

A dissertation comparing and analysing abortion laws in the UK and Poland

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*Should Poland adopt a more liberal approach than the UK and the reasoning for that?*

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## Abstract

This is a critically analysed paper on the laws of abortions as followed in Poland and the UK. This paper aims to find out the pros and cons of these laws and thereby suggests is Poland should consider more liberal approaches to its laws of abortion. Upholding the laws of abortion from the UK, this paper analyses in case the proceedings of the UK are appropriate to be followed by Poland.

The attained results established that due to the strict laws of abortion in Poland, pregnant women are travelling to other states to get abortions done. On the contrary, due to liberal laws of abortions in the UK, the rate of criminalising abortions is increasing in the states of the UK.

However, when the proportionate assessments were done based on the population and the government declared data on the count of abortions in the states, the data from Poland appear to show more abortions than the UK. This leads to the fact that stricter rules cannot restrict abortions, so Poland needs to reform its current regulations. On the other hand, too much liberal attitude is also subject to get prohibited as it can lead to criminalisation.

Under such critical conditions, this paper offers some recommendations to gain proper insight into the futuristic approach towards the laws of abortion.

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## Introduction

The act of abortion can be accomplished through two distinct methods - medication abortion (also called abortion with pills) or procedural abortion (also known as surgical abortion)<sup>1</sup>. Abortion rights have been a matter of debate for more than a half-century, with extensive involvement of research in almost all kinds of domains. According to most of the research works, the factors responsible for restricting abortion are based on strict religious beliefs, added by the religiosity of the respective demography<sup>2 3 4</sup>.

However, the laws of abortion were always under serious series of debates and controversies all over the world, and Europe is no exception. There are significant changes have been marked in these laws all over the world. These laws of abortion are about the regulations related to the termination of a pregnancy<sup>5</sup>. These laws range from the total account of prohibition to partial and total acceptance of termination of pregnancy. There are nations with limitations to gestational<sup>6</sup>, which refers to the duration starting from conception to birth, encompassing the baby's growth and development within the mother's uterus. Based on varied reasons these limitations were imposed 'on request abortion' up to the pregnancy duration of 12 weeks, abortion up to 24 weeks in case of rape or other socio-economic factors<sup>7</sup>. In the case of the European attitude, the political point of view always remained concerned about the health and humanitarian grounds for conducting an abortion<sup>8</sup>. The laws of abortion led by the European Parliamentary Assembly and as approved by the European Court of Human Rights (ECtHR)

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<sup>1</sup> NIH, 2023

<sup>2</sup> Jonason, et al., 2022, p. 2

<sup>3</sup> The PLOS Medicine Editors, 2022

<sup>4</sup> Fiala, et al., 2020

<sup>5</sup> CRR, 2022

<sup>6</sup> Ibid., 2023

<sup>7</sup> Centre for Reproductive

<sup>8</sup> Armstrong, 2022

were determined after the attainment of approval from the member states of the European Council. The core objective is to safeguard the mental and physical health of women and have accessibility towards legal and safe abortion proceedings<sup>9</sup>.

Out of the total count of abortions noted worldwide, almost 45% are marked as unsafe, and are subject to create concerns and serious health issues to women's health, including morbidity<sup>10</sup>.

It is therefore very important that the laws of abortions get reviewed regularly and necessary laws get modified with the advancement of science and the transforming status of women. In consideration of this need for a better room for laws of abortion, this research aims to critically evaluate the abortion laws of the UK and Poland and find out if these laws can be reviewed and modified for the betterment of women's health.

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<sup>9</sup> Fiala, et al., 2020, p. 347

<sup>10</sup> WHO, 2021

## Chapter 1 Abortion Laws in Poland

The laws of abortion in Poland have always been a matter of extensive debate and critical evaluation. These laws are very strict in Poland<sup>11</sup> and for a very long period, abortion was allowed as legal only if the pregnancy has caused due to some criminal activities or only in the case if there is a great threat to the life of the pregnant woman. Chronologically, the laws of abortion in Poland have undergone serious transformations. These transformations can be noted since 1932 when the criminal code of the state allowed abortion based on medical recommendations and factors based on criminal grounds. By 1956, these conditions were revised by the government and abortion gets allowed on social grounds. This year the Government of Poland legalised abortion only in the cases where the reason for pregnancy is due to incest, rape, or serious risk to the pregnant woman. By 1959, the Minister of Health came up with the regulation of considering abortion on request and this law was revised in 1993 as the Anti-Abortion Law: Act on family planning, human embryo protection and Conditions of Permissibility of Abortion<sup>1213</sup>, added by criminalised State of abortions permitted under social grounds. This regulation continued till the year 1993, yet this Abortion law of 1956 attained unrestricted access to innumerable cases of abortions, which were done without gaining any permission from the state and eventually found to surge at a huge range<sup>14</sup>. It was in March of the year 1993 that apart from the former regulations, the Government of Poland implied to allow abortion only in those instances where the foetus is found to be damaged. It was in this year that there was the radical wave of the "1993 abortion compromise" in Poland that referred to the condition where the Conservative Party demanded a complete

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<sup>11</sup> UNDESF, 2017, pp. 324-325

<sup>12</sup> Polish Abortion Act 1993

<sup>13</sup> Poland, 1993

<sup>14</sup> Chazan, 1996, pp. 34-35

ban on the act of abortion and the Liberal Party tried to maintain the prevalent law<sup>15</sup>. The law was meant to be a mid-way solution to protect the threatened condition of the mother and at the same time an attempt to save the life of the unborn child.

Then again in October of 1996, the government of Poland allowed abortions for social reasons<sup>16</sup>. By this year the government liberalised abortion based on social grounds and the following year that is in 1997 the Constitutional Tribunal declared the act of abortion on social grounds as an unconstitutional mode of abortion and again de-legalized the proceedings. Such an abrupt approach in the year 1997 by the Parliament of Poland appeared as a matter of severe criticism. This is an act whereby abortions were restricted only in cases where a threat to the life of the pregnant woman is found to be genuine. Such laws led to innumerable challenges and the under the tag of "1993 abortion compromise", the social and political status of the state remained disturbed for decades.

