



ABORTION LEGISLATION IN EUROPE

(UPDATED February 2004)

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Notes

- 1) The document is in its seventh edition. The previous one was compiled in July 2002. 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

Member Association: Albanian Center for Population and Development
Tel: +355 (42) 51475 / afpa@albaniaonline.net

LEGISLATION

November 1996

GROUNDINGS/GESTATIONAL LIMITS

Up to 12 weeks:

- On request

Up to 22 weeks:

- Social grounds

No limit:

- Medical grounds

REGULATIONS/CONDITIONS

Consultation with a doctor

COST

ALL 2700 (around US\$ 27) = ALL 1700 for the abortion fee + ALL 1000 for the laboratory tests.
The cost has increased fourfold since 1993

DISPARITY IN THE APPLICATION OF THE LAW:

- *Counselling before abortion is not effective*
- *Women often have to pay more than the official cost*

COMMENTS:

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

ARMENIA

Member Association: Armenian 'For Family and Health Association'

Tel. +374 (1) 540815 / armfha@netsys.am

Website: <http://www.armfha.com>

LEGISLATION

Abortion permitted since 1950

GROUNDINGS/GESTATIONAL LIMITS

Up to 12 weeks:

- On request

Up to 22 weeks:

- Social grounds
- Medical grounds

REGULATIONS/CONDITIONS

Abortions must be performed by gynaecologists and either in maternity hospitals, gynaecological wards or specialized health centres

COST

The cost varies from clinic to clinic, between US\$ 5 - 15 per procedure. There are also unofficial, illegal payments, which range from US\$ 20 to 100. 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 illegal abortion cost exceeds significantly an average monthly salary. A social security system in Armenia does not exist yet.

DISPARITY IN THE APPLICATION OF THE LAW:

- *Abortion services are not available in rural areas or in some urban settings*
- *Those who are medically indigent often perform self-induced abortion with high risk of complications and consequences.*

COMMENTS:

- *In most of the abortion cases it is performed through the surgical procedure of dilatation and curettage and without anaesthesia. Medical abortion is not introduced.*
- *Post-abortion family planning counselling is rarely performed.*
- *Abortion is still one of the common methods of fertility regulation.*

AUSTRIA

Member Association: Österreichische Gesellschaft für Familienplanung (ÖGF)

Tel. +43 (1) 4785242 / office@oegf.at

Website: <http://www.oegf.at>

LEGISLATION

Federation Law 23 January 1974, effective in January 1975

GROUNDINGS/GESTATIONAL LIMITS

Up to three months from completed implantation:

- On request

Second trimester:

- Risk to physical health of women
- Risk to mental health of women
- Foetal impairment
- Risk to life of woman
- Woman is a minor (under 14 years)

REGULATIONS/CONDITIONS

- Consultation with a doctor
- Abortion must be carried out by a doctor

COST

Induced abortion not paid for by (normal) health insurance

- State hospitals: € 300 – 840(US\$ 385 - 1075)
- Private abortion clinics: € 350 - 450 (US\$ 450 - 575)
- Private practitioners: € 450 (US\$ 575)

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 even though there is no legal basis for 12 weeks after the LMP¹*
- *According to the law, abortion can be performed by general practitioners and gynaecologists. 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 four 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. After the 18th weeks it is hardly possible to get an abortion in Austria.

COMMENTS:

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

BELGIUM

Member Association (Flemish): Sensoa

Tel. +32 (9) 2210722 / info@sensoa.be

Website: <http://www.sensoa.be>

Member Association (French): Fédération Laïque de Centres de Planning Familial (FLCPF)

Tel. +32 (2) 5028203 / flcpf@planningfamilial.net

Website: <http://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 (14 weeks pregnancy):

- 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
- Risk of fetal 'extremely serious and incurable disease'

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 not mentioned in the law
- A 2nd doctor's opinion requested in case of 'serious' risks of health to 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 (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\$ 95-290)
- One-day clinics: €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

