

ABORTION LEGISLATION IN EUROPE

(UPDATED January 2007)

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Notes

- 1) The document is in its eighth edition. The previous one was compiled in February 2004. It has been updated following information received from IPPF European Network Member Associations (MAs)
- 2) In **DISPARITY IN THE APPLICATION OF THE LAW**, and in **COMMENTS** the text is directly from the Member Associations (MAs).
- 3) The exchange rate for the conversion into US\$ was calculated at the time of the revision.

Acknowledgements

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ALBANIA
Albanian Center for Population and Development
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LEGISLATION

Abortion Law Nr 8045, 7 December 1995, "on the interruption of pregnancy"

GROUNDINGS/GESTATIONAL LIMITS

Up to 12 weeks:

- On request, in case a woman considers that a pregnancy causes psychological and social problems

Up to 22 weeks:

- For social reasons
- Rape or other sexual crime

No Limit:

- Severe (incurable) malformation of the fetus
- If continuing the pregnancy and/or childbirth would put the woman's life or health at risk

REGULATIONS/CONDITIONS

Abortion should be performed by a physician-specialist/obstetrician-gynaecologist, and can take place in public and private health institutions.

Pre- and post-abortion counseling is obliged. The physician performing the abortion is obliged to inform women of family planning services and to advise them about contraceptive methods.

In case a woman, after the pre-abortion counseling, repeals the request, she is asked by the physician to confirm her request in writing. This confirmation should be done at least 7 days after her first request. If the time span of 7 days surpasses the legal limits, the physician may decide to reduce it to 2 days.

Unmarried minors up to 16 need the consent of the person exercising parental authority or legal protection. The request for an abortion should not be made in their presence.

A health commission consisting of three physicians decides, after examination and consultation, to allow for an abortion on medical grounds (thus no limit as mentioned above).

An abortion for social reasons (up to 22nd week) needs the approval of a commission of three specialists (physician, social worker and lawyer).

COST

A total of lek 3.600 (US\$ 40) for the abortion fee plus laboratory tests (incl. Ultrasound).

In private clinics this sum is double.

DISPARITY IN THE APPLICATION OF THE LAW:

- *Although required by law, routine analyses are not regularly done before the abortion procedure.*
- *The reflection period (7 days – by law) is not respected, mostly because women are not informed about their rights. Neither the social worker nor health practitioners inform women on this.*
- *Women pay "under the table" and give bribes to the doctors who perform the abortion.*
- *Obligatory pre- and post-abortion counselling is not always respected.*
- *Most abortions performed in private clinics are not reported and there are no standard reporting forms.*
- *There is no appropriate supervision plan in place for both private and public clinics. The clinics supervision is not done on a regular basis.*
- *Almost half of private clinics do not comply with legal requirements regarding the needed surface and equipment.*
- *Women do not necessarily present an identification document at the clinic.*

COMMENTS:

- *The new law overturned the previous one whereby abortion was legally permitted only on limited grounds*
- *Abortion is not performed in the MA's clinics*

ARMENIA
Armenian Association 'For Family and Health'
armfha@netsys.am
www.armfha.com

LEGISLATION

Abortion permitted since 1955

GROUNDINGS/GESTATIONAL LIMITS

Up to 12 weeks:

- On request

Up to 22 weeks:

- Social grounds (if husband has died during woman's pregnancy; if woman was deprived of maternal rights during pregnancy; divorce; rape)
- Medical grounds (such as tuberculosis, syphilis, HIV/AIDS, a malignant tumor, mental disorder or chronic alcoholism; underdeveloped reproductive system of teenager under-16)
- Family risk or diagnosed fetal malformation

REGULATIONS/CONDITIONS

Menstrual regulation (called mini-abortion in Armenia) is permitted up to 7 weeks of pregnancy. Women under age of 18 should obtain consent from parents or a lawful proxy or, if it is impossible, from a relevant medical commission.

According to the MoH standards, abortion should be performed only by a licensed obstetrician-gynecologist and only in hospital conditions such as maternity homes, hospitals, private clinics with at least 15 beds and a license. MoH permits medical abortions to be performed in out-patient medical facilities.

Although registration of the abortion is mandatory, it is not always done.

In order to ensure quality, the Government has issued regulations on abortion procedures, which include a 4 hours period of stay after the intervention and family planning counseling after the abortion. However, these regulations are not followed by the practitioners and not controlled by the MoH.

COST

The cost varies from clinic to clinic, between US\$ 15 and US\$ 50 per procedure. All state clinics providing abortion services charge an official fee of \$30, which almost equals the minimum wage.

There are also unofficial, illegal payments, which range from US\$ 20 to US\$ 500, depending on the gestational limit.

The cost of an abortion is higher, if it is performed with anesthesia, or if it is illegal.

Both legal and illegal costs have considerably increased in the last 10 years. The cost of an illegal abortion significantly exceeds an average monthly salary. A social security system in Armenia does not exist yet. Although there is a state program to provide services for free to poor people, most of the poor can't access the program due to complex criteria and bureaucratic procedures.

DISPARITY IN THE APPLICATION OF THE LAW:

- *Abortion services are not available in rural areas or in some urban settings*
- *The poor and young unmarried women often perform self-induced abortion with a high risk of life-*

threatening complications and consequences.

COMMENTS:

Regardless of the permissive legislation for the abortion and availability of national regulations on abortion services, there are several problems related to abortion services in the country. They include a lack of access to abortion services for poor and young women, a poor quality of the abortion care provided and a lack of post-abortion contraception.

One of the reasons is a poor quality of abortion services provided in health facilities. Although the quality of abortion care has never been assessed at the national level, the MoH is aware and that abortion services are not of high quality and needs a lot of improvement and introduction of new technologies.

Presently, the most commonly used abortion technique is dilatation and curettage. Manual vacuum aspiration is being used sporadically and only in private clinics in Yerevan. Mifepristone and Misoprostol are not registered in the country to perform medical abortion.

Another indicator demonstrating quality of abortion services is the level of post-abortion complications that contribute to women's disability and death cases. As the NRHS (1998) showed complications after abortion were experienced by 16% of the interviewed women. The quality of abortion is also compromised by a lack of post-abortion counseling provided by service providers. The study showed that in 60% of cases, no family planning counseling after abortion was provided, and 75% of women complained about pain beyond comfort level during last abortion (NRHS, 1998).

Access to safe abortion is an issue for low-income and young people who cannot afford to pay for services or don't have access to information about available services. Especially young unmarried women are at risk of unsafe abortion due to social prejudice against premarital sexual relations. Parents are not capable to provide support and help to their children that are faced with an unwanted pregnancy. The causes lie in a traditional attitude of people to avoid talks on sexual topics between young and older generations. Even when parents are willing to help, very often they lack skills to discuss sexuality issues with their children.

As a result of compromised access to abortion services there are cases of unsafe self-induced abortion. According to National reproductive Health Survey (1998), at least 23.4% out of all reported miscarriages were due to self-induced abortion. Official statistics do not provide accurate and reliable data on rate of unsafe abortion in the country.

Regardless of the fact that the abortion regulation includes post-abortion family planning counseling, women receive post-abortion contraception and counseling rarely. According to NSRH only 40% of interviewed women received post-abortion FP counseling.

AUSTRIA
Österreichische Gesellschaft für Familienplanung (ÖGF)
office@oegf.at
www.oegf.at

LEGISLATION

Federal Law 23 January 1974, effective in January 1975 (Bundesgesetzblatt, No. 60, 1974)

GROUNDINGS/GESTATIONAL LIMITS

Up to three months from completed implantation:

- On request

Second trimester:

- Serious risk to physical health of women (that cannot be averted by other means)
- Risk to mental health of women (that cannot be averted by other means)
- Immediate risk to life of woman (that cannot be averted by other means)
- Serious foetal impairment (physical or mental)
- Woman is a minor (under 14 years)

REGULATIONS/CONDITIONS

- Abortion must be performed by a physician after a previous medical consultation
- No physician is obliged to perform an abortion or to take part in it, except where it is necessary without delay to save the life of the pregnant woman from an immediately threatening danger which cannot otherwise be averted.

COST

- Induced abortion not paid for by (normal) health insurance
- State hospitals: € 300–840 (US\$ 388-1085)
- Private abortion clinics: € 350-450 (US\$ 452-581)
- Private practitioners: € 450 (US\$ 581)

DISPARITY IN THE APPLICATION OF THE LAW:

- *Due to conscientious objection from both medical personnel and hospital management, abortion facilities are not readily available all over the country*
- *According to the law, abortion can be performed up to 3 months after completed implantation, but in practice they are performed up to 12 weeks after Last Menstrual Period even though there is no legal basis for this.*
- *According to the law, abortion can be performed by a physician. But the regulation for Mifegyne allows the use of the drug only in hospitals and clinics, therefore medical abortion can be performed only in hospitals and clinics. There are two private clinics specialised in abortion in Vienna. They also offer medical abortion*
- *Very few public hospitals are offering abortion at a reasonable price (appr. 5 hospitals are offering abortion for less than € 350). It is difficult for women to get an abortion especially outside Vienna and outside of other big cities*
- *Very few doctors perform abortions in private practice in rural areas*
- *Abortion tourism takes place from West to East Austria. Between 100 and 200 women per year are still going to the Netherlands to get a late second trimester abortion since after the 18th week, it is hardly possible to get an abortion in Austria.*

COMMENTS:

- *Public information on the availability of abortion services is very scarce. Statistics are not available. However, it is believed that illegal abortion is not practised on any scale.*

BELGIUM

Sensoa

info@sensoa.be
www.sensoa.be

Fédération Laïque de Centres de Planning Familial
(FLCPF)

flcpf@planningfamilial.net
www.planningfamilial.net

LEGISLATION

Law on termination of pregnancy 3 April 1990
National Evaluation Committee (Law of 13 August 1990)

GROUNDINGS/GESTATIONAL LIMITS

Abortion remains forbidden (art. 348, 350, 351, 352 of the Penal Code) but legal

Up to 12 weeks after conception (or 14 weeks after Last Menstrual Period):

- If the pregnancy causes a 'state of distress/emergency' for the woman (– the law does not define the state of distress/emergency)

No limit:

- 'Serious' risk to health of woman
- 'Extremely serious and incurable disease' of fetus

REGULATIONS/CONDITIONS

- Consultation with a doctor
- Compulsory waiting period (6 days)
- Compulsory counselling on alternatives to abortion (adoption, keeping the baby)
- Parental consent for minors is not mentioned in the law
- The opinion of a 2nd doctor is requested in case of 'serious' risks to health of the woman or if the fetus is judged to be suffering from an 'extremely serious or incurable disease'

COST

Since December 2001, abortion is reimbursed if performed in an abortion clinic that has signed an agreement with the national institute for social security (INAMI/RIZIV). The contribution women have to pay is very limited (€ 3,08 or US\$ 4).

