

## THE BULLETIN

*News and Reports from the Social Issues Team*

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## How Christianity Changed the World: Biblical Christianity's Impact on Healthcare and Philanthropy

*This article is the fourth of five papers under the general heading of 'How Christianity Changed the World'. They are adapted from a series of talks given by the author at Word Alive in April 2019. She has given us permission to publish all five in this and subsequent issues of the Bulletin. Christian Focus are releasing Sharon's book on this theme in March 2021: <https://www.christianfocus.com/products/2954/how-christianity-transformed-the-world>*

**This series of articles offers some snapshots from history to demonstrate that the world has been changed immeasurably for the better because of the life and witness of Christ's followers. In this fourth article we see that Christians through history and today are in the forefront of providing healthcare and other humanitarian reforms for a world in great need of such.**

The God of mercy has compassion on all he has made, and his followers have been at the forefront of efforts to relieve suffering and need. The West has a strong tradition of philanthropy that has created a culture of giving and sharing that is unmatched in any other civilisation in history. The parable of the Good Samaritan has been described as the parable that changed the world.

The whole Bible bears witness to the reality that our triune God is a God of mercy and compassion. He is the God who is gracious, full of compassion, slow to anger, great in mercy, and good to all (Psalm 145:8-9). He insists that anyone who wants to honour him will have mercy on the needy (Proverbs 14:31). And he tells his followers that if we merely profess belief but do not take pity on their suffering, our faith is dead (James 2:14-17).

Today, whether or not we were raised in a Christian home, we have been brought up in a culture which has been deeply impacted by the Christian worldview, and we take for granted that 'compassion' is a good thing. But that was not the case in the pagan world.

### Compassion: A Revolutionary Concept

Jesus' teaching that his followers were to love their enemies and show mercy to all was revolutionary in his day. In pagan culture, compassion for the needy was often regarded as foolish; Plato and others held that a poor man should be left to die if he could no longer work. Certainly, in the pagan world people gave gifts, but something was generally expected in return; wealthy benefactors would expect public honour and recognition.

By contrast, Christians were widely noted for their compassion; their message, lived out, resulted in radical communities offering love and care. It was a profound contrast with pagan religion. Pagans attended the temple to make offerings. They *attended*. They didn't *belong* to a familial community. Christians did belong; Church was the body of Christ, it was community, and it was family. If one member suffered, all suffered.

As we have noted earlier in this series, Christianity spread rapidly during the first three centuries in the face of opposition and persecution. There were probably no more than a few thousand Christians in 40 AD. But by the third century, Christianity was growing at the rate of 40 per cent per decade. Some reckon that by 350 AD there were 33 million Christians in the Roman Empire out of a total population of 60 million.

Why was this? Their ethic of compassion and care was a major factor. Sociologist Rodney Stark paints a bleak picture of the misery and brutality of life in the urban Greco-Roman world:

*To cities filled with the homeless and impoverished, Christianity offered charity as well as hope. To cities filled with newcomers and strangers, Christianity offered an immediate basis for attachments. To cities filled with orphans and widows, Christianity provided a new and expanded sense of family. To cities torn by*

*violent ethnic strife, Christianity offered a new basis for social solidarity. And to cities faced with epidemics, fires and earthquakes, Christianity offered effective nursing services.*<sup>1</sup>

The Christian response to poverty was grounded in beliefs about human dignity. David Bentley Hart writes:

*Christian teaching from the first placed charity at the centre of the spiritual life as no pagan cult ever had, and raised the care of widows, orphans, the sick, the imprisoned and the poor to the level of the highest of religious obligations.*<sup>2</sup>

In the third century, a Christian handbook, *The Didascalia*, insisted that church leaders were to ensure that arrangements were made for orphans to get education, widows to receive aid, and the destitute to be provided with food and firewood.<sup>3</sup>

By the middle of the third century, the church at Rome had more than 1,500 needy people enlisted who were receiving regular help. Even small churches kept storerooms of provisions for the poor, such as oil, wine and clothing. So, long before Constantine, the church had created a system of social assistance that no department of the pagan state had ever provided.<sup>4</sup> Once Constantine became emperor, those modest storerooms were transformed into larger store houses. The church became the first organised institution of public welfare in Western history.<sup>5</sup>

The early Christian apologist Tertullian (c.155–240 AD) noted that Christians willingly gave to the church. The donations given to pagan temples were commonly spent on gluttony and feasting. By contrast, the Christians used their funds to support poor people, orphans, the elderly and even those who had suffered shipwrecks.

The Emperor Julian the Apostate (who reigned from 361-363) lamented that the Christians, whom he hated, showed love and compassion, whereas his pagan countrymen did not, famously saying: that the ‘Galileans – to our disgrace – support not only their poor but ours’.<sup>6</sup> He argued that the Christians’ philanthropy towards strangers had done most to spread their beliefs.

## **The Christian Contribution to Healthcare and Hospitals**

*The teaching of Jesus was the dynamic motivation behind the rise of hospitals, orphanages, leprosariums and hospices for the dying. For those who followed Jesus, the poor, the sick, the homeless, the prisoner, the unemployed, the stranger and the dying were the focus of the love of God and therefore of human care.*<sup>7</sup>

### **Christian Hospitals**

Christian hospitals for the destitute and dying were founded by the reign of Constantine (ruled 306-337). They could be found right the way from the Syrian and Byzantine East to the Western fringe of Christendom. The only previous ‘hospitals’ were the institutions used by the Roman army to restore soldiers to their fighting capacity. During the fourth century, the great city of Edessa (modern day Urfa in Turkey) was ravaged by an outbreak of plague. The Christian deacon Ephraim the Syrian (306-373 AD) founded hospitals to care for the victims.

Basil of Caesarea, now Kayseri in Turkey, who lived from 329 to 379 AD, had been a prominent and gifted law teacher. When he was converted, his life was turned around and he gave away his personal family inheritance to help the poor. As a church leader in Caesarea, he organised a soup kitchen and distributed

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<sup>1</sup> Rodney Stark, *The Rise of Christianity: A Sociologist Reconsiders History* (Princeton University Press, 1996), 155.

<sup>2</sup> David Bentley Hart, *Atheist Delusions* (Yale University Press, 2010), 164.

<sup>3</sup> *Ibid.*, 164.

<sup>4</sup> *Ibid.*, 163.

<sup>5</sup> *Ibid.*, 164.

<sup>6</sup> *Ibid.*, 191.

<sup>7</sup> Os Guinness, *Renaissance* (Downers Grove: IVP Books, 2014), 26ff.

food during a famine following a drought; he worked to rehabilitate thieves and prostitutes; he didn't hesitate to challenge public officials if they failed to administer justice. He preached every morning and evening in his own church to large congregations. In addition to all that, he supervised the building of a huge complex which included a poorhouse, hospice and hospital, which was described as one of the wonders of the world.

John Chrysostom (347-407 AD), while patriarch of Constantinople, used his influence to fund hospitals. Rich members of the laity were personally involved in care for the poor and sick. In addition to medical care, these hospitals provided food for the hungry and cared for widows and orphans.<sup>8</sup> Benedict of Nursia (c. 480-547 AD) founded a monastic order, and caring for the sick was one of the main duties of the monks of his order. He opened a free infirmary at Monte Cassino.

We too easily forget that before the Islamic conquests of the 7<sup>th</sup> and 8<sup>th</sup> centuries, the middle east and North Africa were covered with Christian churches. And the Christians established numerous free hospitals which were well served by physicians and surgeons; there was convalescent care; there were some specialising in the care of the elderly; there were shelters for foundlings, and the homeless and orphans. Hospitals on that model were built all over Western Europe throughout the Later Middle Ages: the Benedictines alone were responsible for more than 2,000 hospitals in Western Europe. But in addition to the hospitals, by the mid-15<sup>th</sup> century there were 37,000 Benedictine monasteries caring for the sick.<sup>9</sup>

At Montpellier in 1145 the Hospital of the Holy Spirit was founded. It soon became a centre of medical training. By the 14<sup>th</sup> century in Europe, England alone (with less than four million people), had 600 hospitals; France, Germany and Italy had even more.<sup>10</sup>

### **Christian Nursing**

Nursing world-wide has been pioneered by Christian voluntary efforts. During the period of the early church, widows, deaconesses and women who committed to be celibate cared for the sick. During the Middle Ages, monks and nuns provided nursing care.

Modern nursing dates back to the pioneering practice of an order of Lutheran deaconesses at Kaiserswerth in Northern Germany. This began when Pastor Theodor Fleidner gave refuge to one poor, sick and destitute prisoner and nursed him in his own home. He then established a hospital with 100 beds, and trained poor women as nurses. His hospital and the professional care given became famous throughout Europe. By the middle of the 20<sup>th</sup> century, there were over 35,000 deaconesses serving in parishes, schools, hospitals and prisons throughout the world.<sup>11</sup>

When the young English aristocrat Florence Nightingale (1820-1910) visited Kaiserswerth, she was inspired to defy her horrified parents, and devote her life to nursing. Famously, she transformed the vile conditions in the British military hospital in the Crimea during the Crimean War (1853-6). She then spent the next fifty years pioneering and publicising modern nursing.

Few today have heard of Andrew Reed (1787-1862). He was a great pioneer in care for orphans, those with learning disabilities and the terminally ill. Reed came from a very humble background – he left school early, and trained to work as a watchmaker. He was converted at the age of 15 and aged 19 he entered ministerial training at a small nonconformist college. At 24 he became pastor of New Road Chapel, London where he served faithfully for fifty years, during which time the church grew from 60 to 2,000 members.

Situated in a poor area, it was surrounded with pitiful scenes of squalor and destitution. Life expectancy was short; infants might be orphaned with no-one to care for them. Before he married, Andrew lived with

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<sup>8</sup> Hart, *Atheist Delusions*, 30-1.

<sup>9</sup> Alvin J Schmidt, *How Christianity Changed the World*, (Grand Rapids: Zondervan, 20014), 157.

<sup>10</sup> *Ibid.*, 159.

<sup>11</sup> 'Vår historie'. Lovisenberg diakonale høgskole, Wikipedia entry for Theodor Flidner, [https://en.wikipedia.org/wiki/Theodor\\_Flidner](https://en.wikipedia.org/wiki/Theodor_Flidner) (accessed 11 December, 2019).

his sister Martha and they took destitute orphans into their home and cared for them. Before long, Andrew raised funds for a large home to accommodate orphans.<sup>12</sup> When Andrew married, his wife Elizabeth worked alongside his sister Martha in charitable ministries. Meanwhile Andrew juggled pastoral responsibilities and preaching with ceaseless fundraising and practical oversight of the orphanages.

Reed became increasingly disturbed at the lack of provision for children with learning disabilities. There was no distinction made between those who were born with learning difficulties, and those suffering mental illness. Asylums, hospitals and workhouses would have sections for those labelled as 'lunatics'. All were just put together indiscriminately and often appallingly treated. Reed travelled through Europe researching how such children were cared for in a number of pioneering institutions run by Christians. He then opened a home in 1848 at Park House, Highgate for children with learning difficulties, the first in Britain. He then raised funds to purchase the Earlswood Estate, near Redhill, Surrey. Prince Albert laid the foundation stone in 1853. This was transformed by voluntary gifts into the Royal Earlswood Hospital which could house up to 500 children. It became internationally known for the enlightened way in which children with severe learning difficulties were treated.

As if that were not enough, Reed also became a pioneer in the care of the terminally ill. Pastoring a church in a very poor area meant that he knew first hand of hospitals discharging patients who were 'incurable'. They might end up on the streets, or in the workhouse. Reed opened a home in Carshalton in 1855, which looked after about forty people. This was then replaced by a much larger hospital and home for terminally ill patients at Putney (now the Royal Hospital for Neuro-Disability).

Others followed this lead, and a host of other initiatives to help the terminally ill followed. To bring Reed's story up to date, Cicely Saunders (1918-2005) opened St Christopher's Hospice in 1967, widely considered the first modern hospice. Like Andrew Reed, Cicely Saunders was motivated by her deep Christian commitment. The hospice movement and a commitment to palliative care has spread to many countries.

Healthcare is now regarded as the obligation of the State, but Christian voluntary contributions laid the foundation. Researcher James Bartholomew has spent years studying the Welfare State. He documents that before the National Health Service was founded in 1948, Britain had one of the leading medical services in the world, and much of it was due to Christian charitable giving and input.<sup>13</sup>

### **Christian Mission and Healthcare**

World-wide, it is Christian missionaries who have led the way in providing medical clinics, blood banks, mental health programmes, and alcohol and drug rehabilitation.<sup>14</sup> Working in some of the toughest situations on earth has led to some major medical breakthroughs, such as the missionary Paul Brand's pioneering treatment of leprosy, which has been internationally recognised.

Robert Woodberry spent years researching the impact of Bible-believing missionaries around the world. He found that:

*Missionaries... typically opened the first hospitals and clinics, and pioneered Western medical education around the world. Informally, many missionaries also taught hygiene and rudimentary medical knowledge, and introduced new crops and livestock that improved the quality of local diets. Thus, the historical prevalence of Protestant missionaries is associated with longer life expectancies and lower infant mortality rates.<sup>15</sup>*

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<sup>12</sup> Ian Shaw, *The Greatest is Charity: The Life of Andrew Reed, preacher and philanthropist* (Darlington: Evangelical Press, 2005).

<sup>13</sup> James Bartholomew, *The Welfare State We're in*, (Politico's, 2006), 87-150.

<sup>14</sup> *Christianity and Freedom*, vol. 2, (Cambridge University Press, 2016) 4, 92.

<sup>15</sup> R. D. Woodberry, 'Protestant Missionaries and the Centrality of Conversion Attempts for the Spread of Education, Printing, Colonial Reform and Political Democracy', in *Christianity and Freedom*, vol. 1, 385.

## The Evangelical Awakenings of the Eighteenth and Nineteenth Centuries

The great revivals of the eighteenth century in Great Britain led by preachers such as George Whitefield and John Wesley, and in America, led by preachers like Jonathan Edwards, were sparked off by earlier renewal movements on the continent of Europe.

In Europe, mainstream reformers such as Luther had introduced biblical reform with regard to salvation. But they maintained the belief that all the infants in a given territory should be baptised into the national church. This inevitably led to the nominalism and spiritual decline of second, and then third generation Christianity. Luther's doctrine of salvation by grace alone all too easily then became a doctrine of cheap grace. By the 17<sup>th</sup> century in Lutheran areas where everyone had been baptised into the Lutheran church, ministers reported:

*Those who come to service are usually drunk... and sleep through the whole sermon, except sometimes they fall off the benches making a great clatter, or women drop their babies on the floor... They play cards while the pastor preaches, and often mock or mimic him cruelly to his face... cursing and blaspheming, hooliganism and fighting are common.*<sup>16</sup>

'Pietists' was the name given to those Christians who called the church back to a real biblical faith and walk. I will mention just one of them: Auguste Hermann Francke (1663-1727). As a young university student, Francke struggled to find direction in life. In his autobiography he wrote:

*For twenty-four years... I loved the world and the world loved me... I grasped heaven with one hand and the earth with the other. I wanted fellowship with God and the friendship of the world at the same time, and could hold neither properly.*<sup>17</sup>

But then he was converted. In 1692 he became both a pastor, and a professor of Oriental Studies at the newly established Halle University (in what is now central Germany).

Over the next twenty years, he taught generations of pastors, emphasising a changed life. He himself was an exceptionally active pastor; he preached five times a week, held daily catechism classes for young people, published a religious magazine and promoted world missions. Under his leadership at Halle, the believers provided an orphanage, two homes for widows, free food for needy students, a home for beggars, job creation schemes for the unemployed, free medicine for the poor, and care for the physically disabled. The motto of the pietists was 'God's glory and neighbour's good'. The two went together. They believed in social engagement as an outflow of love for neighbour.

Francke was fearless in speaking truth to power. When he was called on to preach at the funeral of the ruler, Friedrich I, he declared to the grandees, nobles and politicians present: 'You, the mighty, the ruling and the wealthy are truly pitiable people if you do not have the Spirit of God',<sup>18</sup> and he reminded them of their duty to care for all their citizens. It was through the witness of some of those continental evangelicals that two Church of England clergymen, John and Charles Wesley, came to real living faith.

Whenever God has moved to revive the church, there has been ethical fruit – an outpouring of mercy and compassion. That is certainly the case when we look at the evangelical awakenings of the 18<sup>th</sup> and 19<sup>th</sup> centuries. Despite opposition, multitudes in the church, among the clergy, and in the world were born again, their lives were transformed, and the evangelical revival inspired a nationwide moral reformation and outpouring of mercy ministries.

The evangelical awakenings in Britain and America created a whole culture where 'benevolence', 'sympathy', 'compassion' and 'fellow-feeling' became a social ethos which found practical expression in

<sup>16</sup> Rodney Stark, *Bearing False Witness* (London: SPCK, 2017), 211.

<sup>17</sup> A. H. Francke, 'An Autobiography', 1692, quoted in *Christian History*, 'The Pietists', 7, 8, 33.

<sup>18</sup> <https://christianhistoryinstitute.org/magazine/article/moving-on-many-fronts> (accessed 23 December, 2019).

numerous reform movements and philanthropic enterprises that flourished during the 18<sup>th</sup> and 19<sup>th</sup> centuries. The whole tone of public life was elevated. For example, public hanging, which had become a form of mass entertainment, was ended; also ended was the opening to provide amusement for the general public of so-called asylums for the mentally ill.

It was very different in France. There a much more aggressively secular enlightenment resulted in the French Revolution, but the revolutionaries did little to improve the lives of the poor. Historian Gertrude Himmelfarb argues that the French philosophers produced neither the community of philanthropists nor the multitude of private societies that were so prominent in Britain.<sup>19</sup> The poor were worse off at the end of the French Revolution than at the beginning.

A second Great Awakening at the end of the 18<sup>th</sup> century and continuing through the 19<sup>th</sup> century, led to tens of thousands more people on both sides of the Atlantic converting to living Christianity. Evangelical Christians were responsible for a remarkable range of social changes: prison reform, care of the mentally ill, factory reform, rescuing women and children from sexual abuse, the provision of education, and of course, the abolition of the slave trade.

By the mid-nineteenth century, according to historian Owen Chadwick, evangelical religion 'seemed suddenly to be the most potent religious and moral force in England'.<sup>20</sup> Probably three-quarters of the total number of voluntary charitable organisations in Britain during the second half of the nineteenth century were evangelical.<sup>21</sup> Large numbers of laymen and women gave time, energy and money to help an extraordinary variety of organisations reaching out to help street children, prostitutes, orphans, prisoners, the sick and disabled, and other vulnerable members of society. We should note that evangelicals were also at the forefront of campaigning against cruelty to animals.

Many of the leading figures such as Lord Shaftesbury are very well known. But there were numerous humble Christians who served sacrificially but have since been forgotten. I will give just two examples:

**Thomas Jones (1752-1845)** was a Welsh clergyman. He was driven away from his parish church in Wales in 1785 because he had been converted to genuine living Christianity. His parishioners were embarrassed by his 'enthusiasm'. Eventually he became curate of a tiny hamlet of 46 houses in Northamptonshire with an annual stipend of £25 a year. He ministered faithfully in that obscure place for 43 years.

From that humble base he transformed the surrounding community. He wrote devotional books in English and Welsh. All the profits were ploughed into charitable enterprises. He was the founder of Sunday Schools, elementary ('Dame') schools, Sick Clubs and Clothing Clubs; he built six alms-houses for aged widows; he founded an Education Society which enabled fifty evangelical laymen to enter the ministry. He created a wonderfully named 'Society for Poor Pious Clergymen' and he managed to raise funds to distribute more than £35,000 to clergy more needy than himself.<sup>22</sup> He did incalculable good but few today have heard of Thomas Jones. And he was just one of many active Christians.