Member Association: Association for Sexual and Reproductive Health XY (APP-XY)

Tel. +387 (33) 717 301 / bhfpa.xy@bih.net.ba

LEGISLATION

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

GROUNDINGS/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

- Abortion 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
- 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\$ 30) for insured patients
- Abortion in Health Centres costs KM 100 (US\$ 61)
- The cost of an abortion in private clinics ranges from KM 100-300 (US\$ 61-184)

DISPARITY IN THE APPLICATION OF THE LAW:

COMMENTS:

BULGARIA

Member Association: Bulgarian Family Planning and Sexual Health Association (BFPA)
Tel. +359 (2) 9433052 / bfpa@online.bg

LEGISLATION

February 1990

GROUND/GESTATIONAL LIMITS

Up to 12 weeks:

- On request

Up to 20 weeks:

- Medical grounds

Up till end of pregnancy:

- Fetal malformation

REGULATIONS/CONDITIONS

- Doctors are obliged to ensure that anaesthesia is provided
- In the majority of cases – bigger cities – doctors are obliged to give information about contraception
- Abortions are permitted in both state and private clinics, but not in private cabinets.
- Minimum number of lab test: blood counts, blood group (RH incl.), urine
- Parental consent required for minors (under 18)

COST

- Free of charge for minors under 18, for women over 35 and for all women on medical grounds
- BGL 40 (US\$ 26) for women with the lowest salary of leva 110 (US\$ 72)
- BGL 40-150 (US\$ 27-98) for the others
- Private clinics: up to BGL 238 (US\$ 150)

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.*

CYPRUS

Member Association: Family Planning Association of Cyprus (FPAC)
Tel. +357 (22) 751093 / famplan@spidernet.com.cy

LEGISLATION

Law No 59, 1974; Law No 186, 1986

GROUND/GESTATIONAL LIMITS

- Risk to life of woman
 - Risk to physical health of woman
 - Risk to mental health of woman
 - Risk of fetal malformation
 - Rape or other sexual crime affecting the social and/or family status
- 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 in cases of rape or other sexual crime
- A 'bona fida' opinion of 2 medical practitioners

COST

- Hospital: free of charge for patients eligible for free medical care, strictly regulated by the law
- Private clinics: about CYP 215-240 (US\$ 450-500)

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, even though the law is not that restrictive*

CZECH REPUBLIC

Member Association: Společnost pro plánování rodiny a sexuální výchovu (SPRSV)
Tel. +420 (2) 24231524 / planrod@centrobox.cz

LEGISLATION

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

GROUND/GESTATIONAL LIMITS

Up to 12 weeks:

- On request

Second trimester:

- Medical grounds
- Risk to life of woman
- Risk of fetal malformation
- Rape or other sexual crime

REGULATIONS/CONDITIONS

- Only for Czech citizens or women with permanent residence
- For non-residents only when risk to life is involved
- Recommendations of physician
- Parental consent for minors (under 16)
- Compulsory counselling

COST

- Free of charge on medical grounds for all women
- The maximum stated by a new state notice for abortion is:
 - up to the 8 weeks: CZK 2876 (US\$ 113)
 - from 9th-12th week CZK 3634 (US\$ 142)

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

Member Association: Foreningen Sex & Samfund
Tel. +45 (33) 931010 / danish-fpa@sexogsamfund.dk
Website: <http://www.sexogsamfund.dk>

LEGISLATION

Act No. 350, 13 June 1973. New Bill in 1999

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 health'
- Severe risk of fetal malformation

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

- Parental consent required for minors (under 18)
- Possibility of dispensation of parental consent for minors – e.g. in cases of religious minorities
- For second trimester abortion, in every county a permission from a committee of four people is required

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

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

February 2004

- *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

Member Association: Eesti Pereplaneerimise Liit (EPPL)

Tel. +372 (6) 552755 / eppl@amor.ee

Website: <http://www.amor.ee>

LEGISLATION

Abortion has been legal since a governmental decision by the Soviet Union in November 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 2004, this law will be amended.

