
ANTI-ABORTION ATTITUDE AND LEGISLATIVE DEBATE IN THE UK AND POLAND A SOCIO-LEGAL ANALYSIS

Karolina Harasimowicz* and Justyna Estera Krol-Calkowska

Lazarski University, ul. Swieradowska 43, Warsaw, 02-662, Poland

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Abstract

This article explores the socio-legal ramifications of anti-abortion views and legislative discussion with respect to abortion in the UK and Poland. This analysis examines the distinct legislative frameworks and political environments that influence the abortion discourse in each nation, highlighting its similarities and differences. Additionally, it examines the impact of advancements in reproductive health technology, such as telemedicine and abortion pills, on the accessibility and availability of abortion services. The study contends that the anti-abortion stance and legislative discourse in the UK and Poland exemplify the wider conflicts between human rights, political autonomy, and religious sway in Europe. Furthermore, it indicates that the advancements in technology regarding abortion services present novel obstacles and possibilities for safeguarding women's reproductive rights.

Keywords: laws, movement, health law, medical law

1. Introduction

The discourse around abortion in the United Kingdom and Poland is shaped by a range of factors, including religious beliefs, moral convictions, and concerns about the rights of the unborn. Anti-abortion and legislative debates in these countries reveal the ways in which anti-abortion advocates construct their arguments and the underlying values and beliefs that inform their positions [*Britain's abortion law*, BPAS, <https://www.bpas.org/get-involved/campaigns/briefings/abortion-law/>]. The legal status of abortion varies greatly across different countries, with some countries permitting it only under strict circumstances while others have legalized it completely. Abortion is a highly controversial issue around the world, with a range of laws and regulations in place in different countries. In this essay, we will be analysing the laws related to abortion in two countries, the United Kingdom and Poland. We will examine the history of abortion laws in these countries, the current legal framework, and

*E-mail: haraskka@yahoo.pl, tel.: +48 666 715 705

the attitudes of the public and policymakers toward abortion. Both countries have recently introduced legislation aimed at restricting access to abortion, but the approaches taken by these countries are very different.

2. Background of the study

Anti-abortion attitude in the United Kingdom focuses on the idea that abortion is immoral and goes against the value of human life. Proponents of this viewpoint argue that a foetus has a right to life from the moment of conception and that abortion is, therefore, akin to murder. They also argue that there are better alternatives to abortion, such as adoption, which do not involve ending a life. In contrast, in Poland, the focus of anti-abortion is often on the importance of protecting the traditional family structure. Supporters of this viewpoint argue that abortion undermines the family by promoting a culture of individualism and self-centeredness. They also argue that abortion is harmful to women, both physically and mentally, and that it leads to a breakdown in social values.

Issues related to the legal aspects of termination of pregnancy have recently been one of the most sensitive topics in Poland. Legislation and the attitude of some social groups to this issue is conservative, meaning a rigorous approach both in legal and social terms. When analysing the admissibility of termination of pregnancy, it should be assumed that the possibility of performing the procedure depends on the approach adopted in this respect, i.e. strict conservative prohibition of termination of pregnancy, regardless of the existing premise: 1) conservative, which allows termination of pregnancy due to the protection of life and health, 2) liberal, allowing termination of pregnancy due to medical, legal or social reasons, including e.g. a difficult life or personal situation of the woman, 3) extremely liberal, allowing abortion on demand, regardless of the existence of additional premises.

Poland remains one of Europe's most devoutly Catholic societies, with over 90% of Poles identifying as Catholic. The Catholic Church continues to wield substantial religious and political influence in the country, shaping societal attitudes and public policy. As Kulczycki outlines, Poland stands apart from broader liberalization trends regarding abortion laws across Western and Southern Europe over recent decades, attributable in large part to pressure from the powerful Catholic lobby [1]. Anti-abortion advocates frequently employ religious and moral arguments against the practice, contending that it violates the sanctity of life, Catholic tenets regarding family and motherhood, and Poland's traditional values [2].

3. Legal framework

3.1. United Kingdom

The United Kingdom was one of the first countries in the world to legalize abortion. The 1967 Abortion Act allowed for abortion in certain circumstances,

such as if the pregnancy posed a risk to the life or health of the mother or if the child would be born with serious physical or mental abnormalities. The act was highly controversial at the time, but it marked a significant shift in attitudes towards reproductive rights. Since the passage of the 1967 Abortion Act, there have been several amendments to the law. In 1990, the Human Fertilisation and Embryology Act introduced a requirement for two doctors to certify that an abortion was necessary. In 2018, the UK government allowed women from Northern Ireland to access abortion services in England and Wales after years of campaigning by activists. The Abortion Act of 1967 permits abortions up to 24 weeks of pregnancy, subject to certain conditions. After 24 weeks, abortions are only allowed if there is a risk to the life or health of the mother or if the child is born with serious physical or mental abnormalities. The decision to have an abortion must be made by the woman, with the advice of a medical professional.