Another example of a now forgotten Christian is **Sarah Martin (1791-1843)**. She had been orphaned at an early age, and had gone to work as a seamstress aged fourteen. But in 1810, aged 19, she felt compelled to go into a chapel service in Great Yarmouth. That morning she heard a preacher expound 2 Corinthians 5:11: '*Since, then, we know what it is to fear the Lord, we try to persuade others.*' Sarah was converted. She soon was able to testify:

*I wished to give proof of my love, and desired the Lord to open privileges to me of serving my fellow creatures, that happily I might, with the Bible in my hand, point others to those fountains of joy, whence my own so largely flowed.*<sup>23</sup>

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<sup>19</sup> Gertrude Himmelfarb, *The Roads to Modernity: The British, French and American Enlightenments* (London: Vintage, 2008), 181.

<sup>20</sup> Owen Chadwick, *The Victorian Church*, Part 1 (A&C Black, 1966), 454.

<sup>21</sup> Kathleen Heasman, *Evangelicals in Action* (Geoffrey Bles, 1962), 14.

<sup>22</sup> J. Wesley Bready, *England before and after Wesley* (Hodder and Stoughton, 1939), 57-8.

<sup>23</sup> Frank Prochaska, *Women and Philanthropy in 19<sup>th</sup> Century England* (Clarendon Press, 1980), 165.

She continued to work long hours as a dressmaker. But she devoted every other waking hour to serving others: visiting those in the nearby workhouse hospital; providing schooling to poor workhouse children; teaching factory girls. When she was 27 she began visiting prisoners in the Tolhouse Gaol in Great Yarmouth. Conditions were among the worst in the country. Men and women indiscriminately were crammed into two vile underground dungeons infested with rats and lice. At first, Sarah read the Bible to prisoners. She then organised Sunday Services, began literacy classes, and introduced schemes for paid work. Eventually the town authorities were so delighted with improved conditions in the prison, and declining reoffending rates in the town, that they paid her to work full time with the prisoners. Her health broke down as a result of all her work. She died in 1843 aged 52.<sup>24</sup>

Sarah Martin was just one of tens of thousands of Christians during the 19<sup>th</sup> century in England who expected to devote significant amounts of time in voluntary service to those more needy than themselves. It was the expectation that genuine Christians would be engaged in active benevolence: taken for granted just as much as we might expect a real believer to engage in prayer and Bible reading.

## Christian Compassion Today

### In the UK

We can be tempted to be gloomy about the situation for Christians here in the UK. But we should be thankful to God for all those who are daily showing mercy and compassion in their own communities. Since 1960 evangelicals have formed as many charitable and philanthropic organisations as had been established in the golden age of evangelical influence in the 19<sup>th</sup> century.<sup>25</sup>

A 2003 Home Office Citizenship Survey calculated that a quarter of regular churchgoers, or around a million people, are involved in voluntary community service outside the church, concluding that people who follow a religion were significantly more likely to formally volunteer.<sup>26</sup>

The 2005 report, *Faith in England's Northwest*, estimated that volunteers contributed around 8.1 million volunteer hours each year, (the equivalent of 4,815 full-time jobs), with the annual financial value of this contribution being between £61 and £65 million.

Another study, *Faith in the East of England*, recorded a similarly wide range of activities supported by worshipping communities, from the 'traditional' such as visiting the sick (80 per cent of faith groups do this) and running lunch clubs (36 per cent) to the more innovative such as IT training (7 per cent). The report estimated that the value of faith community volunteer work to the region was around £30 million a year.

In 2006 a UK survey found that Christians give 7.5 times as much as others of their salary to charity/church/good causes.<sup>27</sup>

### Internationally

Where the followers of Christ have gone, and where the followers of Christ are, there are people who are obeying his commands to care for the needy. We will just take one case study: Vietnam. There, Christians play an outsized role in education, health, aid to the poor and vulnerable, and the upholding of human rights.

*From the 1880s... missionaries began to found orphanages, hospitals, dispensaries, leper colonies, houses for the elderly and terminally ill, all of which were rare... Such institutions introduced to Vietnam the concept of public welfare. These services, freely offered to [all] played an important part in meeting social needs... and helping people conceptualize a more just and humane society.*<sup>28</sup>

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<sup>24</sup> Matthew Pickhaver, 'Walking in good works – the Sarah Martin story', *Evangelical Times*, August 2015.

<sup>25</sup> Peter Brierley, *UK Christian Handbook*, 1985/6, 365-75; 410-416; 421.

<sup>26</sup> Nick Spencer, *Doing God: A future for faith in the public square* (Theos, 2016), 43.

<https://www.theosthinktank.co.uk/cmsfiles/archive/files/Reports/TheosBookletfinal.pdf> (accessed 11 December, 2019).

<sup>27</sup> Quoted in Lynda Rose (ed), *What are they Teaching the Children* (VFJ/Wilberforce Publications, 2016), 263.

<sup>28</sup> *Christianity and Freedom*, vol. 2, 261.



Right into the current century, evangelicals have played a major role in promoting the common good in Vietnam, through relief, schools, clinics, hospitals and development projects. Where people convert to Christianity in Vietnam, it is demonstrated that they are motivated to make positive social contributions. Importantly, also in Vietnam, Christian missionaries developed the romanized script which replaced the far more difficult character-based script. This made possible the achievement of an extremely high literacy rate, more than 95 per cent.<sup>29</sup>

That is just one country. But the world-wide picture leads us to conclude:

*A world from which the gospel had been banished would surely be one in which millions more of our fellows would go unfed, unnursed, unsheltered and uneducated.*<sup>30</sup>

*Sharon James*

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<sup>29</sup> *Christianity and Freedom*, vol. 2, 261.

<sup>30</sup> Hart, *Atheist Delusions*, 15.

## Coronavirus Update - Vaccinations

A YouGov poll in December showed that 85% of Britons thought they had insufficient information about Covid-19 vaccines, their safety, and so on. Welcome to Coronavirus – Part 3. It's big, but then so are the issues surrounding Covid-19.

### V-day finally arrived

At 06:30 GMT on Tuesday 8 December 2020 at University Hospital, Coventry, a 90-year-old woman originally from Enniskillen, Northern Ireland, became the first person in the world to receive the Pfizer-BioNTech Covid-19 vaccine outside of clinical trial conditions. Three weeks later, on Tuesday 29 December, she received her second vaccination.

Margaret Keenan, whose name is forever destined to be the answer in various quizzes, turned 91 the following week. The jolly grandmother turned up for her jab and global photocall in a natty Christmas penguin T-shirt and said it was, '... the best early birthday present I could wish for.' She urged everyone, 'Go for it because it's free.' The second recipient was an 81-year-old man with the improbable name of William Shakespeare from – I kid you not – Warwickshire. Journalists insisted the jab was 'much ado about nothing.' Everybody wanted their say on this extraordinary occasion. The UK's ever-optimistic Health Secretary, Matt Hancock, wanted all to know that he had already booked his 2021 holiday – in Cornwall. It was left to the ever-realistic Sir Patrick Vallance, the Chief Scientific Adviser to the UK government, to caution, 'It may be that next winter, even with vaccination, we need measures like masks in place. We don't know yet how good all the vaccines are going to be at preventing the transmission of the virus.' Thus, this historic, triumphant and even jocular day marked the official start of the UK's largest ever mass vaccination programme.

### The Big Three vaccines

On 4 January, Brian Pinker, an 82-year-old dialysis patient, became the first person to receive the Oxford-AstraZeneca vaccine. Then on 8 January, the Pfizer and Oxford vaccines were joined by one developed by the US company Moderna after the UK regulator, the Medicines and Healthcare products Regulatory Agency (MHRA), also gave it emergency MHRA Regulation 174 approval. The UK has ordered an extra 10 million doses of this vaccine, taking its total order to 17 million, but Moderna supplies are not expected to arrive here until the spring.

Will the Big Three soon become the Big Four? On 28 January, Novavax, the US biotech company, reported that, in a UK-supported trial with over 15,000 people, its new vaccine was 89.3% effective against the Covid-19 virus. In addition, it had an efficacy of 85.6% against the UK mutant and 60.0% against the South African. The vaccine must now be assessed and approved by the MHRA before being rolled-out later this year. The UK government has already secured 60 million doses. This 2-shot vaccine, to be made in Stockton-on-Tees, is stable for up to 3 months in a domestic refrigerator. It is looking good.

Or could it even be the Big Five? On 29 January, Johnson & Johnson, the US pharmaceutical giant, announced that its new vaccine was 66% effective at preventing moderate to severe Covid-19, 28 days after vaccination. However, it was less effective against the South African variant. Like the vaccine from Oxford-AstraZeneca, the Janssen jab is an adenoviral vaccine, as opposed to the mRNA vaccines produced by Pfizer and Moderna. It has advantages - it can be stored at 2 to 8°C for up to 3 months, and it requires just one dose. Trials are currently being conducted to test the efficacy of a two-dose regimen. The UK government has already ordered 30 million doses even though it has yet to be approved by the MHRA.

### Vaccine dosing differences

The vaccines of the Big Three require two doses per person – a primer and a booster. Their manufacturers recommend that these are given 3 to 4 weeks apart. At the end of December, the UK's Joint Committee on

Vaccination and Immunisation (JCVI), made the controversial decision, endorsed by the four UK Chief Medical Officers, to increase that gap to approximately 12 weeks. Why? Because they considered it was more important to give the primer jab to a greater number of at-risk people – in fact, to double the number – in the shortest possible time. Moreover, the JCVI considered that this primer dose of either the Pfizer-BioNTech or Oxford-AstraZeneca vaccine provides substantial and sufficient protection against Covid-19 by the third week after vaccination. However, a late-January report from Israel suggested that the first dose of the Pfizer-BioNTech vaccine led to only a 33% reduction in Covid-19 cases compared with at least 52% reported in the Pfizer-BioNTech clinical trials. A few days later another Israeli report raised that earlier datum to 50%. Preliminary results can be so tentative and misleading.

Another reason for this shift in UK policy was vaccine supply. This is a major barrier that will likely persist for several months, particularly during the critical winter period and amid reported production problems at both the Pfizer-BioNTech and Oxford-AstraZeneca manufacturing plants. As a result, late in January, Oxford-AstraZeneca warned that it was planning to reduce supplies to the EU. The EU responded by warning it will tighten export procedures of the Belgian-produced Pfizer-BioNTech vaccine to the UK. Oh dear – Covid-Brexit politics! Oh dear – ‘vaccine nationalism’!

Nevertheless, this new pragmatic UK policy raises several questions. Six are considered here. First, is it backed by good scientific evidence? Not really. During the early vaccine clinical trials the issues of one versus two doses and dose spacing were not rigorously examined. For example, the Pfizer-BioNTech manufacturers reported testing its vaccine's efficacy only when the two doses were given up to 21 days apart. The limited available data suggest that while two doses are optimal, their spacing may not be particularly crucial. In other words, it may well be a better policy to vaccinate more people with less efficacy than a greater efficacy in only half a population. It should reduce severe disease, hospitalisations and deaths. Moreover, such extended vaccination gaps are not new. For example, the gap for HPV vaccine for girls is a year and it provides a better immune response than a gap of a month. Could the same be true for Covid-19 vaccines?

Second, so, should the gap be 3 weeks or 3 months? The World Health Organization (WHO) recommends a gap of four weeks, to be extended only in exceptional circumstances to six weeks. The European Medicines Agency (EMA) has stated that the gap between the first and second doses of the Pfizer-BioNTech vaccine should not exceed 42 days. The Doctors' Association UK (DAUK), which represents front-line doctors, has expressed serious concerns about this new vaccine schedule and the lack of guidance around the decision, warning that patients are at risk if they do not receive a timely second dose. And on 22 January, senior doctors from the British Medical Association (BMA) said the current plan was ‘difficult to justify’ and called for the gap to be cut from 12 to 6 weeks, particularly for the Pfizer-BioNTech vaccine. So, should the gap be 3, 6, or 12 weeks? The truth is, as yet, nobody really knows. Could it even be that all three gaps are OK? Third, how effective is one dose? The statistics are complex and not easy to compare across the Big three vaccines. However, as an example, short-term (between days 15 and 21 after the first dose of the vaccine) efficacy for the Pfizer-BioNTech vaccine was estimated to be around 52%, whereas for the Oxford-AstraZeneca vaccine the figure was 70%. After the second dose, both figures rose to almost 95%. In other words, significant protection is obtained after the primer dose, but the booster is important. However, it should be born in mind that these data were obtained from trials under exacting clinical conditions, not out in the real world.

Fourth, is it important for people to receive the double dose of the same vaccine? Ideally, yes. But depending on supplies, regional differences, records and prioritisation, this may not be possible. Therefore the somewhat utilitarian thinking is, go for two of any. However, although the mode of action of the Pfizer and Oxford vaccines is the same, they are not identical, and it therefore makes sense that the second shot should be of the same vaccine as the first. The World Health Organization (WHO) and other medical authorities have stood by the manufacturers' recommendations and have expressed uncertainty about such hybrid dosing strategies because there are no data to indicate that such dosing would be unsafe or less effective. Again, the truth is, as yet, nobody really knows because the relevant clinical trials have not been undertaken.

Fifth, how long will immunity last? Some vaccines, such as for measles, provide protection for a lifetime, whereas others, such as for flu, require annual booster jabs. Yet no vaccine is 100% effective, so a small percentage of people are not protected after vaccination and for others the protection may wane over time. For the Covid-19 vaccines, nobody knows because their current usage has been only short-term. Nevertheless, in mid-January, a UK study, led by Public Health England, demonstrated that most people who had had a Covid-19 infection would be protected against reinfection for at least five months. Immunity due to past infection was linked to an 83% lower risk of reinfection, compared with those who had never had Covid-19. But some people do catch Covid-19 again – and they can also transmit the virus to others. Therefore, those who have had the disease, as well as those who have been vaccinated, need to continue to practise those Hands, Face, Space rules.

Sixth, is this UK change of policy bureaucratically sensible? The BMA thinks not. It has called the government's decision 'unreasonable and totally unfair.' For instance, it claims that rebooking patients for 12 weeks hence would '... cause huge logistical problems.' And it asks, would the initial consent given for the original two doses still apply?

This vaccine roll-out is riddled with problems and questions – extra time and more clinical trials are needed to overcome these challenges and to answer these uncertainties definitively.

### **Other life-saving treatments**

Many say that our only way to beat this pandemic is by mass vaccination. That is not strictly true. Even post-vaccinated people may spread the disease, especially in the early days after their primer. So frequent hand washing (for 20 seconds?), isolation (staying at home) and social distancing (keeping 2 metres apart) still perform keynote functions. After all, if you avoid all human contact, you will avoid Covid-19. In addition, the disease will probably never be entirely 'beaten' – it will likely persist somewhere in the world for ages, maybe forever.

While vaccination remains the primary strategy, such is the seriousness of the Covid-19 pandemic that several non-antiviral agents are being studied for their potential to defeat the virus. Whereas some recommend a wild tactic of 'try anything', the UK's RECOVERY trial (Randomised Evaluation of COVid-19 thERpaY), at the University of Oxford, has taken a more measured approach by examining a limited number of non-vaccine products that have shown early promise. These include tocilizumab, sarilumab, dexamethasone, convalescent plasma, colchicine, Regeneron's antibody cocktail and aspirin.

For example, tocilizumab and sarilumab are commonly-used arthritis medications. In early January, they were reported to be effective in reducing the time that critically-ill Covid-19 patients need to spend in intensive care units by up to 10 days. And these anti-inflammatory drugs were shown to cut the death rate by about 25%. Supplies of these relatively-cheap medicines are already available across the UK and it was believed that their wider use could save hundreds of lives. Spoiler alert! A January report of a trial conducted in Brazil concluded, 'In this trial including patients admitted to hospital with severe or critical covid-19, the use of tocilizumab plus standard care was not superior to standard care alone in improving patients' clinical status at 15 days, and might have increased mortality.' Yet there are other therapeutic medicines, like remdesivir, which have ostensibly been shown to shorten the time of recovery for Covid-19 patients. Similarly, dexamethasone is reported to decrease mortality and shorten the time to recuperate. It is clear that more trials, more data are needed.

And there is 'convalescent plasma'. Plasma from people recovering from infection, particularly after severe Covid-19 illness, may contain high levels of coronavirus antibodies – these may confer passive immunity to recipients. However, though its simplicity to treat Covid-19 patients is attractive, definitive evidence of its efficacy has been elusive. Another spoiler alert! In mid-January, the RECOVERY team announced that in a trial with 10,400 participants, convalescent plasma did not reduce deaths among hospital patients and so that line of investigation has now been closed.

Interferon beta is another possible candidate. Could it help stop Covid-19 patients from developing severe illness? A trial at Hull Royal Infirmary involved inhaling interferon beta to stimulate the patient's immune system. Preliminary findings suggest that the treatment decreased the probability of developing severe Covid-19, the sort that would require hospital ventilation, by almost 80%.

Could stem cells help treat severe Covid-19 patients? According to a small study from the University of Miami, umbilical cord mesenchymal stem cells (UC-MSCs) may dampen a hyperactive immune response, the so-called 'cytokine storm', which is a frequent complication of severe Covid-19. This double-blind trial provided evidence of significantly improved patient survival – at one month it was 91% in the stem-cell treated group versus 42% in the control group – and reduced recovery times. Such results warrant a larger study.

And there is a mechanical treatment now being trialled for the most seriously-ill Covid-19 patients, whose lung function has not responded to ventilation. It is a technique called ECMO (extracorporeal membrane oxygenation). The ECMO procedure uses an artificial membrane to oxygenate the patient's blood. This in turn allows the patient's lungs to rest and recover. As yet, only six NHS centres in the UK offer this treatment.

Finally, let no-one dismiss tweaking the mundane. What about extending the current social distancing measure from 2 to 3 metres? And what's happened to that erstwhile advice from the government to 'stay alert' (whatever that really meant), to wash your hands not 'regularly', but frequently (Christmas comes 'regularly' namely, once a year) and to sneeze, if necessary, into your elbow? And 'to act as if you have the virus'. Such simple strategies can work well and save lives.

### **Covid-19 variants**

The pandemic refrain of early 2021 is 'viruses mutate'. And this Covid-19 virus has already done so. This has been achieved maybe by naturally-occurring genetic errors as it reproduces itself, or maybe by seeking to escape anti-viral drugs, or patients' immune systems. Such mutations may be of no medical consequence, or, alarmingly, they may display resistance to coronavirus vaccines, or increase transmissibility (is that a real word?) among a population, or overcome natural immunity and create a spate of reinfections. Scientists are scrambling for answers – those previously lacklustre disciplines of genomic surveillance and genomic epidemiology have truly come of age.

A little variant history. It was at the end of December 2019 that Chinese health authorities reported investigating 27 cases of viral pneumonia in central Hubei province. Unbeknown at the time, this was the beginning of the global coronavirus pandemic. First reports suggested that the Covid-19 virus, known officially as SARS-CoV-2, originated in a so-called 'wet market' in Wuhan, which sold fish and other live animals for human consumption. It was there that many suggest the virus made the lethal leap from animals to humans, and thereafter from humans to humans. Others believe that pangolins were the source of the virus, or that it had been circulating undetected in Chinese bats for decades. Some even deny it started in China, pointing instead to Italy or Spain. In mid-January, a 10-member team of World Health Organization (WHO) specialists arrived in Wuhan to investigate the viral source. Their conclusion is awaited. Whatever its origin, the original Covid-19 virus spread rapidly and widely – within days and globally. Then it mutated. In April 2020, researchers in Sweden found a novel mutant Covid-19 virus with two genetic changes in its spike protein that seemed to make it roughly twice as infectious as the original. And then in June 2020, Danish authorities reported an extensive spread of this Covid-19 variant on mink farms in Denmark. By 5 November, the Danish public health authorities confirmed that this mink-associated variant had infected 12 human patients. This led to the deliberate culling of the entire Danish farmed mink population.

