

A Short Guide to responding to the NIO Consultation on abortion

<u>What is this public consultation about?</u> The law on abortion in Northern Ireland changed dramatically on 22 October 2019. Much of the old law was repealed leaving no protection for unborn children until they are capable of being born alive. Right now there is a public consultation in Northern Ireland on the future of abortion services within this new legal framework.

You can <u>read the public consultation here</u>. <u>The deadline is 11:45pm on 16 December 2019 so time</u> is short. This is a critical moment where your voice can shape this consultation.

<u>Why should you respond?</u> The proposals contained in this consultation go much further than is even required by this new law. They include 'unrestricted access' to abortion up to 14 weeks, abortion on the grounds of the perceived 'quality of life' of a child with a disability and only limited conscientious protections. Your voice could mitigate some of the impact of these proposals.

How can you respond? We understand that responding to public consultations is new for many people so we have produced this short summary of key points. You can:-

1. <u>Respond using the online survey here</u>.

2. Alternatively answer the questions in a letter or email and send to <u>abortionconsultation@nio.gov.uk</u> or send in the post to <u>Abortion Consultation, Northern Ireland Office</u>, <u>Stormont House</u>, <u>Stormont Estate</u>, <u>Belfast</u>, <u>BT4 3SH</u>

Some important preliminary points

- 1. This is a guide. We are not telling you how to respond. If you agree with some of the key points we raise, it might be helpful to put some of them into your own words.
- 2. There are two main approaches being taken by pro-life groups and those who care for both women and their unborn children. Everyone opposes the introduction of the new law on abortion through the Northern Ireland Executive Formation Act and will disagree with many of the proposals in this consultation. Some groups are re-stating their opposition to abortion and the law change and have decided not to engage with the specific issues of gestational limits, grounds for abortion or how it will be regulated. We respect this approach and share the strongly held belief on the infinite vale of human life.

We also continue to oppose the new law and the proposals in this consultation.

<u>However, the law has now radically changed</u>, and as much as we disagree, this consultation is <u>not</u> about whether the law should have changed or <u>whether abortion should be allowed</u>, but <u>how it will</u> <u>be regulated</u>. <u>Therefore we continue to warn against the changes</u> and engage <u>in an attempt to</u> <u>mitigate against the effects of the changes</u>. Nothing in this guidance is to be understood as Both Lives Matter supporting or legitimising abortion in the instances contained within the proposals.



Here are some key points we would encourage you to make in your own words if you agree.

- We care for both lives and oppose the new law.
- We warn against the impact of these legal changes and consultation proposals on individual women and unborn children and our culture at large.
- The proposals in this consultation go far beyond the legal requirements of the new legislation. Don't go beyond what the law requires.
- We engage to reduce the impact of this legislation as far as possible.
- We seek to increase safeguards for women and unborn children.
- Don't allow 'unrestricted access to abortion'.
- Make gestational limits as low as possible.
- Introduce a 'cooling off' waiting period of at least 3 days between consultation and abortion procedure.
- Make abortion on the grounds of 'health' meaningful. Additional wording should be added to raise the bar for abortion on every 'health' related ground. Something like a risk of real and serious, immediate and specific harm to physical or mental health. Wide and vague 'health' grounds should not become a back-door to abortion on request.
- Make the regulatory bar to end a human life as high as possible.
- Don't pave the way for high-street, back-street and DIY home abortions by 'Facetime'.
- Two doctors to certify abortions, not one undefined healthcare professional.
- Don't discriminate against babies with disability. Support families and stop stereotypes.
- Make detailed data collection compulsory and transparent.
- Protect conscience robustly. Don't create a glass ceiling in management.
- Protect women from harassment but don't punish peaceful protesters or those offering help.
- Provide real alternative choices to abortion for women and their families.
- Err on the side of safeguarding life.
- Both CARE and Evangelical Alliance, as founding partners have produced further more detailed guidance which you can access <u>here</u> and <u>here</u> respectively.



Question	How BLM will answer	Some key points you might like to make
1a & 1b	No and No	 Oppose this law and these consultation proposals. Gestational limit should be as low as possible. No 'unrestricted access' to abortion. Abortions for 'rape and incest' could occur under a ground of a risk of real and serious harm to physical or mental health with additional certification as in other European Countries. Introduce a waiting period between counselling and abortion.
2	Yes	 However the certification should be comprehensive, not limited. Abortion ends a human life. It is important that detailed data is recorded and collected in every case.
3a & 3b	No and No	 Abortion on the grounds of health should be should be confined to the lowest possible gestational limit and risk to real and serious harm outlined in response to question 1.
4a & 4b	No and No	 Don't discriminate against babies with disability. Support families and stop stereotypes.
5a & 5b	5a No and 5b Yes	 Protect women's lives and health but don't use wording that frames every pregnancy as a risk to life.
6	No	 Set the highest safeguards possible. Two doctors, not one healthcare professional.
7	No	 Set the highest safeguards possible. Don't pave the way for high-street, back-street and DIY home abortions by 'Facetime'.
8	Yes	Restrict all surgical abortions to acute hospitals.
9a & 9b	9a Yes and 9b No	 Abortion ends a human life. The highest safeguards possible should be put in place. Every abortion should be certified by two doctors.
10	Yes	Data collection should be compulsory, comprehensive and transparent.
11	No	Statutory conscience protection is vital – see Q12.
12	Yes	Protect conscience robustly in all roles. Don't create a glass ceiling.
13	No	 Protect women from harassment – use existing law. Don't punish peaceful protesters or those offering help.
14	Yes	Only if exclusion zones are introduced.
15	This is the place to make your own comments	 State disagreement with the imposition of the law and the content of these proposals which go far beyond the law. This consultation is unfair – trying to exclude the ethical questions around abortion. No mention of statutory support services for women in crisis, counselling, adoption etc. At least equivalent funding to that spent on abortion be given to life-affirming pathways. No proposals to stop sex selective abortion or to prevent coercive abortion. Make as many of your own points or share as much of your own experience as you like.