

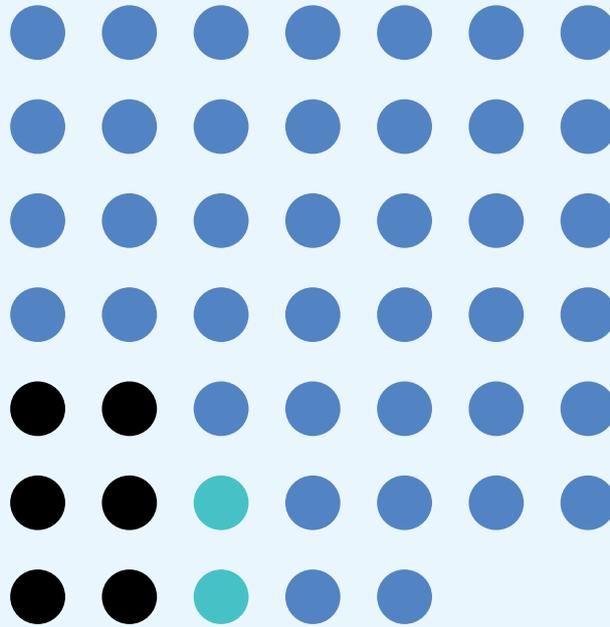
European Abortion Laws

A Comparative Overview

For more than sixty years Europe has led the continuing global trend towards the liberalization of abortion laws and the legalization of women's access to safe and legal abortion.

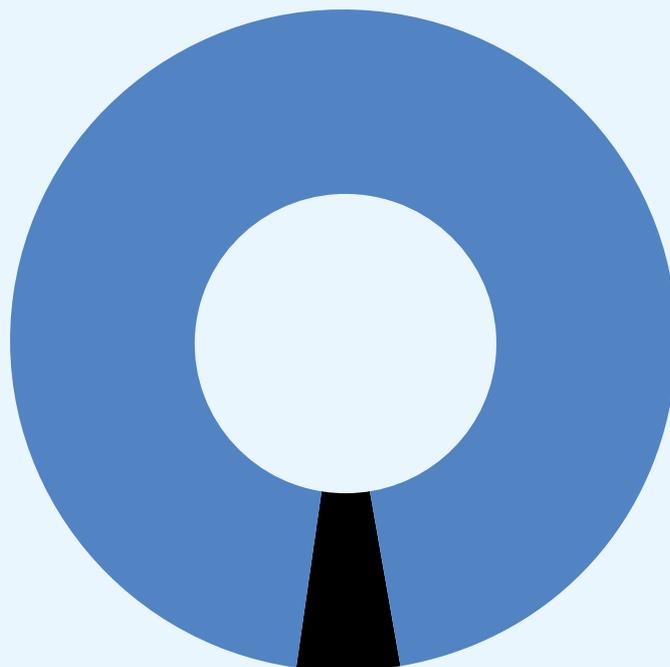
Today almost all European countries allow abortion on request or on broad social grounds and only a very small minority maintain highly restrictive laws prohibiting abortion in almost all circumstances. The standard practice is to legalize abortion on request or broad social grounds, at least in the first trimester of pregnancy. Almost all countries also ensure that abortion is legal throughout pregnancy when necessary to protect a pregnant woman's health or life.

Since 2018 several European countries have enacted important progressive reforms or taken steps to remove harmful procedural and regulatory barriers that can impede access to legal abortion.