Wait. Here is an exasperating conundrum – how are variants of the SARS-CoV-2 virus named? Currently, confusion reigns and no nomenclature is universally accepted. For example, in late 2020, when a fast-spreading variant was identified in the UK, Public Health England initially used a date-based system, and called it Variant Under Investigation 202012/01 (or VUI 202012/01 for short). Then after a risk assessment,

which showed it to be dangerous, it was dubbed Variant of Concern 202012/01 (or VOC 202012/01). Yet there is an alternative naming scheme based on the viruses' developmental or lineage features, so VOC 202012/01 becomes B.1.1.7, whereas yet another scheme, based on the biochemical changes in the mutant, calls it 20I/501Y.V1. To add to the labelling confusion the terms, variant, lineage and strain are often ill-defined and ambiguously applied.

It is reckoned that thousands of Covid-19 variants exist, most are seemingly harmless, but there have been three of particular concern. The first, originating in England, was detected during September 2020 and was labelled as 20I/501Y.V1 (formerly 20B/501Y.V1), or B.1.1.7 lineage. It carries 8 genetic changes that affect the structure of the spike protein. For the biochemically-minded, this variant has a mutation in the receptor binding domain (RBD) of the spike protein at position 501, where the amino acid asparagine (N) has been replaced by tyrosine (Y). The shorthand for this mutation is therefore N501Y. That's probably enough biochemistry! It is this variant that is believed to have been behind the surge in Covid-19 cases in South East England and London during early December. It has now spread throughout much of the UK and the world.

It was estimated that the B.1.1.7 variant might be as much as 70% more infectious. This figure prompted the UK government to institute a third lockdown on 5 January. The task is now to determine what causes this increased transmissibility. Does, for example, the mutation allow the virus to bind to lung cells more strongly and enter cells more rapidly, thus making infection easier? At the same time, there was thought to be no evidence that this new variant made the infection more severe or more deadly. However, on 22 January, as more data, albeit tentative, became available, it was announced that there is a 'realistic possibility' that the new variant actually is more deadly. Be that as it may, the mere existence of increased transmissibility equals more infected people, equals more hospital admissions, equals more deaths.

The second variant in question emerged during a fast-growing Covid-19 epidemic in South Africa in early October and is known as 20C/501Y.V2, or B.1.351 lineage. It carries 9 such genetic changes which cause the E484K and N501Y mutations. Research has shown that E484K could be 'associated with escape from neutralising antibodies' – meaning it may be able to evade parts of the body's natural defence memory that bestows immunity. This could be bad news in terms of vaccination efficacy.

In mid-January, the discovery of a third dangerous variant was announced. It was initially detected in four people – a man, a woman and two children – who travelled from Brazil's Amazonas state to Tokyo on 2 January. It shares structural similarities with the highly-infectious UK and South African variants, but little is yet known about its disease properties or global spread. Japan's National Institute of Infectious Diseases (NIID) has reported that the new variant belongs to the B.1.1.248 or P.1 lineage of the coronavirus and has 12 mutations, including N501Y and E484K, in its spike protein. It is thought to be the cause of soaring infections in some Brazilian regions. Hence, from 15 January, the UK government banned all flights from South America and Portugal.

The hot question: will the Big three vaccines work against these new variants? Vaccines train the immune system to attack several different parts of the virus, so even though part of the spike has mutated, the vaccines may still work. Public Health England has stated that there is currently no evidence to suggest these Covid-19 vaccines will not protect against these mutated virus variants. The manufacturer of the Pfizer-BioNTech vaccine has also declared that their product works against the N501Y mutation found in the English and Brazilian variants. However, research is ongoing to establish whether the South African variant, with its E484K mutation, will be effectively neutralised by the body's immune system. This property of so-called 'vaccine escape' is of grave concern.

These are not going to be the last mutations we hear about. Identification and blocking strategies continue apace. For example, at the end of January, came the identification of a novel Californian strain, known as Cal.20C, in up to 50% of recently-diagnosed cases in the Los Angeles area. And in the vanguard of developing innovative strategies, Moderna has recently initiated clinical trials of a new vaccine after warning that its existing vaccine was less effective in tackling the South African strain.

Other variants are already circulating undetected throughout the world. Undoubtedly some of these will need investigating because they will generate considerable uncertainties and prompt a long list of unanswered questions.

### **The UK vaccination delivery plan**

On 11 January, Matt Hancock, the UK Secretary of State for Health and Social Care, showed himself to be a man with a plan, at least for England. It consists of a four-fold strategy:

1] Supply – this is currently the rate-limiting step. The UK has so far ordered 367 million doses from seven vaccine manufacturers at a cost of about £3 billion. However, the logistics of supply and distribution have proved to be troublesome – as yet there are not enough vaccines available to be injected into willing UK arms.

2] Prioritisation – the top four priority groups, which have so far accounted for 88% of Covid-19 deaths, should be vaccinated by Monday 15 February. This cohort, of 15 million people, consists of residents in care homes for older adults, people aged 70 and over, front-line health and social care staff, and people who are clinically extremely vulnerable. And then another 17 million jabs for the next cohort by the spring, and every adult by September.

3] Places – where to get a jab. Vaccinations will occur at three types of location. Large vaccination centres – over 60 are expected to be operational by the end of January. Hospital hubs at NHS trusts – 206 will be established by the end of January. Local vaccination services, such as GP surgeries, pharmacies and roving mobile centres – around 1,200 local sites should be established by the end of January.

4] People – who will make the plan happen. More than 80,000 health professionals have now been mobilised and are ready to be deployed. These include military personnel, dentists, midwives, paramedics, trainee doctors and nurses, plus thousands of other general volunteers.

Questions arise. For instance, is this UK prioritisation plan, based on age and vulnerability, the right one? Would it also be sensible to divert doses of vaccines to geographical regions that display large clusters of Covid-19 cases? And should other exposed groups, such as school teachers and the police, be pushed up the timetable? Such arguments are rife.

### **Other Covid-19 effects**

Besides the devastation caused by the virus in terms of disease, deaths, economics, and so on, there are other serious outcomes. Of course, medicine is at ground zero for both healthcare professionals and patients. For instance, during mid-January, nearly half of intensive care and anaesthetic staff were reported to be suffering symptoms of probable post-traumatic stress disorder (PTSD), severe depression, anxiety, or problem drinking. And for Covid-19 patients, four naked statistics tell the extent of the grim story. On 26 January, it was announced that over 100,000 deaths in the UK had been caused by Covid-19. It is a forbidding milestone. In addition, there has been a total of almost 4 million UK cases reported since the start of the pandemic, with currently some 40,000 people hospitalised and 4,000 on ventilators.

Other outcomes for non-Covid-19 patients, include that by mid-January, according to Professor Neil Mortensen, president of the Royal College of Surgeons of England, the pandemic was having a 'calamitous impact ... on wait times for surgery.' At the end of November 2020, a total of 4.46 million people were waiting to start hospital treatments in England – the highest since records began. Covid-19 has caused hospitals to be full and, in some cases, overflowing.

Then there are the non-medical harms of unemployment, sub-standard schooling, anger, deprivation, social division and more. For example, Covid-19 has caused a massive backlog of 457,000 cases within the UK criminal system including 54,000 unheard Crown Court cases, which may not be resolved until 2022.

One year ago, on 31 January 2020, the first two cases of Covid-19 in the UK were confirmed in Newcastle upon Tyne. One year later, that miserably minute Covid virus has turned not only the UK, but also the entire world, upside down. And it has not finished yet. Of course, it is a cliché, but truly, our lives will never be the same again.

### **Covid-19 divides the world**

The head of the World Health Organization (WHO), Tedros Adhanom Ghebreyesus, has recently warned that the world faces a 'catastrophic moral failure' because of unequal Covid-19 vaccine policies. He cited the recent example that over 39 million vaccine doses had been administered in 49 rich states, whereas one poor nation had been given only 25 doses. More questions arise. Is it right or fair for younger, healthy people in richer nations to get vaccinated before vulnerable people in poorer states? Should rich countries buy up supplies in what has been called 'vaccine nationalism', abandoning the world's poor and serving only to prolong the pandemic? True, the UK has so far donated £548 million to the global COVAX Advance Market Commitment (AMC), the international initiative to support global equitable access to vaccines. Is that enough? Cold cash is not the same as injected vaccines. Should developed countries donate some of their massive vaccine resources to the under-developed? Why does the UK need 367 million doses for a population of just 67 million people? Are some lives more valuable than others? What does loving my neighbour actually look like? These are awkward Covid-19 related questions.

### **Who's had the jab?**

Apart from that unsuspecting global celebrity, Margaret Keenan, who else has been vaccinated against Covid-19? Well, top of the UK list have been the Queen and Prince Philip, though not before the world's press and TV cameras, but privately in Windsor Castle. Similarly, the Pope in the Vatican. Yet there is a perceived need to encourage the 'vaccine hesitant' to join the queue for the jab. So a phalanx of celebrities has appeared on our screens with their sleeves rolled up. They include Sir David Attenborough and the Archbishop of Canterbury, as well as President Joe Biden and former Vice-President Mike Pence. Then up stepped a host of UK golden-oldie stars, such as Marty Wilde, Lionel Blair, Joan Collins and Prue Leith. A new campaign, starring Black, Asian and Minority Ethnic (BAME) celebrities, has also been launched to encourage the BAME community to overcome its high vaccine hesitancy numbers. None of these was camera shy, but will they sway the hesitant?

### **On your V-day**

The start of the Covid-19 vaccine roll-out is a reason to be cheerful. Hold that thought. Cheerfulness, along with other positive personality traits and social interactions, can actually enhance the body's response to vaccinations. Writing in the 13 January edition of the New Scientist, Anna Marsland, a psychologist at the University of Pittsburgh in Pennsylvania, stated, 'There is now a large literature that shows that these sorts of psychological factors influence how people respond to vaccinations as measured by magnitude of antibody response.' So remember, as you get your jab, smile!

*John Ling*



# The Challenge to Free Speech in the UK

## Introduction

It is the 'digital equivalent of a medieval mob, looking for someone to burn'. That is how Rowan Atkinson, the star of *Blackadder* and *Mr Bean* described cancel culture in the UK. Speaking to Times Radio, Mr Atkinson also said the rise of a cancel culture, where someone is boycotted or has their support removed because they have expressed an opinion deemed to be offensive, fills him 'with fear about the future'.

It seems as if the public are in step with him. In a recent poll published by the Reclaim Party just one in eight believes people have greater freedom to speak freely than five years ago. 50% believe free speech is under threat and only 24% disagreed. 49% believe they are less free now to speak their mind than five years ago.

There is something especially sinister about the desire to completely obliterate the memory of anyone from the past who failed to hold to the 'enlightened standards' of the modern day. It is an almost relentless self-righteousness and what is missing is any robust, biblical concept of human sin, frailty and depravity. The idea that *all* have sinned is simply not part of the equation. Instead, the thinking seems to be that those in the past have sinned and we must demand penance from them, even though they are in the grave. I sometimes wonder if we are witnessing a resurgence, if it ever went away, of what C. S. Lewis called 'chronological snobbery' where we demonise the past but exaggerate standards of the present.

The real question is how has it come to this? The UK has a proud and historic tradition of respecting freedom of expression and free speech. Think of the Bill of Rights of 1689 which granted Parliament freedom of expression, which at the time was a bold move. Ever since then, allowing people the space to speak what they think has been a hallmark of British culture. But that legacy is under very serious threat. There is a genuine danger we will sleepwalk into a situation where we lose freedom of expression. Even if the Bible makes no promises about having such freedoms, we should nevertheless be concerned.

## What has led to the erosion of these rights?

Such a complex question deserves an entire dissertation as response! There are multiple, complex factors, weaving together that have led us to where we are today - the rise of social media, for example, which encourages people to share their opinions whether they are qualified or not. The constant demand for an instantaneous take on every issue is the result of social feeds. We now expect prime ministers to comment on everything, all the time. How can one person communicate the 'right' way all of the time, on all topics?

Then there are the divisive and binary referendums we have had in recent years, from the Scottish independence vote to the Brexit. These were polarising debates which encouraged people to take sides; consider the sheer levels of toxicity and polarisation caused by years of Brexit wrangling at Westminster. Add in the coronavirus crisis, where we have witnessed the state involving itself in our lives in unprecedented ways, and lockdown sceptics and their opponents have gone to war with each other.

Let us take a few moments to highlight some prominent examples of people being 'cancelled' in recent times. I have deliberately used mainly non-Christian examples to make a point. This is not something that only effects Christians and as these examples show, it is far, far broader than that.

## Prominent examples

### J. K. Rowling

In December 2019, *Harry Potter* author, J. K. Rowling, came under fire after she tweeted support for a researcher who was fired over a tweet. Maya Foster used to work for The Centre for Global Development,

an inequality think tank. In March 2019, she publicly opposed a potential update to the UK's Gender Recognition Act that would have allowed people to self-identify their gender without having undergone any medical procedures.

She took her former employer to court, contending that her consultancy agreement with the centre came to an end after she expressed her view that sex is immutable. A judge ruled that the language used by Ms Foster violated the dignity of transgender people. He said her language was 'intimidating, hostile, degrading, humiliating and offensive'.

Following this ruling, J. K. Rowling tweeted the following: 'Dress however you please. Call yourself whatever you like. Sleep with any consenting adult who'll have you. Live your best life in peace and security. But force women out of their jobs for stating that sex is real?'

Rowling was immediately accused of being a TWERF which stands for 'trans-exclusionary radical feminist'. More was to follow. In June 2020, Rowling took issue with the wording of a headline for an opinion article which read 'Opinion: Creating a more equal post-COVID-19 world for people who menstruate'. In response, Rowling said: 'People who menstruate. I am sure there used to be a word for those people... Someone help me out. Wumben? Wimpund? Woomud?'

What we saw here was Rowling crossing a line. By insisting that women are women, she exposed herself to online vitriol and abuse that was truly horrendous.

### **Charity Boss Nick Buckley, MBE**

Founder of the award-winning charity Mancunian Way, Nick Buckley was dismissed from his position as chief executive. This was after an article he posted on his LinkedIn account regarding the Black Lives Matter manifesto attracted controversy. There was even a Change.org petition for him to be removed. As a result, the trustees removed Mr Buckley from his position.

He took legal advice, and it was subsequently discovered that the trustees had failed to follow their contractual obligations in getting rid of Mr Buckley. Once this was uncovered, the trustees all stood down from their positions. Mr Buckley was then reappointed to the position as chief executive with a new board in place.

In a piece for The Critic Magazine following his experience, Mr Buckley said he wrote the article which led to his sacking because he wanted to alert the world to BLM, what they stand for and their manifesto. He even chose LinkedIn because it is a platform associated with a better standard of debate and engagement.

In Mr Buckley's case, however, expressing views about BLM and the protests and their manifesto landed him in a huge amount of trouble.

### **The 'thought police'**

Then there is the case of Harry Miller. In a tweet he questioned whether trans women are real women. That tweet was subject to complaints and the issue was handed over to Humberside Police. An officer from the force then phoned Mr Miller and, according to Miller, said even though no crime had been committed, he still had to 'check Mr Miller's thinking'.

### **Richard Lucas investigated**

Another recent example involves Richard Lucas. He is a teacher and founder of the Scottish Family Party. He was investigated by the General Teacher's Council for Scotland recently after comments he made regarding children and same-sex parents. He said in a video in 2018 that same-sex parents delivered worse outcomes for children.

Following a four-day hearing, he was allowed to stay on the register of teachers in Scotland. But he still had to defend himself before a tribunal simply for questioning whether same-sex parents are best for children. This view is clearly considered worthy of investigation.

### **Darren Grimes**

Conservative commentator Darren Grimes was last year investigated and threatened with interview under caution by the Metropolitan Police for having conducted an interview with David Starkey. During the interview, Starkey made some offensive and inflammatory comments about slavery, but it was Grimes who was investigated.

### **Julie Bindel**

An Australian publishing house issued an apology for promoting some of Julie Bindel's works, just because she, like Rowling, thinks there are only two biological sexes.

### **Seyi Omooba**

Christian actress Seyi Omooba was due to play the lead character Celie in a stage performance of the Color Purple. She was dismissed however, after a Facebook post she wrote back in 2014 was uncovered. It was shared on social media by another actor just a few days after she was announced in the cast. In the post, Omooba said she didn't think people can be born gay or that homosexuality is right. She was sacked by Leicester Theatre Trust Ltd and her contract with her agency was also terminated.

## **The therapeutic culture**

All of the examples cited above touch on very contemporary yet contentious issues. When it comes to transgender, human sexuality, homosexuality and race, are there any other subjects that cause more contention? Most, if not all of the cases above involve social media or video content. It does seem as if it is here that the free speech 'battle' is being played out. And it is not just what you say today that can get you into trouble, but anything you have said in the past can be dredged up and used against you.

Society does not seem to have as much trouble with what you think privately. But if you go public, in any way – and of course social media is very public – you make yourself an instant target. You might have thought the issue of transgender was very much still a genuine debate in society. And yet, for simply saying you believe in two biological sexes, you can end up in a huge amount of trouble. Taking an orthodox view on human sexuality, too, was the dominant line of thinking for centuries. Questioning the motives of a pressure group like Black Lives Matter is seemingly not to be tolerated.

What we are witnessing is a mutant form of liberalism. It is the consequence of rejecting facts in a therapeutic culture, where greater store is put on our autonomy and feelings. The only 'truth' is whatever modern society says it is. Anything else is beyond the pale. It is a deeply regressive mindset, and it looks set to get worse before it gets better.

## **What does UK law say?**

At the moment, under Article 10 of the Human Rights Act 1998, 'everyone has the right to freedom of expression' in the UK. The law goes on to say that this freedom 'may be subject to formalities, conditions, restrictions or penalties as are prescribed by law and are necessary in a democratic society'.

These may be 'in the interests of national security, territorial integrity or public safety, for the prevention of disorder or crime, for the protection of health or morals, for the protection of the reputation or rights of others, for preventing the disclosure of information received in confidence, for maintaining the authority and impartiality of the judiciary'.

A number of different UK laws prohibit hate speech. For example, section 4 of the Public Order Act 1986 makes it an offence for a person to use 'threatening, abusive or insulting words or behaviours that causes, or is likely to cause, another person harassment, alarm or distress'. This law also includes language that is deemed to incite 'racial and religious hatred' as well as 'hatred on the grounds of sexual orientation' and language that 'encourages terrorism'.

In recent times, there has been a growing debate over whether the UK needs more hate speech laws. For example, there has been suggestions they should be amended to include misogyny. In recent months, the Law Commission has consulted on proposed changes to hate crime laws in England. It is preparing to submit a 500-page review of existing laws and make suggestions for further changes.

If we want some idea of where we are potentially headed with all this, we need only look at Europe where you see evidence of a number of hate speech laws being passed and implemented. As you will see, it has not exactly been easy sailing.

### **Hate speech laws**

Across Europe, the last few decades have seen a huge rise in the number of hate speech laws passed by different legislators.

The examples cited above are evidence of where some in society are at. We are a nation of competing groups, each one determined that their grievances are more worthy than those of others. There is an almost total absence of grace, civility, a willingness to listen. Instead, there is anger, fear, hatred and a sickening self-righteousness. It is also splitting along generational lines with older folks tending to take a more socially conservative view, while younger folk will more naturally incline towards wholesale change and challenge to institutions.

But it is not just on social media that people are experiencing challenges to their free speech. Governments also are seeking, increasingly, to legislate in this whole area. In his book *Censored*, Paul Coleman of ADF International goes through some prominent examples in various European nations in which free speech is being challenged. He records the rise of hate speech laws and concludes that, ultimately, the same story is playing out again and again.

