

SOCIAL ISSUES BULLETIN

affinity
gospel churches in partnership

WINTER 2024



**Assisted suicide and the
risk to vulnerable lives**

ISSN 2755-5615

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News, Articles and Reports from the Social Issues Team

ISSUE 57 – NOVEMBER 2024

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The Social Issues Bulletin is published by the Social Issues Team of Affinity

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Assisted suicide: Is it really inevitable?

By James Mildred

When Kim Leadbeater MP announced she would bring forward an assisted suicide bill in the House of Commons, my immediate reaction was one of concern that it might pass. This was no mere defeatism. We have seen numerous assisted suicide bills fail over the years, with the last Commons vote occurring in September 2015, when 330 MPs opposed the bill and 118 voted in favour. But despite past outcomes, I sensed that the situation had shifted in significant ways. So why was I more apprehensive this time?

For many reasons. Firstly, nine years since the last vote is a long time in politics, and the current Prime Minister, Sir Keir Starmer, supports assisted suicide. Reports indicate that No 10 placed considerable pressure on Leadbeater to bring forward a bill on assisted suicide so that the PM could fulfil his promise to Esther Rantzen to hold a vote on the issue during this parliament – hardly the ideal approach to forming policy! Added to this is the fact that hundreds of MPs elected since 2015 have yet to declare their stance. Given that most of these are Labour MPs, it was reasonable to assume that a large number might support the bill.

There is also the prevailing cultural mood of our time to consider. Individual autonomy has become, for many, the ultimate virtue. This proposed assisted suicide bill seeks to increase personal autonomy, aligning with the cultural sentiment famously summed up by poet William Ernest Henley: ‘I am the master of my fate. I am the captain of my soul.’ Given the appearance of widespread public support for assisted suicide in recent polls, I initially found it difficult to see how the bill would be defeated.

Reasons for cautious optimism

But since then, several key developments have offered more grounds for optimism. Firstly, there has been more caution in the mainstream media than I had anticipated. The *Times* published a cautious leader on the issue, and *The Telegraph* has also taken a wary stance. Meanwhile, the *Mail Online* continues to publish alarming stories from countries where assisted suicide is legal, and *The Guardian* has carried some thoughtful contributions. It is often the case that the more one examines assisted suicide, the clearer it becomes that it simply cannot work in practice; the associated risks are just too numerous.

Then there was the recent intervention by Health Secretary Wes Streeting, who announced that he would vote against the bill. Streeting has been open about his personal struggle with the issue, and in 2015, he actually voted in favour of assisted suicide. But he has since changed his mind, and the reason he provided is striking: he said that palliative care provision is not consistently available across the country. This means that if assisted suicide is introduced, people might choose it not out of genuine desire, but because they feel they have no other choice. That is not autonomy.

Streeting is not the only senior minister to declare opposition to the bill. The Justice Secretary, Shabana Mahmood, has also stated that she will vote against it. This is significant, as both Streeting and Mahmood head the ministries that would bear the greatest responsibility for implementing and enforcing any law on assisted suicide. Their opposition is likely to influence many Labour MPs.

Further cause for cautious optimism arose from a recent debate in the Welsh Parliament, where Members voted on a non-binding pro-assisted suicide motion. Although the Welsh Senedd lacks

the legislative authority to enact assisted suicide, the motion could have symbolically bolstered the pro-assisted suicide side. However, Members of the Senedd voted against it, by 26 to 19, with nine abstentions. Welsh Labour members were notably divided. A clear message emerged during the debate: why should we support assisted suicide legislation when palliative care services are already in such a fragile state?

For all these reasons, as I look towards the upcoming Second Reading of the assisted suicide bill on 29 November, my perspective has shifted. It is by no means a foregone conclusion that the legislation will pass. Indeed, there is a real possibility that it may be defeated.

Prayer, action, and the message of a better story

But this is no reason for complacency. We must maintain pressure and continue to make the case against a change in the law. Let's focus on demonstrating to MPs that no assisted suicide law can truly be made safe. There is strong evidence, including from Canada, that suggests that legalising assisted suicide harms palliative care provision. Please pray about this legislation. As the Apostle Paul reminds us in Ephesians 6:10-12:

Finally, be strong in the Lord and in his mighty power. Put on the full armour of God, so that you can take your stand against the devil's schemes. For our struggle is not against flesh and blood, but against the rulers, against the authorities, against the powers of this dark world and against the spiritual forces of evil in the heavenly realms.

At the risk of being controversial, Satan is pleased by assisted suicide. He is pleased with the notion that it is compassionate, with the worldview that elevates human reasoning above God's sovereign rule. He delights in the fact that it can usher people into a lost eternity. Please pray that this bill does not succeed.

And if you have not yet done so, please contact your MP. Urge them to vote against the bill. You could remind them that in Canada, where assisted suicide was legalised in 2016, the initial safeguards were removed within five years, and eligibility criteria were widened. Surely, you might argue to your MP, the same would happen here. No assisted suicide law can ever be made truly safe from abuse or exploitation. And you can urge your MP to advocate for genuine investment in palliative care services, which would end the current postcode lottery in palliative provision across England and Wales.

Finally, let us remember what God declares in his word: Exodus 20:13 says 'You shall not murder', and 1 Samuel 2:6 reminds us, 'The Lord brings death and makes alive; he brings down to the grave and raises up.' We are not granted the right to decide to end our lives – that decision belongs to God alone.

True compassion does not offer lethal drugs as an answer to despair. Instead, we affirm the inherent dignity of every person, made in God's own image. We share in one another's suffering, declaring a simple yet beautiful truth: it is good that you exist. It is good that you are in the world. That is the better story we have to offer.

