

# Welsh Government consultation on provision of abortion services for women from NI

## Response from the Christian Medical Fellowship (CMF)

CMF was founded in 1949 and is an interdenominational organisation with over 5,000 British doctor members in all branches of medicine. A registered charity, it is linked to about 75 similar bodies in other countries throughout the world.

We welcome the Welsh Government's readiness to consult over this issue. However, we would urge the Welsh Government not to issue a written Directive to allow women ordinarily resident in Northern Ireland to access abortion services on the same basis as women ordinarily resident in Wales.

Our reasons are as follows:

### 1. It would harm relationships across UK

- The law on abortion in NI is a devolved matter. The people of NI, through their elected representatives have chosen to give legal protection to children both before and after birth.
- Welsh Assembly members are entitled to hold a different view, but should not undermine the policies of democratically elected representatives in another devolved government. To do so would be disrespectful of that authority. No doubt the Welsh Assembly would be outraged if another authority sought to undermine policies that hold within its own area of devolved responsibility. The political process in NI is already under strain; the last thing the Assembly in NI needs is a challenge to their authority to deal with devolved matters.

### 2. It would harm more women

- According to the review into the mental health outcomes of induced abortion, carried out in the UK in 2011,<sup>1</sup> there is no evidence that abortion reduces the mental health risks of unwanted pregnancy. This finding was confirmed by Fergusson, who also found that there were small to moderate increases in risks of some mental health problems post abortion.<sup>2</sup>
- A growing body of evidence suggests that women may be at an increased risk of mental health disorders (notably major depression, substance misuse and suicidality) following abortion, *even with no previous history of problems*. Researchers not associated with vested interest groups have published this growing scientific evidence. They include Fergusson in New Zealand<sup>3</sup> and Pedersen in Norway.<sup>4</sup>

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<sup>1</sup> Induced Abortion and Mental Health: A systematic review of the evidence — full report and consultation table with responses. *Academy of Medical Royal Colleges (AoMRC)*. December 2011.

<sup>2</sup> Fergusson D, Horwood L & Boden J. Does abortion reduce the mental health risks of unwanted or unintended pregnancy? A re-appraisal of the evidence. *Aust N Z J Psychiatry* 2013;47:1204-1205.

<sup>3</sup> Fergusson D, Horwood L & Boden J. Reactions to abortion and subsequent mental health. *British Journal of Psychiatry* 2009;195(5):420-6. Fergusson, D, Horwood, L & Boden J. Abortion and mental health disorders: Evidence from a 30-year longitudinal study. *British Journal of Psychiatry* 2008;193:444-51.

- There is strong evidence of a link between abortion and subsequent preterm birth. A 2013 review<sup>5</sup> of induced abortion found that women who had one prior induced abortion were 45% more likely to have premature births by 32 weeks, 71% more likely to have premature births by 28 weeks, and more than twice as likely (117%) to have premature births by 26 weeks. Another study in 2013 in Finland found a 28% higher risk of an extremely preterm birth.<sup>6</sup> There are now over 100 studies in the medical literature confirming this association.
- New evidence suggests that abortion may increase susceptibility to breast cancer. A meta-analysis of 36 studies on abortion published in 2014 by Huang et al. concluded that induced abortion is significantly associated with an increased risk of breast cancer – by as much as 44% after one induced abortion and even more as the number of abortions increases.<sup>7</sup> These results are disputed by the Royal College of Obstetricians and Gynaecologists and further research is needed to settle the issue.

### 3. It would harm the NHS in Wales

- It is not clear how Local Health Boards in Wales will fund the abortions of those normally resident in NI. Whether this funding will be direct or indirect (via a Westminster grant) the fact remains that taxpayers in Wales will foot the bill.
- The NHS in Wales is severely stretched as it is, and we see no justice for Welsh residents in their shouldering responsibility for funding abortion services, contrary to the public policy adopted by the elected Northern Ireland Assembly, rather than their own health services.
- We would point members of the Welsh Assembly to the findings of the Supreme Court when it considered the question of public funding in England for abortions on women from Northern Ireland.<sup>8</sup> The Court warned that it would set a precedent that could lead to a substantial level of “health tourism” and ultimately threaten the “near collapse of the edifice of devolved health services”.

### 4. It would harm society

- Abortion is the wilful destruction of an unborn life. This is recognised in law in NI. Repeated attempts the change that law have been unsuccessful. The people of NI have chosen to protect unborn children from harm. To undermine their commitment to the value of unborn life would do harm to their society. Their choice should be respected.

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<sup>4</sup> Pedersen W. Abortion and depression: A population-based longitudinal study of young women. *Scandinavian Journal of Public Health* 2008;36(4):424-8.

<sup>5</sup> Hardy G, Benjamin A, Abenhaim H. Effect of induced abortions on early preterm births and adverse perinatal outcomes. *J Obstet Gynaecol Can* 2013;35(2):138-143.

<sup>6</sup> Räisänen S, Gissler M, Saari J, Kramer M, Heinonen S. Contribution of risk factors to extremely, very and moderately preterm births — register-based analysis of 1,390,742 singleton births. *PLoS One*. 2013;8(4):e60660.

<sup>7</sup> Huang Y, Zhang X, Li W, Song F, Dai H, Wang J, Gao Y, Liu X, Chen C, Yan Y, Wang Y, Chen K. A meta-analysis of the association between induced abortion and breast cancer risk among Chinese females. *Cancer Causes Control* 2014;25(2):227-36.

<sup>8</sup> R (on the application of A and B) (Appellants) v Secretary of State for Health (Respondent). Judgment 14 June 2017. Trinity Term [2017] UKSC 41 On appeal from: [2015] EWCA Civ 771.