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The Old Bank House, 17 Malpas Road, Newport, South Wales, NP20 5PA
Editor: Rod Badams (Tel: 01536 483440 Email: rodbadams@btinternet.com)

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Marriage statistics and their implications

The impact of the inclusion of same-sex unions within the definition of marriage in England and Wales will not be known until July or August 2016, when the Office for National Statistics (ONS) will release the annual marriage statistics for 2014. Marriages taking place from 29 March 2014 onwards have been contracted under the new legislation.

Not for another 16 months or so, therefore, will we know whether the number of marriages has increased as a result of the publicity and high profile marriage was given during the debate prior to the new legislation being enacted, or whether there has been a decline in the popularity of marriage due to a perceived loss of its meaning and status as a result of the changes.

The signs from France, where marriage was redefined in 2013, are not encouraging. Rounded to the nearest thousand, the number of marriages in France dropped from 246,000 in 2012 to 238,000 in 2013. If we were to think that that represents a drop of 8,000 (3.25%), we would be making a false assumption. In 2012 all the marriages were heterosexual, whereas in 2013, 7,000 of them were same-sex unions. There was therefore a drop of 15,000 (6.1%) in the number of mixed-sex marriages.

The French experience is similar to what happened in Spain when marriage was redefined in 2005. In 2004, 216,149 marriages took place in Spain. In 2006, the annual figure was 211,818, of which 4,574 were same-sex marriages. This represents a drop of 2% in the total number of marriages, and of 4.12% in the number of heterosexual marriages. The figures, both for the total number of marriages, and for the number of heterosexual marriages, continued to decline each year until 2011, when there were only 163,085 marriages, of which 159,205 were heterosexual. Between 2004 and 2011, therefore, the annual number of marriages had declined by 24.55%, and the annual number of heterosexual marriages by 26.34%. There has been a slight upturn since 2011.

It remains to be seen whether the statistics for France and England and Wales will follow the Spanish precedent. Although the figures themselves are unarguable, it is of course impossible to be sure that the redefinition of marriage is the reason for the downturn. Other financial and social factors can influence the decisions which couples make about marriage. There is a difference, for instance, in the pre-redefinition statistics for France and Spain. In Spain the number of marriages had been steadily rising between 2001 and 2004, whereas in France it had been declining prior to redefinition in 2013. The 2012 total of 246,000 in France was 10.05% down on the 2008 figure of 273,500.

Although we have to wait until the summer of 2016 for the main figures, some significant statistics for England and Wales will be available earlier. Sometime in the summer of 2015, on a date not yet fixed, the ONS will be releasing the figure for the number of same-sex marriages which took place in the first full year of the new legislation. It will be interesting to see whether the full-year figures for new formal same-sex unions will be similar in proportion to the figures for the first three months (29 March to 30 June 2014) which the ONS published on 21 August 2014.

Those figures showed that there were 1,409 same-sex marriages in England and Wales, of which 796 were between women, and 613 between men. These figures were trumpeted as a triumph, but after all the prolonged hype regarding the opening up of marriage to same-sex couples, they must have been an immense disappointment to the British Establishment and the political elite.

When civil partnerships were first introduced in December 2005, 1,790 couples entered into them within the first 12 days – a big contrast to the 2014 figure of 1,409 same-sex marriages in three months. It will be correctly pointed out that the December 2005 figures were bound to be higher, since prior to that there was no formal union which same-sex couples could enter. However, new

same-sex couples had been aware for two years that same-sex marriage was imminent, and after the legislation was passed had had eight months to make their personal arrangements in readiness for the launch date. Such a poor response clearly amounted to a damp squib.

The first annual figures, whenever they appear, will be complicated by the fact that they will include the couples which, since 10 December 2014, have been able to convert their existing civil partnerships into marriages. The first 'conversion' statistics will show whether there was any kind of demand for same-sex marriage, or whether civil partnership, which confers almost all the same legal rights, would have been sufficient. A 75% take-up will obviously tell a very different story from a 15% take-up.

In February 2016, another revealing set of figures will be published by the ONS, giving details of the number of civil partnerships which were contracted in 2014. This set of figures will show the extent to which same-sex couples, while being able to marry, still chose to enter into civil partnerships instead. If the civil partnership figures do not show a significant fall (because couples are choosing to marry instead), it will be blow to political correctness, and to the idea that there was any kind of public demand for marriage to be redefined, rather than this being a doctrinaire desire driven by the political elite.

An interesting aspect of the latest French statistics is that a high proportion of same-sex marriages in their first year of availability took place in Paris. The 1,331 same-sex marriages in the French capital represented 13.5% of the total number of marriages in Paris, and 19.0% of the same-sex marriages throughout France. This means that the proportion of marriages which are of same-sex couples in the rest of France is only 2.48%.

A study published in September 2014 showed that children who live in a family with married parents are better behaved than those brought up by a single parent or parents who are not married.

The study, which looked at the circumstances of about 3,000 children aged three to sixteen, found that those with married parents showed lower levels of anti-social attitudes and hyper-activity. They were also more confident, kind and responsible.

This major official research, which is part of the Effective Pre-School Primary and Secondary Education Project, has been taking place since 1997 and regularly finds that living with married parents is the best environment for children.

Professor Edward Melhuish, an academic who carried out the recent research, commented that the 'extra support from living in a stable marital home tends to lead to a better environment over the long term for the child'.

Another study, published on 9 March by the Marriage Foundation, found that couples who marry before having children are considerably more likely still to be together after 15 years than partners who marry after having children, or who never marry. The proportions still together in each category are 76%, 44% and 31% respectively. Of the couples still together after 15 years, 92% were married.

Herry Benson, research director of Marriage Foundation, commented: 'The message of this research is clear. For any couple thinking of having children, their best chance of staying together in the long run is by getting married first.'

Rod Badams

Loneliness: society's scourge but the church's opportunity

'Ah, look at all the lonely people.' So sang the Beatles in 1966. It was seen as a daring comment on loneliness among older people, and highlighted an issue which was largely neglected in society. Loneliness is still a half-hidden and somewhat neglected subject compared with many other social problems.

Loneliness has been defined as including circumstances in which the number of a person's existing relationships is smaller than considered desirable or in which the intimacy for which the person wishes has not been realised.

'Thus, loneliness is seen to involve the manner in which a person experiences and evaluates his or her isolation and lack of communication with other people.' (Jenny de Jong-Gierveld, quoted in *The Lonely Society?* published by Mental Health Foundation)

In our society we pride ourselves on self-reliance, and so loneliness can carry a stigma for people who admit to it. If loneliness is temporary it is generally accepted as part of life, but alongside that acceptance there is a deep horror of being lonely as a long-term experience.

Almost half of all adults in England say they experience feelings of loneliness (BBC poll on 18 October 2013). London is said to be the loneliest place in the country with 52% claiming they felt lonely at some time, while the figure is only 45% in the South West. The Campaign to End Loneliness suggests that 800,000 people are chronically lonely in England.

One of the most popular current theories explaining loneliness is known as 'cognitive discrepancy theory'. It considers that loneliness is a discrepancy between desired and achieved levels in the quality and quantity of social relations. Essentially it sees loneliness as an emotion. For this reason the term 'social isolation' – which does not carry any emotional implications – is preferred in many references to the problem in public policy documents and in many discussions. Isolation describes factually the absence of social contact – with friends, or with family, or with people in the community, or even with access to services.

A startling set of figures was quoted in a survey undertaken for Relate and published in January 2015. Almost 5 million (one in ten) people in Britain claimed that they had no close friends.

The research also discovered that more than a third of working parents do not see or speak to their own children every day because they are too busy at work. Most workers have more contact with their boss and colleagues than with their own friends or close family. Despite that, four in ten people say they have no real friends in their workplace. Only a quarter of people keep in daily touch with a parent, and only one in seven has similar levels of contact with friends.

Loneliness, isolation and solitude

However, lack of people contact is not necessarily evidence of loneliness, which is a separate issue, not only from isolation, but also from solitude. For some people, solitude – 'alone and happy' – is sought after. It is often linked to self-discovery and becoming aware of one's deepest needs, feelings and impulses. Periods of solitude can be beneficial, especially in the midst of a busy and demanding schedule. Loneliness is not therefore the same as being alone, but in some cases isolation or solitude can lead to loneliness.

Conversely, it is a well-known saying that 'you can be lonely in a crowd'. There are people who experience loneliness even though they have frequent contact with others, and are by no means isolated or experiencing solitude. In such instances it is not the level of contact that is significant, but the feeling that the various relationships they experience are not providing the emotional support which people feel they need.

Perhaps a spouse has died and the immediate family to whom they best relate are a long way away. Or maybe a specific person is absent with whom there has been a close attachment, or the person lacks a significant social network of family, friends, neighbours or colleagues.

If the cognitive discrepancy theory is right, and loneliness is an emotion rather than a circumstance, then some elderly people would be more accurately described as isolated than lonely; they have no transport and no-one to offer practical help. This type of need has practical, rather than emotional, solutions, though the immediate availability of the needed resources may vary in each individual case.

What is clear from all the present evidence is that the reasons for loneliness, and the implications for the lonely person, will vary from case to case and can often be complex.

It is suggested, for instance, that men and women experience loneliness differently. Studies have linked male loneliness to the lack of a spouse or partner (The Zutphen Elderly Study, http//www.researchgate.net/publication/12771669). Women are said to develop relationships with a wider network of people. However, it would be wise not to assume any generalisations. Loneliness is a very personal feeling and there are differing explanations for each person's experience and emotional reaction.

One fairly common and unsurprising cause of chronic loneliness is the loss of particular relationships with other people, or the occurrence of significant life events or losses which cannot be reversed.

How harmful loneliness may be will be determined by how long it persists. When it becomes a settled state, it can create a persistent and self-reinforcing trend of negative thinking, which may express itself in behaviours and feelings that become chronic and long-lasting. The impact of loneliness on thought patterns cannot be overstated. It is this aspect that often makes responding to an individual's experience of loneliness so difficult.

If loneliness is not long-term and deep-rooted, many people cope with it on their own initiative by enlarging their network of personal relationships, by making new friendships, or by improving damaged relationships and restoring lost friendships. These changes are often facilitated by third parties or by the individual making special efforts.

Bereavement groups, social centres, special places and activities (churches, clubs, sporting activities etc.) may also help someone to overcome loneliness of the temporary or transient kind. Again, it is important to remember that there is no template solution to loneliness. Everyone is an individual. Some people are happy with a small circle of friends, while others feel the need to be accepted and approved by a larger number of people.

Loneliness and health

There is undoubtedly a link between acute loneliness and health problems. We all have expectations of having relationships with others. It is embedded in most of our experiences from home life, school and early social interaction. It is also what it means to be human. In Genesis 2:18, God remarked

about Adam that 'it is not good for man to be alone'. Being made in the image and likeness of God, we have an inbuilt desire to relate to others.

When our expectations are not fulfilled, there are physical reactions which alert us to that sense of loss. In his book *Loneliness: Human Nature and the Need for Social Connection,* John Cacioppo of Chicago University, a world expert on loneliness, sets out five tendencies which link loneliness with ill-health:

- Loneliness makes it harder for people to regulate themselves and leads to self-destructive habits, such as overeating or relying on alcohol. Loneliness appears to weaken will-power and perseverance over time, resulting in those who have been lonely for some time being more likely to indulge in behaviours that damage their health.
- Research shows that while younger people, whether lonely or not, are unlikely to admit to being exposed to causes of stress, middle-aged people who are lonely do report more exposure to stress.
- Lonely people are more likely to withdraw from engaging with others and less likely to seek emotional help, which in fact makes them lonelier.
- Tests show that loneliness affects the immune and cardiovascular systems.
- Lonely people experience more difficulties sleeping, and sleep deprivation is known to have the same effects on metabolic, neural and hormonal regulation as ageing.

Cacioppo has concluded, from a large study, that feeling extreme loneliness increases an older person's chances of a premature death by 14%. It is, in his opinion, more damaging than obesity or smoking.

Loneliness has been found to be a contributory factor in respect of all the following health-related conditions:

- Depression and suicide
- Cardiovascular disease and stroke
- Increased stress levels
- Decreased memory and learning skills
- Antisocial behaviour
- Poor decision making
- Alcoholism and drug abuse
- The progression of Alzheimer's disease and other forms of dementia
- Altered brain function

In relation to health, loneliness is not just an issue for the individual – it has implications for the country as a whole. High levels of loneliness in a community can have a detrimental effect on NHS services. In December 2014, NHS leaders warned that loneliness and isolation can increase the risk of emergency hospital admissions, with significant impact on the ability of the system to cope as demand increases. The problem of 'bed-blocking' is exacerbated by the fact that some older people have no family, friends or social structures to support them should they be discharged to their own homes.

Love and social interaction are known to be good for us; they promote health, and strengthen the immune system and cardiovascular function; they help us to recover more quickly from illness; a

happy marriage is known to lower blood pressure. In 2007 a report by the Office of National Statistics, entitled *Focus on the Family*, showed that married people of both sexes have better health. In 2006 a study of almost 3,000 nurses with breast cancer found that women without close friends were four times more likely to die than women with 10 or more friends. (*What are Friends For? A Longer Life*, by T Parker-Pope, *The New York Times*, 21 April 2009)

Stable relationships are also found to be beneficial to levels of happiness and well-being. In the Relate study, people who were married were 17% more likely to be happy with life than single people. It also suggested that people who are close to their parents in adult life are happier overall. Four in five of those who said they had a good relationship with their mother and father also reported feeling good about themselves, compared with three in five who had a poor relationship with their parents. The survey also showed that significant numbers of people had lost contact with their father because of marriage breakdown.

The impact of these family losses are significant in connection with the experience of loneliness in many people's lives. The maintenance, enhancement and re-establishing of family structures that foster good relationships play a major role in the alleviation of loneliness.

Loneliness and society

The Office of National Statistics social trends survey for 2008 suggested that although we are better off materially, we are in fact no happier than we used to be. Indeed, some observers suggest that the way we work and live is having a negative impact on our mental and physical health.

An individualistic society such as ours appears to produce an increase in common mental health disorders. Increasingly, people live alone in small apartments, work at home and socialise and even shop online. On the other hand some people are forced to commute long distances and work long hours at the office, leaving too little time to be with their families.

Busy streets and the increasing fear of strangers prevent children from playing outside as much as once they did, and so developing meaningful relationships with other children becomes less easy. All these factors lead to degrees of isolation which can develop into loneliness, which in turn can become acute and destructive.

The percentage of one-person households doubled from 6% in 1972 to 12% in 2008. There are now 7,067,261 single-person households in England and Wales which represents 30.2% of all households. Not only do more people live alone, but many British families are having fewer children. Added to these facts, the divorce rate has almost doubled in the last 50 years, and so the number of lone-parent families is also rising. Tragically, the number of people who die alone for whom 'pauper funerals' are arranged is also rising. Being alone is now a major feature of British life, and is the first stage of loneliness for many people.

It also has to be observed that local communities are changing. The old fashioned concept of the local community where everyone knew each other and where social relationships centred on the corner shop and the local post office, no longer exists. The closure of many local post offices has led to the loss of personal contact for many people and has also reduced the access to information about support services.

New technology has also affected inter-personal relationships. Use of the internet has led to a decline in face to face contact with people. In 2005 there were just under 2.4 million people working from home via computers. That is 8% of all people in employment. This is claimed to have both good

and bad effects. Some argue that it improves work-life balance, while others complain that they miss the personal contact with work colleagues through the day and actually feel more isolated. The growth of home entertainment systems has also led to the decline of many traditional opportunities to have contact with other people.