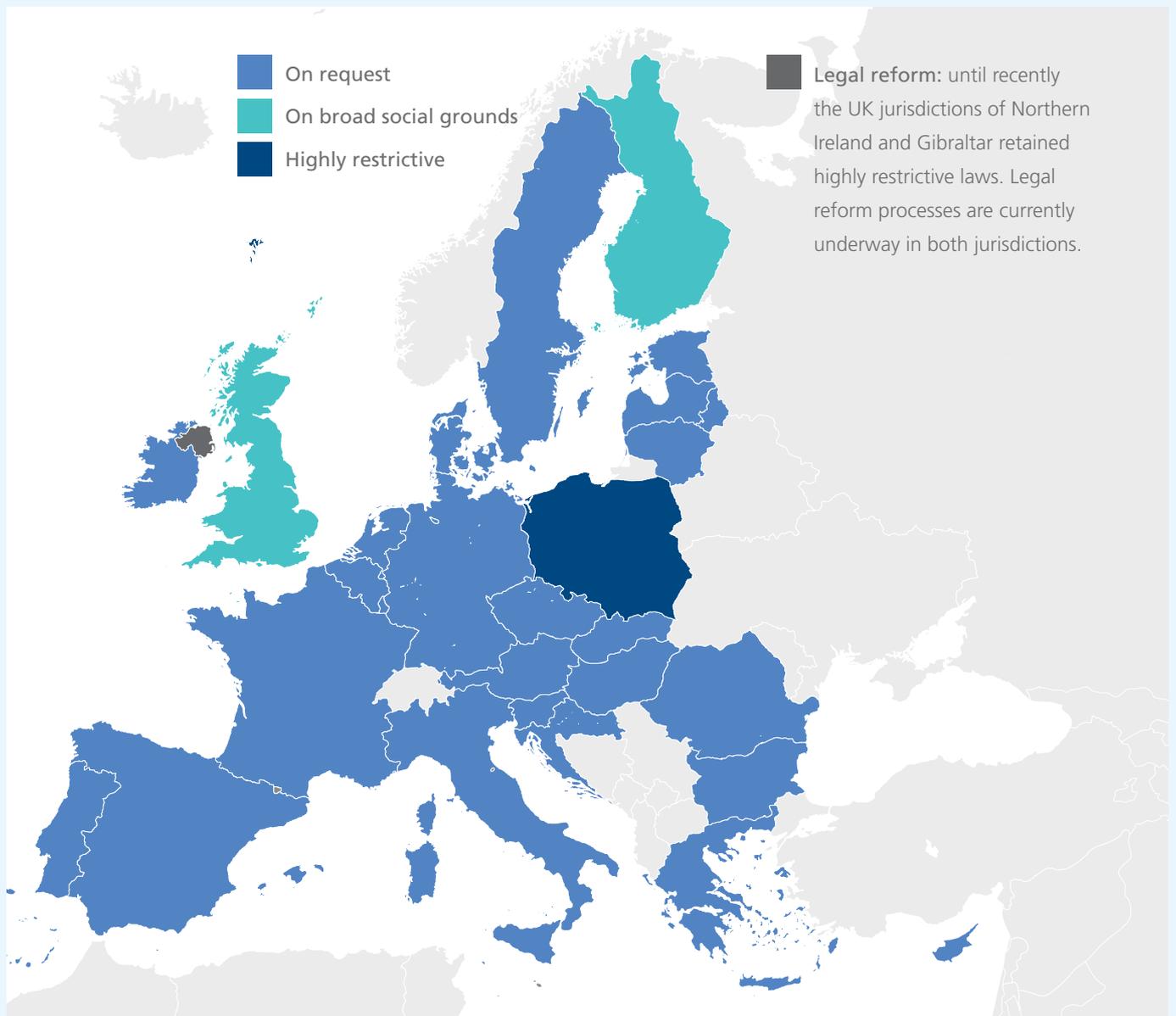
European countries

- Thirty-nine have legalized abortion on request.
- Two countries have legalized abortion on broad social grounds.
- Six countries do not allow abortion on either of these grounds.



European population

- In Europe over 95% of women of reproductive age live in countries that allow abortion on request or on broad social grounds.



Grounds for legal access to abortion in the EU

In the European Union (EU) almost every country has legalized abortion on request or on broad social grounds. Poland and Malta are the only EU member states that maintain highly restrictive laws.

Abortion on request in the EU

Abortion on request means that doctors or other professionals are not required to attest to, or certify, the existence of a particular reason or justification for the abortion.

This means that the ultimate decision on whether to continue or end a pregnancy belongs to the pregnant woman alone.

Abortion on request is legal in Austria, Belgium, Bulgaria, Croatia, Cyprus, Czech Republic, Denmark, Estonia, France, Germany, Greece, Hungary, Ireland, Italy, Latvia, Lithuania, Luxembourg, Netherlands, Portugal, Romania, Slovakia, Slovenia, Spain and Sweden.