Once the criminal law is used to silence public debate, there is no end point, according to Coleman. Any idea the state then deems to be wrong, or misguided, is liable to be criminalised. Given the rise of a secular culture in the UK, it is no great leap to suggest this will include biblical Christianity at some point in the future.

### **Hate Crime Bill in Scotland**

There is a live example of new hate crime laws being debated within the UK at the moment.

In April 2020, the Scottish Government introduced a Hate Crime and Public Order (Scotland) Bill. It aims to repeal ancient blasphemy laws and expand the number of so called 'protected characteristics' to include race, religion and sexuality, among others. At the time of writing, MSPs are currently wrangling over adequate free speech protections.

This is often the story. A Government will introduce a hate speech bill; part of the motive is laudable. Who, after all, does not want to address violent language directed towards various groups? Words have a unique power to tear down and destroy – consider the warning of James 3, where he describes the tongue as capable of starting a forest fire.

But the moment someone tries to legislate against certain types of speech they run into an inevitable problem: Firstly, who defines what is allowed and what is not allowed? Is it possible to come up with a

legally watertight description of 'hate speech'? The Scottish Government want to criminalise *intent* to stir up hatred. Again, how can 'intent' possibly be defined? Secondly, how can free speech be properly protected? Trying to draft safeguards raises exactly the same issues of definitions, legal clarity and so on that exist in trying to define other terms in the legislation.

At the time of writing, MSPs are still debating the finer details of the bill. One area where there is every possibility of a legal challenge is the lack of a 'dwelling defence' in the law. This is a vital safeguard that protects from police investigation or prosecution for what is said in the privacy of your own home.

For some reason, however, the Scottish Government will not budge and have so far refused to include a dwelling defence in the legislation. This opens the door to criminalising something said in front of family, friends, or other guests that they find offensive.

### **A constitutional right?**

There are some who argue that we need a written constitution, like the United States to make sure the right to free speech is protected in law. So, in America, the Supreme Court has routinely struck down hate speech laws as 'unconstitutional' which in America is about as serious an insult as you can get.

By contrast, as writer Lionel Shriver put it, free speech in Europe tends to prompt an immediate, 'yes, but', response. There are those who argue that without a constitution, the UK will inevitably slide further and further down the road of hate speech and hate crime laws that will ultimately criminalise not only what is said, but also what is thought. The case mentioned earlier of Mr Miller certainly evokes this nightmarish scenario.

### **Glimmers of hope**

But there is also reason to not despair. It can certainly feel inevitable, as if there is nothing to stop the onward march of ever more speech-limiting laws. But it was not that long ago that Christians and other civil liberty campaigners came together and achieved a free speech win.

Section 5 of the Public Order Act 1986 made it illegal to use 'threatening, abusive or insulting words within the hearing or sight of a person likely to be caused harassment, alarm or distress'. An unlikely coalition of the National Secular Society and the Christian Institute spear-headed a successful campaign to remove the word insulting from this law which was ultimately successful in 2013. The law had been used to silence 'controversial views'.

The current Home Secretary, Priti Patel, has put it about that she is interested in repealing the hate crime laws passed when Tony Blair was in power. The UK Government has also created a 'free speech champion' to push back on cancel culture at universities and this coincides with David Davis bringing forward a bill to safeguard free speech on campus.

When it comes to the debate over trans rights, while the battle is becoming increasingly fierce, it is by no means over. Groups are coming together to take a stand; Stonewall even faced an internal split because of disagreements over the direction it was taking on this issue.

### **Christian response**

As Christians, we are told to make sure our conversation is always seasoned with salt and full of grace (Colossians 4:6). Yet there is a difference between *how* we say something and whether or not the state should ban certain types of speech.

In this respect, surely the lessons from countries with hate crimes offer a salutary warning. Laws intended to stop sexist language, for example, have often ended up criminalising the traditional, biblical view of sexuality.

Freedom of expression has long provided Christians in the UK with an environment to share the good news. It is surely right that we do what we can to speak up for freedom of expression for everyone in society. No, the New Testament does not hold out the promise of free speech. But it does promise that Christ, by his Spirit, will be with us. It also says when we need help, God will provide. So we can be confident and hopeful as we look to the future.

*James Mildred*

## **Redeemed for Redemption: Why and How Christians Should Respond to Modern Slavery**

Tim was orphaned at the age of 8 and left to fend for himself on the brutal streets of his city in Vietnam. At the age of 12 a 'friendly' man offered him the opportunity to escape and start a new life. He jumped at the opportunity. When the man came to pick him up in his van Tim had absolutely no idea of the horrors that lay ahead. Trafficked across land borders, often on foot, forced to sleep in exposed woodlands and abandoned buildings he was passed from one gang to another until eventually he arrived in the UK. Aged just 15, Tim was taken to an ordinary-looking house in a residential area of an English city where he was put to work as a 'gardener'.

His crop? Cannabis.

The only time he ever left the house was when his captors took him to grow cannabis in a different house. If there was a problem with his crop, he was beaten. If he tried to escape, he was tortured. He was forced to sleep in such cramped conditions that he developed debilitating neck pain that still afflicts him today.

He eventually escaped and is now free, though he still bears the literal scars. How do I know? Because, by the grace of God, Tim is my friend and my brother. I have seen the scars and the tears. Yet I have also marvelled at his resolve and rejoiced in his redemption.

Tragically, Tim's story is far too common. Indeed, it is estimated that in the world today there are more than 40 million people trapped in some form of modern slavery (according to the 2019 Global Slavery Index). That works out as roughly 1 person out every 200 suffering various forms of exploitation, including:

- **Sexual exploitation** (e.g. forced prostitution)
- **Cybersex trafficking** (forcing children to engage in online 'cybersex')
- **Forced labour** (legitimate work – e.g. nail bars – but with poor pay and conditions)
- **Criminal exploitation** (illegal work, e.g. cannabis cultivation / begging)
- **Domestic servitude** (e.g. working as an in-house servant or slave)
- **Organ harvesting** (removal of vital organs for sale on the black market)
- **County lines** (exploitation of vulnerable young people by drug gangs and traffickers)

Reading that list is appalling and unsettling. People can be unspeakably cruel! As Christians we must be in no doubt that ALL people are made in God's image, precious in his sight and therefore any such abuse is sinful and wicked. No reasonably-minded person would contest that modern day slavery is a vile industry and that action should be taken to bring perpetrators to justice and that compassionate care should be offered to those whose lives have been affected. And while it is heartening that the church is at the forefront of the global battle against modern slavery, it must also be acknowledged that there is a lot of magnificent anti-slavery work being by those who do not share our faith. So where do Christians fit in?

I want to suggest that because of the gospel of Jesus Christ we have both a compelling reason for involvement and a unique role to play.

### **Our Story**

Perhaps we should start by acknowledging that our own story is one of redemption from slavery. Of course, few of us, if any, will have suffered in the same ways as Tim, but nonetheless those who have trusted Jesus have indeed been redeemed – from sin and death:

*We ourselves were once foolish, disobedient, led astray, slaves to various passions and pleasures, passing our days in malice and envy, hated by others and hating one another. But when the goodness and loving*

*kindness of God our Saviour appeared, he saved us, not because of works done by us in righteousness, but according to his own mercy, by the washing of regeneration and renewal of the Holy Spirit, whom he poured out on us richly through Jesus Christ our Saviour, so that being justified by his grace we might become heirs according to the hope of eternal life (Titus 3:3-7).*

*So you are no longer a slave, but a son, and if a son, then an heir through God (Galatians 4:7).*

*Fear not, for I have redeemed you;  
I have called you by name, you are mine (Isaiah 43:1).*

These verses (and many like them) resonate deeply with me because they tell my story. Before Christ I was a slave to pretty much every lust, impulse and sinful desire you could imagine, but by the power of the gospel Jesus has literally set me free – spiritually, mentally, emotionally, eternally. My life is now one of glorious freedom and I wholeheartedly sing from the same hymn sheet as William Cowper:

*Redeeming love has been my theme,  
And shall be til I die!*<sup>31</sup>

## Our Response

So as those who have ransomed, healed, restored and forgiven by Jesus, what bearing should our beautiful redemption have on our response to modern slavery? Let's dive into the Bible to find out.

A great place to start would be the story of God's redemption of Israel from slavery in Egypt. Through a series of terrible plagues and supernatural signs, culminating with the sacrifice of the Passover lamb, God spectacularly led his people to freedom and ultimately to a new home in the land he had promised. This wonderful redemption story has been spoken about, sung about and celebrated throughout Jewish history even to the present day. Yet it is particularly fascinating to see how much of the worship, teaching and instruction in the Old Testament scriptures were rooted in this story of redemption. Perhaps the introduction to the Ten Commandments is most notable:

*I am the LORD your God, who brought you out of the land of Egypt, out of the house of slavery. You shall have no other gods before me... (Deuteronomy 5:6-7).*

God could have simply laid down the Law and told his people, this is what is required. But he didn't; he reminded his people that they had been set free from slavery *for* their obedience, not *by* their obedience. In other words, they were saved *by* grace *for* good works – just like us (Ephesians 2:8-10). Salvation precedes ministry and the gospel both demands and enables action. This is crucial in understanding the role that our redemption plays in responding to modern slavery, both as our motive and as our model. As Tim Keller says:

*The only true and enduring motivation for the ministry of mercy is an experience and a grasp of the grace of God in the gospel.*<sup>32</sup>

If God wants us to engage with the injustice of modern slavery then we *must* engage with it – not because we *have to* but because we *get to*. In other words, if the Scriptures command us to get involved then we surely must. So what does the Bible have to say?

Here are a few verses:

*He has told you, O man, what is good;  
and what does the LORD require of you*

<sup>31</sup> *There is a fountain filled with blood*, William Cowper (1731-1800).

<sup>32</sup> Timothy Keller, *Ministries of Mercy* (London, SPCK Publishing, 2017), 44.



*but to do justice, and to love kindness,  
and to walk humbly with your God? (Micah 6:8).*

*Is not this the fast that I choose: to loose the bonds of wickedness, to undo the straps of the yoke, to let the oppressed go free, and to break every yoke? (Isaiah 58:6).*

*Woe to you, scribes and Pharisees, hypocrites! For you tithe mint and dill and cumin, and have neglected the weightier matters of the law: justice and mercy and faithfulness. These you ought to have done, without neglecting the others (Matthew 23:23).*

Doing justice, loving kindness, being merciful, setting the oppressed free... and this just from a tiny handful of verses (there are plenty more where they came from). We were not saved to merely revel in the gospel; we were saved to actively reveal the gospel wherever sin, darkness and injustice are found in our world. Or to put another way, we were redeemed for redemption. So, what should that look like for us?

### **Humble Creativity**

As mentioned above there are already many wonderful and worthy things being done by the police, the justice system and various secular charities to both bring traffickers to justice and also to rescue, care for and restore victims. This should be applauded and we should support these endeavours whenever possible and appropriate. One of the greatest traps that the church can fall into in this area is to dismiss all the good work that is being done by those who do not share our faith and to simply replicate the same kind of work but with a Christian slant. This is both arrogant and unnecessary!

There is so much work that needs to be done that there is no point reinventing the wheel in the name of Jesus. Far better to simply ask where there might be gaps in provision and to humbly go about filling those gaps. It was this approach that led to Red Community's *Embrace* – a project that equips Christians to offer the precious gift of friendship to trafficking survivors in South Wales, alongside providing small, quickly accessible financial grants for support workers to meet the urgent needs of their clients. There are no similar projects in South Wales and so this has both filled a gap and enhanced relations with local agencies.

### **Prayer Power**

Our primary weapon in the battle against modern slavery is prayer. It is essential, powerful and exclusively available to followers of Jesus, through whom we have access to the Father. Sadly, it is a weapon that we so often fail to wield. Prayerlessness essentially reveals two things: Firstly, that we believe we can do this without God's help. Secondly, that we doubt God's desire and/or power to act justly. Any attempt on our part to push back the forces of darkness, pursue justice and bring hope that is not birthed in and dependent on prayer will be fleshly at best and will ultimately prove futile. Jesus, when encouraging his disciples to pray without giving up, told them a parable (Luke 18:1-8) about a widow who refused to stop knocking at a judge's door until she received the justice she desperately craved. We need to be praying like justice-hungry widows today!

### **Compelling Community**

When I met Tim he had no friends in the city – and yet in our church he found a loving, accepting and supportive community. Indeed, when ruling on Tim's asylum claim the judge noted that:

*...he rightly views the church he attends as his family. This is the only family that he has or anything approximating to a family.*

The church has many faults and failings, but when she functions as she should she is a refuge for the broken, a family for the lonely and a stunning apologetic for the gospel.

## The Hope of Jesus

Over the last ten years I have heard some of the most harrowing stories of suffering and abuse. I have despaired at the brokenness and depravity of this world and shed many tears. Imagine how much more devastating it is for those whom these stories are lived realities! And yet the gospel does not permit us as Christians to despair without hope. Indeed, the good news of the Kingdom is that this world will not remain in darkness and bondage forever. The King will return and he will make all things new and those who have trusted him will know total healing, relentless joy, eternal security, glorious wholeness and all bitter tears will be fully and finally wiped away by the Lamb who was slain for our redemption. This is the ultimate happy ending and only the people of God can hold out this hope. Therefore, it is imperative that the gospel remains the motive behind our ministry, the model for our ministry and the pulsating message of our ministry.

We were redeemed for redemption, so let's fight for the trafficked, exploited and enslaved with faith and ferocity!

*Dai Hankey*

For more information check out:

International Justice Mission ([www.ijmuk.org](http://www.ijmuk.org))

Red Community ([www.redcommunity.co.uk](http://www.redcommunity.co.uk))

Manumit Coffee ([www.manumitcoffee.co.uk](http://www.manumitcoffee.co.uk))

## Still Gambling with our Future

Every generation remembers their football team's kit from their childhood – was the Newcastle United you remember sponsored by Northern Rock? Virgin? NTL? For children these days, however, the team they watch weekly is emblazoned with 'Fun88', a betting company. And the chances are the team they are playing against is also sponsored by a gambling firm. Over half of the teams in the top two tiers of English football have gambling sponsors on their kit.<sup>33</sup> Columnist Owen Jones reported that a four-year-old boy was so influenced by this phenomenon that he named his teddy bear 'Betway' – the shirt sponsor for West Ham.<sup>34</sup>

It is estimated that today around 55,000 children are addicted to gambling, and over two million families are impacted by problem gambling.<sup>35</sup> And the industry has not just blighted the 'beautiful game'; the Internet, mobile gambling, and aggressive marketing strategies tailored towards young people on social media have transformed the gambling landscape for a generation.

The recent lockdown regimes have highlighted many of the harms caused by the gambling industry. Many cases have come to light of vulnerable people being groomed to gamble by 'VIP' schemes, the COVID measures creating 'a perfect storm for relapse'.<sup>36</sup> Professional athletes have spoken out in the media about their battles with gambling addiction. Regulators have seen ad after ad reported for encouraging young people to gamble, and the ties between bookmakers and professional sports have come under fresh scrutiny.

Thankfully, there has been a groundswell of demand for change. Voices from both the left and right have raised concerns, with a cross-party alliance of MPs consistently calling for meaningful reform. In 2019 the maximum stake for addictive Fixed Odds Betting Terminals was successfully reduced from £100 to £2, targeting one of the most addictive gambling entry points. Banks agreed to prevent credit card gambling, and more charities have stepped up to help people manage their money responsibly. Public opinion (regarded by Reformed theologians as a manifestation of God's common grace)<sup>37</sup> has shifted, and it seems real change will be made.

In December, the Government commissioned a review to update the 2005 Gambling Act to 'ensure we are tackling problem gambling in all its forms to protect children and vulnerable people'. Culture Secretary Oliver Dowden called the current Act 'an analogue law in a digital age'.<sup>38</sup> Whilst we can rejoice that meaningful reform is on the table, the flaws in the Act don't just boil down to being 'outdated'. Rather, the 2005 Act was problematic from the start.

In 2005 The Christian Institute published 'Gambling with our future', a booklet warning of the dangers of the Blair Government's radical gambling proposals.<sup>39</sup> We pointed out the hollow messaging around the then Bill, that gambling was 'just a bit of harmless fun'. In reality, the driving force behind liberalising the law was *money* – money for the gambling industry, which had been lobbying hard for deregulation and making substantial donations to political parties,<sup>40</sup> but also money for the Government, who even admitted that the lure of vast tax revenues was a factor.<sup>41</sup>

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<sup>33</sup> <https://www.bbc.co.uk/sport/football/51377202>

<sup>34</sup> <https://www.christian.org.uk/news/columnist-gambling-adverts-should-be-kicked-out-of-football/>

<sup>35</sup> <https://www.dailymail.co.uk/news/article-8481115/A-gambling-suicide-day-Shocking-report-finds-2m-families-blighted-problem-gambling.html>

<sup>36</sup> <https://www.christian.org.uk/news/gambling-addict-lockdown-is-the-perfect-storm-for-relapse/>

<sup>37</sup> Martyn Lloyd-Jones, "Creation and Common Grace" in *Great Doctrines of the Bible: God the Holy Spirit* (Wheaton, IL: Crossway, 2003), 2:24–28.

<sup>38</sup> <https://www.christian.org.uk/news/govt-launches-wide-ranging-review-of-gambling-law/>

<sup>39</sup> <https://www.christian.org.uk/wp-content/uploads/gambling-with-our-future.pdf>

<sup>40</sup> The Guardian, 10 November 2004

<sup>41</sup> House of Lords, House of Commons Joint Committee on the Draft Gambling Bill, Session 2003-04, HL Paper 63-II, HC 139-II, vol. II, Ev. 351, para. 9; The Guardian, 20 October 2004; Government Response to the First Report of the Joint Committee on the Draft Gambling Bill; Session 2003-2004, Department for Culture, Media and Sport, June 2004, page 31

The Institute wasn't alone in sounding the alarm, with various Parliamentary committees and reports repeatedly warning that problem gambling would inevitably rise. One committee warned: 'Almost all of the evidence we have received points to the fact that this legislation would increase the number of people in the United Kingdom with a gambling problem.'<sup>42</sup> None of what has transpired since should come as a surprise.

The flagship provision of the 2005 Act, and one of the chief concerns of the Institute, allowed huge 'Las Vegas-style' casino resorts to be built in Britain. Mercifully, this was not to be, with Prime Minister Gordon Brown refusing to authorise any such project in 2007.<sup>43</sup> However, the most damaging aspect of the Act was not building super-casinos, but the digital revolution, which placed a betting table and bookmaker in everyone's back pocket. The Institute remarked in 2005 that 'remote gambling represents a quantum leap in accessibility', and just as technology has been the avenue for pornography to be pushed on ever-younger children, gambling too has been made aggressively accessible.

In 2005 we were open to being accused of being spoilsports afraid of 'progress', but we must see from this how vital it is that as Christians we ignore the insults and continue to speak out for what is right to protect our neighbours and our children. We can give thanks that the review of the Gambling Act looks promising and that public opinion has moved against a lucrative industry. Whatever opportunities present themselves to help secure reform, we must be ready to respond.

*Toby Lucas*

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<sup>42</sup> House of Lords, House of Commons Joint Committee on the Draft Gambling Bill, Session 2003-04, HL Paper 63-I, HC 139-I, vol. I, page 7

<sup>43</sup> <https://www.telegraph.co.uk/news/uknews/1557170/Gordon-Brown-scraps-super-casinos.html>

## The Impact of Lockdown on Carers

The problems of older people and the difficulties and trials in care homes have featured prominently in reports on the impact of Covid-19. The effect of the pandemic, and especially lockdown, on carers has, on the other hand, been almost forgotten. But to get a fair picture of what has happened in the world of care we need to consider both aspects.