Loneliness in children

Dame Esther Rantzen, founder of Childline, has recently reported (8 January 2014) that the counselling charity has seen a huge rise in self-harm and online bullying. This is fuelled by family breakdown and the pressure on parents to work long hours. Cyber-bullying and so-called 'sexting' has risen massively during 2014. The charity has also seen a marked trend towards younger children dabbling in self-harm with a 50% increase in the last year alone among those aged 12. Ms Rantzen said children were now facing an 'epidemic of loneliness'.

Self-harm was mentioned in 47,000 counselling sessions in 2013 (a rise of 41% on the previous year). More than 29,000 children disclosed thoughts of suicide (up by a third). The number of teenagers seeking help over online bullying had almost doubled and even among primary school age children it had risen by 16%.

She said: 'If you are a single parent who is working long hours, or even both parents are working long hours, or there is alcohol and drugs around, it is isolating children and young people so they are not getting the emotional relationship, the loving relationship, they need.'

Loneliness in young adults

Students generally appear to be full of life and enjoying themselves. The reality is apparently very different. Analysis carried out by AXA PPP (November 2014) found that those aged between 18 and 24 are four times as likely to feel lonely 'most of the time' as those aged over 70. The poll used the same criteria as Britain's 'well-being' index and found that the student age-group was more likely to feel lonely than any other group. The biggest reduction in loneliness does not occur in their late 20s or early 30s when many form long-term relationships and start families, but in middle age. It falls to its lowest level among the over-70s, although other research has shown that loneliness then spikes again after the age of 80.

Explaining this phenomenon, Dr Mark Winwood, director of psychological services at AXA PPP healthcare, said: 'We tend to imagine that young people enjoy the benefits of a well-connected, socially-networked world but this doesn't mean they don't have hidden issues. Between the ages of 18 and 24, people commonly experience a high number of transitional life events that can contribute to feelings of loneliness.'

These results are confirmed in a study undertaken in 2010 by the Mental Health Foundation which found that loneliness was a greater concern among young people than the elderly. Those surveyed in the 18-34 age group were more likely to feel lonely often, to worry about feeling lonely and to feel depressed because of loneliness than the over-55s.

Loneliness in older people

By 2030 the number of older men living alone is expected to rise by two-thirds, according to a study by Independent Age and the International Longevity Centre-UK published in October 2014. According to this research, more than 1.2 million men over 50 in England say they suffer from isolation. We have already noticed above that men are more likely to experience loneliness than

women in later life. This is because, as they get older, men have significantly less contact with children, family and friends than women do. Almost a quarter of men living alone have contact with their children less than once a month, compared with 15% of women. Men's social networks often decline after the death of a partner because women tend to do more to organise and encourage their own social life.

Loneliness is a major issue for older people in the United Kingdom. Here are a few statistics released at a conference jointly organised by AgeUK and the Campaign-to-End-Loneliness:

- 17% of older people are in contact with family, friends and neighbours less than once a week and 11% are in contact less than once a month.
- Over half (51%) of all people aged 75 and over live alone.
- Two-fifths of all older people (about 3.9 million) say the television is their main company.
- 63% of adults aged 52 or over who have been widowed, and 51% of the same group who are separated or divorced report feeling lonely some of the time or often.
- 59% of adults aged over 52 who report poor health say they feel lonely some of the time or often, compared to 21% who say they are in excellent health.

These statistics are just a sample of the plethora of information outlining the nature of loneliness affecting older people in our society.

Silver Line, the charity for older people founded by Esther Rantzen, reported in November 2014 at the end of its first full year that it took 300,000 calls, most of which were about feeling lonely and isolated. More than half the callers told the helpline that they had no one to talk to. AgeUK reported that around one million people regularly go an entire month without speaking to anyone beyond shop assistants and tradesmen who might call.

Loneliness and the local church

The range of statistics, facts and opinions already quoted must surely suggest to us that the church has a responsibility to take action in the light of this critical situation. The report by the Church Urban Fund quoted at the beginning of this article lists a number of things that the Anglican Church in general is doing, and they are to be commended for their social conscience and concern.

There have also been some small initiatives by government and charities like AgeUK. However, the local church has the opportunity to make its own unique and distinctive response.

Before considering what local churches may do, it is useful just briefly to remind ourselves of some biblical principles. Apart from the verse already quoted in Genesis 2:18, references to being lonely arise throughout Scripture. Hagar in Genesis 16, David in Psalms 22:1 and 25:16 and the Apostle Paul in 2 Timothy 4:9-12 all express degrees of loneliness. But the supreme example is, of course, the Lord on the cross when the full horror of bearing our sins is expressed in that terrible cry: 'My God, my God, why have you forsaken me?'

The Bible's awareness of loneliness comes through in many places, and the nature and ministry of the local church is the ideal response to loneliness. The frequent occurrence of the phrase 'one another' in the New Testament gives ample testimony to the normal inter-connectedness of the people of God and is the answer to loneliness.

The church is also manifestly called to minister to the deprived and the destitute. In our present society the lonely must feature high on the list of those who meet that criteria. So what can the local church do?

Be Aware – The aim of this article is to call attention to the reality around us. Most local churches are usually very busy places and to raise yet another social issue which needs urgent and significant levels of consideration and input may seem like the last straw. But the facts quoted above cannot be denied. John Cacioppo, to whom we have already referred, has concluded that older people particularly need three levels of connectedness, in order to avoid or alleviate loneliness:

- Intimate Connectedness – a close friendship with one or more people where confidences may be shared
- Relational Connectedness – face to face contact with a group of people who are really interested and concerned for the older person
- Collective Connectedness – being accepted in a group and having a real sense of belonging

It is remarkable how closely these three levels of connectedness match the nature of the corporate life and relationships which exist within a local church. In addressing the issue of loneliness, the church's first requirement therefore is to recognise the prevalence of this curse among people around us, and then to think about possible responses.

Be sensitive and thoughtful – In addition to being aware, there is also a need to recognise that loneliness can as easily be an issue within the church as well as outside. It is not unusual for some people within almost any congregation to feel lonely. Someone who has recently moved into the area and just started attending the church may find it difficult to adapt to a new culture and new ways of doing things, or someone visiting the church may find that the response received is not what they had been looking for.

A chronically lonely person visiting a church may react in unexpected ways to genuine and kind welcomes from people in the congregation. Loneliness can distorts the way that some people think. For these reasons churches need to develop sensitivity and awareness about loneliness and not expect everyone easily and readily to fit into the established pattern. Sadly, personal experience suggests that the expectation of automatic conformity is the predominant response of most churches. Anecdotal evidence suggests that the churches which consider themselves the most welcoming are often the ones with the most rigid approach to visitors.

Sensitivity to lonely people is also a vital element in outreach and evangelism. Churches deciding to develop programmes and responses to loneliness will need to be flexible and undemanding of those with whom they make contact, especially in the early stages of building relationships. Contacts can be lost because the lonely person cannot handle the expectations which they feel are being put upon them. Their loneliness may well have destroyed the self-confidence that is necessary to respond to others.

Be welcoming and inclusive – Bearing in mind what has already been said, churches need to address the way in which they welcome people and the expectations which they put on people. Gentleness and tenderness which shows genuine concern and love will so often break down the self-defences of the lonely person. That pervading sense of the love of God within a Christian community, and the way in which church members relate together, should be easily felt by the visitor, and will inevitably draw them into the beginnings of a relationship. Acceptance of people with disabilities and older people will show the reality of that love. John 13:34-35 clearly sets the standard of practice which all churches should be endeavouring to produce.

Whatever groups, activities or outreach approaches are adopted, churches should guard against the danger of appearing to be patronising. Doing things to and for people, even out of a generous heart, can be perceived by the vulnerable as being somewhat condescending. Showing people that what you do is because you value them and are deeply concerned for their best interests is a vital part of winning the confidence of lonely souls. This is true inclusiveness. It enables connections to be built that may turn out to be utterly life-changing.

Be proactive and imaginative – It would be easy at this point just to list the range of things that churches might consider doing, but, first and foremost, the great difficulty of how to contact lonely people has to be considered. Lonely people are often as they are because they have become almost invisible in society. They do not wear badges which announce their loneliness and, while they may have certain lifestyle factors and behavioural traits that can be identified, these things only become apparent once some sort of contact has been made.

Therefore churches need to develop a reputation within their local area which indicates to people that they will be welcomed and treated with respect. At the same time, specific efforts to contact people can be made. Visiting homes can be useful in this respect, and many churches have found that setting up befriending services where regular contact with people is established can be an effective initial approach.

Having developed some means of contacting people, a variety of activities can then be pursued. There are many in which churches already engage, such as day centres, lunch clubs, specialists groups (for young mothers and babies, or for people with disabilities, for example). Some churches have reached out to more specific groups of people who might be lonely with reading and other special interests groups (for instance knitting and sewing, arts and crafts, bowls and keep fit).

Many such groups will already exist within the local community, and churches may want to consider whether to encourage their members to join those groups and make contact in that way. Involvement with local charities and especially charity shops can also be a significant contact point. Advice services of various kinds can also be developed. All these potential activities have two common features – they are productive ways of making contact with people, but they are also demanding on church members' time.

Faced with all the challenges which loneliness in the community presents, church leaders will need to be imaginative and wise. The answer to loneliness is not the range of activities we may establish, however good these may be. It is to bring people to know Christ and become part of God's family. Only then will a true answer to loneliness begin to be found. Within the bosom of the local church and in personal fellowship with the Lord himself there is solace, comfort and constant support.

Times of loneliness will still come to human beings in a fallen world, but through caring brothers and sisters, and by the ministry of the gracious Spirit, an answer is always found. We often end our public acts of worship with the benediction, which includes reference to *the fellowship of the Holy Spirit*, and that wonderful reality is the God-given answer to loneliness.

Roger Hitchings

An early assessment of the new school standards regime

The Education (Independent School Standards) Regulations, 2014, came into force on 5 January 2015, and were immediately embroiled in controversy.

Firstly, the Regulations themselves, more prescriptive than the published standards they replaced, have been attacked over the new requirement that schools must 'actively promote' fundamental British values, such as 'mutual respect and tolerance of those with different faiths and beliefs'. One specific obligation is that schools must ensure that principles are actively promoted which 'encourage respect for other people, paying particular regard to the protected characteristics set out in the Equality Act 2010'.

As one of these 'protected characteristics' is sexual orientation, this has left faith schools in particular concerned about what freedom this allows them to make their beliefs clear in respect of same-sex marriage. The reference to 'British values' has been criticised for 'vagueness', allowing too much room for subjective or arbitrary interpretations by inspectors, and for their personal beliefs to influence Ofsted reports.

Just as strongly, the new Regulations have been attacked because of the unaccountable power they appear to have put into the hands of Ofsted, the schools regulator. In a statement on 28 November 2014, the Church of England's chief education officer, Nigel Genders, claimed that Ofsted was being turned into 'a form of secret police'. Mr Genders alleged that the watchdog was making 'nuanced judgments' about aspects of school life which had little to do with education.

Another concern was that the new Regulations were requiring Ofsted inspection teams to 'behave in ways which do not respect the religious ethos of faith schools'. A further more specific criticism is that during some of the individual school inspections, young children have been subjected to invasive and inappropriate questioning. Ofsted's approach to inspections of Christians and Orthodox Jewish schools has been described as 'hostile' by one critic, and by another as evidence of a 'vendetta'.

In response to this chorus of criticism, we need to remind ourselves that the new regulatory arrangements have been introduced in a piecemeal manner. The Regulations themselves were published in two stages – the first on 29 September 2014 and the second on 27 November 2014. In their entirety they took effect on 5 January 2015. The government's guidance to Ofsted has only appeared subsequently, and Ofsted's guidance to its own inspectors even more recently. Many of the 600 inspections of faith schools which have taken place between September 2014 and February 2015, including some of those which have been the subject of particular controversy, will have been made before some of the Regulations were finalised, and before all the guidance was in place.

That is not to say that Ofsted has not been guilty of wrong approaches and errors of conduct and judgment, but – except for the extent to which individual inspectors may have been cavalier and motivated by their own presuppositions – these must be judged on the mandate to which the regulator was working at the time, not in retrospect. Likewise, individual school inspectors can be blamed for failing to act on the guidance which they were under instructions to follow, but not for failing to implement revised guidance, based on the new Regulations, which they had not yet received.

If there is no systemic hostility on the part of the government or of Ofsted against faith groups, the government only has itself to blame for giving the impression that there is, and for the controversies

which have arisen. These Regulations have been unnecessarily, depressingly and disastrously rushed into effect – disastrously in particular for the reputation and credibility of Ofsted.

During a few months of confusion, Ofsted, instead of merely adhering to the old Regulations, appears to have viewed itself as obliged to anticipate the new Regulations, and make its own judgments as to what the new terminology meant, instead of waiting for the government's formal clarification and guidance. That such a subjective level of regulation was given scope to occur, and to be regarded by those involved in the inspection process as appropriate, is entirely the government's fault. In the light of the 'Trojan Horse' scandal in Birmingham earlier in the year, there had been more than the usual level of press and media interest in the new Regulations, and this heightened focus, and the pressure it would put on the regulator and its staff in the period immediately prior to their final approval, could easily have been foreseen.

In the voids and confusions which the government's haste created, inappropriate questioning, for example, is precisely the kind of calamity which was likely to occur.

Now that the Regulations and guidance are fully in place, there will be no excuse for Ofsted failing to achieve the consistency of judgment, and adherence to the government's guidance to the Regulations, which is perceived to have been lacking in some earlier individual cases. The evidence gathered from now on will determine whether Ofsted is capable of being an effective and impartial regulator of school standards, or whether it has an agenda of its own and needs, in the words of one critic, to be 'reined in'.

Having dealt generally with the 'headline' issues, this article seeks to explore the main controversies which have occurred, to review the Regulations as a whole and, in particular, the issues arising for faith schools from the implementation of the Regulations by the schools inspectorate, Ofsted.

The controversial nature of the new Regulations, and the way in which they have been implemented, are conveniently summarised by a short article appearing on The Conservative Woman (TCW) website posted on the 30 January this year entitled *Ofsted's Crazy Plan – Close the best schools and leave the Trojan Horse ones in peace.*[1] The article refers to the appearance of Sir Michael Wilshaw, head of the Ofsted, before the Education Select Committee on 28 January 2015[2].

Following concerns raised in the wake of a small number of high profile, highly-disputed school inspections conducted since the introduction of the new Regulations, Alex Cunningham MP said he was receiving mail which claimed '…that there is a political agenda and Ofsted have it in for Christian schools'. Sir Michael's reply was 'absolutely not'. The TCW article described Ofsted's approach to the schools as a vendetta and Sir Michael's assertion as 'tosh', citing as justification the two inspections of Christian schools which have attracted most of the media attention, and a view from the Jewish school community.

Before looking at the details of the controversy through the TCW lens, it is useful to remind ourselves of the changes introduced by the new Regulations. They apply to independent schools of which there are approximately 2,360 in England and Wales and around 2,500 across the UK. Similar requirements and standards for maintained schools were introduced in January 2015 through Ofsted's School Inspection Handbook.[3]

Part 2 of the Schedule to the Regulations[4] covers the standard required for the spiritual, moral, social and cultural (SMSC) development of pupils. It is prescriptive in nature and changed key requirements in the January 2013 Regulations as follows:

[2013 Regulations] Ensure that principles are promoted which encourage pupils to respect the fundamental British values of democracy, the rule of law, individual liberty and mutual respect and tolerance of those with different faiths and beliefs.

[2014 Regulations] …Actively promotes the fundamental British values of democracy, the rule of law, individual liberty and mutual respect and tolerance of those with different faiths and beliefs.

[2013 Regulations] Ensure that principles are promoted which assist pupils to acquire an appreciation of and respect for their own and other cultures in a way that promotes tolerance and harmony between different cultural traditions.

