**Audit of abortion requests above 22 weeks’ gestation in 2008**

The British Pregnancy Advisory Service (BPAS) is a charity providing a specialist service for women requesting abortion from between 20 weeks’ gestation up until the time limit of 24 weeks in England, Wales and Scotland. BPAS runs four out of the five charitably-run centres licensed by the Secretary of State for Health to perform abortions above 20 weeks in the UK. This care is mainly carried out on behalf of the NHS, as only very few NHS hospitals are resourced to provide local women with care up until the legal limit for most abortions of 24 weeks.

To provide evidence as to why women request abortion from 22 weeks’ gestation and up to the 24 week time limit, BPAS’ staff audited every request for abortion above 22 weeks’ gestation during a 28 day period in 2008. Anonymised information is given in the attached table.

**KEY FINDINGS:**

* The age of individuals requesting abortion above 22 weeks’ gestation ranged from 14 years old to 31 years old.
* Many women already had children, and were requesting to end to this pregnancy in order to be able to cope with the needs of their existing family.
* Others felt unable to be ‘good enough’ mothers at this point in their lives.
* **2 of the 32 women could not be found a treatment appointment despite presenting before 24 weeks, because of the lack of national capacity for late abortion care.** These women were referred into antenatal care to continue the pregnancy.
* **1 of the 32 women decided to continue with her pregnancy,** after sessions with BPAS’ non-directive counselors. As soon as she became confident of her decision, she was referred into antenatal care.
* The pregnancies of **6 of the 32 women were found to be beyond the 24-week time limit.** They were referred into antenatal care. BPAS receives requests from approximately 100 women each year whose pregnancies are found to be beyond 24 weeks and 0 days.
* Those requests for abortion that were approved complied with ground 1 (1) a of the 1967 Abortion Act (as amended by the 1990 Human Fertilisation and Embryology Act), that is, that two doctors have agreed in good faith that

*‘the pregnancy has not exceeded its twenty-fourth week and that 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’.*

**NOTES:**

* Every woman requesting abortion treatment from BPAS is ultrasound scanned in order to date the pregnancy, in accordance with RCOG guidance.
* 4 BPAS centres provide treatment between 20 weeks and 23 weeks and 6 days, approximately 80% of the national provision at these gestations.
* BPAS provides almost 55,000 abortions a year. In 2007, 985 women had treatment between 20 weeks and 21 weeks 6 days’ gestation, 615 women between 22 weeks and 23 weeks and 6 days with BPAS.
* Beyond 24 weeks and 0 days, abortions are only legally permitted in case of

*‘substantial risk that if the child were born it would suffer from such physical or mental abnormalities as to be seriously handicapped’, ‘grave permanent injury’* to the woman’s physical or mental health, or risk to her life (Grounds 1 (1) b-d). These abortions are only permitted to take place in NHS hospitals.

* See link below for details of the 1967 Abortion Act (as amended by the 1990 Human Fertilisation and Embryology Act).

<http://www.statutelaw.gov.uk/content.aspx?activeTextDocId=1181037>

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| **28-day audit of abortion requests above 22 weeks’ gestation in 2008: RESULTS** |
| **Client** | **Age of client** | **Gestation** | **Circumstances** |
| 1 | 14 | 23w 5d | Girl feels too young to have a baby. She started her periods a year ago, but they have never been regular, so it didn’t register with her that she could be pregnant. She had no idea where she could get help and didn’t feel able to tell her parents. Eventually she “plucked up her courage” to see the school nurse. |
| 2 | 15 | 23w 4d | Girl had sex for the first time to see what it was like. Thought she might be pregnant but “buried [her] head in the sand hoping it would go away”. She started to self-harm: punching herself in the stomach and making herself vomit. Mother took her to GP suspecting bulimia and the pregnancy was detected. |
| 3 | 16 | 21w 2d | Teenager is not in a relationship and has only had sex once. She thought she might be pregnant but didn’t tell anyone and “hoped it would go away”. Told parents eventually who are supportive, whatever her decision. Was still unsure and she and her parents thought she needed more time to come to the right decision. A provisional appointment for treatment was booked in case she decides to proceed with the abortion; otherwise we will refer to antenatal care. |