Abortion services are provided by the National Health Service (NHS) in England, Scotland and Wales. In Northern Ireland, abortion services were illegal until 2019, when the Northern Ireland Executive Formation Act 2019 decriminalized abortion [<https://www.legislation.gov.uk/ukpga/2019/22/contents/enacted>]. However, there are still significant barriers to accessing abortion services in Northern Ireland, including a lack of trained medical professionals and resistance from some healthcare providers.

In March 2020, the UK government announced that it would be conducting a review of the country's abortion laws, with a view to potentially changing them. However, no changes have been made to the law so far. In the United Kingdom, anti-abortion advocates often use the description of the sanctity of life to argue that all human life is inherently valuable and must be protected. They contend that abortion is a form of violence against the unborn and that women who seek abortions are not fully aware of the moral implications of their actions [*Positive change on life issues - abortion, assisted suicide and embryo research*, Right To Life UK, 2023, <https://righttolife.org.uk/>].

The argument around abortion in the UK has also been influenced by concerns about disability and discrimination, with some anti-abortion advocates arguing that abortion for non-fatal disabilities is discriminatory and reinforces ableist attitudes. Attitudes towards abortion in the United Kingdom are generally supportive of reproductive rights. A 2019 poll by YouGov found that 64% of people in the UK believe that abortion should be legal in all or most cases. However, there are still vocal opponents of abortion, including religious groups and anti-abortion activists.

Further, there have been attempts to introduce anti-abortion legislation in the UK in recent years.

3.1.1. R (on the application of BPAS) v Secretary of State for Health

In 2014, the British Pregnancy Advisory Service (BPAS) challenged the legality of the UK's abortion laws. The case centred on the requirement for two doctors to approve an abortion, arguing that it was unnecessary and created an

unnecessary barrier to access. The case was ultimately unsuccessful, and the requirement for two doctors' approval remains in place.

3.1.2. A, B and C v Ireland

This case, which was heard by the European Court of Human Rights in 2010, centred on Ireland's restrictive abortion laws. The court found that the laws violated the applicants' human rights by denying them access to abortion in cases where their lives were at risk. While Ireland's laws are not directly comparable to the UK's, the case is significant because it underscores the importance of protecting women's rights to access safe and legal abortion.

In 2017, for example, an attempt was made to ban abortions after 20 weeks, but the proposed legislation was ultimately defeated in Parliament. Similarly, in 2019, an attempt was made to introduce a law that would require doctors to provide life-saving treatment to babies who survive abortions, but this, too, was defeated. Despite this, some campaigners in the UK have been calling for stricter abortion laws. One of the main arguments put forward by these campaigners is that advances in medical technology mean that it is now possible for babies to survive outside the womb at a much earlier stage of pregnancy than was previously the case. Therefore, they argue, the current 24-weeks limit for abortions should be lowered [E. Bashforth, *What are the UK abortion laws?*, Patient.info, 2022, <https://patient.info/news-and-features/what-are-the-uk-abortion-laws>].

3.1.3. Northern Ireland Human Rights Commission v Secretary of State for Justice

In 2018, the UK's Supreme Court ruled that Northern Ireland's abortion laws were incompatible with human rights legislation. The court found that the laws, which prohibited abortion in almost all cases, violated women's rights to privacy and autonomy. As a result of the ruling, Northern Ireland's laws were amended to allow for abortion in cases where the mother's life is at risk or there is a risk of serious and permanent damage to her mental or physical health.

Another argument often made by anti-abortion campaigners in the UK is that abortions are being carried out for non-medical reasons. They point to statistics that show that a large number of abortions are performed on women who are not in immediate danger of dying as a result of their pregnancy. Pro-choice campaigners argue, however, that women should have the right to choose whether or not to continue with a pregnancy, regardless of the reason for their decision.