[2014 Regulations] Ensure that principles are actively promoted which further tolerance and harmony between different cultural traditions by enabling pupils to acquire an appreciation of and respect for their own and other cultures. Ensure that principles are actively promoted which encourage respect for other people, paying particular regard to the protected characteristics set out in the Equality Act 2010.

Part 1 covers the quality of education provided by the school – broadly the quality of curriculum, plans and schemes of work and the teaching in a school. It does not apply to academies and free schools because curricular matters are covered separately in their funding agreements. Part 1 requires for example:

> That in their policies, plans and schemes of work, schools:
>
> - do not undermine the fundamental British values of democracy, the rule of law, individual liberty, and mutual respect and tolerance of those with different faiths and beliefs and,
> - have personal, social, health and economic (PSHE) education which encourages respect for other people, paying particular regard to the protected characteristics set out in the 2010 Equality Act;
>
> Teaching which:
>
> - does not undermine the fundamental British values of democracy, the rule of law, individual liberty and mutual respect and tolerance of those with different faiths and beliefs; and
> - does not discriminate against students contrary to Part 6 of the Equality Act 2010.

The changes to the 2013 Regulations boil down to the use of the term ‘actively promote’ with regard to British values, and the introduction of the references to the protected characteristics set out in the 2010 Act, coupled with the requirement in Part 1 not to undermine British values or discriminate.

The term ‘actively promote’ is not defined but it seems clear that the intention is to achieve a clear and positive educational effect which is evident in the planning (including curriculum and schemes of work), in the delivery of the plan (the teaching) and in the product outcome (the knowledge, understanding, attitudes, views and behaviour of pupils). This positive requirement is likely be the most difficult aspect of the new Regulations to achieve for most schools.

As with the 2013 Regulations, the new Regulations do not require the promotion of different faiths and beliefs themselves; neither do they require the promotion of the newly-introduced protected characteristics. What is required, broadly, is the active promotion of respect and tolerance for individuals whose lifestyles and beliefs are different. The government made this plain in its response to the Consultation on the changes to the Regulations:

'A misconception in the Consultation responses was that the proposal in standard 2(2)(d) in relation to PSHE would require schools to "promote the protected characteristics". It is unclear in any case how there could be a requirement to promote the characteristics themselves. But to be clear, the proposed standard does not mean, for example, that schools must promote alternative lifestyles or same sex marriage. Rather, the proposed standard requires schools to encourage pupils to respect other people, even if they choose to follow a lifestyle that one would not choose to follow oneself.' [5]

The Catholic Independent Schools Conference, commentating on the Regulations, notes that: 'One interpretation of the amendments and particularly the wording "actively promote" is that they may cause, for the first time, litigation concerning what is taught in class, as some teachers may have concern or difficulty in balancing the need to promote "tolerance of those with different faiths" with promoting the different faith itself. There may also be tension arising out of the ambiguity of the proposals, there being no definition of "actively promote" or "British values". However, most schools will likely cope with the amendments and already do so.' [6] This extract nicely summarises the key issues arising from the requirement to 'actively promote.' It also indicates the significance of the issues and is optimistic that the bulk of independent Catholic schools will cope.

The primary questions that schools, and in particular faith schools and schools with a religious ethos are therefore required to address are:

- What do we have to do and teach in order to actively promote the required tolerance and respect?
- What evidence is required to demonstrate the standards have been met?
- Can the standards be met without, for example, compromising the faith ethos of a school or the beliefs of individual teachers?

It is not the aim of this article to attempt to answer these questions in detail, but to look at the recent controversies, and some of the evidence for likely success in addressing the new requirements, in order to guide our prayers. Running a school and teaching pupils well is hugely demanding and difficult. Much support and prayer is needed for those on the front line, including Ofsted inspectors.

Re-engaging with the TCW article, if Sir Michael's statement refuting a vendetta against Christian schools is *tosh* or, in more ordinary language, *complete nonsense*, what is the evidence?

If there is a systematic, organisational vendetta by Ofsted then we might expect to see it reflected in substantially higher percentages of poor Ofsted ratings (poor = a rating of 3: *requires improvement* or 4: *inadequate*) for faith schools than the averages across all schools. In an article in *Catholic Herald* on 12 February 2015,[7] Sir Michael points out that around 600 schools of religious character (the formal term used to describe faith schools) had been inspected since the start of the new school year (September 2014).

There are around 7,550 Christian and Jewish faith schools in England and Wales. Of these, 383 are designated Christian, 4,904 Church of England, 43 Methodist, 2,113 Roman Catholic and 103 Jewish.[8] In addition to this broad faith community, there are 168 Muslim schools and small numbers of interdenominational and other faiths. On a pro rata basis, we would therefore expect that of the 600 schools referred to by Sir Michael, 30 would be Christian, 385 CoE, 8 Jewish, 4 Methodist, 13 Muslim and 166 RC.

Taking figures from Ofsted's annual report for 2013/14[9] for the percentage of schools receiving an inspection rating of 3 (30%) or 4 (7%), and applying the figure of 37% to our assumed numbers of

inspected schools, we get: 11 Christian schools with a rating of 3 or 4, 142 CoE, 3 Jewish, 1 Methodist, 5 Muslim and 61 RC. This is a total of 218 Christian and Jewish schools with a rating of 3 or 4. These numbers could be substantially different from the reality because we don't know how Ofsted selected the 600 schools. Nor is it clear, without studying all 600 individual reports, what factors and features determine the difference between higher and lower ratings – for example, whether the judgment is based on one particular looked-for factor or feature, or on a variety of different reasons in each individual case.

If Ofsted was pursuing a vendetta against Christian or more broadly faith schools, then we might expect to see substantially higher numbers of these schools receiving the lower ratings than the figures we have calculated. If significantly higher was assumed to be 50% more, then around 330 schools; if 100%, then around 440 schools.

The TCW article says: 'Christian and Jewish schools up and down the country are being subjected to the same type of questioning: aggressive, anti-religious and sexually inappropriate' giving the impression that large numbers of schools are involved. However, examples from only six schools are provided throughout the article and the claims cover not only aggressive questioning but also other failings and downgrading from previous inspections. The article states: 'The targeting of Christian and Jewish schools was confirmed yesterday by Rabbi Nessanel Lieberman, a registered schools inspector, who told a meeting… the education watchdog had "an agenda to knock down our schools…" No significant evidence was presented to support the Rabbi's view. Seven days after Rabbi Lieberman's comments were reported in the *Jewish Chronicle Online,* another article appeared reporting the view of a head of a Jewish primary school, also an Ofsted inspector. He said: 'The idea that Ofsted is unfairly targeting Jewish schools is "preposterous".' [10]

Newspapers reporting the number of Christian and Jewish schools receiving a 3/4 Ofsted rating since September 2014 identify around a dozen schools. Of course, we would not expect every Ofsted inspection resulting in a 3 or 4 rating for a faith school to be reported, but we would need to see the details of far more than a dozen schools if a charge of systematic bias within Ofsted was to be made out. Even then, we would need to ensure that it was inspectorial bias and not, for example, a common characteristic of the schools themselves, which, rightly or wrongly, was being penalised by a downgrade. In the latter circumstances, there might still be grounds for being critical of Ofsted, but not for reasons of anti-faith bias.

The reported figures, though the individual details cause significant concern, are well within the expected averages taken across all types of Christian/Jewish schools. They do not support the notion of a vendetta against Christian/Jewish schools, but neither do they prove Sir Michael's claim that the suggestion of a vendetta is total nonsense. Soundbite defamation on both sides on this scale is one reaction to a controversy, but surely justice requires a proportionate effort to be made to obtain, and to be willing to consider, the evidence which either supports or denies it. This does not mean that serious questions should not be asked, or that views about and interpretations of the circumstances of an individual case are not valid. However, authoritative judgments require substantial, reliable evidence.

Such statistics as are so far available provide no evidence of Ofsted bias in the context of the new Regulations. But what of individual cases? It is clear from the published details of the Ofsted inspections of three Christian schools which hit the headlines with such force – Trinity Christian School, Reading; The Durham Free School and Grindon Hall Christian School, Sunderland – that there are particular and significant concerns which merit the challenge each school has mounted following their respective inspections.

In the case of Trinity School, the main concerns raised by the partial inspection in October 2014 were that:

a) the previous full Ofsted report in November 2013 gave it a rating of *good* for all of the key inspection
b) the school was told by the single inspector carrying out the inspection that it must bring in representatives of other faiths to lead assemblies and lessons in order to demonstrate compliance with the new standards
c) the school must provide evidence that the school 'actively promoted other faiths'
d) the school was also warned that it should teach children about the people with protected characteristics under the Equality Act, such as sexuality, and must not teach them that 'certain lifestyles are wrong'

Concern (a) is perfectly legitimate and the school has a right to know and understand exactly what has changed to justify the rating indicated at the time of the inspection. Concern (b) is the opinion of the inspector and the use of 'must' has no real force and can be shown to be unreasonable in the circumstances. Concern (c) indicates that the inspector was not following the new government guidelines (though the inspection in fact took place before those guidelines were published).

The government is at pains, as noted above, to point out that actively promoting other faiths is not a requirement of the new Regulations. The wording of the warning by the inspector in Concern (d) is ambiguous, and further clarification would be necessary before the school could do anything with it. The inspection report for the Trinity inspection has not yet been released by Ofsted and, looking at the claims made by the school about the inspection, there appear to be grounds for believing that the inspection did not meet reasonable standards of quality and that the conclusions might well change if the report ever comes to light. In the year 2013/14 Ofsted received 412 complaints from schools and changed the ratings/sub-ratings in 26 cases.[2]

The Durham Free School and Grindon Hall Christian School inspection concerns are set in a more complex context and are more difficult to disentangle. Despite this, there appear to be two main strands to the complaints raised by the schools and which to a degree overlap with those raised by the Trinity case: inappropriate questions, attitudes with regard to sexual matters, and more general concerns about the overall quality of the inspection – particularly the justification and evidence for a number of the key conclusions of the reports.

The issue of what is appropriate or inappropriate when questioning children on sexual matters, in the context of the new regulations, is firstly a matter of standards. In our pluralistic, liberal society we would expect the standards and sensitivities of Christians on these matters to be higher than the average. Indeed, one of the reasons for opening Christian schools is to teach, demonstrate and operate to higher standards in these areas than those found in many schools without a Christian ethos. We might also expect the standards assumed by Ofsted to be closer to the standards assumed by society generally than those practised by Christians.

Ofsted has withdrawn guidance published in September 2013 for Section 5 inspections entitled *Exploring the school's actions to prevent and tackle homophobic and transphobic bullying*[11] with its suggested list of matters to explore with pupils, teachers and governors. The withdrawal of this guidance is reported to reflect a move from specific guidance to general training. However, this does not necessarily mean that inspectors cannot or do not need to use this guidance, the aim of which is to discover whether or not homophobic bullying is a significant feature in a school and what the school is doing to deal with it.

It is clear from Sir Michael's various statements on this matter that his key concern is the discovery and removal of homophobic bullying. It is also clear that he sees this as a difficult task, and it is. Given this task and our societal norms, it would not be surprising if in some cases a line which no-one appears to have clearly drawn is breached.

The question which faith schools need to answer regarding homophobic bullying is whether we are prepared to tolerate it. If not, then how are we going to ensure that it is not present in our schools? How do we know that it is not, and how do we demonstrate that it is not? Some, perhaps many, faith schools, seem to be addressing these questions and to be meeting the standards. If they are doing this and maintaining biblical standards, then their approach should be tried by others.

A corollary of the cursory analysis above is that 378 (63%) of the 600 schools inspected between September and February received a 2 (Good) or 1 (Outstanding) Ofsted rating. This means that in one way or another large numbers of schools at very least coped adequately with the new Regulations insofar as they were applied. If Sir Michael is willing to recognise by the award of top ratings the conduct of good faith schools, can we not find a significant set of schools from this number whose approach and results when considered together powerfully demonstrate the effectiveness of a biblically-derived approach?

If for some reason this approach is impracticable or unsuccessful, what place is there for protest? Protest is appropriate and indeed necessary for a number of reasons. Firstly, at the current time we do not know whether the experiences of Durham Free and Grindon Hall schools actually reflect the questioning approach and standards expected by Ofsted inspectors in general. These cases may not be typical of the spectrum of questions and approaches used more widely.

With 600 schools of a religious character inspected and assuming, say, an average of two or three inspectors per school, we have a total of between 1,200 and 1,800 inspectors reporting. The three school inspections considered here were covered by six inspectors – much too small a number to be considered representative. A perfectly justifiable aim in protesting is to help ensure that if these and other inspections are significantly removed from the Ofsted norm, then the lessons must be learned and the process improved. Sir Michael has supported his inspectors in these particular cases but this does not mean that change will not take place behind the scenes.

Secondly, if these examples do represent the norm, then protest is necessary as a check to ensure the norm is challenged and shown to be unacceptable. High standards always slide in the absence of checks. If inspecting homophobic bullying is difficult, then flexibility will inevitably be necessary in the approach taken to inspect it; otherwise there would be a clear, well-defined approach and inspection of this subject area would not be difficult.

As noted, the overall quality of inspections has also been brought into question by these cases. Again, we should expect variability amongst inspectors because that is the nature of complex, non-box-ticking assessment processes. Considerable effort is usually put into ensuring consistency of approach and output in organisations such as Ofsted, but inevitably variability and inconsistency will manifest itself to some degree – especially during a period when new standards are being implemented.

Ofsted last month announced a new inspection framework based on higher-frequency, shorter inspections and a common inspection framework. Clearly concerned over quality, Ofsted said it was 'determined to recruit and retain inspectors of the highest calibre to carry out inspections using the new framework. We have tightened up our selection criteria and quality assurance procedures. All contracted Ofsted inspectors will have to go through a stringent assessment process and assessed

training, with clear performance measures in place. We believe that these changes to our inspection methods and the inspection workforce will drive even greater consistency and quality in our inspections'.

Pointing out and protesting against poor quality is necessary, in order to help to ensure that these types of initiative happen and are then effectively implemented. Clearly we should be grateful and supportive of those who pick up the baton of protest and are committed to protecting and promoting biblical standards within our schools.

The TCW article ends by referring to the meritorious examination achievements of Grindon Hall School compared with other schools in the area and implies that Ofsted's poor report on the school can only be explained in terms of a left-wing political agenda and attack. The assertion may be true, but, as already discussed, work on more data is necessary to demonstrate that this is a systemic feature of the Ofsted strategy. While Grindon Hall School's exam results are justifiably a source of pride and praise, the Department for Education (DfE) provides sets of data[12] that allow schools to be compared with other similar schools; that is, schools where pupils have similar prior attainment and are predicted to achieve similar outcomes for their pupils. These comparisons, although having weaknesses, are considered a more reliable measure of the quality of teaching and learning within a school.

If we evaluate Grindon Hall School in this broader context, we find that in 2013 it was 33rd in a group of 55 similar schools, based on Key Stage 4 results and 35th out of 55 similar schools in 2014[13]. At Key Stage 2 it was 114th out of 125 similar schools in 2013 and 103rd out of 125 similar schools in 2014. In 2013, of the 10 schools above and the 10 below Grindon Hall in the KS4 table, all except one had either a rating of 1 or 2 at the last Ofsted. The school two places above Grindon had a rating of 3. In 2014, all 20 schools, except two who had not received a rating, were rated either 1 or 2. At KS2 in 2014, two schools above Grindon had a rating of 3, the rest having 1 or 2, and two schools below Grindon had a rating of 3, the rest having 1 or 2.

These comparisons tell us that Grindon Hall is in very good company and that its last Ofsted rating of 4 is unique among the 20 schools around it in both the KS4 and KS2 comparison tables. However, other schools, particularly at KS2, are receiving ratings of 3, so the academic performance/exam results used in these tables, although indicative of standards, cannot be relied upon to predict the outcome of an Ofsted inspection or identify any strong or particular bias of inspectors.