James Mildred is the Director of Communications and Engagement at Christian Action, Research, and Education (CARE).

Learning from Canada's experiment with euthanasia

By Steve Fouch

In the debate over the Leadbeater Bill to legalise assisting the terminally ill to take their own lives, one topic that comes up repeatedly is the other jurisdictions that have already taken that step: either legalised assistance to a dying person in taking their own life (assisted suicide) or the medical administration of a fatal dose of drugs (euthanasia) to end a patient's life.

Those supporting Kim Leadbeater like to cite the US state of Oregon, which has had assisted suicide with some safeguards for over two decades.¹ But while the Bill currently before Parliament in the UK is attempting to follow the Oregon template – making it only for those in the last six months of life and with mental capacity, a firm, settled will, and no evidence they are under coercion – there are already activists keen to expand the range of the proposed legislation to include people with chronic illnesses and disabilities.

Sadly, it is not too far-fetched to see even the modest (and almost undoubtedly ineffective) safeguards being proposed in this Bill being loosened very quickly, either at the committee stage or in legal challenges once it becomes law.² And that is because of the precedent of the many other international examples of such laws.

The Netherlands legalised euthanasia in 2002, allowing doctors to take the life of a patient at their explicit request in limited circumstances. That law has now extended to euthanising those in comas (who had said they would accept euthanasia should they be in such a state) and those with dementia (again, having expressed a prior wish when they had the capacity).³ There are proposals to extend it to infants and children (with parental consent/requests).⁴

Belgium introduced a similar law in 2002, and it has extended to those with mental health issues, children, and those with no significant health issues but who feel life is no longer worth living. Belgium also allows foreigners to submit requests for euthanasia in the country.⁵

Let's avoid our own home-MAID disaster

The most recent example is Canada, which brought in a law legalising 'medical assistance in dying' (or MAID as it is now known) in 2016. This was initially for adults with 'illness, disease or disability or [whose] state of decline causes them enduring physical or psychological suffering'.⁶ By 2017, legal

1 Oregon's Death with Dignity Act. *Oregon Health Authority*. <https://bit.ly/3Z3AvCF>

2 See: Marriott S. what is Kim Leadbeater proposing? *CMF Blogs*. 13 November 2024. <https://cmf.li/3AGCzXT>

3 Euthanasia: Dutch court expands law on dementia cases. *BBC News*. 21 April 2020. <https://bbc.in/4fMNpdY>

4 Netherlands to broaden euthanasia rules to cover children of all ages. *The Guardian*. 14 April 2023. <https://bit.ly/307AwPI>

5 Has Belgium become a haven for people wanting to end their life? *Euronews*. 2 November 2023. <https://bit.ly/3Z8z3iC>

6 First Session, Forty-second Parliament, 64-65 Elizabeth II, 2015-2016. STATUTES OF CANADA 2016 CHAPTER 3: An Act to amend the Criminal Code and to make related amendments to other Acts (medical assistance in dying), 17 June 2016. https://www.parl.ca/Content/Bills/421/Government/C-14/C-14_4/C-14_4.PDF

challenges argued this was too restrictive. These challenges were successful, leading to a 2021 amendment by the Canadian Parliament that ‘no longer limit[ed] eligibility for medical assistance in dying to persons whose natural death is reasonably foreseeable’.⁷

The consequences have been harrowing.

In the summer of 2019, a 61-year-old man, Alan Nichols, was hospitalised because there were concerns that he was suicidal. Within a month of admission, he was killed under MAID, citing hearing loss as his reason. His family and the health professionals who had been caring for him in the community had tried to raise concerns with the hospital about his suicidal ideas – they were ignored, and a later legal case was thrown out.⁸ This is not the only story of people with mental health issues being offered MAID rather than social and psychiatric support.⁹ And yet there are genuine (albeit temporarily suspended) proposals to bring in legislation extending MAID to those experiencing distress from mental illness.¹⁰

But it is not just concerns about how people with mental illness are being railroaded into MAID. Rose Finaly, a 33-year-old woman with quadriplegia, said she was opting for MAID because it would take eight months to get further disability support to allow her and her three children to manage as her health deteriorated. She could no longer afford care, but she could get MAID within 90 days.¹¹ Again, this is far from a unique scenario in Canada, where MAID is often easier to access than social assistance and even healthcare.

At the same time, as MAID legislation came into effect, there were already reports that Canada lacked sufficient palliative care doctors to meet end-of-life care needs.¹²

A lack of access to good end-of-life care, social support, mental health services, and medical care means that MAID has become the more accessible, cheaper, and quicker option for many of the poor and marginalised in modern Canada.

It does not take too much imagination to see how quickly this could happen in the UK. Our hospices are in crisis, with many having to close beds and make staff redundant due to shortfalls in government funding, a drop in charitable giving due to the cost-of-living crisis, and the recent hike in employers’ National Insurance contributions. Social care is collapsing, with care homes shutting down and having difficulty recruiting and retaining care staff. People are struggling to access their GP and face long waits at A&E. Assisted suicide will quickly become the cheaper, easier option here as well.