3.2. Poland

The rules related to the permissibility of termination of pregnancy are regulated in Poland by the Act of 7 January 1993 on family planning, protection

of the human foetus, and conditions for the permissibility of termination of pregnancy (hereinafter: the Act) [*Polish Abortion Act*, Center for reproductive rights, <https://reproductiverights.org/sites/crr.civicactions.net/files/documents/Polish%20abortion%20act--English%20translation.pdf>]. Until May 1997, in Poland, the conservative-liberal approach to abortion was in force, giving the possibility of abortion for medical, legal (provided it was formally stated that the pregnancy resulted from a prohibited act) and social reasons. The amendment to the Act introduced an additional premise according to which termination of pregnancy was permissible also when the pregnant woman was in difficult living conditions or in a difficult personal situation. This premise was found to be inconsistent with the Constitution by the decision of the Constitutional Tribunal of May 28, 1997 (K 26/96, OTK 1997, No. 2, item 19) [3] and lost its binding force. After the announcement of the Constitutional Tribunal's judgment of October 22, 2020, the Polish approach to termination of pregnancy is conservative. As a result of the announcement of the Constitutional Tribunal's judgment, the premise for termination of pregnancy specified in Art. 4a sec. 1 item 2 of the Act, according to which: "*Termination of pregnancy may only be performed by a doctor if (...) prenatal tests or other medical conditions indicate a high probability of severe and irreversible impairment of the foetus or an incurable disease that threatens its life.*"

When analysing this premise, the Constitutional Tribunal made an estimation of the 'symmetry of goods', indicating that limiting the protection of human life is admissible only when such a manner of operation implies protection of a similar value. In the authors' opinion, the above constitutes a *sui generis* threat to the existence of other premises justifying termination of pregnancy - i.e. in a situation where it poses a threat to the life or health of a pregnant woman (Article 4a(1)(1) of the Act), or when there is a reasonable suspicion that the pregnancy resulted from a prohibited act (Article 4a(1)(3) of the Act). Applying by analogy the estimate of the collision to the other grounds for termination of pregnancy *de facto* excludes the legitimacy of termination of pregnancy due to a threat to the health of the pregnant woman, as well as in the case when the pregnancy is the result of a prohibited act. This is directly due to the fact that only the protection of a woman's life versus the restriction of the nasciturus' right to life determines the admissibility of termination of pregnancy.

While there are different arguments for anti-abortion attitudes in these two countries, both share a common goal: to reduce or eliminate the practice of abortion. In the United Kingdom, this is typically achieved through lobbying for legal restrictions on abortion, while in Poland, it is achieved through legal bans on the practice.

However, there are also those who argue in favour of abortion rights. Supporters of abortion argue that women have the right to choose what happens to their bodies, and that making abortion illegal would force women to seek out unsafe and potentially life-threatening procedures. They also argue that access to safe and legal abortion is a fundamental human right.

Until recently, Poland had some of the strictest abortion laws in Europe. Abortion was only permitted in cases where the mother's life was in danger, where the pregnancy was the result of rape or incest, or where the foetus was severely malformed.

Abortion was first legalized in Poland in 1956, but was heavily restricted in 1993 by the passage of the Act on Family Planning, Protection of the Human Fetus and Conditions for Termination of Pregnancy. The law only allows for abortion in three circumstances: if the pregnancy poses a risk to the life or health of the mother, if the pregnancy is the result of rape or incest, or if the child would be born with serious physical or mental abnormalities.

The current law in Poland has been subject to several attempts to make it even more restrictive. In 2016, a bill was introduced that would have made abortion illegal in all circumstances, including when the woman's life was in danger. The bill sparked mass protests across the country, and it was eventually withdrawn. In 2020, another bill was introduced that would have banned abortion in cases of foetal abnormality, which is one of the three legal grounds for abortion in Poland. The bill was signed into law by President Andrzej Duda, leading to widespread protests across the country. However, in October 2020, the Polish Constitutional Court ruled that abortions in cases where the foetus has severe and irreversible birth defects are unconstitutional.

