

Strategic Policy, Planning and Performance Report

Public Health Intelligence



Subject: Abortions 2023

Date of report: 20 June 2024

Introduction

This Public Health Annual Report on abortions provides a comprehensive overview of termination of pregnancy trends, statistics, and insights for the year 2023.

The report aims to inform policymakers, healthcare providers, and the public about the current state of abortion services, highlighting key data on abortion rates, methods, and demographics.

Through detailed analysis, the report seeks to support informed decision-making and enhance understanding of the factors influencing abortion trends in our community. This year's findings will help guide future public health strategies and improve reproductive health services.

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Summary of findings

In 2023:

- around 260 abortions were reported in Jersey, an 8% increase from 2022 (240), marking the highest number since 2002
- fewer than 5 abortions were performed in England and Wales for Jersey residents; since 2003, this number has fluctuated between fewer than 5 and 25 per year
- Jersey's abortion rate has consistently been lower than that of England and Wales over the period from 2002 to 2023
- Jersey's abortion ratio was 327 abortions per 1,000 live births; this ratio is comparable to Great Britain and Russia, but higher than the EU average and several other European countries.
- 92% of terminations were performed at less than 10 weeks gestation; terminations at 10-12 weeks dropped from 49% in 2001 to 8% in 2023; the proportion of terminations at 13 or more weeks has been below 5% since 2012
- medical abortions accounted for 93% of all terminations

In 2021-2023:

- 12% of abortions involved women under 20; 69% of women having abortions were aged between 20 and 34 years
- 75% of terminations were for women having their first termination; 19% were undergoing their second termination; 6% of women had three or more previous terminations
- 17% of abortions for women under 25 were repeat abortions, a proportion that has remained stable since 2002-2004 and is lower than in England (28%).

Background

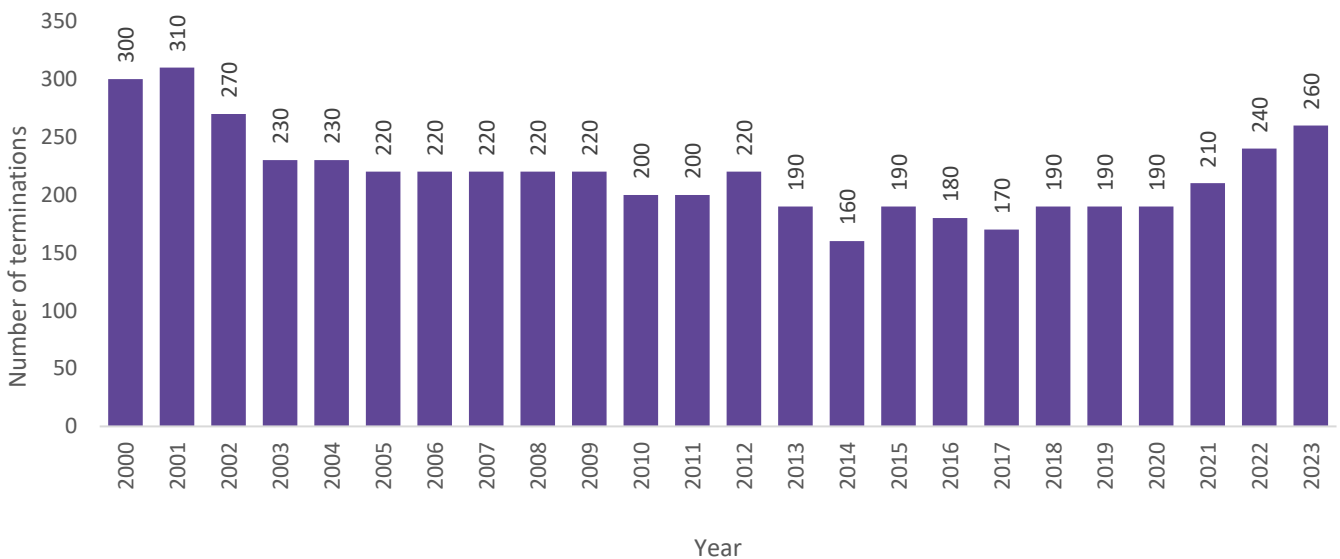
An abortion is a procedure to end a pregnancy, also referred to as ‘termination of pregnancy’ or T.O.P. Induced abortion is carried out under the terms of the Termination of Pregnancy (Jersey) Law 1997. There is a legal requirement to notify the Medical Officer of Health of all terminations carried out in Jersey. Public Health Jersey collate the data derived from these notifications. A full data table is provided in the Appendix.