To conclude that Grindon Hall is being attacked on the basis of its exam results requires that we also conclude, on the same level of evidence, that a mixed set of at least five other schools similar to Grindon Hall in pupil ability are being attacked by Ofsted, but to a lesser degree. Even though the comparisons do not tell us that Ofsted is targeting Grindon Hall in some particular way, they do warrant that we seek a more detailed explanation. The analysis and consideration of these details will eventually allow a fair appraisal and judgment to be reached on Ofsted's performance on these matters.

In conclusion:

- There is no evidence to justify the view that Ofsted is engaged in a systematic attack on faith schools
- Judgments on the performance of schools and the schools inspectorate needs to be based on a careful review of relevant and detailed data

- It is not clear on what basis the 600 schools inspected between September 2014 and February 2015 were selected. Without studying all 600 reports in detail, it is not clear whether the ratings awarded were based on systemic factors or individual circumstances.
- At least one faith school organisation, although concerned about the new Regulations, is comfortable that the standards can be met
- Evidence suggests that there should be substantial numbers of faith schools which are meeting the new standards and can therefore provide suitable help and assistance for schools who are having difficulties
- Appropriate protest against perceived poor Ofsted inspections is necessary in order to help ensure that inspectorial standards on these matters are, where necessary, improved, refined and maintained
- Overseeing and running a school and teaching pupils well is hugely demanding and difficult; much support and prayer is needed for those on the front line and for those with inspection responsibilities

The above article is based on one submitted by an independent, bona fide contributor, who, for professional reasons, has asked not to have his name disclosed. In the understandable circumstances, we are happy to agree to this request.

Note: Since this article was written, The Durham Free School has been issued with a Notice of Termination of Funding Agreement by the Secretary of State for Education, which means that the school will close.

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LIFE

Abortion

The Abortion (Sex-Selection) Bill

Tuesday 4 November 2014 was an historic day in the House of Commons. It was the day that Fiona Bruce MP introduced her Ten Minute Rule Bill, entitled The Abortion (Sex-Selection) Bill. Its purpose was to underline that UK law prohibits abortion on the grounds of gender. It would also provide an opportunity to examine what sort of support can be offered to those under pressure to abort a baby on the basis of gender.

Back in March 2014, the Prime Minister, David Cameron, had told the House of Commons: 'The Government have made clear that abortion on the grounds of gender alone is illegal. The Chief Medical Officer wrote to all doctors on 22 November last year [2013] reminding them of their responsibilities.'

The historic outcome of 4 November 2014 was that voting on the Bill produced a thumping majority of 180 in favour with 1 against – the latter was Glenda Jackson MP. Read all about it here: http://www.publications.parliament.uk/pa/cm201415/cmhansrd/cm141104/debtext/141104-0001.htm#14110444000001 This was the first Parliamentary win for the pro-life movement since the Abortion Act 1967 was enacted.

However, there was also an important corollary to that vote that was not so obvious. If Parliament opposes sex-selection abortion, then it also opposes abortion *per se*. If unborn baby girls deserve protection from the abortionist's scalpel then so too do baby boys. Moreover, if this is a matter of sex equality, then all unborn children have a right to be protected from harm and death. In other words, the Abortion (Sex-Selection) Bill recognises the humanity and value of the unborn – all of them.

The Second Reading of the Bill was expected to take place on 23 January, but to make progress it needed to be granted government time. This was deemed unlikely. Therefore Fiona Bruce allowed her Bill to be incorporated into Part 5, Section 65 of the Serious Crime Bill (2014-2015) currently going through Parliament. At least 104 MPs signed in support of her amendment. It states: 'Nothing in section 1 of the Abortion Act 1967 is to be interpreted as allowing a pregnancy to be terminated on the grounds of the sex of the unborn child.'

The amendment had two aims. First, it would clarify that sex-selective abortion is impermissible in UK law. Second, Clause 74(2) of the Bill would oblige the government to think creatively about ways to help women who are under pressure to have sex-selective abortions.

Fiona Bruce's amendment was debated on Monday 23 February, and she bravely and clearly presented her case to clarify the law. She was supported by colleagues such as David Burrowes, Sir Edward Leigh, Dominic Grieve and Jim Shannon – but notably no women of note. Those opposing the amendment, led by Ann Coffey, Sarah Wollaston and Fiona Mactaggart, put forward a counter-amendment, New Clause 25, which would require the collection and review of evidence of sex-selective abortion in England, Wales and Scotland. Many seem still to believe that sex-selective abortion is merely a myth.

Pressure had been brought to bear on Labour MPs not only by the TUC but also by a letter from Shadow Cabinet members Yvette Cooper and Liz Kendall, urging them to vote against New Clause 1.

Moreover, it was obvious that the phrase 'the unborn child' was causing considerable unrest among the pro-abortionist MPs – they would hate to confer 'personhood' or any such human attribute on the human foetus.

The last word in the debate was from Sir Edward Leigh, who, with typical robustness, stated: 'If the whole House is agreed that it is morally repugnant to destroy a foetus simply on the basis of its gender – it is usually a girl – let us make that explicit in law.' At the end of the debate, the House divided and the amendment was lost by 201 to 292. The full *Hansard* account is here: http://www.publications.parliament.uk/pa/cm201415/cmhansrd/cm150223/debtext/150223-0003.htm (scroll down).

Much later that evening, when the House voted on New Clause 25, the result was Ayes 491, Noes 2. It was a better-than-nothing vote. Now the Secretary of State must be held to account to ensure that the evidence is collected and reported. This process is fraught with difficulties and concerns: Which doctors will confess and supply that evidence? Which women will admit to having such abortions? How half-hearted will the Government investigations be? In the meantime, the law remains unclear and open to several interpretations. This cannot be good.

Sex-selection abortion prosecutions

On 5 December 2014, Dr Prabha Sivaraman appeared at Manchester Magistrates' Court accused of offering an abortion based on an unborn child's gender. The case dates back to February 2012 when a sting, launched by the *Daily Telegraph*, uncovered several doctors operating outside the provisions of the Abortion Act 1967. Although the Prime Minister, David Cameron, announced the illegality of sex-selection abortions, the Crown Prosecution Service (CPS) decided not to prosecute. This Sivaraman case is now the result of a private prosecution launched by a pro-life campaigner, Aisling Hubert.

In December, the District Judge, Khalid Qureshi, chose to 'send it up'. The case was therefore committed to Manchester Crown Court for a preliminary hearing on 6 February. On that date, lawyers for Aisling Hubert asked Judge Martin Steiger QC to issue a summons against the *Daily Telegraph* to provide the full video evidence so that they can pursue the private prosecution before a jury. Lawyers for the newspaper opposed handing over the requested video. The Judge refused the summons application and said he would give his reasons in writing within 14 days. Moreover, there is now the fear that Dr Sivaraman's lawyers may have asked the CPS to take over the case and then drop it.

In a similar case on 26 January, Dr Palaniappan Rajmohan, who worked at the Calthorpe Clinic in Edgbaston, appeared at Birmingham Magistrates' Court and was instructed to appear at Birmingham Crown Court on 21 May.

The Glasgow midwives and conscientious objection

Mary Doogan and Concepta Wood were two senior midwives employed by the Southern General Hospital in Glasgow as labour ward coordinators. Both had formally given notice, under Section 4 the Abortion Act 1967, that they had a conscientious objection to abortion. This originally presented no problem, since their ward dealt with births only. However, in 2007, a reorganisation occurred and all abortions at the midwives' hospital were moved onto their labour ward.

In January 2012, the two midwives took their employer to court claiming that previously they had not been required to delegate, supervise or support staff members who were involved in the care of

patients undergoing abortions. In February 2012, at a judicial review at the Court of Session in Edinburgh, the judge, Lady Anne Smith, ruled against the women. She declared that '… the nature of their duties …' did not '… require them to provide treatment to terminate pregnancies directly' and therefore the 1967 Act's conscientious objection provision did not apply.

In April 2012, the two women launched an appeal, which began in January 2013 before three judges in Edinburgh. In April 2013, the midwives won their seemingly landmark case. The judges stated that the midwives could refuse to delegate, supervise or support staff involved in abortions, meaning that conscientious objection extends beyond direct involvement in abortion. The NHS Greater Glasgow and Clyde promptly declared that its health board would appeal the decision.

On 17 December 2014, came the bad news – the Supreme Court decided in favour of the hospital Trust. The Court ruled that 'the conscience clause does not cover' the two midwives because it applies only to 'direct participation in the treatment involved' and not to 'administrative and managerial tasks'. In other words, the midwives were exempt from actually holding the curette, but they had to supervise the curette holder.

But the Supreme Court went further. Justice Hale directed that all healthcare professionals with objections to abortion should now refer their patients, not just to another doctor, but to one whom they know to be willing to authorise the procedure. Moreover, conscientious objection henceforth does not apply even to doctors asked to sign the forms authorising abortions.

The Glasgow midwives had always contended that their work on the labour ward involved very little contact with the abortions taking place there, and that their conscientious objection could have been accommodated with minimal effort. In effect the courts have ruled that no such accommodation will be tolerated – freedom of conscience is not allowed, and if someone does not like that, then he or she can find another job. This is a pathway that leads to the ousting from the NHS of doctors and nurses who have a conscientious objection to abortion. Once that happens, the loss of such morally-sensitive healthcare workers will be immense and tragic.

The Doogan and Wood case had taken seven years to be resolved, and, not surprisingly, the midwives commented: 'We are both saddened and extremely disappointed with today's verdict from the Supreme Court and can only imagine the subsequent detrimental consequences that will result from today's decision on staff of conscience throughout the UK.'

Abortion in Ireland and Northern Ireland

The issue of abortion for cases of foetal abnormality has been a recent hot topic in both jurisdictions. Clare Daly, an Independent Socialist member of the Dáil (TD), introduced a Private Members' Bill early in February. It was roundly defeated by 104 votes to 20. Before the vote, the Irish Prime Minister, the Taoiseach, Enda Kenny, informed the Dáil that the attorney general had advised that the Bill was unconstitutional.

Meanwhile, in Northern Ireland, the Justice Minister, David Ford, has similarly proposed legalising abortion for cases of serious foetal abnormality. The Abortion Act 1967 does not apply to the Province and abortion is allowed there only if there is a direct threat to the life of the mother or a risk of permanent or serious damage to her mental or physical health.

Debate about widening the law to include rape, incest and fatal abnormality has been ongoing and in October 2014 the Department of Justice launched a public consultation, which closed in January. It focused on the issue of foetal abnormality. The Northern Ireland Human Rights Commission

(NIHRC) considered this was too narrow. In early February, a judge at the High Court in Belfast, Mr Justice Treacy, granted the NIHRC a three-day judicial review in mid-June to consider whether the current and proposed law breaches the European Convention on Human Rights.

Abortion in Italy, Spain and Poland

Italian abortionists have recently warned that the procedure may become all but impossible within the next five to ten years, as the current generation of pro-choice practitioners retires and the proportion of pro-life supporters rises. According to the campaign group Laiga, in some regions of Italy the proportion of doctors who refuse to perform abortions in the first 90 days of pregnancy has reached 'shocking levels'.

On a Saturday in late November, Madrid witnessed a demonstration demanding that the Spanish government live up to its election promise to enact legislation to protect the unborn. According to the organisers, there were 1,400,000 people on the streets – the police put the figure at 60,000. Whatever the crowd numbers, there was no denying that it represented popular support for a reversal of the previous Zapatero government's law which allows abortion-on-demand up to 14 weeks.

In October, a judge in Poland banned two pro-life demonstrators from saying that abortions performed at the Pro-Familia hospital in Rzeszówa are 'killing' babies. According to the hospital, 'pregnancy terminations cannot be called killing unborn children'. The court verdict has stunned many Poles, given that the Polish Constitution clearly states that human life begins at conception. So, you may ask: 'What exactly does an abortion do if it does not end the life of (that is, kill), an unborn child?'

Abortion in France

In December 2014, a resolution proclaiming abortion to be a 'fundamental right' was adopted by a large majority in the French National Assembly. Only 151 members of the Assembly were present out of the total of 577 deputies. Unsurprisingly the vote was overwhelmingly in favour – 143 for and just seven against.

Such an Assembly resolution has no legal force, but it sends a strong signal to bureaucrats, judges, doctors and the people. The original French abortion law, or 'loi Veil' as it is known after its promoter of 1974, Simone Veil, has, over the years, been amended so that abortions are now performed on request up to 12 weeks of gestation and, from Easter 2014, they have been fully funded by the government and there are tough penalties for anyone who hinders a woman, physically or psychologically, from accessing an abortion. In other words, abortions, or as they are called in France 'voluntary interruptions of pregnancy', have effectively been a right for women for years. And about 220,000 French women avail themselves of that right each year.

Assisted Reproductive Technologies

What are the trends in IVF?

In December 2014, the Human Fertilisation and Embryology Authority (HFEA) published its latest report, *Fertility treatment in 2013: trends and figures*. It covers treatment cycles and their outcomes started in 2012 and 2013 and can be read at
http://www.hfea.gov.uk/docs/FertilityTreatment2012TrendsFigures.PDF

Overall, 49,636 women had a total of 64,600 cycles of IVF in the UK's 78 clinics during 2013. Success rates remained constant, as they have for several years, at around 25%. A total of 14,062 pregnancies were reported as a result of IVF treatments started in 2013 and 13,839 babies were actually born. In 2012, 2.2% of all babies born in the UK were conceived as a result of IVF treatment – in 1992 and 2002, that figure was 0.3% and 1.4% respectively. In the UK between 1991 and 2012, a total of 221,555 babies have been born following IVF treatment.

Multiple pregnancies are still troublesome, accounting for 16.5% of IVF cycles, as opposed to the natural rate of twinning of about 1%. The average age of women using IVF remains static at 35 and the average length of time patients reported trying to conceive before seeking IVF was 4.5 years. A 41.3% minority of IVF treatment cycles were funded by the NHS – the 58.7% majority were privately funded.

About half (52.6%) of IVF treatments in 2013 involved ICSI (intracytoplasmic sperm injection). Around 5% of all IVF cycles used donated ova, though for women over 45, around 60% of their treatment cycles used donor ova. About 5.5% of all cycles used donated sperm. Only 807 cycles were so-called 'natural IVF', where no superovulatory drugs were used.

During the course of fertility treatments in 2013, 85,767 embryos were transferred. Of these, 65,810 were fresh embryos and 18,780 were thawed embryos which had previously been stored frozen – presumably the 1,177 shortfall can be accounted for by donated embryos. PGD (preimplantation genetic diagnosis) was performed during 533 cycles with 422 patients – they resulted in 137 live births.

Two significant trends are emerging. First, the medically-dangerous multiple births have continued to decrease, from 18.8% of treatment cycles in 2012 to 16.5% in 2013. Second, the number of IVF treatment cycles involving same-sex female couples has increased by nearly 20% year-on-year, rising from 766 treatments in 2011 to 902 in 2012, which resulted in 268 live births.

'Three-parent' IVF

This issue is of great bioethical moment, and the world was waiting to see which way the UK government would jump. Would it ignore the warnings that the methodology is largely untested in animals and humans and therefore of unknown safety? Would it instinctively approve the techniques because it wants to be at the forefront of global medical research? Would it hesitate and agree not to cross the bioethical Rubicon by refusing to permit such germline gene therapy? Would it intensify efforts to develop proper methods of treating patients with mitochondrial diseases rather than the proposed 'search and destroy' tactics? Would it re-examine the results of several consultations and heed the public's clear disapproval of mitochondrial donation?