Among the standards of European law in the field of protection of life, the Polish legal system includes, among others, the Convention for the Protection of Human Rights and Fundamental Freedoms of November 4, 1950 [*European Convention on Human Rights*, European Court of Human Rights, https://www.echr.coe.int/documents/d/echr/Convention_ENG], and ratified by Poland on January 19, 1993 (hereinafter: ECHR) and the Charter of Fundamental Rights of the European Union December 7, 2000 (hereinafter: EU Charter) [*The Charter of Fundamental Rights of the European Union*, https://cadmus.eui.eu/bitstream/handle/1814/68959/The%20CFREU_Chapter%201.pdf]. The doctrine establishes the need to protect the nasciturus and include it within the scope of Art. 2 ECHR. Opponents of this position oppose granting any rights to the conceived child. The intermediate position is that, although abortion is a violation of Art. 2 of the ECHR, so the protection of the foetus is not and cannot be absolute and may be subject to limitations. In the discussed context, reference should be made to the judgments issued by the European Court of Human Rights to the extent that it refers to the scope of protection of the conceived child and the possibility of modelling it depending on the occurrence of exogenous variables. In the case of *Vo v. France* [53924/00 [2004] ECHR 326], the Court emphasized that the establishment of a temporary point of protection of human life is a matter for the independent competence of States. At the same time, the Court emphasized that the nasciturus is not a person directly protected by Art. 2 of the ECHR, and even if the right to life of the foetus existed, it would be subject to limitations due to the interests of the mother. The ECtHR noted, however, that nasciturus may be covered under certain circumstances by the guarantees provided for in Art. 2 ECHR. In the

jurisprudence of the Court, which states that Art. 2 of the ECHR also includes the right to life of adequate quality, which gives space for consideration in the subject of understanding life as the possibility of conscious participation in the processes that accompany life at its various stages, and not only life as the biological functioning of the body in isolation from the cognitive process.

It should be illuminate that the ECtHR adjudicates applying the margin of appreciation principle, which results in examining what regulations in a given case have been adopted by the States Parties to the Convention, and on the basis of these findings, it adopts an appropriate degree of freedom of assessment. The above causes that the margin of appreciation is the wider, the wider is the diversity of internal regulations of individual States Parties.

Clearly in Poland, the dominant narrative around abortion is shaped by the Catholic Church's opposition to abortion and its influence on public opinion. Anti-abortion advocates in Poland argue that abortion is a form of violence against women and the unborn child and that women who seek abortions lack proper values and respect for life [4]. They also contend that strict abortion laws are necessary to protect traditional family values and the institution of marriage and that liberal access to abortion would undermine the role of women as caretakers and guardians of the family [*Poland: Regression on abortion access harms women*, Amnesty International, 2022, <https://www.amnesty.org/en/latest/news/2022/01/poland-regression-on-abortion-access-harms-women>].

The Polish government introduced new legislation which effectively bans abortions in almost all circumstances. The new law, which came into effect in January 2021, permits abortions only in cases where the mother's life is in danger or where the pregnancy is the result of rape or incest. Critics of the new law argue that it is a violation of women's human rights [A. Mortensen, *Poland puts new restrictions on abortion into effect, resulting in a near-total ban on terminations*, CNN, 2021, <https://www.cnn.com/2021/01/28/europe/poland-abortion-restrictions-law-intl-hnk/index.html>]. They point out that many women in Poland will now be forced to seek unsafe and illegal abortions, which could lead to serious health problems or even death. Some women's rights groups have also argued that the new law will disproportionately affect women from low-income backgrounds, who may not have the resources to travel to another country to access safe and legal abortions.

4. The Constitutional Tribunal ruling of 2020

In October 2020, Poland's Constitutional Tribunal issued a ruling that further restricted access to abortion in the country [3]. The ruling banned abortions in cases of foetal defects, which accounted for the vast majority of legal abortions in Poland. The ruling sparked widespread protests across the country and was widely criticized by human rights groups.

The Polish government has also introduced a number of other measures that restrict access to abortions, such as a law requiring doctors to refuse to perform abortions on the grounds of conscience, even in cases where the life or

health of the mother is at risk. This has led to a situation where women are being denied access to vital medical care, with some even being forced to travel to other countries to access safe and legal abortions.

Despite the restrictions on abortion, there are still some organizations in Poland that provide information and support to women seeking abortions, as well as services such as counselling and medical care. However, these organizations are often subject to harassment and intimidation from anti-abortion activists and the government. In conclusion, the legal framework of abortion laws in Poland has become increasingly restrictive in recent years, with the Constitutional Tribunal's ruling in 2020 effectively banning abortions in cases of fetal abnormalities. This has led to widespread protests and criticism, both domestically and internationally, with women's rights groups and human rights organizations calling for the protection of women's rights and access to safe and legal abortions. However, the Polish government has taken a hard-line stance on the issue, leading to a situation where women's health and lives are being put at risk.