Overall number

In 2023:

- there were around 260 abortions notified as having taken place in Jersey¹, 8% higher than 2022 (240) and highest since 2002
- less than 5 abortions for Jersey residents were carried out in England and Wales²; since 2003, the number of abortions performed in England and Wales for Jersey residents has fluctuated between fewer than 5 and 25 per year

Figure 1: Number of abortions carried out annually, Jersey, (2000 to 2023)



Source: Health Community Services
Rounded to the nearest 10

Abortion rate: abortions per 1,000 women aged 15-44 years

In 2023:

- the abortion rate in Jersey was 13.9 per 1,000 women aged 15-44 years³; the rate is statistically similar to the rate in 2022, but higher than the rate between 2013 and 2020 (see Figure 2). The rate in 2023 was statistically similar to the rate in 2002 (21 years ago), which was 13.3 per 1,000 women

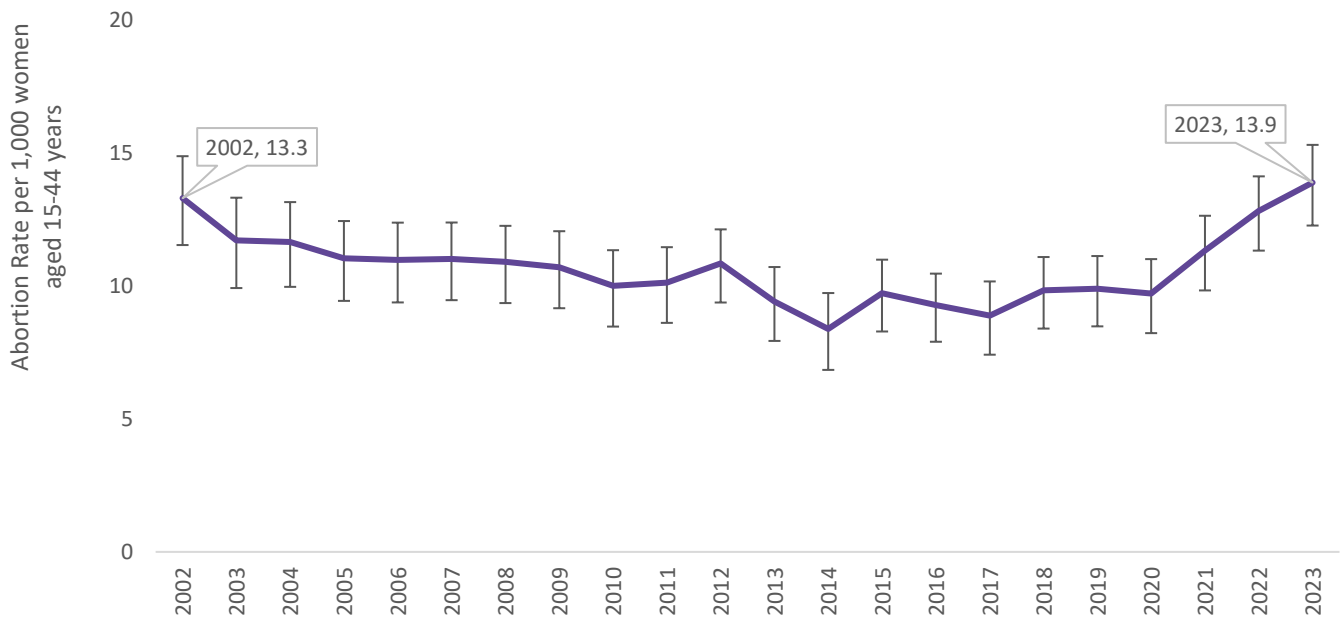
A full data table for abortion rate per 1,000 women aged 15-44 years can be found in Appendix table A1.

¹ The commentary, charts and tables relate to abortions carried out in Jersey for Jersey residents only. Figures do not include abortions for Jersey residents that are carried out in England or outside the UK

² Abortion Statistics 2022 (Table 12a) - [Abortion-statistics-2022-data-tables.ods \(live.com\)](#)

³ 2023 rates are calculated using 2022 population estimates in lieu of a population estimate being available at time of publishing. Rates from 2011 -2021 are calculated based on the most recent [Population And Migration Statistics](#), meaning some historic rates may differ when compared with previous publications using older population denominator figures.