Carers are those people who give the larger part of their time and energy to looking after people who cannot for a variety of reasons fully look after themselves. For some it is a full-time occupation. They may be related to the person with care needs, or they may be paid to undertake these tasks, but they are all vital to the well-being of people who know limitations due to age, mental condition, disability or intellectual and physical limitations.

The largest group of carers are those who look after someone living in their own home and who do not receive any financial payment for what they do. They are sometimes referred to as care-givers. It is estimated that there are over 6 million people who fit into this category. There is a second group of carers who also go into people's own homes, but they are paid workers. They are sometimes referred to as social-care workers. They usually do very specific tasks in the homes they visit and for most of them they only stay for a fairly short time. The third group (also referred to as social-care workers) are the staff employed in Care and Nursing Homes, and other residential settings, who are not trained nurses. They are involved in providing all the personal care for the people who live in the Home, now referred to as 'family members'. The pandemic and lockdown has had very different impacts on each of these groups of people.

### Care-givers – a stressful situation

The majority of care-givers are either the spouse of the person cared for or a child (often a daughter) or a near relative. For most of these people their caring duties cover 24 hours every day. They watch for and seek to ameliorate the effects of the virus on the person they care for, which produces pressure and stress in them. Then there are also the personal effects of lockdown that the care-giver experiences in terms of fear, anxiety, loneliness and emotional stress. They may, of course, create a care-bubble with a relative or friend who acts as a support to both the care-giver and the person cared for.

A study by the University of Michigan<sup>44</sup> showed that symptoms of depression increase in care-givers of people with dementia, and other family members, over time. The study found a 27% increase within two years of the initial diagnosis and 33% over the next two years. Previous research had found that such depressive symptoms were associated with a 30% increased risk of falling. Similar impacts are seen in care-givers of people with disabilities and other cognitive and intellectual problems. All care-givers go through a process of grieving as they see their loved-one deteriorating. These normal aspects of care-giving are exacerbated by lockdown and the other implications of Coronavirus, as I will attempt to show.

To examine in a little more detail the impact of lockdown I will recount a case study of a couple known to me. This case is typical of the experience of many care-givers (if you can have typical cases in this highly individualised area of life). Similar stories could be repeated from personal experience of other situations involving various health issues. In the couple we are considering the wife is the care-giver, and the husband has dementia. They had spent nearly fifty years in full-time Christian service before retiring and becoming very active in their local church. Before the pandemic struck they were doing reasonably well and needed little support, and what they needed was more than given by the family (who lived nearby), and a caring and supportive church community. His dementia was easily managed, and it mainly showed itself in a very poor memory, inability to do some tasks in the house, especially handling their finances, and a tendency in conversation to repeat himself.

Lockdown brought about a loss of social interaction which the family and the church had previously provided. This had a corrosive effect on his mental condition. There was a period of returning to a degree

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<sup>44</sup> See <http://www.pilgrimsfriend.org.uk/blog/new-study-shows-depression-increases-over-time-in-dementia-caregivers>

of normality, which was not as great a benefit as it would be for most people. He struggled with the changes because he could not follow the reasoning for the release of the lockdown – his mind had fixated on a war scenario, and you do not relax your precautions until the enemy is defeated. The changes in arrangements worried him and left him feeling bemused and anxious. She recognised his anxieties and tried to comfort him but could not help him to accept things. This left her feeling worried about him and a little disappointed in herself.

The further lockdowns began to produce quite dramatic effects: His slow decline which had become noticeable during the first lockdown, now seemed to speed up. Most noticeably, he virtually stopped speaking, only rarely doing so to ask for things. A general apathy which he had always shown since his diagnosis now became very marked. She had to work hard to get him motivated to do anything, including going to meals and keeping himself clean and tidy. (Before the onset of dementia, he had always been very smart and was often described as dapper).

His confusion of mind also increased very rapidly. As lockdown began again he started to struggle with dressing himself, unable to think what he should do with his various items of clothing; for instance, he would try to put a jacket on his legs. As his self-confidence diminished his need for help increased considerably. She ended up doing almost everything for him. Her daughter who was in a care-bubble with them did what she could to support but then her son developed mild Covid symptoms and so for a couple of weeks she could not visit.

The effects of this decline in his condition and all the extra work his wife had to do has had serious repercussions for her. From being a very calm and measured person, she has become very agitated and anxious. Her sleep patterns have become very disturbed and she is also suffering with back and shoulder pain due to the physical demands. She is starting to show early signs of dementia herself.

Such outcomes are not uncommon for dementia care-givers. But what has happened has taken place in an unusually short time. She is now worried that soon she will be unable to care for him anymore; her daughter has a youngish family and her husband has a very demanding job. She would not be able to care for both her parents. It seems likely that before long they both may have to go into care.

Whilst this is quite a dramatic story it really is not that unusual. The social isolation and limitations created by lockdown can have such effects on care-givers to a lesser or greater extent depending on the individual, their personalities, the condition of the one being cared for, and so on. Thankfully, many care-givers and those for whom they care are able to cope well with lockdown, but for some the impacts may be serious.

This poses a challenge to churches that they need to be addressing now, or at least thinking about how they might respond should such challenges arise in their congregation. Each situation is different, and each church has different resources and capacities. It is not therefore practical to suggest what churches ought to do, as there is no one solution that will fit every situation. The issue is that churches should be aware of the possibilities of these problems and they should seek to be ready to act if it proves necessary.

### **Social-care workers – a study in frustration**

Social-care workers face an altogether different situation. Rather than being with the person needing care for long periods of time, they have a number of people to care for, whom they will visit for quite short periods. When with the person being cared for the worker will have prescribed duties, and limited opportunities to engage in personal interaction. Nonetheless, many of them build strong and valuable relationships with those they visit. Many they visit live by themselves, often having significant handicaps and limitations, but their greatest problem is loneliness. The Coronavirus has magnified these problems and lockdown has intensified loneliness.

For social-care workers the problems they encounter in lockdown relate to extra limitations on relationships (e.g. PPE and time taken up with taking essential precautions), fear and anxiety in those being visited, how to respond to the desire to simply talk, and their own anxieties and fears about the virus. They

travel from house to house; the people they visit vary in their hygiene and safe behaviour. So more time has to be taken in seeking to keep themselves safe, which may mean less time working with and relating to those they are visiting. That can be very frustrating.

All the precautions, and the PPE in particular, create a different atmosphere between themselves and the ones being cared for. That can lead to people expressing unhappiness about the visit. Many of these workers are very highly motivated and the frustrations become very painful. Those they visit need considerable help and it is not possible to do everything that may be needed. Again, that is the situation under normal circumstance, but under Covid it is made worse. The levels of fear and anxiety amongst those they visit is high, and understandably so, and there is little the workers can do to alleviate this. I have heard of workers who agree with some whom they visit to leave certain tasks undone so that they can take time to talk. That is an unsatisfactory though understandable decision, and creates further frustration.

Of course, the decline of people due to the impact of coronavirus, happens just as it does with those who live with a spouse or family member. Being unable to do anything to address these developments is most difficult to handle. The length of the visit is partly determined by the number of other people there are to be visited. Often the worker will just work longer hours, for which they would not be paid, to try to give some encouragement and support to lonely and frightened people.

Personal fears are often just subdued so that the caring process can continue. But the fears still exist. If someone being visited is taken ill a whole range of emotions are stirred; if someone dies from Covid feelings of regret, guilt, anger and deep sorrow may follow. The levels of support and counselling from the organisations that employ them vary widely. Christian workers may find help from their church. But if services have been suspended, and the rest of life is busy, getting help can become more difficult. There is then a tendency to just battle on and try to ignore the feelings of sorrow and frustration, and the longing to do more. But that can be emotionally damaging. Part of the reason for writing this article is to alert pastors and church leaders to the needs of these folks, whose work is often devalued and misunderstood.

### **Care home staff – stretched to the limit?**

A great deal has rightly been said about the pressures, demands and difficulties facing hospital-based staff. The pandemic has taken a huge toll on those valiant health service workers. Not so much attention has been given to those who work in care homes across the country. That is not surprising because they tend not to be engaged on the frontline of the battle against Covid. But they are very deeply involved in caring for people badly affected by the virus. The sad fact is that they are used to being overlooked or undervalued; generally within our society and in normal times these people are not highly appreciated, nor are they well paid. Neither were they regarded as essential workers, and that particular issue was a problem at the beginning of the pandemic. It is, however, generally accepted that working in a care home is hard and demanding. This is one of the reasons that recruiting staff is difficult, and there is a huge number of unfilled vacancies. Having said this, it is important to qualify the negatives by saying that this area of work can be amongst the most enriching and satisfying.

The effects of the lockdown on those who work in care homes can be very complex and distressing. At the heart of quality caring is the building of relationships and commitment to those cared for. Many care homes base their structures on these goals. So individual workers, sometimes referred as colleagues, relate to specific 'family members', that is residents, and those relationships enable a 'family atmosphere' to be developed. In doing so the home will rely on a variety of people – relatives who visit regularly, volunteers who visit and chat or provide activities to keep family members stimulated, and local groups and schools who provide forms of entertainment. Other health and social work professionals usually visit to bring encouragement and information for the staff; Christian churches provide services and acts of worship. All this stops under lockdown, bringing detrimental effects.

The loss of visits, in particular, has a seriously distressing effect on residents. It is at this point that the staff involved in providing personal care face a great challenge. They cannot replace family and friends, but they can provide friendship and comfort. It is amazing to see how they do this. Nonetheless, there is an

inevitable decline in the mind-set and well-being of many residents. It is unfortunate that the media coverage of this issue has failed to acknowledge the inevitability of this loss, and the hard work done by staff to compensate for it.

Precautions and procedures such as PPE and social distancing all affect the atmosphere of the home. The decline in some of the residents' physical and mental health is exacerbated. Again, we need to note the extra effort staff make to compensate for these losses.

In addition to these changes there is also the impact of the virus itself on people. Residents are taken ill and some, tragically, die. The reality of the huge numbers involved has been well publicised. Colleagues also become ill with the virus and are unable to work, leaving the home short-staffed.

So what about the effect on carers of these challenging changes within the care home?

- Increased workload to compensate for the losses we have noted.
- Increased workload due to staff absences and the problems of temporary staff.
- Distress and concern over the deterioration in residents' wellbeing.
- Coping with residents' fear as they see media reports about the pandemic.
- Their grief when residents die because a close relationship has been broken.
- Comforting distressed colleagues because of the death of residents.
- Comforting distressed residents who have lost friends to the virus. Remember, bringing in outside counsellors is not possible and Zoom is not a good medium for comforting.
- Sometimes if there are several deaths then grief is multiplied.
- Regrets when they reflect on their own response to specific situations. Can I cope if things go on unchanged for too long?
- Fears and anxiety about the future, both personally and in respect of work.
- Personal concerns and anxieties due to the everyday situations these staff face in their lives outside the home.

It is appropriate to mention that the increase in deaths within care homes creates vacancies which cannot quickly and easily be filled. There are also extra costs with purchasing protective clothing, bringing in temporary staff because of staff vacancies, and other items that need to be provided. Thus, for some care homes, and especially those run by charities who cannot easily fund-raise at the moment, this all poses major financing problems as their financial viability is threatened:

*Care UK, which has more than 8,000 beds across 121 care homes, said the virus has had a "significant" impact on profitability and cash flow, amid higher death rates, and the cost of buying protective clothing for staff and patients.<sup>45</sup>*

This substantial list of impacts gives a picture of the challenges and difficulties that carers in care homes have to cope with as they seek to fulfil their caring duties. For Christian people working in this area there are many biblical truths to hold onto and to be strengthened by. Again, the fact has to be faced that many churches do not recognise these things and so do not offer the support that they might wish to, were they better informed. This article therefore seeks to raise the issues, with the prayer that pastors and church leaders will prepare themselves to respond to these matters should they affect someone in their congregation.

*Roger Hitchings*

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<sup>45</sup> <https://www.telegraph.co.uk/business/2020/10/10/care-uk-fearful-future-may-hold/>



## Book review: Apocalypse Never

***Apocalypse Never: Why Environmental Alarmism Hurts Us All***

**Michael Shellenberger**

**Harper, 432pp, 2020, £16.31 Hardback (Amazon)**

### **Environmental alarmism**

Environmental alarmism is certainly prevalent in our culture. It is often the focus of media headlines and documentaries, and increasingly taught to our children in schools. Extinction Rebellion disrupted the transport system of London in October 2019, believing their actions to be justified by the climate crisis. [Reuters reported](#) last year that one in five UK children report nightmares about climate change. Environmental celebrity Greta Thunberg thunders, 'I want you to panic'. How should we, as Christians, respond?

### **Caring for creation matters**

As Christians, we agree with environmentalists that we should care for creation. Their desire that we respect nature and avoid pollution and exploitation is correct. The view of some that Christian theology is to blame for environmental mismanagement is misplaced, however. I wrote an [essay](#) on this for my MA on theology, whilst working for a sustainable investment firm: Noah was the first environmentalist; he was mandated to preserve biodiversity. We, as humans in the image of God, are stewards of God's creation, with a mandate to look after it. The question is not whether we should care for the environment – we should. The question is how should we respond to environmental alarmists?

### **A provocative book**

Michael Shellenberger is an environmental activist and journalist. He is an invited expert reviewer of the next Assessment Report for the Intergovernmental Panel on Climate Change (IPCC). He used to buy into the alarmist environmental narrative, but now he rejects it. This best-selling book is his attempt to correct that narrative.

The book is certainly provocative. Chapters have hard-hitting titles and start with well-known headlines from the alarmist narratives. He then proceeds to take this narrative apart point by point with well-documented scientific evidence.

### **It is not the end of the world**

The first chapter, for example, is titled: 'It's not the end of the world'. He starts by repeating mainstream media headlines claiming that we have only a decade to save the world, that climate change is irreversible, that wildfires in California and Australia are caused by climate change, that civilization will be wiped out, etc. Anyone reading this will be familiar with such claims.

Shellenberger then delves into IPCC reports, and quotes from IPCC scientists and other experts. As may be expected, scientists do not make such apocalyptic claims, and are frequently disdainful of those that do. None of the IPCC reports contain a single apocalyptic scenario. There has been a 92% decline in the decadal death toll from natural disasters since its peak in the 1920s. Both rich and poor societies have become far less vulnerable to extreme weather events in recent decades. The slow pace of sea level rise will allow ample time for adaptation. The Netherlands does very well with one-third of its landmass below sea level, and some areas a full seven meters below sea level. Scientists see no relation between past climates and the amount of area burned in any given year. Humans today produce enough food for ten billion people, a 25% surplus, and experts believe we can increase this by 30% with technological improvements. Climate change policies are more likely to harm food production than climate change itself. Meanwhile population growth peaked decades ago.

## **No need to panic**

The message from chapter one is that, contrary to Greta Thunberg, climate change is not a reason to panic. There is no scientific basis for the alarmist headlines promoted by Extinction Rebellion of millions, or even billions of deaths caused by climate change. Carbon emissions have been declining in developed nations for more than a decade. Global temperatures look more likely to peak at two or three degrees centigrade over pre-industrial levels, than four degrees. But this cannot be credited to climate alarmism. Total emissions from the largest European countries peaked in the 1970s, mainly due to the switch from coal to natural gas and nuclear.

Other chapters follow a similar script. Representative titles are: 'The Earth's Lungs Aren't Burning, 'The Sixth Extinction is Cancelled', 'Have Your Steak and Eat It, Too', 'Greed Saved the Whales, not Greenpeace'. There are a lot of helpful facts and scientific points in here. His points are clear and well expressed. Sometimes I do think his perspective lacks balance, but overall I think he is on the right track: Environmental alarmism is not helping humanity or the planet.

All of this is interspersed with personal stories of people affected by environmental abuse or by misplaced environmental policies. Shellenberg is concerned for the poor. He wants them to be allowed to develop and prosper economically. This means increasing their use of energy, but Shellenberg argues that such economic development will be better for the environment in the long run, as well as for the poor themselves.

## **Nuclear energy is good**

Shellenberg is a fan of nuclear energy, and one of his chapters focusses on this. He has campaigned to save nuclear reactors around the world – for the sake of the environment. He argues that nuclear is the safest and cleanest way to make reliable electricity: 'In fact, nuclear has saved more than two million lives to date by preventing the deadly air pollution that shortens the lives of seven million people per year' (151) he writes. It is also one of the cheapest ways to make electricity. He discusses the famous nuclear disasters of Fukushima and Chernobyl, and concludes that though many people died and suffered as a result, the overall effect was not as bad as was feared – certainly not compared to c.200,000 people killed by the collapse of a hydroelectric dam in China in 1975. He makes the point that, 'The Colorado plateau is more naturally radioactive than most of Fukushima was after the accident' (169). Shellenberg says that he himself believed that nuclear plants could explode like a bomb until he was an adult. This is not true. Environmentalists should support and promote nuclear energy.

## **Malthusianism has a lot to answer for**

Shellenberg does a great job criticising Malthusianism. Malthus claimed back in 1798 that human progress was unsustainable – how wrong he was. Yet his ideas had influence, and were used to justify the poor laws, and refusing famine relief, perpetuating poverty and starving millions. Today, neo-Malthusianism has adapted into environmentalism. Instead of arguing that scarcity of food was the problem, they changed the problem. The problem became environmental destruction caused by over-abundance. Once the population growth rate clearly peaked, it became energy use instead. Sadly, these ideas have a lot to answer for.

## **Environmentalism is a religion**

Shellenberger realises that the root cause of environmental alarmism is religious:

*Environmentalism today is the dominant secular religion of the educated upper-middle-class elite in most developed and many developing nations. It provides a new story about our collective and individual purpose. It designates good guys and bad guys, heroes and villains. And it does so in the language of science which provides it with legitimacy (263).*

He is clear: Apocalyptic environmentalism ‘has replaced God with nature’, with scientists playing the role of priests. I would add, that environmentalism has its own versions of Eden, the fall, sin, repentance, redemption, transcendent moral purpose, and apocalypse. As Shellenberger writes:

*I believe that secular people are attracted to apocalyptic environmentalism because it meets some of the same psychological and spiritual needs as Judeo-Christianity and other religions (264).*

This new religion has gained popularity, as Shellenberg explains, in the spiritual vacuum left since the Enlightenment when Christian morals were discarded as subjective and Western societies were left with no basis for moral objectivity. Into this crisis of faith and purpose stepped environmentalism. Sadly, this religious environmentalism has become more apocalyptic and destructive over time, and increasingly demonises those who dare to challenge its orthodoxy.

### **An important book**

Shellenberg himself is not a Christian. He describes himself as an environmental humanist. His insights are certainly valuable for Christians and others though. The book has [terrific endorsements](#) from high profile commentators who describe it as ‘eye-opening’, ‘essential’, ‘influential’, and ‘important’. I agree. Most of the young people in your church, and many older folk too, are probably beholden to environmental alarmism. They are well-meaning, with good intentions and desires, but the underlying narrative they have accepted is false, and even anti-Christian in parts. Apocalyptic environmentalism is, at root, a rival religion with a rival god. To understand it, and how to respond to it, you will find few books better than this one.

*Tim Dieppe*

## Review: The Social Dilemma (Netflix, 2020)

### An uncomfortable observation

Toward the beginning of 2020, I remember visiting my local VUE cinema and seeing a commercial starring John Boyega entitled 'Get Lost in Great Stories'. It portrays a scene in which every person in a household is simultaneously viewing a different screen whilst going about their days; whether televisions, laptops, desktops or mobile phones. The door of the house opens and we enter another scene in the hustle and bustle of a city street, confronted with a picture of everyone walking with poor posture over their phones. A range of emojis and reactions explode over the screen reflecting all that is going on in a relentless stream of data consumption. The commercial, interpreted simply, was indicating that cinema is the best way to watch a film and 'step away from the outside world'. Nevertheless, the portrayal of everyday life disturbed me, not because it is portraying an imagined dystopia, but because in some ways such a dystopia is already here.