GROUND/GESTATIONAL LIMITS

Up to 11 weeks

- On request

Up to 21 weeks:

- Pregnancy endangers the woman's health
- The child is likely to have serious mental or physical disorders
- Mother's illness or health condition prevents her to take care of the child
- Woman is below 15 or over 45

REGULATIONS/CONDITIONS

- Consultation with a doctor is required. Counselling has to address issues of 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 be only performed by gynaecologists in licensed institutions and only in a hospital after the 11th week of pregnancy

COST

- The cost of an abortion is determined by a regulation of the Minister of Social Affairs and is being adjusted on regular basis. Currently, it costs about EEK 1400 (112 US \$). The Health Insurance Fund is subsidizing the cost for the women insured. They have to pay approximately one third of the total cost.

DISPARITY IN THE APPLICATION OF THE LAW:

COMMENTS:

- *It is believed that no illegal abortions are performed in Estonia*
- *In 2004, the abortion law will be amended. The planned changes are the following:*
 - Abortion will be available on request up to 12 weeks instead of 11 weeks
 - Abortion will be legal up to 22 weeks instead of 21 weeks
 - The age as a ground for an abortion between the 12th and 22nd week will be raised from 15 to 16. Other grounds will remain the same.
 - Counselling will also have to address contraceptive methods.

FINLAND

Member Association: Väestöliitto

Tel. +358 (9) 228050 / central.office@vaestoliitto.fi

Website: <http://www.vaestoliitto.fi>

LEGISLATION

Law 239, 1970; Law 564, 1978; Law 572, 1985; Law 328, 2001

GROUND/GESTATIONAL LIMITS

Up to 12 weeks:

- Social, socio-medical or socio-economic grounds
- Risk to mental health of woman
- Rape or other sexual crime

Up to 20 weeks:

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

Up to 24 weeks:

- Risk to life of woman
- Risk of fetal malformation

REGULATIONS/CONDITIONS

- Abortions can only be performed in hospitals
- Compulsory contraceptive counselling

Up to 12 weeks pregnancy:

- Authorization from only 1 doctor 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:
 - 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

COST

Abortion is free of charge under national health insurance but women must pay hospital fees of € 66-112 (US \$ 85-144).

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

Member Association: **Mouvement Français pour le Planning Familial (MFPF)**

Tel. +33 (1) 48072910 / mfpf@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.

Second trimester:

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

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 parental consent, 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 and a psychologist or social worker are required to review the request of abortion.

COST

- The price ranges from € 137 to 213 (US\$ 168 – US\$ 260)
- A medical abortion (RU-486) costs € 200 (US\$ 245)
- 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*

COMMENTS:

- *In general there are not enough beds available in hospitals, even though the situation varies from one city to the other*
- *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.

GEORGIA

Member Association: HERA XXI

Tel. +995 (32) 253057 / ntsul@access.sanet.ge

LEGISLATION

Law 21 July 2000, effective in October 2000

GROUNDINGS/GESTATIONAL LIMITS

Up to 12 weeks:

- On request

12 to 22 weeks:

- Risk to life of woman
- Risk to physical health of woman
- Risk to mental health of woman
- Risk of fetal malformation
- Women diagnosed with HIV/AIDS
- Rape or other sexual crime
- Women under 16 years and over 40 years
- Social grounds (e.g., widow, pregnancy in jail, husband is in jail, many children and family income below the minimum, fertilisation happened in high radiation area, homeless women)

22 weeks and over:

- Same grounds but consent by special medical committee of three members

REGULATIONS/CONDITIONS

- Consultation with doctor
- Parental consent required for minors (under 16 years)

COST

State hospitals: GEL 40-150 (US\$ 19-73)

