

THE BULLETIN

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CONTENTS

An ageing society – a growing challenge	Roger Hitchings	2
Sex and gender in the 2021 census	Rod Badams	4
War on the old	Louise Morse	8
Evangelical parents, teenage children	Ian Fry	11
Update on Life Issues	John Ling	17
Latest News of Significant Individual Cases		27



An ageing society – a growing challenge

We are an ageing society; numbers of older people are increasing both in real terms and as a percentage of the whole population. This is a fact that most people appreciate, up to a point. The Health Service and local care services are increasingly stretched because of the growing demand upon them. How the nation can afford this is a matter of considerable discussion and analysis. The Church in general acknowledges the issue, although how to respond is answered with varying degrees of enthusiasm and concern. What do we need to do? It truly is a growing challenge.

In 2016 the office of National Statistics estimated the population of the UK to be over 65 million. Of that number, 18% (almost 12 million) were 65 and over. By 2026 it is estimated that the population will be nearly 70 million and 20.5% (over 14 million) will be 65 and over. In the UK there are now more people aged over 65 than there are under 16, and the number of 90-year-olds has nearly trebled in the last thirty years. That will double further in the next ten years. In terms of church attendance, the statistics are even more dramatic. In the 1980s four million people were in church on Sundays, of which 815,000 were over 65. It is now estimated that at the present time only three million attend a church, of which just under a million are aged over 65. So, whilst overall attendance is falling, the number of older people attending is increasing in real terms. Of course, in some places the trends are different, and evangelical churches do appear to be growing rather than declining. But one fact is clear – there is a higher percentage of older people in our churches now than previously.

How then should we respond to this changing situation? Some people bemoan this trend and express concern for the future of the Church. They see the whole future being dependent on young people. But what we must always remember is that demographics merely describe what is happening; they do not define what God might do. Jesus said "I will build my church" and he is in full control. Age discrimination does not occur in the Scriptures. Rather, the needs of all people are given equal concern whatever their age, nationality, race, gender, religious background or whatever other false division some will make. We are called to work and pray for the growth and progress of the church as a whole. Having said that it also has to be admitted that churches have rightly invested quite extensively in youth and children's work. Nothing should be done to reduce that. But it has to be noted that attention to work with older people has, in comparison, been very small. Indeed, we could say that older people have been neglected.

It is time to start thinking about how we develop ministries with and for older people across the whole spectrum of need. There tends to be an acceptance of the self-indulgent perspective of retirement and old age, and so the vast resource of older people are neglected and lost. Similarly, pastoral care of older people is too often superficial and fails to address significant issues of later life. Then again, the vast evangelistic opportunities that exist among older people in our society are largely under-addressed. One particular area of opportunity is the significant impact of loneliness. There is even a government Minister for Loneliness, but churches seem reluctant and slow to respond. Yet AgeUK suggest that there are 1.2 million people in the UK who say they are "chronically or persistently lonely". Major Christian conferences have seminars on all manner of legitimate concerns in the church, but responding to the needs of older people is rarely on the agenda. Having presented this rather negative but, I believe, sadly accurate, analysis it has to be thankfully acknowledged that some churches excel in some or all of these areas, but there are not many.

A new initiative has now been established which is intended to support and encourage churches in developing ministries to older people. "Faith in Later life" is a joint project between five major evangelical organisations – Pilgrims' Friend Society, London City Mission, The Salvation Army, Mission Care and Keychange. A website has been set up (http://faithinlaterlife.org) which has details of over 1500 different resources. These are from a varied range of sources and reflect a wide range of evangelical thinking. But there is very useful material there which will help and inform churches as they take action to respond to the needs of their particular setting. The website also suggests areas of new activity that churches might develop. This website has been operational for three months and already interesting trends can be seen in the areas of evangelism and worship.



Alongside these practical ideas "Faith in Later Life" has also employed a researcher and writer to produce a summary of biblical teaching on old age. This project is under the supervision of Dr Garry Williams at the Pastors' Academy of London Seminary. A book is planned for publication later in the year. This is important because one of the major needs is to enable churches – and especially church leaders – to think more biblically about later life. It is also an important that older people themselves start to think biblically about ageing and not to accept the attitudes and low expectations of the culture around them.

There is then this growing challenge. The numbers of people who may be classed as older and of those who are retiring are increasing, even though the retirement age is rising. An opportunity is therefore coming both to harness the skills of older Christians to use them in the advance of the gospel, and to develop new initiatives to reach out to the vast numbers of older people who do not yet know the Saviour. May the Lord grant us all courage and wisdom to respond effectively to this growing challenge of an ageing population.

Roger Hitchings

Sex and gender in the 2021 census

In the 2011 census, the first question requested the respondent's full name. The second asked: What is your sex? In answering, he or she was invited to tick either a box marked male or another marked female.

That same simple binary question has been asked in every census in Britain since the regular national survey began in 1841. It is not likely, however, to be asked in that way in 2021.

For the past two years, the Office for National Statistics (ONS), which administers the 10-yearly census in England and Wales, has been developing and testing a number of different possible new ways of presenting this previously straightforward question.

In considering what questions should be asked, and how they should be worded, the ONS is obliged to take account of several factors which can conflict with each other.

It has to have regard for the quality and usefulness of the information the census is intended to collect, for the benefit of policy-makers in all areas of public life. These policy-makers include not only the government, local government and statutory public authorities, but many other agencies and institutions which have responsibility for areas of public administration and welfare provision.

The introduction of the Equality Act in 2010 increased the responsibilities of public authorities in connection with people with a range of what the Act termed "protected characteristics". These characteristics are age, disability, gender reassignment, race, religion or belief, sex, sexual orientation, marriage and civil partnership and pregnancy and maternity. In order to fulfil their public duty, service providers require information, and the regular national census is an obvious opportunity to obtain it.

As part of its assessment of the "user value" of the questions asked in the census, the ONS is considering the need to gather more information about "the trans population", which it defines as "those whose gender identity is different from the sex they were assigned at birth". Currently there is no reliable information regarding the number of people within the population who come within this definition.

The ONS not only has to consider the requirements of data users. It has to take account of how respondents perceive the questions they are being asked. Respondents want questions to be asked in a way which allows them to give the answer which they consider to be the correct one.

A pilot exercise carried out by the ONS showed that "some members of the public [reported] that they were unable to complete the current (2011) sex question accurately as it only offered the two categories of male or female".

In view of this complaint, the ONS is testing some alternative forms of words. One suggested option is to keep the original question, but to add a third box marked "other" in which respondents can self-identify what they consider themselves to be.

Another idea being canvassed is to keep the What is your sex? question unchanged, but to include a separate additional question on "gender identity".

The subjects of sexual orientation and gender identity are controversial and sensitive to a great many people – not just to Christians – and if questions on those subjects are included in the 2021 census, the final wording is unlikely to please everyone.

A third ONS obligation is to ensure the validity and authority of the census data as a whole. Public resistance to the inclusion, or to the wording, of particular questions can put at risk the reliability of the whole census.



This resistance manifests itself in a number of ways.

One reaction of respondents is to ignore altogether any question they don't like. If a lot of people do this, it will greatly affect the accuracy, and therefore the usefulness, of the data collected.

Even more seriously, some respondents can be so offended by a question that they not only fail to answer that particular question, but they withdraw from the whole census process, failing to return the form and ceasing to co-operate with census enumerators.

A test survey in 2016, for instance, showed that 30 per cent of respondents would find it "unacceptable" for a question on sexual orientation to be included in the 2021 census. They might therefore not answer it.

One per cent of the entire survey sample, however, would go much further - abandoning the census process altogether if it included a question on sexual orientation. This may seem a small percentage, but across the whole of the population of England and Wales recorded at the 2011 census, it would have amounted to 560,759 people - sufficient to distort some of the findings, even if only slightly.

One suggested compromise still under consideration is to include a "prefer not to say" option in the sexual orientation question. Trials have shown that this would reduce resistance by 25 per cent.

Under the Census Act 1920, respondents are required by law to answer all questions except the one on their religious belief. The inclusion of a prefer not to say box satisfies the law, since the respondent would still be answering the question.

Another concern of the ONS is the accuracy of the data entered by respondents. When unhappy with questions, some respondents may not ignore the questions or abandon the census process, but their displeasure may lead them to be careless or casual, or even deliberately inaccurate, about some of their answers. To minimise the risk of this, the ONS goes to great lengths to ensure that only questions which need to be asked are included in the census, and that they are worded in an acceptable way.

For some of the above reasons, it is still far from certain that there will be a question on sexual orientation in the 2021 census.

Finally, the ONS also needs to consider whether the inclusion of a question in the 2021 census is the best way of collecting the information being sought. In the age of the internet, there are many ways of gathering statistics, and for some types of data, a different vehicle may be more effective.

Why, it may be wondered, are we taking up so much space in this edition of The Bulletin to write about the minutiae of a long-established bureaucratic process. Are there no bigger and more urgent issues to address?

If we do think in that way, we will have missed something serious. If the What is your sex? question is expressed in a way which goes beyond the traditional binary approach, this will amount to official recognition of the answers the wording permits.

Any official recognition in the census of a non-binary understanding of sex and gender will have wideranging effects.

There is considerable risk that the figures obtained will be used to create and justify new categories of individual rights and to impose increased equality obligations on service-providers.

The confusion, tensions and practical difficulties which are already apparent in areas of public life in connection with sex and gender will be compounded.



Most Christians will be greatly distressed by any attempt officially to re-define the composition of the human race in a way which is incompatible with God's created order. The Bible makes it clear (Genesis 1:26-27) that God created man in two distinct sexes – male and female. For anyone to identify as something different, and to be given a formal opportunity by the State to do so, is an act of rebellion against the design of God.

It is also an act of folly, since God has made every person as they are, and, whatever the real, imagined or conditioned physiological or psychological identity stresses which arise in a small number of individual cases, everyone will find their greatest fulfilment in their acceptance of the person God has made them to be. To pursue something different from this is bound to be harmful and lead to unhappiness.

As well as being distressing, the present confusion over sex and gender issues is also bewildering. Over the past ten years, a notion has seemingly come from nowhere, and taken root within human society with astonishing speed, which not only rejects God's order, but also flies in the face of physical realities and common sense.

Previous generations did not succumb to such folly. They were certain that What is your sex? was a binary question.