This led the current Health Secretary, Wes Streeting, to announce he won’t support the Leadbeater Bill. He has also expressed concerns that making assisted suicide legal in the UK will inevitably lead to a diversion of NHS resources to fund its provision rather than investing in social and palliative care.¹³

7 C-7, 43rd Parliament, 2nd session. Wednesday, September 23, 2020, to Sunday, August 15, 2021. An Act to amend the Criminal Code (medical assistance in dying). <https://www.parl.ca/LegisInfo/en/bill/43-2/C-7>

8 Cheng M. ‘Disturbing: Experts troubled by Canada’s euthanasia laws’. *Associated Press*. 11 August 2022

9 Gamage M. ‘She Sought Help in Crisis and Was Suggested MAID Instead’. *The Tyee*. 9 August 2023. [etyee.ca/News/2023/08/09/Medical-Assistance-Dying-Slippery-Slope-Mental-Illness-Disabled/](https://www.etyee.ca/News/2023/08/09/Medical-Assistance-Dying-Slippery-Slope-Mental-Illness-Disabled/)

10 Honderich H. ‘Who can die? Canada wrestles with euthanasia for the mentally ill’. *BBC News*. 14 January 2023. <https://www.bbc.in/3CsHM6i>

11 Riches R. ‘Quadriplegic Ontario mother says her only option is assisted suicide due to lack of support’. *National Post*. 22 June 2023

12 Vogel L. ‘Canada needs twice as many palliative specialists’. *CMAJ*. 2017 Jan 9;189(1):E34-E35. doi: 10.1503/cmaj.109-5354. Epub 2016 Nov 14. PMID: 28246259; PMCID: PMC5224958.

13 Campbell D. ‘Legalisation of assisted dying may force NHS cuts, Wes Streeting warns’. *The Guardian*. 13 November 2024

The evidence from Oregon is that the majority of requests for assisted suicide are not due to pain or intolerable suffering but from fear of being a burden and worries about life losing colour and meaning in the final months and weeks of life.¹⁴ Real assisted dying is about helping people to live until they die. Intractable pain can usually be managed. A loss of joy and a fear of being a burden is a spiritual anxiety that can be alleviated. Offering good support in the community for those with chronic conditions, the elderly, the disabled, and the dying – including good social care, palliative care, and wider social support networks – is the real choice we should be offering.

We should actively support Wes Streeter as he seeks to improve health and social care and improve funding for palliative care. Furthermore, as Christians, we should not only be behind that, but we should also be at the forefront of offering spiritual hope and support to those at the end of their lives. We believe in living life to the full, right up to natural death, and beyond into eternity. We have good news to share.

Canada is a sobering case study for where this country could end up in a few years if the Leadbeater Bill comes into law. As Christians, our concern should be justice – especially for the poor and the marginalised – and seeing all human life afforded dignity. In the long run, this Bill will neither offer justice nor afford dignity to the dying.

For the church and individual Christians across the UK, that means more than campaigning against the Leadbeater Bill. It is also about supporting our local hospices, volunteering with chaplaincy teams, and being good news to our neighbours, especially the isolated and elderly, in practice as well as in word.

Steve Fouch is Head of Communications at Christian Medical Fellowship (CMF). He has worked in community nursing, HIV & AIDS and palliative care. He serves on the International Board of Nurses Christian Fellowship International.

14 Oregon Death with Dignity Act 2022 Data Summary. <https://bit.ly/3Yt2886>

The pain is real, but the decision is right

By Graham Nicholls

Dying with faith and dignity

A couple of years ago, I witnessed my mother's death. It was a slow decline, caused by old age and a gradual shutting down of desire and function. My father had died decades earlier – his was the first dead body I had ever seen. As I write this, we are attending to my father-in-law during the final days of his life, as he surrenders to cancer. His daughters and wife sit at his bedside, holding his hand, speaking, praying, and singing hymns. The hospice nurses call in regularly with great care and discretion. For him, there is physical pain and a struggle to comprehend and cope with what is happening.

Both these parents had what might be described as fulfilled lives, blessed with jobs, holidays, homes, and families – including great-grandchildren they were able to hold in their arms. Good memories. And they had faith in Christ that shaped their lives and gave them hope.

So, what is there left to do in those final weeks? Not much, really, except to die.

Why can't we save ourselves and our loved ones a lot of anguish and allow them to die, apparently with dignity, at a time of their choosing? Why don't we advocate for legal changes to enable us to make such choices? Why do we have to wait until the natural end?

My answer is a firm no! We don't want to do that because we love God, and we love people. We don't want to dishonour God or harm others.

God gives life and dignity. The Creator bestows value upon every man and woman as beings made in his image, and so we should not take our own lives or anyone else's (Gen 9:6). That image is not about physical or even mental capacities. My suffering father-in-law, lying emaciated on a hospital bed at home with shallow breaths, still possesses 100% of the dignity inherent in being made in the image of God. It's not about what we can do but about who we are.

Because I believe in the goodness of God but also the reality of sin, I recognise there are blessings in experiencing or witnessing the process of dying. We learn lessons of dependence on God, our own weaknesses, and the horror of sin and its far-reaching consequences. We're not meant to think of death as good, but that's the point. If we take away all the pain and turn it into a painless clinical procedure, we dull our senses. And we lose precious moments – not of our choosing but thrust upon us – moments that help us confront our mortality and remind us of our lack of control. In those moments, we run in faith to the Sovereign Lord, our heavenly Father.

An unbearable weight

Just imagine for a moment there is a new law enabling assisted suicide for someone with a terminal diagnosis.

This presents the family with an unbearable weight. The question will hang in the air from the moment that diagnosis is given: Who will raise the subject? Who will decide? Do they really have the capacity to make that choice? What if family members don't agree? How will they feel as the bills for care mount up while a shortcut to the Grim Reaper is available? The potential for family division and tragic outcomes is enormous.