We have become ape-like slaves of the very tools we invented and we are seeing health and cohesion in society suffer for it. The ongoing COVID-19 crisis has made people even more dependent on technology and probably even more addicted to screens as a result of isolation; if this is not swiftly identified as a problem, many will suffer as a result. Netflix's 2020 documentary film, *The Social Dilemma* does a very good job of highlighting what is going on behind the scenes of our screens and deserves consideration in developing a healthy pastoral theology of technology.

### Technology is changing you

In 2018 I reviewed<sup>46</sup> Tony Reinke's book *12 Ways Your Phone is Changing You* for this *Bulletin*. Building a strong case based on ever-developing statistics, Reinke's book remains very apt in its conclusions. Reinke's "12 Ways", are:

- We Are Addicted to Distraction
- We Ignore Our Flesh and Blood
- We Crave Immediate Approval
- We Lose Our Literacy
- We Feed on the Produced
- We Become Like What We "Like"
- We Get Lonely
- We Get Comfortable in Secret Vices
- We Lose Meaning
- We Fear Missing Out
- We Become Harsh to One Another
- We Lose Our Place in Time

Of course, it is not our phones, tablets, or laptops *themselves* that are affecting this change. It is really about *what appears on our phones and devices* and our increasing inability to practice self-control and tear ourselves away from the constantly updated content.

*The Social Dilemma* is not a conspiracy theorist-led expose of 'Big Tech'. It features high-ranking industry executives, many of whom had leading, managing, and even founding roles in companies such as Twitter, Pinterest, Google and Facebook. Each interviewee has the same message: social media is changing not only you, it is changing society. What is more it is designed to change society – and this is having catastrophic effects.

Many interviewed in *The Social Dilemma* have left the world of Big Tech specifically due to their voiced ethical concerns went unheard. So what would lead a group of ex-Big Tech executives to join together for an expose on the trillion dollar industry of their former employers?

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<sup>46</sup> [http://www.affinity.org.uk/downloads/The%20Bulletin/issue-35/5\)-twelve-ways-your-phone-is-changing-you.pdf](http://www.affinity.org.uk/downloads/The%20Bulletin/issue-35/5)-twelve-ways-your-phone-is-changing-you.pdf)

## **Social media has the potential for good – but there is also a flip-side**

The biggest tools of the internet – think of Gmail, Whatsapp, Facebook, Twitter, Pinterest, Snapchat and Instagram – all have immense potential for good. Ready and easy communication are intrinsic to each. The ability to stay in touch with distant family and friends, to receive both good and bad news in a timely way, and to share parts of one's life with others for encouragement, edification and prayer are to be valued.

Instant information helps facilitate immediate action when necessary. For example, because of a combination of Whatsapp, Google, Airbnb, and Gmail, when a relative died in Israel, my wife and I were able to hear the news, communicate with each other (I was in another part of the city), book flights and accommodation, get to the airport and board a flight within the space of four hours, allowing us to be at the funeral taking place the next day. Because of Facebook, I was able to hear that my maternal grandmother was on her deathbed and via Google's call facility was able to speak with her one last time. Thanks to Whatsapp, I can communicate in text, audio and video form with both individuals and groups from a range of life networks scattered across the globe. I can call family and let them see and talk to my young son whom he would otherwise not know.

However, we should not be oblivious to the dangers of these tools. Interviewees for *The Social Dilemma* acknowledge that they were naive regarding the dark sides of social media. They certainly did not intend any negative consequences when setting out to design and present their products. Yet as with anything positive in this world we, the people, have managed to pervert the good and use it destructively.

### **1. Change can be subtle**

One should not be surprised that if tech can change an individual for the worse, when enough individuals are using the same tech, it can impact society negatively. Computer scientist Jaron Lainer speaks of 'the gradual, slight, imperceptible change in your own behaviour and perception that is the product'.

If only any change remained imperceptible! What may at first be slow and unobserved can quickly spiral out of control. It is clear that participants in *The Social Dilemma* have a significant sense of conscience. They are troubled by Big Tech's undeniable link to mental health issues – concerns which have grown as Big Tech has grown. They are concerned by the psychological rewiring social media can produce: narcissism, dysmorphia, and entitlement is spawned, fed, and enabled through familiar and seemingly innocuous features as basic as the 'like' button.

### **2. You are a user – and you are used**

The biggest platforms on the Internet may not have been designed to destroy individuals, much less society, they were designed to have your attention and to dominate it. Statistician Edward Tufte observes 'There are only two industries that call their customers "users": illegal drugs and software.' Tristan Harris speaks of how in working for Google on Gmail's design, they worked deliberately at making it addictive. Why? Because the more attention you give to such key sites, the more they earn.

*The Social Dilemma* likens users to lab rats. Everything we do online is watched and monitored; through tracking cookies, Big Tech's algorithms detect your mood and calculate your personality to the point of being able to accurately predict what you are interested in, what you might buy, and what you want to do.

Have you ever thought, 'That's funny, I was just thinking about that earlier' when an advertisement for a particular product or service pops up on screen? Have you ever said, 'That's odd, I was talking with someone about a potential holiday and now an advertisement for that very thing has shown up'? All of this is how social media is programmed. You are not the sole beneficiary – the platform itself is benefiting from you, whether you are conscious of it or not. Algorithms are designed to exploit human vulnerabilities and do so in a conscious way, monopolising our time, reducing our meaningful personal connections in community as we do so. This has paved the way for a world where online engagement is the priority with an entire generation that has no recollection of a world without constant online data exposure.

### 3. Trust is fractured and 'truth' is cheap

*The Social Dilemma* points to signs of dystopian levels both of trust in what should not be trusted and distrust of what should be trusted. On a personal level, social media can distort one's perception of self as well as the perception of others. The consequences are harmful and even fatal in some cases.

I first joined Facebook in 2010. This came after a university programme I took saw me make many friends with people whom I would likely never have contact with again if it weren't for this outlet. I did not bother to get a smart phone until 2013 when I had a job that required me to be easily reachable by email even when out and about. Since 2009, a year before I joined Facebook and around the time I joined Twitter, *The Social Dilemma* reports that cases of non-fatal self-harm have gone up 183% in girls between the ages of 10 and 14 and 62% in girls between 15 and 19. Cases of suicide in the latter age bracket have gone up 70%.

The illusion of connectivity and the utopian ideas of a global society created by social media are well known, but it is clear that something is seriously amiss. *The Social Dilemma* interviewees explain the harrowing statistics surrounding social media and mental health by pointing to how the technology behind social media platforms brings out the worst in society.

So we see mass chaos, outrage, instability, and growing distrust in authorities and each other abounding. What is 'fake news' and what is truth? Constantly updating news, the need to feed a 24-hour cycle of information and opinion, the fear of missing out, and the desire for status create a toxic soup of anger, hate, division, and thinking the worst of one another. Time management and personal productivity diminish. In some societies, social unrest, even civil war seem like genuine possibilities in the near future as result of divisions becoming ever more acrimonious.

#### What is the fix?

*The Social Dilemma* makes the case that social media platforms are reforming the world into their image. There are some practical pointers that *The Social Dilemma* makes that are helpful and common-sensical from an individual perspective:

- Turn off all notifications (I did this sometime ago – it is indeed liberating!)
- Uninstall time-wasting social media, news and other apps
- Be careful before you share on social media. Is it good, right and true? Is it helpful?
- Don't follow clickbait
- Don't live in an echo chamber – be acquainted with various viewpoints
- Limit kids' screen time
- Don't bring devices into the bedroom

If individuals do these things – or even come off of social media all together – improvements might be seen. And yet, the presenters of *The Social Dilemma* recognise this is a big 'if'. According to them it seems that society is totally unable to heal itself. Indeed, they are right, and this is where our pastoral application must come in.

#### 1. Realise that good things can always be perverted

To some degree, negative consequences to social media are inevitable. Yes, you can share videos and photos of your children for grandparents and distant friends to see. In the same way paedophiles will use the same tools to plan and carry out their perversion. You can share good news and seek to inspire others to love God and love your neighbour. ISIS, Boko Haram, AntiFa, and Proud Boys can use the same tools to inspire others to follow their messages of hate, division and destruction. As with sex, drugs, food and drink addiction and abuse are possible – that is a fact of the fallen world we live in. And this is why positive, meaningful, redemptive engagement that shows the right and responsible way for interaction is so important.

## **2. Consider whether or not social media is actually good for you**

There are some people for who, try as they might, find themselves unable to use social media rightly or responsibly. Each of us must ask the question: is social media actually good for me or not? The answer may result in you find other ways of meaningful engagement offline that you previously would not have thought possible!

## **3. Recognise Jesus is the only 'fix' for a broken world**

*The Social Dilemma* is right: society is incapable of healing itself. Christians should recognise and proclaim this every day! Only Christ can heal our broken world. Only he can enable us to love God and one another in the right way. This is why, for now, I think Christians can and should make appropriate and responsible use of technology to shine the light of the gospel into a dark place. Christians should set a standard of what healthy communication looks like and, when we see one another failing, should hold one another accountable.

*The Social Dilemma* asks good questions. But at the same time as presenting some important warnings and offering some practical fixes, it lacks the fundamental spiritual component that is so desperately needed. Without the Holy Spirit's transforming truth and power, all the practical tips for solving the dilemma of big tech will only serve to provide a small plaster for a gaping wound.

*Regan King*

## Book review: The Image of God, Personhood and the Embryo

### *The Image of God, Personhood and the Embryo*

Calum MacKellar

SCM Press, 270pp, 2017, £29.99 (Amazon)

#### The purpose

Genesis 1:27 is the fundamental of biblical bioethics. On that verse hangs our understanding and regard for the human embryo. The image of God and early human life have typically been treated as two disparate topics, theological or biological. In this book, Calum MacKellar seeks to connect them. He states his reason (p. vii) as, '... because a specific and detailed examination of how the image of God may be reflected in the embryo seemed to be missing from the accumulated heritage of Christian study'. He also wants to equip pastors to teach their congregations about related and discomfiting issues, such as infertility, miscarriage and abortion. That is an admirable ambition. Furthermore, he anticipates a practical response (p. x), '... if the claims being made [in this book] are correct and embryonic human lives can be considered as being made in the image of God, then the deliberate destruction of these countless embryos represents the deliberate destruction of those whom God loves very deeply'. That is a most laudable call to action.

#### The content

Part I, the opening quarter of the book, presents a brisk overview of historic and current thinking about the moral status of the embryo, the image of God and personhood.

First, concerning the moral status of the embryo, MacKellar is adamant (p. 7), '... from the restricted viewpoint of science, embryos... are only collections of cells destined to become, with time, collections of dust or ashes. This means that the worth and value of an embryo cannot be demonstrated from a scientific perspective and any moral appreciation becomes impossible. It is only because of the manner in which God, the only true source of value, chooses to consider this being that it has any worth and deserves to be recognised with moral status. This is the real challenge for modern societies as they struggle to evaluate the embryo from a secular moral perspective.'

What follows is a survey of human embryology, from the ancient views of Plato and Aristotle, those of the Church Fathers, a lengthy discussion of Exodus 21: 22-25, through to the more recent opinions of men, such as Paul Ramsey and Oliver O'Donovan. The dénouement? Historically, the Church has generally cherished human embryos and consistently opposed their deliberate destruction. The great divide of the current protection-destruction debate depends upon (p. 26), '... an essentially empirical perspective based on observation and a perspective that seeks to understand the nature of the very being of the human...'

This is big talk and one of the major benefits of MacKellar's work. Here is a conservative Christian and a former research scientist claiming that the world and its scientism have constructed a colossal bioethical mistake.

Second, though the image of God in the creation of human beings is stated explicitly only three times in the Old Testament, the implications are legion, including human attributes, such as the rational, relational and the creative. MacKellar takes the vastest view and embraces them all while admitting that the reality is unfathomably more. Moreover, after examining various topics, he settles his thesis by insisting that the image of God is present in the earliest of human embryos.

Third, personhood is a more contentious and trickier concept to grasp. Here vague notions like 'the right to life', 'the body-soul duality', 'when does human life begin?' and 'are persons and individuals synonymous?' arise and are shown to cloud the issue. MacKellar plumps for personhood appearing in the earliest embryo because, you are a soul, not you have a soul, or as Barth stated, 'man is embodied soul and besouled body'. Thus, personhood is about being, not about completing a tick box of attainments. Herein is the theological



understanding of personhood as both unitary and mysterious substance versus its biological understanding of raw material with attributes.

Part II, the remaining three-quarters of the book, is a more detailed rehearsal of the themes of Part I. The first two sub-sections on creation and the incarnation are the pre-eminent.

MacKellar tackles creation in general and creation of mankind in particular. He insists, because both occur *ex nihilo* and without any necessity, they are therefore marked by God's love. He declares (p. 88), '... each and every human person is created from, and represents, both the beautiful unity of all three persons of the Trinity and also the amazing love that binds them in communion' and (p. 90), 'How this creation of every child by God takes place will always remain a mystery'... 'In other words, these new beings will in some way continue to reflect the image of God because he created them.' See, the bond between the image of God and the human embryo is resolutely forged.

Then comes the enormity of the incarnation, fittingly the longest chapter of the book. MacKellar displays it as ineffable. While the incarnation of Jesus Christ as man remains the best Scriptural reply to the question, when does human life begin? MacKellar takes it to another level. It is, '... the reality that Christ became fully human in all defining dimensions of humanity, including its pre-natal aspects' (p. 139). In other words, the creator becomes the paradigm human being. But it was the Father's love that sent his Son. And by the Spirit, believers are the recipients of that Triune love. Grasp that and suddenly the incarnation of the embryonic Christ blossoms with love, creation and human dignity. How we stupidly downplay the stupendous event!

### **The downsides**

Every book has its downsides and this one is no exception. There is no getting away from it – this is a difficult book to read. Of course, the subjects are complex and at times brain-achingly so. This is not helped by the author's rather heavy and repetitious style – there is no relief by way of anecdotes, analogies or witticisms. Instead there are recurring themes and reminders that not all topics will be fully covered. These criticisms betray the book's poor structure – a good copy editor would have had a radical field day and produced a better book.

The book's style is also somewhat unexpected. Citations abound – there are over 900 in total. It could be regarded as a collection of quotations held together by comments from the author – but that would be too unkind.

Dr Calum MacKellar is currently the director of research at the Scottish Council on Human Bioethics, Edinburgh and an elder in the Church of Scotland. And his Scottish roots show through. For example, there are some two dozen extracts from the writings of the Scottish theologian Thomas Torrance, numerous statements from various Reports of the Church of Scotland and several notes by other learned men and women from North of the border. Is this balance or bias? And, yes, all writers have distracting tics, such as MacKellar's use of the word 'interestingly' – it opens sentences at least a dozen times! Finally, the cost of this modest-sized paperback, at £35, will deter many potential readers. Nevertheless, let it be known that I found the book sufficiently instructive that I purchased and donated a copy for the library of the London Seminary.

### **The upsides**

Notwithstanding these complaints, MacKellar expounds some truly wonderful major themes that undoubtedly add to conservative Christian understanding of what it means to be a human being. He also tackles some minor, but not unimportant, themes of twenty-first-century embryology. For instance, he unpicks the tangled thinking associated with embryonic status and the processes of twinning and recombination (p. 202). And there is an Appendix entitled The Moral Status of New Kinds of Embryos. For those readers perplexed by hybrids and cybrids, as well as other novel human formats, MacKellar's Appendix is helpful. Overall, he invokes the precautionary principle and concludes that all such beings should be given the benefit of the doubt and therefore shielded by the full protective position (p. 240).

## **In conclusion**

Since quotations are currently *à la mode*, here is a practical one (p. 39) from Calvin's Institutes that encompasses something of MacKellar's remit, 'We are not to consider that men merit of themselves but to look upon the image of God in all men, to which we owe honour and love... Therefore, whatever man you meet who needs your aid, you have no reason to refuse to help him.'

*John Ling*

## Update on Life Issues - February 2021

### Abortion

#### Plan C abortions

If Plan A is straightforward abortion of a confirmed pregnancy and Plan B is administration of the morning-after pill with its abortifacient mode of action, what is Plan C? It is an alleged new type of 'contraception' for women who do not want to know if they are pregnant or not. Called the Missed Period Pill (MPP), it is a uterine evacuation medication that induces bleeding, similar to a menstrual period. It would therefore terminate a pregnancy for nearly all pregnant women users. Its USP (unique selling point) is that it fills the gap between emergency 'contraception' and straightforward abortion. Moreover, users would not know whether or not they were pregnant. Hence, its advocates claim, it would avoid the burden of that knowledge and take away any stigma or shame associated with abortion. This is a ploy to introduce moral ambiguity.

Here is the real surprise. Missed Period Pill is a euphemism for abortifacient drugs or herbal concoctions. In fact, it turns out that Plan C could be that old combination of mifepristone, which blocks the effects of progesterone, the hormone without which the lining of the uterus begins to break down and thus prevents implantation and so the embryo or foetus dies, while the second drug, misoprostol, causes the uterus to contract and expel its contents, including the dead embryo or foetus if present.

The promotion of Plan C might seem a little archaic and weird, but at least it provided a research project for a team of women investigators. They surveyed women's interest in the MPP across two US states. In all, of the 678 people surveyed, 42% indicated interest in MPPs. Interest was greatest (70%) among those who would be unhappy if pregnant. In other words, it would suit those who despite the ubiquity of home pregnancy testing kits, they would prefer not to know.

These somewhat humdrum results were reported in the journal *Contraception* under the title, 'Exploring potential interest in missed period pills in two US states' by Wendy Sheldon *et al.*, (2020, **102**: 414-420). The authors concluded that, 'If missed period pills were available in the United States, demand might be substantial and wide-ranging across demographic groups.'

But let's not overlook the fact that the first author of the study, Wendy Sheldon, is on the staff of Gynuity Health Projects, the 'reproductive and maternal health' group that partners with Planned Parenthood and other abortion providers from which funding for the study in *Contraception* came.

In short, the results may be regarded as both unnerving and also consoling. Unnerving, because some women do not apparently want to listen to and understand their own bodies, whether they are pregnant or not. Consoling, because some women are still unsure about the moral conflicts and rightness of abortion – it is not easily destigmatised. Perhaps, above all, the work demonstrates that extreme abortion activists in the reproductive rights movement are not entirely in tune with the rest of the sisterhood – a significant sensitive and diffident faction still exists.

#### Can abortion history be changed?

'Pull down their statues' is the modern cry. Architects of slavery must be erased from the streets and the history books. The names of various benefactors of universities and other public buildings must be expunged. Their dark histories will no longer be tolerated. History must be changed, it must be purified, or at least airbrushed. Support our cancel culture.

We all live and benefit from the exploits of both good and wicked men and women. A selective view of a deleted history serves no noble purpose. We must face the truth, both rough and smooth. Unmanipulated history teaches us valuable truths – read your Bible for explicit examples!

Try telling that to Planned Parenthood, the largest abortion agency in the US and around the world. It has had to face the link between its founder, Margaret Sanger, and the modern eugenics movement. She campaigned for, 'the gradual suppression, elimination and eventual extinction, of defective stocks – those human weeds which threaten the blooming of the finest flowers of American civilization' as she so indelicately put it.

Then there is the very British Marie Stopes. Her name is associated with the British charity with 12,000 employees which claims to be 'one of the world's largest providers of high quality, affordable contraception and safe abortion services.' Each year it helps around 5 million women procure an abortion. It has clinics in 37 countries around the world.

