

Bpas briefing on amendment to Queen’s Speech regarding NHS-funded abortion care in England for women resident in Northern Ireland

Overview

Every year, hundreds of women from Northern Ireland are forced to travel to England for abortion care. Despite being UK citizens, and UK taxpayers, they are not entitled to NHS-funded abortion care in England and must meet the cost of their treatment on their own.

Despite recent assertions by government ministers, **this is not a devolved issue. A [Supreme Court ruling](#) earlier this month made it explicitly clear that the power to grant NHS-funded abortion services to women resident in Northern Ireland lies with the government** – indeed the Secretary of the State for Health, Rt Hon Jeremy Hunt MP, did not contest this.

This amendment would not lead to any changes to abortion provision in Northern Ireland. This is about the care we provide in hospitals and clinics here in England and Wales.

It is clear that the issue of NHS-funded abortion services in England is not a matter for MLAs in Stormont, but for MPs in Westminster.

The current situation

In Northern Ireland, abortion is illegal in all but the most exceptional of circumstances. Abortion is not currently permitted due to the pregnancy being the result of rape, nor in cases of fatal fetal anomaly – where the baby has no chance of surviving outside the womb.

As a result, in 2016, [724 women](#) from Northern Ireland travelled to England for abortion care. Despite being UK citizens, and UK taxpayers, these women were not entitled to NHS-funded treatment, and as a result would have to pay between £400 to upwards of £1400 for a medical procedure which is fully funded for all other UK residents. This is in addition to the cost of travel, childcare, and potentially taking unpaid time off work. Because of the expense, many women from Northern Ireland travel alone, on what is already a difficult day, without the support of their partner, mother, or friends.

The Department for International Development, rightly, funds abortion care in developing countries. In 2014, [DfID stated](#) that “women and adolescent girls must have the right to make their own decisions about their sexual and reproductive health and well-being, and be able to choose whether, when and how many children to have.” It is deeply unfair that the same principal is not extended to women resident in Northern Ireland.

Supreme Court ruling

Earlier this month, a [Supreme Court appeal](#) challenging the government’s refusal to provide NHS-funded abortion care in England for women resident in Northern Ireland narrowly failed. The court divided 3-2 against the appeal, expressing sympathy for the women of Northern

Ireland but stating that they were restrained by the personal judgement of the Secretary of State.

The case was brought by a young woman, A, who in 2012 as a pregnant 15-year-old girl travelled with her mother, B, from their home in Northern Ireland to Manchester for an abortion at a cost of £900.

The Court's [ruling](#) stated that - as Secretary of State - Mr Hunt holds the legal authority to grant women resident in Northern Ireland NHS-funded abortion care in England. In his judgment, Lord Wilson stated:

“The respondent [Secretary of State for Health] makes a helpful concession: it is, as I will explain in para 13, that in 2012 he had a power which, if exercised, would (so the court may assume) have enabled UK citizens usually resident in Northern Ireland to undergo abortions under the NHS in England free of charge. But it is a power which he did not exercise; so the question is whether his failure to do so was unlawful.”

Moreover, the judgment made it clear that the current policy was not due to financial constraints – indeed, we have estimated that funding abortion care for women from Northern Ireland in 2016 would have only cost £350,500. The Secretary of State's barrister [stated](#) during the course of the Supreme Court case:

“It has never been our position that the reason abortion [for women from NI] is not provided on the NHS is that it would be too costly.”

Rather, the current policy was defended as stemming from the Secretary of State's “respect” for the democratic decisions of the Northern Ireland Assembly.

However, as [argued](#) by Lord Kerr:

“the Northern Ireland Assembly had decided that abortion in that jurisdiction should not be provided on the same basis as England. But it has expressed no view about the availability of women from [Northern Ireland] to travel to England to obtain abortions... Why should affording Northern Irish women abortion on the NHS constitute a lack of respect, when countenancing and permitting such a burden does not.”

Moreover, the government's policy is not consistent. Currently, women resident in Northern Ireland are able to obtain free abortion care in England if they are the spouses of a serving MoD employee or an MoD employee themselves. It is therefore difficult to understand how permitting one group of NI residences to have funded abortion care in England does not constitute a lack of “respect” for the NI Assembly, but extending the same service to all NI women would do so.

Impact of current government's current policy on women from Northern Ireland

In the Supreme Court judgment, the Justices expressed a profound sympathy for the “plight” of women in Northern Ireland facing an unplanned pregnancy. Lord Wilson, who did not rule in

favour of the appeal, stated that the “embarrassment, difficulty, and uncertainty attendant on the urgent need to raise the necessary funds” added significantly to mother and daughter’s “emotional strain.”

