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# REPORT OF THE COMMITTEE ON THE WORKING OF THE ABORTION ACT

**Chairman: The Hon. Mrs. JUSTICE LANE, D.B.E.**

## VOLUME I
## REPORT

*Presented to Parliament by the Secretary of State for Social Services, the Secretary of State for Scotland and the Secretary of State for Wales by Command of Her Majesty*
*April 1974*

*LONDON*
HER MAJESTY'S STATIONERY OFFICE
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3. Haemorrhage

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Chief Medical Officer (regulation 4

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III. Abortion Laws throughout the World

1. Europe

1.1 In the following countries abortion is absolutely prohibited by law: Belgium (but not rigorously where woman's life at risk), Ireland, Malta, Portugal, Spain.

1.2 In the following countries abortion is permitted only to save the mother's life: Albania, Austria, France, West Germany, Italy (also where pregnancy has occurred from a criminal offence), Netherlands.

1.3 The following countries have more liberal legislation:

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| *Bulgaria (1968) | Abortion up to 10th week of pregnancy by request to a medical board, which must attempt to dissuade the woman but may not refuse, except for first pregnancies in marriage unless there are serious medical reasons. Groups specially recommended for abortion are women over 45 or with three or more children, girls under 16, women pregnant by incest or notified rape, or anyone with social difficulties. Abortion performed in hospital. Abortion up to 12 weeks' gestation by application through a head of department of gynaecology to a commission. |
| *†Czechoslovakia (1957, 1966) | Legal if there are medical grounds (including risk of defective fetus, extreme youth of mother, or pregnancy result of incest), where pregnancy is the result of rape, where the woman is over 40, a widow or has at least three children, "difficult situation for unmarried woman" and "disruption of family". Operation by gynaecologist in hospital or polyclinic. Certain medical conditions, especially genital infections, are contra-indications to abortion. |
| *†Denmark (1973) | On demand up to 12 weeks by application to a doctor or Mother's Aid Institution (M.A.I.). The Board of the M.A.I. can give permission after 12 weeks if the woman's health and nurturing ability would suffer, if from immaturity or low intelligence she cannot care for a child, if pregnancy resulted from a criminal offence, or if the child is likely to be handicapped. The woman must then be referred to a hospital where the abortion can be performed. Conscience clause for nurses. Normally only residents qualify. |
| *†Finland (1970) | Up to 16 weeks' gestation, by authorisation from the State Medical Board, where there are health or social grounds, or the pregnancy is the result of a criminal offence, or one or both parents is affected by mental or physical illness, recommendation can be made by two physicians or the Board; where the woman is under 17, over 40, or already has four children, the decision lies with the operating surgeon; where there are grounds to suspect a defective fetus, or in late abortions for non-medical reasons, by the Board. Special hospitals deal with all abortions. |
| East Germany (1972) | Abortion available on request, and also for medical, social, "ethical" and "eugenic" reasons. |



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| Greece | To preserve life or health, and for eugenic indications. Strictly interpreted. |
| *Hungary (1956) | In the first three months of pregnancy, by application to a Board which cannot refuse abortion if the applicant's circumstances justify the operation, or where the Board cannot dissuade her. |
| *Iceland (1935) | Up to the eighth week of pregnancy an abortion may be performed if continuation of pregnancy presents a risk to the health, including the consideration of social factors. Only where the risk is otherwise inevitable can the operation be performed after eight weeks. Performed in an approved hospital on the authority of two physicians. |
| Luxembourg | Legal on "medical grounds", rigorously enforced. |
| *†Norway (1960, 1963) | Abortion legal for medical and medico-social reasons, or where pregnancy is the result of a criminal offence, or where there is a risk of congenital defect in the fetus, up to the 12th week. Application from the woman and her doctor to the hospital: authorisation needs two physicians. Where the alleged grounds are mainly environmental, they must be thoroughly investigated. |
| †Poland (1956, 1959) | Abortion legal on medical or social grounds, or where the pregnancy is the result of a criminal act (not however in the two latter cases if there are medical contra-indications). A certificate testifying that termination is permissible must be obtained from a physician. Abortions are carried out in public hospitals and privately, sometimes on an out-patient basis. |
| *Romania (1966) | Previously on request, abortion is legal when the woman's life is in danger, if she suffers from a serious disorder of any kind, if she is over 45, if she already has four children in her care, if she is pregnant as a result of incest or rape, and if either parent suffers from a serious hereditary disease. Authorisation given by a Board, but usually only up to the 12th week. |
| *Sweden (1938, 1946, 1963, 1964) | Legal up to the 20th week, by application to an abortion consultation centre: approval to be given by either two physicians or by the National Board of Health Welfare for medical and medico-social indications, and by the latter alone where there is a risk of a congenital defect or where the woman through mental disorder is incapable of giving consent. |
| Switzerland (1937, 1942) | Legal where there is a serious risk to the life, or of permanent danger to the health of the mother, which cannot otherwise be averted. A specialist in the condition presenting the risk must give authorisation, and the pregnancy be terminated by a second physician: in the canton of Geneva the authorising physicians form a college designated by the Council of State. There is a special commission to deal with aliens. Interpretation of the law varies in different cantons. |