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*

GERMANY

Member Association: pro familia Bundesverband

Tel. +49 (69) 639002 / info@profamilia.de

Website: <http://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

- On request after counselling

Up to 12 weeks

- Rape or other sexual crime

No limit

- Medical grounds (broad definition covering mental health risks including 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)

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 (which includes around 70% of women in Western and almost all women in Eastern Germany), the state cover 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

Member Association: Family Planning Association of Greece (FPAG)

Tel. +30 (210) 7774607/ helobgyn@otenet.gr

LEGISLATION

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

GROUNDINGS/GESTATIONAL LIMITS

Up to 12 weeks:

- On request

Up to 20 weeks:

- Risk to life of woman
- Risk to physical health of woman
- Risk to mental health of woman
- Rape or other sexual crime

Up to 24 weeks:

- Risk of fetal malformation

REGULATIONS/CONDITIONS

Parental consent required for minors (under 16 years)

COST

- State hospitals: free of charge
- Private clinics: between € 175 and 235 (US\$ 210-280)

DISPARITY IN THE APPLICATION OF THE LAW:

None

COMMENTS:

Most abortions are performed privately in outpatient clinics

HUNGARY

Member Association: Magyar Család- és Nővédelmi Tudományos Társaság
Tel. +36 (1) 3456722 / arpad.meszáros@office.ksh.hu
Website: <http://www.szexinfo.hu>

LEGISLATION

Law n. 87, June 2000, 'Law on the Protection of the Life of the Fetus'

GROUNDINGS/GESTATIONAL LIMITS

Up to 12 weeks

- On request

Second trimester:

- 'Grave crisis situation'
- Severe risk to life of woman
- Rape or other sexual crime

REGULATIONS/CONDITIONS

- Parental consent required for minors (under 18)
- Compulsory counselling to be attended twice
- Compulsory waiting period: 3 days after 1st counselling, not longer than eight days before abortion takes place (the second counselling 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

COST

- Free of charge for women in custody, disabled and for abortion on medical grounds
- Up to HUF 18,000 (US\$ 87.6) 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

Member Association: Fræðslusamtök um kynlíf og barneignir (FKB)

Tel. +354 (5) 630700 / fkf@mmedia.is

Website: <http://www.mmedia.is/fkb/>

LEGISLATION

Law effective since 1975

GROUNDINGS/GESTATIONAL LIMITS

Up to 12 weeks

- Social and/or medical grounds
- Risk to life of woman
- Risk to physical health of woman
- Risk to mental health of woman (including her recognised impossibility to take care of the child)
- Rape
- Risk of fetal malformation

REGULATIONS/CONDITIONS

- 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 through the abortion committee
- Parental consent required for minors (under 16)
- Abortion should only be performed by medical doctors within a hospital

COST

- Free of charge, it is paid by the National Health Insurance
- There are charges for the physical examination and the blood test: Krona 3,000 (US\$ 44.4)

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*

COMMENTS:

IRELAND

Member Association: Irish Family Planning Association (IFPA)

Tel. +353 (1) 4740944 / post@ifpa.ie

Website: <http://www.ifpa.ie>

LEGISLATION

A 1992 Supreme Court Ruling (the X case) overturned a High Court Injunction, to permit a young woman (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 reform the 1992 Constitutional Amendment, was narrowly defeated. As a result the X case Court Ruling among others, stating that suicide is no ground for granting abortion, was not overturned.

GROUND/GESTATIONAL LIMITS

Risk to life of woman (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 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

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:

Thousands of Irish women travel to England to have abortions. In the 1992 Referendum, the people voted and amended the Constitution again, in order to establish the right of women to travel and to information. Furthermore the people rejected an amendment designed to reverse a Court decision, which stated that women have a right to abortion in Ireland when their lives are at risk including the risk of suicide. Politicians are now expected to legislate the limited access to abortion in Ireland. The whole question of abortion vis-à-vis the Irish Constitution is due to be considered by the Oireachtas (Parliament) as part of a general review of the Constitution

