

THE LEGALITY OF ABORTION: US VS UK

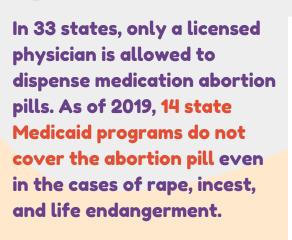
Abortion is more than a divisive political issue; it is a public health issue, a legal issue, and a gender-based violence issue. This infographic represents the second installment of a three-part analysis breaking down US/UK abortion legislation. Here, we cover the legislative limits and liberties of the current laws in practice.

- 1976 Hyde Amendment: withholds federal Medicaid funding from abortions nationally with extremely narrow exceptions
- 16 states provide state funding for Medicaid enrollees who are seeking abortions
- 11 states restrict coverage of abortion in private insurance plans



(Targeted Regulation of Abortion Providers)

- 11 states require abortion providers to have some affiliation with a local hospital
- 38 states require abortions to be performed specifically by licensed physicians
- 17 states require the involvement of a second physician after a specified point



OTHER TACTICS

- Mandatory waiting periods
- Parental involvement
- Forced "counseling" by unlicensed and unregulated "crisis pregnancy centers"

27 major U.S. cities are considered abortion "deserts," where most people live more than 100 miles from an abortion provider. As of June 2019, six U.S. states are down to just one abortion clinic.



Designated abortion clinics run by non-profits span nearly every single county of England, Scotland, and Wales. Abortions conducted in hospitals account for 25% of abortions in England and Wales (compared to 5% in the US)

The 1967 Abortion Act was never extended to Northern Ireland.

- **Before 2019:** pregnant persons seeking abortions have to travel to England
- 2019: abortion is decriminalized with changes intended to take effect in 2020
- 2021: The Northern Ireland Human Rights Commission begins legal action against the UK government for its failure to commission safe and accessible services more than a year after legalization

98% of abortions are free of charge through the National Health Service (NHS).

The NHS explicitly states
that a pregnant person
should not have to wait
more than 2 weeks from
the first referral to the
actual abortion. The first
consultation is expected
within 5 days and can be
conducted over the
telephone.



A minor's parents or a pregnant person's partner do not need to be informed about the abortion.



WANT TO LEARN MORE?

Read our full blog post,"Understanding the Legality of Abortion: A US/UK Comparative Framework," at **www.empowerlab.org/our-blog.** Citations included.



The Empower Lab is a clinical research and advocacy lab based at NYU working to further gender equity through scientific approaches to issues of gender-based violence that disproportionately affects low-income women both around the globe and in our global city, New York.