The experts disagreed. Professor Lovell-Badge, an authority on embryology and stem cells at the Medical Research Council's National Institute for Medical Research, London and Professor Braude, an expert on genetic testing and IVF at King's College London, say: 'The risk of treatment must be balanced against the certainty of adverse outcome without.' On the other hand, Evan Snyder, who chairs a scientific panel advising the US Food and Drug Administration on mitochondrial transfer, warns that further research on safety needs to be done before clinical trials could begin in America – which could take between two and five more years.

Following the government's announcement that it intended to place Regulations before Parliament to allow 'three-parent' IVF, there was, on 22 October, a final one-off evidence session to examine

the science and proposed control of mitochondrial donation. The outcome of that meeting of the House of Commons' Science and Technology Committee was that it urged the government to proceed.

On 17 December, The Human Fertilisation and Embryology (Mitochondrial Donation) Regulations 2015 were laid. This Statutory Instrument was discussed at the Secondary Legislation Scrutiny Committee's meeting on 20 January. In the meantime, the Department of Health confirmed that the Parliamentary debate would be likely to take place within the next few weeks and almost certainly ahead of the general election in May.

And that is how it transpired. The fear was that the necessary approval would be granted by a small committee of 'experts'. However, on 29 January, the government agreed that such a landmark decision should be debated in Parliament, and this took place on Tuesday 3 February. It was timetabled to last for just 90 minutes. Someone pointed out that Parliament had found time to spend 90 hours debating fox hunting. Allowing just an hour and a half to discuss such a significant piece of legislation, which would permit germline genetic modification, was a scandal.
The debate was terribly rushed as can be sensed from the record in *Hansard* at:
http://www.publications.parliament.uk/pa/cm201415/cmhansrd/cm150203/debtext/150203-0002.htm#15020348000001

The debate was also misguided. It concentrated too much on safety aspects, which are inevitably uncertain with all new medical procedures, and too little on the crucial germline nature of the proposals. After the debate, the division was called and the proposed legislation was approved by 382-128 votes.

The issue then moved to the House of Lords, where on Tuesday 24 February, a motion was debated to approve the Regulations. First, however, there was an amendment from Lord Deben, the former MP John Gummer, proposing that a joint committee of both Houses be set up to examine the Regulations. He opened his speech: 'My Lords, first, I have to say that I am in favour of mitochondrial donation. I am not opposed to it in principle.'

In other words, his amendment wanted more time to look at the safety, legality and definitions of the Regulations. It was a decent try, and it was ably supported by Lord David Alton, Baroness Scotland and a few others, but the House was in no mood to delay getting mitochondrial donation onto the Statute book. The House divided and the amendment was disagreed by 280-48. The full record can be read at: http://www.publications.parliament.uk/pa/ld201415/ldhansrd/text/150224-0001.htm (scroll down)

The UK thus became the first country in the world to approve such germline genetic modification. The vote has been hailed as 'wonderful news for patients and families' and 'a great day for UK science'. Yet no one with a mitochondrial disease will be cured and this great scientific experiment may prove to be a genetic disaster.

The next move is that between March and August, the HFEA will develop and publish its licensing rules for 'three-parent' IVF. Then during the early summer, the research team at Newcastle will publish its final safety experiments as demanded by the HFEA. On 29 October, the Regulations are due to come into force. From 24 November, clinics will be able to apply to the HFEA for a licence. And by the end of 2015, the first attempt could take place, with the first baby possibly born in mid-2016.

Stem-Cell Technologies

Stem-cell scientist resigns

Stem-cell technologies have two opposing features – they bring medical advances, but they also bring medical scandals. An example of the latter has now been concluded. In January 2014, Dr Haruko Obokata published two articles purporting to show that so-called stimulus-triggered acquisition of pluripotency (STAP) cells could be produced by simply dipping normal adult cells in acid for 30 minutes. It was initially hailed as a game-changer. It was finally condemned as a sham.

In April 2014, her employer, the RIKEN Center for Developmental Biology (CDB) in Kobe, Japan, found her guilty of misconduct. In July, the papers were retracted by *Nature*. She was then given time to repeat her results. She failed. In December, in her resignation announcement, Dr Obokata said: 'I worked hard for three months to show significant results, but I'm so exhausted now and extremely puzzled. I even can't find the words for an apology.' All science depends upon rugged truthfulness, not wishful dreaming. The Obokata affair is over, but the additional stain it has left on stem-cell technologies remains.

Holoclar – the first

For the first time ever, a stem-cell therapy has been conditionally approved for widespread medical use throughout the EU. The treatment is marketed as Holoclar, which is described as an '*ex-vivo* expanded autologous human corneal epithelial cells containing stem cells'. It is intended to treat some eye conditions that can lead to blindness. The European Medicines Agency (EMA) said the approval represented 'a major step forward in delivering new and innovative medicines to patients'.

The medicine is based on the ground-breaking work of Graziella Pellegrini and colleagues at the University of Modena, which was published in the *New England Journal of Medicine* (2012, **363**:147-155). They showed remarkable, almost 80%, improvements in the eyesight of patients with eye burns or infections by simply transferring limbal stem cells from their good eyes to their bad eyes. The work represents one of the longest – up to 10 years – monitored clinical trials which uses adult stem cells.

Holoclar has been developed by the Italian pharmaceutical company Chiesi Farmaceutici S.p.A. There are some additional regulatory hurdles to jump before NICE can decide whether to approve this therapy for use by the NHS. But already the Moorfields Eye Hospital in London has successfully treated around 20 people with Holoclar.

Patents for human embryos

Way back in October 2011, the European Court of Justice (ECJ), in the case of Oliver Brüstle v Greenpeace eV, defined human embryos as anything capable of commencing the process of development of a human being. This, it said, covered 'any non-fertilised human ovum whose division and further development have been stimulated by parthenogenesis'.

Thus, the ECJ declared that any stem-cell production methods, which require the destruction of human embryos, or are based upon the use of human embryos, are not patentable. The ruling was specifically aimed at those, including Oliver Brüstle from the University of Bonn, who destroy human embryos in the course of producing embryonic stem cells.

On 18 December 2015, the ECJ backtracked on, or perhaps refined, or even nuanced, its 2011 ruling. Now the ECJ has cleared the way for patents of products derived from human parthenotes for industrial and

commercial purposes. For example, a new class of human embryonic stem cells, called human parthenogenetic stem cells (hpSCs) can be made from unfertilised ova and can now be patented.

According to the recent findings of the ECJ, parthenotes lack the inherent capacity to develop into human beings. The hpSCs are created by chemically stimulating human ova to begin cell division. The ova are technically not fertilised and therefore no viable human embryos are created or destroyed. Parthenotes – from the Greek for virgin and birth – are cells that are created by this process of asexual reproduction, known as parthenogenesis, to divide and grow like fertilised ova, although they cannot develop properly.

This U-turn by the ECJ occurred after International Stem Cell Corporation (ISCO), a biotechnology company based in Carlsbad, California, challenged the 2011 ruling when its UK application for two patents was rejected by the UK Intellectual Property Office (UK IPO) on the basis that they involved human embryos. The UK High Court referred the case to the ECJ. The intended patents covered methods for generating corneal tissue from embryonic stem cells made from human ova by parthenogenesis.

The ISCO's legal challenge was based on the fact that since human parthenotes contain only a single set of DNA, they are technically unable to develop into human beings and should therefore not be considered to be 'human embryos'. In December, the ECJ agreed. It stated that 'the mere fact that that organism [a parthenogenetically-activated human ovum] commences a process of development is not sufficient for it to be regarded as a "human embryo" within the meaning and for the purposes of [Article 6(2) of] the [Biotech] Directive.'

Now the UK courts must decide whether the cells generated by ISCO qualify for patent protection. In other words, it is now for national courts to decide how to interpret the ECJ's new ruling. Switzerland, for example, has already decided to exclude parthenotes from patentability. But the EJC's verdict may have far wider, far worse, implications. It could pave the way for other methods for creating embryonic stem cells, including somatic cell nuclear transfer (SCNT), aka human cloning, to become patentable.

The world's first induced pluripotent stem-cell trial

On 12 September 2014, Masayo Takahashi, an ophthalmologist at the RIKEN Center for Developmental Biology (CDB) in Kobe, Japan, watched as a surgeon transplanted a sheet of epithelial cells, that she had grown, into the back of a woman's damaged retina. Takahashi had made the retinal cells by transforming induced pluripotent stem (iPS) cells derived from the patient's skin cells. This was the world's first human clinical trial using such iPS cells.

For the past decade, Takahashi had been devising possible stem-cell therapies to repair retinal damage. In 2006, her work had been given a renewed impetus by the discovery of iPS cells by Shinya Yamanaka at Kyoto University. Their joint collaboration meant that she discovered how to convert iPS cells into sheets of retinal epithelial cells. She then tested these in mice and monkeys – they appeared to be safe. Now she was ready for the ultimate test, transplanting the cells into a human subject suffering from the common eye condition known as age-related macular degeneration (AMD).

The immediate operation was a success, but it will take another 12 months to determine whether or not the overall therapy has been beneficial. The patient, a woman in her 70s, was already largely blind, so the trial will probably not restore her sight, but it should slow down further deterioration. Takahashi has a further six AMD patients waiting. These are exciting days for such pioneering regenerative medicine. If this little trial in Japan is successful, worldwide medicine will be changed.

Human gametes from iPS cells

As remarkable as iPS cells are in their properties and as alternatives to the bioethically-unacceptable use of embryonic stem cells, it was always the fear that someone, somewhere, would abuse them. It seems as though Israeli and UK researchers have recently set foot down that dreadful road.

In 2012, stem-cell biologist Mitinori Saitou of Kyoto University, Japan and her co-workers created the first artificial primordial germ cells (PGCs) using skin cells from adult mice and reprogramming them via iPS-cell technology. In the early weeks of normal embryo development, some embryonic stem cells differentiate into PGCs, which eventually become mature sperm or ova.

In a recent paper in *Cell* (online, 24 December 2014) entitled *SOX17 Is a Critical Specifier of Human Primordial Germ Cell Fate*, Naoko Irie and colleagues at the University of Cambridge and the Weizmann Institute of Science demonstrated the creation of human PGCs in vitro. Starting with a person's skin cells, these were converted to iPS cells and then to PGCs. This work showed that a gene known as SOX17 was critical for directing human stem cells to become PGCs, by a process known as 'specification'. SOX17 was not required in Saitou's earlier mouse model.

The next logical step would be to introduce the engineered PGCs into human testes or ovaries, to prove that they are capable of developing into fully-functional sperm or ova. That step has not yet been undertaken in mice. And so far, these researchers say they are 'not ready to take that plunge' in humans. Not only would there be too many scientific unknowns but it would be hugely controversial and, if not entirely banned, hopefully, it would be subject to stringent regulatory considerations.

Yet this current work is seen by some as a valuable step towards infertility treatment enabling sterile men and women, maybe as a result of chemotherapy or premature menopause, to conceive. In principle, the process could also allow the production of ova from a man's skin cells. Using IVF, these could be fertilised by another man's sperm and the resulting embryo could be transferred to a surrogate mother – thus two man could have a child genetically their own. It would be trickier for two women to have a biological child together because only men have the Y chromosome, which is essential for the production of sperm cells.

Euthanasia and Assisted Suicide

Assisted Dying Bill 2014-2015

This is a Bill which seeks to legalise assisted suicide for mentally-competent, terminally-ill adults with less than six months to live, subject to approval by two doctors. It had its First Reading in the House of Lords on 5 June 2014, and its Second on 18 July. The first sitting of its Committee Stage was held on 7 November 2014, and the second sitting on 17 January 2015.

The First Reading of any Bill is, by tradition, a simple recitation with no debate. At the Second Reading on 18 July, the Bill was debated with 126 speakers taking part for nine hours and 37 minutes. In the end no vote was taken and the Bill was given an unopposed passage to the Committee Stage.

At that time the House was under considerable pressure from the Supreme Court. On 25 June 2014, campaigners for the right to die had lost their appeal in the Nicklinson-Lamb case. However, a majority of the nine Supreme Court justices had stated that the questions they were being asked

involved moral judgments rather than points of law and the matter should therefore be addressed by a democratically-elected Parliament, rather than the courts.

Members of the House of Lords were cognisant of that edict, even though neither Nicklinson nor Lamb was terminally ill. The strategy of the Bill's opponents was that no votes should be taken at this stage and that its flaws could be readily exposed in Committee. Nevertheless, the Bill was given an unopposed Second Reading, meaning that it was not rejected in principle, but as spin-doctors would say, the Bill was 'accepted in principle' – that was a most dangerous presumption.

On Friday 7 November, the Bill began its Committee Stage. This is the line-by-line consideration of amendments and there were 174 of them, tabled and organised into some 40 groupings. The primary issue before the House was one of safeguards, even though so-called 'strict guidelines' are bioethical and practical nonsense. Was it sufficient that two doctors should oversee the eligibility of the suicidal patient? In the end, a compromise was struck so that a judge from the Family Division of the High Court, rather than a doctor, must ensure that each person's declaration to end his or her life was 'clear and settled', not coerced, and that all other criteria were met before permitting the assisted suicide to proceed.

There is a convention in the House of Lords that no votes are taken on amendments until the Report Stage. However, Lord Pannick, rather impudently, pressed for a vote. Opponents of the Bill simply abstained, and although no vote was officially recorded, much of the media reported it as an 'accepted amendment'. This might appear to be only a minor victory for the Bill's supporters. I think it represents a dangerous landmark point-of-no-return.

Whatever the outcome of this particular Bill, any future proposed legislation could return to this point in the debate and use it as an accepted launch pad. As Sarah Wootton, the chief executive of Dignity in Dying, the pro-euthanasia campaign group, expressed it: 'We are fast approaching tipping-point on the issue of assisted dying. It is now a question of how, not if, we change the law.'

The second sitting of the Committee Stage took place on 17 January. Several issues were debated. Amendment 12B concerned the title of the Bill – was it to be Assisted Dying or Assisted Suicide? Which was more truthful? Despite sound arguments that the Bill would alter the Suicide Act 1961, and the fact that the definition of suicide from the Oxford English Dictionary is 'the intentional killing of oneself', the amendment was lost. Lexical engineering won the day and the amorphous euphemism 'Assisted Dying' was retained by 179 votes to 106.

The other major issue discussed was the type of overseeing doctors to be involved. Should they be registered or licensed? The substantive amendment 13 required that 'at least two registered medical practitioners, with one of whom the person has been registered for medical care for at least six months immediately prior to making the declaration' to be involved. This amendment was lost 61 votes to 119. So any old pro-euthanasia doctor will do, as long as he, or she, is enrolled as a member of a registered death squad.

The Bill is beginning to look seriously half-baked, but also doubly dangerous. And there is a huge twofold irony here – first, the UK long ago repealed the death penalty, and second, doctors have recently been instructed to redouble their efforts to stop patients committing suicide.

A further day of Committee debate is yet to be scheduled. There is now very little time for the Bill to complete the Committee Stages in the House of Lords. And it seems most unlikely that it will even enter the House of Commons. Moreover, Parliament is to be dissolved on 30 March. The upshot is that this Bill will fall. But make no mistake – a similar Bill will be back at Westminster later this year.

And that Bill will include the 'agreed amendments' of Falconer's Bill. It will therefore be even harder to defeat.

Assisted suicide in the Welsh Assembly

On 10 December, the National Assembly of Wales debated the principles of Lord Falconer's Assisted Dying Bill. It was a decent and informed discussion. Thankfully, the motion was defeated by 21-12 votes, with 20 abstentions. That certainly sent the right and robust message to Westminster, namely, that Wales does not want assisted suicide to be legalised.