In 1879, the writer Robert Louis Stevenson (1850-1894) wrote a book entitled *Travels with a donkey in the Cevennes*, about the 185-mile journey he had made from Le Puy to Alès in France in the previous year. In the course of that journey, he met and spoke with many local strangers. On one occasion he had a conversation with a rustic and asked him his religion. The man replied: "I make no shame of my religion. I am a Catholic."

Stevenson was deeply impressed by the uncompromising firmness and fixedness of this reply that he reflected on it and wrote about it later: "God, like a great power, like a great shining sun, has appeared to this simple fellow in the course of years, and become the ground and essence of his least reflections; and you may change creeds and dogmas by authority, or proclaim a new religion with the sound of trumpets, if you will, but here is a man who has his own thoughts, and will stubbornly adhere to them in good and evil."

What, you may wonder, has all this to do with our present subject of sex and gender?

Its significance lies in Stevenson's conclusion to this section of his journal. His encounter with the rustic Catholic reminded him of a number of other religious adherents he had met who all had in common that same characteristic of firm resolve and certainty. Describing their typical fixedness, Stevenson said this: "He is a Catholic, a Protestant or a Plymouth Brother, in the same indefeasible sense that a man is not a woman, or a woman not a man."

Indefeasible is not a commonly used word today, but it means incapable of being overturned, and it is interesting that Stevenson, when searching for an example of something which is indefeasible, should have selected as his parallel, out of all the analogies he might have used, that a man is not a woman, or a woman not a man.

Writing 140 years ago, Stevenson was in no doubt that everyone he might meet, in France or England or his native Scotland, would regard his or her sex as fixed and immutable: a man could never be anything other than a man, nor a woman anything other than a woman.

Natural man is no different now from what he or she was in Stevenson's day. Babies born now are no different from babies born in 1878. Our present generation has fallen victim to naivety and credulity.

Marriage and birth sex are two of the firm foundations of human society. The undermining of marriage in Europe dates from 1989 when the world's first officially-recognised same-sex union was introduced into



law in Denmark. Since then, 28 other European countries, including 22 other EU states, have followed suit.

The public and private confusion over the issue of "gender identity" has emerged much more recently and has rapidly intruded into an increasing number of areas of life.

In the wake of these two recent tragic developments in human society, many believers will have asked themselves: "If the foundations are destroyed, what can the righteous do?" (Psalm 11:3). It is not the purpose of this article to set out practical strategies, but we need to remember the opening words of that psalm: "In the Lord I put my trust."

Rod Badams

Statements in the above article attributed to the ONS are available on the ONS web site: https://www.ons.gov.uk/census_under 13 December 2017: census topic research



War on the old

I once received an invitation from a well-known university to attend a conference on ageing, and was astounded to see on the accompanying email quotations which painted older people as voracious pirates stealing the wealth of the country and leaving the younger generation bereft.

They were taken from a statement by Andy Haldane, Chief Economist of the Bank of England, and read, "Since 2007, the real disposal income of pensioners has risen by almost 10%. Those over the age of 65 have harvested fully two-thirds of that £2.7 trillion increase in national wealth." I pointed out that these observations were taken out of context and were ageist, and was invited to put the other point of view as a speaker at the conference.

Economist don't seem to like older people. An article written by another said that they slow down global growth because they are not prolific consumers.² Others refer to them as a financial burden and a drain on the country's resources.

Yet a report by SQW, a leading economics consultancy for the Women's Royal Voluntary Service (WRVS, now RVS) found that the older generation's contribution to the exchequer in 2010 was around nearly £40 billion and that by 2030 the overall value of the net contribution is anticipated to grow to nearly £75 billion, an increase of 89%. "The 'discounted' value of future economic contributions of older people is estimated to be worth £879 billion over the 2010-2030 period", it added, significantly exceeding the costs to the state of providing valuable state services and support, including the basic state pension (to which they have themselves contributed via accumulated national insurance contributions during their working lives), other welfare payments and services and health services.³

How many people know that? Perhaps Lord David Willetts, founder of the Resolution Foundation which lobbies government to tax the elderly in order to pay more benefits to the younger generation. Recently the Foundation's Intergenerational Commission report called for an NHS "levy" of £2.3 billion paid for by increased national insurance contributions by those over the age of 65.4 It said that all young people should receive a £10,000 windfall at the age of 25 to help pay for a deposit on a home, start a business or improve their education or skills, raised from extra taxes on pensioners.

It is not the first time he has suggested taking from the old to benefit the young. He seems to be ignorant of the struggles that many of today's pensioners had when they were young; many started married life sharing rooms in others houses, only dreamt of holidays, and "made do and mended" because they could not afford to buy new. Yes, they lived through more stable times, but they are not responsible for the globalisation that sees corporations depressing wages and fragmenting communities, or for the 2008 banking crash that was driven mainly by people in their 30s and 40s.

This financial intergenerational warfare was predicted in 1969 by Dr Rob Butler, the psychiatrist and social activist who coined the term "ageism". He said that ageism is a combination of three connected elements – prejudicial attitudes towards older people, old age and the ageing process; discriminatory practices against older people; and institutional practices and policies that perpetuate stereotypes about elderly people.

⁵ https://en.wikipedia.org/wiki/Robert_Neil_Butler



¹ Quoted by Salford University on its invitation to conference 'The Future of an Ageing Population Conference', 10 Nov 2016.

² http://www.nber.org/papers/w22452

³ https://www.royalvoluntaryservice.org.uk/Uploads/Documents/gold_age_report_2011.pdf

⁴ https://www.independent.co.uk/news/uk/home-news/pensioner-tax-millennials-25-10000-generation-gap-inheritance-a8340601.html

But, finance aside, there are other arenas in which ageism flourishes. A study by the Royal Society for Public Health (RSPH), showed that millennials (those aged 18 to 34) have the most negative attitudes to ageing and older people, compared to other age groups. The study, "That Age Old Question", 6 described an appalling view of old age: forty percent believe that there is no way to avoid getting dementia as you age, a quarter believe it is normal to be unhappy and depressed when old, and the same number thought that "older people can never really be thought of as attractive". The RSPH put this down to the segregation of the ages in our fragmenting families and communities, and suggests more integration between young and older people, and the banning of ageist sales slogans by the cosmetics industries.

A subtle, daily bombardment

Every day we are bombarded with negative attitudes about age and ageing, including in the workplace, and in the allocation of NHS resources, according to Age UK. The charity recently published research⁷ showing that nearly two million people have no purpose in life and believe their lives are not worth living – largely because they have absorbed ageist attitudes about being old.

Yet this rolling stone is being scraped of its moss. Eleven professors in nine European university centres are developing social interventions to combat ageism, supported by COST (European Cooperation in Science and Technology). Underlying much ageism in the younger is a fear of death, say the professors; younger people associate older people with the nearness of dying, and being near them, or even thinking about them, tends to evoke "death anxiety". Other psychologists point to the inevitable tension between the young and the old as the young reach for autonomy and purpose in their lives.

Governments are realising that the older generation is too large to be doing things "to" and "for" and needs to be engaged in doing things "with". The World Health Organisation (WHO) is tackling ageism all around the world. Greater Manchester struck a great blow against ageism in 2018 when it organised a "Festival of Ageing" to promote positive aspects of being old, with a host of fun activities across three major centres in the first two weeks of July.

Busting ageist myths

Ordinary people are demolishing ageist myths simply by ignoring them and getting on with their lives. We do not read their stories in the general press, but there are examples of a 101-year-old lady expanding her business by buying another sewing machine, and a 105-year-old who still teaches yoga. I have written about Douglas Higgins, a retired teacher and lay preacher who wrote a book at the age of a hundred to win others to Christ. These are not exceptions. Researching for my book, "What's Age Got To Do With It?" revealed so many older people happily working in their 90s and 100s that my files were bulging! But the media is run by younger people who tend not to be attracted by oldies' success stories.

Thanks to nudges by the WHO and the UK government there are other interventions, particularly in the charity sector. South London Cares are recruiting younger people for all kinds of events involving older folk. Housing and care homes are welcoming visits from schoolchildren and others on a regular basis. Older volunteers in churches are helping in communities, saving the NHS around £3.5 billion a year, according to a recent report by the Cinnamon Network. 12

¹² http://www.cinnamonnetwork.co.uk/wp-content/uploads/2017/09/CFAA17-National-Report-update.pdf.



⁶ https://bit.ly/2LtFT9P

⁷ https://www.ageuk.org.uk/latest-news/articles/2018/march/age-uk-warns-of-risks-of-getting-into-self-destructive-rut-as-we-age/

⁸ http://www.cost.eu/COST_Actions/isch/IS1402

⁹ http://www.who.int/ageing/ageism/en/

¹⁰ Lion Monarch, 2017.

¹¹ https://southlondoncares.org.uk/home

Changing perceptions

The greatest challenge is to change people's perception of ageing and being old. "Old" is a cultural concept that changes with the context, and is certainly changing now, as longevity continues to increase. In my father's time many people died in their 70s, and 65 was considered old. Now, 85 is thought by many to be when old age begins.

Ageing is something that God designed when he set time in motion. His view of age is that it is a time of fruitfulness; of learned wisdom through experience; of a better emotional balance that does not catastrophise and takes the long view. The Scriptures imply a sense of "seniority" for older people. At the age of 46, gerontologist and social activist, William H Thomas, wrote a book called, "What are Old People For?" subtitled, "How Elders will Save the World", 13 about the purpose of older people in society, introducing precepts that echo Scriptural principles. His publishers advised him to change the title, because a book about older people would not sell – it went on to win several awards.

Are we winning the war on the old? It is here, I believe, that our church should show the rulers the wisdom of Christ. Many churches are run by seniors and would collapse without them. As a rule, they work hard to attract younger people and look after them well, too. But there are also churches with profoundly ageist attitudes. I read a Christian magazine article recently entitled, "Why doesn't he go?" about congregations that say a pastor should always leave his church at a certain age. And retired pastors I meet at conferences and Christian events sometimes say how they feel abandoned now they have stepped down from churches that they helped to build up in the first place, because the new, younger pastor does not want him there.

Yet in Scripture the only place retirement is mentioned¹⁴ is when the Levites were instructed to retire at age fifty but were then encouraged to stay on to help their brethren with the work.