The problem is that Mrs Stopes, pioneer of birth control, was also an ardent devotee of eugenics, advocate of compulsory sterilisation, a devotee of eugenics, an enthusiast of social Darwinism and admirer of Adolf Hitler. How to bury that despicable history? Simple, in November 2020, they expunged her by renaming Marie Stopes International as MSI Reproductive Choices. It is called PR, public relations. Problem solved. Except that renaming or denaming is not the right way to address historical wrongs. After all, does abortion now have neither contemporary nor historic connections with eugenics? Hide the truth and you fool yourself.

## IVF and ARTs

### The 14-day rule

'For the past 40 years, the 14-day rule has governed and, by defining a clear boundary, enabled embryo research and the clinical benefits derived from this. It has been both a piece of legislation and a rule of good practice globally.' That is how Sophia McCully opened her article entitled, 'The time has come to extend the 14-day rule' in the *Journal of Medical Ethics* published online on 2 February 2021. She continues, 'In this paper, I argue that the current limit for embryo research in vitro should be extended to 28 days to permit research that will illuminate our beginnings as well as provide new therapeutic possibilities to reduce miscarriage and developmental abnormalities.'

None of this is new. Since 1984, when the Warnock Committee cobbled together some arbitrary and specious arguments to recommend limiting human embryo research and destruction to an upper limit of 14 days, scientists have complained that it is too restrictive. On the other hand, many said it was too liberal. Eventually, the 14-day rule became part of the 1990 Human Fertilisation and Embryology Act. Now, as part of their case for extending the limit, proponents are even claiming that Warnock's arguments were random and spurious. Well I never!

The current calls for change centre on scientists' probable ability to culture human embryos beyond 14 days – a sort of 'if we can, why not?' reasoning. The popular bid is now for 28 days – just as arbitrary and compromising as Warnock's original. But the hook is, 28 days would 'permit research that will further explore our origins as well as potentially provide new therapeutic possibilities to reduce developmental abnormalities and miscarriage' as McCully has written elsewhere. In other words, it would allow exploration of the so-called 'black box' period of human development.

Will just one slice of pizza satisfy the hungry teenager? And so how long will 28 days satisfy? This is where robust bioethics should be at its best. Everyone knows that life is not a free for all – boundaries are needed for people and civilisations to thrive. Just as the limit of 24 weeks is not enough for abortionists, and transferring just two embryos is not enough for IVF practitioners, so 28 days would ultimately become inadequate. If the deliberate destruction of human life is to be avoided, then abortion and embryo experimentation should be illicit. The boundary should not be 14 or 28 days, it should be zero.

Expect a UK government consultation on the issue in five years' time, maybe sooner.

## **A 27-year-old embryo is born**

Mess with biology and that is the sort of strapline you get. Molly Gibson was conceived in 1992, transferred to a womb in February 2020 and born in October 2020. Accordingly, she has set a new world record for the longest-frozen embryo to result in a live birth.

Tina and Ben Gibson of Knoxville, Tennessee, struggled with infertility for nearly five years. They approached the National Embryo Donation Center (NEDC) in Knoxville. The NEDC is a Christian, non-profit organisation that stores 'spare' frozen embryos donated by IVF patients.

Families, like the Gibsons, can then 'adopt' a stored embryo and use IVF to maybe give birth to a child that is not genetically related to them. Both Molly's and her sister Emma's embryos were donated by the same couple and frozen simultaneously. Emma was born in 2017 and had held the previous record for 24 years as a frozen embryo.

After the whoops of delight caused by Molly's birth had subsided, a serious issue arose. Currently, the UK has a ten-year storage limit for frozen human gametes and embryos as defined by the 2008 Human Fertilisation and Embryology Act. At the end of the storage period, the woman must decide whether to become a mother, or have her ova and/or embryos destroyed. An extension can only be granted for medical reasons and premature infertility.

Molly's birth in the USA has sparked calls for this time limit to be scrapped in the UK. Sarah Norcross of Progress Educational Trust commented, 'It's time for the Government to change this arbitrary law which damages women's chances of becoming biological mothers and limits their reproductive choices.' That's all very highfalutin jargon, but IVF is a bioethical and practical 'can of worms' and its legal boundaries are there for a reason.

The NEDC is one of several embryo adoption agencies in the USA. Like others it has a strong Christian ethos – its website states, 'The NEDC firmly believes in the sanctity of life beginning at conception and recognizes marriage as a sacred union between man and woman as defined by scriptures of the Holy Bible.' Since its inception in 2003, NEDC has assisted in over 1,000 births and received more than US\$3.9 million in federal funding. But the concept and practice of embryo adoption poses thorny bioethical problems. For more details, read Chapter 3 and especially pages 94-95 of my 2014 *Bioethical Issues* book.

## **IVF and the stupid**

Paris Hilton, the 39-year-old American heiress, media personality, businesswoman, socialite, model, singer, actress and DJ, wants a baby or two. More precisely, she wants a boy and a girl. So, as recommended by the famous Kim Kardashian, she is undergoing IVF treatment with her boyfriend, Carter Reum.

She wants to start the process now to ensure she could have 'twins that are a boy and a girl' since parents can, for an added cost, sex select which embryos they want to use. 'I think it's something most women should do just to have and then you can pick if you want boys or girls', Ms Hilton added somewhat dimwittedly, and 'The only way to 100% have that is by doing it that way.'

Apparently, many felt Hilton's comments were 'out of touch' and insensitive to people struggling with infertility who cannot afford IVF, a procedure that can cost upwards of \$12,000. A celebrity website, *Insider*, commented on some ethical problems associated with choosing the sex of IVF children. And, 'In addition to being an expensive procedure many people in the US can't afford, the idea of 'picking' a child's gender before they are born may present some problems. Since a child could be transgender, and may not identify with the gender they are assigned at birth, no one truly knows what gender their child will be.'

If Paris Hilton thinks that IVF plus PGD (preimplantation genetic diagnosis) will fulfil her baby dreams, she has yet to face some harsh realities. Sometimes I feel I don't belong in this world.

## Euthanasia and Assisted Suicide

### Canada goes for broke

Here is a bioethical truth – open a permissive door a little and soon it will swing wide open. Here is proof from Canada. In June 2016, the Parliament of Canada passed federal legislation that allowed eligible Canadian adults to request ‘medical assistance in dying’ (MAiD). On 5 October 2020, the Minister of Justice and Attorney General of Canada introduced Bill C-7 with proposals for a major expansion of the country’s 2016 euthanasia laws. Critics say that the amendments will make Canada’s law the most permissive in the world.

Bill C-7 would give access to MAiD to people whose natural death is not reasonably foreseeable. It would also establish more relaxed eligibility rules for those who are near death, including a form of advance directives.

Critics insist that C-7 will change MAiD ‘from a procedure to facilitate dying into a terminal therapy for life’s suffering.’ In particular, the Bill would do away with a doctor’s traditional ‘standard of care’, which obliges ‘physicians to apply their skills and intricate knowledge to a patient’s particular clinical circumstances.’ Instead patient choice, effectively self-diagnosis, of ‘enduring and intolerable suffering’ would become the criterion for deciding whether or not he or she is eligible for MAiD and the prescription of the remedy, death.

It gets worse. On 17 February 2021, Senators overwhelmingly approved a revised version of Bill C-7 by a vote of 66-19, with three abstentions. In addition, Senators approved five amendments, two of which would expand access even more than the government proposed. One amendment would allow people who fear losing mental capacity to make advance requests for assisted death. The other would impose an 18-month time limit on the Bill’s proposed blanket ban on assisted dying for people suffering solely from mental illnesses. The revised Bill will now be sent back to the House of Commons for MPs to decide whether to accept or reject some or all of the amendments. The government wants the Bill passed by 26 February.

Parliamentary critics have expressed alarm at the haste with which the Canadian law is changing. But that is what happens with bad laws – they become slippery slopes. Consider the figures from Ontario, Canada’s largest province. In 2020, there were 2,378 cases of MAiD, up from 1,789 the previous year, 1,499 in 2018, 841 in 2017 and 189 in 2016. Is that not a slippery slope?

### Palliative care provision

Oh, for something life-affirming and positive! Here it is. The Covid-19 pandemic has stretched the UK’s provision of palliative care. According to researchers from Cicely Saunders International, the predicted capacity of about 0.5 million people in England and Wales needing such care by 2040 has already been reached.

Their 2020 Report, which makes an urgent call for reforms to the UK’s palliative care system, is entitled, *You matter because you are you: an action plan for better palliative care*. It asserts that too many people who had life-limiting illnesses, or were approaching death, were spending unnecessarily long periods in hospital without being offered alternatives, when most would prefer to die at home. Around 80% of people would prefer to die at home, or in their place of residence, but in some parts of England and Wales less than 50% do so.

To help meet people’s needs the authors call for face-to-face care, including symptom management, seven days a week access to hospitals, as well as 24/7 support and advice in the community. Prompt access to therapeutic, nursing, and pharmacy services to support people in their homes are also needed. Other recommendations in the Report’s seven-point action plan include increased investment in social and community care services, a strategic approach to training, and a system of continuous learning and

improvement. And it draws attention to a government-commissioned review, which estimated that £150m is needed to provide a 'national choice offer' to patients and carers for end-of-life care.

Irene Higginson, scientific director at Cicely Saunders International, commented, 'The Covid-19 pandemic has made it clear that, when the demand for health and social care services goes up, the provision of palliative care falls short. It's vital that we learn from this experience and implement the changes necessary to secure high quality palliative care for all patients.'

And Kathryn Mannix, a palliative care physician, said, 'Access to support for wellbeing, person-centred care, and excellent symptom management should be seen as a human right throughout life. It is time to recognise that people approaching death have the same rights and to fund the services that will allow them to live well for the remainder of their lives.' Could all that not be a positive outcome from the Covid-19 pandemic?

## Genetic Technologies

### Anti-CRISPRs

In the last decade, the world of experimental biology has been transformed by the discovery and application of the CRISPR-Cas gene-editing procedure. Simply by changing a little of an organism's genetic code, it has been successfully applied to curing human diseases as well as improving crops and livestock.

But sometimes a good thing needs controlling, even stopping. What if gene-editing cannot be halted, could it have disastrous consequences? What we need is an off-switch, an anti-CRISPR mechanism. And several have recently been discovered.

When bacteria are invaded by viruses the latter are susceptible to the bacterial CRISPR-Cas defence system. But sometimes the invading viruses survived. How come? It turns out that viral genes were somehow capable of shutting down the CRISPR-Cas system so the bacteria became susceptible. Anti-CRISPRs were realised. Now more than 50 anti-CRISPR proteins have been characterised.

Scientists now have a toolkit for keeping gene-editing in check. But it is early days. As Jennifer Doudna, one of the pioneers of CRISPR gene-editing, has asked, 'How do you actually use these in a way that will provide meaningful control?'

Here is one such example of progress. In 2017, biologists at the Harbin Institute of Technology in China deciphered the molecular mechanism by which one anti-CRISPR protein, called AcrIIA4, can shut off Cas9 activity. A few months later, Doudna and colleagues, demonstrated that anti-CRISPRs have practical value. They showed that delivering AcrIIA4 into human cells could not only halt gene-editing activity, but also limit those dreaded 'off-target' effects of gene-editing. That was back in 2017. [Dong *et al.*, *Nature*, 2017, **546**: 436–439. Shin *et al.*, *Science Advances*, 2017, 12 July].

Two years later in 2019, a US team, led by Erik Sontheimer, at the RNA Therapeutics Institute, University of Massachusetts Medical School, demonstrated that the approach can work in mice – so far the only demonstration that anti-CRISPR proteins can work in a living animal, and not just cells.

Sontheimer and his colleagues wanted to allow editing in the liver while suppressing it in all other tissues of the mouse. So they designed an anti-CRISPR protein that would be active everywhere except in the presence of microRNA-122, which is found only in the liver. In the mice, the anti-CRISPR successfully blocked Cas9 editing throughout the body, except in that one organ. [Lee *et al.*, *RNA*, 2019, **25**: 1421-1431].

This is remarkable, even exciting, progress. CRISPR-Cas9 and the other techniques of gene-editing have proved to be revolutionary. Now to have a start-stop control mechanism of the system is phenomenal. Biology will never be the same.

## Brains in a dish

Where are the bioethical boundaries of human genetic technologies? We already have genetically-engineered babies, three-parent human embryos and novel family combinations. Now consider this – human brains in a dish, created from stem cells.

Not only is that physical prospect unnerving, but could these clumps of cells, these disembodied brain organoids, become conscious? Electrical activity in these structures has already been reported. A review article by Sara Reardon in *Nature* (2020, 27 October) entitled, 'Can lab-grown brains become conscious?' included this statement, 'The studies have set the stage for a debate between those who want to avoid the creation of consciousness and those who see complex organoids as a means to study devastating human diseases. [Alysson] Muotri and many other neuroscientists think that human brain organoids could be the key to understanding uniquely human conditions such as autism and schizophrenia, which are impossible to study in detail in mouse models. To achieve this goal, Muotri says, he and others might need to deliberately create consciousness.'

Where are the boundaries? So far, they have been little more than voluntary guidelines. And, after all, what is unethical – what does that mean? It is easy to be soothed by talk of 'essential research' and prospects of overcoming serious diseases. Should we not be appalled by these trends? Is human dignity at stake?

Alysson Muotri, a world leader in this field at the University of California, San Diego, remains indifferent. As Reardon states, 'For his part, Muotri sees little difference between working on a human organoid or a lab mouse. "We work with animal models that are conscious and there are no problems," he says. "We need to move forward and if it turns out they become conscious, to be honest I don't see it as a big deal."'

Not everything about genetic technology is wonderful.

## Stem-cell Technologies

### California Institute for Regenerative Medicine (CIRM)

The election of the President of the United States was not the only question on recent US ballot papers – in California on 3 November, Proposition 14, the Stem Cell Research Institute Bond Initiative (Prop 14), was on the ticket too. This ballot initiative would allow CIRM to borrow US\$5.5 billion in the form of bonds. Californian taxpayers would have to repay this sum with interest over the next 30 years. Prop 14 divided the residents of the Sunshine State, but on the day it sneaked passed by 51% to 49%.

CIRM was opened in 2004 with typical West Coast zest and zeal and with an allocation of \$3 billion funding. It was controversial for many reasons including its major intent of destroying human embryos to create embryonic stem cells. But its record has been mixed. True, CIRM research has led to two approved cancer drugs and a host of prospective therapies, but the promised ground-breaking stem-cell cures and therapies have been wanting. More than half the original funding went on buildings and other infrastructure, education and training.

By 2019 the CIRM was running out of money and it suspended applications for new research projects. It had also been dogged by a string of political and bureaucratic wrangles. Nowadays California is suffering from huge budget deficits, a largely uncontrolled Covid-19 pandemic as well as housing and unemployment crises. This time round taxpayers, investors and scientists will be keen to see some solid returns from their US\$5.5 billion venture. If CIRM still insists on funding major embryonic and fetal stem-cell research projects, they will probably be very disappointed. Adult stem-cell therapeutics have already won the day.



## Miscellaneous

### Updating the Hippocratic Oath

It was the Hippocratic Oath together with the Judaeo-Christian doctrines that created wholesome human medicine and guarded it for over 2,000 years. The Oath has often been tinkered with and inevitably watered down. Some examples are given on pages 24-25 of my 2014 book, *Bioethical Issues*. Now comes the newest revision from first-year medical students at the University of Pittsburgh School of Medicine. It is a thin affair.

The traditional Oath is concerned with the big and bold topics of bioethics, such as abortion, conscience, euthanasia, confidentiality and sexual abuse. This new version instead champions diversity in medicine and society, being a friend to the poor and marginalised, and restoring trust in the healthcare community.

Here are extracts from the new and the old. Can you guess which is which? 'I will be an ally to those of low socioeconomic status, the BIPOC community, the LGBTQIA+ community, womxn/women, differently-abled individuals and other underserved groups in order to dismantle the systemic racism and prejudice that medical professionals and society have perpetuated.' And 'I will neither give a deadly drug to anybody who asked for it, nor will I make a suggestion to this effect. Similarly I will not give to a woman an abortive remedy. In purity and holiness I will guard my life and my art.'

Thankfully, the medical students took the traditional Oath as well as their new-fangled rendering. Such novelties as students creating their own versions suggest that medical ethics and medical practice are flimsy, fashionable issues rather than those built on robust, historic foundations.

### Bioethics and the Covid-19 pandemic

In February 2020, the World Health Organization (WHO) arranged a meeting in Geneva to discuss the pandemic. During the two-day gathering, some ethical principles were considered. These were published under the title, 'Key Ethical Concepts and Their Application to COVID-19 Research' by Dawson *et al.*, in *Public Health Ethics*, 2020, **13**: 127-132.

Bioethical principles are typically summarised under four headings, namely, autonomy, beneficence, non-maleficence and justice, as devised by Tom Beauchamp and James Childress in their famous 1985 textbook, *Principles of Biomedical Ethics*. The new Genevan principles are quite different, moving away from autonomy towards community and the common good. Here, according to Michael Cook of *BioEdge*, is a summary of the new six:

**Solidarity.** 'The practice of standing up together and acting in common.' 'Just as infection spreads through connection, our ethical response requires us to act together to ensure recognition of our common nature, needs and value.'

**Equal Moral Respect.** 'There can be no room for disagreement regarding the equal moral respect that is owed to every individual. In short, equal moral respect serves as a fundamental precondition for fair and equitable treatment.'

**Equity.** 'Treating people equitably means treating like cases alike, e.g. treating people in accordance with their unique needs.'

**Autonomy.** 'An autonomous individual is able to control what happens to their bodies and lives. Autonomous people may also forego making choices.'

**Vulnerability.** 'Its core ethical function is to mark out the need for additional ethical consideration, or heightened ethical scrutiny in the context of research towards the risks and threats faced by a person or group regarded as potentially vulnerable.'

**Trust.** ‘During public health emergencies, such as COVID-19, action is required to ensure the maintenance of trustworthiness in those given responsibility for the response.’

## USA and Elsewhere

### President Trump’s pro-life legacy

Whatever you think of the man, it cannot be denied that Donald Trump’s four years as President of the USA were marked by major pro-life gains. There are, according to Katey Price of the Lozier Institute, at least four:

- 1] Mexico City policy. This programme, begun under the Reagan Administration, bars taxpayer funding for organisations that provide abortion or involuntary sterilisation overseas. Its renewal was the first pro-life action of the Trump administration in 2017.
- 2] Title X of the Public Health Service Act (PHSA). In 2018, the Trump administration supported rules affecting Title X family planning programs, which impact low-income and uninsured Americans, specifically women and girls. Title X grantees receiving federal funding could no longer provide or refer for abortions.
- 3] Appointing judicial nominees. As well as appointing over 200 judges across the country, Trump appointed three to the Supreme Court. They were Justices Amy Coney Barrett, Brett Kavanaugh and Neil Gorsuch. These are considered to be pro-life and could affect any consideration of *Roe vs. Wade*.
- 4] Recent pro-life actions. In 2020, the Trump administration took action to protect individuals with disabilities. In his last week of office the President issued a draft rule to protect infants born alive with disabilities.

Joe Biden, though a declared Roman Catholic, is also an ardent pro-abortionist. With his inauguration as the 46th President of the USA, it is expected that his administration will seek to repeal many of the pro-life gains of Trump’s time in office. For example, on 28 January 2021, President Biden signed an executive order revoking the Mexico City policy. He has also called for a review of the Title X rule. And he wants to dismantle Trump’s proposals that would have cut taxpayer’s funding of Planned Parenthood by hundreds of millions of dollars.

Perhaps the one enduring bright spot of the Trump legacy is that the balance of the Supreme Court now appears to be decidedly pro-life. Local and federal laws and regulations imposing the Biden’s administration’s extreme policies on abortion may yet be struck down.

### The March for Life 2021

Every year, on 22 January, pro-life Americans commemorate the day that *Roe vs. Wade* legalised US abortion 48 years ago, by joining in the March for Life. The event has always centred on Washington DC, but this year it had to go virtual on 29 January.