Assisted Suicide (Scotland) Bill

This Bill was introduced into the Scottish Parliament in November 2013 by the late Margo MacDonald MSP. It is now being steered by Patrick Harvie MSP, as the 'member in charge'. The Bill sets out, *inter alia*, the credentials and duties of what it calls 'licensed facilitators' – non-medically qualified members of a death team. The Bill is currently being scrutinised by the nine MSPs on the Health and Sport Committee at Holyrood. The first Committee hearings of oral evidence from various individuals and organisations began on 13 January. Evidence from Care Not Killing and CARE for Scotland was heard on 3 February.

Assisted Suicide in the Isle of Man

On 3 February, members of the House of Keys, the Lower House of the Tynwald, the Manx Parliament, firmly rejected – by 17 votes to five – a Bill calling for the legalisation of assisted suicide. The issue has been raised several times before on the Island. In 2011, for instance, I spent several days there speaking in the Tynwald, churches, schools and other meeting places.

Surveys of doctors on assisted suicide

In November 2014, the Royal College of Physicians (RCP) published the results of a recent survey of its fellows and members. It asked four questions, somewhat abbreviated here, with the results from approximately 6,700 doctors.

First, do you support a change in the law on assisted suicide? Yes, 32.3%. Yes, but not by doctors, 10.2%. No, 57.5%.

Second, a change in legislation is not needed. Do you agree? Yes, 62.5%. No, 37.5%.

Third, what should the College's position be on assisted dying? In favour, 24.6%. Opposed, 44.4%. Neutral/no stance, 31.0%.

Fourth, would you personally be prepared to participate actively in assisted dying? In favour 21.4%. Opposed, 58.4%. Neutral 20.1%.

These figures show that only a third of doctors support the provisions of Lord Falconer's Bill. While there is still a 62.5% majority opposing a change in the law on assisted dying, there has been a 10.7% decrease in that percentage since the survey was last conducted by the RCP in 2006. Only 24.6% want the College to change its stance to favour assisted dying. And not many, 21.4% of respondents, would be prepared to participate in the dirty deed. The RCP has used these 2014 survey results to reaffirm its stance of opposition to assisted dying.

A smaller survey by the Association for Palliative Medicine (APM) of its members was published in January 2015. The results showed that a majority of respondents (82%) do not support a change in the law on assisted suicide. A total of 85% of palliative physicians who are members of the RCP opposed any change in the law and 92% opposed physician-assisted suicide.

Only 4% of APM doctors would be willing to participate actively if physician-assisted suicide were to be made legal under the current provisions of the Falconer Bill. APM President, Dr David Brooks, Macmillan consultant in palliative medicine, stated: 'These results give a clear message to legislators. Those who care for terminally ill people day-in day-out believe society should be supporting people at this time in their lives, not putting them at risk. They also make clear that if society does want to legalise assisting suicide, this should not be part of medical practice. People need to be confident that the doctor is there to care for them whatever happens, not to kill them.'

It should also be noted that the current position of the British Medical Association (BMA) is that of 'opposing all forms of assisted suicide and euthanasia'. The BMA 'supports the provision of high quality person-centred palliative care for those individuals facing the effects of terminal illnesses and conditions'. A spokesman has recently declared that the BMA 'is concerned that giving them [patients] a legal right to end their lives with physician assistance, even where that assistance is limited to assessment, verification and prescribing, could alter the ethos within which medical care is provided'.

The Nicklinson-case continues

Jane, the widow of the right-to-die campaigner Tony Nicklinson, is taking his fight to the European Court of Human Rights. She has submitted an application in her own right and on behalf of her late husband arguing that the UK violated their human rights because the Supreme Court has ducked the issue of assisted suicide.

Saimo Chahal, Mrs Nicklinson's lawyer, maintains that the Supreme Court's decision in June 2014 failed to declare that the Suicide Act 1961 was incompatible with human rights. Moreover, Lord Neuberger, president of the Supreme Court, had on that occasion stated that if Parliament did not give serious consideration to legalising assisted suicide, there was a 'real prospect' that a future legal challenge would succeed.

Therefore, claims Chahal, the Supreme Court has breached the Nicklinsons' human rights under Article 8 of the European Convention on Human Rights by refusing to decide on the compatibility of the existing law on assisted suicide. Instead, the Court referred the matter to Parliament.

Euthanasia and organ donation

It is not a new concept, but it has emerged again. Already the practice is fairly common in Belgium and the Netherlands. A patient requests assisted suicide or euthanasia and instead of wasting decent, life-giving organs, they are harvested at a time and place convenient for both medical teams – the euthanasiasts and the transplant surgeons. Now David Shaw, a bioethicist at the University of Basel, is suggesting the same procedure could be usefully employed in Switzerland. What is more troubling, for us UK residents, is that Dr Shaw serves on the UK Donation Ethics Committee (UKDEC).

USA and Elsewhere

Roe v Wade 42 years on

Thursday 22 January 2015 was the 42nd anniversary of the landmark US Supreme Court's decision that established abortion as a constitutional right for women. Forty-two years of legalised abortion has led to 57 million US abortions. The sad event is marked each year in Washington DC (and other cities) by the March for Life, when some 300,000 pro-life Americans brave the usually cold weather and rally at the steps of the US Supreme Court. They call it 'The largest human rights march in the world' or 'The largest pro-life event in the world'.

As an extra tribute on that day, Republican leaders had planned to vote on a federal 20-week abortion ban, known as the Pain Capable Unborn Child Protection Act, in the House of Representatives. The Act would establish a national, US-wide ban on all abortions after 20 weeks on the basis that such a measure would prevent foetal pain. President Obama has threatened to veto the Act. He has said that it 'shows contempt for women's health and rights, the role doctors play in their patients' health care decisions, and the Constitution'.

However, it might never get to his desk because of the unknown voting intentions of several Senators. Polls show that a 60% majority of Americans support the late-term ban, which includes exceptions for rape, incest and life of the mother. As many as eight possible Republican candidates for the 2016 presidential election also support the Act. One pro-life leader has said: 'It is time to move the United States off the list of only seven countries to allow abortion on demand beyond this point.' If it were passed, the Act would save the lives of about 18,000 unborn children each year.

However, none of this expected political activity in the House of Representatives happened. The day before the March for Life, the House Republican leadership decided to pull the Pain Capable Unborn Child Protection Act because of arguments over its rape exception and other related provisions. Instead, the House considered the No Taxpayer Funding for Abortion Act and the Abortion Insurance Full Disclosure Act of 2015, which would prevent all federal funding of abortions, except in the case of rape, incest and to save the life of the mother.

This late volte-face did not please many pro-life supporters – they regarded it as moral cowardice or worse. But the politicians defended their action and insisted that both Acts would eventually come before the House. It is also fairly clear that the President will veto both Acts. But that's politics, US-style.

Yet all was not lost. The No Taxpayer Funding for Abortion Act was passed by 242-179 votes with 12 Abstentions. However, its compass is not great. It seeks to end the coverage of abortion services by private insurance companies – it would make it illegal for women to use federal tax credits and other government subsidies, namely taxpayer's money, to purchase private insurance for abortion. Obama will not like that.

Pro-life activity in the USA

Something significant occurred in the USA on 4 November 2014. As a result of the mid-term elections, Republicans took control of the US Senate. It gave the party control of both chambers of Congress for the first time in eight years. As a rule of thumb, Republicans are more pro-life than their Democratic counterparts. And all this while a Democrat president lives in the White House.

Apparently, pro-abortion leaders in the USA are becoming more and more anxious – 2014 has been a bad year for them. According to a January 2015 report from the influential pro-abortion think-tank,

the Guttmacher Institute: 'During the 2014 state legislative session, lawmakers introduced 341 provisions aimed at restricting access to abortion. By the end of the year, 15 states had enacted 26 new abortion restrictions. Including these new provisions, states have adopted 231 new abortion restrictions since the 2010 midterm elections swept abortion opponents into power in state capitals across the country.'

Indeed, across the country, more abortion clinics are closing and more pro-life legislation is being enacted. The pro-life movement is gaining ground. According to the Guttmacher Institute, in 2000, 13 states had abortion restrictions making them, in the Institute's words, 'hostile to abortion rights'. By 2010, 22 states were considered 'hostile' and by 2014, 27 states were so called. Additional evidence of this growing pro-life trend comes from the Rev Harry Knox, the leader of the Religious Coalition for Reproductive Choice, who, on 15 December, wrote: 'If 2014 was a rough year for reproductive justice, 2015 is shaping up to be even worse.'

Let us keep a sense of proportion – abortion is declining, but it is not stopping in the USA. During 2012, there were still an estimated 1.04 million abortions across the Land of the Free. And, according to the latest annual report of Planned Parenthood, 'America's most trusted provider of reproductive health care', it alone performed 327,653 abortions and received more than $528 million in tax dollars during the year 2013-2014. Abortion is still big business, numerically and financially. Nevertheless, several trends are looking favourable.

Canada legalises assisted suicide

Canada is a most strange land. This is not only because of its reputation as 'the world's most boring country'. It is also strange bioethically. For example, it has no criminal law restricting abortion. And it was the first non-European country to legalise same-sex 'marriage'. Now it has decriminalised assisted suicide.

On Friday 6 February 2015, the nine judges of the Supreme Court of Canada unanimously ruled that prohibiting assisted suicide is unconstitutional and a violation of the country's Charter of Rights and Freedoms. The issue has been gathering force for years. In 2011, a report from the Royal Society of Canada strongly recommended the legalisation of assisted suicide. In June 2014, Quebec passed legislation allowing it. In August 2014, the Canadian Medical Association voted to stop opposing it.

The legal story really starts in April 2011, when the British Columbia Civil Liberties Association (BCCLA) challenged laws that prohibited assisted suicide. On 29 June 2011, Gloria Taylor filed an application to be a plaintiff in the BCCLA's case. Taylor was a Canadian advocate of assisted suicide and she suffered from amyotrophic lateral sclerosis (ALS). The lawsuit, with several co-plaintiffs including the family of Kay Carter, a woman suffering from spinal degeneration, became known as Carter vs. Canada. It sought permission for incurably-ill, mentally-competent adults to receive medical assistance to hasten their deaths.

In June 2012, the BC Supreme Court ruled that the right to die was protected by the Charter of Rights and Freedoms and it granted Taylor a personal exemption so that a doctor could assist her to die. She died on 4 October 2012, not as a result of assisted suicide, but from an infected perforated colon. Meanwhile, the Canadian federal government had appealed the BC Supreme Court decision, which was overturned by a two-to-one verdict in the British Columbia Court of Appeal in October 2013. The BCCLA then filed an appeal to the Supreme Court of Canada.

On 15 October 2014, the BCCLA took its case to the Supreme Court. And on 6 February 2015, the Court delivered its judgment and affirmed that Canadians have the constitutional right to dignity and self-determination at the end of life, otherwise known as doctor-assisted suicide.

Thus Canada has joined the select club of Holland, Belgium, Switzerland and a few other jurisdictions which permit assisted suicide. However, the Canadian Court ruling is particularly vague and will inevitably be open to challenge and abuse. The Court has given Parliament 12 months to draft an appropriate law.

Margaret Somerville, professor of law at McGill University and one of Canada's leading bioethicists, assessed the new ruling: 'Canada has fallen over the edge of the abyss in legalising the intentional infliction of death on our most vulnerable citizens – those who are old, frail, disabled, depressed, mentally, physically, or terminally ill.'

'This is not an incremental change, but a seismic shift in one of our most important foundational values – respect for human life at both the individual and societal levels… I believe that future generations will look back on this decision, in the light of its future consequences, as the most important, harmful and regrettable ethical, legal and public-policy decisions of the 21st century.'

'Deep continuous sedation' in France

France has long possessed an ambiguous euthanasia law. At the end of 2014, the French president, François Hollande, approved a report recommending that terminally-ill patients should have a right to 'deep continuous sedation' – that document is expected to be submitted to the French Parliament in early 2015.

The report stops short of recommending euthanasia but instead advocates administering sufficient sedatives and painkillers to ensure that the patient loses consciousness up to the time of death. This is often called 'slow euthanasia'. It is not even 'heavy sedation' that is medically legitimate in some cases of intractable pain or excessive restlessness. This is the sort of 'deep continuous sedation' commonly practised in the Netherlands and Belgium, where it is used to fudge the figures in order to show a decrease in the number of cases of 'real' euthanasia.

The MAP in Poland and elsewhere

In November, the European Medical Authority (EMA) recommended that all member states should allow women throughout the European Union (EU) to obtain the morning-after pill (MAP) over the counter, without a prescription.

Early in January 2015, the European Commission issued its so-called Implementing Decision. These new guidelines will gently try to cajole five countries to conform. Italy may resist, Germany is not keen and Hungary has already ignored the directive, ensuring that the MAP remains prescription-only. These countries are concerned not only about the MAP's abortifacient action, but also the prospect of a lack of any medical consultation with potential users.

One of those other countries is Poland – sometimes regarded as one of the last bastions of rugged pro-life legislation in Europe. Abortion is illegal there and the Polish Constitution states that human life begins at conception.

Now, following this EU ruling, Poles may be able to buy the EllaOne version of the MAP over the counter, with no prescription. The decision has polarised the country. The Polish Federation for

Women and Family Planning stated: 'We do not want to be a bargaining chip on the political and ideological stage. Access to contraception is our right.' And Stanislaw Wawrzeszak, the chaplain of the national health care association, declared: 'The availability of the so-called morning-after pill for sale without a prescription is an ideological action. It takes away people's responsibility for procreation.'

Which way will Poland go? As Anna Zalewska MP noted, the European Commission directive was merely a 'recommendation' and it was up to the individual governments to decide. She continued: 'I'm surprised that the Polish government and the [Health] Ministry want thoughtlessly to submit to this decision.'

Nobody in the UK should be surprised by this European bioethical downgrade. The MAP was introduced into the UK in 2000, as a prescription-only drug. By 2001, it could be obtained over the counter by girls 16 years old and above. By 2004, it could be brought from pharmacies for about £25, or obtained free from NHS clinics. Now it is available via the Internet.

Obituaries of Two Pro-Choice Campaigners

Tim Black, 1937 - 2014

In the mid-1960s, Dr Tim Black was a young doctor working in the jungles of Papua New Guinea. After successfully operating on a three-month-old baby he excitedly realised that he had just saved the boy's life. He gave him back to his mother only to realise her anguish – here was another mouth to feed, with no father, no education and no future. It was a pivotal moment. Tim Black suddenly believed that it was as important to prevent a life as it was to save it.

He resolved to change his practice of medicine. In 1975, with the help of his wife and £3,000, he rescued the Marie Stopes Foundation (MSF) from bankruptcy and bought the lease of the famous clinic at 108 Whitfield Street, London, where the birth-control pioneer Marie Stopes had opened her Mothers' Clinic in 1925. He transformed MSF into a money-making business selling contraception, pregnancy testing, vasectomies and abortion. His medicine became marketable. His patients became his customers. The Foundation became Marie Stopes International (MSI).

Dr Black was MSI's CEO from 1976 until 2006. He moved the organisation away from the stuffy NHS and provided his services promptly and in a friendly, nurse-led environment. He never had a business plan. He hated group meetings. His management mantra was that 'the best committee is made up of two people – with one away sick'.

Today the business is worldwide and flourishing with over 600 clinics and programmes in 41 countries. In 2013, MSI reported an annual global income of £211.9m. Part of this was spent on contraception, in its own words, 'averting 5.3 million unintended pregnancies' and part on abortion, again in its own words 'preventing 2.1 million pregnancies'. Around £14 million of its income came from UK NHS contracts. Thirty-three employees of MSI earned between £60,000 and £100,000, with the highest at £300,000. Above all, MSI has become a massive supplier of mass abortion.

Timothy Rueben Ladbroke Black was born in Sussex in 1937. In 1962, he qualified as a doctor at St George's Hospital Medical School, London, and also married his childhood sweetheart, Jean. They set out combining global travel, adventure and a deep medical commitment to needy people, especially vulnerable women. He was a forceful, irascible character who delighted in controversy, especially with his pro-life detractors.