And what about the doctors and nurses? Their roles would fundamentally shift, from wanting you to be alive and comfortable to a dual role of healer and executioner. One day, they bring comfort; the next, they advise on administering poison. The visiting doctor ponders how many more visits he can fit into his busy schedule before the family caves in and takes the pill. Hospice nurses do their best to remain positive, all the while wondering when they'll be asked for that extra dose in the syringe driver to 'get this over with'. Their jobs have changed irreversibly.

Choosing to live through dying

So we wait patiently. We accept that our loved ones are beyond restorative treatment. We seek to bring calmness and comfort through all available medical means, especially through the presence of loved ones.

And however painful and inconvenient, we live through dying.

Graham Nicholls is Director of Affinity, providing strategic leadership of the ministry teams, and he regularly writes and speaks in the media. He is also one of the Pastors of Christ Church Haywards Heath and preaches there regularly. He is married to Caroline and has three grown up children.

The lives of disabled and dying people have value and worth

By Lucy Honeysett

I was 17 years old when I first became involved in end-of-life care. I was a carer at a wonderful Christian Pilgrims' Friend Society care home and looked after an elderly lady who was dying. Over a period of weeks, she grew weaker until, one day, she died – slipping from her deep sleep into eternity. She didn't seem distressed in any way, nor did she have symptoms or a need for medication; in fact, her death was so peaceful it was almost unrecognisable. Her life, and her peaceful, dignified, expected death, had a remarkable impact on me. I felt as if I'd been allowed into a sacred, private space and was deeply privileged to care for her in her final moments before she met her Saviour.

This experience, along with many other precious ones, fuelled my desire to become a palliative care nurse and to do all I can, with God's help, to care for people who are dying – reminding them that they remain valuable, not because of what they can do, but because of who they are. They are precious and irreplaceable, not forgotten or considered a burden.

God's heart for the vulnerable

God's fatherly heart for people on the margins is carved upon every page of scripture. Remembering this, and that each person is an image-bearer known intimately by God, impacts the way you care. From my experience as a nurse, and as I connect now with carers working across the care sector, I see that God strategically places Christians to protect and value the most vulnerable in society: those with learning and physical disabilities, with mental health challenges, those ageing and becoming frail with increasing care needs, and those approaching the end of life. No life reaches a point where it is no longer worth living (Ps 23:4-6), and the vulnerable must be protected.

Carers have shared incredible stories about God revealing his love to those at risk of being marginalised. One carer, while silently praying in her heart for a young person with profound physical and learning disabilities, was asked by him, 'Who are you talking to?' It became clear that he could somehow hear her praying, said he liked it, and asked her to continue! Just last week, I visited a friend living with advanced dementia who is often quite disoriented. Yet, when we started talking about our Saviour, her thoughts became crystal clear. She knew exactly who she was in Christ and all that he has done for her. Though our conversation was slow and repetitive at times, our moments talking to God were rich, full of clarity and love. Jesus shows tenderness to those who are more vulnerable, and we must do all we can to protect people like this, who could be at risk if assisted suicide were legalised.

Being present

'Suffering is not a question which demands an answer, it's not a problem which demands a solution... it's a mystery which demands a presence' – Prof. John Wyatt.

We are so often placed by God to be 'present'. One carer shared how the person they support was longing for a pill to end their life because they could see no point in carrying on. We are trusted by frightened people who sometimes feel suicidal and who can perhaps be more honest with us than

with their own loved ones. This particular carer has remained committed, compassionate, and kind to the person, has prayed for her, and now the lady no longer wants to end her life. Instead, she looks forward to the carer's visits and the hope and joy she brings. Carers, along with many other health and social care professionals, have the privilege and opportunity to bring kindness, hope, and compassion to people who may be in the depths of despair. They do this by listening well, not judging or brushing comments aside, seeking specialist help if needed, and, perhaps most powerfully of all, remaining present, prayerful, and committed, as they shine the love of Christ into the darkness (Matt 5:14–16). But we need to ensure people just like this lady can access care when it's needed and aren't left wondering if death would be a more convenient option than waiting for the right health and social care.

Suffering at the end of life

People who are dying can have worries and fears, and I think this is often the cause of their suffering. In my experience, when people express a desire to end their lives prematurely, it is often fear at the root of this: fear of the dying process, fear of unbearable suffering, fear of becoming a burden, fear of losing all control and being alone.

I can honestly say that the majority of people I have nursed at the end of life have not suffered from uncontrolled physical symptoms, whether they've been at home, in a hospital, in a care home or a hospice. Contrary to arguments for assisted suicide as relief from 'intolerable and unbearable suffering', most of the deaths I've seen – hundreds by now – have been very peaceful, expected, dignified deaths. With advances in medicine, physical symptoms can be very well managed and brought to a level that feels acceptable. However, fear, as well as psychological and spiritual pain, cannot be simply fixed by medication. Many of these fears can be soothed by the commitment of people willing to journey with the dying. Listening to worries, explaining what dying might look like, helping plan for the future to retain some control, hearing their voice and respecting their wishes, using time to search for meaning, and providing reassurance of presence – these are all crucial.

To provide this, hospices need increased investment so they can offer holistic care, and the health and social care sector needs urgent help so that we can meet the needs of vulnerable and dying people. It would be devastating to offer affordable assisted suicides instead of investing in our overstretched health and social care services.

Where is God when people are dying?

Being told you have an incurable illness provides an opportunity, some have even said a gift, to reprioritise, to search for meaning, to make amends and to live life to the full. I have seen joyful and deeply profound moments in the last weeks of life: weddings, baptisms, Christmas celebrated in July, trips to big football matches, and visits to safari parks. Ending lives sooner with assisted suicide would rob people of these unexpected moments of happiness and peace that often occur in the final months, weeks, days, and even hours of life.