It was by 2004-5, that the state population remained under constant opposition to the prevalent laws and was unsuccessful in liberalising the static law<sup>17</sup>. However, drafts were passed in case of considering abortion for responsible parenthood. During this phase, this law on anti-abortion gets identified as a deemed undemocratic initiative by the government and consequently fails to generate any kind of impression on the majority population of Poland. Most of the Polish citizens perceived this law as a serious threat to the fundamental rights of women and as such there were oppositions also from the UN Committees as a violation of women's rights. Further, this particular law also resulted in the death of many women who could not avail of medical and surgical proceedings for abortions are emerged as true examples of discrimination and

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<sup>15</sup> Boland, 1993, pp.72-93

<sup>16</sup> Ibid., 1993, p. 35

<sup>17</sup> Nowicka, 2005, 169-170

violation of political and social equality<sup>18</sup>. There is also the concern of Poland participating in the EU meetings conducted during the spring of 2004, and it became very important for the state to maintain the norms of Catholic identity<sup>19</sup>. At the same time, the state was also struggling in upholding its democratic status and the maintenance of gender equality in the state. Under such pressure, Poland decides to declare itself as a secular state. However, this was not possible unless the government of Poland reforms its laws of reformation and out of its communist identity break the stereotype of restricting women from making independent choices.

Some cases bring to notice the severity of the conditions suffered by many women while following the strict laws of abortion in Poland. A few of these cases *Tysi c v Poland* 2007, P. and S. v. Poland 2008, and R.R. v. Poland 2011 are noted below.

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### **Tysi c v. Poland 2007**

The case *Tysi c v. Poland* gets identified as one of the landmark cases led by the ECtHR. This case dealt with concern with the right to have access to abortion in Poland by Alicja Tysi c. Alicja was a Polish woman, who was suffering from severe myopia and was on the verge of losing her eyesight soon. When she realised that she is pregnant she decided to abort the foetus as she felt that it would be difficult for a blind mother to raise a child. However, the state denied her request and refused to give her permission to undergo any kind of such proceedings. It was in the year 2007 that Alicja appealed to ECtHR for justice. As the case followed against the Date of Poland, the judgement of the case stood in favour of the plaintiff. ECtHR declared that Poland's governance is being unfair to the request of the plaintiff and is violating Article 8 of

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<sup>18</sup> Czerwinski, 2014, p. 673

<sup>19</sup> Ibid., 2014, p. 673



the European Convention on Human Rights, which offers the plaintiff an adequate amount of liberty to make decisions regarding her private life. The judgement of ECtHR also stated that the Poland governance does also not offer an adequate amount of medical assistance and treatment facilities to the plaintiff under Article 3 of ECtHR<sup>20</sup>. As such the plaintiff has been facing an inhuman state of mental humiliation and the state is responsible for her condition for degrading treatment. The restrictive abortion laws of Poland were held responsible for restricting the decisions of the plaintiff for her health and the status of her reproductive life. The court awarded the plaintiff EUR 25,000 for undergoing mental trauma and humiliation by the state and awarded EUR 14,000 as legal fees.

In the aftermath of the case, the Centre for Reproductive Rights and the Federation for Women and Family Planning in Poland have jointly submitted a memorandum to the Committee. In this appeal, the organisation stated about the Polish laws on abortions as a continuation of violations of common human standards as declared by the set by the European Court of Human Rights<sup>21</sup>. The CRR argued that the Polish laws on abortion fail to offer any confirmation on the initiation of the prompt procedure for reforming the laws. Moreover, there is no trace of the preferences in favour of woman's health-related concerns, which has been further supported by biased declarations of the medical board of the state. While responding to such allegations of CRR, the Committee of Ministers from the Polish government referred to the follow-ups instructed by the judgement of the European Court. Moreover, the Committee also made requests to CRR about recommendations which can be considered for the favourable condition of pregnant women, especially when it comes to the complicated concerns of abortion, which opens doors for reconciliations and scopes for modification of these laws in future.

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<sup>20</sup> CRR, 2010

<sup>21</sup> Ibid, 2010

Tysi c v. Poland is very significant as it brought to the notice of the world that women in Poland are deprived of their rights and are treated unequally. This case opened understanding about gaining legal protections for Polish women, especially in terms of availing their reproductive decisions and rights. This case established that the laws of Poland should not impede the adequate grounds of availing accessibility to medical care and should not interfere in decisions levelled to personal lives. Eventually, many cases were filed and this case started being the practical tool for advocating the establishment of equal and relevant rights for Polish women.

### **P. and S. v. Poland 2008**

One of the significant cases against the laws of abortion in Poland is noted by the case of P. and S. v. Poland. This is again a case that was led under the jurisdiction of the ECtHR. It was in the year 2012 that this case with two plaintiffs (Mother and Daughter) from Poland was marked for the refusal of parental screening of the foetus by the government of Poland. This was a case that involved a 14-year-old Polish girl who was raped and impregnated. This minor tried to go for an abortion but was denied consistently. The reasons offered in support of this denial are the limited laws of the state that mentions nothing about the abortion of the minor. This minor gets refused by many hospitals. She was also taken forcefully to a Catholic priest for purification. Then there were instances whereby the supporters of the anti-abortion act humiliated her and forced them to live in a juvenile shelter. This gets followed by accusations against her mother by the authorities for trying to coerce her to get an abortion.

As the case comes under the ECtHR, the court finds that there are multiple ways through which the minor has been tortured and the state has violated innumerable humanitarian grounds in

the name of law. There was a case of detention made to the minor who was not for any educational purpose or counselling and this was a violation of Article 5(1) of the court by the Poland government.

These women filed cases against the government of Poland and accused the government of violating Article 8, the right to make decisions for one's personal life. As the case was handled by ECtHR the concerns were all investigated for gaining details on the violation of private life decisions by the government.

The ECtHR made decisions in favour of P. and S. and declared that the state of Poland has indeed violated Article 8. Further, ECtHR found that the decision delivered by the Family Court to detain the pregnant minor and the victim of rape was aimed at separating her from her supportive parents so that the act of abortion can be prevented. There was no other motif found, not even any trace of educational supervision in this case<sup>22</sup>. The report from ECtHR found the approaches of the government authorities toward this minor as a process of constant procrastination, creation of unnecessary confusion, and creating an environment that lacked appropriate counselling and understanding about her situation. This led to the conclusion by ECtHR that the treatment of this minor by the respective healthcare authorities was negligible and there was also the escalation of severity and threats created to the health of the minor under the regulation of Article 3 of the European Convention<sup>23</sup>.

As a reimbursement, the court awarded EUR 30,000 to the first plaintiff and EUR 15,000 to the second plaintiff as a form of respect to healing their non-pecuniary damage. The ECtHR delivered that women should have complete access to their reproductive health. Restrictions in this frontier, like restrictions to parental screening on the humanitarian ground are not

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<sup>22</sup> GHHR, 2013

<sup>23</sup> Ibid, 2013

acceptable<sup>24</sup>. This case stands highly relevant as it generated an adequate amount of awareness of Article 8 among the population of Poland. Demands for healthcare accessibility started increasing within the state and there was consistent pressure on the government regarding the laws related to the reproductive rights of Polish women.