In 1979, his clinics introduced the abortifacient intrauterine device (IUD) in contravention of the 1967 Abortion Act. In 1997, he instituted the 'lunchtime' abortion for £285. He relaxed by sitting in a tree-house at his home. He worked from his garden shed rather than his central London HQ, except on Fridays when he visited there to perform vasectomies – it is reckoned that he completed the four-minute procedure 15,000 times and once live on TV. In 2004, he and one of his daughters, Julia, made a landmark documentary for Channel 4 entitled, *My Foetus*. It was the first time that an abortion had been shown on British TV.

He collapsed and died on 11 December just after completing one of his favourite walks through the woods near his house. To the end he was driven by his belief that 'Women don't lease their bodies from the State or Church. They own them.' Every businessman has a business slogan – Tim Black's was 'Children by choice, not chance'. He thought that aborting millions of unborn children every year was a praiseworthy enterprise. He was wrong – it is entirely blameworthy.

Debbie Purdy, 1963 - 2014

Deborah Purdy was born, on her parents' bedroom floor, in south London, the youngest of five children. She joined the Liberal Party as a teenager and left home to become a squatter with a stockbroker and a Buddhist. She tried studying humanities at Birmingham University, working for Yellow Pages in Edinburgh, selling jewellery in Oslo and learning to ski. Her nomadic lifestyle took her to Houston, Tokyo and Hong Kong before she returned to the UK in 1990 to nurse her dying mother.

In 1994, she was writing adventure travel brochures for a company in Singapore. It was there that she met her husband-to-be, Omar Puente, a Cuban-born violinist, who was playing with his band in the same city. They communicated badly in French, Spanish and English. At about that time she felt something was wrong with her health. While dancing it was as if she 'was wearing trainers and they were sticking to chewing gum.' She flew home briefly to the UK to see a neurologist who instantly diagnosed her, aged 31, with primary progressive multiple sclerosis.

For some time after her diagnosis she continued her wanderlust – she became the manager of Omar's band, she bought a walking stick, she gave up tea and coffee, but her symptoms were gradually worsening and she had to buy a wheelchair. On one occasion, she managed the 10-hour flight back to the UK but promptly burst into tears when she was stranded at a railway station with no wheelchair exit.

Debbie and Omar married in 1998 at a ceremony that cost £110 and they settled in Bradford. They were poor – one Christmas her present was a song he had composed. She had previously been sterilised but managed to become pregnant by IVF, only to miscarry their baby after 11 weeks.

It was in 2001 that Diane Pretty, who had motor neurone disease, lost her long legal battle to win the right to die with the help of her husband, Brian. It caused Purdy to think about her own future. Her voice was going, so was her dexterity and she was now permanently confined to her wheelchair.

In 2003, she heard about the Dignitas 'clinic' in Zurich and Lord Joffe's Patient (Assisted Dying) Bill in the House of Lords. In 2005, she contacted the Voluntary Euthanasia Society (now called, Dignity in Dying) to ask for help. It supported her to initiate her own legal challenge.

The Suicide Act 1961 had made it a criminal offence to aid, abet, counsel or procure the suicide of another person. If Omar helped her to go to Dignitas to commit suicide, would he be faced with prosecution and a possible 14-year prison sentence? Her response was 'but I love him and, however

remote the chance, I won't let that happen'. So, in 2008, she challenged the government to clarify the circumstances under which an 'assister' would be prosecuted.

At the High Court hearing in June 2008, her case failed. In February 2009, it failed again in the Court of Appeal. In July 2009, her case was adjudicated at the House of Lords. The Law Lords agreed that the law was unclear and ordered Keir Starmer, the then Director of Public Prosecutions (DPP), to spell out the likely circumstances for prosecution.

The DPP duly published the mandated interim guidelines, a public consultation period ensued, and a final document, *Policy for Prosecutors in Respect of Cases of Encouraging or Assisting Suicide*, was released in February 2010. This consisted of sixteen 'public interest factors' likely to favour a prosecution, and six factors against taking any legal action. Keir Starmer stated: 'The policy does not change the law on assisted suicide. It does not open the door for euthanasia. It does not override the will of Parliament.' As a result, assisted suicide remained illegal. Every suspected assisted suicide would still be investigated. No one would be guaranteed immunity from prosecution.

However, the new policy did state that, for example, a prosecution where 'the suspect was wholly motivated by compassion' is less likely to proceed than, say, when a doctor or other healthcare professional is involved. All this conveyed a subtle message – it tells people in advance that, if certain conditions are met, assisting in suicide can be legally acceptable, that is, you are not likely to be prosecuted.

That was a move in the wrong direction. And so assisted suicide has continued to slide down the slippery slope as a result of, for example, the 17 October 2014 decision of the new Director of Public Prosecutions, Alison Saunders, that doctors and nurses will henceforth be less likely to be prosecuted for assisting, and of the pressure being exerted by Lord Falconer's Assisted Dying Bill in the House of Lords. The fact is that Debbie Purdy did change the law on assisted suicide, just a little, but still too much.

From 2003, when she first heard about the Dignitas 'clinic', she began to become obsessed with assisted suicide. Her resolute wish was that she wanted to die, but not quite yet. Then in 2014, the news broke that she had become too poor and too disabled to make the trip to Switzerland. Instead, she booked into the Marie Curie Hospice in Bradford and eventually began deliberately refusing to eat. She died there on 23 December 2014, aged 51.

Debbie Purdy was an amazing woman in many ways – smiley, full of enthusiasm and wit. Perhaps strangely, I found her quite inspirational. What a pity she took the wrong path. I fear that, like many before and after her, she became a pawn of the euthanasia movement. Even so, it was palliative care that won the final argument. Her husband Omar could say after her death: 'We would like to thank the Marie Curie Hospice in Bradford for the care the staff gave her, which allowed her last year to be as peaceful and dignified as she wished.'

John Ling

Light on the family from an old Dutch master

The abiding value of Herman Bavinck's work on the Christian family[1]

The first part of this article, published in the November 2014 *Bulletin*, outlined the framework within which the 20th century Dutch theologian Herman Bavinck approached the subject of the Christian family: instituted by God at creation, ruined by sin, restored by grace and awaiting the final consummation. In the meantime, in a fallen world, marriage and the family remain subject to repeated and sustained attack.[2]

Writing in the early 20th century, Bavinck identified the dangers of eugenics, sexual liberation, feminism and egalitarianism. What he saw in the bud, we now see in the flower. He also warned that evolutionary thought would lead to the State encroaching on the family and assuming responsibilities that properly belong within the home and lamented the passivity of some Christians who viewed the decline of the family as inevitable. This second article will consider how Bavinck urged Christians to respond.

Far from endorsing a passive response to the dangers confronting the family, Bavinck issues a call to arms in defence of the family:

> The family is indeed threatened by serious dangers and is exposed to all kinds of opposition, but it is our duty to review these dangers and our calling to resist in a powerful way every hostile force that undermines the foundation of the family. (p.143)

Reformation begins at home

Reversing public policies that are unfavourable to marriage and the family can be a lengthy process and external measures will always be powerless to change the human heart. However, it is within the reach of us all to function in a God-honouring way in our own homes, as husbands, wives, parents and children:

> All good, enduring reformation begins with ourselves and takes its starting point in one's own heart and life. If family life is indeed being threatened from all sides today, then there is nothing better for each person to be doing than immediately to begin reforming within one's own circle and begin to rebuff with the facts themselves the sharp criticisms that are being registered nowadays against marriage and family. Such a reformation immediately has this in its favour, that it would lose no time and would not need to wait for anything. Anyone seeking deliverance from the state must travel the lengthy route of forming a political party, having meetings, referendums, parliamentary debates, and civil legislation, and it is still unknown whether with all that activity he will achieve any success. But reforming from within can be undertaken by each person at every moment, and be advanced without impediment. (p.63)

The husband is responsible for 'guarding the honour of his family, administering its property, advancing its welfare, and leading it in the fear of the Lord', while 'the wife has a different place and task in the family':

[1] Herman Bavinck, *The Christian Family*, republished by Christian's Library Press, 2012, xvii+168pp, ISBN 978-1-938948-14-5.
[2] Norman Wells, *Light on the family from an old Dutch master – Part 1*, Affinity Social Issues Team's *The Bulletin,* No. 27, November 2014.

> If the husband is the head, then the wife is the heart of the family. The husband brings in the fruits of his labour, the wife distributes them according to each one's need; the husband gives, the wife receives; the husband establishes the family, the wife preserves the family; the husband conceives the child, but the life of the child is intimately developed along with that of the mother far more than with that of the father; the husband lives in society, the wife lives in her family; the husband exercises 'power directed outward and influence directed inward', the wife exercises 'power directed inward and influence directed outward'. (p.95)
>
> Within the family she preserves order and peace, because she knows the character of each person and knows how to supply the needs of each. She protects the weak, tends the sick, comforts the sorrowing, sobers the proud, and restrains the strong. Far more than the husband, she lives along with all her children, and for the children she is the source of comfort amid suffering, the source of counsel amid need, the refuge and fortress by day and by night. The heart of her husband trusts in her, and her children call her blessed [Proverbs 31:10–28]. Both husband and wife nurture each other and are themselves formed by their children who were born from them. (p.96)

Bavinck was resolutely opposed to efforts to 'bring the entire physical and spiritual nurture of the child under the direction of technical experts' (p.98). The professionalisation of childcare, the concept of the 'parenting expert' and the notion that children in any way belong to the State would have been anathema to him. He warned:

> A powerful, continually growing stream is moving in the direction of technically expert and artificial nurture. Just like the advocates of free love point with a certain relish to the many unhappy marriages in order to bring legal and lawful marriage into disrepute, so too defenders of government childcare seize with eagerness upon all the miseries and faults of home childcare to thereby strengthen their theory and to recommend it as the only real and adequate solution. They use examples of unhappy families not to press for reforming and improving family life, but on the contrary, to undermine the parental home as a nurturing institution and to build a new system of breeding and raising children on the ruins of the family. (pp. 101-102)

Yet any confidence in modern theories of child nurture was, and remains, misplaced. Now, as then, those who advocate the professionalisation of childcare tend to have unrealistic expectations and exaggerate what they hope to achieve. Bavinck is in no doubt that:

> The family is and remains the nurturing institution par excellence. Beyond every other institution it has this advantage, namely, that it was not constructed and artificially assembled by man… (pp. 105-106)
>
> [T]he family does not consist of a number of empty forms that we need to fill, but it is full of life. The husband and wife, coming from differing families, each contributes their own genetic make-up, tradition, nature, character, disposition, and life. And each child born to them is a member of humanity, a person with capacities like those of everyone else, and yet distinguished from all those others, whose relation is close or distant, with a unique existence and character. A wealth of relationships, a multiplicity of characteristics, a treasure trove of gifts, a world of love, a wonderful intermingling of rights and duties – all of these, once again, are brought together not by human determination but by God's sovereign determination. (p.106)

The family is not only 'a school for the children, but in the first place it is a school for the parents' (p.94). Bavinck writes:

> For children are the glory of marriage, the treasure of parents, the wealth of family life. They develop within their parents an entire cluster of virtues, such as paternal love and maternal affection, devotion and self-denial, care for the future, involvement in society, the art of nurturing. With their parents, children place restraints upon ambition, reconcile the contrasts, soften the differences, bring their souls ever closer together, provide them with a common interest that lies outside of them, and opens their eyes and hearts to their surroundings and for their posterity. As with living mirrors they show their parents their own virtues and faults, force them to reform themselves, mitigating their criticisms, and teaching them how hard it is to govern a person. (pp.96-97)

Co-operation with others of like mind

In spite of his strong emphasis on the priority of parents – and particularly of fathers – to put their own house in order, Bavinck recognises the need for 'defenders and friends of the family' to take united action when the family is under attack:

> So when some would point to miserable family conditions as an argument for gradually removing the nurture of the children from the parents and handing it over to the State, at that point let all the defenders and friends of the family join hands and cooperate unitedly to maintain and reform family life, which forms the healthy, natural foundation of society and church and state. And let a vigorous protest be sounded against all those who through immoral entertainment, low art, cheap novels, and sensuous performances violate the honour of marriage and undermine the foundations of the family! (p.93)

Bavinck is not a romantic idealist who is blind to the harsh realities of many marriages. He freely acknowledges that:

> [T]here are many unhappy marriages – more than we might suppose or know. There are people by the thousands bound to each other for life who are more a curse than a blessing to one another, and who in their marriages are already living a hell on earth. When the best gets corrupted, it becomes the worst; love that wanes becomes hatred, and affection that dissipates gives way to aversion. When marriage loses its delight, it turns into unbearable drudgery. (p.75)

However, this reality presents us with a choice: we can either (i) normalise dysfunctional family life, blame the institution of marriage, excuse the adulterer, and welcome divorce, open marriage and free love as solutions to the problem, or (ii) heed the voice of conscience and recognise that the fault does not lie with the institution of marriage, but with human sin, and that marriage itself is wise, 'holy and good, being of divine origin and rich in blessing for the human race'. (p.75,76)

Bavinck draws a contrast between 'the healthy realism of Scripture in opposition to the unhealthy realism that is being expressed in contemporary literature and art':

> No Christian says that the person is corrupted by marriage, but he confesses that marriage is corrupted by the person; the modern realist blames the circumstances, the institutions, the laws and ordinances, ultimately, God himself, while the Christian finds within his own heart the source of all impurity. (p.79)

The proper role of the State

Bavinck notes that the family pre-dates both the Church and the State and that each is independent of the other. He writes:

> Had sin not entered the world, human society would probably have developed patriarchally and would have expanded as one large association of families. If, however, after the entrance of sin, the human race was to survive, the institution of the Church and the State was necessary. (p.114)

While the church owes its existence to special grace, the state owes its existence to common grace. However, the family was instituted at creation and remains the foundational institution:

> One who destroys the family is digging away the moral foundations on which society has been established as a moral institution. But one who exalts the family and outfits leadership with love rather than selfishness, such a person does a work that pleases God. For God is love and love is the law of his kingdom. (p.134)

As indicated above, Bavinck stands strongly opposed to the State assuming the role that God has entrusted to husbands in relation to their wives, or to parents in relation to their children. The family and the State operate in two separate and distinct spheres:

> The State is not the sphere of love but of justice; it does not proclaim the gospel but enforces the law. For that reason, the State can never take over or displace the task of the family; the State is not a parent who provides its citizens with food and clothing and a place to live, with work and wages, sustenance and pension. The State presupposes the family, as does society, both of which existed before the State, each leading their own lives and being governed by their own laws. Anyone who expects the State to satisfy all those interests, for which family and society and church are to look after, is undermining the independence of these spheres of life and is calling for a remedy that in the long run will turn out to be more dangerous than the disease. (p.141)

Bavinck defines the role of the State in relation to the family in the following way:

> The State can neither create nor maintain the family, the State need not arrogantly constitute the family through law, and even less may it oppress and oppose the family. The task of the State is to discover the internal law to which the family is subject by virtue of its nature and the ordinance established by God, to acknowledge, protect, and maintain this law. In this way, by means of its legislation regarding marriage and divorce, property and inheritance, working hours and Sunday rest, the labour of women and children, public decency and many other things, the State would be working in a powerful way for the well-being and flourishing of the family. The State's ideal is not to do everything itself, but to provide every citizen and all the spheres of life in society with the opportunity for each in their own domain to fulfill their own calling. (p.142)

Conclusion

Bavinck's study on *The Christian Family* is so rich that these two articles have barely scratched the surface. The 21st century family in Britain is arguably facing an even more severe crisis than existed in 20th century Holland, and we need to hear and heed the refreshing biblical thinking of a master

theologian from a century ago. Bavinck is clear, forthright, robust, gracious, wise, bold, uncompromising – and above all positive about the future, for the final victory is assured:

> Christians may not permit their conduct to be determined by the spirit of the age, but must focus on the requirement of God's commandment. Even if they come to stand alone, as history has so often obligated them to do, they must show in word and deed what an inestimable blessing God has granted to humanity and to society, to church and state, with the gift of marriage and family. But they may also be encouraged by knowing that the struggle for the honour and welfare of the family is a noble struggle that carries with it the promise of victory. Not for nothing has God permitted the continuation of the family in the human race and among all peoples; every family ever built and every child ever born is proof that his purpose with the human race has not yet been achieved, that his forbearance has not yet ended, and his grace has not yet been exhausted. (pp.139-140)

Norman Wells

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. The Christian agency handling these cases is indicated in brackets at the end of each item.