This is a war we simply must win. We will all be "up in years" one day, and we need to look forward to all that God has planned for us to do, and enjoy, without feeling that we are a burden, or "less than" others, when in fact we are "trees planted by the water, still bearing fruit".¹⁵

Louise Morse



¹³ What are older people for https://www.amazon.com/What-Are-Old-People-Elders/dp/1889242209.

¹⁴ Numbers 4:46-49.

¹⁵ Psalm 92:14-15.

Evangelical parents, teenage children

This article was first published in the Bulletin of March 2012 and is reproduced here as something that has ongoing relevance and importance six years later. It was the third in a series of articles on bringing up children within evangelical families.

In the previous two articles we saw that children are under enormous pressure from much of Western culture. This, coupled with the modern Western world's practice of putting the state between teen and parents – in spite of the rhetoric about family life and the responsibilities of parents – makes family life no longer as straightforward as it was some years ago. 16 We then explored how the challenge for parents in particular is to live and act by faith not fear. We now turn to the teenage years.

In his excellent book Age of Opportunity, Paul Tripp describes how most parents feel as they approach their children's teenage years: "Parents are afraid of their teenagers. Even as they are enjoying the early years of their child's life, they are looking over their shoulders with dread, expecting the worst... They've heard enough stories from parents who have gone through the dark valley of the teen years to know what lies ahead."¹⁷ Tripp continues: "Something is inherently wrong with the cultural epidemic of fear and cynicism about our teenagers. Something is wrong when a parent's highest goal is survival."18

We turn now to consider how we might raise teens to follow Christ in our churches.

Some applied principles for raising teens¹⁹

Before embarking on the detail, it is important to note that fundamental to every interaction with teens is the simple matter of communication. The struggles very often occur around speaking precisely and listening well. Focus here will produce rich dividends in relationships. Resisting the temptation to rise at every provocation while ensuring that the teen respects authority is worth the considerable effort involved. Some examples will be provided in what follows but reading one of the books recommended will help in this area.

Begin with your own hearts

We need to start by looking at our own hearts – and the idols they contain – if we are ever to minister to our teens.

The Idol of Comfort

The demand here is that our teens give us what we desire – rest and tranquillity. Such an idol means that we end up fighting against our teens rather than with them in overcoming sin.

The Idol of Respect

Respect is something that parents are not wrong to desire but it can become an idolatrous demand that interprets every unacceptable teen act as a personal attack.

The Idol of Appreciation

The desire for appreciation can become a demand, which can deteriorate into a contractual mindset where appreciation is owed in return for all that the parents have invested in the teen. A good test of the presence of this desire is when we find ourselves saying: "After all I've done for you..."

¹⁹ The issues that follow apply to all in a church who engage with teens in some way or another but particularly parents and youth workers, so whilst the material focuses on parents it has a wider applicability.



¹⁶ This is not to hearken back to some "golden age" of parenting but simply to acknowledge the particular shape of the problem in twenty-first century Britain.

¹⁷ Paul Tripp, *Age of Opportunity*, P&R, Phillipsburg, 2003,13.

¹⁸ Tripp, Age of Opportunity, 14.

The Idol of Success

"We begin to look at our children as our trophies rather than God's creatures... Whenever parenting is reduced to our hard work, the teen's performance, and the reputation of the family, it will be very hard for us to respond with selfless faithfulness in the face of our child's failure."²⁰

The Idol of Control

There are only two ways to live as a Christian: in joyful submission to God's authority – and so he is in control – or to try to control things myself. Too often it is the latter that is the way we seek to manage or even manipulate our teens. Yet it should be the precise opposite since successful parenting is about raising individuals who in dependence on God live independently from their father and mother: "My goal is not to clone my tastes, my opinions, and my habits in my children. I am not looking for my image in them; I long to see Christ's."²¹

The heart of the teen

The modern concept of adolescence is one absent from Scripture but this is not to say that the teens' heart is nowhere addressed.²² What are the things that their hearts produce?

Teens Oppose Wisdom or Correction

- Teens think themselves wiser than they are. At the same time they assume that their parents have little wisdom to help them. We must model to them wisdom in the way we correct and speak to them. So, determine to avoid ugly verbal power battles. We do that by preparing ourselves before we speak about an issue. Once prepared then try to have the conversation in a place of comfort for your teen. Don't do it in front of others or begin it on a journey.
- Teens tend to be defensive. Our concerns are interpreted as accusations of failure. So: a) clarify that you are not accusing and invite respectful personal correction by your teen if they consider you are behaving accusingly; b) help them identify their attitude²³; c) confess your own failings willingly, especially owning up to the fact that your teens can push your buttons.
- Teens tend to be self-protective. Don't acquiesce when they seek to withdraw from you but engage them intentionally (e.g. try to pray every day with them no matter what) and ask open-ended questions (i.e. requiring more than one-word answers): "Enter the world of your teenager and stay there. Don't ever let them view you as being outside their functional world. Teenagers will reject grenades of wisdom and correction lobbed from afar by someone who has not been on site for quite a while."²⁴
- Teens tend to blame others. Unjust treatment can be the focus for example, supposed leniency towards siblings. Don't be diverted into justification but stick to the issue with an invitation to pursue the perceived injustice at another time.
- Teenagers tend to be poor listeners. It's best by far to avoid lectures about your leadership or parenting and their failure but to encourage genuine dialogue: "Some of us carry invisible portable lecterns with us, which we are ready to set up in a moment."²⁵

Teens have a tendency towards legalism

They want things reduced to "How far can I go?" as opposed to the response of a godly heart which asks "How can I be pure?" We must seek to avoid being so focused on boundaries that the heart is missed.



²⁰ Tripp, Age of Opportunity, 35-36.

²¹ Tripp, Age of Opportunity, 38.

²² Take, for example, chapters 1-9 of Proverbs in which a father aims to raise a boy who is nearing (if not actually undergoing) puberty. It provides a fascinating insight into the issues in a teen's heart.

²³ Tripp gives a good example, "There seems to be a lot of tension in this room. Now I haven't yelled at you, I haven't called you names, I haven't accused you of anything but it seems that you are angry at me. Could you explain why you are so angry? I didn't ask to talk to you because I felt like a good fight." *Age of Opportunity*, 79.

²⁴ Tripp, Age of Opportunity, 80.

²⁵ Tripp, *Age of Opportunity*, 81.

Teens tend to choose friends unwisely

"Teenagers tend to be prickly and protective when it comes to discussions of their friends. It is as if the operational rule is 'To reject my friends is to reject me.'" We need to avoid accusatory or name-calling statements but to invite the teen to consider his or her desires in friendship. The "I can handle it" response needs challenging in a wise way.

Teens are susceptible to sexual temptation

The father in Proverbs has much to say on this topic. Ideally you should have begun to discuss these things so as to promote openness as puberty begins. Here are some questions we should know the answers to: "Have you given [your teen] a mixed message, on the one hand saying that sex is a wonderful gift from God, and on the other communicating fear, reticence, and avoidance? Have you agreed that this is a taboo topic? Do you know what your [teens] know and what their source of information is? Do you know where your teenager struggles with sexual temptation and how he or she is doing in that struggle? Is your teenager able to embrace a distinctly biblical view of sexuality? Is he or she able to critique the distortions of the surrounding culture? Does your teen have a heart for sexual purity or is he or she pushing the limits of biblical modesty and propriety?"²⁷

Teens lack a long-term perspective

When it comes to delayed gratification, teenagers really struggle: "Why wait when you can have it all now?" This weakness is compounded by the heroes that teens are invited to emulate: those who lay up treasure on earth. Key statements of identity are all answered in the here and now: "You are the labels you wear; you are your body size; you are your intelligence; you are your athletic ability; you are the car you drive; you are the house you live in; you are the level of popularity that you have." 28

Teens don't truly know their hearts

A characteristic of teenagers is that they have an absence of self-awareness. It's as if they are absent in the video of their life which they play in their minds. This can result in a total failure to take responsibility for things. So one of the key tasks is to help teens to know their own hearts and to be willing to fight wrong desires with God's strength.

Some questions to help us think about how to do this are:

"Do you lead your teen to conversations that go deeper than solving problems of circumstance and relationship? Do you help him or her to see the heart behind those problems? Do you assist him or her in seeing the places where he or she has exchanged the Creator for some aspect of creation, such as peer acceptance, a certain possession, or some coveted position? Have you helped him or her to see the desires which rule his or her heart? Have you helped him or her to confess his or her true treasures? Have you taken time to point out lovingly where his or her thinking is out of conformity to the truths of Scripture? Have you asked questions that expose the thoughts and motives of the heart? Have you shown how his or her true worship is expressed in the way in which he or she responds to situations and relationships?"²⁹

The goal in raising teens: identity

Our goal with teens is to see their identity firmly grounded as they move to leave behind some of the sureties that have surrounded their growing years. For that to happen that identity needs to be rooted in three things.

Teens find identity in community

God does not call teens to live isolated lives: "The goal of a person's life is not to be a healthy individual,



²⁶ Tripp, Age of Opportunity, 84.

²⁷ Tripp, Age of Opportunity, 87.

²⁸ Tripp, Age of Opportunity, 88

²⁹ Tripp, *Age of Opportunity*, 89.

but a person living in community with other people who are living in community with God."³⁰ Yet this great ideal seems almost impossible in the teen years not only to parents but also to the teen. Conflict seems to be the norm in society at large, and in the home, and it is easy to be overwhelmed and discouraged. Yet we know that the human heart desires its own pre-eminence which leaves no room for another human being with the same goal.

So how is it possible to move the teen to become part of God's great work of creating a community of love (cf. John 13:34-5)? The family has a key role to play in this. It is the place where preparation for this can occur through the gospel being taught and modelled. The two great commandments need to be regularly before the teen so that they cry out — "But I can't do this?" to which the answer will be: "I know, that's why we need Jesus." The teens' heart will be ruled by either of two things, no matter what they say:

- the rule of godly love for others (Matt. 7:12)
- the rule of their own desires (James 4:1-2)

Teens find identity in the character and goodness of God

A teen's identity is rooted in the existence of God: "He is the reality that gives sense and shape to every other fact we discuss and consider." Deuteronomy 6:20-25 shows how this is done. Like it or not, we are constantly theologising. It depends whether our theology is accurately conveying what God has said about himself.