Abortions performed in hospitals or one-day clinics are not fully reimbursed. Depending upon the setting, women have to pay:

- Hospitals (single room): € 75-225 (US\$ 97-290)
- One-day clinics or Family planning centers: € 32-70 (US\$ 41-90)

DISPARITY IN THE APPLICATION OF THE LAW:

COMMENTS:

- *The law is quite liberally interpreted. Most abortions are performed in abortion clinics (non-profit organisations)*

BOSNIA and HERZEGOVINA
Association for Sexual and Reproductive Health - XY (APP-XY)
bhfpa.xy@bih.net.ba
www.xy.com.ba

LEGISLATION

Law of 7 October 1977 which proclaims that "it is a human right to decide on the birth of children"

GROUND/GESTATIONAL LIMITS

Up to 10 weeks of pregnancy:

- On request

After 10 weeks of pregnancy:

- Risk to life and health of woman
- Risk to physical or mental health of child to be born
- Rape or other sexual crime

After 20 weeks of gestation:

- To save the life or health of a woman

REGULATIONS/CONDITIONS

- Abortions must be performed in a hospital or another authorized health-care facility
- If the woman is a minor, approval of her parents or guardian is required
- Woman above 16 years who are employed don't need parental consent for termination of pregnancy up to 10 weeks and if termination will not directly endanger her life
- After 10 weeks of pregnancy, special authorization by a commission, composed of a gynaecologist/obstetrician, a general physician or a specialist in internal medicine, and a social worker or psychologist is required.
- The woman can appeal to the Commission of Second Instance if the Commission of First Instance rejects her request

COST

- Abortion in Clinical Centres costs KM 50 (US\$ 33) for insured patients
- Abortion in Health Centres costs KM 100 (US\$ 66)
- The cost of an abortion in private clinics ranges from KM 150-400 (US\$ 99-264)

DISPARITY IN THE APPLICATION OF THE LAW:

According to article 13, women's health services keep a special record about terminations of pregnancies. In practice, record keeping about termination of pregnancies is totally neglected. There are no data neither on State, Federal or Cantonal level. Some private clinics hide the fact that they are performing abortions. Consequently, they do not report on the abortions performed.

COMMENTS:

BULGARIA

Bulgarian Family Planning and Sexual Health Association (BFPA)

info@safesex.bg

www.safesex.bg

LEGISLATION

Decree No. 2 of 1 February 1990

GROUND/GESTATIONAL LIMITS

Up to 12 weeks of gestation:

- On request

Up to 20 weeks of gestation:

- Medical grounds: when the woman suffers from an illness which during pregnancy or at birth may endanger her health and life, as well as that of the offspring

Up till end of pregnancy:

- Severe fetal malformation
- Risk to the life of the woman

REGULATIONS/CONDITIONS

- Abortions on request should be performed in specialized obstetrical hospitals and clinics, as well as in the obstetrical wards of general hospitals. Abortions are permitted in both state and private clinics, but not in private cabinets.
- Abortions on request must be performed by physician obstetricians, applying local or general anaesthesia
- In the majority of cases – bigger cities – doctors are obliged to give information about contraception
- Minimum number of lab test: blood counts, blood group (RH incl.), urine
- Incapacitated women need the consent of their legal representatives or guardians.
- An abortion on medical grounds must be based on a decision taken by a specially established medical committee in the district or city hospitals, the obstetrical hospitals and clinics of the higher medical institutes, and the Scientific Institute of Ob/Gyn of the Medical Academy. If the committee decides that no abortion should be performed, this decision can be appealed within 7 days to a specialized committee appointed by the Minister of Health and Social Care.

COST

- Free of charge for under aged, for women over 35 and for all women on medical grounds and for women who are pregnant as a result of rape
- BGN 40 (US\$ 27) for women with the lowest salary of BGN 110 (US\$ 73)
- From BGN 40 up to 238 (US\$ 27-158) for the others

DISPARITY IN THE APPLICATION OF THE LAW:

No data

COMMENTS:

- *A new government project for health insurance system does not include either abortion or contraception*

- *In its daily work the Bulgarian FPA underlines that abortion is not a contraceptive method, and that a preferable choice is modern contraception, which, among other benefits reduces the risk of infertility. However, emphasis on abortion as a human right is given.*
- *In the beginning of 2006 the BFPA published a booklet with basic information on abortion, and in 2005 organized a national workshop on pre-and post abortion counseling.*

CYPRUS

Family Planning Association of Cyprus (FPAC)
famplan@spidernet.com.cy

LEGISLATION

Criminal code of Cyprus (sections 167-169 and 169A) as amended in 1974 (Law No 59) and in 1986 (Law No 186)

GROUND/GESTATIONAL LIMITS

- Risk to life of the pregnant woman
- If the pregnancy would cause physical, mental or psychological damage to the woman (or to any existing child she may have) that is greater than if the pregnancy would be terminated
- Under circumstances which, if the pregnancy were not terminated, would seriously jeopardize the social status of the pregnant woman or that of her family
- Serious physical or psychological abnormalities if the child were born
- Rape or other sexual crime

There is no gestational limit specified in the law

REGULATIONS/CONDITIONS

- A certificate from the appropriate police authority supported by a medical certificate is required whenever this is possible in cases of rape or other sexual crime
- A 'bona fida' opinion of 2 medical practitioners

COST

- Hospital: free of charge for patients eligible to free medical care. A great majority of cases are performed on medical grounds.
- Private clinics: about CYP 230-260 (USD 514-582)

DISPARITY IN THE APPLICATION OF THE LAW:

- *The majority of abortions are performed in private clinics by trained gynaecologists. A "bona fida" opinion of two medical practitioners is not always secured.*

COMMENTS:

- *No unsafe abortions take place in Cyprus, and although the abortion law is somehow restrictive, it is, at the same time, permissive. Abortions take place in private clinics and are performed by trained gynaecologists. Abortions are not performed in a hospital, unless there are reasons which endanger the physical and mental health of the woman or the embryo/foetus, even though the law is not that restrictive*

CZECH REPUBLIC
Společnost pro plánování rodiny a sexuální výchovu (SPRSV)
planrod@centrobox.cz

LEGISLATION

Law 63 and 77. 23 October 1986, effective January 1987
Enactment of the Czech Ministry of Health, No 11, 1993

GROUNDINGS/GESTATIONAL LIMITS

Up to 12 weeks since Last Menstrual Period:

- On request
- On health grounds
- Rape or other sexual crime

After 12 weeks:

- If the life of the woman is in danger
- Serious foetal malformation
- If foetus is incapable of life

Until beginning of 24th week:

- If there are genetic grounds for the abortion

REGULATIONS/CONDITIONS

- Women have to make a written request to the gynaecologist of the health establishment serving her place of permanent residence, place of work or school.
- If the gynaecologist does not find that the conditions for an abortion are satisfied, the woman may within three days, make a written request to review his decision by the district ob/gyn specialist. S/he shall review the request within two days of its being submitted.
- If the district specialist does not approve for an abortion, but if the woman still insists, her written request will be put for review to the regional ob/gyn specialist. His decision is final.
- Only for Czech citizens or women with permanent residence or residence permit
- Women who have had an abortion within six months are not permitted to undergo the procedure unless they have had two deliveries, are at least 35 years of age or the pregnancy was the result of a rape.
- For non-residents only when risk to life is involved
- The physician shall designate the public health establishments competent for the performance of abortions. At the wish of the woman, another public health establishment can be designated if it is connected with the designated establishment.
- For minors (under 16), the consent of her legal representative or guardian is needed
- If an abortion has been performed on a woman aged between 16 and 18, the health establishment shall notify her legal representative
- Compulsory counselling pre- and post abortion (on contraceptive methods and health consequences of abortion)
-

COST

- Free of charge on medical grounds for all women
- The maximum according to a new state notice for abortion is:
 - up to the 8 weeks: CZK 2876 (US\$ 132)
 - from 9th-12th week CZK 3634 (US\$ 167)

DISPARITY IN THE APPLICATION OF THE LAW:

No disparity: abortions are performed in gynaecological hospital departments; there is a sufficient network, therefore the services are easily accessible. Only one Catholic hospital does not allow abortion, causing major media debates

COMMENTS:

- *The Ministry of Finance regulates the cost of abortion in the Czech Republic. Competition among hospitals often leads to actual prices being lower than those set by the Ministry of Finance. There are no further fees or payments to be made*
- *To date it has not been possible to have the cost of abortion covered, even partially, by the insurance companies*

DENMARK

Sex & Samfund

info@sexogsamfund.dk

www.sexogsamfund.dk

LEGISLATION

Act No. 350, 13 June 1973. Amended through Law N° 389, 14 June 1995

FAROE ISLANDS: Act No. 177, 23 June 1956. New bill in 1988

GROUND/GESTATIONAL LIMITS

Up to 12 weeks:

- On request

Second trimester:

- Risk to life of woman
- Risk of 'severe deterioration of woman's physical or mental health'
- If pregnancy, childbirth or care of the child entails a risk of deterioration of the woman's health on account of an existing or potential physical or mental illness or as a consequence of other conditions
- Danger that the child will be affected by a serious physical or mental disorder
- Woman is incapable of giving proper care to a child due to physical or mental disorder
- If the woman is for the time being incapable of giving proper care to a child on account of the woman's youth or immaturity
- If it can be assumed that pregnancy, childbirth or care of a child constitutes a serious burden to the woman which cannot otherwise be averted
- When pregnancy resulted from a criminal act

FAROE ISLANDS:

Up to 16 weeks:

- Risk to life of woman
- In case of violation of sexual liberty
- Severe risk of fetal malformation

REGULATIONS/CONDITIONS

- A woman has to apply for an abortion to a physician, to the community in Copenhagen or Frederiksberg or to the district. If it appears that the above mentioned conditions for a legal abortion are present, the physician/district/community will refer the woman to a hospital.
- The abortion may only be performed by a physician in a district hospital, a hospital that is a member of the Copenhagen Hospital Association, or a clinic attached to the hospital.
- There is one or more committees of four people within each district (and community of Copenhagen and Frederiksberg) to authorize abortions to minors; and to women who are not in a position to understand the significance of the procedure (on account of a mental disease, deficiency or seriously weakened health condition, or other reason). These committees also authorize abortions after 12 weeks of pregnancy;
- A woman does not need authorization, even after the 12th week of pregnancy, in case of risk to her life or to her physical or mental health.
- The risk to a woman's life or to her physical or mental health should be based solely or principally on circumstances of a medical character.
- Consent by the person exercising parental authority or the guardian is required for unmarried minors (under 18). Where this is justified by the circumstances, the committee may refrain from requiring the consent. Also, the committee may authorize an abortion even if the consent has been refused. The decision of the committee may be submitted to the board of appeal by the woman or the person exercising parental authority.
- Possibility of dispensation of parental consent for minors – e.g. in cases of religious minorities

FAROE ISLANDS:

- Parental consent required for minors (under 18)
- In case of marriage: consent required from the husband

COST

None, part of the public health system

Since 2004 abortion for non-residents is allowed, but they have to pay for the abortion. Abortion for non-residents is not a part of the public health system.