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| †Turkey (1960, 1965, 1967) | Abortion permitted by application to a committee of gynaecologists where the life and health of the mother are at risk, or where there is risk of congenital defect. Failure of an I.U.D. without expulsion is also accepted. Sterilisation is also authorised in a variety of circumstances, mostly the presence of hereditable conditions. |
| U.S.S.R. (1920, 1955) | Abortion on request. The woman must obtain a certificate from a medical officer, gynaecologist or other doctor that abortion is indicated and no medical contra-indications exist. She is then referred to a hospital and stays in at least three days. The doctor must warn of the risks but cannot refuse. In the legislation of 1920 of which the current law is a re-enactment, the doctor could refuse abortion after the 10th week. |
| *†Yugoslavia (1969) | By application to a commission of two doctors and a social worker: legal up to the 12th week for reasons of social difficulty, rape, incest or possible defect of fetus, and at any time to preserve life or health. The operation must be performed in health establishments with adequate facilities. |

2. The Americas

2.1. In the following countries abortion is absolutely prohibited by law: Bolivia, Columbia (but in cases where it is performed to save the life or the honour of the women, the penalty may be reduced or a free pardon given), Dominican Republic, Guatemala, Haiti, Panama.

2.2. In the following countries abortion is legal only to save the woman's life: Chile (on the certification of two physicians), Guadeloupe, Nicaragua, Paraguay, Peru since 1929 (incontrovertible proof and the assent of two physicians required), Puerto Rico, Venezuela.

2.3. The following countries have more liberal legislation:

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| Antigua | Legal on "medical grounds". |
| Argentina (1967) | Abortion legal if performed by a licensed physician to save the life or health of the mother from an otherwise inevitable danger or where pregnancy is the result of a rape in respect of which criminal proceedings have been started. |
| Barbados | Legal on "medical grounds". |
| Brazil (1940) | Legal on the decision of a committee of three physicians if it is necessary to save life or if the pregnancy is the result of rape. |
| Canada (1969) | Legal where a majority of a hospital's therapeutic abortion committee certifies that the pregnancy would, or would be likely, to endanger the woman's life or health: operation carried out by a qualified medical practitioner in an approved hospital. |
| Costa Rica (1941) | Two physicians must agree that the abortion is the only way to safeguard the mother's life or health: the operation is carried out by a third. |



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| Cuba (1938) | Abortion is legal to preserve the life of the mother, to prevent serious damage to her health, after rape or to prevent the transmission of hereditary or serious contagious disease. |
| Ecuador (1938) | Not illegal if carried out by a physician to escape otherwise inevitable danger to life or health, or if the pregnancy is the result of rape, or of illegal intercourse with a woman who is insane or demented. |
| Honduras (1964) | Abortion is legal if a medical commission certifies it necessary to protect life and health, and all other measures have failed. |
| Jamaica | Legal to protect life and health. |
| Mexico (1931) | Legal in cases of rape: also where the physician is of the opinion that the pregnancy would endanger the woman's life. A second opinion is preferred, except in an emergency. |
| Montserrat | Legal on unspecified medical grounds. |
| Trinidad and Tobago | Legal to preserve health of mother. |
| *Uruguay (1938) | Reduced penalty if carried out to preserve the honour of the woman and her family: no penalty if after a rape and the operation is performed with woman's consent, reduced penalty if without her consent; penalty reduced or waived if operation performed to save life or health or where there are serious financial difficulties. In all cases this applies only up to the 12th week of pregnancy, except in an emergency. |
| U.S.A. | Legislation varies widely between States and is changing fast. In many States the law allows abortion only to preserve the life of the woman, in most others it is based on the model Penal Code of 1962, which permits abortion where there is a danger to the mental or physical health of the mother, in cases of rape or incest, or where there is a likelihood of a defective child. Some States have varied this law, e.g. California has no eugenic qualifications: there may be residential qualifications and time limits imposed, which do not usually apply in an emergency. Some States interpret the model code more liberally: Oregon includes medico-social indications similar to the British "environment" clause. New York, Washington State, Alaska and Hawaii now offer abortion on request, performed in all cases by "a duly licensed physician". In Georgia, Texas and Wisconsin, court decisions have invalidated legal restrictions on reasons for which an abortion may be obtained.<br><br>In 1973 the United States Supreme Court ruled that while a woman had no absolute constitutional right to abortion, the laws prevailing in some States did curtail her constitutional rights: that in the first 12 weeks of pregnancy the decision should be for her and her medical adviser alone, but that thereafter the State might regulate the abortion procedure in ways reasonably related to maternal health, including proscribing it after the stage when the fetus might be presumed viable, except where necessary to preserve the life or health of the mother. |



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3. Africa

3.1. In the following countries, abortion is absolutely prohibited by law: Dahomey, Equatorial Guinea, Malagasy Republic, Mauritius, Reunion.