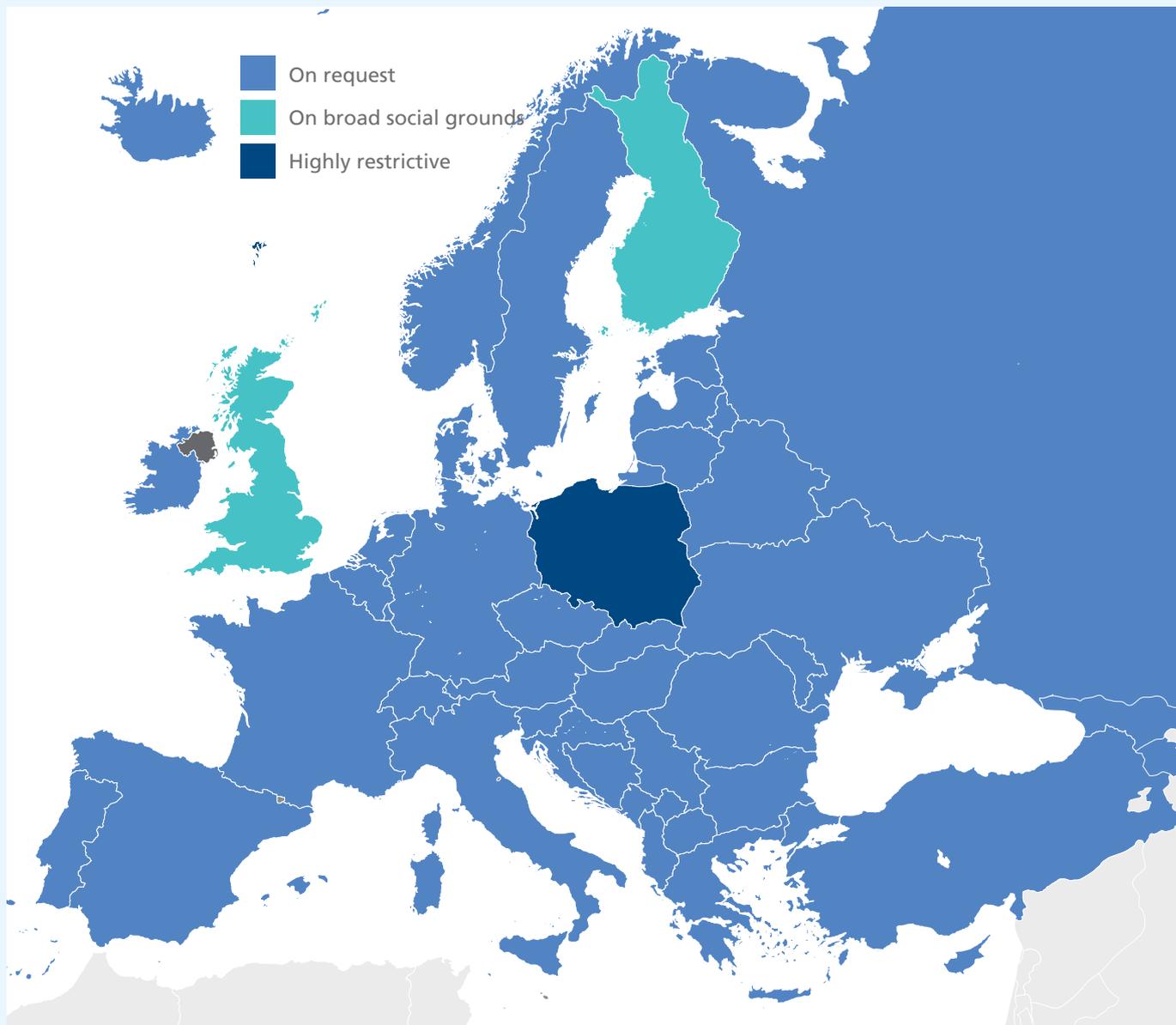
In a small number of European countries that allow abortion on request women may need to specify that they are in a state of distress about the pregnancy.

Broad social grounds

Finland and the United Kingdom allow abortion on broad social grounds.

Sexual violence

In all those countries where abortion on a woman's request or broad social grounds has been legalized, women and girls who become pregnant due to sexual assault can access abortion under those grounds, without any requirement that they report or prove the violence they experienced. As a result many of these countries' laws do not include an additional explicit ground for access to abortion in situations of sexual assault.



Across the European region as a whole

Forty-one countries have legalized abortion on request or broad social grounds. Thirty-nine of these countries have legalized abortion on request, either without restriction as to reason or for reasons of distress.

Abortion on request in Europe

Albania, Armenia, Austria, Azerbaijan, Belgium, Bosnia and Herzegovina, Bulgaria, Croatia, Cyprus, Czech Republic, Denmark,

