Dear Secretary of State,

NHS England funding for women from Northern Ireland seeking abortion services

This year marks 50 years since the passing of the 1967 Abortion Act. Although this landmark legislation granted reproductive rights to women in Great Britain, it also marks 50 years of differential treatment for women in Northern Ireland.

As you will know, on 14th June 2017, the Supreme Court narrowly decided to dismiss an appeal that challenged your Department’s policy not to fund abortion services in England for women who are normally resident in Northern Ireland. The court was divided 3-2 against the appeal; while expressing their sympathy for women in Northern Ireland, they stated that they are restrained by your argument that the decision is out of “respect” for the democratic decisions of the Northern Ireland Assembly.

As MPs, peers and MLAs, we are dedicated to campaigning for a change to this unfair and discriminatory law. However, while our advocacy in this area continues, we would like to highlight the Court’s ruling which states that, as Secretary of State, you hold the legal authority to change your policy on funding abortion services in England for women normally resident in Northern Ireland. We urge you to use this authority and reduce the significant financial burden women travelling from Northern Ireland face.

The situation for women normally resident in Northern Ireland

The Supreme Court 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. This is a clear demonstration of the cruelty of current law. Every year women and girls are forced to travel to England to access reproductive healthcare services that are available in all other UK nations, free at the point of need.

Having to pay for treatment is often a large source of anxiety for women, while entrenching stigma. Being prevented from accessing free NHS services reinforces the idea that women seeking abortion are in the wrong. The Supreme Court judges recognised this, expressing a profound sympathy for the “plight” of women in Northern Ireland facing an unplanned or crisis 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 the “emotional strain” of women from Northern Ireland.

**Your role as Secretary of State**

Through the case, you had stated that the Government’s policy was “in general, the NHS should not fund services for residents of Northern Ireland which the Northern Ireland Assembly has deliberately decided not to legislate to provide.”

In Lord Kerr’s dissenting judgement, he stated that “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.” We agree and hope that you will consider this argument and reverse a decision that, to quote Lord Wilson, leaves women facing “[a] total cost [that] represents a vast some of money which they do not have.”

**A practical solution with a funding system that works**

Although the Supreme Court judgement made it clear that your position is not one that relates to the cost, we have worked to provide a practical solution ready for a change in Government policy.

For a relatively small number of women, access to abortion services in England is vital. Recent data shows that 724 women and girls from Northern Ireland had travelled to England and Wales to terminate their pregnancies in 2016. This number does not take into account those who travel to Scotland or other European countries, or women who purchase Mifepristone and Misoprostol illegally due to their inability to travel. Based on the 2016 abortion statistics, for Northern Irish women to access services the overall treatment cost per year is estimated to be around £350,500.

We recognise that, in England, abortion care is normally commissioned by clinical commissioning groups (CCGs). However, by the very nature of local commissioning, funding services for non-residents is likely to pose some significant challenges. For example, CCGs covering areas that are often the destination for women from Northern Ireland (typically the North West and large cities including London and Birmingham) will bear a disproportionate burden of the cost.

It is clear to us that abortion care therefore meets two of the factors NHS England uses to determine whether a services should be commissioned as a specialised service; the relative low number of individuals who would require the service and the financial implications for CCGs if they were required to arrange for provision of the service or facility themselves.

**A care pathway for Northern Irish women**

If, as Secretary of State, you would allow NHS England to commit to this funding, the UK’s largest independent abortion care provider, BPAS, would be willing to provide a Central Booking System at no cost, as part of their charitable remit. This system would allow self-referral, offering appointments from all abortion care providers (including but not limited to BPAS clinics), based on

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1 For cost calculations, see the appendix attached to this letter

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where in England women would want to travel to. The provider would then invoice NHS England on a cost per case basis.

The client would have to organise travel, accommodation and possible childcare to attend the clinic for treatment, but the lack of a cost for the procedure would be a real benefit for women who may otherwise struggle to afford care.

Next steps

The values of compassion, respect and dignity are the cornerstone of a health service that everyone in the UK should be able to experience. As the campaign to ensure equal access to services within Northern Ireland continues, we hope that you will use your unique ability to reduce the financial strain on women who are prevented from accessing abortion services at home.

Such a commitment would sit well with the important work the UK government currently funds to ensure women in developing countries can access safe abortion services. Our international policy position as a country, as articulated by the Department for International Development (DFID) is 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.”

We could not agree more. The UK government has spent £3 million over 4 years on supporting this aim. We ask simply that the same access to safe abortion services are afforded to women within the UK, and we stand ready in this parliament and the Northern Ireland Assembly to support legislation to resolve this matter if it is required.