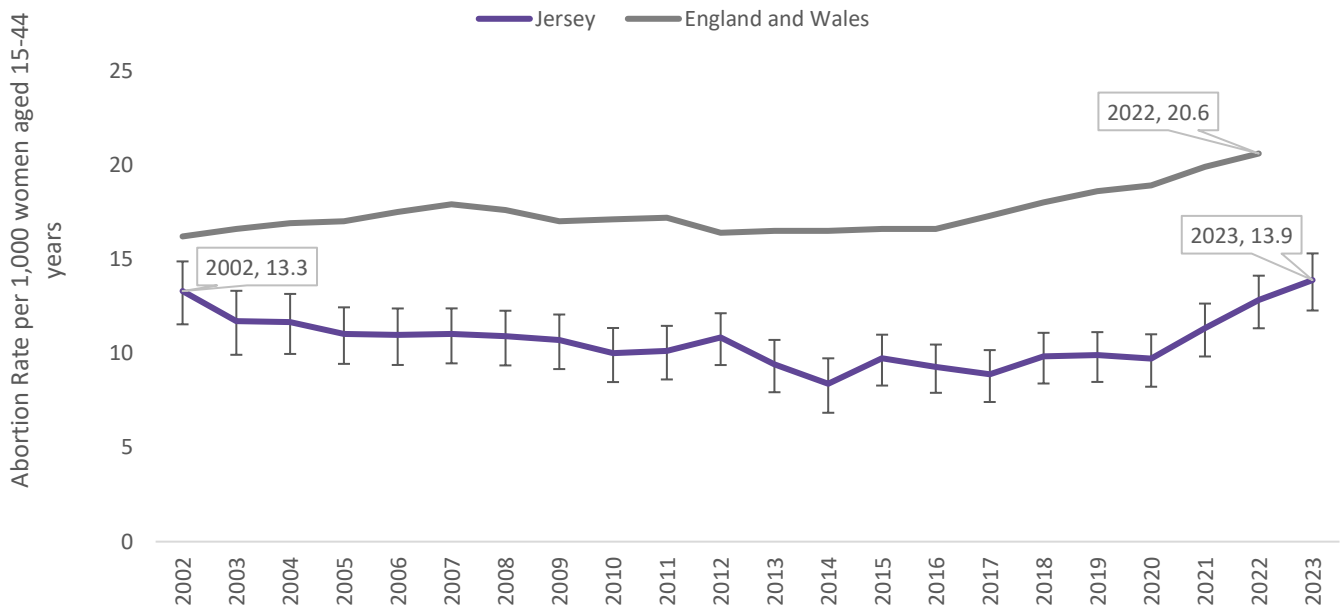
Figure 2: Abortion rate per 1,000 women aged 15-44 years, Jersey (2002 to 2023)



Source: Health Community Services

- the abortion rate in Jersey over the period 2002 to 2023 was consistently lower than in England and Wales⁴ (Figure 3)

Figure 3: Abortion rate per 1,000 women aged 15-44 years - Jersey compared to England & Wales (2002 to 2023)



Source: Health Community Services

⁴ www.gov.uk National Statistics, Abortion Statistics for England and Wales: 2022 (Abortion Statistics: Data Tables)

Table 1: Number and crude rate (number per 1,000 women aged 15-44 years) of abortions in Jersey and in England and Wales

Year	Jersey		England & Wales	
	Number	Rate	Number	Rate
2015	190	9.9	191,010	16.6
2016	180	9.5	190,410	16.6
2017	170	9.1	197,530	17.3
2018	190	9.5	205,300	18.0
2019	190	10.0	209,520	18.6
2020	190	9.8	210,860	18.9
2021	210	11.3	214,256	19.2
2022	240	12.8	251,377	20.6
2023	260	13.9	*	*

Source: Health Community Services

*2023 abortion statistics for England and Wales not available at time of publication of this report.

Abortion ratio: abortions per 1,000 live births

In 2023:

- the abortion ratio in Jersey was 327 abortions per 1,000 live births. This ratio had gradually decreased over time but has now risen back above the 2001 level

Table 2 shows the comparative abortion ratios per 1,000 live births in Jersey (2023), the EU overall, and selected countries⁵ for 2020 and 2021 (the most recently available comparison data).

