

STATES OF JERSEY



DRAFT TERMINATION OF PREGNANCY (JERSEY) LAW 202- (P.16/2026) – CHILDREN’S RIGHTS IMPACT ASSESSMENT

**Presented to the States on 27th January 2026
by the Minister for Health and Social Services**

STATES GREFFE

CHILDREN'S RIGHTS IMPACT ASSESSMENT (CRIA)

PART 1: SCREENING

Name and title of Duty Bearer:	
Type of Duty Bearer: (Minister, Elected Member or States Assembly Body)	Elected Member
Assessment completed by (if not completed by duty bearer):	
Date:	

1) Name and brief description of the proposed decision

'Decision' means:

- an Assembly proposition
- an amendment (or further amendment) to a proposition
- for Ministerial duty-bearers, policy under development

Please note; for the purposes of this report 'woman' refers to any pregnant person regardless of age or gender.

The decision: The proposition requests the States Assembly to adopt a new Termination of Pregnancy law. The draft new law will repeal the existing 1997 Termination of Pregnancy (Jersey) Law 1997 bringing forward various legal provisions, including those related to grounds for a termination and associated gestational periods.

While the draft law will extend the circumstances in which termination will be legal in Jersey, amending the law does not equate to being able to provide a broader range of termination services in Jersey, particularly in relation to later stage terminations, as:

- Jersey's medical workforce may exercise their right, in law, to refuse to provide terminations beyond any given gestation period
- provision of later stage terminations requires access to specialist clinical skills that are not available on Island (and unlikely to be so due to small population size.)

What is the problem or issue the decision is trying to address?

The existing 1997 Law creates a number of barriers to accessing termination of pregnancy services in Jersey which the draft law seeks to address.

This include:

1997 Law	Proposed draft law
Only permits termination on specific grounds: • up to 12 weeks gestation on grounds of distress • up to 24 weeks on grounds of substantial risk that the child, if born would have physical or	Removes requirement to cite grounds for a termination before 22 weeks (i.e., termination may / may not be medically necessary). The requirement to cite grounds is opposed by the World Health Organisation who state that

mental abnormalities that would seriously handicap them any point in gestation if the termination is necessary to save the life of the woman or to prevent grave permanent injury to her physical or mental health.	termination should be available without justification of need. Provides that a woman may have an non-medically necessary termination before 22 weeks gestation (before ‘viability of life’ threshold.) Remove limit on terminations up to 24 weeks in the case of serious foetal anomalies. Amends language to references an <i>anomaly</i> which is a deviation from the expected norm, as opposed to an <i>abnormality</i> which is a deviation from what is considered typical and which usually implies a problematic or negative deviation. Returns termination at any gestation where medically necessary with defined grounds akin to 1997 law.
Does not specify on face of the law requirement for woman to consent to termination	Specifies on face of the law requirements for informed consent; including informed consent from under 16-year-olds.
Does not allow for women to self-refer into the termination service / requires consultation with two doctors for all terminations	Removes requirement for 2 doctor consultation before 22 weeks, effectively allowing a woman to self-refer into a termination service – removing barriers to accessing timely termination.
Does not provide for the introduction of safe access zones around termination clinics, to protect service users and professionals from harassment and / obstruction.	Provided for introduction of safe access zones by Regulation, and for associated offences.
Termination may only be provided by registered medical practitioners (i.e., doctors)	Retains requirement for terminations to only be provided by registered medical practitioners (i.e., doctors) but allows for Minister / Assembly to permit other professionals to provide.
<i>Do children experience this problem differently from adults?</i> There are two groups of children impacted by the provision of termination services, and those groups of children may experience the problem differently to adults: Group 1: Children having a termination / considering having a termination	

- The 1997 Law does not limit access to termination based on age (i.e. under-18s may legally have a termination in Jersey). The draft new law similarly provides that under-18s may have a termination.

The amendments to the law benefit all people accessing terminations, including under-18s. The draft law provides that:

- an under-18 who is not more than 12 weeks pregnant does not need to travel to UK for a lawful, non-medically necessary termination, which can protect them from further distress (12 weeks and 6 days being the current gestational limit in law for a termination that is not medically necessary)*.
- an under-18 may, prior to 22 weeks' gestation, lawfully have a termination on any grounds, without the requirement to justify their decision, helping to remove shame and stigma*
- a parent does not need to travel to another jurisdiction for a termination post 12 weeks' gestation, protecting other children of that parent from a period of potential separation*

* *subject to the future provision of later stage terminations in Jersey.*

The draft law specifies on face of the law requirements for informed consent. This includes making it clear that:

- 16 and 17 years olds should be treated, for the purpose of consent to treatment, as if they were 18, and
- under 16-year-olds may provide informed consent, if the doctor is satisfied that they understand the nature and implications of having a termination. If the doctor is satisfied they understand the nature and implications of having a termination, the doctor may seek consent from another person who is legally authorised to make medical decisions on their behalf (usually their parent but maybe someone by order of the Court).