ISRAEL

FPA: Israel Family Planning Association (IFPA)

Tel. +972 (3) 5101511 / ippf@post.com

Website: <http://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

GROUND/GESTATIONAL LIMITS

- The woman is under 18 years (legal age of marriage) 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)
- Risk of fetal malformation
- Risk to life of woman
- Risk to physical health of woman
- Risk to mental health of woman

REGULATIONS/CONDITIONS

Abortion has to be permitted by a special committee

COST

- Free of charge for women under 18 and for abortion on medical grounds
- ILS 1125 (US\$ 250) 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\$ 700) to ILS 5400 (US\$ 1,200)

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

Member Association: Unione Italiana dei Centri di Educazione
Matrimoniale e Prematrimoniale (UICEMP)

Tel. +39 (02) 5456687 / uicemp@tin.it

Website: <http://www.uicemp.org>

LEGISLATION

Law 194, 22 May 1978

GROUNDINGS/GESTATIONAL LIMITS

Up to 90 days (between 12 and 13 weeks)

- Social, socio-medical or socio-economic grounds

Over 90 days:

- Risk to life of woman
- 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 doctor is required
- Compulsory waiting period of (at least 1 week)
- Parental or judge's consent required for minors (under 18 years)
- 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*

KAZAKHKSTAN

Member Association: Kazakhstan Association on Sexual and Reproductive Health (KMPA)

Tel. +7 (3272) 688352 or +7 (3272) 709924

center.kmpa@alnet.kz or program.kmpa@alnet.kz

LEGISLATION

Order of the Ministry of Health 620, December 1996

FOUNDATIONS/GESTATIONAL LIMITS

Up to 12 weeks:

- On request

Up to 16 weeks:

- Non medical reasons (rape or other sexual crime)

Second trimester:

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

REGULATIONS/CONDITIONS

- Consultation with a doctor required
- Parental consent required for minors (under 16)
- Private practitioners need a state licence and can only provide mini-abortions (up to 4-5 weeks)

COST

- Free of charge in regional hospitals or on medical grounds
- State hospitals on request of special conditions: KZTg 4500 (US\$ 33.5)
- Private practitioners: KZTg 5000 (US\$ 37)

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

A law on reproductive rights was prepared and is to be signed in May 2004.

Kyrgyzstan

Member Association: Reproductive Health Alliance of Kyrgyzstan (RHAK)

Tel. +996 (312) 285421 / rhak@infotel.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.

GROUND/GESTATIONAL LIMITS

Up to 12 weeks:

- On request

Up to 28 weeks:

- Social and any other ground
- On medical grounds

REGULATIONS/CONDITIONS

A woman must undergo a blood and DNA test

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 119-200 soms (US\$ 2.8-4.7) in rural areas and about 500 soms (US\$ 11.8) in urban areas. Other abortions cost 210 soms (US\$ 4.9) in rural areas and between 500 and 1000 soms (US\$ 11.8-23.6) in urban areas. In private clinics the cost of an abortion may go up to 1500 soms (US\$ 35.5) depending on the pregnancy 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.

LATVIA

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

Tel. +371 (7) 212700 / lfpa@mailbox.riga.lv

Website: <http://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 violation (rape)

Up to 22 weeks:

- Special medical grounds

REGULATIONS/CONDITIONS

- Parental consent required for minors (under 16)
- Abortions have to be performed only in government medical centres and private medical centres under contract with the health insurance

COST

From LVL 25 (US\$ 47.6) to LVL 65 (US\$ 123.6)

DISPARITY IN THE APPLICATION OF THE LAW:

COMMENTS:

Abortion rates are still very high even though continuously declining from 30.8 per 1000 women of reproductive age in 2001 to 28 per 1000 in 2002.