- Jersey's ratio was comparable to that of Great Britain and Russia, but higher than the average for EU member states, as well as Poland, Ireland, Germany, Portugal, Spain and Sweden

Table 2: Abortions per 1,000 live births (2020-2021) selected countries, 2023 Jersey

Country	Abortions per 1,000 live births
Poland	3*
Ireland	78
Germany	119
Portugal	167
EU Members (average)	184
Spain	267
Sweden	294
Russia	314
Jersey (2023)	327
Great Britain	328

* Abortion in Poland is illegal except in cases where the pregnancy is a result of a criminal act or when the woman's life or health is in danger

⁵ World Health Organisation, European Health Information Gateway, Abortions per 1000 live births - [Abortions per 1000 live births - European Health Information Gateway \(who.int\)](#)

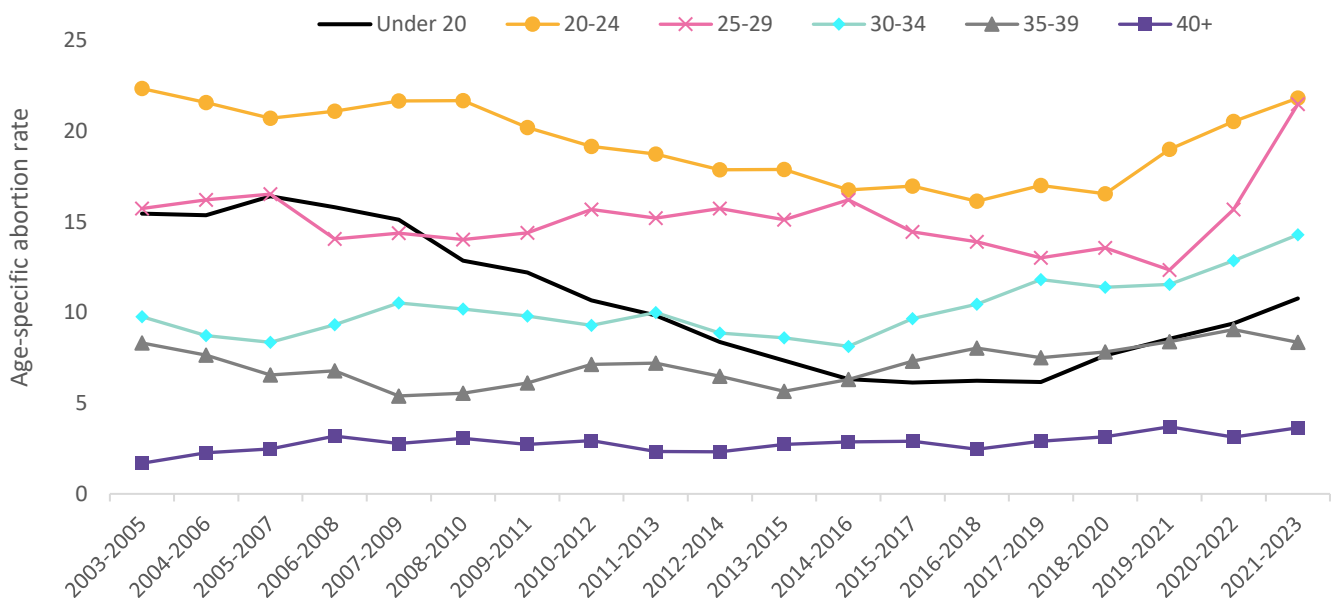
By age of woman

Abortion rate by age of woman is considered as a 3-year rolling average. When looking at trends over time, data combined over several years is more reliable than a single year to year comparisons. A full data table can be found in Appendix table A2.

In 2021-2023:

- the age groups with the highest age-specific abortion rate in Jersey was women aged 20-24 (21.8 per 1,000 resident women and those aged 25-29 (21.5 per 1,000 resident women); see Figure 4
- the group aged 25-29 has experienced a significant rise in abortion rates since 2019-2021 (from 12.4 to 21.5 per 1,000 in 2021-2023)
- for women aged under 20 years the age-specific abortion rate was 10.8 per 1,000 women; this has decreased from a rate of 16.4 per 1,000 in 2005-2007
- over two thirds (69%) of all women having abortions were aged between 20 and 34 years
- over the period 2011-2023 there was an average of around 22 abortions per year where the woman has been under 20 years, 11% of the total abortions; the proportion of women under 20 in Jersey who have had an abortion is similar to that in England and Wales (10%)