Do we give the impression that God is far away and only involved when we cry out to him for rescue? Yet he is near (e.g. Psalm 46:1). Nothing happens without his direct involvement. Do we give the impression that his love always means ease and comfort? Yet the most loving thing God can do is to glorify himself (John 11:4-6). Teens need to be helped to see that their own happiness is not the chief goal of life: "We need to call our teenagers away from their own glory to a concrete understanding of what it means to live for God's glory." Put differently, teens need to see the story of their lives in the bigger context of God's story. Then their problems, while real and painful, will find due proportion and make sense. There are two things which teens get confused:

- Doing what God alone can do.
- Not doing what God has called them to do.

So they need to ask the right questions of themselves:

- What does God command me to do, think, or say, in this situation?
- What, in this situation, are the things I need to trust God for?

Teenagers handle neither disappointment nor frustration well: "They are filled with a sense of self. They know quite well what they want out of the moments of life, and they tend to wallow in self-pity... They tend to limit life to the moment of desire... they tend to live with a sense of entitlement." So we have our work cut out.

Teens find identity in Christ's forgiveness

Parents need to take the lead in acknowledging sin, so teaching their teens that sin must not be hidden or explained away: "As the Holy Spirit works through the faithful ministry of parents who forsake their own desire for comfort and ease, proud, self-defensive, self-excusing, self-righteous children will become seekers after grace." 34



³⁰ Tripp, Age of Opportunity, 44.

³¹ Tripp, Age of Opportunity, 55.

³² Tripp, *Age of Opportunity*, 58.

³³ Tripp, *Age of Opportunity*, 57.

³⁴ Tripp, *Age of Opportunity*, 68.

Here are some classic ways in which we unintentionally undermine the Cross: "What on earth do you think you're doing?" (as if we have no experience of sin). "I wish for once you'd get your act together" (as if we have no idea of the struggles involved in fighting sin and have now achieved perfection!). "You'll never change" (so denying God's ability to redeem even the worst sinner).

Our teens need to know that we have walked the road of sin and know the route to the Cross so well that we can point them to it. We can also provide a redemptive interpretation of the world around. It is not all pointless suffering, evil and chaos. The risen Lord Jesus reigns – indeed he has begun his reign in our hearts - and will one day return to usher in the new creation of perfect joy and complete perfection. Theologising well helps ground the teens' identity well.

The problem of the "gospel gap"

One key issue that raises itself repeatedly in conversation with parents or youth group leaders is the fact that well-taught young people have not fully grasped the implications of the principles of their faith in connection with their lives, conduct and attitudes. There is a worrying detachment which then affects their attitudes and opinions on lifestyle issues. Because of the widespread nature of this gospel gap (the gap between what has been taught the teen and how they are living) it's worth enquiring whether or not there may be ways in which our teaching input can be improved.³⁵

It is all too possible for Christian adults engaged with children to have a reductionist view of the gospel, seeing it as essentially about personal salvation but not about living the Christian life. A kind of "justified by faith, saved by works" mindset follows which undermines faith as a living, vibrant thing seen day by day in adults.

Another area that would benefit from some attention concerns how we teach teens. It is easy to teach, explain and encourage discussion on important issues in atomistic ways, as if they are disconnected from any all-embracing whole or each other. So sexual matters, addictive behaviours, or love of material things, can all be taught faithfully and helpfully in the church or the youth group but without enabling teens to see the context in which these issues apply. The way to address this therefore is to teach these matters and others in the context of a worldview.³⁶

Positively, we can see this being done by the father in Proverbs. There are four key elements that his wise advice and persistent exhortation are based on which provide a clear worldview.

• The universe is created by God

The world isn't the result of a chance accident in time. The whole world is not only made by him, but belongs to God. He is actively involved in his own world (Proverbs 3:19 –20). This means that human meaning is found only in knowing the Creator and that all of life is to be lived under the Creator's gaze – there is no part of it that is more spiritual than another. All of life is like one seamless fabric, not broken up into religious and non-religious segments.

The world has order

Because God created the world, it is not controlled by arbitrary forces but rather the purposes of this personal God. Because of this there is predictability about our world. Wisdom then is the acquired skill to live according to the order God has built into his creation. What the Bible makes abundantly plain is that God has revealed his order to us — at least in part (e.g. the ways of the ant can be studied and lessons learned precisely because of that order (Proverbs 6:6). This order is moral (it contains "rights" and

³⁶ A worldview is a way of explaining the world and our place in it. It need not necessarily make sense (often it doesn't) but it is something everyone does because every human being is a meaning maker.



³⁵ This is not to ignore the importance of the example of key adults around them.

"wrongs"). Learning also involves accepting that God has created a moral order in his world. Thus, consequences flow from either ignoring or following what God has laid down (Proverbs 2:21-22; 5:21-23.)

Fearing God

The fear of God is central to what the father says (Proverbs 1:7 and 9:10). This fear of God is a natural result of acknowledging God's creative power. If he is responsible for the very world we inhabit, and for our lives, then it is folly indeed to ignore him. The very fact of the world means that "the proper stance for humans is humble submission to... God, rather than the arrogant insistence on choosing their own way, independent of the Lord who made them." This then is not abject terror but a submissive attitude towards God: "The one who fears God admits that he alone possesses total knowledge and control in the universe he has made." Representations of the Lord who made them to the possesses total knowledge and control in the universe he has made."

Negatively, this involves understanding the worldview of those around us and helping teens to see it. This by no means need be simply defensive. Indeed, the best appreciation of worldview equips teens to have genuine sympathy for a lost world rather than either despising it or being drawn to it.

Having done all, we have a choice

Faced with these issues we can either, "Respond out of anxiety, irritation and fear [and] try to control your child all the more. Instead of seeing this as a time of preparation, you will take on a survival mentality... In your self-pity over the toughness of your job as a parent and the peace your child has taken away, you will resort to beating him with words and seeking to motivate him with threats. You will try to manipulate him into obedience, and you will initiate unproductive power struggles... [Or you can] move toward your teenager with a confident faith in the Redeemer, whose word is true and whose sovereign presence empowers your weak and feeble parental efforts [and so] communicate love, understanding, grace, hope and life."³⁹

We rely on grace

In their recently published book on parenting,⁴⁰ a mother and daughter remind us of the vital thing which can easily be forgotten amid all our thinking and practice, especially amid the stresses and strains of life. They say of Luke 18:15-16: "The disciples couldn't hinder the children from coming to [Jesus] even though they tried."

When God calls our children to come to him, even if we haven't gotten it all right, even if we have trained little Pharisees or have a house full of prodigals, nothing is impossible for him. He can break through all our flawed methods and redeem all our frail errors. The world tells us that their success depends upon our success. The world knows nothing of God's ability to use our failures as means to bless: "What is impossible with men is possible with God" (Luke 18:27).

So, even though we desire to be the ones who place our children in the lap of God's mercy and even though we stumble so badly trying to do so, Jesus is strong enough to pick each of us up and carry us all the way. Parents, too, are weak, but Jesus is strong. No one, not even you, can thwart his purpose to bless those who are his (Ephesians 1:11)."

Ian Fry

⁴⁰ Elyse Fitzpatrick and Jessica Thompson, *Give them Grace*, Crossway, Wheaton, 2011.



³⁷ Daniel Estes, *Hear my Son: Teaching and Learning in Proverbs 1-9*, Apollos, Leicester, 1997.

³⁸ Estes, *Hear my Son*.

³⁹ Tripp, *Age of Opportunity*, 93.

Update on life issues

Abortion

Abortion in Ireland

The plain fact is that on Friday 25 May 2018, Ireland voted overwhelmingly in a referendum to repeal the Eighth Amendment of that country's constitution. The result was 66.4% for and 33.6% against. The Eighth, originally approved by a referendum on 7 September 1983 and signed into law on 7 October 1983, famously declares, 'The State acknowledges the right to life of the unborn and, with due regard to the equal right to life of the mother, guarantees in its laws to respect, and, as far as practicable, by its laws to defend and vindicate that right.'

Ireland can no longer lay claim to being one of the few, very few, European countries that has a semblance of a pro-life ethos – only Poland and Malta come to mind. The rest have succumbed to secularisation and progressive liberalism and adopted abortion as 'a woman's right', or some such slogan. It marked a sad day, and an even sadder future, for the Republic.

The Irish cabinet will now discuss draft legislation to allow terminations within the first 12 weeks of pregnancy, and up to 24 weeks in exceptional circumstances. The Taoiseach, Leo Varadkar, has promised a new liberal abortion law will be on the Statute Book by the end of the year, with access to terminations from January 2019.

The Irish people's decision will echo around the world. Not least in Northern Ireland, where abortion is permitted only if a woman's life is at risk or there is a permanent or serious risk to her mental or physical health, not for cases of rape, incest or fatal foetal abnormality. Already the UK's Women and Equalities Minister, Penny Mordaunt, has said that the landslide Irish vote has given 'hope' to Northern Ireland. She is not alone – her voice has been joined by her predecessors from the sisterhood, Amber Rudd, Justine Greening, Nicky Morgan and Maria Miller. However, Theresa May has stated that the Irish vote will have no impact on Northern Irish abortion law. However, her situation has little wiggle room because she depends on the support of 10 Democratic Unionist Party (DUP) MPs, who strongly oppose any such reform. We shall see.

Thus Ireland had changed. They were dancing in the Dublin streets now that they could legally kill their unborn children. The moral credibility of the once-dominant Roman Catholic Church has been battered by recent sex scandals and cover-ups. Divorce is no longer banned, neither is same-sex 'marriage'. In addition, the economy is flourishing – Google, Amazon and Facebook have relocated there. The old Ireland has indeed gone. But this is not a time to reminisce, it is a time to mourn for innocent bloodshed. True, this was a referendum and we lost, but we all know the real losers – though poignantly, we shall never actually come to know them. And here is a big question - will the legalisation of euthanasia be on the cards next for Ireland?

Abortion politics in the UK and Northern Ireland

Decriminalisation is the current watchword of many pro-abortion lobbyists, medical organisations and politicians. They want all legal restrictions removed from the Abortion Act 1967. The cunning plan is to repeal sections 58 and 59 of the Offences Against the Person Act 1861. This would allow abortion on demand, the dream of many, such as Ann Furedi, the CEO of our largest abortion provider, Bpas. She is well remembered for stating last year, 'I want to be very, very clear and blunt - there should be no legal upper limit.'