FAROE ISLANDS:

The woman stands in for all the costs

DISPARITY IN THE APPLICATION OF THE LAW:

No disparity

COMMENTS:

- *Local hospitals are obliged to receive all women wanting abortion up to the first trimester*
- *Abortion for non-residents is not allowed unless they have some special relationship with Denmark*

FAROE ISLANDS

- *If a woman wants an abortion for other reasons than the above mentioned she has to make an application to The National Council for the Unmarried Mother and Her Child*

ESTONIA
Eesti Seksuaaltervise Liit (ESTL)
estl@amor.ee
www.amor.ee

LEGISLATION:

Abortion was legalised in the Soviet Union in 1955. The Estonian Ministry of Social Affairs issued decrees in 1992 and 1993 setting new criteria and also regulating abortions performed in private clinics. A law on the termination of pregnancy and sterilization was adopted at the end of 1998 by the Estonian Parliament. In 2006–2007, there is a plan to amend the current law.

GROUNDINGS/GESTATIONAL LIMITS:

Up to 11 weeks of pregnancy:

- on the woman's request

Up to 21 weeks of pregnancy:

- If the pregnancy endangers the woman's health
- If the child is likely to have serious mental or physical disorders
- If the woman's illness or state of health prevents her of taking care of the child
- If the woman is aged under 15 or over 45

REGULATIONS/CONDITIONS

- Consultation with a doctor (gynaecologist or family doctor) is required. Counselling has to address issues of the biological and medical nature of termination of pregnancy, related risks and possible complications.
- After the 11th week of pregnancy, the reason for the abortion has to be stated in writing. This document has to be signed by another doctor and/or social worker.
- Abortion can only be performed by a gynaecologist in a licensed health care institution and only in a hospital with a gynaecology department after the 11th week of pregnancy.
- All pregnancy terminations have to be registered in the Pregnancy Termination Database (separately from spontaneous abortions).
- During three months after the abortion, hormonal contraception is subsidized to a larger extent than in other circumstances.

COST:

The cost of an abortion is determined by a regulation of the Minister of Social Affairs and is being adjusted on a regular basis. The Health Insurance Fund subsidises the cost for women who are insured. A woman has to pay approximately one third of the total cost.

DISPARITY IN THE APPLICATION OF THE LAW:

The law has come to be interpreted freely, and in practice a woman can get an abortion if she so wishes.

COMMENTS:

- *It is believed that no illegal abortions are performed in Estonia*
- *Since 2005, medically induced termination of pregnancy in the first trimester on woman's request is available. Before 2005, only surgical method (vacuum aspiration, usually followed by curettage) was available. The cost is the same as that of surgical abortion. Medically induced abortion can be used up to the 63rd day of pregnancy.*

FINLAND

Väestöliitto

central.office@vaestoliitto.fi

www.vaestoliitto.fi

LEGISLATION

Dissatisfaction with the 1950s laws (Law of 1 June 1950) led to the enactment of the Abortion Act of 1970 (Law 239, 24 March 1970);

Law N° 564, 19 July 1978; Law N° 572, 12 July 1985; Law N° 328, 2001

GROUND/GESTATIONAL LIMITS

No Limit:

- Risk to woman's life

Up to 12 weeks:

- If continuation of the pregnancy or delivery would endanger the life or health of the woman on account of a disease, physical defect or weakness in the woman.
- If the delivery or taking care of the child would be a substantial burden. The burden can be of any kind.
- If a disease, mental disturbance or other comparable cause, affecting one or both parents, seriously limits their capacity to care for the child
- Risk to mental health of woman
- Rape or other sexual crime
- If the woman is aged under 17 or above 40
- If the woman already had four children
- Risk of malformation

Up to 20 weeks:

- Risk to physical health of woman
- If the woman is younger than 17

or any other reason accepted by the National Board of Medico-legal Affairs

Up to 24 weeks:

- If a major fetal malformation has been detected by reliable methods

REGULATIONS/CONDITIONS

- Abortions can only be performed in hospitals
- Compulsory contraceptive counselling
- If the woman is incapable, on account of a mental disease, mental retardation or mental disturbance, of making a valid request for the termination of pregnancy, the operation may be performed with the consent of her guardian or a specially appointed trustee.

Up to 12 weeks pregnancy:

- Authorization only from the doctor performing the abortion is needed:
 - if the woman is under 17 years
 - If the woman is over 40 years
 - if the woman has already given birth to four childrenIn those cases, a woman does not need to give a specific reason for the abortion
- Authorization of 2 doctors is needed (or in other words: an additional authorization from a doctor other than the one performing the abortion):
 - if particular circumstances, pregnancy, labour and caring for a child would be a considerable burden to the woman
 - if the pregnancy is a result of rape
 - if the partner of the woman has an illness that reduces the ability to care for a child
 - if continuing the pregnancy would endanger the physical health or life of the woman

Up to 20 weeks:

- Authorization of the National Board of Medico-legal Affairs required for second trimester abortions

The abortion shall be carried out in a hospital which has been approved for the purpose by the National Board of Health.

COST

Abortion is free of charge under national health insurance but women must pay hospital fees of € 66-112 (US \$ 85-145).

DISPARITY IN THE APPLICATION OF THE LAW:

The law has come to be interpreted freely, and in practice a woman can get an abortion if she so wishes.

COMMENTS:

- *The implementation of this law is regarded as highly effective and illegal abortion is rare*
- *State hospital provision for abortion is supplemented by out-patient procedures*

FRANCE

Mouvement Français pour le Planning Familial (MFPF)

mfpf@planning-familial.org

www.planning-familial.org

LEGISLATION

Law No 588, 2001

GROUNDINGS/GESTATIONAL LIMITS

Up to 12 weeks

- If the woman judges to be in a 'state of distress' because of her pregnancy.

No limit:

- If continuation of pregnancy poses a serious risk to the health of the woman
- If a strong probability exists that the expected child will suffer from a particularly severe illness recognized as incurable

REGULATIONS/CONDITIONS

- The woman must consult a doctor and minors are also required to seek advice from a social worker. If the woman still desires to terminate the pregnancy, she should renew her request in writing, no earlier than one week from the time of the first request. Should the one week waiting period cause the 12-week period of pregnancy to be exceeded, the doctor may accept the renewed request as early as two days after the initial request.
- Although minors need to have the consent of their parents or their guardian, they can obtain an exemption if they want to keep it a secret. In this case, she needs to be accompanied by an adult of her choice.
- For a second trimester abortion, 2 doctors (one ob/gyn and one doctor chosen by the woman) and a psychologist or social worker are required to review the request for abortion.
- The limit for a medical abortion is 5 weeks. Since 2004, a medical abortion can also be performed outside hospitals, by a doctor in private practice (decree n°796, May 2002 and n° 636, July 2004)
- Post abortion counseling on contraceptives should be proposed to minors.
- Conscientious objection provision permits professionals to decline involvement in procedures, but they are required to inform the patient without delay (during the first appointment at the latest) and provide referral. (Art. 2212-2,-8)
- Each public hospital medical consultant must accept the provision of the voluntary interruption of pregnancy (VIP) if this has been decided by the board of governors in order to comply with the mission of the public health services. He is entitled to refuse to practice it; however he must not oppose colleagues who do so.

COST

- The price ranges from € 190-274 (US\$ 246-354)
- A medical abortion (RU-486) costs € 257 (US\$ 332) in hospital and € 191 (US\$ 247) outside hospital (reimbursed for 70 % of the price)
- Private insurances cover the difference
- Women are reimbursed for 80% of the price. Women under 18 or women living in conditions of poverty can receive a 100% reimbursement

DISPARITY IN THE APPLICATION OF THE LAW:

- *Abortion is not performed in all hospitals*
- *Women often cannot choose the method (medical or surgical)*
- *Different attitudes of doctors in dealing with minors who are not able to produce written parental consent*
- *Medical abortion performed outside hospitals is not yet accessible everywhere*

COMMENTS:

- *In general there are not enough beds available in hospitals, even though the situation varies from one city to the other and some abortion services are completely closed during summer*
- *Among the new generation of doctors, less and less professionals want to perform abortion*

GEORGIA
Association HERA XXI (FPAGEO)
hera@caucasus.net

LEGISLATION

Law on Healthcare and its provisions concerning abortion (Chapter XXVIII, Family Planning, Articles 139 and 140), 21 July 2000; effective October 2000

GROUNDINGS/GESTATIONAL LIMITS

Up to 12 weeks:

- On request

Beyond 12 weeks:

- On certain medical or social grounds

REGULATIONS/CONDITIONS

- The medical and social grounds are not specified in the law. The Ministry of Labour, Health Care and Social Security is responsible for defining these.
- The written consent of the woman is necessary before the abortion
- Pre-abortion counselling should be done 3 days prior to abortion.
- Abortion is only permitted if performed by a doctor in a licensed medical facility.
- Parental consent required for minors (under 16 years)
- The law states that preserving the foetus should be the main outcome of the pre-abortion counselling; however, the woman retains the final say.

COST

State hospitals: GEL 40-150 (US\$ 23-85)

DISPARITY IN THE APPLICATION OF THE LAW:

COMMENTS:

- *Abortion facilities are available all over the country*
- *Illegal abortion is still performed in Georgia. Statistics are not available*
- *Abortion is still one of the most popular methods to avoid unwanted pregnancy and public information on availability of abortion services is high*
- *Advertisement of abortion is prohibited.*
- *The protection of women's health via reducing the number of abortions is the state's priority.*
- *A new law on Artificial Termination of Pregnancy has been drafted. It proposes different gestational limits:*
 - *First stage: first 12 weeks of pregnancy*
 - *Second stage: from 12 to 22 weeks (inclusive)*
 - *Third stage: beyond 22 weeks*

GERMANY

PRO FAMILIA Bundesverband

international@profamilia.de

www.profamilia.de

LEGISLATION

Law 27th July, 1992. Changed by Law 21st August 1995. Decision by Federal Constitutional Court 28th May, 1993

GROUNDINGS/GESTATIONAL LIMITS

Up to 12 weeks from conception:

- If the woman declares to be in a state of distress (in practice: on request after counselling)
- Rape or other sexual crime

Up to 22 weeks from conception:

- To avert danger to life of woman
- To avert the danger of a grave impairment of the physical or emotional state of health of the pregnant woman (and the danger cannot be averted in another way which is reasonable for her)
- Note: the mental health risks for the woman include the ones caused by fetal malformation, and general health risks caused by adverse socio-economic conditions

REGULATIONS/CONDITIONS

- Counselling compulsory for abortion on request
- Counselling not compulsory for medical cases and in case of rape or other sexual crime
- Compulsory waiting period after counselling (3 days; for abortion on request)
- Second written medical opinion, in addition to the one of the doctor performing the abortion (medical reasons, rape or other sexual crime)
- "The counselling serves to protect unborn life"

COST

- Fully covered by statutory health insurance or civil servant health assistance (over 90% of population) in cases of rape or other sexual crime or medical grounds
- For abortion on request the cost is covered partially - e.g. for medical information and ascertaining of gestational age, but not for the abortion itself and anaesthesia - by statutory health insurance or civil servant health assistance
- For women whose income is below a certain level, the state covers any further costs