Figure 4: Age-specific abortion rates per 1,000 women, Jersey, 3-year averages (2003-2005 to 2021-2023)



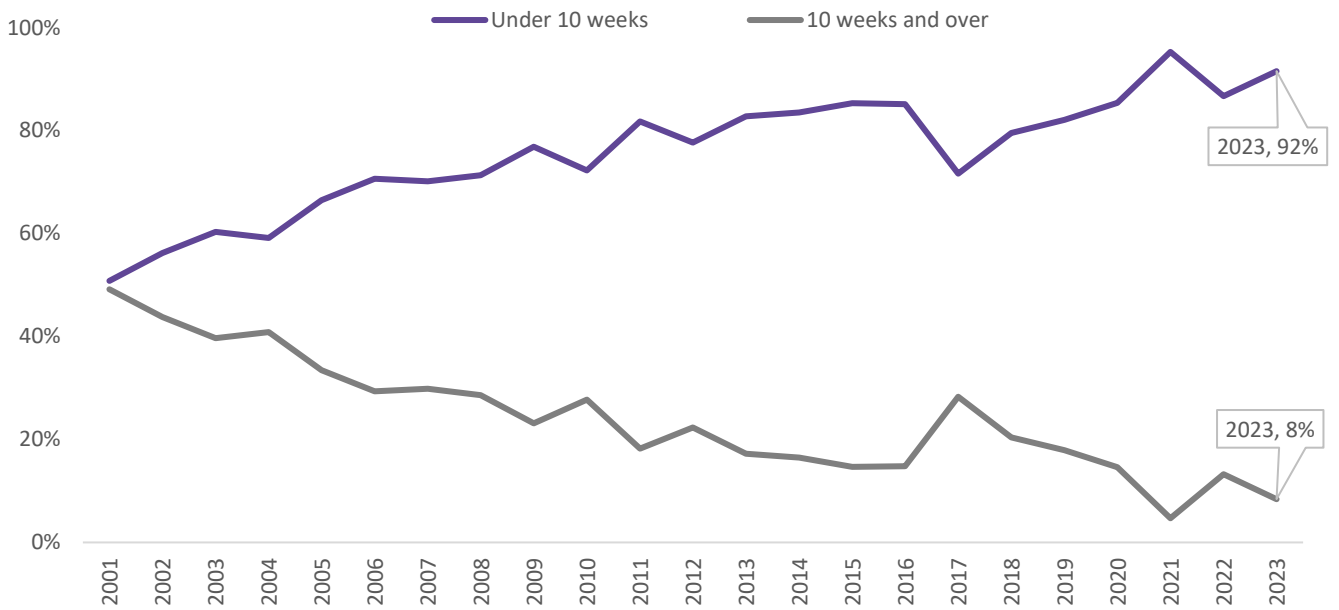
Source: Health Community Services

By gestation period

In 2023:

- 92% of terminations were performed at less than 10 weeks gestation
- the proportion of terminations performed in Jersey at less than 10 weeks (92%) was similar to England (88%)
- the proportion of terminations performed at 10-12 weeks was 6%, this has fallen from 49% in 2001
- the proportion of terminations being performed at 13 or more weeks gestation (3% in 2023) was last at 5% or above in 2012

Figure 5: Proportion of abortions by gestation period⁶, Jersey (2001 to 2023)