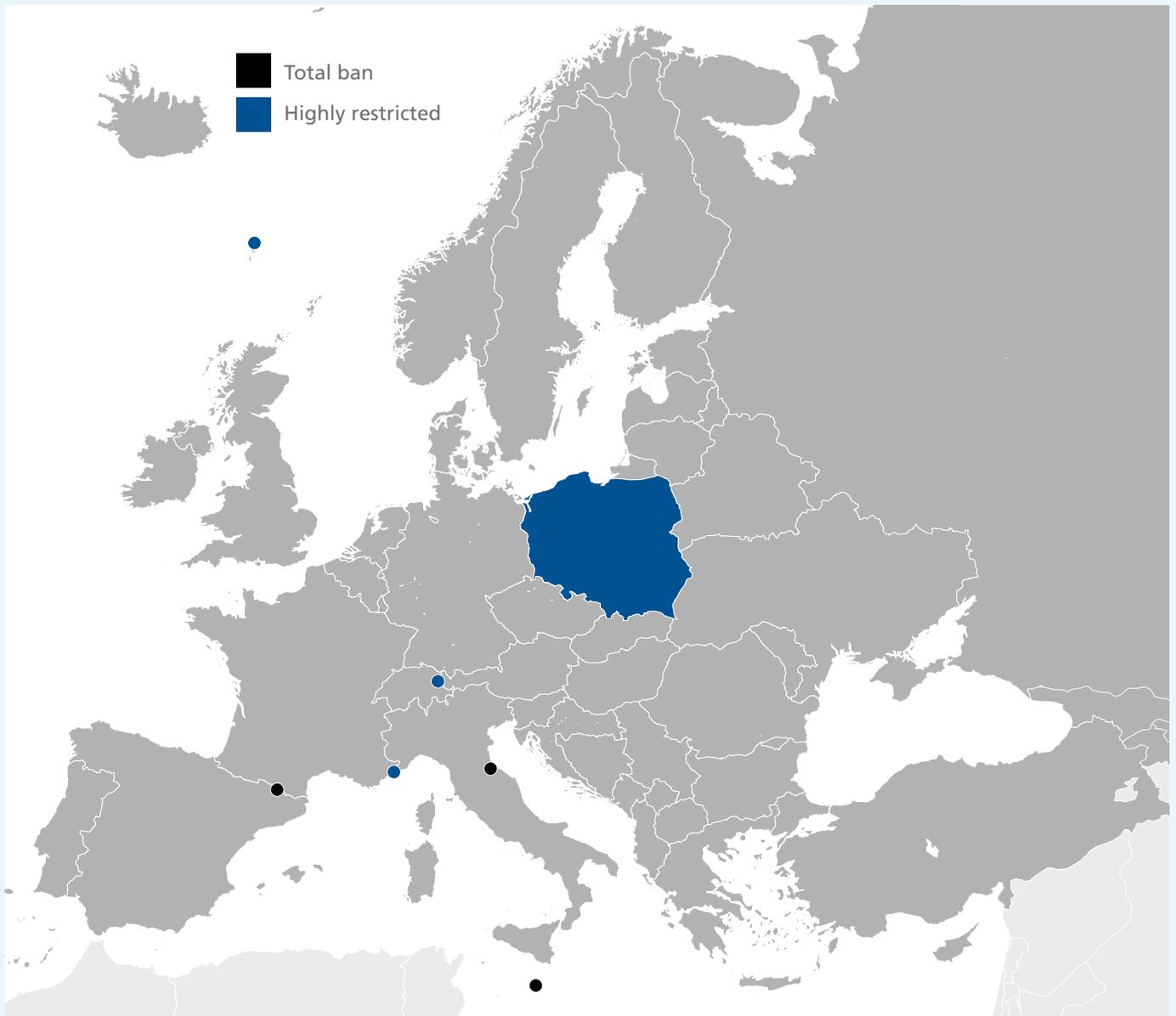
Estonia, France, Georgia, Germany, Greece, Hungary, Iceland, Ireland, Italy, Latvia, Lithuania, Luxembourg, Republic of Moldova, Montenegro, Netherlands, North Macedonia, Norway, Portugal, Romania, Russian Federation, Serbia, Slovak Republic, Slovenia, Spain, Sweden, Switzerland, Turkey and Ukraine.

Time limits

Some European countries' laws set the time limit for abortion on request or broad social grounds between 18-24 weeks of pregnancy, whereas many set the limit around the first trimester of pregnancy. However, all these countries' laws also allow access later in pregnancy

in specific circumstances, such as where a woman's health or life is at risk. The standard practice across Europe is to not impose time limits on these grounds.

A number of European countries have enacted reforms to extend the time limits for access to abortion on request or broad social grounds. These reforms recognize that although most abortions in Europe take place during the first trimester of pregnancy, rigid time limits can have harmful impacts, create pressure and further complications for women who seek abortion care.



Highly restrictive abortion laws in Europe

Only six European countries retain highly restrictive abortion laws and do not permit abortion on request or on broad social grounds.

These are: Andorra, Liechtenstein, Malta, Monaco, Poland and San Marino.