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| **Client** | **Age of client** | **Gestation** | **Circumstances** |
| 4 | 17 | 24w 2d | Teenager relying on the contraceptive pill for birth control. She knew that she had missed some pills several months ago and took a pregnancy test when she missed a period. Pregnancy test was negative and she stopped worrying because she had had a period-like bleed. Took another two pregnancy tests when she missed subsequent period, both of which were negative. Lives with her father and didn’t feel able to confide in him. Eventually spoke with her mother who took her to GP, who referred her to BPAS. *Because she was over the current legal gestational limit there was no option but to refer her back to her GP to arrange future ante-natal care.* |
| 5 | 18 | 22w | Young woman thought she was just 9 weeks pregnant. Feels she is not emotionally ready for motherhood and has no financial means to support a child. |
| 6 | 18 | 22w 4d | Young woman had an early medical abortion 14 weeks previously. Pregnancy test 4 weeks later was negative and she had a contraceptive implant fitted. She had no idea she could be pregnant. |
| 7 | 18 | 30w  | Teenager had thought she was about 18 weeks pregnant. Has an arranged marriage in the Indian sub-continent in the summer with the expectation that she would be a virgin. She had told no one of situation previously because of her fear, embarrassment and shame. *An abortion was not possible because she was over the current gestational limit. BPAS counselors arranged for her to have help to mediate with her family and potential emergency accommodation for her, should she need it.* |
| 8 | 19 | 22w | University student continued to have light monthly bleeds, so it didn’t occur to her that she could be pregnant. She feels completely unable to cope with a baby.  |
| 9 | 19 | 22w 1d | Teenager already has a 9 month old baby that is still breast-feeding. Lives with parents and feels unable to cope emotionally or financially with a new baby. Says she suspected she was pregnant, but the two pregnancy tests she took were negative. |
| 10 | 19 | 22w 3d | Teenager’s periods had always been irregular and she had never had sex without a condom, so it took some time for her to suspect that she was pregnant. She had carried out a home pregnancy test some weeks earlier and went to her GP the next day. It took 3 weeks to get an appointment with the local NHS hospital responsible for her local abortion service. They scanned her at 21 weeks and 1 day, which was above their own local time-limit. She then found out about BPAS. |

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| Client | Age of client | Gestation | Circumstances |
| 11 | 20 | 23w | Woman with very irregular periods only found out she was pregnant at 19 weeks. GP wrongly told her that an abortion would not be possible at this gestation and referred her into antenatal care. She waited two weeks for an appointment, and was told an abortion would be impossible. Heard about BPAS from a friend. |
| 12 | 20 | 23w 1d | University student being treated for depression. She thought her weight gain and nausea were side-effects of her medication, and went to GP to request a different prescription. GP diagnosed her pregnancy. |
| 13 | 21 | 23w 4d | Young woman with an unplanned pregnancy but was going to keep the baby. However, she and her partner have just been served with an eviction notice and they have nowhere to live that would be suitable for a baby. |
| 14 | 22 | 22w 3d | Single mother with one child. At first had decided to continue the pregnancy, which was unplanned but now thinks she couldn’t cope with two children on her own. |
| 15 | 22 | 22w 5d | University student had continued to have monthly bleeds until recently and so had no idea she could be pregnant. Had complicated pre-existing medical condition which meant that it would be unsafe to treat her anywhere other than an NHS hospital, however, none had available appointments. Referred back to her GP to arrange future antenatal care and adoption. |
| 17 | 22 | 23w 5d | Young woman living at home with her mother. Very ambivalent about whether to proceed with an abortion or not. Had been wrestling with the decision for some time. Partner would support her, whatever her decision. After counseling, decided she would continue the pregnancy and was glad that she had not rushed into a hasty decision. |
| 18 | 23 | 22w | University student realised she had missed several periods and that, some months back, a condom had split during sex .Tried to “push it out of her mind” and concentrate on her University work. Eventually confided in student support officer who suggested she contact BPAS.  |
| 19 | 23 | 22w | Couple already has two young children. This was a planned pregnancy. Severe facial abnormalities were detected during a routine ultrasound scan. The request for abortion was made following discussions with the care team attached to the local maternity unit. The plastic surgeon had said that, if the baby were born, it would need to undergo repeated surgeries and face a poor quality of life. The NHS unit was prepared to end the pregnancy, but had been unable to give the woman a date for this. The couple felt they “needed closure” and could not cope with the uncertainty of waiting. They paid privately to attend a BPAS clinic. |