### **R.R. v. Poland 2011**

It was in 2011, that the case entitled 'R.R. v. Poland' led by the ECtHR opened the prevailing concerns of the state regarding the demands for the reformation of the laws of abortion. On the 26<sup>th</sup> of May 2011, the ECtHR declared that the Poland legal proceedings had violated the implication of Article 3, which stands for the right to remain from any kind of inhuman or humiliating treatment, and Article 8, which stands for the right towards the maintenance of private lives of the citizens living under the umbrella of ECtHR<sup>25</sup>. In the R.R. v. Poland case (RR in partnership with Federation for Women in Family Planning, University of Warsaw Law Clinic), ECtHR found that the plaintiff referred here as R.R. was unable to avail any accessibility towards the provisions of legal abortion services within Poland, as the state laws restrict the proceedings of abortion. The plaintiffs wanted to have a parental screening as they wanted to understand if there is any genetic concern in the foetus<sup>26</sup>. They wanted to know if there is any genetic disorder in the foetus when R.R. went for an ultrasound, she was pregnant for 18 weeks and it was the doctor who suggested her parental genetic testing so that few doubts about malformations of the foetus can be clarified. Despite consulting with 16 doctors, and even after undergoing 5 sonograms, R.R. was not being able to gain any referral for

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<sup>24</sup> Ibid, 2012

<sup>25</sup> ECtHR, 2011, pp. 1-2

<sup>26</sup> ECtHR, 2012

performing the medically recommended genetic testing of the foetus. Eventually, she gets admitted to the hospital without a referral and attained testing. After 2 weeks, the test results showed that her foetus had Turner syndrome, which is a rare kind of genetic disorder that happens to females and results in abnormal development. To prevent the growth of an abnormal foetus, R.R. tried to get an abortion. Due to the vehement restrictions on any action on foetal abnormalities in Poland, R.R. was refused medical support. Most of the physicians even misinformed her that it is late for an abortion for R.R. Due to the restrictive laws of Poland, these women were denied by the government. As such the plaintiff, RR was compelled to go to the UK and let the procedure be done.

The court proceedings found that the state of Poland has made a clear denial of legal health services and restricted the scope of well-being to be maintained for a pregnant woman. The identified obligation from the regulations of the state is marked as a limitation in providing reproductive health services to its citizens and the target to restrict the criminalisation proceedings of abortion must get addressed with better proceedings and measures<sup>27</sup>. Under such severity of inhuman conditions, the ECtHR declared that the restrictive laws on abortion by the Poland governance have caused physical, mental and even emotional stress to RR. This has been convicted to be an act against the maintenance of women's fundamental rights and democratic independence in the state. The ECtHR ruling instructed for the reformation of the abortion laws in Poland and instructed the state to generate better accessibility towards legal, safe and secure conditions for pregnant women. As a judgement to the case, R.R. was granted €45,000 as non-pecuniary damages by the Court and the plaintiff was also granted €15,000 for

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<sup>27</sup> Ibid, 2012, pp. 2-3

legal fees. However, the development of Polish governance in this matter remains under the act of procrastination.

Following the thread of these cases, on the 22<sup>nd</sup> of October 2020, the Government of Poland came under the ruling of the Constitutional Tribunal ruling that decided all the cases with foetal abnormalities as a concern against the legal regulations and unconstitutional<sup>28</sup>. Since 90% of the legal abortions were done as reason for foetal abnormalities, the entire process of abortion gets banned and the count of abortions in the state falls drastically<sup>29</sup>. Though from a political frontier, it appeared effective, the decrease in the count of abortions in the state appeared highly controversial. This decision also gets tagged as a "tragic judgment".<sup>30</sup> Social and legal scholars perceived that there are two kinds of tragedies to be marked under such decisions. At first, concerns were raised about the narrowing down of adequate space and accessibility towards legally recognised and safe modes of abortion within the state. Though the government did not ban abortion, still the restrictions on abortion recommendations for foetal abnormalities created serious blockage to the whole process. The next concern of tragedy that gets marked by the decision of the Constitutional Tribunal is the closer made to the jurisprudential participation in affirming security for pregnant women and the foetus. The core hurdle comes in as the doctors started refusing to perform any kind of abortion as it appeared illegal and can add risks to their careers. Moreover, there is also the inclusion of imprisonment of 3 years for all those people who participate in the act of illegal abortion in the state. Thus, irrespective of the core responsibilities of the hospitals to ensure legal abortion services and save lives, the

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<sup>28</sup> Wyrok, 2020

<sup>29</sup> Sas, 2023

<sup>30</sup> Łętowska 2020

participation of the doctors in this process started to get restricted. As a result, people who prefer abortions decided to make it happen in other nations<sup>31</sup> (as in the case of RR stated above).

As per the recent development in the law of abortion of Poland, on 27<sup>th</sup> of January 2021, the Act on Pregnancy Planning of the Republic of Poland gets into implementation as the judgement on Polish Constitutional Tribunal gets active. Under the provision of Article 4a par. 1 (2) of Family Planning and the Protection of the Foetus Act of 1993<sup>32</sup>, Poland attained a decision based on the 1/20 Constitutional Court that unconstitutionality permitting women to gain access to the procedure of abortion, only if there is any foetal abnormality. Paradoxically, under the restrictions proceedings led by the COVID-19 pandemic, Poland has gone stricter on its abortion laws and the scale of gender inequalities is noted to increase in Polish society<sup>33</sup>.

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<sup>31</sup> Swash, 2021

<sup>32</sup> Pizzarossa and Sosa , 2021, pp. 589-590

<sup>33</sup> Todd-Ghe and Shah, 2020

## Chapter 2 Abortion Laws in the UK

It was in the year 1938, that the UK encountered a case, entitled *R v. Bourne*<sup>34</sup>. This case created tremendous ethical, moral and religious concerns regarding the role of a doctor in performing abortion as a legal procedure, for no other reason than to save a life of a pregnant woman. In this case, it was the case of a minor. In this case, Dr Aleck Bourne, a popular gynaecologist performed the procedure of abortion on a minor of 14 years of age. This minor was gang raped by five soldiers and consequently was pregnant. Through this case, Dr Bourne was accused of conducting an abortion under illegal circumstances. However, Dr Bourne came up with his strong beliefs and values towards humanitarian grounds for accomplishing the task of abortion on this minor. He stated that as a doctor it is the foremost priority to save life, and here it is the life of a small girl. He remained open to all kinds of prosecution to justify the scientific and biological needs for abortion in severe cases. He was finally prosecuted under Section 58, Offences against the Person Act 1861 under the governance of the UK and the jury acquitted him. The court agreed to the declarations made by the doctor and the judge confirmed that if a woman wants to be relieved from her pregnancy, then it will not be considered as a legal reason for abortion. However, if there is a medically justified threat to the health of the pregnant woman, then under the discretion of the doctor, abortion can be performed. In the words of the judge,

*“...if the doctor is of opinion, on reasonable grounds and with adequate knowledge, that the probable consequence of the continuance of the pregnancy will be to make the woman a physical or mental wreck and ... in*

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<sup>34</sup> The Lancet, 1938



*that honest belief, operates, [he] is operating to preserve the life of the woman.”<sup>35</sup>.*

This case, R v. Bourne was the most significant case in the creation of abortion laws in the UK and even after three decades it stood firm in being the foundation for the creation of the Abortion Act 1967 (UK).