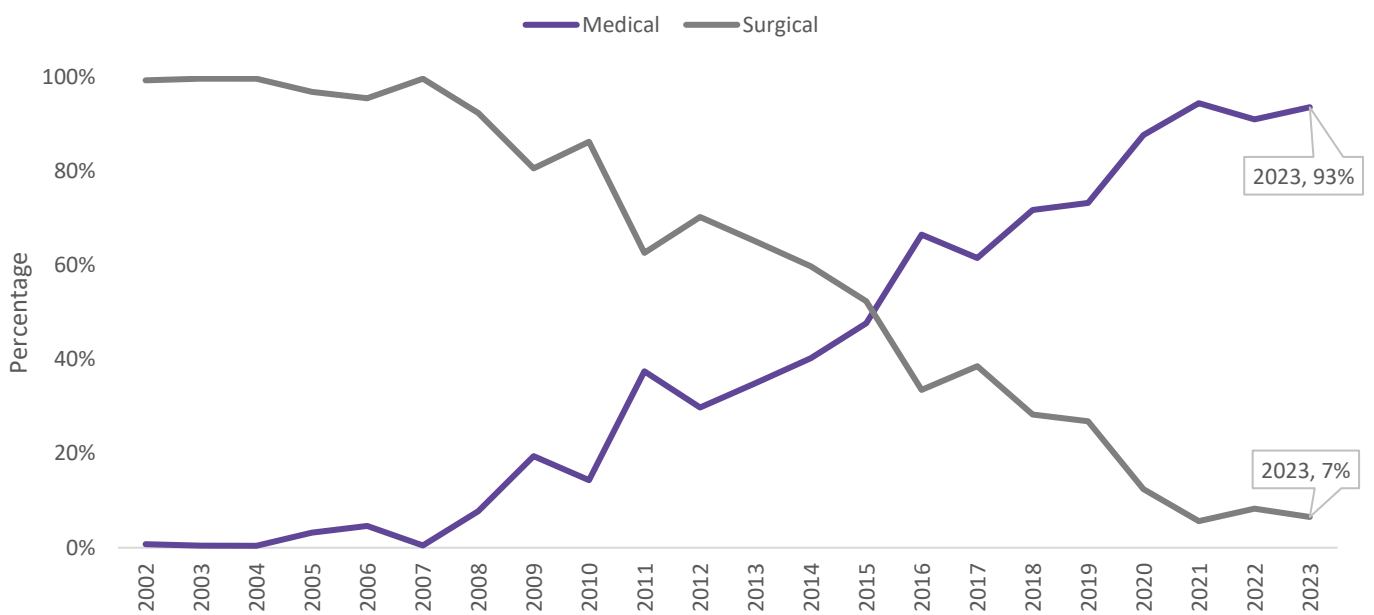
Source: Health Community Services

By method of termination

In 2023:

- the use of medical methods has increased over time compared to surgical methods (Figure 6)
- medical abortions became the most common method of termination in 2016, and in 2023 accounted for 93% of all terminations, statistically similar to 2022 (91%)

Figure 6: Proportion of abortions by method of termination, Jersey (2002 to 2023)



Source: Health Community Services

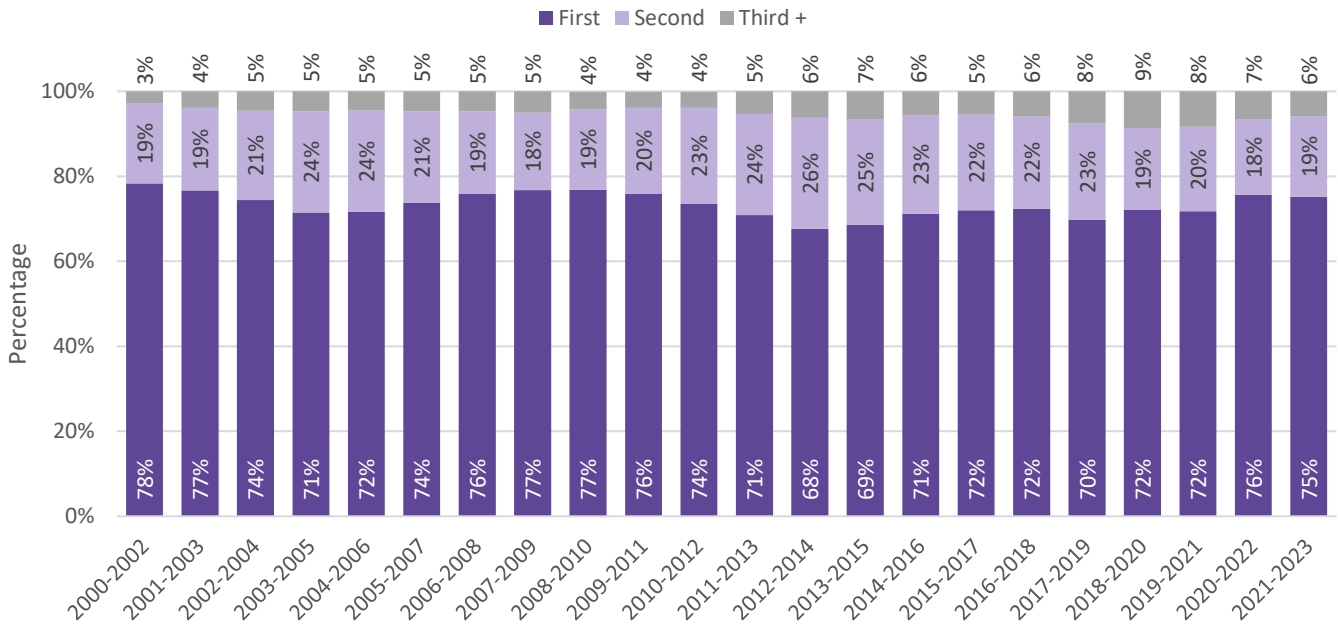
⁶ Proportion of terminations performed at over 12 weeks gestation not shown due to small numbers