Group 2: Children whose parent is having a termination (the term parent includes guardian, etc)

- The provisions of the draft law remove some of the practical and financial barriers associated with access to termination, and seek to reduce some of the associated stigma, thereby potentially reducing parental stress.

Unborn children

The rights of the child do not apply to unborn children, therefore provision / changes to the provisions of termination of pregnancy law does not impact on the rights of a child who has not been born. (*Vo v. France* (Application No 53924/00, the Grand Chamber of the European Court of Human Rights held that: “*The unborn child is not regarded as a “person” directly protected by Article 2 of the Convention and that if the unborn do have a “right” to “life”, it is implicitly limited by the mother’s rights and interests.*” (para. 80))

2) Which groups of children and young people are likely to be affected?

Groups of children could include early years, primary or secondary education; young adults; children with additional learning needs; disabled children;

children living in poverty; children from particular ethnic backgrounds; migrants; refugees; care experienced children and LGBTQ+ children
The law may affect any under 18: • who is having a termination / considering having a termination • whose parent / guardian is having a termination
3) What is the likely impact of the proposed decision on children and on their rights? Impacts may be positive or negative, direct or indirect Include whether different groups of children will be affected differently by the decision
All children have the potential to be affected if the draft law is adopted. <u>Legal clarity and protection from criminalisation</u> • The draft law explicitly states that a pregnant woman does not commit an offence in relation to her own pregnancy. This aligns with UNCRC Article 3 (best interests) and Article 37 (freedom from unlawful punishment), reducing fear and stigma for children who become pregnant. <u>Access to health services and counselling</u> • The draft law states that the Minister must take reasonable steps to ensure termination services and counselling are available which support UNCRC Article 24 (right to health) and Article 17 (access to information). <u>Safeguards against coercion</u> • The draft law provides for an offence for causing termination through threat, force, or undue coercion which support UNCRC Article 19 (protection from violence and abuse). <u>Privacy and Data Protection</u> • Reporting requirements prohibit identifying individuals, which aligns with UNCRC Article 16 (right to privacy). <u>Access Barriers for Vulnerable Groups</u> • Termination is currently a paid-for service in Jersey. It is recognised that those fees create a potential barrier to access for specific groups of people – hence as a matter of policy (as opposed to legislation) the following group of people are exempt from fees: - under 18s - full-time students - individuals in income support households - victims of rape or incest to access terminations Under the draft law, termination fees, and the associated exemptions, will be provide in law as opposed to policy, providing greater transparency and certainty as to the exemptions that apply.

The draft law removes the requirement for consultation with two doctors prior to a termination before 22 weeks pregnant. As a matter of existing operational practice, the first consultation is generally with a GP. Removing the two consultation requirements removes costs associated with GP consultation.

Confidentiality and Autonomy Challenges for Children

The draft law protects children from breaches of privacy or parental gatekeeping, supporting UNCRC Article 12 (right to be heard) and Article 16 (privacy). Young people believed to be competent can consent to care, without a parent's approval.

Delays and Psychological Impact

The draft Law removes requirement for consultation with two registered medical practitioners for a termination before 22 weeks. This helps reduce potential delay, as well as associated stress and psychological impact.

Two-practitioner requirement for terminations at 22 weeks or more could cause time-sensitive delays, increasing distress and risk of exceeding gestational limits. However, this is mitigated by the required availability of counselling for anyone accessing a termination service. Protecting a child's mental health accords with UNCRC Article 24.

Indirect Impact on Siblings and Family Dynamics

Decisions based on serious foetal anomaly may affect siblings' sense of value and identity, particularly disabled children. This could conflict with UNCRC Article 23 (rights of children with disabilities), but the draft Law enables women and families to make more knowledgeable decisions about their family and the future life and wellbeing of their potential child. Additionally, counselling will be made available, as well as second opinions, if women need further consultation.

Risk of Stigma and Harassment

Robust safe access zones will allow children accompanying caregivers or living near approved places to be protected from protests or harassment, supporting UNCRC Article 19 (protection from harm).