The laws on abortion in the United Kingdom have attained serious development and steady reformation approaches. In the UK, the original law was recognised by the Abortion Act of 1967. Under this Act, the Government of the UK made it very clear that abortion is very much legal in the state. However, after much medical analysis and speculation, the state has declared that abortions in the UK will be allowed only up to 24 weeks of pregnancy<sup>36</sup>. However, this act was amended in the year 1990 under the supervision of the Human Fertilisation and Embryology Act. According to this act, in the case of humans, as the embryos are at the stage of two cell zygote, the foetus must be considered as "fertilised" and since this happens before 28 weeks of pregnancy, the original gestation limitation for abortion gets decreased to 24 weeks<sup>37</sup>.

On common grounds, the Government of the UK has made abortion a legal act in the states of England, Wales Scotland, and Northern Ireland. However, unlike all the other states of the UK, it is important to note here that in Northern Ireland, the act of abortion was considered legal under Northern Ireland (Executive Formation etc) Act and was implemented only in the year 2019<sup>38</sup>.

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<sup>35</sup> Naylor, 2017, p. 101

<sup>36</sup> Gov. UK, 1967

<sup>37</sup> Gov. UK, 1990

<sup>38</sup> NIO, 2019

## England and Wales

In the case of England and Wales, apart from the restrictions on 24 weeks of pregnancy, the government also allowed abortions after 24 months only in case of severe critical conditions.

As for abortion within 24 weeks of pregnancy, the Abortion Act of the UK considers abortion legal if there is a huge threat to either the mental or physical health of the pregnant woman<sup>39</sup>.

Abortion has been legalised in the UK in case there is a medically noted and substantial detected risk in the foetus of the prenatal child. Any kind of detected mental or physical abnormality in the foetus can be considered for abortion<sup>40</sup>. Abortion in England and Wales is

marked as legit only if the woman is above 18 years of age. In the case of any minor, the UK legislature demands that the parents or any of the guardians of the minor female must be

informed about the proceedings of abortion. However, the minor can also choose to get an abortion without any consent from her parent or guardians, if it is noted to be in favour of her.

Along with all these liberal provisions, the Government of the UK is very strict about its instruction that abortion must be performed only by a recognised and registered medical practitioner. The procedure can be considered after consultation and recommendation attained from a minimum of two doctors dealing with the abortion case. The practitioner who will perform the abortion must accomplish the act of abortion in a hospital or a licensed clinic.

Under this provision, England faced the concerns of justice under the case of BPAS v. Secretary of State for Health<sup>41</sup>. In 2011, the BPAS (British Pregnancy Advisory Service) challenged the Secretary of State for Health regarding the provisions of the Abortion Act 1967.

The case issue was on the intake of the first dose of medication that a woman needs to take if

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<sup>39</sup> Gov.UK, 2021

<sup>40</sup> Gov. UK, 1967

<sup>41</sup> Gov. UK, 2011

she is seeking the procedure of abortion. According to BPAS, this medication is not required and is liable to create a burden on the pregnant woman. Consideration of this practice of medication before abortion at home was requested by BAPS. As the judgement to the case, in the year 2018, the Secretary of State for Health considered this appeal of BPAS to change the practice of taking medication before abortion at home. It is important to note that in Wales and Scotland, the practice of taking this medication at home was already in practice and was much supported by the law of abortion in these states.

### Scotland

Though Scotland stands under the regime of the UK Abortion Act 1967, still abortion was much considered an offensive act in this state. It was since the emergence of the Scotland Act in the year 1998. According to this Act, the Parliament of Scotland decided to reserve the law of abortion to the regulations determined by the UK Parliament. However, in the year 2016, this reservation of the abortion law was delegated to the state, along with the effective persuasion of the Abortion Act of 1967.

Though considered socially offensive, like in England and Wales, the laws of abortion in Scotland observe to remain and maintain legal and liberal status. The compulsion of considering the procedure of abortion by a registered medical practitioner in a licensed clinic or hospital stands highly strict in Scotland. The consent of the pregnant woman who wants to undergo this process is also a matter of legal approval. Just like in England and Wales, abortion is allowed within 24 weeks and after that only in case there is a threat to the mental or physical life of the woman. Two doctor consultations and disabling condition of the child in the womb are also still under the regulations as set by Abortion Act 1967.

The difference that Scotland holds in this matter is the addition of some of the specific laws for minors. Unlike England and Wales, the age of minors in Scotland is marked as 16 years of age and the rest of the regulations remain the same in Scotland as in England and Wales<sup>42</sup>.

Moreover, the Abortion Act 1967 in England and Wales are noted as changes to the Offences Against the Person Act 1861 or a statutory crime, whereas Scotland modified this structure towards common law for making convenient provisions for abortion. Thus, though under the UK regimes, these states follow the same laws on abortion, the ideology of the Scottish population towards abortion is still marked under common law offence<sup>43</sup>. In the recent past, the preference for medical abortion over surgical abortion has been much preferred in the state **Error! Reference source not found.**<sup>44</sup>

In the case of Scotland's stand on the laws of abortion, it is important to check the case of Greater Glasgow Health Board (Appellant) v. Doogan and another (Respondents) (Scotland).<sup>45</sup>

In this case, two midwives, Mary Teresa Doogan and Concepta Wood working for the Greater Glasgow Health Board were involved. These midwives were responsible for supervising the positions of the women in the labour wards. With the increase in the count of terminations in their ward, these midwives started having conscientious objections towards the act of abortion. As per the follow-ups of the faith in the Roman Catholic, good conscience must be supervised and delegated, and for these midwives, it was important to spread good conscience to the rest of the support staff of their ward, and prohibit the increasing rate of abortions<sup>46</sup>.