LITHUANIA

Member Association: Šeimos Planavimo ir Seksualinės Sveikatos Asociacija (FPSHA)
Tel. +370 (2) 731630 / lithfpa@takas.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 an abortion after 12 weeks of pregnancy

GROUND/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

- Written parental consent required for minors (under 16)
- Abortions can be performed only by physicians and only in medical institutions
- Consultation with a doctor required
- Examination of the woman required (blood test, cervical smear)

COST

LTL 70 (US\$ 25) in public clinics, more expensive in the private ones

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*

LUXEMBOURG

**Member Association: Mouvement Luxembourgeois pour le Planning Familial
et l'Éducation Sexuelle (MLPFES)**
Tel. +352 485976 / plannlux@pt.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:

- Risk to life of woman
- Risk to physical health of woman
- Risk to mental health of woman
- Risk of fetal malformation
- Rape or other sexual crime

No limit:

- Written acknowledgement of 2 doctors asserting that the life of the woman or child to be born is at risk

REGULATIONS/CONDITIONS

- Consultation required with a gynaecologist or obstetrician, who is obliged to give information on health risks associated with the medical intervention
- If the woman is a minor or unable to manifest her will, then the written consent from the woman or her legal representative is obligatory
- Prior residency of three months required
- The risk associated with the pregnancy needs to be certified by a doctor
- Compulsory waiting period (at least 1 week)
- 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

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.

MOLDOVA

Member Association: Societatea de Planificare a Familiei din Moldova

Tel. +373 (22) 235073 / fpam@mcc.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:

- Socio-medical and socio-economic 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 5 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\$ 25) 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.

DISPARITY IN THE APPLICATION OF THE LAW:

COMMENTS:

The NETHERLANDS

Member Association: Rutgers Nisso Groep (RNG)

Tel. +31 (30) 2313431 / rng@rng.nl

Website: <http://www.rng.nl>

LEGISLATION

Law on termination of pregnancy 1 May 1981, Administrative regulations in 1984

GROUNDINGS/GESTATIONAL LIMITS

Up to thirteen weeks:

- On request

Up to 24 weeks (fetal viability):

- Abortion is allowed after thirteen weeks if the pregnant woman attests to a state of distress, to be jointly defined by the woman and the doctor

REGULATIONS/CONDITIONS

- Parental or guardian's consent required for minors (under 16 years)
- Compulsory waiting period (5 days)
- A physician is obliged to determine whether the woman took the decision freely
- An abortion must be performed only by a physician in a licensed hospital or clinic

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

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

Tel. +47 (23) 228062 / ksexo@online.no

Website: <http://www.seksuellopplysning.no>

LEGISLATION

Act 50, *Act Relating to the Termination of Pregnancy*, 13 June 1975.

Law 66, Sec 1-4, 16 June 1978

GROUND/GESTATIONAL LIMITS

Up to 12 weeks:

- On request

Second trimester (fetal viability):

- Risk to life of woman
- Risk to physical health of woman
- Risk to mental health of woman
- Risk of fetal malformation
- Rape or other sexual crime
- Social grounds
- Woman under 16

After the 18th week:

- Only for extremely severe reasons

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
- Parental or judge's consent required for minors (below 16 years) unless highly inappropriate
- 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 obligated to notify her that she can ask for information about the support provided by society. The woman is not obligated 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

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

Member Association: Towarzystwo Rozwoju Rodziny (TRR)

Tel. +48 (22) 8286191 / trr@trr.org.pl

LEGISLATION

New anti-abortion law, known as 'Law on Family Planning, Human Embryo Protection and Conditions of Abortion' 1993. January 1997 new restrictive amendments

GROUNDINGS/GESTATIONAL LIMITS

Up to 12 weeks:

- Rape or other sexual crime (the criminal act has to be confirmed by a prosecutor)

Second trimester:

- Risk to life of woman
- Serious fetal malformation

REGULATIONS/CONDITIONS

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, subject to 2 years prison

COST

- Illegal abortion in private clinics' or private cabinets' gynaecological rooms is estimated to cost around zloty 2000-5000 (US\$ 525 – 1312)
- Legal abortion costs are covered by the State Health Care system.