DISPARITY IN THE APPLICATION OF THE LAW:

While the law explicitly requires a network of abortion counselling facilities with different ideological orientation, in some areas women can in practice only choose between a church-related facility and another one run by local or state authorities (which are legally obliged to be ideologically neutral)

COMMENTS:

- *Abortion is partly regulated under the Penal Code. In addition, further regulations are laid down in the so called Schwangerschaftskonfliktgesetz. In some regions and among societal groups there is still an adverse climate towards abortion in general*

GREECE

Family Planning Association of Greece (FPAG)

stvoskakisfpag@hotmail.com

LEGISLATION

Law No 821 14 October 1978; Law No 1609 28 June 1986

GROUNDINGS/GESTATIONAL LIMITS

Up to 12 weeks:

- On request

Up to 19 weeks:

- Rape, sexual intercourse with a minor, incest, or intercourse with a woman who is incapable of resisting

Up to 24 weeks:

- If the foetus is suffering from a serious abnormality which would result in a serious congenital defect in the child

No limit:

- An unavoidable risk to life of woman
- An unavoidable risk to of serious and permanent harm to the woman's physical or mental health

REGULATIONS/CONDITIONS

- If the woman is a minor (under 16 years), the consent of one of the parents or the person having custody of the woman is necessary
- The abortion has to be carried out by an obstetrician or gynaecologist, assisted by an anaesthetist in a comprehensive care unit
- A medical certificate is needed in case of abortion on medical grounds

COST

- State hospitals: free of charge
- Private clinics: between € 175 and 235 (US\$ 226-304)

DISPARITY IN THE APPLICATION OF THE LAW:

None

COMMENTS:

Most abortions are performed privately in outpatient clinics

HUNGARY

Magyar Család- és Nővédelmi Tudományos Társaság

arpad.meszaros@office.ksh.hu

www.szexinfo.hu

LEGISLATION

Act LXXIX of 17 December 1992 on 'the Protection of the Life of the Fetus'. Latest modification: June 2000.

GROUNDINGS/GESTATIONAL LIMITS

Up to 12 weeks

- On request with taking special conditions into consideration such as:
 - 'Grave crisis situation'
 - Severe risk to health of woman
 - Rape or other sexual crime
 - Serious fetal impairment

Up to 18 weeks:

If any of the above conditions apply and:

- If the woman has no or limited legal capacity or:
- If the woman did not learn of the pregnancy for reasons beyond her control (such as an illness, medial error, or failure of an authority)

Up to 24 weeks:

- If the likelihood of genetic or congenital defect of the fetus is greater than 50%

No limit:

- Severe medical risk to life of woman
- If the fetus would not be able to survive after birth

REGULATIONS/CONDITIONS

- Parental consent required for minors (under 18)
- Compulsory counseling to be attended twice (except for abortions performed on medical grounds)
- Compulsory waiting period: 3 days after 1st counseling session, however not longer than eight days before abortion takes place (the second counseling session takes place right before the procedure)
- 'Grave crisis situation' is defined by the woman herself and is thus not discussed during application as it is considered a private matter.
- In order to obtain an abortion, a woman must first fill out a written application (except for medical indications) in person at the Service for the Protection of Families.
- Abortions may only be performed by ob/gyn specialists in approved medical facilities.
- Medical reasons for abortion require the joint opinion of two specialists

COST

- Abortion is covered by the Health Insurance Fund if it is carried out for medical reasons and the applicant is insured; if the woman is a minor living in a state institution, if she receives state financial support on a regular basis and if the pregnancy results from a crime
- Up to HUF 26,193 (US\$ 117) for the others, with fees in accordance with the type and amount of public assistance women receive

DISPARITY IN THE APPLICATION OF THE LAW:

None

COMMENTS:

- *In practice abortion is readily available*
- *Since the law was passed there has been a slight decrease in the number of abortions*

ICELAND
Fræðslusamtök um kynlíf og barneignir (FKB)
fkf@mmedia.is
www.mmedia.is/fkf

LEGISLATION

Law effective since 1975

GROUNDINGS/GESTATIONAL LIMITS

As early as possible, preferably before end of 12th week, but no later than 16th week:

- On medical grounds:
 - Risk to life of woman
 - Risk to physical health of woman
 - Risk to mental health of woman
 - Rape or other crime
 - Risk of fetal malformation
- On social grounds (beyond the control of the woman):
 - If because of youth or mental development, the woman cannot take care of a child in a satisfactory manner
 - If a woman has given birth to many children at short intervals
 - If the woman endures a difficult domestic situation (e.g. large family or serious bad health of others in household)
 - Other reasons fully comparable with those mentioned above

Beyond 16 weeks:

- Unmistakable medical reasons
- If the life and health of the woman are endangered by continued pregnancy or child birth
- If the chance of malformation, hereditary defects or damage to the fetus are great

REGULATIONS/CONDITIONS

- For abortions beyond 16 weeks, a written authorization of a committee is needed.
- Reports need to be written by 2 medical doctors, or by one social worker and a medical doctor before abortion can take place
- If the request of abortion is rejected, it goes to the abortion committee
- If a woman is younger than 16 or has been declared incompetent, her parents or a guardian shall participate in an application with her unless special reasons oppose it.
- Abortion should only be performed by medical doctors within a hospital
- Post-abortion counselling on contraceptives is obligatory

COST

- Free of charge, it is covered by the National Health Insurance
- There are charges for the physical examination and the blood test: Krona 3,000 (US\$ 44)

DISPARITY IN THE APPLICATION OF THE LAW:

According to the law, contraceptive counselling should be provided before the woman is discharged from hospital. In reality, in the National Hospital where the majority of abortions are undertaken, the contraceptive counselling takes place before the operation when the physical examination and the blood test take place

IRELAND
Irish Family Planning Association (IFPA)
post@ifpa.ie
www.ifpa.ie

LEGISLATION

The Offences Against the Person Act, 1861, Sections 58 and 59 make abortion a criminal offence in Ireland. In 1983, article 40.3.3 was inserted into the Irish Constitution. It provides that the State shall "as far as practicable, by its laws" defend and vindicate the right to life of the "unborn".

A 1992 Supreme Court Ruling (the X case) overturned a High Court Injunction, to permit a 14 year old girl (whose life was at risk from suicide if she was forced to continue with a pregnancy resulting from rape) to travel for the purpose of having an abortion. As a result of this, a 1992 Constitutional Amendment specifically amended the 1983 Constitutional Amendment such that it could no longer be interpreted as limiting the right to travel or information.

The regulation on information (Termination of Pregnancies Outside the State) Act, 1995, provides that professional counsellors may only provide abortion information after full non-directive pregnancy counselling. This act does not limit the actions of private individuals.

A referendum held on 6th of March 2002 to further restrict abortion, was narrowly defeated. As a result the X case Court Ruling among others, stating that suicide is a ground for granting abortion, was not overturned.

GROUND/GESTATIONAL LIMITS

Real and substantial risk to life of woman which can only be avoided by the termination of the pregnancy (including the risk of suicide).

REGULATIONS/CONDITIONS

- The Supreme Court ruling in the 'X case' effectively varied the Constitution such that there is an entitlement to have an abortion when there is 'a real and substantial risk to the life of the mother'. Such a right exists within the state. An attempt in 1992 and 2002 to exclude the risk of suicide from this right, by constitutional amendment, failed
- Legislation to regulate this position and to amend the 1861 legislation is awaited, but it is unlikely to be forthcoming in the foreseeable future

COST

Travel to the UK or the Netherlands for a termination is estimated at between €800-1,200 (US\$ 1034-1551).

DISPARITY IN THE APPLICATION OF THE LAW:

No abortions known to have been carried out and each woman would probably have to have permission from the Court

COMMENTS:

Over 6,000 Irish women travel to England to have abortions every year. Statistics on those who travel to other European Countries are not available. Although opinion polls show huge majorities in favour of relaxing the Irish abortion laws, the Government has indicated an unwillingness to legislate for the X case or to hold a referendum to repeal article 40.3.3 of the constitution. In August 2005 three women lodged a case with the European Court of Human Rights on the Irish abortion laws.

ISRAEL
Israel Family Planning Association (IFPA)
ippf@post.com
www.opendoor.org.il

LEGISLATION

Law passed in 1977, into effect in 1978

In 1980, one of the five reasons for which abortion was permitted (socio-economic or personal/family reasons) was abolished

GROUNDINGS/GESTATIONAL LIMITS

No gestational limit is set

Grounds:

- The woman is under marriage age (17) or over 40
- Rape or other sexual crime
- Pregnancy result of a relationship outside marriage (any unmarried woman, single, divorced or widow, is legally entitled to an abortion)
- The child is likely to have a physical or mental defect
- Risk to life of woman
- Continuing pregnancy is likely to cause the woman physical or mental harm

REGULATIONS/CONDITIONS

- The woman has to file a written request for an abortion to a special committee for approval.
- Should the members of the Committee be of the opinion not to give the woman a positive response, it will inform the woman to appear before the Committee to submit her reasons for the application.
- Abortion has to be performed at a recognized medical institution
- A minor does not require the approval of her representative

COST

- Free of charge for women under 18 and for abortion on medical grounds
- ILS 1125 (US\$ 265) for abortion on the grounds of rape or another sexual crime and for abortion on the grounds of risk of fetal malformations
- In case of lack of funds on the woman's side, the welfare agencies cover the cost, following referral of Israel Family Planning Association
- Illegal abortions cost from ILS 3150 (US\$ 742) to ILS 5400 (US\$ 1,272)

DISPARITY IN THE APPLICATION OF THE LAW:

The majority of the abortions in Israel are carried out within the framework of the existing law

COMMENTS:

Through their 'Open Door' sexual counselling centres the FPA provides new immigrant women from former Soviet Union wishing to terminate their pregnancies with counselling and access to safe and legal abortion services

ITALY
**Unione Italiana dei Centri di Educazione
Matrimoniale e Prematrimoniale (UICEMP)**
uicemp@tin.it
www.uicemp.org

LEGISLATION

Law 194, 22 May 1978

GROUNDINGS/GESTATIONAL LIMITS

Up to 90 days (between 12 and 13 weeks)

- If continuing the pregnancy, childbirth or motherhood would seriously endanger the woman's physical or mental health
- The woman's state of health
- Economic, social or family circumstances
- Circumstances in which conception occurred
- Probability that the child would be born with abnormalities or malformations

Over 90 days:

- If the pregnancy or childbirth entails a serious threat to the woman's life
- Risk to physical health of woman
- Risk to mental health of woman
- Risk of fetal malformation
- Rape or other sexual crime