- Andorra, Malta and San Marino do not allow abortion at all.
- Liechtenstein allows abortion only when a woman's life or health is at risk or the pregnancy is the result of sexual assault.

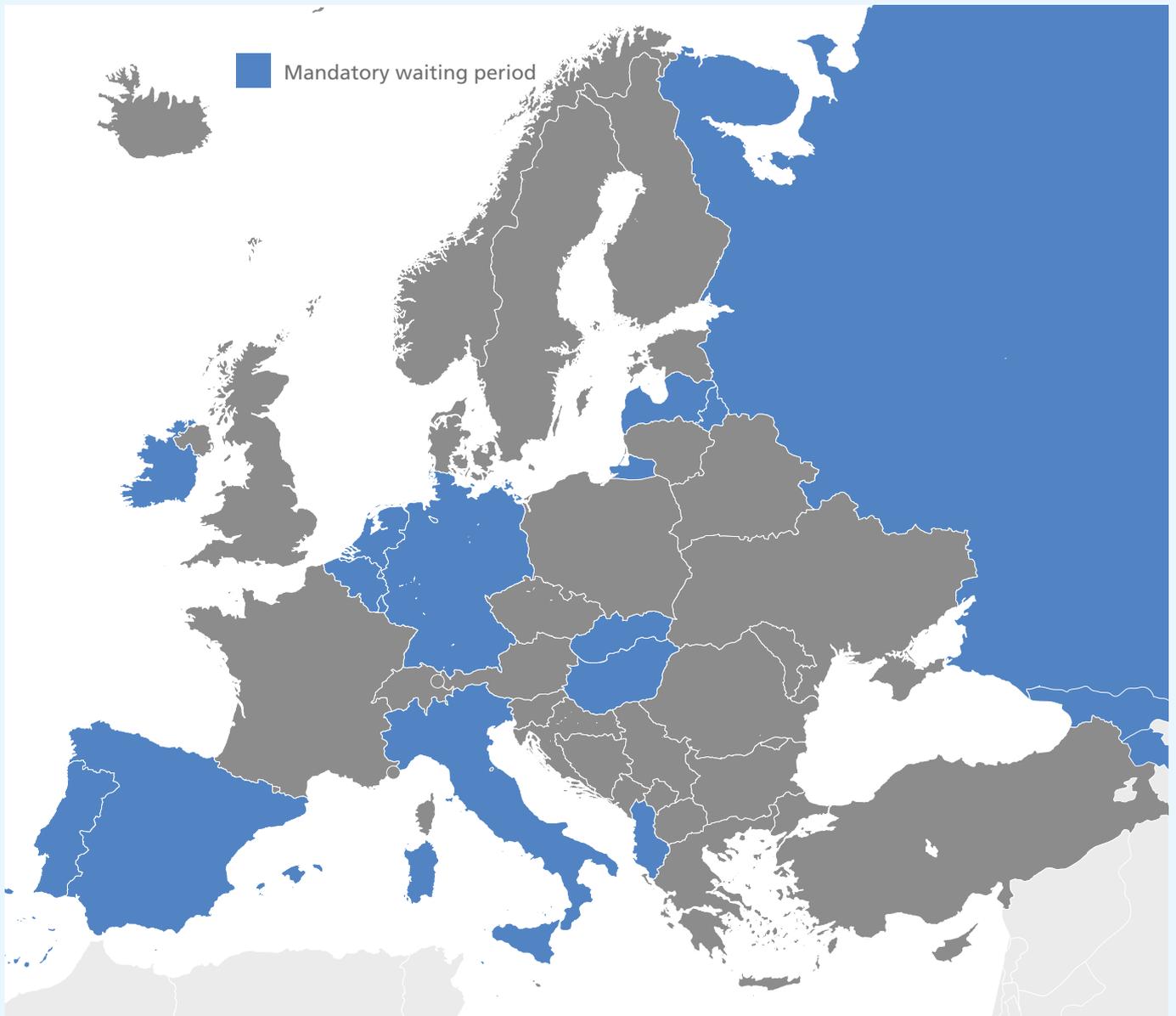
- Monaco and Poland allow it only when a woman's life or health is at risk, the pregnancy is the result of sexual assault or involves a severe fetal anomaly.
- The Danish jurisdiction of the Faroe Islands also retains a highly restrictive law.

Regression and backlash

Although the general trend has been one of progress towards liberalization, in recent years some countries in Europe have witnessed attempts to roll back existing legal protections for women's access to abortion. At times they have led to the introduction of new regressive preconditions that women must fulfil prior to

obtaining abortion care. These include mandatory biased counseling and mandatory waiting periods. There have also been attempts to completely ban abortion or to remove existing legal grounds for abortion. There have also been a number of court challenges contesting the constitutionality of access to abortion and seeking to advance medical professional's entitlements to refuse to legal abortion care.