4) Is a full Children's Rights Impact Assessment required?

If you have identified impacts on children and their rights, a full CRIA should be completed. If no impacts are identified then a Full CRIA is not required, but please explain your rationale and how you reached this conclusion

A full CRIA is required in relation to the potential direct impact on children's rights

- Specifically because, should the draft law be adopted, a child will be eligible for a termination of pregnancy, impacting Article 3 (best interests of the child), Article 5 (parental guidance and a child's evolving capacities), Article 6 (life, survival, and development), Article 12 (respect for the views of the child), Article 16 (right to privacy), , Article 19 (protection from violence, abuse and neglect), Article 23 (children with a disability), Article 24 (health and health services), Article 26 (social security), Article 27 (adequate standard of living), and Article 37 (inhumane treatment and detention).

In addition to direct impacts, the draft law may have indirect impact on children's rights (i.e., impact on children of a parent having a termination procedure).

The full CRIA below relates to both the direct and indirect impacts on children's rights regarding their own termination of pregnancy or the termination of pregnancy for a parent.

It is noted that this CRIA deals with the impacts on children and young people, not on the unborn foetus. The rights of the child do not apply to unborn children, therefore provision / changes to the provisions of termination of pregnancy law does not impact on the rights of a child who has not been born. (*Vo v. France* (Application No 53924/00, the Grand Chamber of the European Court of Human Rights held that: "The unborn child is not regarded as a "person" directly protected by Article 2 of the Convention and that if the unborn do have a "right" to "life", it is implicitly limited by the mother's rights and interests." (para. 80))

If screening determines that a full CRIA is needed, complete Part 2

Part 2: FULL CHILDREN'S RIGHTS IMPACT ASSESSMENT

5) What will be the impacts (positive or negative) of the proposed decision on children's rights?

For each of the UNCRC articles described below, click to identify any that may be relevant ☒

Category	UNCRC Article	Impact? YES NO	
Guiding Principles	Non-discrimination (Art 2)	☐	☐
	Best interests of the Child (Art 3) to be a top priority	X	☐
	Right to Life survival and development (Art 6)	X	☐
	Respect for the child's views (Art 12)	X	☐
Civil Rights & Freedoms	Right to birth registration, name and nationality (Art 7)	☐	☐
	Right to an identity (Art 8)	☐	☐
	Freedom of expression (Art 13)	☐	☐
	Freedom of thought, conscience, and religion (Art 14) Every child has the right to think and believe what they choose	☐	☐
	Freedom of association (Art 15) Every child has the right to meet with other children and to join groups and organisations	☐	☐
	Right to Privacy (Art 16) including family and home life	X	☐

	Access to information from the media (Art 17) Right to access reliable information from a variety of sources, in a format that children can understand	X	☐
	Protection against torture or other cruel, degrading or inhumane treatment or punishment (Art 37(a))	☐	☐
Family Environment and Alternative Care	Respect for the responsibilities, rights and duties of parents (or where applicable, extended family or community) to guide their child as they grow up (Art 5)	☐	☐
	Responsibilities of both parents in the upbringing and development of their child (Art 18)	☐	☐
	Children must not be separated from their parents against their will unless it is in their best interests (Art 9)	☐	☐
	Family reunification (Art 10)	☐	☐
	Abduction and non-return of children abroad (Art 11)	☐	☐
	Right to a standard of living that is good enough to meet the child's physical and social needs and support their development (Art 27)	X	☐
	Special protection for children unable to live with their family (Art 20)	☐	☐
	Best interests of the child in the context of Adoption (Art 21)	☐	☐
	Review of treatment whilst in care (Art 25) If a child has been placed away from home for the purpose of care or protection (for example, with a foster family or in hospital), they have the right to a regular review of their treatment, the way they are cared for and their wider circumstances.	☐	☐
	Protection from violence, abuse or neglect (Art 19)	X	☐
Basic Health and Welfare	Recovery from trauma and reintegration (Art 39) Children who have experienced neglect, abuse, exploitation, torture or who are victims of war must receive special support to help them recover their health, dignity, self-respect and social life.	☐	☐
	Rights of disabled children (Art 23)	X	☐
	Right to health and health services (Art 24)	X	☐
	Right to social security (Art 26)	X	☐
Education, Leisure and	Right to adequate standard of living (Art 27)	☐	☐
	Right to education (Art 28)	☐	☐
	Goals of education (Art 29)	☐	☐