REGULATIONS/CONDITIONS

- A certificate from a fully authorized medico-social agency, a public counselling centre or a physician of the woman's choice is needed.
- Compulsory waiting period of at least 7 days (if abortion is found not to be urgently required)
- The consent of the person exercising parental authority or her guardian is needed from woman under 18. There are exceptions. Consent is not needed in case of a serious threat to the health of the minor. Or if, during the first 90 days, there are serious grounds rendering it impossible or inadvisable to consult these persons, or if those persons refuse their consent, then the magistrate responsible for matters of guardianship decides. Or if there is an imminent threat to the life of the woman.
- Parental or judge's consent required for minors (under 18 years)
- Pre-abortion counselling (not compulsory)
-

COST

Free of charge for all women, including immigrant women, foreigners and women without legal resident's permit

DISPARITY IN THE APPLICATION OF THE LAW:

In some Regions (mainly in Southern Italy) and in rural areas, there may be disparities between the law and its application. In these areas it can be very difficult for a minor to have an abortion without her parents' consent because the local minor's judge would not give his/her consent to abortion. Furthermore the fact that people know each other and are known by hospital staff encourages use of illegal abortion

COMMENTS:

- *There is considerable conscientious objection among health personnel on religious, moral and social grounds. Illegal abortions are still numerous*
- *In some Italian regions (mainly northern and central), abortion is fairly widely accessible in spite of conscientious objection by gynaecologists. In southern regions there are still problems mainly related to conscientious objection and long waiting lists*

KAZAKHSTAN
Kazakhstan Association on Sexual and Reproductive Health (KMPA)
center.kmpa@alnet.kz

LEGISLATION

Order N°687 of the Ministry of Health, July 2001: "On medical reasons and regulations of abortion in the Republic of Kazakhstan"; Law on reproductive rights, signed in June 2004

GROUNDS/GESTATIONAL LIMITS

Up to 12 weeks:

- On request

From 12 weeks up to 22 weeks:

- Social grounds which include:
 - Death of husband during pregnancy
 - Confinement of woman or her husband
 - Unemployment of woman or husband
 - If the woman is unmarried
 - Deprivation or limitation of parental rights
 - Rape
 - If the woman has refugee or forced migrant status
 - Disabled child in the family
 - Divorce during pregnancy
 - 4 or more children in the family
- Fetal malformation

No limit:

- If there are medical indications threatening the life of the pregnant woman, with her consent

REGULATIONS/CONDITIONS

- Consultation with a doctor required
- Clinical laboratory tests
- Parental consent required for minors (under 16)
- Abortions can only be performed in hospitals having a state license, operative unit, and a department of intensive care

COST

- The state subsidizes abortions for medical and social reasons that are performed in medical and preventive institutions of the state health care system.
- Private practitioners: KZTg 5000 (US\$ 41)

DISPARITY IN THE APPLICATION OF THE LAW:

COMMENTS:

Abortion is available all over the country but illegal abortions still exist and contribute to the maternal mortality ratio.

KYRGYZSTAN

Reproductive Health Alliance of Kyrgyzstan (RHAK)

rhak@infotel.kg

www.rhak.kg

LEGISLATION

Soviet Decree of 23 November 1955; Decree in 1982; Order of 31 December 1987. Kyrgyzstan did not introduce a new abortion law since the independence from the Soviet Union but some amendments to the social grounds for the interruption of pregnancy were made by the Kyrgyz Ministry of Health Care on 10 July 2002.

GROUNDINGS/GESTATIONAL LIMITS

Up to 12 weeks:

- On request

Up to 22 weeks:

- Social and any other ground
- On medical grounds

REGULATIONS/CONDITIONS

A woman must undergo a blood and DNA test

According to the Law of the Kyrgyz Republic on Reproductive Rights (Article 12) «a woman can not be forced by anyone to pregnancy, abortion, or delivery. Such actions are qualified as violence against women».

COST

Women are required to pay for the abortion themselves. There is government funding only in exceptional cases. The price of a mini-abortion ranges from soms 119-200 (US\$ 3-5) in rural areas and about soms 500 (US\$ 12) in urban areas. Other abortions cost soms 210 (US\$ 5) in rural areas and between soms 500 and 1000 (US\$ 12-24) in urban areas. In private clinics the cost of an abortion may go up to soms 1500 (US\$ 36) depending on the gestational period.

DISPARITY IN THE APPLICATION OF THE LAW:

COMMENTS:

Women in rural areas do not have access to all medical services because there are no ambulances, specialized doctors or medical equipment. In addition, people must pay for these services, which are unaffordable for the vast majority of women. Post abortion counselling is not provided and medical abortion is not available because of the high costs

Also, one of the problems everywhere (in both rural and urban areas) is that there is no safe abortion. Manual Vacuum Aspiration (MVA) has not been introduced in Kyrgyzstan, except for the state capital where you can find 1-2 private clinics that are just starting to use MVA.

LATVIA

Latvijas Ģimenes Plānošanas un Seksuālās Veselības
Asociācija "Papardes Zieds" (LAFPSH)

lfpa@mailbox.riga.lv
www.papardeszieds.lv

LEGISLATION

A 'Law of Sexual and Reproductive Health' was adopted by the parliament on January 31, 2002. The law determines the grounds for the termination of pregnancy. The law entered into force on July 1, 2002.

GROUND/GESTATIONAL LIMITS

Up to 12 weeks:

- On request
- In case of rape

Up to 22 weeks:

- Special medical grounds

REGULATIONS/CONDITIONS

- Parental consent required for minors (under 16)
- It is necessary to obtain a decision of the Orphans Court (Parish Court) in order to terminate the pregnancy if there is any dispute between a patient younger than 16 years and her parents or her guardian regarding the preservation of the pregnancy
- Abortions can only be performed in government medical centres and private medical centres under contract with the health insurance
- The Order of the Ministry of Health "Written information on the moral aspects of pregnancy termination" defines that before the abortion a woman must be informed on the possible medical complications and possibilities to preserve the life of the baby-to-be. A gynaecologist must advise the woman after the abortion on family planning and must recommend adequate contraception.

COST

From LVL 40 (US\$ 74) to very differing prices depending on the clinic (private, etc)

DISPARITY IN THE APPLICATION OF THE LAW:

COMMENTS:

Abortion rates are very high even though continuously declining from 30.8 per 1000 women of reproductive age in 2001 to 23.2 per 1000 in 2004. There are 67.4 abortions per 100 live births. Although the overall number of abortions is declining, the number of induced abortions among 15 – 19 years old remains almost the same.

LITHUANIA

Šeimos Planavimo ir Seksualinės Sveikatos Asociacija (FPSHA)

lithfpa@takas.lt

www.spa.lt

LEGISLATION

Abortion has been legal since a governmental decision by the Soviet Union in November 1955. A November 1987 decision by the Ministry of Health of the Soviet Union extended the grounds for the interruption of pregnancy of more than 12 weeks to non-medical grounds. Since 1994, abortion is regulated by a decree of the Lithuanian Minister of Health which replaced the former Soviet law, and restricted again the grounds for abortion beyond 12 weeks of pregnancy

GROUNDINGS/GESTATIONAL LIMITS

Up to 12 weeks:

- On request

Up to 22 weeks:

- Risk to life of woman
- Risk to physical health of woman
- Risk to mental health of woman
- Risk of fetal malformation

REGULATIONS/CONDITIONS

- Abortions must always be performed in the gynaecological department of a hospital. Termination of pregnancy of up to 5 weeks may also be performed at outpatient health care institutions.
- Prior to admission to the gynaecology department, the woman must go to an ambulatory obstetrics-gynaecology consultation. During this consultation, and before a referral is issued, the woman (and her husband, if applicable) are counselled as to the potential physical and psychological risks of abortion and pregnancy. This information is provided by the consulting physician. In cases of first pregnancy, both the consulting OB/GYN and the chief of the consultative clinic provide this information. The Abortion Decree mentions that it is desirable to have a psychologist participate in this counselling.
- The woman is required to inform the hospital in writing of her decision to terminate the pregnancy prior to the abortion.
- Consent of the husband is desirable, although not mandatory.
- The written agreement from one of the parents, foster-parents, guardian or person who actually nurture the child is needed for pregnancy interruption for juveniles under 16 years old, and from 16 to 18 years old is desirable
- Examination of the woman required (blood test, cervical smear)

COST

- LVL 115 (USD 43) for surgical abortion in public clinics, more expensive in the private ones
- Abortions performed due to medical indications are covered by the Compulsory Health Insurance Fund.

DISPARITY IN THE APPLICATION OF THE LAW:

COMMENTS:

- *There is no abortion law, only a decree by the Minister of Health. This decree could easily be voided or altered by any Minister of Health holding more restrictive views on abortion.*
- *Regulations for abortion are liberal*
- *Abortions are performed by qualified medical doctors, and there are only few deaths related to abortion*
- *The government, in its policies, should give more attention to family planning services, and evaluate the potential socio-economic benefits of such a policy change*
- *There is a need to cover abortion expenses for women with a low income. For them, access to abortion is financially limited.*
- *Abortions are not performed in Catholic hospitals. Some Catholic doctors even refuse to refer women for abortion. Other doctors, however, refer the women to clinics where these operations are performed.*

LUXEMBOURG

Mouvement Luxembourgeois pour le Planning Familial
et l'Éducation Sexuelle (MLPFES)

plannlux@pt.lu

www.planningfamilial.lu

LEGISLATION

Law of 15 November 1978 on sexual information, illegal abortion and termination of pregnancies, amending Penal Code Act 348-353

GROUNDINGS/GESTATIONAL LIMITS

Up to 12 weeks:

- If continuing pregnancy or childbirth risk to endanger the physical or mental health of the woman
- If there is a serious risk that the child will be born with a serious disease (physical malformation or important mental disorder)
- Rape or other sexual crime

No limit:

- Written acknowledgement of 2 doctors asserting that there is a serious threat to the life or health of the woman or child to be born

REGULATIONS/CONDITIONS

- Consultation required with a gynaecologist or obstetrician, who is obliged to give information on health risks associated with the medical intervention
- Compulsory waiting period (at least 1 week) following the consultation
- The woman has to give her consent in writing (except in cases where her life is at risk)
- If the woman is a minor or unable to manifest her will, then the written consent from her legal representative is obligatory
- Prior residency of three months required (except when the woman's life is at stake)
- The risk associated with the pregnancy needs to be certified by a doctor
- Abortion must be performed in a hospital or other approved facility
- Medical doctors or staff cannot be forced to perform an abortion if they object (except in case of imminent threat to the woman's life)

None of the above conditions/regulations apply if a woman's life is at risk

COST

Women are reimbursed by the National Health Insurance, provided that they are insured and that the abortion is performed in Luxembourg.

DISPARITY IN THE APPLICATION OF THE LAW:

Sometimes, the cost may be much higher than the official fee

COMMENTS:

Abortion is still regulated under the Penal Code Act

Due to its catholic roots, part of the society still rejects abortion. Despite of its legal basis, it remains a taboo. As a consequence:

- *Counselling before abortion is either absent or not effective (except in the FPA)*

- *Information on abortion services is not available on a large scale.*
- *General statistics are not available.*

For several reasons, (conscientious objection, absence of social grounds in the law, written consent of parents for minors) many women still do travel to the Netherlands or Belgium.