Measures that roll back reproductive rights, by introducing new barriers or scaling back the legality of abortion care, violate the principle of non-retrogression under international human rights law.



Remaining access barriers

A number of European countries that have legalized abortion on request or broad social grounds maintain a range of procedural and regulatory barriers that impede access to abortion care in practice. Some countries are taking steps to eradicate these barriers.

Mandatory waiting periods for abortion on request

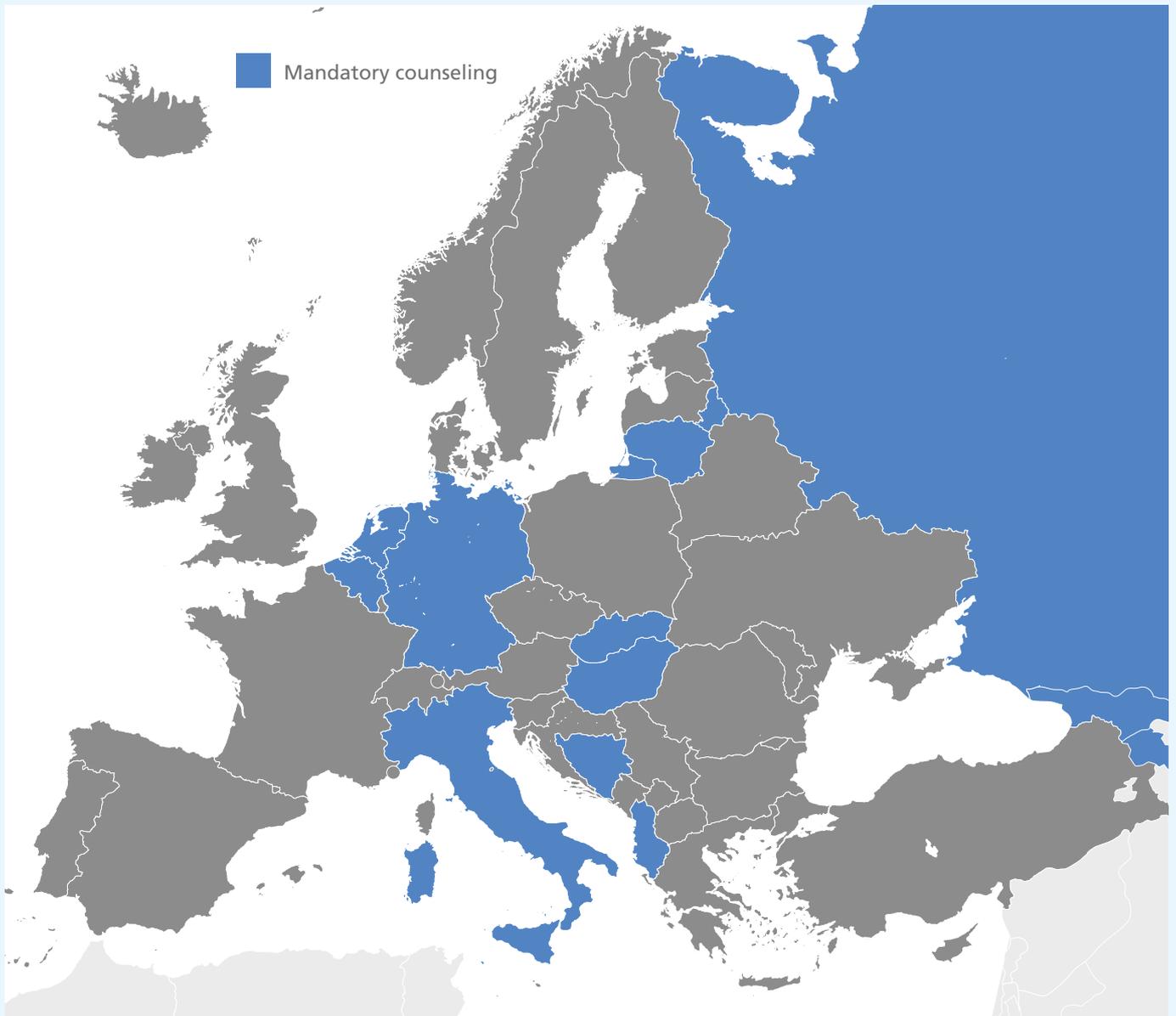
Laws in fifteen European countries still require a mandatory time period to elapse between the date on

which an abortion is first requested and the date on which it takes place. These countries are: Albania, Armenia, Belgium, Georgia, Germany, Hungary, Ireland, Italy, Latvia, Luxembourg, Netherlands, Portugal, Russian Federation, Slovak Republic and Spain.