Cultural Activities	Education must develop every child's personality, talents and abilities to the full		
	Leisure, play and culture (Art 31) Every child has the right to relax, play and take part in cultural and artistic activities	☐	☐
Special Protection Measures	Special protection for refugee children (Art 22)	☐	☐
	Children and armed conflict (Art 38 and Optional Protocol #1) Governments must do everything they can to protect and care for children affected by war and armed conflict.	☐	☐
	Children and juvenile justice (Art 40) Right to be treated with dignity and respect, right to legal assistance and a fair trial that takes account of age.	☐	☐
	Inhumane treatment and detention (Art 37 (b)-(d)) Children should be arrested, detained or imprisoned only as a last resort and for the shortest time possible.	☐	☐
	Recovery from trauma and reintegration (Art 39) Children who have experienced neglect, abuse, exploitation, torture or who are victims of war must receive special support to help them recover their health, dignity, self-respect and social life	☐	☐
	Child labour and right to be protected from economic exploitation (Art 32)	☐	☐
	Drug abuse (Art 33)	☐	☐
	Sexual exploitation (Art 34)	☐	☐
	Abduction, sale and trafficking of children (Art 35)	☐	☐
	Protection from other forms of exploitation including for political activities, by the media or for medical research (Art 36)	☐	☐
	Children belonging to a minority or an indigenous group (Art 30)	☐	☐
	Optional Protocol on the sale of children, child prostitution and child pornography	☐	☐
	Optional protocol on the involvement of children in armed conflict	☐	☐

6) Information and research What evidence has been used to inform your assessment?		
Evidence collected (include links to relevant publications)	What did the evidence tell you?	What are the data gaps, if any?

The long-term impact of restricted access to abortion on children's socioeconomic outcomes ¹	Restricted access to abortion had, on average, a negative impact on the socioeconomic outcomes of the affected cohort of children. Children born after the 1974 Hungarian law change had worse educational outcomes, a greater likelihood of being unemployed at age 37, and a higher probability of being a teen parent.	This study was very specifically performed using a dataset from Hungarian villages and records.
Kids Having Kids. A Special Report on the Costs of Adolescent Childbearing ² .	Teenage pregnancy is associated with poor outcomes for young women and their children. For mothers, there is a higher risk of poor educational attainment, social isolation and poorer mental and physical health, while their children are more likely to be born preterm or with low birthweight.	

7) Engagement with children What groups of children and young people (or those who speak on their behalf, such as social workers, teachers or youth workers) have been directly or indirectly involved in developing the decision?		
Groups consulted	How they were involved	What were the findings?
A public consultation of Jersey residents was undertaken over a 14-week period (between 20 July and 31 October 2023). Of the respondents only 7% (43) were aged 16 to 19.	<u>Public consultation</u> via an online survey (or comments by email, comments by post). The specific findings or opinions cannot be desegregated by age.	The number of U18s responding to the public consultation was so low as proportion of overall, that they have not been extrapolated from overall responses.

¹ [The long-term impact of restricted access to abortion on children's socioeconomic outcomes](https://pmc.ncbi.nlm.nih.gov/articles/PMC7959378/) <https://pmc.ncbi.nlm.nih.gov/articles/PMC7959378/>

² [Kids Having Kids. A Special Report on the Costs of Adolescent Childbearing.](https://www.researchgate.net/publication/234721421_Kids_Having_Kids_A_Special_Report_on_the_Costs_of_Adolescent_Childbearing) https://www.researchgate.net/publication/234721421_Kids_Having_Kids_A_Special_Report_on_the_Costs_of_Adolescent_Childbearing

There was no dedicated outreach to children given the Children's Commissioner's previous advice not to consult children where distress may be caused (advice provided in relation to assisted dying).		
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8) Assessing Impact on children's rights Based on the information collected and analysed above, what likely impact will the proposed decision have on the specific children's rights identified in question 5)?		
Relevant UNCRC Articles (rights) identified in Q5	Describe the positive or negative impacts on these rights	Which group(s) of children are likely to be affected?
Article 3 – Best interests of the child	Direct impact: If the child is in need of pregnancy termination services, these services will be legally made available to them. Indirect impact: By preserving the parent/carer's wellbeing and mental health through termination services, the child is likely to have a safer and healthier upbringing.	All children could be impacted by this law.
Article 5 – Parental guidance and a child's evolving capabilities	Consent provisions allow for an U16 to consent to a termination if the medical practitioner is satisfied that they understand the nature and implications of having a termination. Parental consent is only required if the medical practitioner is not satisfied as to their understanding.	All children could be impacted by this law.
Article 6 – Life, Survival, and Development	Access to safe termination services reduces risk of unsafe procedures, protecting life and health.	All children could be impacted by this law.
Article 12 – Respect for the views of the child	U18 may choose to have a termination (or not)	All children could be impacted by this law.