In God's kindness, I have seen people meet Jesus in their dying moments after lives distant from him. In his perfect timing, people have encountered the living God, turning from their independence to trust in Jesus, giving them hope and confidence in their final moments, just as the thief on the cross did next to Christ. I also know that God is not limited by levels of consciousness or by our perceptions of communication. He can speak into every heart, so it has been important for me to entrust all unknowns to him.

And as I've cared for brothers and sisters in Christ, I've always known God's blessing. As life ebbs away, I am assured that in a matter of moments, this person will become more alive than they have ever been before. You can't help but wonder what is happening in the heavenly realms. What preparations are under way in their new home? Is Jesus preparing to return for them now? These verses speak to moments like this:

Do not let your hearts be troubled. You believe in God; believe also in me. My Father's house has many rooms; if that were not so, would I have told you that I am going there to prepare a place for you? And if I go and prepare a place for you, I will come back and take you to be with me that you also may be where I am. (John 14:1-3 NIV)

Do you, like me, sometimes wonder what dying will be like? Our Father, knowing us so well, has the most beautiful plan for that moment. For a Christian, whether a death feels shocking and unexpected or peaceful and welcome, we know with certainty that Jesus himself promises to join us at this moment – to personally come and take us to be with him.

Lucy Honeysett is the lead co-ordinator for Christians in Care, a network that connects Christians working across the care sector; together encouraging and inspiring one another to live and speak for Jesus. She is also a nurse, working primarily in palliative care, and is passionate about good quality and access to end-of-life care.

Current Bioethics Issues - October 2024

by Dr Calum MacKellar

New Assisted Suicide Bill in Westminster Parliament

On 16 October 2024, Ms Kim Leadbeater MP introduced the *Terminally Ill Adults (End of Life) Bill* for England and Wales in the House of Commons, which would allow terminally ill adults to request assistance to prematurely end their lives, subject to suggested safeguards. Interestingly, this Bill follows the decision of the Welsh Senedd on 23 October 2024 to reject, by 26 votes to 19, a motion supporting assisted suicide.

If the Westminster Bill is accepted, it would imply that the value of a human life is determined by certain subjective quality standards, allowing some lives to be deemed unworthy. Indeed, the UK Parliament would no longer be able to affirm and defend the lives of all its members, as well as the principle that every human life is full of value and meaning, even in cases where individuals are elderly, dependent on others, have lost autonomy, or are receiving palliative care.

The Westminster Bill's Second Reading will be held on Friday, 29 November 2024, where the main principles of the Bill will be debated and put to a vote. Regardless of the outcome, the vote will carry significant consequences for related legislation in Scotland and Northern Ireland.

Number of Stored Human Embryos Reaches 500,000 in the UK

An Open Access article published in June 2024 indicated that about 500,000 embryos are currently stored in a frozen state in the UK, with a significant proportion likely to be discarded eventually. The findings used data from 1991 to 2019 provided by the UK Human Fertilisation and Embryology Authority.¹

In light of these trends, the principal author, Zishang Yue, highlighted that any destruction of human embryos creates a moral dilemma. This is because UK legislation is based on the Government's 1984 Report of the Committee of Inquiry into Human Fertilisation and Embryology (*Warnock Report*),² which acknowledges that human embryos hold a special (though undefined) moral status. Since human embryos retain this moral status in the UK, it is essential to address ethical concerns around the creation and destruction of vast numbers of embryos in fertility clinics. On this point, Lord Alton of the House of Lords remarked in *The Daily Mail* in 2012 that embryos were being created and discarded on an 'industrial' scale in the UK, adding: 'It happens on a day-by-day basis with casual indifference'.³

The article suggests several proposals to manage the growing number of embryos in storage in the UK. These include amending the law to resemble Germany's 1990 *Embryo Protection Act*, which

1 Yue, Z., & MacKellar, C. (2024). A quantitative analysis of stored frozen surplus embryos in the UK. *The New Bioethics*, 1-18.

2 Warnock Report, *Report of the Committee of Inquiry into Human Fertilisation and Embryology* (London: Her Majesty's Stationery Office, 1984).

3 Steve Doughty, '1.7 million embryos created for IVF have been thrown away, and just 7 per cent lead to pregnancy'. *Mail Online*. 31 December 2012

explicitly forbids the creation of surplus embryos during an IVF cycle.⁴ The German Act also states that an embryo only exists after fusion of the pronuclei (containing the chromosomes) of the sperm and egg cells, which occurs around 10–24 hours after the sperm cell first penetrates the egg. This definition excludes newly fertilised eggs from being classed as embryos until the fusion stage, allowing them to be stored in Germany before this stage is reached.

‘Compensation’ for Individuals ‘Donating’ Their Sperm and Eggs Raised in the UK

From 1 October 2024, ‘compensation’ for men to ‘donate’ their sperm has risen to £45 per clinic visit, while for women, it has increased from £750 to £986. The Human Fertilisation and Embryology Authority, which sets the ‘compensation’ amount, cited a shortage of egg and sperm donors among other reasons. However, it emphasised that ‘donating’ is a ‘complex decision’ and should not be driven purely by monetary motives, as payment for donation is illegal in the UK. This means that the money must be viewed as ‘compensation’, though the term is not clearly defined.⁵ It is worth noting that egg donation carries inherent risks.⁶

Interestingly, in the UK, women can still legally ‘barter’ their eggs. This arrangement allows them to receive free or significantly discounted IVF treatment (typically costing up to £5,000 per cycle) in exchange for donating eggs to other patients or researchers.⁷

However, this practice raises ethical concerns regarding the potential exploitation of vulnerable individuals who may not afford the full cost of IVF and are ineligible for free treatment in the UK. Wealthier women are unlikely to be motivated by such a ‘bartering’ scheme. Additionally, this practice appears to contradict the *Council of Europe* (of which the UK remains a member) *Convention on Human Rights and Biomedicine* (1999, which the UK has not signed), which states in Article 21 (Prohibition of financial gain) that ‘the human body and its parts shall not, as such, give rise to financial gain.’

