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Ann Furedi on the dangers of clamping down on 'sex-selection abortions'.

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Imagine this: a newspaper, with an editorial policy opposing abortion, sends a pregnant woman to see a number of doctors intending to expose that doctors break the abortion law. A reporter sets up video footage of a woman saying she wants an abortion on the grounds she has been raped. The doctor agrees. Our paper, *The Yellagraph*, triumphantly publishes the footage as evidence that 'the law has been broken' because rape is not a legal ground for abortion.

Can you imagine the secretary of state for health ordering inspections of every single abortion clinic in England to investigate whether doctors are approving abortion for rape? Can you imagine it taking the Crown Prosecution Service (CPS) more than 18 months to decide whether or not to prosecute the doctor who agreed to the abortion? Can you imagine the shadow attorney general, a Labour MP with a pro-choice reputation, harrying the CPS to prosecute rape-abortion doctors?

No; it would seem crazy. And yet a doctor agreeing to an abortion 'on grounds of rape' would be breaking the law no more and no less than a doctor who agrees an abortion on grounds of sex selection. While it is true that the sex of the fetus is not a legal ground for abortion, nor is rape, or incest, or being 13 years old. Nor is being homeless, or abandoned, or just feeling there's no way you can bring a child into the world. None of these is grounds for abortion *per se* – yet they are all reasons why a doctor may believe a woman has met the legal grounds of abortion as spelt out in Ellie Lee's [recent spiked piece](#).

No doctor ever hears a patient state the legal grounds for abortion as set out in the Abortion Act 1967 (amended in 1990). Women give *reasons* why they want to end their pregnancies, and doctors sign a legal document to confirm that in their honest belief ('good faith') their patient meets the legal test – which is that continuation of the pregnancy would likely cause injury to the mental or physical health of the woman. So, when a survivor of rape requests an abortion, we might expect a reasonable doctor to accede because he believes that his patient's wellbeing will be better served by not causing her to give birth to her rapist's baby. The abortion is not on grounds of rape, but on grounds of its impact on the woman's health.

When a 15-year-old girl says she needs an abortion so that she can sit her GCSEs, a doctor cannot approve her abortion on the grounds that she 'has important exams'; exams are not a ground for abortion. But if he honestly believes *her reasons mean that she complies with the grounds*, then the abortion will be legal. For example, he may believe there will be a risk of injury to her mental health if she does not have the abortion because she faces dropping out of school and being a teenage mum with an unwanted child.

Abortion

The same process is true of all requests for abortion: the woman gives her reasons, the doctor decides on the grounds as set out in the law.

Many doctors would rather the convoluted system of certification was ended and abortion was treated as a clinical matter - perhaps like contraception, available at a woman's request. But they comply with the law nevertheless. Most consider that having an unwanted child is probably going to 'mess someone up' far more than a safe legal abortion would, and so they accept that helping a woman get the help she wants is usually better than refusing to. There is nothing unlawful in this and that's why the Care Quality Commission, after inspecting every abortion clinic last year, could confirm that there was no evidence anywhere of doctors breaking the law when certifying abortion.

So, to get back to sex-selection abortion.... Sex selection, like rape, may not be a ground for abortion, but there is no legal requirement to deny a woman an abortion if she has a sex preference, providing that the legal grounds are still met. The law is silent on the matter of gender selection, just as it is silent on rape and exams.

The big difference is this: most people who think of themselves as liberal and modern-thinking believe that rape, incest, youth, poverty or even general 'unwantedness' are 'good reasons' for doctors to approve abortion; and they think 'sex selection' is a bad reason, which should be stopped.

Today in Britain, it seems more acceptable to say you want an abortion because you don't want to be pregnant than to say you want an abortion because you don't want to be pregnant *with a girl*. Not wanting a baby because it's a girl – whereas you would like a baby boy – seems discriminatory, unethical, 'consumerist' even.

That's why the *Daily Telegraph* entrapment of sex-selection abortions has been almost universally praised, **even** by the prime minister, David Cameron, while our imagined *Daily Yellagraph* entrapment of doctors for rape abortions would seem ludicrous.

Internationally, the controversy over sex-selection abortions is huge, especially in some Asian countries where women are undoubtedly undervalued. In some parts of the world, this **issue** does deserve a wider discussion. But here in Britain, even those searching for the problem of sex-selection abortions are unable to find it.

The shadow attorney general, Emily Thornberry, was ill-advised to dash off a letter to the director of public prosecutions insisting that any progress made in tackling violence against women and girls 'will be completely undermined if the [CPS] is seen to wash its hands of alleged abortion on grounds of sex selection'. Is she claiming that an abortion carried out because the fetus would be born a girl child is an act of 'violence against women and girls'? If so, does she believe that the abortion of a fetus affected by a serious abnormality is an act of violence against disabled people? Politicians' lack of understanding of the legal standing of abortion and when one can be granted was well illustrated by **this letter** to the press.

Parliamentarians and policymakers need to get real about sex-selection abortion and stop playing politics with it. The truth is this. Staff at clinics run by bpas – the British Pregnancy Advisory Service, of which I am chief executive – provide more than a quarter of Britain's abortions and they were particularly targeted by the *Telegraph*; and yet they say that the *only* time a woman walks in and requests an abortion because the fetus is the 'wrong gender' is when she's a journalist.

That is not to say that the gender of the fetus is not sometimes a *factor* in a woman's request. On very rare and specific occasions, it is.

Take the hypothetical case of a woman who discloses that if her family discovers she is pregnant with another girl, they will disown her and she'll lose her home, her husband whom she loves, and her existing children. She doesn't want help to leave her family; she just wants to not be pregnant, now. When politicians like Sarah Wollaston, the Conservative MP, say that 'selective abortion of baby girls harms women', do they really intend that this woman should be sent back home to face the consequences? Should her abortion be refused, even though a doctor thinks it would be better for her wellbeing if he approved it?

Doctors are required to employ the wisdom of Solomon in their application of the Abortion Act. We need either to trust them to exercise their good faith and professional integrity when working with the existing law, or politicians should change the law. But if they change it, they need to be well aware of where they might be heading.

'The road to hell is paved with good intentions' is an aphorism that has been around since the twelfth century, but anyone who truly supports reproductive choice should keep it in mind now. Those calling for tighter controls to prevent sex-selection abortion are utterly mistaken if they believe that would help women.

Supporters of clampdowns on sex-selection abortion are doing as much to undermine the future of women's abortion access as those anti-choice activists who protest outside clinics.

People who wish to restrict abortion for fetal abnormality will cite Emily Thornberry's claim about gender violence, to support their equally wrong claim that abortion on grounds of abnormality is violence against the disabled. Already, hospitals are withholding information from antenatal scans in case pregnant women with a 'wrong-sex baby' opt for abortion. The news that blood tests can reveal fetal sex in early pregnancy has been greeted with caution, lest women try to have such tests for 'the wrong reasons'.

Politicians who wish to claim pro-choice credentials need to advocate the removal of barriers to abortion, not seek to increase them. Those of us who support women's choice have no choice but to comply with its legal restriction. But we have every choice about where we stand in this discussion. We either support women's capacity to decide, or we don't. You can't be pro-choice except when you don't like the choice, because that's not pro-choice at all