Yet a recent opinion poll shows how many of our MPs are increasingly out of touch with their constituents on this issue. This latest ComRes poll (conducted in October 2017 and published in November) of over 2,000 UK adults showed that 72% of the public think abortion should continue to be subject to a legal framework, including the requirement to get the consent of two doctors and not allowing abortions after 24 weeks unless the child is disabled or the mother's life in danger. Just 12% disagreed.



Yet the Parliamentary momentum for changing the law remains. During the afternoon of 5 June, there was an emergency debate in the House of Commons entitled, 'Offences Against the Person Act 1861 (Standing order No. 24)'. As many as 22 back-bench MPs had put their names down to speak. The debate was flying on the coattails of the abortion referendum in Ireland the previous week. It was initiated by Stella Creasy (Labour/Co-op MP for Walthamstow East), who made a two-pronged attack arguing first for the repeal of sections 58 and 59 of the Offences Against the Person Act 1861, which would be equivalent to the decriminalisation of abortion, and second for a reform of abortion law in Northern Ireland, which would then become equivalent to the rest of the UK.

Others spoke against. For example, DUP chief whip Sir Jeffrey Donaldson stated that there were 100,000 people alive in Northern Ireland today because the law had not been reformed. 'I am proud of that pro-life position, I am proud of the fact that there are so many people alive in Northern Ireland today because we have a law that respects the rights of both women and of the unborn child and we will maintain that position,' he said. Sir Jeffrey added, 'There are strong voices on both sides of this debate, this is a devolved issue – it should be left to the people of Northern Ireland to decide.'

Karen Bradley, the Northern Ireland secretary said, 'This is a matter of conscience: a free vote on this issue in this House would be afforded if the matter of abortion comes before the House again, and the same applies in Northern Ireland. That is why the government, like its predecessors, believes that the best forum to debate and resolve these and many other matters is a locally-elected Northern Ireland Assembly, so the government's priority remains to urgently re-establish strong, inclusive, devolved government at the earliest opportunity.'

Three hours later, the debate was brought to a conclusion by Stella Creasy, 'Let me be clear to all Members of this House, the members of the campaign, the MPs who already stand convinced and those who want to hear more arguments – that we will also make a choice: not to give up fighting for equality, not to give up fighting for the 21st century and not to give up fighting for choice for all. We trust all women. Now is the time for Northern Ireland.'

And Hansard recorded the debate finally as, 'Question put and agreed to. Resolved, That this House has considered the role of the UK Parliament in repealing sections 58 and 59 of the Offences Against the Person Act 1861.' This time there was no vote in the House, but the issue will come back, again and again. Indeed, the latest plan is to put pressure on the new Home Secretary, Sajid Javid, to bring forward the draft Domestic Abuse Bill to Parliament early, so they can hijack it and introduce a decriminalisation amendment to cover England, Wales and Northern Ireland.

Abortion on the Isle of Man

Tuesday 1 May was a red-letter day on the Isle of Man. It was when the Abortion Reform Bill commenced its passage through the Upper House of the Isle of Man Parliament, the Legislative Council. The Bill proposes to liberalise abortion law on the Island and become the most permissive abortion regime in the British Isles. The move follows a public consultation which received the Island's biggest ever response with more than 3,600 respondents giving feedback.

The new legislation will allow abortion up to 14 weeks 'on request', up to 24 weeks in cases of foetal anomaly or on 'serious social grounds', and after 24 weeks in rare circumstances where the life of the mother or baby is at risk. Counselling must be offered before and after the termination, and a clause allows medical professionals to opt out if it clashes with their personal views.

So on 1 May, the Bill was passed by members of the House of Keys by a margin of 22 to 2. As expected, the Bill passed its Second Reading on 12 June. Further debates and votes on amendments will take place on 26 June. If approved, the Bill will be submitted for Royal Assent and accordingly become law.



Abortion in the USA

President Trump has often been an outspoken opponent of abortion and has threatened to withdraw federal funding, which is of course ultimately taxpayer's money, from more than 4,000 family planning clinics if they also provide abortions. His aim is particularly directed at the largest such provider, known as Planned Parenthood.

The US operates a so-called Title X program by which the government has previously funded family planning and abortion clinics. On 22 May, the Trump administration announced its plans to separate funding of these two functions. Speaking at a dinner for an anti-abortion group, President Trump said, 'My administration has proposed a new rule to prohibit Title X funding from going to any clinic that provides abortions.' If enacted, the new regulation, which is being called the Protect Life Rule, will cause Planned Parenthood to lose an expected \$60 million a year. This is part of the Trump administration's plans to restrict abortions throughout the USA.

Abortion in China

China's infamous one-child policy was introduced in 1979. It is about to be scrapped. Forty years ago the concerns were feeding the world's largest population – today the concerns are a falling birth-rate and an ageing populace. China is now home to 1.38 billion people. But, though its fertility rate was falling before the introduction of the one-child policy, it has now reached an average of only 1.62 babies per woman of reproductive age. This is below the critical figure of 2.1 required to maintain a viable population. Moreover, the numbers of pensioners are now outpacing those of younger generations and creating a funding crisis in looking after the elderly – less workers, less taxes, less caring.

Will the new, unrestricted policy work? State-sponsored population controls have a terrible history from European colonialism to the Nazi programmes. Will the Chinese now reduce their previous strategies of enforced abortions and sterilisations? Yet China faces a novel demographic challenge – are the young even interested in larger families? In 2016, when the one-child policy was first relaxed, the birth rate jumped by 8% – the following year it fell to 3.5%. A declining birth rate is not all good news, not even in China.

Assisted Reproductive Technologies

IVF at 40

Wednesday 25 July 2018 is the 40th anniversary of the first successful IVF treatment – Louise Brown was born at the Oldham and District Hospital in Greater Manchester. Since then at least 5 million IVF-babies have been born worldwide. In the UK the total figure is some 250,000 – and now accounting for almost 2% of all UK births.

With such numerical achievements maybe it is becoming harder to dispute IVF. Nevertheless, the major objection remains the fate of the inevitable excess, or supernumerary, human embryos. Tens of thousands are deliberately destroyed every year, they are the leftovers, of no further use, the not needed anymore scraps. Of course any such objection is predicated on the status of the human embryo – itself a constantly and resolutely contentious issue. If it is merely a clump of a few cells, then who cares about its fate? If it is a real and nascent human being, then its deliberate and wanton destruction must be illicit. There are other good reasons for objecting to IVF, but this is not the place to rehearse them – I've already done that in my Bioethical Issues book, pp 82 - 99.

Infertility is a symptom that there is something medically wrong. The approach of IVF is to bypass the underlying causes of infertility. IVF is therefore not a cure but a 'strained treatment'. Forget, for a moment, the bioethical costs, consider the cash costs instead. These are somewhat tricky to calculate accurately because of the differences between patients and clinics and treatment add-ons, plans, options, and so on. But a ballpark figure would be £5,000 per cycle at a UK private IVF clinic.



For instance, look at the costs from CAREfertility, the website of which states that it provides, 'The reassurance of a world leading IVF group, the support of a dedicated team.' The following figures are medians of their ranges given. First, there are pre-treatment costs with an initial consultation at £200, a scan at £150, semen analysis at £160 and fertility assessments at £395. Second, there are treatment costs. CAREfertility states that, 'Prices are indicative only but include monitoring, egg collection, embryo culture and transfer. Prices do not include drugs or other optional costs.' So for straightforward IVF, the mean figure is £3,225 plus required drugs and other costs at £750. Third, there is the option for an endometrial scratch to increase the success rate at £260 and there is embryo freezing and storage to ease the process next time at £975.

The sum of these amounts to a whopping £6,115. Yet this is not the cost of a baby-in-arms. The success of one such treatment cycle is typically less than 30%. In other words, one or two more cycles may be required to yield that bouncing new-born baby.

IVF on the NHS

Most IVF in the UK is performed outside the NHS. Apparently both practitioners and patients want clearer information about the costs and benefits of treatments – that seems reasonable since some IVF clinics have previously come under fire for milking vulnerable couples by overcharging for drugs, using unproven procedures, and hyping success rates.

It is now estimated that the annual IVF spend by the NHS is £68m. Since 2013, NICE (the National Institute for Health and Care Excellence) has stipulated that eligible women should be offered three free cycles. By 2017, however, only 27 of England's 200 CCGs (Clinical Commissioning Groups) had complied. No wonder the majority of women seeking infertility treatment go to the private sector.

First UK womb transplant

Transplanting wombs is not a new procedure – they have been carried out in at least 10 countries including Saudi Arabia, Turkey, Sweden, US, China, Czech Republic, Brazil, Germany, Serbia and India. The first successful operation was in Sweden in 2014 when a woman in Gothenburg gave birth to a baby boy. The 36-year-old mother received the donated womb from a friend in her 60s.

Now Richard Smith, clinical lead at the charity Womb Transplant UK, plans to carry out the first UK transplant before the end of 2018, using a living donor. In 2015, approval was given for 10 womb transplants in the UK, but these were from deceased donors, whose hearts are still beating. Around 6,000 women in the UK have been born without a womb, while others lose their uterus to cancer. At present, their only chance of having a genetically-related child is through surrogacy. Around 750 women in the UK have approached the team to enquire about transplantation. Womb Transplant UK says it currently has enough funds to pay for three such transplants.

'Three-parent' IVF – the latest

Scientists at the Newcastle Fertility Centre have now selected two women to whom they wish to transfer embryos created from genetic material collected from three parents. Both women carry gene mutations which can cause a rare condition known as myoclonic epilepsy with ragged red fibres, or Merrf syndrome for short. It is a progressive neurodegenerative disorder, the symptoms of which occur at an early age, generally childhood or adolescence.

The procedure of mitochondrial replacement technology (MRT) aims to prevent such diseases being passed through mitochondrial DNA by transferring the mother's nuclear DNA to a donor ovum in which the nucleus has been removed, but the mitochondria remain. This controversial process was legalised by Parliament in 2015. Newcastle University received the required licence from the HFEA in March 2017. And the women were approved for treatment by the HFEA in February 2018. Now the experiment is ready to begin despite crossing that bioethical red line of germline modification.