These waiting periods undermine access to timely and affordable care and restrict women’s human rights and autonomous decision-making. The WHO specifies that laws should not impose these medically unnecessary delays.

Time barriers

In some European countries short time limits for access to abortion on request can have harmful impacts on women and may impede them from obtaining the health care they need. When applied in a restrictive manner short time limits can be particularly harmful for adolescent girls and women belonging to marginalized communities who may not always be able to obtain care within the legal timeframe. This may result in women needing to travel to other jurisdictions to access legal abortion or accessing abortion care at home outside of the scope of the law and under threat of criminal prosecution.



Mandatory counseling

Laws in twelve European countries require women to undergo mandatory counselling or receive mandatory information from their doctors prior to abortion. These countries are: Albania, Armenia, Belgium, Bosnia and Herzegovina, Georgia, Germany, Hungary, Italy, Lithuania, Netherlands, Russian Federation and Slovak Republic.

In a number of these countries, such as Germany and Hungary, laws require biased and directive counselling deliberately intended to influence women’s decision-making and dissuade them from having an abortion. Mandatory counseling

requirements undermine women’s human rights and are particularly harmful when they involve the provision of biased information. The WHO advises that counselling prior to abortion should never be mandatory and that provision of information about abortion should always be unbiased, non-directive and medically accurate.