New UK Guidelines for Developing Synthetic Human Embryo Models

In July 2024, a new UK code of practice was announced to guide the creation of synthetic human embryo models. These are three-dimensional embryonic structures created in laboratories to mimic early human embryos. The technology became ethically controversial in 2023 when researchers created an embryo model with a heartbeat and features resembling those found in the third or fourth week of pregnancy, without using eggs or sperm.

The previous lack of specific guidelines left scientists uncertain about the legal and ethical limits of their work. Under existing UK law, researchers can grow ‘real’ human embryos for research purposes

4 German 1990 Embryo Protection Act, (1990 §1.1.2-1.1.5) https://www.rki.de/SharedDocs/Gesetzestexte/Embryonenschutzgesetz_englisch.pdf?__blob=publicationFile

5 Charlotte Edwards, ‘Sperm donor cash rises by £10 as UK faces shortage’, *BBC News*, 1 October 2024 <https://www.bbc.co.uk/news/articles/cm24vd6ldypo>

6 Charlotte Edwards, ‘Egg donors warned not to do it for the £986 cash’, *BBC News*, 8 August 2024, <https://www.bbc.co.uk/news/articles/clyl34qdzjxo>

7 See Egg Sharing from the Human Fertilisation and Embryology Authority: <https://www.hfea.gov.uk/donation/donors/egg-sharing/>

for up to 14 days, after which they must be destroyed. However, if synthetic embryo models are not classified as ‘real’ human embryos, they are not bound by this restriction.

The new voluntary code of practice will establish an oversight committee to decide how long specific embryo models may be developed, though it does not rule out experiments exceeding the 14-day limit.⁸ This raises concerns regarding whether members of the oversight committee would be willing to safeguard certain embryo models if they do not even consider ‘real’ human embryos as warranting protection.

Dr Calum MacKellar is affiliated to the Centre for Bioethics and Emerging Technologies at St Mary’s University in Twickenham, London. He is also a member of the United Free Church of Scotland in Edinburgh.

⁸ Ian Sample, ‘Work on synthetic human embryos to get code of practice in UK’, *The Guardian*, 4 July 2024, <https://www.theguardian.com/science/article/2024/jul/04/work-on-synthetic-human-embryos-to-get-code-of-practice-in-uk>

Latest News of Significant Individual Cases

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

Sudiksha Thirumalesh

Sudiksha, an A-level student who remained fully conscious, disagreed with her doctors' opinion that her condition was incurable and that she should therefore have all life-sustaining treatment ended and move to a palliative care pathway. Sudiksha's wish was to be allowed to go to Canada for experimental treatment, which could have given her a chance of survival. However, doctors at the Queen Elizabeth Hospital Birmingham concluded that it was in Sudiksha's best interests for her life-sustaining treatment to be withdrawn so that she would die, rather than have her suffering prolonged.

Sudiksha disagreed with her doctors' outlook and declared that she wanted to 'die trying to live'. The University Hospitals Birmingham NHS Foundation Trust therefore made an application to the Court of Protection, arguing that her resistance was a 'delusion' and asking the Court to declare that she lacked the mental capacity to make decisions about her healthcare, since she disagreed with her doctors' diagnosis and prognosis.

Supported by the Christian Legal Centre, Sudiksha instructed her own lawyers to argue that she had mental capacity and should be independently represented in Court proceedings. Despite two psychiatric experts, appointed to examine Sudiksha, informing the Court that she was of sound mind, Mrs Justice Roberts disagreed and concluded that Sudiksha's failure to believe her doctors meant she lacked the ability to understand information and make decisions about her medical treatment.

In August 2023, the Court of Protection declared that her treatment could be made without her consent, based on an assessment of her best interests. Tragically, Sudiksha died on 12 September 2023. In a rare move, because of the importance of the legal principles involved in the case, the Court of Appeal granted Sudiksha's parents permission to pursue a posthumous appeal against the ruling.

Lawyers argued that it was legally impermissible for the Court to dismiss the unanimous view of psychiatric experts and instead rely on the opinions of intensive care doctors with no expertise in mental health. A major mental health charity, MIND, was granted permission to intervene in the case. MIND argued that Mrs Justice Roberts' judgment set a dangerous precedent by ruling that a patient who disagreed with their doctors had to be deemed, on account of that disagreement, to have a mental illness.

The Hospital's lawyers argued that Sudiksha's refusal to accept the advice of her doctors and her insistence on seeking life-preserving treatment in Canada was 'delusional'. On 31 July 2024, Lady Justice King, Lord Justice Singh, and Lord Justice Baker overturned the decision of the Court of Protection, which declared that 19-year-old Sudiksha Thirumalesh lacked the mental capacity to make decisions about her medical treatment.

The Court of Appeal's important judgment now reaffirms the right of patients to disagree with their doctors without risking being declared mentally incompetent and having their best interests assessed and enforced by the courts. This ruling potentially affects thousands of patients.

Giving the judgment of the Court, Lady Justice King said that ‘it is essential always for any person conducting a capacity assessment’ to remember that, under the Mental Capacity Act, a ‘person is not to be treated as unable to make a decision merely because he makes an unwise decision.’