Genetic Engineering

Gene therapy - in trouble again

The great therapeutic dream of gene therapy has often been dashed – it has had a troubled, albeit short, history. The crisis started in 1999, when Jesse Gelsinger, a US teenager, suffered a severe reaction to the infused viral vector, he underwent multiple organ failure and died. Other disasters followed amid clinical trials in France and the USA.

So last year it looked like good news when high doses of viruses were used to carry healthy genes to unhealthy cells and when they brought relief to 15 babies suffering from a lethal neuromuscular condition called spinal muscular atrophy type 1 (SMA1), a genetic disease that gradually paralyses babies. As the first human trial using a particular adeno-associated virus serotype 9, known as AAV9, its success gave a welcome boost to the gene-therapy field. This hopeful study was conducted at the Nationwide Children's Hospital in collaboration with the Ohio State University College of Medicine. It was reported in The New England Journal of Medicine (2017, 377: 1713 - 1722) as 'Single-Dose Gene-Replacement Therapy for Spinal Muscular Atrophy.'

However, this year brought chilling news. A study entitled, 'Severe Toxicity in Nonhuman Primates and Piglets Following High-Dose Intravenous Administration of an Adeno-Associated Virus Vector Expressing Human SMN' appeared in Human Gene Therapy (2018, 29: 285 - 298) by James Wilson and colleagues at the Perelman School of Medicine, University of Pennsylvania. They also used high-dose AAV9 infusions, but these severely affected several animals. Three young rhesus macaque monkeys developed liver failure and three piglets had motor neurone damage. Some of them had to be euthanised. The cause was not immediately apparent.

However, additional alarm bells rang because this study was overseen by James Wilson. It was he who conducted the gene-therapy experiment which resulted in the death of Jesse Gelsinger in 1999. He has since resigned his position as a scientific advisor to Solid Biosciences, the company whose product apparently cured the 15 aforementioned babies. It is a timely reminder that much of medicine is experimental with both known and unknown risks.

Human-animal hybrids

Hybrids and human-admixed embryos and chimeras — what bioethical dilemmas they throw up. Now for the first time human-sheep hybrids have been created by scientists with the aim of generating an unlimited supply of human organs for use in transplants, or to cure diabetes.

In January 2017, some serious foundational work was reported by a team led by Juan Carlos Izpisua Belmonte at the Salk Institute, California and published as 'Interspecies Chimerism with Mammalian Pluripotent Stem Cells' in Cell (2017, 168: 473 - 486). They created human-pig embryos, by injecting human stem cells into early-stage pig embryos. These resulted in more than 2,000 hybrids that were transferred to surrogate sows. More than 150 of the embryos developed into chimeras that were mostly pig, but with a tiny human contribution of around one in 100,000 cells. These human-pig embryos were allowed to develop to 28 days before being removed from their mothers.

Now, on 17 February 2018, many of the same team members reported another major breakthrough at a meeting of the American Association for the Advancement of Science in Austin, Texas. There the scientists announced that they have fine-tuned their techniques and managed a similar feat with sheep embryos, achieving an even higher ratio of human to animal cells of about one in 10,000 cells. One of the lead scientists, Pablo Ross from the University of California, Davis said, 'We think that that's still not probably enough to generate an organ. About 1% of the embryo would have to be human for the organ transplant to work. And to prevent immune rejection, extra steps would be needed to ensure that leftover bits of animal viruses are struck from the pig or sheep's DNA. But the work shows progress toward more viable organs.'



This work appears to be a realistic first stage towards growing an unlimited supply of human organs for transplants and even providing a cure for Type-1 diabetes. The next step for the team is to implant human stem cells into sheep embryos which have been genetically modified so they can grow a pancreas. If successful a human pancreas would appear inside the animal's body. The team now has to apply for permission from regulators to lengthen their experiments to 70 days to see if the human cells really can create a viable, functioning organ.

These studies inevitably reignite bioethical concerns. If 1 human in 10,000 animal cells is acceptable, what proportion isn't? What about the spectre of intelligent animals with humanised brains? What about the potential for bizarre hybrid creatures accidentally being released into the wild? And so on. Such questions tend to be overshadowed by the clinical promise of organ production and donation. Why? Because in 2016, over 450 people in the UK died waiting for transplant organs to become available.

Can CRISPR-Cas9 cause cancer?

The great hope of using CRISPR-Cas9 technology in gene-editing procedures to provide treatments and cures in human medicine has taken a knock. Two recent research papers suggest that CRISPR-edited cells may have a role in triggering certain cancers. It seems that some CRISPR applications are successful because they disrupt the p53 gene. It is known that p53 can assist the repair of cells which have damaged DNA, as occurs in cancer cells. In other words, it may be that p53 dysfunction can cause cancer. In fact, p53 mutations are responsible for nearly half of ovarian cancers, 43% of colorectal cancers, 38% of lung cancers and nearly one-third of pancreatic, stomach and liver cancers and one-quarter of breast cancers.

Both papers were published in Nature Medicine (online, 11 June 2108). The first was entitled, 'CRISPR-Cas9 genome editing induces a p53-mediated DNA damage response' by Jussi Taipale and colleagues at the Karolinska Institute in Sweden. The second as, 'p53 inhibits CRISPR-Cas9 engineering in human pluripotent stem cells' by Ajamete Kaykas and colleagues from the Novartis Institutes for Biomedical Research in Cambridge, Massachusetts. The warning for CRISPR-Cas9 researchers is, proceed with caution.

Stem-cell Technologies

Placental stem cells

When, and if, you need stem cells to treat a disease or bodily complaint, where will you get them from? Your bone marrow, adipose tissue, or induced pluripotent stem cells? For most of us it's too late to plunder one of the best sources – your placenta, discarded long, long ago.

Placental stem cells have advantages. First, they are incredibly young. Second, they are most unlikely to be corrupted – they are like quick-frozen fruit straight from the tree. Third, such cryopreservation can ensure they are useful for decades. Fourth, they are versatile, meaning they can be engineered into any of the 200 or so cell types of the adult human body. But, no regrets that your mother passed over the option, other sources will suffice.

So what about embryonic stem cells? They have long been touted as a suitable, even superior, type of stem cells. Ethically, they are unsuitable because their harvesting destroys a human embryo. Moreover, their clinical application has been staggeringly limited, especially when compared to the myriad of treatments involving adult stem cells.

Why is this? Blame has been attributed to the lack of serious funding, over-regulation by governments and ethical hurdles. But even so, the early uses of embryonic stem cells were unsuccessful, even dangerous. For example, it was not until January 2009, after several false starts because of safety fears, that the US Food and Drug Administration (FDA) gave the Geron Corporation, a Californian-based biopharmaceutical company, clearance for the world's first clinical trial of an embryonic stem cell-based treatment with human patients. In October 2010, the so-called phrase 1 trial – regarded as a proof-of-concept test – began



with four patients suffering from spinal cord injuries. Its primary purpose was to assess the safety of Geron's oligodendocyte progenitor cells, known as GRNOPC1, which had been derived from human embryonic stem cells.

The first-year assessment results were eagerly anticipated – the world was waiting. Then on 14 November 2011, Geron abruptly announced that it was abandoning the trial. Geron blamed the decision on, '... capital scarcity and uncertain economic conditions.' Others claimed that the trial was both poorly-designed and over-ambitious – spinal cord injuries were judged to be too complex and effect too few people, and so returns, both curative and economic, might take up to 10 years. But maybe GRNOPC1 was simply not working – therefore continuing the trial would be futile. Or worse, had some negative side effects occurred subsequently or, perhaps more likely, were they about to occur, if the trial continued? Perhaps the truth will never out.

Subsequent global trials, focussed particularly on eye diseases, like macular degeneration, have not been illustrious in terms of numbers or curative outcomes. Success is scarce, but some is coming. An example is the trial with two people suffering from age-related macular degeneration (AMD) who had patches made from embryonic stem cells implanted into their retinas at a London hospital. The scientists behind that therapy reported on the patients' progress earlier this year (Nature Biotechnology, 2018, 36: 328 – 337). The patients' eyesight had improved considerably – a visual acuity gain of 29 and 21 letters in the two patients, respectively, over 12 months. This is a very small, but notable, example of progress.

Yet a recent editorial in Nature (16 May 2018) interprets this slow progress as, 'The steady and careful development that has guided treatments using embryonic stem cells should be applied to therapies derived from adult stem cells.' Nobody doubts that some adult stem-cell 'treatments' have been badly misused by unscrupulous charlatans out to make a quick buck by exploiting vulnerable patients in unregulated countries. But numerous adult stem-cell treatments have been surprisingly successful when carefully employed. To suggest that most adult stem-cell treatments have been subjected to poor practice and hype is a step too far. In the early days of stem-cell technologies it was embryonic stem cells that were branded as the gold standard. That gold is now hard to find. And never forget that bone-marrow transplants are adult stem-cell therapies, and think how successful they have been for the last 60 years for tens of thousands of patients.

The end of reproduction with gametes?

Scientists have created 'synthetic' mouse embryos using just stem cells rather than sperm and ova. Scientists from Maastricht University, led by Dr Nicolas Rivron, combined two types of mouse stem cells to create structures resembling blastocysts or early embryos, called blastoids. Instead of traditional gametes, they used embryonic and trophoblast stem cells, which have the ability to form an embryo and a placenta. These structures, although not bona fide embryos, were able to implant and grow for a few days in the uteri of female mice.

The study was reported in Nature (2018, 557: 106 - 111), under the title, 'Blastocyst-like structures generated solely from stem cells.' It is thought this new research may advance human infertility treatments, especially studies into the early implantation stages of development. However, the blastocyst-like structures produced in this study did not have the ability to develop into further embryonic stages. This is because they contained only two of the three cell layers normally present in an embryo. Or could this stem-cell method lead to the testing of new medicines because it could create an infinite number of early embryos? How bioethically challenging stem-cell technologies can be. How informed and judicious we need to be.

Euthanasia and Assisted Suicide

Noel Conway's judicial review on assisted suicide

Dignity in Dying is supporting Noel Conway, the 68-year-old former lecturer from Shropshire, to bring a judicial review challenging the current ban on assisted suicide in England and Wales. He was diagnosed with



amyotrophic lateral sclerosis (ALS), a form of motor neurone disease (MND), in November 2014. His condition is incurable and terminal.