DISPARITY IN THE APPLICATION OF THE LAW:

- *Unclear implications of the new law. Law more restrictive in practice. There is a lot of evidence that many women were denied legal abortions to which they were 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

Member Association: Associação Para o Planeamento da Família (APF)

Tel. +351 (21) 3853993 / apfportugal@mail.telepac.pt

Website: <http://www.apf.pt>

LEGISLATION

Law 6, See 139-141, 11 May 1984

1997, Parliament debate, changes in the gestational limit

GROUNDINGS/GESTATIONAL LIMITS

Up to 12 weeks:

- Risk to life of woman
- Risk to mental health of woman

Up to 16 weeks:

- Rape or other sexual crime

Up to 24 weeks

- Risk of fetal malformation

REGULATIONS/CONDITIONS

- Parental consent required for minors
- 2 medical opinions compulsory
- Compulsory waiting period (up to 3 days)

COST

From € 245 (US\$ 300) to € 650 (US\$ 800) 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*

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

ROMANIA

Member Association: Societatea de Educatie Contraceptiva si Sexuala (SECS)

Tel. +40 (21) 4116661 / sediu@secs.ro

Website: <http://www.sexdex.ro/sd/index.jsp>

LEGISLATION

25 December 1989, Ministry of Health Order 605/28.12.89

GROUNDINGS/GESTATIONAL LIMITS

Up to 12 weeks:

- On request

Second trimester:

- Risk to life of woman
- Risk of fetal malformation

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 only:*
 - *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

Member Association: Russian Family Planning Association (RFPA)

Tel. +7 (095) 9731559 / rfpa@dol.ru

Website: <http://www.family-planning.ru>

LEGISLATION

Governmental decision, 23 November 1955

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

GROUNDINGS/GESTATIONAL LIMITS

Up to 12 weeks:

- On request

Up to 22 weeks

- Social grounds

No limit (with woman's consent)

- Medical grounds

REGULATIONS/CONDITIONS

- All abortions have to be performed in governmental clinics and licensed private clinics
- 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 the new restrictions, women could receive an abortion between the 12th and 22nd weeks of their pregnancies by citing one of 13 special circumstances called "social indicators," including divorce, poverty, unemployment or poor housing. The governmental decree (#485) has reduced the number to four: rape, imprisonment, the death or severe disability of the husband or a court ruling stripping a woman of her parental rights. Being a single mother or a refugee is no longer reason enough to abortion.

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

**Member Association: Slovenská spoločnosť pre plánované rodičovstvo
a výchovu k rodičovstvu (SSPRVR)**

Tel. +421 (2) 43423880 / ssprv@nexta.sk

Website: <http://www.rodicovstvo.sk>

LEGISLATION

Law 73, 23 October 1986, effective January 1987

GROUNDINGS/GESTATIONAL LIMITS

Up to 12 weeks:

- On request

Second trimester:

- Risk to life of woman
- Risk of fetal malformation
- Rape or other sexual crime

REGULATIONS/CONDITIONS

- Parental consent required for minors (under 16)
- For minors (between 16-18) parents have to be informed after abortion
- Compulsory counselling
- 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

COST

- Abortion on request costs SK 6543 (US\$ 206)
- 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 that could have negative outcomes when it comes to the free choice of women.

SPAIN

Member Association: Federación de Planificación Familiar de España (FPFE)

Tel. +34 (91) 5913449 / info@fpfe.org

Website: <http://www.fpfe.org>

LEGISLATION

Organic Law 9/1985, 5 June, decriminalizes abortion on 3 grounds
Outside of these grounds the Penal Code still criminalizes women

GROUNDINGS/GESTATIONAL LIMITS

Up to 12 weeks:

- Rape

Up to 22 weeks

- Risk of fetal malformation

No limit:

- Serious risk to physical or mental health of the 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\$ 440), 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.*
- *Approximately 85 per cent of the abortions performed in private clinics are performed on the grounds of averting severe danger to the woman's physical or mental health (especially mental health), which may conceal reasons prohibited by law.*

- *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.*

SWEDEN

Member Association: Riksförbundet för Sexuell Upplysning (RFSU)

Tel. + 46 (8) 6920700 / info@rfsu.se

Website: <http://www.rfsu.se>

LEGISLATION

Abortion Act 595, 14 June 1974, amended May 1995

GROUND/GESTATIONAL LIMITS

Up to 18 weeks

- On request

Up to 22 weeks (fetal viability)

- 'Strong reasons'

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

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\$ 36.3) and 380 (US\$ 53).

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

Member Association: PLANeS - Fondation Suisse pour la Santé
Sexuelle et Reproductive

Tel. +41 (21) 6612233 / info@plan-s.ch

Website: <http://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):

- Risk to life of woman
- Risk to physical health of woman
- Severe mental distress (includes rape, incest, malformation of foetus)

REGULATIONS/CONDITIONS

- 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 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)

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\$ 380 -1,900), 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. Nearly 40% 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*

TURKEY

Member Association: Türkiye Aile Planlamasi Dernegi (TAPD)

Tel. +90 (312) 4311878 / tapd@tapd.org.tr

Website: <http://www.tapd.org.tr>

LEGISLATION

Population Planning Law, Sec 5-6, 24 May 1983

GROUNDINGS/GESTATIONAL LIMITS

Up to 10 weeks

- On request

Over 10 weeks:

- Risk to life of woman
- Risk of fetal malformation

REGULATIONS/CONDITIONS

- Married women need spousal consent
- Parental, guardian's or magistrate's courts consent required for minors (under 18)
- Consent of 2 specialists 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:

UKRAINE

FPA: Ukrainian Family Planning Association (UAFP)
Tel. +380 (44) 2366540 / ufpa@semja.kiev.ua

LEGISLATION

Legislation adopted in 1953

GROUNDINGS/GESTATIONAL LIMITS

Up to 12 weeks

- On request

Between 12 and 28 weeks:

- Risk to physical health of woman
- Social grounds
- Medical grounds

REGULATIONS/CONDITIONS

- Parental consent required for minors (under 16 years)
- Abortions must be carried out by a doctor

COST

- State clinics: free of charge
- Private clinics: between US\$ 30 and US\$100

DISPARITY IN THE APPLICATION OF THE LAW:

- *It is not possible to investigate unofficial abortion in private clinics and by private doctors and other medical providers who are not gynecologists*
- *Abortion tourism from other countries (a lot from Poland) is present but difficult to investigate*

COMMENTS:

Public information on the availability of abortion services is widely presented in news papers (private)

UNITED KINGDOM

Member Association: fpa

Tel. +44 (20) 7923 5228 / library&information@fpa.org.uk

Website: <http://www.fpa.org.uk>

LEGISLATION

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

GROUNDINGS/GESTATIONAL LIMITS

Up to 24 weeks

- Social, socio-medical, social-economical grounds

No limit:

- Risk of serious handicap, risk of grave permanent injury to life of woman

REGULATIONS/CONDITIONS

- Consent of two doctors required
- Parents/guardians or social worker consent required for minors (under 16 or if in care) excluding exceptional circumstances when it is left to the doctor's clinical judgement

COST

- Free of charge (on NHS) in principle
- Private or charitable clinics: 24% of women pay about £350-£450 (US\$585-750)

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 2001 this varied from 26% in one area to 79% 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*
- *About 76% of abortions in the UK are funded by the NHS [2001 figures]*

UZBEKISTAN

Member Association: Uzbek Association on Reproductive Health (UARH)
Tel. +998 (71) 1374915 / uarh@mail.eanetways.com

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\$ 7 - 15)
- Private clinics: sum 15,000 (US\$ 40)

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 **L**ast **M**enstrual **P**eriod) 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).