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| Client | Age of client | Gestation | Circumstances |
| 20 | 23 | 22w 3d | Woman came to Britain as a refugee from East Asia with her husband who has now left her. She is living alone in hostel accommodation. This lady speaks no English and didn’t know where to get help. She feels unable to cope with a baby. |
| 21 | 23 | 23w | Mother with two children who feels she just can’t cope with a third. Delayed because she found the decision “really hard to make”. |
| 22 | 23 | 23w | Mother of a one year old child with longstanding partner. Planned to continue this pregnancy, but her relationship broke down and she feels unable to cope with two small children on her own. She feels she now needs to keep her job to support her existing child and that that would not be possible with another baby. |
| 23 | 23 | 25w | Woman knew she had not had period “for months” but “stuck [her] head in the sand” for some time before going to GP. Was not aware that there was a legal time limit on abortion so didn’t feel the need to act, although she knew she could not cope with a new baby and also keep up the payments on her house. *Because she was over the current legal gestational limit there was no option but to refer her back to her GP to arrange ante-natal care.* |
| 24 | 24 | 22w 1d | This mother has two daughters, under five years old, from a previous marriage. This pregnancy was unplanned but her current partner had persuaded her to continue. She then found out that he was abusing her daughters. When she contacted the police to report him, he absconded. |
| 25 | 24 | 26w 2d | Woman had continued to have period-like bleeds until recently and so had no idea she could be pregnant. *Because she was over the current legal gestational limit there was no option but to refer her back to her GP to arrange future ante-natal care.* |
| 26 | 25 | 23w 5d | Mother already has four young children. Had monthly bleeds throughout the pregnancy and so didn’t realise she was pregnant. Went to GP when she started to feel fetal movement. GP told her, incorrectly, that she was 14 weeks pregnant and so she didn’t realise the urgency of her situation. *Unfortunately, no appointment could be found for her within BPAS or any other NHS or independent provider so there was no alternative but to refer her back to her GP for ante-natal care.* |
| 27 | 27 | 22w 1d | Mother’s three children (aged 5, 6 and 10 months) are in foster care as mother is a drug user on methadone and was unable to cope. If she has another child now, she knows that it will also be taken away and placed in care. She is awaiting a place on a rehabilitation programme. She is sad about needing the abortion but feels it is the best decision as her priority is getting her existing children back. |
| **Client** | **Age of client** | **Gestation** | **Circumstances** |
| 28 | 27 | 23w 2d | Woman already has two young children with her husband, and they don’t think they can cope with a new baby. She realised she was pregnant early in the pregnancy and went to see her GP, who said that as she was “fit and healthy, no doctor would give her an abortion”. A family friend gave her details of a local NHS clinic, but she could not get an appointment for 3 weeks. She was then told she was over the (12 week) limit for the local service and so was referred on to BPAS. It took her a further week to make an appointment because she was “terrified of being told off for being so far gone”. |
| 29 | 27 | 23w 2d | Drug using mother who already has three children, one of which is in care. First came to BPAS when she was just under 7 weeks pregnant. She missed two appointments for treatment as she has difficulties traveling and finds child care impossible to arrange.  |
| 30 | 28 | 22w | Mother is in a longstanding relationship, and has three children aged under 9, one with Down Syndrome. She has known about her pregnancy and felt that abortion was her best option for “some time”, but as her child with Down Syndrome was scheduled for heart surgery, she had to “push it to the back of [her] mind” until the surgery was over. |
| 31 | 29 | 25w | Woman couldn’t remember when her last period was. Normally she relies on the contraceptive pill, but says she knows she takes them erratically. Her husband tries to remember to use a condom but often forgets. She had suffered from nausea and vomiting but had put these symptoms down to the stress of losing her job. *Because she was over the current legal gestational limit there was no option but to refer her back to her GP to arrange future ante-natal care.* |
| 32 | 31 | 25w 1 d | Drug user on methadone programme. Her medication means that she has no periods, so she did not realise she was pregnant. Feels that having a baby at this time will “push her over the edge”. *Because she was over the current legal gestational limit there was no option but to refer her back to her GP to arrange future ante-natal care.* |

Ann Furedi - Chief Executive

12 May 2008