Mr Conway is bringing this case against the Ministry of Justice to fight for his supposed 'right' to have the option of an assisted death when he is judged to be in his final six months of life. The latest phase of his case was heard at the Court of Appeal on 1 to 3 May 2018. A written judgment is expected in early summer.

On 27 June, the Court of Appeal - Sir Terence Etherton Master of the Rolls, Sir Brian Leveson President of the Queen's Bench Division and Lady Justice King - dismissed his case. See here. But it reaffirmed the High Court's previous judgment that the current law, namely, the 1961 Suicide Act, is compatible with human rights legislation.

Sir Terence said the Court concluded that it was not as well-placed as Parliament to determine the 'necessity and proportionality of a blanket ban'. He also said the High Court had seen evidence that Mr Conway's proposed new legal framework for terminally-ill people was 'inadequate to protect the weak and vulnerable.' Finally, the Justices agreed that, 'the prohibition in section 2 of the 1961 Act achieves a fair balance between the interests of the wider community and the interests of people in the position of Mr Conway.' In other words, assisted suicide remains illegal in the UK. Noel Conway and his legal team will now appeal to Britain's most senior judges, the Supreme Court.

Assisted suicide in Scotland

Yet another bid to introduce assisted suicide in Scotland has commenced. It is being led by the Liberal Democrat health spokesman, Alex Cole-Hamilton MSP. Such a proposal was originally brought forward by the late Independent MSP Margo MacDonald, but it was twice rejected by the Scottish Parliament, the last time was three years ago, when it was fronted by the Green Party's co-leader, Patrick Harvie.

Guernsey rejects assisted suicide

On Friday 18 May, after a three-day debate, the Parliament of Guernsey, a British Crown dependency off the coast of Normandy, voted 24 to 14 to reject an Oregon-style bill for assisted suicide. If the proposal had passed, Guernsey would have become the first place in the British Isles to offer euthanasia for people with terminal illnesses.

The measure was a private member's bill, or requête, proposed by Guernsey's chief minister, Gavin St Pier. After the defeat, he stated, 'We, of course, accept that decision. We remain of the view that this is an inevitable change which in the fullness of time Guernsey will one day adopt. However, that is a matter for our parliamentary successors, not us.' The proposal was supported by Dignity in Dying, but opposed by Christian leaders on the Island, the British Medical Association and the Guernsey Disabilities Alliance.

Euthanasia in the Netherlands

The latest annual Report of the RTE, the Regionale Toetsingscommissies Euthanasie, indicates that 6,585 assisted deaths were recorded in 2017, an increase of 8% from the 6,091 reported deaths in 2016. The number of assisted deaths for dementia or psychiatric patients also increased in 2017, with 169 people suffering with the former conditions and 83 for the latter.

The Report states that virtually all such deaths were committed within the law. This is doubtful. For a start, the Netherlands euthanasia review committees simply do not know how many assisted deaths occur outside of the law. The New England Journal of Medicine (2017, 377: 492 - 494) published a study entitled, 'End-of-Life Decisions in the Netherlands over 25 years.' It maintained that even in 2015 there were 7,254 assisted deaths (6,672 euthanasia deaths, 150 assisted suicide deaths, 431 terminations of life without request) throughout the Netherlands. The official Report for 2015 indicated only 5,561 deaths – suggesting that at least 1,693 (23%) of the assisted deaths were not reported and therefore outside of the law.



Part of the problem is that Dutch doctors operate a voluntary code of reporting. The system is a bureaucratic disaster. For example, the 431 terminations of life without request were probably not reported. Yet there has not yet been a single prosecution of a doctor involved despite growing concerns that assisted death is becoming normalised. Recent, more vigorous, assessments by regional euthanasia committees have resulted in four cases being investigated by the Dutch prosecutor's office. The outcomes will be eagerly watched.

Assisted suicide in Oregon

According to the latest Report from the Oregon Health Authority, during 2017 a total of 218 people received lethal prescriptions under its Death with Dignity Act (DWDA). As of 19 January 2018, as many as 143 people had died in 2017 from ingesting these prescribed medications, including 14 who had received the prescriptions in preceding years. The comparable death figure for 2016 was 138. A decade earlier, in 2007, it was only 49.

As in previous years, most patients were aged 65 years or older (80.4%) and had cancer (76.9%). Moreover, a significant proportion (55%) cited one of the reasons for opting for assisted suicide was not a concern about pain or adverse symptom control, but about being a burden on family, friends or caregivers. Under the terms of the DWDA, one of the eligibility criteria is that the patient must have been diagnosed with a terminal illness that will lead to death within six months. However, the Report notes that the time from first request until the patient's death ranged from 15 days up to 603, which is almost 20 months. This emphasises the problems associated with accuracy of prognoses and whether some patients should have ever been regarded as eligible for assisted suicide.

Assisted suicide throughout the USA

Assisted suicide and euthanasia practices seem to be gathering acceptance across the USA. There are now 8 states where such activities are legal, thus an estimated 18% of the US population can now be offered the options.

So, is it the doctors leading or colluding in these ethics and practices? Not so, apparently. The American Medical Association (AMA) is the largest association of US doctors and medical students, with nearly a quarter of a million members. It recently issued a statement by its Council on Ethical and Judicial Affairs (CEJA), squarely opposing such procedures.

In its Report 5-A-18, the CEJA declared that, 'In its current form the Code offers guidance to support physicians and the patients they serve in making well-considered, mutually respectful decisions about legally available options for care at the end of life in the intimacy of a patient-physician relationship. The Council on Ethical and Judicial Affairs therefore recommends that the Code of Medical Ethics not be amended.

The Report also discusses the key issue of terminology. 'Ethical deliberation and debate is best served by using plainly descriptive language. In the Council's view, despite its negative connotations, the term "physician assisted suicide" describes the practice with the greatest precision. Most importantly, it clearly distinguishes the practice from euthanasia. The terms "aid in dying" or "death with dignity" could be used to describe either euthanasia or palliative/hospice care at the end of life and this degree of ambiguity is unacceptable for providing ethical guidance.'

The AMA has been under pressure to modify its stand of opposition. The American Academy of Hospice and Palliative Medicine has already adopted a position of 'studied neutrality'. Doctors from Oregon are lobbying within the AMA for neutrality, if not outright endorsement. The heat is on for the AMA, but principled ethics can/should beat false arguments every time. And the heat is indeed on - on Monday 11 June, delegates at the AMA's annual meeting in Chicago voted by 56% to 44% to reject its current opposition to medically-assisted death. Although the AMA's guidance remains unchanged for now, the organisation is pledged to continue reviewing its current guidance on the issue.



USA and **Elsewhere**

Faith and Opportunity Initiative

In early May, President Donald Trump signed an executive order creating this new White House office to represent the rights of religious Americans and to involve their perspective in future policymaking. The White House press release stated that the order will, '... ensure that the faith-based and community organizations that form the bedrock of our society have strong advocates in the White House and throughout the Federal Government.'

Trump signed the order during the annual National Day of Prayer ceremony in the White House's Rose Garden on 2 May. He said, 'Prayer has always been at the centre of the American life. America is a nation of believers, and together we are strengthened by the power of prayer. We take this step because we know that in solving the many, many problems and our great challenges, faith is more powerful than government and nothing is more powerful than God.'

Wheaton College victory

At long, long last in late February, Wheaton College was granted a permanent injunction providing it with unending protection from a Department of Health and Human Services mandate. The latter's 'contraceptive mandate' imposed under the Affordable Care Act (ACA) requires companies and universities to provide contraception, including abortifacient drugs such as the morning-after pill, in their health insurance plans. Wheaton, and many others, went to court to defend their religious freedoms – it has taken 5 years for this case to be resolved.

Philip Ryken, president of Wheaton College, said, 'We are grateful to God that the court recognized Wheaton's religious identity and protected our ability to affirm the sanctity of human life. The government should never have tried to force us to provide drugs and services against our faith, but that episode is now behind us.'

Abortion in Poland

The Polish government is still pushing to enact the toughest abortion laws in Europe. The proposed restrictions suit the social conservatism of the governing Law and Justice (PiS) party. Already abortions are allowed under only three circumstances – pregnancy from rape or incest, danger to the woman's life or health, or severe foetal damage. The proposed law would strike out that last exception. If passed, it would effectively amount to a virtual total ban.

The battle lines have been drawn. The proponents are influenced either by the powerful Roman Catholic Church, or by the women's groups who have organised street protests, some involving as many as 55,000 people. A poll in January showed that 37% of Poles supported the liberalisation of the present abortion law, 43% supported the status quo and only 15% backed a total ban. There is no doubt that the government is in trouble.

Such legislation can seem strict, even harsh to us. But that is mainly because we have become so used to living with liberal, permissive abortion laws — it is a sign that we too have been infected. If you are not an absolutist, then you favour abortion under some circumstances and those circumstances always prove to be so fluid.

John Ling



Latest news of significant individual cases

The following are summaries of the story so far in some of the significant recently-resolved or still unresolved cases involving Christians responding to a wide range of legal, police or disciplinary action against them. Seeking a remedy by means of litigation can be a lengthy process – sometimes taking several years for a closure to be reached. All cases mentioned except the first are being handled by the Christian Legal Centre.

Ashers Baking Company

On 1 and 2 May, the UK Supreme Court heard Ashers' appeal against earlier judgments which found that the company had discriminated on grounds of sexual orientation and political opinion in refusing to ice a cake bearing the slogan "support gay marriage".

The case continues to raise significant issues regarding compelled speech and freedom of thought, conscience and religion. The free speech issues have been given greater focus because of the intervention of the Attorney General for Northern Ireland in the case. The Supreme Court is expected to give judgment later in the year. (*The Christian Institute*)

Transgenderism

Joshua Sutcliffe

Popular Christian maths teacher, Joshua Sutcliffe, was disciplined by his school for "misgendering" a student, after telling a group of students "well done, girls" when one of them "identified" as a boy.

Since the pupil started at the school, Joshua has tried to balance his sincerely held Christian belief that biological sex is God-given and defined at birth, with the need to treat sensitively the pupil. He avoided the use of gender-specific pronouns, and instead referred to the pupil by the pupil's chosen name. Joshua admits saying "well done, girls" when he addressed a group of students including the pupil in question. The pupil became irate at this and Joshua sought to defuse the situation and apologised.