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<sup>42</sup> CA, 2023

<sup>43</sup> Calkin, 2021, p. 5

<sup>44</sup> PHS, 2021

<sup>45</sup> UK Supreme Court, 2014

<sup>46</sup> Ibid, 2014

They raised their concerns with the hospital authorities through the officially determined grievance procedure. As a response to their grievance, the management authority denied considering the matter. According to them, based on Section 4, Act 1967, the grievance does not get counted under their jurisdiction. It was after this declaration by the hospital authority that the petitioners sought judicial review on the matter to the Session Court<sup>47</sup>.

Though the Session Court was in favour of these midwives, the case went to the Supreme Court in the form of *Greater Glasgow Health Board v. Doogan and Others*. The case was based on the interpretive understanding of the term "participate". The concern is the conflict between participation in the act of abortion and the conscientious objection that challenges Catholic religious convictions<sup>48</sup>. Under Article 9 of the European Convention, the court assessed the protection of conscientious objection and remained limited to the partial declaration of the Article on religious beliefs, rather than also considering the philosophical beliefs as mentioned in the same Article 9. to the UK Supreme Court upheld the decision of the Session Court and declared the good conscientious objection of the midwives as worth to be considered.

During the pandemic, all these three states allowed the usage of mifepristone to make abortion possible at home. However, in England and Wales, the gestational limit for abortion was within 10 weeks and in Scotland it was for 12 weeks<sup>49</sup>.

### **Northern Ireland**

Against the implementation of the much liberal Abortion Act of 1967 in the UK, the regulations for implementing abortion in Ireland are different. Under the provisions led by Health

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<sup>47</sup> Ibid, 2014

<sup>48</sup> Ó Néill, 2015, pp. 247–251

<sup>49</sup> Ibid, 2021, p.6

(Regulation of Termination of Pregnancy) Act 2018, and after the attainment of approval from both Houses of the Oireachtas, the practice of abortion gets legalised in Ireland<sup>50</sup>. Abortion was allowed in Ireland, if the pregnant woman is sick, or in case there is a serious threat to her mental or physical health. However, instances of pregnancy through rape, condition by incest or any kind of diagnosis of fatal foetal with abnormality, are not considered as conditions of abortion in Ireland. Moreover, even if there are medical concerns about the health of the baby in the womb, the practice of abortion is not marked as legal in Ireland<sup>51</sup>. Further reports declare that the Act on Health: Regulation of Termination of Pregnancy, as established in 2018 in Ireland, has been made effective under legislative sections 9, 10, and 11. These are the sections that are involved in determining the cases related to abortion and the provisions for accessibility in general. However, with closer investigations, it has been marked that there are a notable amount of uncertainties identified in terms of the Multi-Disciplinary Team (MDT) process, added by the scopes for appeals made for the abortion process<sup>52</sup>. On specific notes, the act of diagnosing and thereby releasing the certificate on the risks involved in the pregnant woman and needs for an abortion, are mostly found to be concerning mental health. These derivations established that the challenges towards physical concerns are less and the results of diagnoses and certification on fatal foetal abnormality (FFA) are subject to doubts and the relevant amount of complexity of the practice of abortion in the state<sup>53</sup>. As a result, there is a serious fall in the rates of fertility, as the abortion rules are very strict<sup>54</sup>.

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<sup>50</sup> BBC, 2019

<sup>51</sup> Ibid, 2019

<sup>52</sup> Grimes, 2023

<sup>53</sup> Ibid, 2023

<sup>54</sup> Ireland, 2023

There is also the case of *Roche v. Roche* (2009), which is marked as significant in determining the decisions of the Irish Supreme Court in terms of perceiving the act of abortion in the state. This case is about Mary Roche and her husband Thomas Roche. While giving birth to her son, Mary had to undergo surgery to remove a cyst in her ovary. She lost a part of her ovaries. In July of 2001, the couple considered In-vitro fertilization (IVF) and had six viable embryos, three of which were successful for pregnancy and the rest were frozen for the future in the Sims Clinic. However, by the end of her second pregnancy, Mary and Thomas's relationship ended up in separation. It is after this separation when Mary wanted to use the frozen embryos for her next pregnancy, Thomas refused to give consent. Amidst this conflict, in 2005, the Sims Clinic notified the couple about the non-receipt of payment for the storage of the embryos since 2003 and as such due to the breaching of the storage contract the Clinic can cancel its storage. To save the embryos, Mary initiated judicial proceedings. The judgement of the high court stated the embryos as not "unborn" and thus there is no violation of Article 41 on safeguarding prenatal children. By upholding the ruling led by the High Court on the instance of frozen embryos, the Supreme Court declared them as "unborn" entities and defined them under Article 40.3 of the Irish Constitution<sup>55</sup>. The decision of the case by the Supreme Court, the frozen embryos in Ireland will not be considered as any kind of life form as they are protected within the womb of a pregnant woman<sup>56</sup>. With the increasing practice of In-vitro fertilization (IVF) in Ireland, the legal complexities related to frozen embryos were determined specifically through this case.

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<sup>55</sup> The Supreme Court, 2009

<sup>56</sup> Ibid, 2009

### **Liberal Laws need Decriminalisation**

While understanding the abortion laws in the UK, with the variations as observed in England, Wales Scotland, and Northern Ireland, it can be well stated that there are least restrictions bestowed by the Abortion Act of 1967. Though the condition of Ireland stands different from the rest of the UK, still there are many considerations for liberal initiatives. It is important to note here that though the Abortion Laws of the UK are much more liberal and flexible, still there are concerns regarding the illegal usage of this right. The involvement of criminal sanctions for the procedure of abortion has been well detected in the past few years<sup>57</sup>. However, the demands to decriminalise the act of abortion have increased and the movement is gaining much attention from lawmakers.

It is critical to note here that if the UK government decides to review its legal regulations on the process of abortion, then there will be a serious global impact on the entire process of offering independence to women about their reproductive and pregnancy choices. Within the UK, Northern Ireland already decriminalised the proceedings of abortion in 2019. This was the constant criticism delivered by CEDAW Committee, which regarded Ireland's restrictions to be addressed by the UK government.<sup>58</sup> There are constant efforts led by England and Wales regarding the efforts to decriminalise increasing rates of abortions and to repeal the Offences Against the Persons Act of 1861. However, in Scotland, the proceedings to decriminalise abortion are yet to gain momentum. As for Ireland since abortion is yet to get the liberal aura the acts of decriminalisation have not attained much popularity in the state.

