

## Briefing for the Citizen Participation and Public Petitions Committee on petition [PE2126: 'Ensure abortion services are available up to 24 weeks across all parts of Scotland'](#), lodged by Gemma Clark

[PE2126](#) calls on the Scottish Parliament to urge the Scottish Government to ensure that abortion services are available up to the 24<sup>th</sup> week of pregnancy across all NHS health boards in Scotland. The petitioner previously called for action on this issue in their petition [PE1969: Amend the law to fully decriminalise abortion in Scotland](#). They felt that [the Scottish Government's response to PE1969](#) did not sufficiently address this aspect of the petition, and therefore raised the matter separately in PE2126.

### Brief overview of issues raised by the petition

#### Abortion law in Scotland

Under the terms of the [Abortion Act 1967](#), which currently applies to Scotland, England, and Wales, an abortion can legally be accessed up to 24 weeks of pregnancy if continuing with a pregnancy would pose a greater risk to the pregnant woman's mental or physical health than accessing an abortion. This is commonly known as a Ground C abortion, in reference to the relevant provision of the Act. Abortion services can also be accessed up to 24 weeks' gestation if continuance of a pregnancy would involve risk, greater than if the pregnancy were terminated, of injury to the physical or mental health of any existing child(ren) of the family of the pregnant woman, known as a Ground D abortion. Beyond 24 weeks' gestation, abortions can only be conducted if there is a significant risk to the life of the pregnant woman, or evidence of foetal abnormality. Abortion law was devolved to Scotland under [Section 53 of the Scotland Act 2016](#).

#### Prevalence of later stage abortion

Most abortions in Scotland are conducted during the first trimester of pregnancy (up to 12 weeks). [Public Health Scotland's most recent data](#) states that in 2023, almost four in five procedures were carried out before nine weeks' gestation. In the same year, [1.2% of abortions in Scotland were conducted at 18 weeks' gestation or later](#). Later stage abortions ([at 20 weeks' gestation or later](#)) are sometimes accessed due to medical reasons, such as a foetal abnormality, which may be diagnosed during [the 20-week foetal anomaly scan](#). [Other issues including barriers to accessing abortion care, waiting lists for abortion services, a change in personal circumstances,](#)

[experience of domestic abuse, or late detection of pregnancy](#), may lead patients to access later stage abortion services under Grounds C and D of the Abortion Act 1967.

## Later stage abortion procedures

Abortions at 20 weeks' gestation or later, whether medically or surgically administered, are more complex procedures performed by trained specialists. For women who require [a later stage termination for medical reasons](#) (TFMR), a medically-induced abortion is currently the only option offered in Scotland, as no surgical abortion provision is available for patients at a later gestation. [A medically-induced abortion at a later gestation may necessitate foeticide](#), an injection to stop the foetus' heart before abortion is induced. This procedure would be carried out by a foetal medical consultant. The option to travel to England for a surgically-managed abortion is not currently offered to women in need of TFMR.

Conversely, in instances where a woman is between 20 and 24 weeks' gestation and a Ground C or D abortion is required, the only option currently available would be to travel to England for a surgical abortion. The medically-induced abortion option available to women who require termination for medical reasons is not currently offered to women seeking a Ground C or D abortion at a later stage. Though little information exists concerning the reasons for this difference in provision, it is thought that [some healthcare professionals may conscientiously object to performing foeticide for an abortion on these grounds](#).

Second trimester [surgical abortions after 18-20 weeks may require a more complex procedure called dilatation and evacuation](#), which is performed under general anaesthetic. Pregnant patients in Scotland who request a Ground C or D abortion after 20 weeks' gestation are usually required to travel to British Pregnancy Advisory Service (BPAS) or other clinics in England for this specialist procedure.

## Current provision of later stage abortion services in Scotland

[Healthcare Improvement Scotland's Sexual Health Standards](#) currently instruct all NHS Boards and Integrated Joint Boards (IJBs) to provide local abortion services up to at least 20 weeks' gestation. This standard appears to have largely been met, with [all mainland NHS Boards currently providing abortion services to at least 19 weeks and 6 days' gestation](#). Where abortion provision beyond 20 weeks is not available locally, the Standards require NHS Boards and IJBs to "work in partnership to provide an appropriate and person-centred care pathway for all women, trans and non-binary people requiring an abortion up to the legal limit". Currently, [no Scottish NHS Boards offer Ground C or D abortion services up to the legal limit of 24 weeks](#).