3.2. In the following countries, abortion is permitted only to save the mother's life:

Algeria, Burundi, Central African Republic, Chad, Congo, Egypt [health too in practice], Gabon, Guinea, Ivory Coast, Libya, Mali, Mauritania, Niger, Rwanda, Senegal, Somali, Sudan, Tanzania, Togo, Upper Volta and Zaire.

3.3. In the following countries abortion is legal to safeguard the life and health of the mother or on medical grounds (unspecified):

Botswana, Ethiopia [modelled on the Swiss penal code], Gambia, Ghana, Kenya, Lesotho, Liberia, Malawi, Morocco, Nigeria, Seychelles, Sierra Leone, South Africa [in some circumstances], Swaziland, Uganda [though the practice under the present regime is uncertain].

3.4. The following countries also allow other indications:

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| Cameroons (1967) | Abortion is legal if performed by a qualified person to prevent serious risk to the woman's health or where pregnancy has resulted from a rape verified by the Public Prosecutor's Office. |
| *Tunisia (1965) | Abortion is legal if performed when the mother's health is endangered by pregnancy, or if the couple have five living children. In the latter case it must be carried out in the first three months of pregnancy, and all abortions must be performed by a licensed physician in a hospital or authorised clinic. |
| Zambia (1972) | Modelled on the British Act, including the so-called "environmental clause" and the need for certification by two medical practitioners. |

4. Asia and Oceania

4.1. In the following countries abortion is absolutely prohibited by law:
Burma, Hong Kong, Jordan [though in practice ethical exceptions may be made], Laos, Lebanon [ethical exceptions in practice], the Phillippines, Saudi Arabia, Syria, Thailand, South Vietnam.

4.2. In the following countries abortion is permitted only to save the life of the mother:

Afghanistan [with a reduced penalty where health rather than life endangered], Bahrain, Cyprus, Fiji, Iran, Iraq [also for cases of rape], Kuwait, Pakistan, Yemen.

4.3. The following countries permit abortion on "medical grounds".:

Indonesia, Malaysia, Taiwan.

4.4. The following countries have more liberal legislation:

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| Australia (various: 1969, South Australia) | Basically the same position as in Britain before the 1967 Act but perhaps slightly more liberal. South Australia has introduced an Act like the British one but lacking the clause concerning health of existing children. |
| Bangladesh | The abortion law in Bangladesh was temporarily liberalised up to May 1972, in order to help rape victims of the recent war. |



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| Ceylon | The mother's health as well as life may be considered. |
| Chinese People's Republic | Abortion is permissible for medical, social, ethical and eugenic reasons and is available on request. |
| India (1972) | Pregnancy may be terminated on the authority of one clinician (up to 12 weeks) and 2 (12–20 weeks), where there is a risk to physical or mental health, or possibility of a congenitally defective child. The "mental health" clause specifically includes the results of rape and contraceptive failure. As in the G.B. Act, foreseeable environment may be taken into account. |
| Japan (1948, 1960) | The Eugenic Protection Act provides that at the discretion of the physician sterilisation or abortion may be carried out to prevent the possible transmission of hereditary physical or mental illness or of certain contagious diseases, or where the mother's health could be at risk from the pregnancy (in the case of sterilisation this includes multiparity: in the case of abortion, social and economic circumstances may be taken into account). Abortion is also allowed where pregnancy is the result of rape. |
| South Korea | Abortion legal where pregnancy is the result of rape or incest, to prevent the transmission of genetic disorders (including mental disorders), or where the health of the mother may suffer. |
| Mongolia | Abortion permitted to safeguard the mother's health, where pregnancy is the result of a criminal offence, or to prevent the possible birth of a defective child. |
| Nepal | The mother's health may be regarded as well as risk to life as justifying abortion. |
| New Zealand (1908) | Legal to preserve life and to some extent health: as in Britain before the 1967 Act but including the Bourne case. Slightly stricter than Australia in practice. |
| *Singapore (1969, 1970) | The Termination of Pregnancy Advisory Board (which includes medical administrators, a gynaecologist, a psychiatrist and social workers) may give authority for abortion up to 16 weeks if the environment of the woman justifies it, or if pregnancy is the result of a criminal act, and up to 24 weeks where there is serious risk to mental or physical health or there is a risk of a handicapped child. The operation must be carried out in a Government hospital or approved institution: only citizens and the wives of citizens of Singapore, and women who have been resident for at least four months qualify, though these two last conditions do not apply in an emergency. |

*Notes*

*Where a time-limit is set for abortion on non-medical grounds, explicit provision exists for this to be exceeded where serious medical risks appear.

†There is a procedure for appeal to a higher authority if the first application is refused.

Information is taken from the World Health Organisation's booklet "*Abortion Laws*" (1971) and from the International Planned Parenthood Federation's newsletter "Abortion: a World Survey", March 1972. Notice of subsequent changes in legislation was also provided by I.P.P.F.



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