We look forward to hearing from you,

Yours sincerely,

Alex Sobel MP, Leeds North West, Labour
Anneliese Dodds MP, Oxford East, Labour
Baroness Barker, Liberal Democrat
Baroness Walmsley, Liberal Democrat
Caroline Lucas MP, Brighton Pavilion, Green Party of England and Wales
Cat Smith MP, Lancaster and Fleetwood, Labour
Chi Onwurah MP, Newcastle upon Tyne Central, Labour
Chris Bryant MP, Rhondda, Labour
Chuka Umunna MP, Streatham, Labour
Clare Bailey MLA, South Belfast, Green Party of Northern Ireland
David Lammy MP, Tottenham, Labour
Diana Johnson MP, Kingston upon Hull North, Labour
Doug Beattie MLA, Upper Bann, Ulster Unionist Party
Dr Daniel Poulter MP, Central Suffolk and North Ipswich, Conservative
Eamonn McCann, former MLA, People Before Profit
Ellie Reeves MP, Lewisham West and Penge, Labour
Emma Hardy MP, Kingston upon Hull West and Hessle, Labour
Emma Lewell-Buck MP, South Shields, Labour
Gerry Carroll MLA, West Belfast, People Before Profit
Gill Furniss MP, Sheffield, Brightside and Hillsborough, Labour
Grahame Morris MP, Easington, Labour
Heidi Alexander MP, Lewisham East, Labour
Hywel Williams MP, Arfon, Plaid Cymru
Ian Murray MP, Edinburgh South, Labour
Jess Phillips MP, Birmingham Yardley, Labour
Jo Platt MP, Leigh, Labour
Jo Stevens MP, Cardiff Central, Labour
Jo Swinson MP, East Dunbartonshire, Liberal Democrat
John Stewart MLA, East Antrim, Ulster Unionist Party
Jonathan Bartley, Co-Leader, Green Party of England and Wales
Kate Green MP, Stretford and Urmston, Labour
Layla Moran MP, Oxford West and Abingdon, Liberal Democrat
Lilian Greenwood MP, Nottingham South, Labour
Liz Kendall MP, Leicester West, Labour
Lord Lester of Herne Hill, Liberal Democrat
Lord Rogan, Ulster Unionist Party
Madeleine Moon MP, Bridgend, Labour
Rt Hon Nicky Morgan MP, Loughborough, Conservative
Rt Hon Norman Lamb MP, North Norfolk, Liberal Democrat
Paula Bradshaw MLA, South Belfast, Alliance
Paula Sherriff MP, Dewsbury, Labour
Sir Peter Bottomley MP, Worthing West, Conservative
Dr Rupa Huq MP, Ealing Central and Acton, Labour
Sandy Martin MP, Ipswich, Labour
Stella Creasy MP, Walthamstow, Labour
Stephen Farry MLA, North Down, Alliance
Stephen Doughty MP, Cardiff South and Penarth, Labour
Steven Agnew MLA, North Down, Green Party of Northern Ireland
Stewart Dickson MLA, East Antrim, Alliance
Tommy Sheppard MP, Edinburgh East, SNP
Tonia Antoniazzi MP, Gower, Labour
Trevor Lunn MLA, Lagan Valley, Alliance
Tulip Siddiq MP, Hampstead and Kilburn, Labour
Rt Hon Yvette Cooper MP, Normanton, Pontefract and Castleford, Labour
Yvonne Fovargue MP, Makerfield, Labour
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’s current prices for Irish women.

COST BASED ON 2016 STATISTICS

Consultation costs

<table>
<thead>
<tr>
<th>Consultation cost</th>
<th>£75</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of women normally resident in Northern Ireland accessing abortion in England and Wales in 2016</td>
<td>724</td>
</tr>
<tr>
<td>Total</td>
<td>£54,300</td>
</tr>
</tbody>
</table>

Treatment costs

Under 10 weeks

| Number of women normally resident in Northern Ireland who accessed abortion services in England and Wales 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 |

2 Based on Table 12g in the Department of Health’s 2016 abortion statistics
### Between 12 and 19 weeks

<table>
<thead>
<tr>
<th>Description</th>
<th>Number/Wages</th>
<th>Cost of bpas procedure</th>
<th>Total estimated cost of procedures</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of women normally resident in Northern Ireland who accessed abortion services in England and Wales between 12 and 19 weeks</td>
<td>68</td>
<td>£610</td>
<td>£41,480</td>
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</tbody>
</table>

### Over 20 weeks

<table>
<thead>
<tr>
<th>Description</th>
<th>Number/Wages</th>
<th>Cost of bpas procedure</th>
<th>Total estimated cost of procedures</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of women normally resident in Northern Ireland who accessed abortion services in England and Wales over 20 weeks</td>
<td>21</td>
<td>£1,350</td>
<td>£28,350</td>
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</table>

### Combined cost

<table>
<thead>
<tr>
<th>Description</th>
<th>Cost (GBP)</th>
</tr>
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<tbody>
<tr>
<td>Total estimated cost of procedures under 10 weeks</td>
<td>£186,200</td>
</tr>
<tr>
<td>Total estimated cost of procedures between 10 and 12 weeks</td>
<td>£40,170</td>
</tr>
<tr>
<td>Total estimated cost of procedures between 12 and 19 weeks</td>
<td>£41,480</td>
</tr>
<tr>
<td>Total estimated cost of procedures over 20 weeks</td>
<td>£28,350</td>
</tr>
<tr>
<td>Total estimated treatment cost</td>
<td>£296,200</td>
</tr>
</tbody>
</table>

### Total cost

<table>
<thead>
<tr>
<th>Description</th>
<th>Cost (GBP)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total consultation cost</td>
<td>£54,300</td>
</tr>
<tr>
<td>Total treatment cost</td>
<td>£296,200</td>
</tr>
<tr>
<td><strong>Total cost</strong></td>
<td><strong>£350,500</strong></td>
</tr>
</tbody>
</table>

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