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<sup>57</sup> RCOG, 2022

<sup>58</sup> CEDAW, 2018, para 85



The main arguments in favour of decriminalisation include the view that prosecution is not a suitable response for individuals seeking or providing healthcare<sup>59</sup>. In England, pregnant women have been convicted for purchasing medications related to the process of abortion and were asked many questions<sup>60</sup>. Moreover, the lingering threat of criminalisation has impeded efforts to implement patient-focused care, causing delays and lengthy court proceedings<sup>61</sup>. Before the pandemic, abortion providers attempted to transit self-managed abortion, which was hindered by anti-choice organizations who opposed the perceived "relaxation" of the Abortion Act 1967. The Society for the Protection of Unborn Children (SPUC) challenged an amendment to the Abortion Act allowing abortion through medication at home, as it appears as an inappropriate approach under the Act<sup>62</sup>. This challenge was brought before the Scottish courts and ultimately, the court ruled in favour of the Scottish Government's use of the amendment powers, both in the initial hearing and the appeal.<sup>63</sup> However, the implementation of the amendment was delayed until the conclusion of the court proceedings.

Moreover, evidence suggests that decriminalising abortion does not result in increased numbers of abortions.<sup>64</sup> In a way, irrespective of many liberal laws the concerns of criminalisation of abortion in the UK have raised many debates and controversies. The UK citizens in favour of the perspectives on pro-life contradict the liberalised laws of abortion in the UK and consider it a criminal offence<sup>65</sup>.

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<sup>59</sup> Proudman, 2022

<sup>60</sup> Ibid, 2022

<sup>61</sup> Sheldon, 2020

<sup>62</sup> UK Parliament, 2020

<sup>63</sup> Court of Session (Inner House), 2019

<sup>64</sup> Engender Scotland, 2022

<sup>65</sup> UK Parliament, 2020

### Chapter 3 Comparing Abortion Laws in the UK and Poland

From the derivations noted in Chapter 1 Abortion Laws in Poland and Chapter 2 Abortion Laws in the UK, it is evident that the abortion laws in the UK are much more liberal than they are in Poland<sup>66</sup>. There seems to be a huge difference in approaching the idea of abortion in these nations. Though these laws in the UK stand for a united approach to all the four states under the administrative regime of the UK, still there are relevant differences in the way they are being approached, especially by Ireland. Modification in the laws of abortion has been modified by the death of Savita Halappanavar, a dentist, in the year 2012. On October 21, 2012, Savita Halappanavar, who was 17 weeks pregnant, presented herself at University Hospital Galway due to back pain. She was discharged without a diagnosis. Later that day, Savita returned to the hospital, experiencing lower pressure and describing a sensation of "something coming down."<sup>67</sup> A medical examination revealed the protrusion of the gestational sac from her body, indicating an inevitable miscarriage. Consequently, she was admitted to the hospital. In the early hours of October 22, shortly after midnight, her water broke, but the foetus was not expelled. On October 23, Savita discussed the possibility of abortion with her consulting physician. Regrettably, her request was promptly denied following the prevailing Irish law at that time, which prohibited abortions when a foetal heartbeat was still detectable. Subsequently, Savita developed sepsis, and despite medical interventions, she experienced a cardiac arrest at 1:09 AM on October 28<sup>68</sup>. Tragically, she passed away at the age of 31. As

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<sup>66</sup> Bucholc, 2022, pp. 75–79

<sup>67</sup> Enright, 2018

<sup>68</sup> Ibid, 2018

Savita was denied an abortion, she died tragically. The aftermath of Savita created nationwide debates and protests against the abortion legislation of Ireland.

However, when it comes to Poland the restrictions are much more severe than all the nations together in the UK. The foremost difference is in the gestation limitations in these nations. Under the provisions of the Abortion Act of 1967, the gestation period for abortion has been marked as 24 weeks in the UK, whereas in Ireland it is 12 weeks. As for Poland, this period is for 12 weeks, which is the same as the one considered by Ireland. Though Poland is much stricter with its laws on abortion, Ireland under the UK also appears to remain conservative in this matter.

One of the major differences between these nations is in case of the attitude that they carry towards the concerns of abortion. Among all the other nations within the UK, Ireland stands closer to the attitude of Poland, in this matter. In 2018, the Irish parliament enacted legislation that legalized pregnancy termination within the first twelve weeks and in circumstances where the mother's health is at risk. This development marked a significant departure from Ireland's previously stringent abortion laws, which were enforced through a 1983 constitutional amendment that effectively prohibited the practice. The untimely demise of Savita Halappanavar in 2012, whose emergency abortion request was denied, sparked a resurgence of public discourse and demonstrations, ultimately culminating in a nationwide referendum. The referendum, successful with a 66 per cent majority, led to the repeal of the amendment. Consequently, in 2019, abortion was legalized in Northern Ireland, a constituent part of the United Kingdom, under the extension of the UK's 1967 Abortion Act. This extension granted doctors in England, Scotland, and Wales the authority to perform abortions.

Referring to the Constitutional Tribunal of 2020 in Poland is much indication that the action of contraction under legal position has attained a tentative closure<sup>69</sup>. As such there is a serious curtailment in considering the regulations led by the Human Rights Commission of the UN and International Law meant for the welfare of women. A clear count of gender inequality gets reflected by the restrictive approach of the state in the persuasion of the laws of abortion. Further violation of the democratic and fundamental rights of women towards their health and reproductive choices seems to get ignored by the state. Earlier, permission for abortion was much allowed in case of criminal activities, a threat to the life of a pregnant woman, or issues of foetal impairment. However, since 2022 the reason for foetal abnormalities gets tagged as illegal by the Polish government. The reports led by BBC and The Guardian offered controversial declarations about these laws. According to these reports, Rafał Trzaskowski, the mayor of Warsaw, expressed opposed this legal proceeding of the government and stated in favour of women taking the streets for the reformation of this law. The Women's Strike movement revolted against this law and protested this diplomatic kind of ban initiated by the government of Poland. They even wore green headscarves to express their support for the movement of Argentina to legalise abortion in the country<sup>70</sup>. On the other hand, some people advocated this ban and stated that they are in favour of the human rights of the unborn child. Karolina Pawlowska, Ordo Iuris International Law Centre declared this decision of the Constitutional Tribunal as a significant step in maintaining the ethical and moral value system of Poland in saving humans of all kinds<sup>71</sup>. According to her, this law will equalise the practice of abortion for sick and disabled children and will be a true reflection of the Polish constitution

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<sup>69</sup> Ibid, 2022, p. 85

<sup>70</sup> BBC, 2021

<sup>71</sup> BBC, 2021

being in favour of the UN Convention<sup>72</sup> treaties<sup>73</sup> made towards the process of safeguarding the rights of children of all kinds. While Poland already has some of Europe's strictest abortion laws, with around 1,000 legal terminations performed annually, reports indicate that approximately 200,000 women have turned to illegal abortions or travelled abroad for the procedure since the Constitutional Tribunal's ruling in 2020<sup>74</sup> <sup>75</sup>.