According to the law, abortion can be performed by general practitioners but the regulations for "mifegyne", available since 2001, allows the use of medical abortion only in hospitals and clinics with a gynaecologist prescription. The Luxembourg FPA cannot perform it.

MACEDONIA (FYR)
Health Education and Research Association (HERA)
drasko.kostovski@hera.org.mk
www.hera.org.mk

LEGISLATION

Law on Termination of Pregnancy June 1972, Amended May 1976 (Published in Official Journal of Socialist Republic of Macedonia)

GROUNDINGS/GESTATIONAL LIMITS

Up to 10 weeks

- On request

10 weeks and over

- Risk to life and health of women
- Risk to physical or mental health of child to be delivered
- Rape or other criminal act such as rape, abuse of disabled persons, abuse of one's position, misleading or incest
- Socio-economic grounds

REGULATIONS/CONDITIONS

- Consultation with a gynaecologist
- Abortion must be carried out by a gynaecologist in a hospital or authorized health-care facility
- Parental or guardian consent required for minors under 18
- Special authorization by a commission (consist of gynaecologist-obstetrician, specialist in internal medicine and social worker or nurse) for termination of pregnancy after 10 weeks is required
- The women can appeal to the Commission of Second Instance if Commission of First Instance rejects her request

COST

In accordance with the Law on Health Insurance, termination of pregnancy, if proven not to harm the health of the woman, is not considered as a service covered by the obligatory health insurance, thus the costs for this medical intervention must be entirely covered by the patient, irrespectively whether the patient is insured or not. Abortion costs are thus not covered by the National Health Insurance

- State hospitals: US\$ 65–95
- Private hospitals: US\$ 170–185

DISPARITY IN THE APPLICATION OF THE LAW:

No data

COMMENTS:

- *The provisions of the Law on termination of Pregnancy clearly show that protection of women's health is paramount, both in terms of protecting the health and life of women, as well as protecting the personality and the character of women.*
- *The law on Termination of pregnancy has been enacted for 30 years which on the other hand*

require clear need for its modernization as bringing it in line with the current legal language.

- *Over the last decade the number of registered abortion in Macedonia has continuously decreased. The drop in abortion rate may be a result of low registration, especially in the period of privatization in the health sector and opening of gynaecology clinics which are not covered by the system of regular reporting of services performed, rather than of raised awareness of the population in terms of accepting more rational and more humane methods of family planning, from the health care perspective*

MOLDOVA
Societatea de Planificare a Familiei din Moldova
fpa@moldova.md
www.iubire.md

LEGISLATION

Abortion legal since 1956. The new law on reproductive health and family planning N°185-XV from 24 May 2001 is based on previous legislation.

GROUNDINGS/GESTATIONAL LIMITS

Up to 12 weeks:

- On request

Up to 21 weeks:

- Social, medical and legal grounds

Up to 28 weeks

- In cases of congenital syphilis
- severe foetal malformations
- Danger to health and life of woman
- Socio-economic grounds

REGULATIONS/CONDITIONS

- Parental consent required for minors (under 16)
- Up to 12 weeks of pregnancy, abortions can be performed in the State clinics' in-patient department. Up to 8 weeks of pregnancy, abortions are also possible in a polyclinic (out-patients' clinic).
- The grounds for an abortion up to 21 and 28 weeks are to be examined by a special legal committee.

COST

MDL 325 (US\$ 26) up to the 12th week, MDL 90 (US\$ 7) for local anaesthesia, MDL 100 (US\$ 8) for general anaesthesia, to be paid by the women themselves to the hospital or polyclinic.

Mifepristone is registered for medical abortion and costs 325 (US\$ 26) for a pill; Misoprostol – MDL 25 (US\$ 2) for a pill.

Since 2005, abortions on social and medical indications have been covered by the insurance system.

DISPARITY IN THE APPLICATION OF THE LAW:

In the second trimester it's very difficult, sometimes impossible, to obtain an abortion. This contributes to the increase to the illegal abortion rate.

Many women with social or medical indications for abortion and adolescents have to pay for the services.

COMMENTS:

The NETHERLANDS
Rutgers Nisso Groep (RNG)
adubbeldam@rng.nl
www.rutgersnissogroep.nl

LEGISLATION

Law on termination of pregnancy, 1 May 1981;
Decree of 17 May 1984 laying down provisions for the implementation of the law.

GROUNDINGS/GESTATIONAL LIMITS

Up to thirteen weeks:

- On request

Up to fetal viability:

- If the pregnant woman attests to a state of distress, to be jointly defined by the woman and the doctor

REGULATIONS/CONDITIONS

- In the law, no gestational limits for an abortion are set. But the fetal viability is mentioned as a limit. Fetal viability is set at 24 weeks. However, clinics stick to 22 weeks, keeping a margin of two weeks.
- Parental or guardian's consent required for minors (under 16 years)
- Compulsory waiting period (5 days) (except to avert an imminent danger to the woman's life or health)
- A physician is obliged to determine whether the woman took the decision freely
- An abortion may be performed only by a physician in a licensed hospital or clinic
- The hospital or clinic has to ensure that an adequate opportunity is made available for providing the woman with responsible information on methods of preventing unwanted pregnancies

COST

Women are reimbursed (except those living abroad)

DISPARITY IN THE APPLICATION OF THE LAW:

COMMENTS:

The law is very liberally interpreted. Illegal abortion is almost non-existent. Most abortions are performed in non-profit clinics

NORWAY

Norsk forening for seksualitet, samliv og reproduktiv helse (NSSR)

post@nssrr.org

www.nssr.org

LEGISLATION

Act N° 50, 13 June 1975, "Relating to the Termination of Pregnancy"

Law N° 66, Sec 1-4, 16 June 1978

GROUNDINGS/GESTATIONAL LIMITS

Up to 12 weeks:

- On request

After the 12th week:

- If the pregnancy, childbirth or care of the child may result in unreasonable strain upon the physical or mental health of the woman
- If the pregnancy, childbirth or care of the child may place the woman in difficult circumstances
- If there is a major risk that the child may suffer from a serious disease
- Rape or other sexual crime
- If the woman is suffering from severe mental illness or is mentally retarded to a considerable degree

After the 18th week:

- Only for extremely severe reasons; if there is reason to assume that the foetus is viable, authorization may not be granted.

REGULATIONS/CONDITIONS

- For second trimester abortions, women's applications have to be submitted to a Board of two doctors. If the committee denies the approval, there is the possibility for the woman to apply to another committee
- If the woman is younger than 16, the person exercising parental authority or the guardian shall be given an opportunity to express his/her views, unless there are particular reasons to the contrary. If the minor does not get the parental or guardian's consent, the abortion may only be performed with the consent of the county medical officer.
- The doctor consulted is under obligation to inform the woman about how the abortion is carried out, and possible complications
- If a woman decides not to have an abortion, her doctor is obliged to notify her that she can ask for information about the support provided by society. The woman is not obliged to ask for this information, but when she signs the request for abortion she has to confirm that she has been notified that she can get more information about the support in society.
- Women have also the right, if they request it, to receive counselling on contraceptive methods, at the time of abortion
- When assessing a request for an abortion on the first three grounds (second trimester) mentioned above, account must be taken of the woman's overall situation, including the extent to which she can provide the child with satisfactory care. Major considerations must be given to the woman's own assessment of her situation.
- The conditions for authorizing an abortion become more stringent as the duration of the pregnancy increases.
- Abortions may only be performed by a physician. Beyond 12 weeks of pregnancy, abortions may only be performed in a hospital
- Where the pregnancy constitutes an impending risk to the woman's life or health, it may be terminated without regard to the legal provisions.

COST

Free of charge

DISPARITY IN THE APPLICATION OF THE LAW:

None

COMMENTS:

- *There is a conscientious objection, under which hospital staff can avoid participating in the operation itself, but cannot refuse to help pre- and post-operation*
- *The regional hospital enterprises must organise hospital services in order to make it possible at any time, for resident women, to obtain abortions*

POLAND
Towarzystwo Rozwoju Rodziny (TRR)
trr@trr.org.pl
www.trr.org.pl

LEGISLATION

'Law on Family Planning, Human Embryo Protection and Conditions of Abortion', 7 January 1993.
In January 1997, new restrictive amendments were introduced

GROUND/GESTATIONAL LIMITS

- If the pregnancy is endangering the mother's life or seriously jeopardizing her health
- If it is needed to save the woman's life or to prevent serious injury to her health
- If there is a serious and irremediable defect in the fetus
- Rape or other sexual crime (the criminal act has to be confirmed by a prosecutor)

REGULATIONS/CONDITIONS

- An abortion has to be performed by a physician in a health care establishment in the public sector
- For abortions on medical grounds, the diagnosis of two physicians other than the physician carrying out the procedure is needed. If a threat to the woman's life has to be eliminated immediately, such diagnosis is not necessary.
- The defect in the foetus needs a prenatal diagnosis established by two physicians other than the physician carrying out the procedure.

Ministry of Health Orders

- 22/01/97 on professional qualification of doctors permitted to perform an abortion or establish the risk of the woman's life or the risk of fetal malformation
- 13/02/97 on qualifications of persons other than doctors empowered to counsel a pregnant woman intending to have an abortion; establishment of list of consultants and the rules for consultations
- Doctors performing abortions outside of stated grounds are subject to 2 years imprisonment

COST

- Illegal abortion in private clinics' or private cabinets' gynaecological rooms is estimated to cost around zloty 2000-5000 (US\$ 659-1647)
- Legal abortion costs are covered by the State Health Care system.

DISPARITY IN THE APPLICATION OF THE LAW:

- *Unclear implications of the new law. The law is more restrictive in practice. There is a lot of evidence that many women were denied legal abortions to which they were legally entitled, particularly when their health is endangered. This is mainly due to the lack of adequate regulations on the medical grounds for abortion. It depends only on the doctors' position and it can be easily abused, because they are influenced by anti-choice campaigns*
- *According to the law, the government was obliged to promote family planning and to introduce sexuality education in schools. But up until 2003 this part of the law has not yet been implemented, and in fact both the knowledge and the use of contraception are low.*

COMMENTS:

- *High reliance on illegal abortions in private clinics (where even doctors who refused to perform it in a state clinic do not object anymore) or abroad, and the new phenomenon of abandonment or infanticide*
- *New amendments to the law on the physicians' profession and parallel changes in the Penal Code 1999: higher penalties for women killing their babies under post-delivery shock; reduced penalties for rapists; higher penalties for damages threatening the life of the 'conceived child', which makes doctors afraid of prenatal examinations, even those with low risk of miscarriage.*

PORTUGAL

Associação Para o Planeamento da Família (APF)

apfportugal@mail.telepac.pt

www.apf.pt

LEGISLATION

Law N° 6, Articles 139-141, 11 May 1984

Law N° 90, 30 July 1997 (amending the gestational limits in case of fetal malformation and of rape or other sexual crime)

GROUNDINGS/GESTATIONAL LIMITS

Up to 12 weeks:

- If abortion is one of the ways to avert a risk of death or grave and irreversible damage to the physical or mental health of the woman

Up to 16 weeks:

- Rape or other sexual crime

Up to 24 weeks:

- If there are substantial grounds for believing that the child would be born with a serious or incurable disease or malformation

No limit

- If abortion is the only way to avert risk of death or grave and irreversible damage to physical or mental health of the woman
- If the fetus is impracticable

REGULATIONS/CONDITIONS

- The woman must give her written consent not less than three days prior to the abortion. There is thus a compulsory waiting period (up to 3 days). In case of emergency, the prescribed time limit may be waived.
- If the woman is under 16 or is incompetent, the written consent may be provided, in order of priority, by her competent and non-separated husband, her legal representative, a competent ascendant or descendant, or in their absence, by any relative.
- Prior to the abortion, a physician other than the one performing the procedure must sign a medical certificate attesting to the existence of circumstances that render an abortion permissible. In cases of rape, the verification of circumstances depends upon evidence of criminal involvement.

