

Christian Medical Fellowship

2nd September 2014

Dear Sir/Madam,

We are writing with regard to the proposed amendment put down by Mr Jim Wells MLA to the Justice Bill in Northern Ireland, Clause 11a (Ending the Life of an Unborn Child).

Christian Medical Fellowship (CMF) was founded in 1949 and is an interdenominational organisation with over 4,000 British doctor members in all branches of medicine. A registered charity, it is linked to about 70 similar bodies in other countries throughout the world. Of these, approximately 350 are members in Northern Ireland.

We welcome, and fully support, the proposed amendment Clause 11a, for the following reasons:

The abortion law in Northern Ireland (NI) is more restrictive than the equivalent law in England and Wales. A termination of pregnancy in NI is lawful only where the continuance of the pregnancy threatens the life of the woman, or would adversely affect her physical or mental health in a manner deemed to be real and serious and permanent or long term. Fetal abnormality is not recognised as grounds for termination of pregnancy in NI.

As a result, legal abortion is rare in NI. Official statistics show the number of abortions performed annually to be remarkably constant at about 120 (1). It is clear that the NHS has capacity in NI to offer the necessary abortion services and **there is no evidence that private companies or charities are needed to meet existing levels of demand.**

The private charity which is offering abortion services in Northern Ireland, Marie Stopes International (MSI), has stated that they will operate within the law in Northern Ireland. Their services are not free - they charge £450 to conduct a medical termination – and it is difficult to see why a woman who fulfilled the criteria for a legal and free termination of pregnancy through the NHS would need to opt for a private provider.

MSI representatives have been consistently coy about the number of abortions they have performed at their Belfast clinic and confidence that they are truly operating within the terms of the law is therefore undermined. It is also clear that MSI is committed to growing revenue and one way in which they seek to do so is by increasing the number of abortions that they perform (2). It is recognised that MSI also offer other services, particularly in the area of sexual health, and that they would seek to enhance revenue generation in those areas as well.

Despite being a charity, MSI operates with a business ethos. They have an aggressive marketing strategy that 'focuses on demand creation for our reproductive health products and services using recognised communication techniques and channels'. (3) Their mission is to 'work to transform policy environments and increase access to safe abortion and family planning services globally' (3), in part by advocating legislative change that would reduce policy restrictions.

Even if the NHS in NI lacked capacity to provide necessary abortion services, we suggest that **MSI would not be a suitable choice of 'partner'** to make up the difference, **because of their stated intention to promote a more liberal policy on abortion that is at odds with the law, culture, values of the people in NI.**

We therefore strongly support Clause 11a (Ending the Life of an Unborn Child) of the Justice Bill in NI.

Yours faithfully

Philippa Taylor

Head of Public Policy
Christian Medical Fellowship

1. http://www.dhsspsni.gov.uk/northern_ireland_termination_of_pregnancy_statistics_1_213.pdf
2. http://www.mariestopes.org/sites/default/files/MSI_financial%20statements%202011_1.pdf p8
3. <http://www.mariestopes.org/careers/meet-teams>