Ashers Baking Company

Ashers Baking Company is a Christian-run bakery in Northern Ireland which is being sued after it declined to produce a pro-gay marriage campaign cake. The Company takes it name from a verse of Scripture which says 'Bread from Asher shall be rich and he shall yield royal dainties' (Genesis 49:20, NKJV). The McArthur family, who own Ashers Baking Company in the Belfast area, said that they could not fulfil the order because they could not promote a cause which conflicted with their Christian beliefs that marriage is between a man and a woman.

In May 2014, volunteer LGBT activist Gareth Lee asked for a cake to be decorated with the slogan 'Support Gay Marriage'. He also wanted a logo of his campaign group QueerSpace and a photo of Sesame Street's Bert and Ernie in an embrace to be printed on the cake. When the order came through to the head office, the manager and directors decided to decline the request on conscience grounds, and offered Mr Lee a full refund. Online photographs of a QueerSpace event in May show that the group managed to get a cake decorated in the way it wanted from a different bakery.

The manager of the business, Daniel McArthur, said that the company is happy to bake cakes for anyone, but could not fulfil that particular order as it clashed with the ethos of the business: 'We are Christians and our Christianity reaches to every point of our lives, whether that's at home or in the day-to-day running of the business.' Explaining why the company decided not to fulfil the order, Mr McArthur said: 'We thought that this order was at odds with our beliefs, and was certainly in contradiction with what the Bible teaches.'

Ashers is being sued for discrimination on the grounds of sexual orientation and political opinion. The Christian Institute is supporting this case which will be heard in the County Court in Belfast on 26 and 27 March. Mr Lee is being represented by the Equality Commission for Northern Ireland. [*The Christian Institute*]

Nohad Halawi

The case of a Christian worker who lost her job at Heathrow Airport which she had held for 13 years, on the basis of false rumours that she was 'anti-Islam', was heard at the Court of Appeal in London on 25 and 26 June.

Nohad Halawi, who worked in a duty free shop at Heathrow's Terminal 3, had defended a fellow Christian employee who was mocked by fellow Muslim workers for wearing a cross. Despite unsubstantiated complaints by the Muslim workers that she had behaved in an 'anti-Islam' manner, the management took away her 'airside' pass which meant that she was no longer allowed to work at the airport.

Mrs Halawi claimed unfair dismissal and religious discrimination at an Employment Tribunal in 2012 but it ruled that she had no protection under employment law as she was technically not an employee, despite significant evidence to the contrary.

At an Employment Appeal Tribunal in October last year, Mrs Halawi's barrister Paul Diamond argued that Mrs Halawi was an employee under European law, and as such should be protected from discrimination. He also argued that the Employment Tribunal should have considered the relationship which existed between Mrs Halawi and World Duty Free and Caroline South Associates, who controlled her working arrangements, as the basis for allowing her to be deemed an 'employee' or a 'worker' under European law.

Twenty-two of Mrs Halawi's colleagues at Heathrow, including other Muslim workers, signed a petition which stated: 'We are shocked and saddened by the recent dismissal of our colleague and friend, Nohad, as a result of malicious and unfounded allegations made against her.'

Andrea Williams, CEO of the Christian Legal Centre, which is providing legal support for Mrs Halawi, said: 'This is a clear case of a Christian worker being subject to an injustice which was obvious to many of Nohad's colleagues – including some Muslim colleagues – who signed a petition protesting against her dismissal. In order for us to challenge Nohad's unfair dismissal, and the unequal treatment of Christians in the workplace, we need a judge to rule that she was in fact employed.'

On 28 October, the Court of Appeal ruled that Nohad has no employment protection. The case raises vital issues about whether employers can effectively sidestep important employment protections (including non-discrimination and religious freedom regulations) through the use of complex contract arrangements. It also highlights a potential clash between UK and EU understandings of 'employment'. The case could have implications for thousands of workers in the UK who use employee controlled companies. Nohad is liasing with her legal team to see how to respond. *[Christian Legal Centre]*

Aisling Hubert

In what is believed to be the first case of its kind to come to court in the UK, a summons has been issued to a doctor accused of offering to authorise an illegal 'gender-abortion'. The case is being supported by the Christian Legal Centre.

Dr Prabha Sivaraman has been ordered to appear before Manchester and Salford Magistrates' Court in December to face an accusation of conspiracy to procure an unlawful abortion. She was caught offering abortion on the grounds of gender, during an undercover investigation by a national newspaper in 2012.

However, after a lengthy police investigation, the Crown Prosecution Service (CPS) took the surprising decision not to proceed with the case – despite finding that there was sufficient evidence to provide a realistic prospect of conviction. The decision not to prosecute attracted widespread criticism from across the political spectrum.

However, last month 21-year-old Aisling Hubert, supported by the Christian Legal Centre, launched a rare private prosecution of Dr Sivaraman and of a second doctor in Birmingham. The Magistrates' Court in Manchester has ordered the doctor to appear next month to face a charge of 'conspiracy to procure poison to be used with intent to procure abortion, contrary to section 59 of the Offences against the Person Act 1861'.

'Gender-abortion is a horrible practice. I took this dramatic step because those who should have done so were effectively turning a blind eye', said Aisling. 'Again we have seen the establishment stand silent in the face of the abortion industry, hoping that the horrors will be swept under the carpet and the problems go away. But justice demands that something is done and that people are held to account for their actions. The law can only protect if it is enforced', she explained.

The CPS announced its decision not to prosecute last year, saying that there was sufficient evidence to prosecute the doctors, but claiming that doing so would not be in the public interest. The decision provoked cross-party concern. The Health Secretary, Jeremy Hunt, said: 'This is a concerning development and I have written to the Attorney-General to ask for urgent clarification on the grounds for this decision.'

Labour's Shadow Attorney General, Emily Thornberry, wrote to the Director of Public Prosecutions (DPP), saying: 'As you will know, the GMC is a regulator and cannot bring criminal proceedings. The provisions of the Abortion Act 1967 are crystal clear. The conduct of abortions for reasons not stated in that Act is a criminal offence, not just a regulatory one. To decide not [to] prosecute because a regulator can hear the matter instead is to disapply the law and undermine the will of Parliament.'

Aisling Hubert's private prosecution has now been blocked by the Crown Prosecution Service, which has used its powers to take over the case, with a view to dropping it. The Christian Legal Centre is now considering what options are available for challenging this CPS decision. *[Christian Legal Centre]*

Sarah Mbuyi

An Employment Tribunal in the case of Sarah Mbuyi, a Christian nursery worker who expressed her opinion on marriage, has heard that Christian views on the topic should not be expressed in the workplace. Witnesses and legal counsel for the employer made the hostile comments at Miss Mbuyi's hearing this month.

Last year she was unfairly dismissed from her job at Newpark Childcare in Shepherd's Bush after a colleague lodged a formal complaint against her. The colleague had commented that she would consider Christianity only when she and her lesbian partner could get married in church, and that she thought God would approve. Miss Mbuyi responded by sharing her belief in the biblical teaching that homosexuality is a sin.

Sarah was investigated and immediately dismissed for gross misconduct. Gross misconduct is the most serious penalty normally reserved for theft and fighting at work.

In closing submissions to the Tribunal, Deshpal Panesar, Counsel for the employer, said: 'The employer dismissed [Sarah] for expressing fundamentally discriminatory views about homosexuality,

namely that it is a sin. [Sarah's] views were not merely in terms of 'my faith believes and other beliefs are valid' but were expressed as absolute truths. Those views, while they may be held in private, are fundamentally discriminatory against homosexuals and have no place in being expressed in the workplace, or in the manner of working, particularly in a nursery. To suggest that homosexuality should be repented is discriminatory. Whether harassment or not, unlawful discrimination, without apology or reticence is wholly unacceptable in the workplace. Simply put, in the eyes of the law homosexuality is not wrong. To suggest that [it is], in the workplace, is unlawfully discriminatory.'

Witnesses for Newpark Childcare have repeatedly expressed the view that Miss Mbuyi's Christian beliefs should not be expressed in the workplace.

In response to the question: 'Her Christian views of love breached your Equal Opportunities Policy?' one witness stated: 'Yes, I think they did – or her interpretation.'

Another witness claimed that Miss Mbuyi was not able to meet contractual obligations because of her belief, saying: 'She was not able to do her job – to represent the diversity of the nursery. This indicated other beliefs that would make her unable to fulfil her duties.' *[Christian Legal Centre]*

Mike Overd

Mike Overd, who has been a street evangelist for more than five years, was asked to attend Taunton police station for questioning over six complaints received about his preaching in the town centre. He says that since a new town centre sergeant arrived some months ago, who urged local traders to use mobile phones to video him making potentially 'offensive remarks', he has felt harassed.

'The sergeant also gave an interview to BBC Points West and the Somerset County Gazette, urging people to film me in order to show that my preaching is offensive. It is clear that this officer is determined to stop me preaching the gospel, which is a terrible attack on freedom of speech. I find it extraordinary that the police are trying to make it illegal to preach the gospel in the streets of our country, simply because the gospel at times confronts the sinner. It is also wrong for a police sergeant to incite local traders to seek out video evidence that my preaching causes offence and to go on TV and speak to the press to encourage people to film me for evidence of potentially offensive preaching.'

Mike films all of his street preaching and has provided the police with film recordings covering the six occasions which led to the allegations. 'I do this to prove I have done nothing wrong. I simply preach gospel truth. I gave the police two DVDs covering all the events that led to their inquiry.'

He preaches the good news of the gospel in various places where he sees groups of people gathered together, and he has evangelised in Glasgow, Sheffield, Manchester and currently in Taunton, near where he and his wife now live.

'My preaching is challenging because I tackle sin head on but I take care not to be offensive and I use a small amp box hung around my neck so I can be heard but don't have to shout loudly', explains Mike. He feels that a number of the six complaints received were frivolous, with complainants failing to remember what he had said, or forgetting when the alleged offensive remarks had taken place.

A former Paratrooper, Mike is being represented by a Christian Legal Centre lawyer, and was due to appear at Taunton Magistrates Court on 11 March accused by witnesses of using threatening and abusive speech during his street preaching last year.

Mike faces trial for three alleged offences under the Public Order Act. The CPS is bringing the case against him, stating it to be 'in the public interest'. However, a number of the witnesses interviewed said they cannot remember what was said or when it was said. The charges relate to sermons he preached in Taunton in June and July last year. *[Christian Legal Centre]*

Richard Page

A Cabinet minister and England's highest judge have together disciplined a Christian magistrate for saying that a child's best interests lie in being raised by both a mother and a father, telling him that his Christian beliefs about the family must not influence his work while sitting on the Bench.

Richard Page, who has served as a Justice of the Peace in Kent for 15 years and is a well-respected member of the panel, expressed the view during a closed-door consultation with colleagues in an adoption case. Having heard all the evidence in an adoption case, Richard decided that his legal duty to act in the best interests of the child meant that he could not agree to placing the child with a same-sex couple.

Following an investigation by the local JP Advisory Panel the case was referred to the Lord Chancellor and the Lord Chief Justice. The Lord Chancellor and Lord Chief Justice have now told Richard that his Christian beliefs about family life are discriminatory against same-sex couples. He has been publicly reprimanded and barred from sitting as a magistrate until he has received 'equality training' for his views.

Commenting on his experience, Richard said: 'My Christian faith informs me that children flourish best in a loving home with a married mum and dad. My 20 years of experience in mental health service also leads me to the same conclusion. This is not a matter of prejudice or bigotry but is based on knowledge and evidence that I have applied when seeking the best interests for a lifetime of a vulnerable child.

'As a Magistrate in the Family Court, I must conduct a case-by-case analysis, based on the facts which are before me. In this particular case, it appeared to me that there was overwhelming evidence that the situation was not in the best interests of the child.

'Since making the decision I have been put under huge pressure to conform to the conclusions that others wanted me to reach but I knew that I had to dissent, for the sake of that child. Christian faith demands setting aside ideologically-convenient conclusions and fighting for the best interests of children.' *[Christian Legal Centre]*

Victoria Wasteney

A Christian occupational therapist has been disciplined for praying for a Muslim colleague, despite being encouraged by the colleague to talk about her faith. Victoria Wasteney, Head of Occupational Therapy at the East London NHS trust, prayed for the newly-qualified Muslim worker after she expressed concerns about her health. When Victoria offered to pray with her, she willingly agreed, replying 'OK'.

However, in June 2013, the colleague raised a complaint against Victoria, who was called before the Associate Director of Therapies the next day and suspended for nine months pending an investigation. The colleague had never complained to her personally and had always initiated any discussions about Victoria's faith. 'I would have stopped praying immediately if I had thought I was

distressing her in any way but faith was openly discussed and encouraged and welcomed by the complainant,' Victoria said.

A disciplinary hearing ruled that Victoria was 'guilty' of three offences: praying for her colleague, inviting her to church charity events, and giving her a Christian book, *I dared to call him Father* – the story of a Muslim girl who had converted to Christianity. Victoria had given the complainant the book just before she was due to go into hospital for treatment. The ruling against Victoria was made despite the fact that the complainant failed to attend the disciplinary hearing and one of the witnesses had said he was pressured into making statements against her.

'I fear I may have been entrapped by a colleague who encouraged me to discuss my faith, who willingly agreed that I could pray for her and who even accepted an invitation to a church charity event', Victoria said.

Victoria is bringing her appeal under the Equality Act 2010 for discrimination and harassment on grounds of religion or belief. She will be represented by leading human rights barrister Paul Diamond.

Andrea Williams, Chief Executive of the Christian Legal Centre, commented: 'The NHS was founded and inspired by Christian principles and precepts. Such a heritage meant that the NHS was a model of how to deliver health care across the world; a place of safety, care, freedom and flourishing. Sadly, this case, along with others, demonstrates that today's climate in the NHS is increasingly dominated by a political correctness, and a lack of freedom to live out and manifest Christian belief.' *[Christian Legal Centre]*

Contributors to this issue of *The Bulletin*

Rod Badams was a journalist for 11 years, specialising in local government, before serving as General Secretary of Christians at Work from 1979 to 1998. He was FIEC Administrator from 1998 until his retirement in November 2011 and has been editor of *The Bulletin* since 2006.

Roger Hitchings retired in 2011 from the pastorate of a small church in the East Midlands after 15 years of ministry. Previously he worked for 23 years in the field of social welfare with a particular emphasis on older people, and continues with that area of interest through writing and speaking.

John R Ling is a freelance speaker, writer and consultant bioethicist. He is the author of three books on bioethical issues – all published by Day One – including the latest, *Bioethical Issues: Understanding and responding to the culture of death.* His personal website is www.johnling.co.uk

Norman Wells is a graduate of the London Theological Seminary and has served as director of the Family Education Trust since 2004. He is also a director of the Coalition for Marriage.

The Bulletin is published by the Social Issues Team of Affinity,
The Old Bank House, 17 Malpas Road, Newport, South Wales, NP20 5PA
Editor: Rod Badams (Tel: 01536 483440 Email: rodbadams@btinternet.com)