He was reported by the pupil's parents and an investigation began immediately, during which Joshua was placed in "isolation" in the staff room and prevented from teaching. Following the school's investigation, it was found that Joshua "misgendered" the pupil, "demonstrating discriminatory behaviours" and "[contravened] the school's equality policy".

The Christian Legal Centre is currently supporting Joshua in his application to the Employment Tribunal.

Nigel and Sally Rowe

A couple on the Isle of Wight have removed their children (aged 6 and 8) from a Church of England primary school pending legal review of the school's handling of another pupil's request to be recognised as "transgender".

Nigel and Sally Rowe received what they describe as a "cold and shockingly inappropriate" response to concerns they raised about two primary school children "transitioning gender" at the school. The couple described the decision to remove their children as necessary to safeguard their wellbeing, with the diocesan education board saying that failure to acknowledge "a 'transgendered person's true gender" (i.e. their new gender) would be "transphobic behaviour".

The couple, who actively supported the school and helped to lead assemblies, describe the step as "deeply painful and very reluctantly taken." They feel they cannot return their children to the school until there is a satisfactory resolution and believe their only hope of reaching it is to launch legal action, challenging the school's behaviour and the legitimacy of national guidelines. They believe the "aggressive new gender ideology that is being rolled out across the education system is to the detriment of children's best interests."



With the assistance of Dr Paul McHugh, Professor of Psychiatry at the Johns Hopkins University, and CLC, Nigel and Sally are currently preparing to challenge the school's policy by raising a complaint against the Secretary of State for Education.

"Bethany"

A Christian family feared that unless they allow their then 14-year-old daughter "Bethany" to change her name to "Gary", (names changed) she might be taken into foster care.

The family became embroiled in a battle with social services concerning their daughter, who, within a few months of attending a new school after being home educated, started to dress as a boy and decided that she wanted to be called Gary.

The parents were originally told that their refusal to allow the name change was tantamount to "neglect", but the Christian Legal Centre worked with the family to seek the best professional support for Bethany. CLC commissioned a report from a Christian psychologist, which differed considerably from the views expressed by Social Services. His conclusion was that she was suffering from depression and he found it difficult to understand why she was not being treated accordingly.

Things steadily improved and the relationship between parents and daughter normalised, but the family were concerned when just before Bethany's 16th birthday they were contacted by Child and Adolescent Mental Health Services (CAMHS) again. They insisted that Bethany be assessed by a child psychiatrist as there was an increased statistical risk at this age of self-harm and suicide. The parents were anxious about this development but were much relieved to discover that a different medical professional was now involved in her case. The report from this new psychiatrist concluded that in view of her improvement, she needed to be seen just once more, before being released from the care of CAMHS.

That final appointment has now passed and there is no further need for CAMHS or Social Services to be involved. The mother summed up the family's position by simply saying "Praise God".

Religious Freedom at Work and in Education

Pastor Paul Song

Pastor Paul Song was a volunteer Chaplain at Brixton Prison. During his 19 years' service he taught various Christian courses including "Alpha" and "Just 10". His courses were so popular that, even with a capacity of 80 prisoners per course, he still had a waiting list. During this time, he saw many inmates come to faith.

Paul's relationship with the prison was always good until the appointment in 2015 of a Muslim Imam as Senior Chaplain. The Imam told Paul his material was "too radical" and that he wanted to "change the Christian domination" at the prison. These allegations led to Paul being excluded from the prison. With the assistance of the Christian Legal Centre (CLC), Paul is challenging the decision to exclude him from the prison.

In light of pressure having been brought to bear, Her Majesty's Prison Service has agreed to conduct an investigation into the circumstances surrounding Paul's exclusion. Paul is awaiting the outcome of this review before considering what to do next.

Richard Page

Richard served as a magistrate in Central Kent for 15 years. In July 2014, he dissented from the decision of two co-magistrates to approve the adoption of a child by a same-sex couple. During a closed-door discussion with his colleagues, Richard said that it was in the bests interests of the child to be raised by a mother and a father. A series of "investigations" ensued, following which the Lord Chancellor and the Lord Chief Justice ordered that Richard be removed from the magistracy, saying that he had been influenced by



his religious beliefs and that this amounted to serious misconduct. Richard was ordered to go on "reeducation" training.

At the Employment Tribunal in February Richard was unsuccessful in his attempt to challenge the decision of the Lord Chancellor and the Lord Chief Justice. During these proceedings, the opposing barrister labelled Bishop Michael Nazir-Ali and Christian Concern as "extremists" and criticised Richard for becoming associated with them.

The Christian Legal Centre is helping Richard to appeal this decision and he is currently waiting to hear whether permission to appeal has been granted.

In a separate action, the NHS reacting to the reporting of Richard's removal as a magistrate, refused to extend his term as a non-executive director of the local NHS Trust because of his "discriminatory" views.

At a preliminary hearing at the Employment Tribunal in January 2017, the judge described Richard Page's case as "crying out to be heard". A full hearing took place at the Employment Tribunal from 1-4 August, following which Richard's claim to be reinstated was rejected.

In obiter, the judgment noted that "Had the belief relied on by the Claimant been... that 'homosexual activity' is wrong then the tribunal may well have concluded that this was not a belief that was worthy of respect in a democratic society".

CLC is continuing to support Richard in this matter and the appeal will be heard in July 2018.

Felix Ngole

Felix Ngole was studying at the University of Sheffield on an MA Social Work course. In a Facebook discussion about the marriage registrar, Kim Davis, who refused to register same sex weddings, Felix posted bible verses and comments to demonstrate the Bible's teaching on sexual ethics and marriage. An anonymous complaint was made about Felix's comments and Felix was investigated by the University.

Felix was removed from his course because his comments may have caused offence and his subsequent appeal was dismissed. The University's decision prevents him from pursuing his desired profession as a social worker and highlights their very concerning position that only certain views about sexual ethics are acceptable.

Felix challenged the University's decision by submitting a complaint to the Office of the Independent Adjudicator which was rejected.

With the support of the Christian Legal Centre (CLC), he then appeared in the High Court in late April 2017 to seek permission for a judicial review of the decision to expel him from his University. Felix was granted such permission, and his case was heard in full on 3-4 October.

While noting that the university's sanction "was indeed severe", and that there had been no evidence of Felix acting in a discriminatory fashion, the Tribunal found against him on the basis that the posts could be accessed and read by people who would perceive them as judgemental... or suggestive of discriminatory intent, and it was reasonable to be concerned about that perception.

The ruling has a deeply concerning impact on freedom of expression, and flies in the face of the government's expressed intention to promote free speech at universities.

CLC has submitted an appeal and are waiting for a hearing date.



Sarah Kuteh

Sarah began working for the NHS Trust in 2007, and initially served as a Senior Staff nurse for 5 years in the intensive care department, before being promoted to Sister. In January 2016 she was assigned a position in the pre-operation assessment department.

Her role included taking patients through a pre-op assessment questionnaire, covering various topics including the patient's contact details, their health, allergies to medication, and their GP's details. The questionnaire also asked about the patient's religion, as this may have informed their future treatment.

Many patients expressed their beliefs in the questionnaire, and, on occasion, Sarah would enter into discussions with them about their faith. Where the patient said that they were not interested in religion, she would ask, where appropriate, how they had arrived at their decision. Depending on the patient's demeanour and their willingness to talk about religion, she would also sometimes share briefly about how her faith had changed her life.

Following a short investigation, during which Sarah was unable to quiz the witnesses who had made complaints, the hospital dismissed her in August 2016 for gross misconduct, a penalty which she believes is completely disproportionate and punitive.

Supported by the Christian Legal Centre, Sarah filed a claimed for unfair dismissal in the Employment Tribunal. The Employment Tribunal dismissed Sarah's claim and her case was appealed to the Employment Appeal's Tribunal who upheld the original decision. Permission to appeal to the Court of Appeal has been sought.

In a separate matter, a hearing took place in the Nurses and Midwifery Council from 8 – 11 January 2018 to determine whether Sarah should continue practising as a nurse. The NMC found that Sarah's fitness to practice was impaired and issued her with a conditions of practice order.

Sarah has since secured another job as a nurse and a hearing is set for 26th July 2018 to consider whether the conditions of practice order should be extended.

Sharn Ashridge

Sharn Asbridge has worked as a supply teacher for over five years at numerous schools.

On 16th February 2017, she was teaching an RE lesson to Year 10 class. The topic was "Christians helping the Poor". On discussing the background of Mother Teresa, there was a line about how her Christian faith led her into this work to spread the Gospel. Sharn touched on the meaning of "Gospel", and then on explanatory doctrines such as "Sin, Jesus' death on the Cross, Heaven and Hell".

Sharn was asked what Sin was, and explained about it being to "miss the mark/standard set by God". One female student then asked about Sharn's views on same-sex marriage, and Sharn gave what she clearly said was her personal opinion that "the Bible calls homosexuality an abomination, wickedness and unnatural", and it was one of the reasons God destroyed Sodom and Gomorrah.

She then went on to talk about other sins to which she concluded by quoting the Bible "all have sinned and fallen short of the glory of God". She was asked if she hated homosexuals, to which she replied no.

After the class, two members of staff questioned Sharn about her comments on homosexuality and demons. The deputy Head ordered that Sharn be dismissed immediately.

Sharn is being supported at the Employment Tribunal by the Christian Legal Centre.



Right to Life (Assisted Suicide)

Nikki and Merv Kenward

Nikki and Merv Kenward, who campaign against euthanasia and assisted suicide, have been seeking to challenge the decision of the Director of Public Prosecutions to change the policy on the prosecution of healthcare professionals who assist patients in committing suicide.

In October 2014, the DPP amended the policy, making the prosecution of healthcare professionals in assisted suicide cases less likely.

In response, the Kenwards sought to challenge the decision, arguing that the DPP acted outside of her powers by liberalising the policy and that this would endanger many vulnerable people. However, in December 2015 the High Court ruled that the DPP had acted lawfully and thus the Kenwards' application was refused.

The Kenwards appealed to the Court of Appeal for permission to appeal the High Court's decision. This application was initially refused, though the Kenwards were granted permission for an oral hearing which took place at the Court of Appeal in January 2017.

Lord Justices Longmore and Kitchin heard the Kenwards' appeal application, but unfortunately refused permission for the appeal to go ahead. A costs order was made against the Kenwards, though the Christian Legal Centre are planning to file an ECHR application on the grounds of discrimination.

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