COST

From € 245 (US\$ 317) to € 1000 (US\$ 1292) depending on the gestational period, and the medical facility.

DISPARITY IN THE APPLICATION OF THE LAW:

- *The law is not fully implemented in public hospitals, due to a large number of conscientious objections and to the lack of further regulations*
- *As a consequence the majority of abortions are performed illegally by doctors, mid-wives and nurses in private clinics and cabinets*

- *In a series of trials, women and professionals condemned for illegally performing an abortion*

COMMENTS:

- *The numbers of legal abortions have increased over the last 3 years, but the majority of them had been performed on grounds of fetal malformation.*
- *The use of Cytotec has largely increased over the last few years.*

ROMANIA
Societatea de Educatie Contraceptiva si Sexuala (SECS)
sediu@secs.ro
www.secs.ro

LEGISLATION

25 December 1989, Ministry of Health Order 605/28.12.89
Law N° 140, 5 November 1996, amending and completing the Penal Code

GROUNDINGS/GESTATIONAL LIMITS

Up to 14 weeks:

- On request

Beyond 14 weeks:

- If abortion is necessary to save the pregnant woman's life, health or bodily integrity from serious danger that is imminent and cannot be prevented by other means.
- If the abortion is absolutely necessary for therapeutic reasons, according to legal provisions.

REGULATIONS/CONDITIONS

Only performed in Obstetrics and Gynaecology departments or private clinics by obstetricians or gynaecologists

COST

- Free of charge for women in difficult socio-economic conditions
- Public hospitals: US\$ 3
- Private clinics: US\$ 10–50

DISPARITY IN THE APPLICATION OF THE LAW:

None

COMMENTS:

- *The new Law replaces Decrees of 1957 and 1985. The latter allowed for abortion:*
 - *on medical grounds*
 - *rape*
 - *on social grounds for women over 40 (up to 12 weeks)*
 - *on social grounds for women with 5 or more children (up to 12 weeks)*
 - *on social grounds for all women under 18 years*

These decrees were abolished the day after a popular uprising

- *Since the introduction of the new law, maternal mortality has decreased by 317%*
- *The main problem is still the lack of sexual and reproductive health services and modern contraceptives outside the main cities*

RUSSIAN FEDERATION
Russian Family Planning Association (RFPA)
info@rfpa.ru
www.rfpa.ru

LEGISLATION

Governmental decision, 23 November 1955

1993 - Russian Federation Public Health Care Law No. 5487-1, 22 July, article 36, Every woman has the right to decide in matters related to motherhood

2003 – Decree of RF Government No. 485, 11 August: "About the list of social indications for induced abortion"

GROUNDINGS/GESTATIONAL LIMITS

Up to 12 weeks:

- On request

Up to 22 weeks

- Social grounds:
 - Rape
 - Imprisonment
 - Death or severe disability of husband
 - A court ruling related to depriving or restricting a person of parental rights

No limit (with woman's consent)

- Medical grounds

REGULATIONS/CONDITIONS

- All abortions have to be performed in governmental clinics and licensed private clinics by physicians with special training.
- For early pregnancies (up to 20 days of delayed period), abortion can be performed in outpatient clinics
- In August 2003, the Government narrowed the grounds for abortion. Before, women could receive an abortion between the 12th and 22nd weeks of their pregnancies by citing one of 13 special circumstances called "social indications," including divorce, poverty, unemployment or poor housing, being a single mother or a refugee.

COST

- Abortion performed within the compulsory health insurance programme, free of charge
- Women can undertake abortion in the framework of voluntary medical insurance, as well as in private, authorised institutions

DISPARITY IN THE APPLICATION OF THE LAW:

COMMENTS:

- *The trend is towards a decrease in abortion rates. According to data from the RF Statistics Committee, 3.53 million abortions or 95 abortions per 1000 women of reproductive age were performed in 1992, whereas in 2002 the figures decreased to 1.95 million or 50 per 1000 women of reproductive age. The decrease is mainly due to a Federal Family Planning Programme, and the regional ones, and to the projects implemented by the RFPA and its branches.*

- *Abortion remains the main method of fertility regulation in Russia, 6 pregnancies out of 10 end in induced abortion: the absence of domestic manufacturers producing hormonal contraception, irregular state purchases, high and unaffordable contraceptive prices and the constant lack of information about contraception, are the main causes of the low oral contraceptive use. The low level of modern contraceptive use is in many cases associated with the high rates of abortion.*

SLOVAK REPUBLIC
Slovenská spoločnosť pre plánované rodičovstvo
a výchovu k rodičovstvu (SSPRVR)
spr@rodivcovstvo.sk
www.rodivcovstvo.sk

LEGISLATION

Law 73, 23 October 1986, effective January 1987 and amended through Law N° 419/1991.

GROUND/GESTATIONAL LIMITS

Up to 12 weeks:

- On request

Beyond 12 weeks:

- If the woman's life or health is endangered
- If the healthy development of the fetus is endangered
- If fetal development manifests genetic anomalies
- Rape or other sexual crime

REGULATIONS/CONDITIONS

- The woman has to make a written request to the gynaecologist of the health establishment serving her place of permanent residence, place of work, or school.
- If the physician does not find that the conditions for abortion are satisfied, the woman may (within three days) make a written request that her case be examined by the director of the health establishment, who has to examine the request within two days of its submission. The director has to consult two further physicians (ob/gyn or if necessary specialized in another field). His decision is final.
- Consent required for minors (under 16) from their legal representative or the person who has been assigned responsibility for the woman's upbringing.
- For minors between 16-18, parents (or the woman's legal representative) have to be informed after abortion
- Compulsory counselling
- Abortion on request up to 12 weeks is not possible for women residing only temporarily in Slovakia.
- Abortions have to be carried out in hospital. Women must apply for it but they can choose both the district and the hospitals, 'free choice of physician'
- At least 6 months between 2 abortions. Except for women with at least two births; aged 35 or over, or in case of rape
- No medical abortion available yet

COST

- Abortion on request costs SK 7000 (US\$ 257)
- Free of charge on medical grounds

DISPARITY IN THE APPLICATION OF THE LAW:

Despite the law, due to attacks by anti-choice catholic groups, access to safe abortion has been reduced. Due to these campaigns, even supportive gynaecologists have taken an anti-choice position relying on the conscientious objection clause

COMMENTS:

At present time, the issue of abortion on request but also of abortion for medical reasons is the topic of political debates and Constitutional Court proceedings that could have negative outcomes when it comes to the free choice of women.

SPAIN
Federación de Planificación Familiar de España (FPFE)
info@fpfe.org
www.fpfe.org

LEGISLATION

- Organic Law 9/1985 of 5 July, reforming article 417 of Penal Cod, decriminalizing abortion on 3 grounds
- Crown Decree 2409/1986, 21 November, about accreditation of centres and dictamens for legal practice of abortion
- Order of 16 June 1986, about statistics and epidemiological information of abortion
- Organic Law 10/1995, 23 November, Penal Code

Outside of these grounds the Penal Code still criminalizes women

GROUNDINGS/GESTATIONAL LIMITS

Up to 12 weeks:

- Rape

Up to 22 weeks

- If the fetus, if carried to term, will suffer from severe physical or mental defects

No limit:

- If the abortion is necessary to avert a serious risk to the physical or mental health of the pregnant woman

REGULATIONS/CONDITIONS

- If the pregnancy is a result of rape, the rape must first be reported to the police.
- In case of fetal malformation 2 doctors other than the one following the case must certify that the foetus, if carried to term, would suffer from severe physical or mental defects
- In case of serious risk to the physical or mental health of the woman, a previous medical report from a doctor specialized in the subject and different from the one following the case is required
- An abortion must be performed by or under the supervision of a physician in an approved public or private health centre or establishment, provided the pregnant woman gives her express consent and one of the legal indications for abortion is met.
- A pregnant woman is penalized if the abortion is not performed in an approved public or private health centre or establishment, or if the prescribed medical opinions have not been expressed.

COST

- Public health service: free of charge
- Private hospitals: average cost before the 12th week: € 360 (US\$ 465), approximately the same price as vasectomies in private hospitals. After the 12th week the price is highly variable depending on gestational period, anaesthetic, etc...

DISPARITY IN THE APPLICATION OF THE LAW:

- *The lack of the conscientious objection regulation and its generalisation in public health means that in general women have to refer themselves to private structures and that there are important differences between regions in terms of availability of service, especially in public structures*

COMMENTS:

- *There is no policy on conscientious objection; therefore abortions are carried out in very few public hospitals, resulting in 3% of abortions performed there, and 97% in private ones.*
- *In 2004, 86,72% of induced abortions were performed outside hospital (clinics,...), in private centers. 13,28% were performed in hospital (3.6% of them public hospitals and 9,71% of them in private hospitals).*
- *Legal practice leaves the door open to individual accusations against women and doctors from ex-boyfriends, ex-husbands, anti-choice groups, etc...Since the decriminalisation of abortion, at least 1,000 proceedings have been opened, and several have resulted in condemnation of doctors performing abortions in private hospitals.*
- *In 2004, 96.7% of induced abortions were performed because of severe risk to physical/ mental health of woman. The foetal risk was present in 3.06% of cases in 2004; rape for 0.02%.*
- *In more than 60% of abortions, the pregnancy was at 8 weeks or less.*

SWEDEN
Riksförbundet för Sexuell Upplysning (RFSU)
info@rfsu.se
www.rfsu.se

LEGISLATION

Abortion Act 595, 14 June 1974, amended May 1995

GROUNDINGS/GESTATIONAL LIMITS

Up to 18 weeks

- On request

Up to 22 weeks (fetal viability)

- 'Strong reasons'

No limit

- If it is presumable that, owing to illness or bodily defect on the part of the woman, the pregnancy entails a serious danger to her life or health (with permission of the National Board of Health and Welfare)

REGULATIONS/CONDITIONS

- Second trimester abortions are subject to approval by the National Board of Health and Welfare
- Abortion must be carried out in a general hospital and by a qualified medical doctor
- Abortion is reserved for Swedish citizens and residents only

COST

The cost is almost fully covered by the National Health Insurance. Patients only have to pay a minor fee. The fees slightly differ from county to county and are reviewed yearly. They range between SEK 260 (US\$ 37) and 380 (US\$ 54).