These are the aspects which are still treated with many liberal and legal facilities in the UK, considering Ireland as an exception. Pregnant women in the UK do not need much permission for abortion. Even in the case of a minor, which is below 18 years of age in England and Wales and 16 years in Scotland and Ireland; though there is the need to inform the parent or the guardians of the minor, still the minor can undergo the proceedings without informing any of them. The only clause here is the medically recommended need for abortion in the minor.

There is a sense of freedom and independence that appears very clear when it comes to the laws of abortion in the UK. women are allowed to take independent decisions regarding their health and reproductive choices. It is important to note here that for every single abortion, the UK laws are strict about the involvement of medical support, and mark it as a mandatory matter in every single case of termination of pregnancy. However, irrespective of such independence and a sense of freedom for women in the UK, there is also a darker side of this liberal attitude toward laws for abortion in the UK. As reported by RCOG and FSRH, it is the increasing rate of criminalisation in the state. Women in the UK are found to be vulnerable to criminal activities, whereby they get pregnant and in the fear of aftercare and liabilities abortion appears

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<sup>72</sup> UN Convention Article 2- '*All children possess fundamental rights that should not be subject to any form of discrimination based on their race, colour, sex, language, religion, political or other opinions, national, ethnic or social origin, property, disability, birth, or any other status of the child or their parents or legal guardians*'.

<sup>73</sup> OHCHR, 2015

<sup>74</sup> BBC, 2020

<sup>75</sup> Swash, 2021

to be the most convenient path in the state. The current punitive approach not only hinders doctors from delivering supportive care but also restricts women's autonomy in making choices regarding their bodies<sup>76</sup>.

To prevent the increasing count of such instances of pregnancy loss as a matter of healthcare concern in the UK, the government need to check the aftermath of the potential modes of criminal offences behind every abortion. According to RCOG and FSRH<sup>77</sup>, the UK Government must take necessary steps and incur stricter policies to decriminalise abortion in all its states. While referring to the legal framework for the proceedings of abortion, it is important that the key determinant should be counted as per the total number of abortions accomplished in the state. It is very necessary to keep records of the impacts of abortions as it can be considered for the better conditions of pregnant women seeking abortions in future<sup>78</sup>.

In terms of comparative critical evaluations of the laws of abortion in the UK and Poland, the data-driven results have established that in proportion to the populations of the UK and Poland, the count of termination of pregnancy in the UK is comparatively much lower than that of Poland. A more retrospective evaluation based on the declarations made by the UK and the Poland government brings to the notice that within the year 2009 to the year 2018, an average of 190,733.1 terminations were recorded in the government documents of the UK<sup>79</sup>. Out of these declarations, 2820.9 were counted for foetal impairments. However, in the case of Poland, the estimated average number of terminations was declared in the documents as 858.6, within which 820.7 were detected to be with foetal impairments<sup>80</sup>. These data refer to the fact

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<sup>76</sup> RCOG and FSRH, 2022

<sup>77</sup> Ibid, 2022

<sup>78</sup> Ibid, 2022

<sup>79</sup> Zaręba et al., 2021

<sup>80</sup> Ibid, 2021

that the small population of Poland is having more termination of pregnancies than the terminations are happening in the UK. As such it can be marked that the implementation of strict regulation by the state is not the real solution for preventing abortions in a country. The differences among these nations are the restricted laws of abortion in Poland, as against the liberal legal facilities in the UK. As the data specifically noted that irrespective of liberalising abortion accessibility, the population of the UK remained proportionately lower in range than that of Poland. As such it is somewhat agreeable that it is not the liberalisation or stricter approach to the laws of abortion, but the kind of safe and aware environment that makes it effective in generating better health conditions for pregnant women in the UK.

Referring to the cases of *Tysi c v. Poland* 2007, *P. and S. v. Poland* 2008, and *R.R. v. Poland* 2011 in Poland, the common element detected in all these cases are humiliation as caused to pregnant women. The laws are strict and pregnant women are restricted to have access to abortion. Their fundamental rights were restricted and they are treated inhumanely in many cases. The intervention of religion in this matter too has been marked as severe and humiliating. The threat to the physical and mental health of these pregnant women was much evident in these cases. These cases also revealed that the state of Poland is more concerned about the maintenance of its rigid ideologies rather than the health conditions of the applicants.

On the other hand, the cases from the UK, *R v. Bourne* (England) 1938, *Greater Glasgow Health Board (Appellant) v. Doogan and another (Respondents)* (Scotland) 1967, *Roche v. Roche* (Northern Ireland) 2009, *BPAS v. Secretary of State for Health* (England) 2011; offer complications in case of abortion laws, yet they are with least humiliations as noted in the cases from Poland. These cases in the UK are more emotional and were with the least threat to the physical conditions of the applicants. The concerns are more social rather than creating a threat

to the lives of the petitioners. The cases from the UK make it evident that the liberal abortion laws are effective in building enough transparency and goodwill among the population. Also rather than delivering rigid declarations the Gov. of the UK maintains more amicable ways to treat the complicated cases related to abortions.

This amicable approach of the UK Government is something that should be followed by the governance of Poland. However, at the same time, a liberal approach like the UK is not recommended for Poland, particularly in reconsidering the laws of abortion. The kind of legal threats that Poland has created for pregnant women seeking abortions must get rectified immediately account. The Constitutional Tribunal ruling 2020 must get eliminated as it is only creating havoc on the current conditions and restrictions of the state<sup>81</sup>. The declaration of foetal

impairment as unconstitutional is stated to be unacceptable for many social activists and research scholars in this particular domain<sup>82</sup>. The uproars are against this ruling and are designated to be symptomatic of the humanitarian declarations as led by the European Convention. The initiation of conservative as well as nationalist political dominance in Poland has resulted in such a declaration and it has created tremendous challenges to the practice of human rights within the state<sup>83</sup>.