This year one of the keynote speakers was former NFL star Tim Tebow. He encouraged pro-lifers not to lose hope or give up the fight but to continue advocating for life at all stages, born and unborn. He continued, ‘You know, I’ve given so much of my life for sports ... but that’s for trophies that rust ...’ ‘But you see, being passionate about Jesus ... and passionate about those that have been thrown away and neglected and forgotten? That is worthy.’ ‘You see, when you’re pro-life, I believe that we’re called to be pro-life in every area – for the unborn, for the hurting, for the orphan, for the thrown-away, for the special needs, for the trafficked, for all of humanity.’ He encouraged pro-lifers to always be pro-life, ‘... all the time, everywhere, no matter what.’

## Is the USA pro-life?

The group, Students for Life of America, recently released results of a poll conducted during January 2021 among 800 registered voters aged 18 to 34, namely Millennials and Gen Z.

Asked about reversing *Roe vs. Wade*, returning the issue of abortion to the individual states, most Millennials and Gen Z supported the proposal by a margin of 44 % in favour to 36 % opposed with 18 % unsure. These first two figures changed to 57 % and 30 % when respondents learned that *Roe vs. Wade* allows for abortion through all 9 months. In addition, almost half (47%) of those questioned supported banning abortion after a heartbeat was detected.

Also in January, a new nationwide poll, conducted by Marist College, found that a majority of all-aged Americans are pro-life and opposed to all or virtually all abortions that take place in America today. For example, 51% of Americans self-identified as pro-life. Legal limits on abortion were supported by 76% of those polled, while 77% opposed taxpayer funding of abortions. And only 19% of Americans either 'support' or 'strongly support' funding abortions outside the US.

These findings are significant because they are contrary to President Biden's and Planned Parenthood's position that abortion should be freely available at any time during a pregnancy, either in the US, or anywhere else.

*John Ling*

*(A fuller version of John's regular update of bioethical news and views can be found at [www.johnling.co.uk](http://www.johnling.co.uk))*

## 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 these cases are being handled by the Christian Legal Centre.*

### **The Health Protection (Coronavirus Restrictions) (England) Regulations 2020 DIY Home Abortions**

Back in March 2020, a notice appeared on the government website appearing to allow women to conduct their own medical abortions at home. Following an outcry, the notice was removed from the website, claiming that it had been ‘published in error’ and visitors to the website were assured that there would ‘be no changes to the abortion regulations’.

The Secretary of State for Health and Social Care, Matt Hancock, told the House of Commons, ‘There are no proposals to change the abortion rules due to Covid-19.’ Health Minister, Lord Bethell then told the House of Lords, ‘We do not agree that women should be able to take both treatments for medical abortion at home. We believe that it is an essential safeguard that a woman attends a clinic, to ensure that she has an opportunity to be seen alone and to ensure there are no issues... It is not right to rush through this type of change in a sensitive area such as abortion without adequate parliamentary scrutiny’.

Just a few days later the Government made an extraordinary U-turn. In spite of all previous assurances, on 30 March, regulations were amended to allow women to abort their child at home. Christian Concern has challenged the Government’s decision by way of judicial review and on Tuesday 19 May, appeared in the High Court via Skype seeking permission to challenge on the basis that it usurps proper parliamentary procedure and that policy changes were not only unlawful but also made without proper parliamentary scrutiny, making it unsafe for pregnant women. Michael Phillips, counsel for Christian Concern, said the 1967 Abortion Act has had ‘a coach and horses’ run through it by allowing women to take pills at home during the lockdown and pointed out that ‘women’s lives have been put at risk because of this amendment’.

Mr Phillips asserted that Matt Hancock, Secretary of State for Health and Social Care had not been given the full picture by civil servants, who were being informed by members of the abortion lobby, and that these civil servants were effectively acting as lobbyists for abortionists. He argued that the Government had failed to fully take into account factors such as the physical and psychological risks to women, the risk of women being coerced into an abortion, the risk of a woman taking abortion drugs prescribed for another person and the risk that they will be taken outside the 10-week gestation limit.

In their judgment Lord Justice Singh and Mr Justice Chamberlain refused permission for a judicial review and said the Government’s decision was lawful. Christian Concern appealed and on 18 June, Lord Justice Lewinson granted permission for the case to be heard by the Court of Appeal on the following grounds:

#### **5. The decision is *ultra vires* s. 1 of Abortion Act 1967:**

- a) The Divisional Court has erred in its analysis of ‘*terminated by a registered medical practitioner*’ in s. 1(1) of the Abortion Act 1967 (judgment, paras 41-45). Where pregnancy is terminated by self-administration of a drug, prescribed by a doctor (who may or may not have attended an e-consultation with the patient) and posted to the patient, the pregnancy is not ‘*terminated by an RMP*’: *RCN v DHSS* [1981] AC 800; *Doogan v Greater Glasgow and Clyde Health Board* [2014] UKSC 68; *British Pregnancy Advisory Service v Secretary of State for Health* [2011] EWHC 235 (Admin); *JR76* [2019] NIQB 103. *SPUC Pro-Life Scotland v Scottish Ministers* [2019] CSIH 31 is clearly distinguishable from this case.
- b) The Divisional Court erred in refusing to admit *Pepper v Hart* evidence. The cases cited under Ground 5(a) above demonstrate that there is an ambiguity in the words ‘*terminated by a registered medical*

*practitioner'*, and especially in reconciling s. 1(3A) with that requirement; so that the *Pepper v Hart* test is met.

- c) The Divisional Court erred in its analysis of the Hansard record. Read in context, the statements by Mr Key (the mover of the amendment) and Mr Clarke (the then Secretary of State) amount to a categorical assurance that the proposed amendment does not confer a power to authorise self-administered home abortions.

**6. The decision is contrary to the legislative purpose of the 1967 Act (*Padfield*) (judgment, paras 46-50):**

- a) The Divisional Court has erred in holding that the decision was consistent with the legislative purpose to ensure that abortions are carried out with proper skill and in hygienic conditions.
- b) *Pepper v Hart* evidence is admissible to ascertain the legislative purpose of s. 1(3A), and shows that the power was conferred on the S.o.S. to enable a designation of safe and hygienic places such as GP surgeries, and expressly not of 'home'. The Divisional Court has failed to consider the Hansard record in the context of *Padfield* argument.

The appeal was heard on 29 July 2020 by Lady Justice King DBE, Lady Justice Nicola Davies DBE and Lord Justice Davies, two of whom had heard a case granting a buffer zone around an abortion clinic in Acton, West London. Their Lordships handed down their judgment on 25 September 2020 refusing permission for judicial review. The case has now been appealed to the Supreme Court and as of February 2021, no decision has been made in relation to whether the appeal will be allowed.

## **Seyi Omooba**

Seyi Omooba was removed from a lead role in a musical for a four-year-old Facebook post that cited the Bible. With the support of the Christian Legal Centre, she has taken a theatre and her agency to court for breach of contract and for anti-Christian discrimination.

The case raises the question of whether Bible-believing Christians have the freedom to hold and express mainstream Biblical views in public, without fear of losing their livelihoods. It also raises the issue of whether, as a society, we are allowed to hold and express opinions and interpretations of art, literature and drama in ways that are contrary to LGBT ideology.

On 14 March 2019, Miss Seyi Omooba, 25, from East London, had been given a lead role as Celie in Leicester Curve and Birmingham Hippodrome's co-production of the award-winning musical *The Color Purple*, based on Alice Walker's classic American novel. The casting was announced the same day that Miss Omooba went with her father, Pastor Ade Omooba, an eminent international Christian campaigner and Christian Concern's co-founder, to Buckingham Palace to receive his MBE.

Miss Omooba had developed her raw talent from a young age singing gospel in church and studying performing arts at Anglia Ruskin University. She had already built up a portfolio of performances, among them parts in *Hadestown* at the National Theatre, *Little Shop of Horrors*, *Spring Awakening*, and had played the role of Nettie in the Cadogan Hall production of *The Color Purple*.

In a review of her full debut in the West End musical, *Ragtime*, Miss Omooba was described as: 'jaw-droppingly good, and her ferocious gospel vocals... pin you to your seat. This is her professional debut, and she's someone to watch.' In the production of *A Color Purple* at Cadogan Hall, Miss Omooba's depiction of the character of Nettie was described as capturing the 'very heart of her character.'

After the cast was announced, however, on 15 March, Miss Omooba was tagged on Twitter by another West End performer, Aaron Lee Lambert, who is not known to her. With a screenshot of a Facebook post that Miss Omooba had posted four-and-half-years ago on 18 September 2014, Mr Lambert wrote:

*'@seyiomooba Do you still stand by this post? Or are you happy to remain a hypocrite? Seeing as you've now been announced to be playing an LGBTQ character, I think you owe your LGBTQ peers an explanation. Immediately.'*

In September 2014, Miss Omooba was a 20-year-old student whose acting career had not even started. She regularly posts about her faith online without any issue, and in this post had written on her personal Facebook page, in the context of the government introducing same-sex marriage legislation, that:

‘Some Christians have completely misconceived the issue of Homosexuality, they have begun to twist the word of God. It is clearly evident in 1 Corinthians 6:9-11 what the Bible says on this matter. I do not believe you can be born gay, and I do not believe homosexual practice is right, though the law of this land has made it legal doesn’t mean it is right. I do believe that everyone sins and falls into temptation but it’s by the asking of forgiveness, repentance and the grace of God that we overcome and live how God ordained us to. Which is that a man should leave his father and mother and be joined to his wife, and they shall become one flesh. Genesis 2:24. God loves everyone, just because He doesn’t agree with your decisions doesn’t mean He doesn’t love you. Christians we need to step up and love but also tell the truth of God’s word. I am tired of lukewarm Christianity, be inspired to stand up for what you believe and the truth #our God is three in one #God (Father) #Jesus Christ (Son) #Holy Spirit.’

Miss Omooba received the tweet from Mr Lambert while supporting a grieving friend, and despite being deeply shocked and intimidated, refused to be drawn into an online discussion on the issue. Calls for Miss Omooba to be removed from the cast followed, however, as well as online abuse which included her being called a ‘n----r’. Miss Omooba, who visibly prays before each show and wears a ‘Not Ashamed’ of the Gospel wristband, had accepted the lead role of Celie after originally auditioning for the character of Nettie, and disagrees with the interpretation that Celie is a lesbian character.

The character of Celie in *The Color Purple* has intrigued readers and critics since it won the Pulitzer Prize in 1983 after its publication the previous year. Set in the Deep South of the US, its main character, Celie, leads a life of immense struggle at the hands of men, until she briefly finds comfort and friendship with another woman. It was made into a Hollywood film in 1985 and starred Whoopi Goldberg, who described the film and the character of Celie as: ‘Not really about feminism, or lesbianism, despite the fact that Celie finds out about love and tenderness from another woman....It has nothing to do with lesbianism. It has to do with, her eyes are opened, now she understands.’ Steven Spielberg, who directed the film, was pressed in 2011 on whether today he would make the ‘kiss’ scene in the film more explicit, but he said: ‘I wouldn’t, no. That kiss is consistent with the tonality, from beginning to end, of *The Color Purple* that I adapted.’

Leicester Curve Theatre and the Birmingham Hippodrome then released a statement on 21 March which led to Miss Omooba’s contract being terminated. The theatres claimed in their statement that: ‘The play and production are seeking to promote freedom and independence and to challenge views, including the view that homosexuality is a sin.’

That same day, Miss Omooba was now told by her agency ‘not to make public comment at this point’, without informing and consulting them, which Miss Omooba agreed to do. However, on the 24 March, a blogger based in Nigeria published a fake news article on the story which included a fake quote from Ms Omooba made ‘through her publicist’, saying that homosexuality is an aberration and that she stood by her Facebook post from 2014. The blogger wrote clearly that the article was ‘clearly satirical and was not to be taken seriously’.

Nonetheless, the article was enough for the agency to send Miss Omooba a brief email telling her that she would now be released from their services, and the news appeared in the media within hours - before Miss Omooba had the opportunity to explain that the article had nothing to do with her, which she was only able to do the following day. Even though Miss Omooba chased the agency for a response, it was not until 18 April that they responded saying their decision was final as their confidence in her had been ‘irretrievably eroded’.

Miss Omooba’s case was heard, by means of a virtual hearing, at the Employment Tribunal from 2-8 February 2021 with judgment handed down on 16 February. The Tribunal found against Miss Omooba on all counts and she is currently reviewing the detail of the judgment with her legal representatives at the CLC and considering an appeal to the Employment Appeal Tribunal.

## Judicial Review of church closure under Covid-19 Regulations

Over a hundred church leaders from different denominations and traditions within the Christian church in England and Wales, launched a claim for judicial review in response to government lockdowns in October and November 2020. The effect of the lockdown was to criminalise Christian public worship.

Supported by the Christian Legal Centre, the leaders had sought permission for judicial review on the grounds that government restrictions on public worship breach Article 9 rights, including the freedom of Christians to manifest their religion or beliefs in communal worship, teaching, practice and observance. The claim stated that the governments failed to discharge their public law duty of enquiry, especially by failing to ascertain the extent to which leaving open places of worship would risk contributing to the spread of Covid-19 and that the governments' regulations were made outside the legislative power conferred by the Public Health 1984 Act, an important principle long recognised by English law and the constitution. The leaders also argued that the state had unreasonably privileged the use of religious premises for secular purposes whilst prohibiting their use for religious purposes which are their *raison d'être*. This demonstrated that this ban on collective worship is manifestly unreasonable.

It outlined the position of the leaders on the issue saying that: 'The English and Welsh Governments have now introduced two successive sets of lockdown measures which have completely prohibited and criminalised public communal worship, a core aspect of religious life for the Claimants and their congregations. With these measures, the Governments have inflicted a terrible human cost, without rigorous consideration of less onerous restrictions, and as part of a package which leaves places of worship open for secular activities.'

The legal action followed new restrictions, which came into force in England on 5 November 2020, stating that 'places of worship will be closed' with exceptions for funerals, broadcast acts of worship, individual prayer, essential voluntary public services, formal childcare, and some other exempted activities. The application was withdrawn after restrictions on public worship were lifted following sustained political, legal and media pressure.

Nevertheless, the Scottish Assembly subsequently decided to enact a similar measure in Scotland and in response, a group of 27 Scottish church leaders, again supported by the Christian Legal Centre, launched a claim for judicial review in the Scottish courts. The leaders from a range of Christian denominations, including the Free Church of Scotland (Continuing), the Church of Scotland, the Free Church of Scotland, and a number of independent churches, contest that the closures are unlawful and breach European Convention of Human Rights law and the Scottish constitution. Accordingly, a pre-action letter was sent to the Scottish Ministers on 15 January, urging them to re-open churches.

They emphasised that the regulations prohibit them from supporting the material, emotional and spiritual needs in their congregations and communities and outlined that, although they fully understand the seriousness of the COVID-19 pandemic and the difficult decisions the Scottish Government has had to take, they believe the Scottish Ministers' have 'failed to appreciate that the closure of places of worship is a disproportionate step, and one which has serious implications for freedom of religion.'

The Scottish Ministers' responded by rejecting the claim and declaring that the state can 'regulate the secular activities of Churches... for the purposes of protecting public health' and that churches are compelled to 'comply with secular law' and therefore must remain closed. This statement conflicts directly with the long-established and traditional authority Scottish churches have had over their own affairs, free from state interference. This is enshrined in the 1592 Act, the 1706 Act for Securing Protestant Religion and the Church of Scotland Act 1921. There has been no attempt to close churches in Scotland since the persecution of the Presbyterian church, instituted by the Stuart kings, in the 17th century.

Permission has been given for this case to proceed to a full judicial review and the matter is expected to be heard in March 2021.

## James Caspian

James Caspian, an experienced psychotherapist, was refused permission by Bath Spa University to study cases of people who have surgery to reverse gender reassignment. He was told by Bath Spa University that to research a non 'politically correct' topic for a Masters dissertation could attract criticism and was undesirable.

Mr Caspian commenced legal action against Bath Spa in 2017, however, UK courts have refused to hear his case, leaving him with no alternative but to appeal to Europe, where he is being supported by the Christian Legal Centre in taking his case to the European Court of Human Rights (ECHR). Submitting his case to the ECHR, his lawyers will argue that Mr Caspian has exhausted domestic remedies to have his case heard, that his right of access to court has been violated, his freedom to pursue legitimate academic research has been breached, and that the basis of the decision to interfere with his academic freedom discriminated against him.

Between 2007-2017, Mr Caspian worked as a registered UK psychotherapist, with patients who were medically transitioning, or considering medically transitioning, their gender. By 2013 he began to see an alarming trend that patients were getting younger and there was a surge in the numbers of young women presenting with complex mental health issues.

Mr Caspian had growing concerns about the number of patients who were regretting their transitions and surgery and wanted to detransition and he was aware that there was little if any research on the issue of detransitioning. Therefore, in 2014, Mr Caspian enrolled on a part time M.A. in Counselling and Psychotherapy at Bath Spa University, intent on researching this subject.

On 14 November 2015, Mr. Caspian submitted his proposed research entitled: 'An examination of the experiences of people who have undergone Reverse Gender Re-assignment surgery.' On 1 December 2015, the School University Ethics Sub-Committee gave permission for Mr Caspian to carry out his research proposal, commenting: 'This application and accompanying research proposal has addressed the necessary ethical protocols. It has taken particular care to acknowledge the potential sensitivity of the research focus and appears to have the necessary protocols in place should any participants experience psychological harm from the interview process.'

During his preliminary research Mr Caspian discovered growing numbers of people who were saying that they regretted their treatment and had or wanted to detransition. He also discovered on World Professional Association of Transgender Health (WPATH) internet forums that any discussions on detransitioning were often being aggressively censored.

Based on his findings, he decided that he would need to slightly amend his research topic to include case studies of individuals who had reversed transition without necessarily reversing their surgery. He advertised his research topic on the internet and informed his tutor that trans activists may criticise the project as a result. Mr Caspian was subsequently told that he would need to re-apply to the University Ethics Sub-Committee who would need to reconsider his slightly amended research proposal. He was also asked to add a note to his proposal about the potential criticism.

On 15 November 2016, Mr Caspian was informed that his revised research proposal had been rejected. His subsequent appeal was also rejected with the sub-committee stating: 'Engaging in a potentially "politically incorrect" piece of research carries a risk to the University. Attacks on social media may not be confined to the researcher but may involve the University. This needs to be assessed by the University Ethics Committee.' Regarding the criticism the university might receive, the sub-committee stated: 'The posting of unpleasant material on blogs or social media may be detrimental to the reputation of the University. This needs to be assessed and addressed. This was further discussed with the Dean of the Institute of Education and the ethical approval form has been declined. This is a complex project and the risks are too great to the University and the researcher. Working on a less ethically complex piece of research to complete the Masters would be more appropriate.'



Apart from this superficial concern that the research was ‘politically incorrect’, no other substantive difference existed between the proposal that Mr Caspian had earlier had accepted and the re-submitted proposal which was rejected. In January 2017, Mr Caspian requested a refund on his course fees, but this was also refused. The following month he launched legal action.

By June 2020, however, every avenue of legal proceedings had been blocked. Mr Caspian was passed from pillar to post via the High court to the Office of the Independent Adjudicator (OIA) and back to the High Court. All refused to hear the substance of his case due to overly strict legal procedures, and despite the OIA recognising that the case had merit, Mr Caspian was told his claim was out of time, leaving him no option but to turn to Europe. Mr Caspian’s application to the ECHR states: ‘The procedural history of Mr Caspian’s claim fits the very definition of suffering from excessive formalism and a fundamental lack of flexibility.’

A decision by the European Court as to the admissibility of the case is likely to occur in the first half of 2021.

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