The Court also ruled that Mrs Justice Roberts had made a further error in overruling the unanimous view of two psychiatrists who independently examined Sudiksha and concluded that she had full mental capacity. Having formally revoked the declarations made by the Court of Protection, Lady Justice King concluded by saying that Sudiksha was entitled in law to be assumed to have capacity, ‘and this remarkable young woman therefore had her wish to ‘die trying to live.’”

Sudiksha’s parents said: ‘We are grateful to the Court of Appeal for an opportunity to challenge the frightening and unfair judgment made against Sudiksha even after her death, and for setting the law straight. A patient’s right to disagree with her doctors, not to relinquish hope, and still to have her decisions respected, will now be part of Sudiksha’s legacy.’

Darlington Nurses

The Darlington nurses working at Darlington Memorial Hospital have filed legal action against the County Durham and Darlington NHS Foundation Trust for sexual harassment and sex discrimination. The Trust’s policies permit any member of staff to ‘identify’ in the opposite gender and access single-sex changing rooms, toilets, or showers on that basis.

The male operating department practitioner, who has been sharing a changing room with the female nurses, openly says that he does not take female hormones and is trying to get his girlfriend pregnant; however, he also says that he ‘identifies’ as a woman and is called ‘Rose’.

The nurses say that their ‘transgender’ colleague often spends a long time walking around the female dressing room, on many occasions wearing only tight male boxer underpants, staring at and initiating conversations with female nurses as they are getting changed.

Concerns were first raised on the wards and with HR in August 2023, but no action was taken. In March 2024, a letter was signed by 26 nurses and sent to the Director of Workforce at the NHS Foundation Trust. In this letter, the nurses stated that they did not believe it was ‘appropriate to have a sexually active biological male sharing our changing facilities’.

The nurses received no reply; however, an impromptu meeting was organised, and the nurses were told by the Head of HR that they needed to ‘broaden their mindset’, be more ‘educated’, and be more ‘inclusive’.

After outstanding public support for their case, the nurses have now launched their own trade union, the Darlington Nursing Union, to defend the rights and dignity of women in the workplace.

The importance of their challenge has also been vindicated by a meeting on 24 October 2024 with the Secretary of State for Health and Social Care, Wes Streeting, who confirmed he is committed to ensuring that the belief that sex is biological will be reflected in the day-to-day running of the NHS under his watch.

Mentioning how they had launched the first-of-its-kind ‘Darlington Nursing Union’ (DNU) after struggling to get engagement and support from existing unions, Mr Streeting told them to send

their policy proposals and further information about the DNU to him so that they could keep correspondence open and move forward.

In response to that invitation, the nurses have now unveiled a draft guidance they have submitted for the Health Secretary's approval before it is formally issued to NHS Trusts.

The nurses say that the proposed guidance provides a fair and manageable way forward to protect safe single-sex spaces for all NHS staff in line with equality law, and also respects the rights of those with the protected characteristic of 'gender reassignment', legally known as 'transsexuals'.

The nurses, who are being supported by the Christian Legal Centre, also handed in a CitizenGo petition signed by 48,000 people to Number 10 Downing Street, calling for the government to do whatever is necessary to ensure women have access to single-sex changing rooms and toilets.

Bernard Randall

School Chaplain, Rev. Dr Bernard Randall, 49, lost his job and was reported to the government's terrorist watchdog after delivering a sermon in the school chapel that encouraged respect and debate on identity politics.

Supported by the Christian Legal Centre, Dr Randall filed a claim against Trent College for discrimination, harassment, victimisation, and unfair dismissal in the employment tribunal.

In June 2018, the College, which has a 'Protestant and evangelical' Church of England ethos, invited the leader of Educate and Celebrate into the school to train staff. 'Educate and Celebrate' claims to "equip you and your communities with the knowledge, skills, and confidence to embed gender, gender identity, and sexual orientation into the fabric of your organisation."

Dr Randall raised concerns about this Educate and Celebrate programme because of potential clashes with Christian beliefs and values.

In January 2019, at the next staff training day, it was announced that the school had decided to adopt their year-long 'gold standard' programme. This would see an identity politics 'LGBT inclusive curriculum' implemented, even for the nursery provision at the school.

Dr Randall asked students what subjects they would like to hear in his sermons during the summer term Christian chapel services. Dr Randall was approached by a student who asked him whether he would address the following: "How come we are told we have to accept all this LGBT stuff in a Christian school?"

He had also been approached by pupils who said they were confused and upset by the issues involved in the new LGBT teaching.

He gave the sermon twice as part of a service which also included hymns, prayers, and a Bible reading. A week later, Dr Randall was asked to attend a meeting with the school's Safeguarding Lead, where concerns were raised about his sermon. Dr Randall was suspended for the duration of the disciplinary process.

Dr Randall was dismissed for gross misconduct by letter on 30 August 2019. He appealed this decision and was reinstated at the school on a final written warning. He was then furloughed during COVID,

and in October 2021, having not been reinstated from furlough, Dr Randall was advised by the school that they wanted to consult on reconstructing the Chaplaincy provision.

From 7–21 September 2022, Dr Randall’s case was heard at the East Midlands Employment Tribunal. Following the hearing, Employment Judge Victoria Butler ruled against Dr Randall. Judge Butler used the CofE’s own ‘Valuing All God’s Children’ guidance for schools against Dr Randall. Judge Butler made the point that the CofE cites Educate and Celebrate as a recognised ‘resource’ in the guidance.