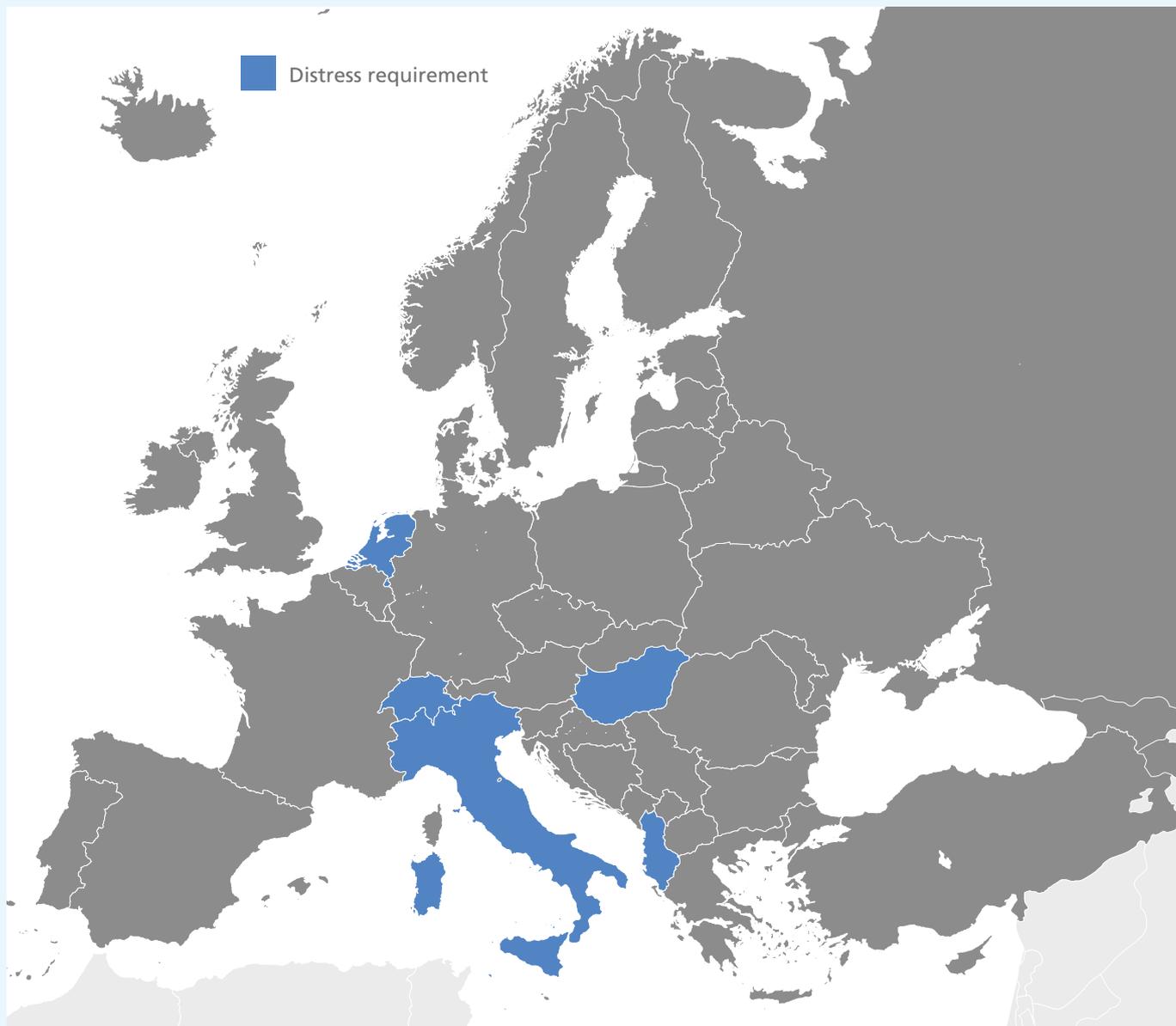
Third party authorization procedures

Some countries in Europe require prior permission from parents, guardians, doctors or official committees before women can access abortion care. In some instances, these

procedures disproportionately impact adolescent girls, women with disabilities, women living in poverty and women belonging to marginalized communities. For example, parental consent requirements may often undermine the human rights of adolescent girls and may place them at risk.

Refusals of care on grounds of conscience and religion

In some European countries access to abortion care is undermined by government failures to appropriately address medical professionals’ refusals to provide abortion care on grounds of conscience or religion. For example,



in Italy state authorities are failing to ensure that these refusals do not result in delays or denial of care for women seeking legal abortion care.

Distress requirements

In a small number of European countries that have legalized abortion on request – Albania, Hungary, Italy, Switzerland and The Netherlands – women are still required to explain that they are seeking an abortion because of their social or family circumstances or because continuing the pregnancy would cause them distress. Such rules stigmatize abortion, undermine autonomous decision-making and should be removed. In recent

years France and Belgium adopted reforms to remove previously existing distress requirements.

Criminalization

Some countries in Europe that have legalized abortion on request or broad social grounds nonetheless maintain specific criminal sanctions for abortions performed outside of the scope of applicable legal provisions. In a small number of countries laws still retain criminal penalties for women who obtain abortion care in contravention of legal rules. However more commonly laws specify that criminal sanctions, which can range from fines to prison sentences, apply

to medical professionals or others who assist women to obtain illegal abortion care. Criminalizing abortion treats this form of medical care differently from any other health care and can cause significant harm to women’s health and wellbeing. It can delay or prevent access to post abortion care, intensify abortion stigma, heighten barriers in access to legal care and create a chilling effect on medical professionals’ provision of information and care.

	Banned	On Request Waiting Period Mandatory Counseling	Socio-Economic	Threat to Life/ Medical Reasons	Threat to Health/ Medical Reasons	Rape
Albania		● ○ ○	●	●	●	●
Andorra	●					
Armenia		● ○ ○	●	●	●	
Austria		●		●	●	
Azerbaijan		●	●	●	●	
Belgium		● ○ ○		●	●	
Bosnia & Herzegovina		● ○	●	●	●	●
Bulgaria		●		●	●	
Croatia		●		●	●	●
Cyprus		●		●	●	●
Czech Republic		●		●	●	
Denmark		●	●	●	●	●
Estonia		●	●	●	●	
Finland			●	●	●	●
France		●		●	●	
Georgia		● ○ ○	●	●	●	●
Germany		● ○ ○		●	●	●
Greece		●		●	●	●
Hungary		● ○ ○		●	●	●
Iceland		●		●	●	
Ireland		● ○		●	●	
Italy		● ○ ○		●	●	
Latvia		● ○		●	●	●
Liechtenstein				●	●	●
Lithuania		● ○		●	●	
Luxembourg		● ○		●	●	
Malta	●					
Moldova		●	●	●	●	●

	Banned	On Request Waiting Period Mandatory Counseling	Socio-Economic	Threat to Life/ Medical Reasons	Threat to Health/ Medical Reasons	Rape
Monaco				●	●	●
Montenegro		●	●	●	●	●
Netherlands		● ○ ●				
North Macedonia		●	●	●	●	●
Norway		●	●	●	●	●
Poland				●	●	●
Portugal		● ○		●	●	●
Romania		●		●	●	
Russian Federation		● ○ ●		●	●	●
San Marino	●					
Serbia		●		●	●	●
Slovakia		● ○ ●		●	●	
Slovenia		●		●	●	
Spain		● ○		●	●	
Sweden		●		●	●	
Switzerland		●		●	●	
Turkey		●		●	●	●
Ukraine		●		●	●	●
United Kingdom			●	●	●	