Clearly, imposing charges on women from NI can represent an almost insurmountable financial burden for many women. Women report having to sell their children’s Christmas present and resorting to payday lenders to finance the procedure. The significant expense can force women to delay accessing treatment as they try to raise the necessary funds. While abortion is a safe procedure, the earlier in pregnancy it is performed, the lower the potential risks. Department of Health statistics show that women from Northern Ireland present for terminations at a later gestation than women in England and Wales.

Women lacking financial resources are increasingly resorting to abortion medication purchased online illegally. Between 2010 and 2015, the number of women from Ireland and Northern Ireland seeking abortion medication from the not-for-profit provider, Women on Web, [rose by 162%](#), with this one organisation receiving requests from an estimated 1,400 NI women during this period. In doing so, women are putting themselves at risk of prosecution and a potential sentence of life-imprisonment. In 2016, a young student from Belfast who ended a pregnancy using online abortion pills after failing to gather the funds necessary for a termination in England was [sentenced](#) to a three-month suspended prison sentence. A second woman, a mother who purchased abortion medication online for her teenage daughter, is currently facing trial.

If the government does not act now, it is likely that more women in Northern Ireland will face potential prosecution.

The potential cost

As previously stated, the Secretary of State has made it clear that the current policy is not based on financial considerations. However, bpas would like to reassure Members of Parliament that, if this amendment were to pass, it would not represent a significant burden on the NHS. Based on Department of Health abortion statistics, BPAS and the Family Planning Association, FPA, have estimated that providing abortion care would have cost £350,500 in 2016 (full figures in Appendix.)

Conclusion

While the government can argue that abortion access in Northern Ireland is a matter for the Northern Ireland Assembly, to argue that the decision to not provide NHS-funded abortion services in England contradicts testimony from the Secretary of State and the judgment of the Supreme Court.

It is entirely within the government’s power to grant NHS-funded abortion care in England for women from Northern Ireland. Doing so would represent an incredibly small cost to the government, but would make a significant impact on the lives of hundreds of UK citizens every year, dramatically improving their ability to access the healthcare they need.

The UK government has spent £3m over 4 years on supporting abortion access overseas. It is time for MPs to ensure that we also provide the same access to safe, legal abortion services to all women within our own country.

For any further information or queries, please contact katherine.o'brien@bpas.org

About bpas

The British Pregnancy Advisory Service, bpas, is a charity which sees more than 70,000 women a year and provides reproductive healthcare services including pregnancy counselling, abortion care, miscarriage management and contraception, at clinics across the UK. It supports and advocates for reproductive choice. More information can be found at www.bpas.org.

APPENDIX

We have calculated the estimated cost to NHS England on the basis of 2016’s [abortion statistics](#) (which showed that 724 women and girls normally resident in Northern Ireland accessed abortions in England and Wales in 2016) and bpas’ [current prices](#) for Irish women.

COST BASED ON 2016 STATISTICS

Consultation costs

Consultation cost	£75
Number of women normally resident in Northern Ireland accessing abortion in England and Wales in 2016	724
<u>Total</u>	£54,300

Treatment costs

Under 10 weeks

Number of women normally resident in Northern Ireland who accessed abortion services in England and Wales ¹ under 10 weeks	532
Cost of bpas procedure under 10 weeks	£350
Total estimated cost of procedures under 10 weeks	£186,200

Between 10 and 12 weeks

Number of women normally resident in Northern Ireland who accessed abortion services in England and Wales between 10 and 12 weeks	103
Cost of bpas procedure between 10 and 12 weeks	£390
Total estimated cost of procedures between 10 and 12 weeks	£40,170

Between 12 and 19 weeks²

Number of women normally resident in Northern Ireland who accessed abortion services in England	68
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¹ Based on Table 12g in the Department of Health’s 2016 [abortion statistics](#)

² bpas price bands change at 14 weeks, so this represents an overestimation on cost

and Wales between 12 and 19 weeks

Cost of bpas procedure between 12 and 19 weeks	£610
Total estimated cost of procedures between 12 and 19 weeks	£41,480

Over 20 weeks

Number of women normally resident in Northern Ireland who accessed abortion services in England and Wales over 20 weeks	21
Cost of bpas procedure over 20 weeks	£1,350
Total estimated cost of procedures over 20 weeks	£28,350

Combined cost

Total estimated cost of procedures under 10 weeks	£186,200
Total estimated cost of procedures between 10 and 12 weeks	£40,170
Total estimated cost of procedures between 12 and 19 weeks	£41,480
Total estimated cost of procedures over 20 weeks	£28,350
Total estimated treatment cost	£296,200

Total cost

Total consultation cost	£54,300
Total treatment cost	£296,200
<u>Total cost</u>	<u>£350,500</u>