Such kind of ruling also reflects justifies the increasing count of people travelling to other nations for abortions, from Poland. The results are getting evident as the government declared reports from Poland have established a drastic fall in the count of abortions in the state. The number of legal abortions performed in Poland has dropped from 1,110 in 2020 to just 107 in 2021, with 75 of those abortions being carried out before a controversial court ruling went into

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<sup>81</sup> Hussein et al., 2018

<sup>82</sup> Pizzarossa and Sosa, 2021, pp. 588-591

<sup>83</sup> Ibid, 2021



effect on January 27, 2021<sup>84</sup>. The ruling prohibits abortion due to the diagnosis of a birth defect and only permits abortion if the pregnancy threatens the mother's life or health or is the result of a criminal act, such as rape or incest<sup>85</sup>. Activists claim that the figures demonstrate the difficulties rape victims face in obtaining an abortion in Poland<sup>86</sup>. Despite Poland's low number of legal abortions, it is estimated that tens of thousands more take place outside the law. The ruling has been unpopular with the Polish public, with many calling for a return to the pre-ruling abortion law or even further liberalization<sup>87</sup>.

On a critical note, the prospective of the laws of abortion in Poland is going to face innumerable debates and controversies. Though in 1993, the state considered abortions only in case of any threat to the life of the mother or the foetus and the criminal factors of pregnancy; still the accessibility to abortion proceedings was restricted and limited under religious and socio-cultural norms. Things got worse with the recent declaration on restricting abortion by declaring foetus impairment as illegal. This restriction of October 2020, was headed by conservative judges of the ruling Law and Justice (Prawo i Sprawiedliwość or PiS) party, whereby the banning of one of the core factors for abortion led to a country-wide rage. However, under Catholic religious influences and socio-cultural practices, some parts of the Polish population support this law. As of now, irrespective of many protests and oppositions, there is no sign of considering any modification by the Polish government. This ignorant attitude of the government can be the cause of its replacement in future. However, changes of any kind can also offend the religious class of the state, which is socially very strong.

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<sup>84</sup> Tilles, 2022

<sup>85</sup> Zaręba et al., 2021

<sup>86</sup> Zaręba et al., 2021

<sup>87</sup> Tilles, 2022

In the case of the future prospects of the laws of abortion in the states of the UK, it is evident that apart from Ireland, the rest of the states are considering liberal approaches to the accessibility of abortion. Unlike Poland, the political and social ideologies in the UK are much in support of each other. However, activists are constantly asking for decriminalising of the laws of abortion. On the one hand, women in the UK are offered complete freedom in their health and reproductive choices, and on the other hand, the increasing count of abortions is making the activities restless the whole scene. Pro-choice<sup>88</sup> and pro-life<sup>89</sup> groups are much more active and strict about their positions on abortion laws in the UK, and it is about the government proceedings in maintaining a balance among their preferences.

Under both these circumstances, the core concern is to generate awareness among teenagers and the populations in general, so that unwanted pregnancy can be avoided. The laws of Poland need to get reviewed and the liberal attitude of the UK should be considered to some extent. However, even the UK needs to understand that its liberal attitude towards abortion should be somewhat curtailed to restrict the cases of criminalisation. The recent declaration on restricting abortion even in case of foetus impairment should be abolished at the earliest and the regulations of 1993 should be followed by the Polish state. In consideration of the increasing count of people travelling to other states for abortion, the Poland government need to generate safer, trustworthy and more convenient access to the justified cases of abortions in the state. The critical evaluation as stated in Chapter 2 and 3, do not suggest that Poland should follow the UK's laws of abortion, but suggest that it is important for the state to build a transparent relationship with its citizens, and thereby let the condition of the pregnant women get handled and supported in a better way.

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<sup>88</sup> advocating women's legal right to make a choice on abortion

<sup>89</sup> opposing abortion and the state of euthanasia

## Conclusion

The United Kingdom was the pioneer in Western Europe to legalize abortion. By following the original Abortion Act of 1967, all four states of the UK- England, Wales, Scotland and Ireland structured their laws of abortion with little variations. Though the laws in Ireland were stricter than its contemporaries, still in May 2018, the country held a referendum to repeal the abortion ban outlined in the 8<sup>th</sup> Amendment. The bill was subsequently signed into law in September of the same year, and abortion services have been available since January 2019. However, it is important to check on the increasing count of criminalisation of abortion in the UK, which is also marked as a condition due to the liberal approach to these laws.

On the contrary, because abortion on request is illegal in Poland, the official data only captures a small portion of the actual number of abortions being performed. Abortion legislation and statistics in Europe provide insight into the legislative, cultural, and religious values of societies, as well as the socio-economic well-being of women. More religious individuals, particularly those belonging to Abrahamic religions, are more likely to oppose abortion. Under such circumstances, as over 90% of the population in Poland identifies as Roman Catholic, it is probable that supporters of the recent abortion ban in the country are religious<sup>90</sup>.

Thus when it comes to answering, *Should Poland adopt a more liberal approach than the UK and the reasoning for that?* the government of Poland must create better relationships with its population, especially those under physical and mental threats, pregnant women in particular. The way the UK government responded to all of its cases appears more acceptable on social,

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<sup>90</sup> Jonason, et al., 2022, p. 2

political and humanitarian grounds. However, this is not the case in Poland. The rude, strict and ignorant attitude of the government towards pregnant women seeking abortion should change. Since government data has already established that strict rules are not effective in lessening appeals for abortion in the state, the Poland government should restructure its laws of abortion and need to adopt more liberal approaches, as in the way the UK government consider. However, it is also important to note that Poland should not get completely liberalised like the UK, as the same can lead to the consequences of criminalising abortions, as noted in recent years in the UK.

As a recommendation, it is suggested that initially, the regulations of Poland should get somewhat flexible and the rules of abortion in the UK must get checked to prevent an increasing count of decriminalisation. As both nations can adopt some of the features from each other, attempts should be made in the establishment of such laws which prevent the criminalisation of abortion and decriminalisation to remain focussed the pregnant women seeking an abortion. The governments should come up with laws that can ensure an adequate amount of trust in these women and should not fear any legal penalties, especially in a condition which gets detected as an essential condition for healthcare.

In both these nations, the UK and Poland the government need to understand that the laws must protect their citizens from any criminal offence and thus rather than creating situations for criminalising abortion, as in the UK, and unlike Poland, the state should offer adequate healthcare awareness and support system to the pregnant women. Laws of abortion must get well accompanied by laws decriminalising abortion, whereby it would be categorised as a

medical procedure subject to regulatory and professional standards, similar to other healthcare interventions, rather than criminal sanctions<sup>91</sup>.

The services related to abortion, particularly in Poland must remain under properly managed medical support. However, the focus should shift from considering abortion as a criminal matter to recognizing it as a health issue for women, and eventually for doctors and other healthcare professionals involved.

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<sup>91</sup> Ibid, 2022

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