By number of previous terminations

In 2021-2023:

- for three quarters (75%) of women it was their first termination; for 19% it was their second termination; these were similar proportions compared to 2020-2022
- 6% of the women who had a termination have had three or more terminations, higher than in 2000-2002, when 3% of women had three or more terminations
- 17% of abortions to women under 25 years were repeat abortions; this proportion has remained relatively constant since 2002-2004, and is lower than that in England (28%)⁷

Figure 7: The proportion of women having an abortion by number of previous abortions, Jersey, 3-year averages (2000-2002 to 2021-2023)



Source: Health Community Services

Statutory grounds for abortion

- the proportion of abortions performed under different grounds has remained similar to previous years. In 2023, 97.0% of abortions were undertaken due to the distress of the woman (Ground D)

⁷ [Abortion statistics for England and Wales 2022 \(table 11d\)](#)

Appendix: Table A1

Total number of terminations, abortion rate, distribution by gestation period, method, and number of previous terminations, 2000-2023

Numbers less than 10 have been suppressed to prevent disclosure and shown by the symbol '+' below.

All other numbers have been rounded independently to the nearest 10

Year	Total number	Abortion rate ⁸	Number of terminations by gestation Period			Number of terminations by method		Number of terminations by previous terminations	
			<10 Weeks	10-12 Weeks	13 or more weeks	Surgical	Medical	No previous terminations	At least one previous termination
2000	300	14.8	170	120	+	290	+	240	60
2001	310	15.2	160	150	+	300	+	240	70
2002	270	13.3	150	110	+	260	+	210	60
2003	230	11.7	140	90	+	230	+	170	60
2004	230	11.6	140	90	+	230	+	160	70
2005	220	11.0	150	70	+	210	+	150	70
2006	220	11.0	150	50	10	210	10	160	60
2007	220	11.0	160	70	+	220	+	170	50
2008	220	10.9	160	50	+	200	20	170	50
2009	220	10.7	170	50	+	170	40	170	50
2010	200	10.0	150	50	+	170	30	160	50
2011	200	10.1	170	30	+	130	80	150	60
2012	220	10.8	170	40	10	150	60	150	60
2013	190	9.4	160	30	+	120	70	130	60
2014	160	8.4	140	20	+	100	70	100	60
2015	190	9.7	160	30	+	100	90	140	50
2016	180	9.3	160	20	+	60	120	140	40
2017	170	8.9	120	50	+	70	110	110	60
2018	190	9.8	150	40	+	50	140	140	50
2019	190	9.9	160	30	+	50	140	130	60
2020	190	9.7	160	20	10	20	160	140	50
2021	210	11.3	200	10	+	10	200	160	60
2022	240	12.8	210	20	10	20	220	190	50
2023	260	13.9	240	20	10	20	240	190	70

⁸ Abortion rate per 1,000 population of women aged 15-44.

Appendix: Table A2

Age-specific rates of termination 2001-2023 (3-year averages)

Due to small numbers, three years of data have been combined to calculate the specific rates

3-YEAR PERIOD	UNDER 20 YRS	20-24 YRS	25-29 YRS	30-34 YRS	35-39 YRS	40-44 YRS
2001-03	20.1	25.1	17.6	12.4	8.5	2.8
2002-04	17.9	23.5	13.9	11.0	9.3	2.5
2003-05	15.7	22.2	15.7	9.6	8.2	2.1
2004-06	15.6	21.4	16.2	8.5	7.5	2.8
2005-07	16.8	20.6	16.5	8.2	6.4	2.8
2006-08	16.2	21.0	14.0	9.1	6.7	3.6
2007-09	15.5	21.4	14.3	10.2	5.3	3.1
2008-10	13.1	21.5	14.0	10.0	5.5	3.3
2009-11	12.3	20.2	14.3	9.7	6.0	2.9
2010-12	10.7	19.3	15.6	9.3	7.1	3.2
2011-13	9.8	18.7	15.2	10.1	7.2	2.8
2012-14	8.4	17.9	15.7	10.0	6.5	2.7
2013-15	7.3	17.9	15.1	8.9	5.6	3.0
2014-16	6.1	16.8	16.2	8.6	6.3	3.1
2015-17	6.2	16.8	14.4	9.7	7.3	3.1
2016-18	6.2	16.0	13.9	10.4	8.0	2.7
2017-19	5.6	16.9	13.0	10.5	7.5	3.4
2018-20	7.7	16.6	13.6	11.8	7.8	3.8
2019-21	8.6	19.1	12.4	11.6	8.4	4.4
2020-22	9.5	20.2	15.7	12.9	9.0	3.7
2021-23	10.8	21.8	21.5	14.3	8.4	3.6