	regardless of parental wishes.	
Article 16 – Right to Privacy	Requirement to only consult one doctor in some circumstances, as opposed two doctors helps to protect privacy. Draft law prohibits a doctor from reporting information that would allow for identification of person who has had a termination.	All children could be impacted by this law.
Article 19 – Protection from violence, abuse and neglect	Draft law provides it is an offence to use force, undue threat or undue coercion in order to cause or attempt to cause a woman (including U18) to have a termination. The wording of this offence protects U18 for force; coercion and threat and, in doing so, the wording is cast wide enough (through inclusion of the reference to ‘undue’) to ensure it does not capture, for example: a parent trying to persuade their daughter to have a termination (i.e., undue threat is required as distinct from parental anger). Unnecessarily criminalisation of the parent is not beneficial to the child.	All children could be impacted by this law.
Article 23 – Children with a disability	The amended law provides for termination on the grounds of serious foetal anomaly. Disability rights campaigners have argued such terminations are contrary to the rights of disabled people however, case law has established that foetus / unborn (whether or not with foetal anomaly) does	All children could be impacted by this law.

	not have rights and, further to that in 2021, UK Court of Appeal ruled that the right to abort a foetus with down syndrome does not interfere with the human rights of disabled people. As such, the law does not have a negative impact on the rights of children with a disability.	
Article 24 – Health and health services	Termination is a healthcare service. The law supports access to that service.	All children could be impacted by this law.
Article 26 – social security	GoJ provides termination services free of charge to under-18s, full time students, victims of rape or incest, and individuals who are receiving income support.	All children could be impacted by this law.
Article 27 – Adequate Standard of Living	Access to termination can prevent additional financial strain for families unable to support another child..	All children could be impacted by this law.
Article 37 – Inhumane Treatment and Detention	Abolition of customary law offence of abortion and no criminal liability for pregnant women prevent punishment if woman (including U18 year old) commits offence in relation to their own pregnancy.	All children could be impacted by this law.
9) Weighing positive and negative impacts • If a negative impact is identified for any area of rights <u>or</u> any group of children and young people, what options are there to modify the proposed decision to mitigate the impact? • Could any positive impacts be enhanced?		
<u>Child having a termination</u> A pregnant child may legally have a termination under Jersey law. The provisions of the draft Law – self-referral, counselling, removal of grounds – will further protect the health and wellbeing of children, both physically and mentally, as well as their future prospects, their access to education, the safety of their home life, and many other rights.		

The potential negative impacts of termination are counterbalanced by provisions related to access to counselling services

Termination services are provided free-of-charge to individuals below the age of 18, full-time students, victims of incest or rape, and individuals receiving income support.

The draft law recognises the right of an U16 who understands the nature and implications of having a termination to do so without parental consent

Child whose parent is having a termination

A child's parent may terminate a foetus which, if born, would be that child's sibling. The child may have sufficient maturity and understanding to comprehend this and may experience some associated distress. This potential negative is counterbalanced by the following factors:

- the parent's life / mental or physical health may have been at risk. Avoiding determinant to the parent may avoid detriment to the child
- the parent may decide to have a termination for other reasons (e.g.: financial or other stress) which may avoid corresponding detriment to the child (e.g.: parent being unable to financially provide for child's needs).

Overall, it is determined that the potential negative impacts are outweighed by positive impacts.

10) Conclusions

In summary, what are your key findings on the impact of the proposed decision on the rights of Jersey children?

The draft new Termination of Pregnancy law provides for the rights of the child both directly and indirectly.

Direct benefits include:

- providing for lawful termination without justification of need up to 22 weeks helps reduce associated stigma
- placing a duty on the Minister to provide counselling services, and to require provision of counselling information in advance of the termination, supporting women and girls to make informed, reflective decisions about having a termination and addressing any associate trauma (post-termination).

Indirect benefits include:

- supporting a parent's physical and mental wellbeing through access to terminations on health grounds
- providing a parent the right to decide to have a termination (before 22 weeks) when they believe it is right to do so, which may include reasons that benefit their children's wellbeing (e.g., avoiding financial or parental stress).