5. Comparison between UK and Poland

The differences in abortion laws between the UK and Poland are significant. The UK allows women to make choices about their own bodies and reproductive health, and the law is based on the principle of protecting women's health and well-being [5]. In contrast, the law in Poland is based on a restrictive and punitive approach that seeks to control women's bodies and punish those who seek abortions. The anti-abortion laws in the UK and Poland reflect different attitudes toward women's reproductive rights and autonomy [R. Birchard, *Poland's strict abortion laws leave few safe options for women*, Public Broadcasting Service, 2022, <https://www.pbs.org/newshour/show/polands-strict-abortion-laws-leave-few-safe-options-for-women>, accessed on 6.03.2023].

While the UK has a progressive and liberal approach that respects women's choices and health, Poland has a conservative and punitive approach that seeks to control women's bodies and punish those who seek abortions. The differences in these laws highlight the need for a global conversation on women's reproductive rights and the importance of protecting and promoting these rights. As mentioned, the UK permits abortion up to 24 weeks of pregnancy.

In Poland, the law permits abortion only up to 12 weeks, except in cases of rape, incest or where the mother's life is in danger. In the UK, women have easy access to abortion services through the National Health Service (NHS). In Poland, access to abortion services has become increasingly difficult due to the country's restrictive laws. In the UK, there is no mandatory waiting period for women seeking an abortion. In Poland, there is a three-day waiting period before a woman can have an abortion. In the UK, a young person under the age of 16 can have an abortion without the consent of their parents. In Poland, parental consent is required for anyone under the age of 18. In the UK, abortion is legal

up to birth if there is a significant risk of the foetus being born with a severe disability. In Poland, such abortions are not allowed, except in cases where the mother's life is at risk.

Considering the above, the main problem related to the admissibility of termination of pregnancy seems to be the determination of the beginning of life and the treatment of the nasciturus as a person. The distinction between the concepts of a human being and a person is important to the extent that the protection of a human being should be identified with the protection of their identity, while the protection of a person guarantees their integrity, rights and freedoms. The assumption that the scope of protection is closely related to the subjective definition should be referred to the provisions of the Convention for the Protection of Human Rights and Dignity of the Human Being in the Field of Application of Biology and Medicine of 4 April 1997 (hereinafter: the Convention) [Council of Europe, *Convention for the Protection of Human Rights and dignity of the human being with regard to the application of Biology and Medicine: Convention on Human Rights and Biomedicine (ETS no. 164)*, Treaty Office, <https://www.coe.int/en/web/conventions/-/council-of-europe-convention-for-the-protection-of-human-rights-and-dignity-of-the-human-being-with-regard-to-the-application-of-biology-and-medicin-2>], which has not been ratified by Poland. According to Art. 1 of the Convention, "The Parties to this Convention protect the dignity and identity of the human being and guarantee every person, without discrimination, respect for his or her integrity and other fundamental rights and freedoms with regard to the application of biology and medicine".

In the Polish medical community, doubts arose at one time regarding the legitimacy of providing pregnant women with information about the possibility of performing prenatal tests that could be a source of information about foetal defects. The patient's right to information results directly from Art. 9 of the Act on Patient Rights and the Patient Rights Ombudsman (hereinafter: UoPP), according to which "a patient has the right to information about his health". However, Art. 9 of the UoPP refers directly to the health condition of a pregnant woman and not the foetus, so the specificity of the services provided to a woman justifies recognizing information about the health condition of the foetus as an element of information concerning the patient's health condition. Prenatal information and examinations are directly referred to in Art. 2a of the Act, according to which "government administration and local government authorities (...) are obliged to ensure free access to information and prenatal tests, especially when there is an increased risk or suspicion of a genetic or developmental defect of the foetus or an incurable disease threatening the life of the foetus". It should be noted that although the provisions relating to the admissibility of termination of pregnancy for eugenic and teratological reasons have been removed from the Polish Act, the obligation to ensure access to prenatal tests and information in this area is still valid. The judgment in *RR v. Poland* [App no 27617/04 (26 May 2011)] emphasized that "The right of access to such information, falling within the scope of the notion of private life, can be considered as a right consisting, on the one hand, of the right to obtain available