Notes

i. Time limits:

Under the Termination of Pregnancy (Jersey) Law 1997, there are time limits that apply depending on the reason for the termination. Jersey's laws prevent abortions being performed after the 12th week (other than in certain circumstances, see section ii). The length of a pregnancy is worked out from the first day of the woman's last period. Where this date is not known, the doctor's belief of the length of the pregnancy is acceptable in law.

After the 12-week period is exceeded, the only option available to a pregnant woman wanting to have an abortion is to travel off-Island, usually to the UK, unless circumstances for lawful abortion (see section ii) are met.

During 2021, the government of Jersey approved legislation to abolish the requirement for women and girls to wait seven days between two medical consultations when accessing abortion services. This brings abortion law on the island more into line with international standards.

ii. Circumstances in which termination is lawful:

Two doctors approved by the Health and Community Services Department must agree that one of the following applies:

- a termination is needed to save the woman's life or to prevent serious permanent injury to her physical or mental health. There is no time limit under this reason so a termination can take place at any time
- the woman is no more than 24 weeks pregnant and there is a serious risk that if born, the child would suffer from such physical or mental abnormalities as to have a serious disability
- the woman is no more than 12 weeks pregnant, and her condition causes her distress

On the day the procedure is carried out, the woman must have lived in Jersey, or have been resident in Jersey for ninety days.

iii. Methods of abortion:

Different methods can be used to terminate a pregnancy, depending on the duration of gestation, and other circumstances relating to the individual woman.

There is one principal medical method, involving the use of an abortifacient drug. Early medical abortion in the first 9 weeks of pregnancy (10 weeks during the Covid-19 crisis) requires the administration of 2 tablets. Medical abortions can also happen after the first 10 weeks of pregnancy.

The main surgical methods are:

- vacuum aspiration, recommended at up to 15 weeks gestation
- dilatation and evacuation (D and E) recommended where gestation is greater than 15 weeks

D and E may be used in combination with vacuum aspiration

iv. Population estimates used for rates of abortion

Abortion rates are calculated using the conventional age range for women in their child-bearing years, 15 to 44.

Abortion rates per 1,000 women between 2011 to 2021 were calculated using the estimates recently published by Statistics Jersey (June 2023)⁹. As such, rates presented in this report for the 2011 to 2021 period may differ slightly to those presented in previous publications, which will have used older population estimates. Rates for earlier years (2010 and earlier) have not been revised.

Note that rates for 2023 were calculated using the 2022 population estimate figure, in lieu of an estimate for 2023 being available at time of publication.

v. Abortion ratio

Abortion ratio: Number of abortions per 1,000 live births: (Number of legal induced terminations of pregnancy / Number of live births) * 1,000.

vi. Confidence intervals and statistical significance

Confidence intervals (CI) have been used in this report to compare Jersey rates and numbers over time, and with those of England. Confidence intervals are a measure of the statistical precision of an estimate and show the range of uncertainty around the estimated figure. The confidence interval indicates the range within which the true value for the population as a whole can be expected to lie, taking natural random variation into account.

It is often expressed as a % whereby a population mean lies between an upper and lower interval. The 95% confidence interval is a range of values that one can be 95% confident contains the true mean of the population. Due to natural sampling variability, the sample mean (centre of the CI) will vary from sample to sample.

Comparisons between rates or over time have been tested to determine whether differences are likely to be statistically significant or the result of natural random variation. Only those differences deemed as statistically significant have been described in this report using terms such as 'increase', 'decrease', 'higher' or 'lower'.

⁹ [Population And Migration Statistics](#) – Statistics Jersey, June 2023