[Data published by BPAS showed that in 2022, 65 patients from Scotland accessed later stage abortion care at BPAS clinics in England](#). Between January 2019 and May 2023, BPAS provided later gestation abortion care to 282 patients from Scotland. BPAS noted that this figure includes women and girls aged under 16.

[The requirement to travel to England to access later stage abortion services can carry emotional, physical, and financial implications for pregnant women and girls in Scotland](#). The cost of travel can present a barrier for those seeking to access

abortion care, as they may be required to pay travel and accommodation costs upfront and claim back the cost. [Travelling back to Scotland following a dilatation and evacuation procedure may be physically challenging](#); common after-effects of the procedure include pain and bleeding. Rare, but serious complications include retained pregnancy tissue, haemorrhage, and perforation of organs, which may require additional procedures to address.

It is not clear why later stage Ground C and D abortions are not currently available in Scotland. However, [research suggests that a lack of senior management support, a perceived lack of need due to the low number of abortions performed later in pregnancy, and “distaste” for performing the procedure among medical professionals may be contributory factors](#). [A 2024 qualitative study exploring providers’ perspectives on barriers to later stage abortion in Scotland](#) identified healthcare system issues as a key concern, including funding and resource constraints, and a lack of relevant surgical expertise; [only one surgeon in Scotland is currently trained to provide surgical abortion after 13 weeks](#). Some of the study participants also cited clinical and ethical concerns associated with later stage abortion, and the impact of systemic abortion stigma upon service provision.

[In its written response to the petition, the Scottish Government confirmed that it is exploring options to improve provision of later stage abortion services in Scotland.](#)

The response stated:

“In early 2023, the Scottish Government formally commissioned NSS National Services Division (NSD) to produce a specification on the optimal delivery proposal for a later stage abortion service. Significant work was completed to develop a proposal. With no Health Board at that stage able to host the national service proposed, a Short Life Working Group was established to recommend the most attainable and sustainable way of delivering services in Scotland. The Scottish Government hopes to agree a solution with Boards as soon as possible.”

“We understand concerns around this issue and remain committed to working with Health Boards to agree a solution. This is expected to involve consideration of a regional service so that later stage abortions would be provided in more than one location in Scotland.”

The Scottish Government also stated that it has committed to providing funding to clinicians who wish to train to provide later stage abortion services in Scotland.

## **Scottish Government actions**

In addition to the actions outlined above, the Scottish Government identified improved access to abortion care as a key priority in its [Women’s Health Plan 2021-24](#) stated improved access to abortion care among its priorities for women’s health in Scotland. Its two aims in relation to these priorities were:

1. All women will be able to access timely abortion care without judgment.
2. All women will have choice about how and where they access abortion care.

The Plan also committed to a medium-term action of “provid[ing] mid-trimester abortion care locally or regionally for all indications.”

In its [Final Report for the Women’s Health Plan](#), published in November 2024, the Scottish Government stated that it “has committed to ensuring abortion provision within Scotland to the legal limit of 24 weeks, for all patients. National Services Scotland (NSS) has done significant work to consider the available delivery options for a later stage abortion service in Scotland.”

In October 2023, the [Minister for Public Health and Women’s Health stated in response to written question S6W-22062](#) that the Scottish Government was working with individual NHS Boards to support clinicians who wish to receive training to deliver later stage abortions to be granted funding to do so.

## Scottish Parliament actions

As the petitioner notes, the Citizen Participation and Public Petitions Committee previously considered this issue in the context of [PE1969: Amend the law to fully decriminalise abortion in Scotland](#). The [petition was closed](#) in light of the Scottish Government’s plans to conduct a review of abortion law with the aim of ensuring that abortion is considered a healthcare matter. However, the petitioner felt that the matter of later stage abortion provision was not sufficiently addressed in the Scottish Government’s response to the petition.

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**Researcher**

9 January 2025

The purpose of this briefing is to provide a brief overview of issues raised by the petition. SPICe research specialists are not able to discuss the content of petition briefings with petitioners or other members of the public. However, if you have any comments on any petition briefing you can email us at [spice@parliament.scot](mailto:spice@parliament.scot)

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