a href="mailto:spice@parliament.scot">spice@parliament.scot</a>

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Published by the Scottish Parliament Information Centre (SPICe), an office of the Scottish Parliamentary Corporate Body, The Scottish Parliament, Edinburgh, EH99 1SP