DISPARITY IN THE APPLICATION OF THE LAW:

None

COMMENTS:

- *Sweden has a very good and well-functioning abortion law but there are some anti-choice activities against the Abortion Act, these groups are small but loud with around 17,000 members, mainly connected to a religious sect called 'The word of life'*
- *The Abortion law is combined with a law making contraceptive services free of charge and subsidizing the price of contraceptives, the government also carries on prevention activities, provides funds for a long-term health education programme aimed at preventing teenage pregnancies, and also funds civil society for sexuality and contraceptive information initiatives*
- *The Ministry of Health is planning to investigate the possibility of allowing foreign women to have an abortion in Sweden.*

SWITZERLAND
PLANeS - Fondation Suisse pour la Santé
Sexuelle et Reproductive
info@plan-s.ch
www.plan-s.ch

LEGISLATION

Penal Code Act, articles 118-121, January 1942, was modified on 23 March 2001 and adopted after 2 June 2002 referendum. The new law (Penal Code Act, articles 118-120) has become effective on 1 October 2002

GROUNDINGS/GESTATIONAL LIMITS

Up to 12 weeks (from LMP) (10 weeks from conception):

- On request

After 12 weeks (from LMP):

- If according to a medical opinion, the abortion is necessary to avert a serious risk to the physical integrity of the woman or several mental distress (which includes rape, incest, malformation of foetus)

The later the pregnancy, the more serious the risk has to be.

REGULATIONS/CONDITIONS

- The woman has to file a written request stating that she is in a situation of distress
- The doctor has to give the woman comprehensive information. He has to discuss the decision with her in detail, hand her out an information sheet with addresses of counselling services and services where she can get moral and material help and be informed about adoption
- Minors under 16 have to see a counsellor at a counselling service for adolescents
- Parental consent (or information) is not required for minors capable of discernment (even if they are under 16)
- Consent from the woman's legal representative is required if the woman is incapable of discernment.

COST

- Health insurance covers the costs of the lawful termination, under the same terms as illness (Art. 30 Federal Law, March 18, 1994)
- Approximately between CHF 600 - 3000 (US\$ 478-2392), for first trimester abortions

DISPARITY IN THE APPLICATION OF THE LAW:

COMMENTS:

- *Most abortions are performed on psycho-social grounds*
- *The practice has become more liberal over the last 25 years*
- *Access to RU 486 up to 7 weeks of pregnancy is very good in Switzerland since 2000. 50% or even more of all abortions are medical abortions.*
- *After 14 weeks of pregnancy, it is still difficult to obtain an abortion except in very severe cases*
- *Regional differences and "abortion tourism" within Switzerland are rapidly disappearing*

TAJIKISTAN
Tajik Family Planning Alliance
tajik-fpa@rambler.ru

LEGISLATION

Law N°179, 15 May 1997, "on protection of public health" and Law N° 72, 2 December 2002, "On reproductive health and reproductive rights"

Order N°121 of Ministry of Health, 28 April 2000, "On abortion grounds and procedures in the Republic of Tajikistan"

GROUNDINGS/GESTATIONAL LIMITS:

Up to 12 weeks:

On request

Up to 22 weeks:

On social grounds:

- Husband's death during gestation;
- Divorce during gestation;
- If the husband or wife is recognized as unemployed;
- In the presence of court decision regarding entirely or partly revocation of paternity or maternity;
- If the woman is not married;
- If the pregnancy is the result of rape;
- If the husband is severely disabled (level 1-2);
- If the family has a disabled child;
- If the family does not have place of residence or lives in a dormitory;
- If the woman has a refugee or forced migrant status;
- If the family's income is less than the minimum wage;
- If the family has many children (5 and more)

No limit:

In case of serious risk to the physical or mental health of the woman.

REGULATIONS/CONDITIONS:

- List of social grounds is set out in a government regulation dating back from 1999
- If rape is the cause of pregnancy, the rape should be reported to the Internal Affairs organs (police);
- In case of fetal malformation, assurance of 3 doctors (ob/gyn) is needed stating that the child if born may suffer from serious physical or intellectual defects
- In case of serious risk to physical and psychological health of the woman, a medical report of a doctor specialized in this area is required.
- The abortion should be conducted by a doctor (ob/gyn) only in a specialized clinic.
- The doctor (ob/gyn) is prosecuted by the law if the abortion was not performed in an approved clinic.
- Adolescents aged 15–18 don't have a right to abortion without consent of their tutors.

COST:

Officially, abortion in state clinics is provided on a free basis, but there is informal payment. Abortions within 5-6 weeks are provided for the sum of US\$ 5-15, within 6-12 weeks of pregnancy – US\$ 10-20, within 18-22 weeks – US\$ 50-100 depending on the commodities and equipment used (medicines, analgetics etc).

DISPARITY IN THE APPLICATION OF THE LAW:

- *Among health managers and state officials of other government structures exists an opinion that in the presence of enough contraceptives quantity, abortion must not exist, that in its turn contributes concealment of real figures regarding abortion.*
- *Provision of abortion is allowed only in separate health institutions (only a few institutions), that lacks access to service and increases causes of crime abortion.*

COMMENTS:

- *There are no politicians and strategies on widening access to safe methods of abortion;*
- *No official allowance on provision of medical abortion;*
- *Manual vacuum aspiration is allowed only within 6 weeks of pregnancy;*
- *There is an unofficial policy to work on the abortion index, but not on widening of access to safe abortion methods;*

TURKEY
Türkiye Aile Planlamasi Dernegi (TAPD)
tapd@tapd.org.tr
www.tapd.org.tr

LEGISLATION

Law N° 2827, Sec 5-6, 24 May 1983, "Population Planning"

GROUNDINGS/GESTATIONAL LIMITS

Up to 10 weeks:

- On request

Over 10 weeks:

- If the pregnancy represents, or will constitute, a danger to the woman's life
- If the child to be born or its offspring will be damaged

REGULATIONS/CONDITIONS

- Married women need spousal consent
- Parental, guardian's or magistrate's courts consent required for minors (under 18) or mentally disabled.
- The above two requirements may be waived if there could be danger to life or to a vital organ unless urgent action is taken.
- Confirmation in writing, on the basis of objective findings by 2 specialists (one in ob/gyn and one in a related field) is needed in cases where there is risk to life of woman or risk of fetal malformation

COST

- Government hospitals: US\$ 110
- University hospitals: US\$ 110
- Private sector: US\$ 225-375
- Private cabinets of obstetricians and gynecologists: US\$ 100

DISPARITY IN THE APPLICATION OF THE LAW:

Women in rural areas have limited access to safe abortion. Pre- and post-abortion counselling has not been widely provided for, and there has been scarcity of family planning services in some settlements, which could reduce the recourse to abortion

COMMENTS:

UNITED KINGDOM

fpa

library&information@fpa.org.uk

www.fpa.org.uk

LEGISLATION

Abortion Act, 17 October 1967,
Amended with Human Fertilization and Embryology Act, 24 April 1990

GROUNDINGS/GESTATIONAL LIMITS

Up to 24 weeks

- If continuing 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

No limit:

- If abortion is necessary to prevent grave permanent injury to the physical or mental health of the pregnant woman
- If continuing the pregnancy would involve risk to the life of the pregnant woman, greater than if the pregnancy were terminated
- If there is a substantial risk that if the child were born it would suffer from such physical or mental abnormalities as to be seriously handicapped

REGULATIONS/CONDITIONS

- In determining whether continuing a pregnancy would involve such risk of injury to the health as is mentioned above, account may be taken of the pregnant woman's actual or reasonably foreseeable environment.
- Consent of two doctors required
- Parents/guardians or social worker consent is not required for minors (under 16 or if in care) if both doctors concerned agree that the minor involved has sufficient maturity and understanding to appreciate what is involved.

COST

- Free of charge (on NHS) in principle
- Private or charitable clinics: 16% of women in England and Wales pay about £450 - £500 (US\$ 881-979)
- About 84% of abortions in England and Wales, and 99% in Scotland, are funded by the NHS [2005 figures]

DISPARITY IN THE APPLICATION OF THE LAW:

- *The 1967 Act and current ambiguity surrounding guidance in this area means that clinicians opt in rather than out of abortion treatment and care*
- *Choice of methods, and indeed access to abortion services is in some areas restricted by a lack of clinical staff willing to take part in the abortion process*
- *A recent survey found that younger doctors working within Obstetrics and Gynaecology may declare conscientious objection to abortion which is not grounded in either religious or moral belief and may be more to do with a lack of training or commitment*
- *There are particular variations between areas in the number of women who have their abortion under 10 weeks, and so are able to choose a medical or manual vacuum aspiration abortion. In 2005, 63% of all NHS funded abortions in England and Wales were carried out before 10 weeks, but this varied from 33% in one area to 83% in another area.*

COMMENTS:

- *This law does not apply to Northern Ireland, where the legislation is much more restrictive: under sections 58 and 59 of the Offences Against the Person Act 1861, it is an offence unlawfully to procure a miscarriage, punishable by a maximum sentence of life imprisonment. However, on the basis of a 1930s court decision abortion is regarded as permissible in order to avoid serious harm to the mother's physical or mental health*

UZBEKISTAN

Uzbek Association on Reproductive Health (UARH)
uarz@ars.uz

LEGISLATION

Order 500, September 15, 1992
Order 721 - 722, October 29, 1996

GROUNDINGS/GESTATIONAL LIMITS

Up to 12 weeks:

- On request

Second trimester:

- Medical grounds
- Social grounds

REGULATIONS/CONDITIONS

- Consultation with a doctor
- Induced abortions are legal if they are done at out-patient facilities and maternity hospitals

COST

- Regional hospital: free of charge
- State hospitals on request of special conditions: sum 3,000 – 6,000 (US\$ 2.4-5)
- Private clinics: sum 15,000 (US\$ 12)

DISPARITY IN THE APPLICATION OF THE LAW:

COMMENTS:

During 1999–2000 the number of abortions in Uzbekistan decreased from 5,4 to 5,1 per 1000 women of reproductive age (according to the Ministry of Statistics of RU)

GLOSSARY OF TERMS

Conception happens during the hours following ovulation.

Implantation usually takes place about 1 week after ovulation about 3 weeks from LMP, but there is no scientifically confirmed date for this, it could be between 3-4 weeks LMP.

Fetal viability depends on the scientific standard of the neonatal care unit. The limit has decreased considerably during the last decades. It stands at about 23-25 weeks, but this is not a sharp limit.

LMP (first day of Last Menstrual Period) is the most widely used term; 14 days later ovulation takes place. (There are considerable differences between women, in fact 14 days is a statistical median used for practical purposes. An ultrasound examination in early pregnancy can date the pregnancy more accurately ± 3 days).

Gestation: the period during which a fertilized egg cell develops into a baby that is ready to be delivered. Gestation averages 266 days in humans (or 280 days from the first day of the last menstrual period).