

Care for Women

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The Rt Hon Matt Hancock, MP, Secretary of State for Health and Social Care
Department of Health and Social Care
39 Victoria St
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CC: The Rt Hon Boris Johnson, MP, The Prime Minister; Mrs Helen Whately, MP, Minister of State for Care; Mr Mark Davies, Director, Department of Health and Social Care; Ms Kate Lancaster, Chief Executive Officer, Royal College of Obstetricians and Gynaecologists; Dr Edward Morris, President, Royal College of Obstetricians and Gynaecologists

30 March 2021

Dear Minister,

Care for Women is a campaign seeking to publicise the true impact of DIY home abortion measures introduced a year ago:

We are calling policy makers to:

1. End “pills by post” abortion measures immediately
2. Ensure meticulous and impartial data collection to ascertain the full impact of these measures
3. Ensure women in a crisis pregnancy are properly supported and counselled by truly independent organisations.

A year ago today, on March 30 2020, six days after Matt Hancock personally said, “We have no proposals to change any abortion rules as part of the Covid-19 response,”¹ the UK Government implemented the most radical change to abortion law and how it is delivered since the 1967 Abortion Act.

Early Medical Abortion (EMA) at home, also known as “pills by post” or “DIY” abortion, was formally approved this day last year. Since then, around 75,000 medical abortions have taken place in homes - without any in-clinic assessment, ultrasound scan or medical supervision - after short voice calls with abortion providers, in which there is no way of knowing if they are truly alone or if they are with someone who is pressuring them or influencing their decision.

These 75,000 at-home abortions, 250 a day, have had a devastating impact on women’s health during this pandemic.² One home abortion survivor named Kirsty, who described her abortion like a “horror movie”, stated:

¹ Hansard, House of Commons, 24th March 2020 - Matt Hancock

² Extrapolated from: <https://www.gov.uk/government/statistics/abortion-statistics-during-the-coronavirus-pandemic-january-to-june-2020>

*The at home abortion is being made to make you think you are doing it in the comfort of your own home without travelling to a clinic or hospital. But then you've got the memory of the loss of your child in your own home forever. So now, to me my home is no longer my home, my happy safe place. It's the place that took away my child.*³

Another woman, named Natalia, who took the pills three weeks after they were given to her - and therefore after the legal limit for this method - stated that the at-home abortion felt like being “stabbed in the stomach” and led to her spending three days “bleeding through her mattress...not wanting to speak to anyone...all alone”. She said the whole experience “ruined” her.

However it is not just anecdotal evidence that suggests these measures are having a devastating impact. In May, in a public response to a woman taking these pills at 28 weeks, Clare Murphy of BPAS claimed these new measures were a “phenomenal achievement” and claimed that the figures for illegal use were “vanishingly small”.⁴ Yet the evidence suggests the opposite.

A leaked email from NHS England and Improvements, just two months into these measures, notified staff of “major resuscitations for major haemorrhaging”, “ruptured ectopic” and a baby born at 32 weeks (still under investigation for murder), as a direct result of these pills.⁵

Data from The Department of Health and Social Care (DHSC), released in June 2020, reveals that at least 52 women had taken the pills beyond 9 weeks and 6 days by that point. Subsequent CQC data details 11 cases with serious complications where the women had taken the pills beyond the legal limit of 10 weeks. More worryingly still, four of these cases involved women taking the pills beyond 24 weeks - the current UK legal limit for abortion by any method.⁶

Another vital factor to consider is evidence suggesting that official statistics are incomplete. An FOI request from DHSC in June 2020 said that there had only been one complication stemming from a pills by post abortion. However, data gathered from 17 NHS Hospital Trusts and 2 Ambulance Services by *Care for Women* reveals the actual month-by-month impact, including:

- 20 ambulance call-outs per month due to women in distress after taking the pills
- 495 women per month attending hospital due to incomplete abortion
- 250 women per month requiring surgical intervention to remove retained baby and or placenta tissue
- A complication rate of 7.5 per 1,000 (five times higher than the yearly average)⁷

The culmination of this known evidence suggests that these measures, far from benefitting women have caused serious injury to some and have been of no benefit to many thousands of others, who, as a result of complications, have had to attend hospital anyway, many distressed, in pain and bleeding.

This data does not capture the untold story of abuse, and ongoing suffering the pills are causing in the short and long term. This issue is compounded by the fact that abortion procedures are currently not tracked in England and Wales because NHS numbers are not collected. The DHSC must also give serious consideration to the accurate collection of abortion data, given its wide-ranging public health implications.

Whilst claiming to serve the needs of women, these measures, by removing safeguards, have denied women proper medical supervision and care and on many occasions placed them in harm's way. It should come as no surprise that comprehensive surveying by *Savanta ComRes* of over 2000

³ <https://www.careforwomen.co.uk/womenstestimonies>

⁴ <https://www.thesun.co.uk/news/11690506/police-probe-death-of-unborn-baby-after-woman-has-illegal-abortion-by-post-at-28-weeks-four-weeks-past-limit/>

⁵ <https://christianconcern.com/wp-content/uploads/2018/10/CC-Resource-Misc-Judicial-Review-Abortion-200729-NHS-email-2.pdf>

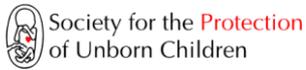
⁶ <https://percuity.files.wordpress.com/2021/02/complications-from-ema-kd210211.pdf>

⁷ <https://www.careforwomen.co.uk/hospital-and-ambulance-data>

British adults and 1000 GPs found these new measures are not supported by 8 out of 10 British adults⁸ and 6 out of 7 GPs.⁹

This is why we are calling not only for these measures to be ended and data properly collected, but for independent support and counselling to be put in place to ensure the proper care and protection of women in a crisis pregnancy.

Yours sincerely,



Care for Women is a partnership of pro-life groups that share grave concerns about the unsafe and undemocratic introduction of telemedicine abortion over lockdown, and the impact it is having on women and babies. For more information visit www.careforwomen.co.uk

⁸ <https://www.careforwomen.co.uk/public-opinion-poll>

⁹ <https://www.careforwomen.co.uk/gp-opinion-poll>