information about one's health. It should be further pointed out that during pregnancy, the condition of the foetus and its health are part of the health of the pregnant woman. The effective exercise of this right is often decisive for the exercise of personal autonomy, which also falls within the scope of Art. 8 of the Convention by deciding, on the basis of such information, the future course of events relevant to the child's parents, including the right to maintain the expected standards of living - i.e. birth of a child without eugenic and teratological defects and family planning. Regardless of the ban on abortion for eugenic and teratological reasons, the so-called 'pregnancy registry' for monitoring confirmed pregnancies. Pursuant to § 2 sec. 1 letter m. of the Regulation of the Minister of Health, amending the Regulation on changing the detailed scope of data of a medical event processed in the information system (...), "the service provider provides to the medical information system (...) data identifying the health service, which include: information about the recipient's pregnancy, if the service provider will obtain them in connection with the provision of a health service or the implementation of a significant medical procedure". Although the register referred to above is not a direct control instrument, one can speak of a kind of repression of the subconscious of pregnant women. This is of particular importance in a situation where diagnostic tests have shown the existence of a foetal defect, which may encourage the child's parents to decide on its termination despite the existence of regulations prohibiting this type of practice.

Despite the differences, there are some similarities between the abortion laws of the two countries. One of the most significant similarities is that abortion is not a criminal offense in either country. In the United Kingdom, the Abortion Act made it legal to have an abortion within the specified conditions, while in Poland, while the laws are more restrictive, women who have abortions are not subject to criminal penalties.

Another similarity is that both countries require a medical professional to assess the woman's circumstances before an abortion can be carried out. In the United Kingdom, two doctors must agree that the abortion is necessary for the woman's physical or mental health, while in Poland, a doctor must certify that one of the three legal grounds for abortion is present. Both countries also have provisions for conscientious objection. In the United Kingdom, medical professionals are allowed to refuse to participate in abortions if they have a moral objection, but they must refer the woman to someone who can help her. In Poland, doctors and nurses can also refuse to participate in abortions on moral or religious grounds, but they must notify the woman of their objections and refer her to another medical professional. Finally, both countries allow for the use of medication to induce abortions. In the United Kingdom, medication abortion is legal up to 10 weeks gestation, while in Poland, it is allowed up to the end of the 9th week of pregnancy.

6. Conclusions

In conclusion, the issue of abortion remains highly controversial in both the United Kingdom and Poland. While the UK has not made any major changes to its abortion laws in recent years, there have been attempts to introduce stricter legislation. In Poland, however, the situation is very different [*Poland: Protesters stage biggest abortion rights rally yet*, Deutsche Welle, 30/10/2020, <https://www.dw.com/en/poland-protesters-stage-biggest-abortion-rights-rally-yet/a-55449033>, accessed on 6.03.2023]. The recent ruling by the Constitutional Court and the subsequent introduction of the new legislation has effectively banned abortion in almost all circumstances. While access to abortion services in the UK is relatively easy, in Poland, restrictive laws have made it difficult for women to access safe abortion services. The debate surrounding abortion is likely to continue in both countries, and it will be interesting to see how the laws evolve over time.

Yet, today the world is still in shock, after the unprecedented decision of President Duda to annex the anti-abortion law. Was it Poland's attempt to awaken its neo-imperialism or a simple case of assertion of national sovereignty? The question posed to the people was now whether a new road to the European Union and the West, or a pursuit of the historic ties with Eastern ideology was the right answer? Adoption of religious beliefs as a shaping variable as the basis for protecting the life of the foetus contradicts the secular idea of the state and the principles expressed in the ECHR. According to Art. 8 of the ECHR, "interference by public authority in the exercise of this right is inadmissible, except in cases provided for by law and necessary in a democratic society for reasons of national security, public safety or economic well-being of the country, for the protection of order and the prevention of crime, for the protection of health and morals or protection of the rights and freedoms of others". It seems that restrictions on termination of pregnancy for eugenic and teratological reasons result in the decompensation of the system of balancing the protection of goods, which is associated with the protection of the normatively unstable boot of the nasciturus while sacrificing the goods of the child's mother. The above leads to the assumption that the nasciturus protection regime is disproportionately wide, and the scope of the adopted protection is a component of limiting the right to family planning, life of adequate quality and indirectly also the right to information on the health of a pregnant woman, whose inherent layer is the results of prenatal tests.

Overall, the narratives used in anti-abortion testimony and legislative debate in the UK and Poland reflect deeply held beliefs and values about the sanctity of life, the role of women in society, and the importance of traditional family values [*UK government deletes abortion from International Human Rights Statement*, <https://www.politics.co.uk/opinion-former/press-release/2022/07/19/uk-government-deletes-abortion-from-international-human-rights-statement/>, accessed on 6.03.2023]. By analysing these narratives, we can gain a better understanding of the motivations and perspectives of anti-abortion advocates,

and the ways in which they seek to shape public opinion and influence policy on this highly contested issue.

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