Responding to the result, Dr Randall said that he planned to appeal: “I am extremely disappointed by this result. It is a personal blow, but more importantly, it is a blow for all those who believe in freedom of speech, in freedom of religion, and in an educational system that opens the minds of young people rather than narrowing them or imposing an ideology that many or most in our society find troubling.”

Dr Randall is being supported by the Christian Legal Centre to appeal this ruling at the Employment Appeal Tribunal, with a hearing expected in 2024.

Dr Randall has since been reported to the Teaching Regulation Authority (TRA) and the Disclosure and Barring Service (DBS). The TRA subsequently decided to close the case, with nothing to answer for, and in January 2024, Dr Randall was cleared by the DBS.

The Disclosure and Barring Service (DBS) has said “it would not be appropriate” to take action against an ordained Church of England (CofE) chaplain who was sacked and reported to a terrorist watchdog for a moderate sermon on identity politics.

Dr Randall had highlighted to the DBS that hearing challenging ideas is not harmful and that free speech is actually good for everyone’s personal development.

Responding to the news that he has been cleared by the DBS, Dr Randall said: “I am obviously relieved that another malicious referral has been thrown out. It saddens me that it is now the CofE that continues to blacklist me and label its own teaching as a ‘risk factor.’”

Hatun Tash

Hatun Tash is a well-known Christian preacher who regularly debates Islam and the Qur’an at Speakers’ Corner in Hyde Park. She has faced threats to her life on multiple occasions for speaking and was attacked and stabbed on 25 July 2021 for preaching at Speakers’ Corner, suffering wounds to her face and hand.

Police have repeatedly failed to protect Hatun or make any arrests following her assaults and threats.

On Sunday, 26 June 2022, Miss Tash was setting up a camera at a crowded Speakers’ Corner, preparing to preach. As part of her critique of the Qur’an, she held a copy of it with holes in it. She used this visual aid to present the growing thinking, even among Islamic scholars such as Sheikh Yasir Qadhi, that the “standard [Islamic] narrative has holes in it”.

As she was setting up, a man snuck up to her belongings, grabbed her copy of the Qur’an, and ran off through the crowd. The Christian friends accompanying Miss Tash called the police to report the theft.

However, as the police arrived, instead of establishing what had happened, and without any discussion, an officer tried to draw her away from the growing crowd.

Refusing to move from where she planned to preach, the officers then put her in a hold and began to frog-march her through the crowds to waiting police vans.

Crowds of Muslims laughed, crowed, filmed, pursued, mocked, and assaulted Miss Tash as she was led away.

The police did nothing to control the crowd or deal with any of the violent intimidation.

Told that she had been arrested for ‘criminal damage’, which was false as it was her belongings that were stolen, she was also told that she was arrested under s 4a POA 1986 and section 18 POA 1986 for wearing a Charlie Hebdo t-shirt, which depicted the Prophet Mohammed.

She was detained overnight, strip-searched, and interrogated. Her copy of the Qur’an has not been returned to her, despite police knowing who took it.

Released at 9am, after 15 hours in custody, she was told that there would be no further action, and she was not given any assistance to retrieve her belongings from Speakers’ Corner.

Supported by the Christian Legal Centre, Miss Tash took legal action.

Miss Tash’s lawyers argued that her rights had been breached under Articles 9 & 10 of the European Convention on Human Rights (ECHR).

Under the law, the police can only interfere with an individual’s free speech rights for “convincing and compelling reasons” and in a proportionate way.

Lawyers said that “even if arrest and detention are deemed lawful initially, they may subsequently become unlawful” and that “the burden is on the police to show that the detention was lawful ‘minute by minute’.”

With no justification for their actions forthcoming, the police agreed to settle the case and compensate Miss Tash, who has won £10,000 in damages and costs from the Metropolitan Police.

Responding to the settlement, Miss Tash, who has given the settlement money to an organisation supporting individuals who decide to leave the Islamic faith and face persecution for doing so, said:

“I have been dealing with two-tiered policing for years. Muslim mobs at Speakers’ Corner are above the law and have been allowed by the police to do what they like to silence debate, increasingly by any means.”

VAT on Schools

The Labour government announced a draft bill on 29 July 2024, which included plans to pass legislation through the Finance Bill for the 2024/2025 Budget that will amend the VAT Act 1994.

The policy will result in private schools having to charge VAT on school fees from 1 January 2025. Many independent schools could be forced to close, parents will be unable to pay the increased fees, and pupils with special needs may not be able to finish qualifications or access tertiary education.

Around 370,000 pupils attend independent faith schools in England alone, the majority of which are Christian schools.

Christian schools, parents, and pupils, supported by the Christian Legal Centre, say they will pursue a Judicial Review as opposition to Labour's policy grows.

The schools bringing the challenge include the award-winning Emmanuel School in Derby, Branch Christian School in Yorkshire, and King's School in Hampshire. The claim also includes several Christian parents, and even pupils, who are accusing the Labour government of illegally discriminating against them through the policy.

They argue that the policy will force Christian schools to close and deny Christian parents the right to give their children a Christian rather than a secular education.

The issue was debated in a Westminster Hall debate on 8 October 2024. The Treasury, however, has confirmed that the plan will go ahead despite significant opposition.

In a letter submitted to the government and circulated to MPs on 8 October 2024, the claimants say that the introduction of VAT on school fees would breach protected property rights under Article 1 of the First Protocol to the ECHR.

They argue that the government's move is unprecedented, as education in the UK has never been taxed. They add that the proposed measure fails several key legal requirements and that there is an international consensus that compulsory school education should not be taxed.

Lawyers state that the imposition of VAT on private school fees will prevent parents from being able to educate their children in conformity with their Christian beliefs and fails to afford due respect to parental rights under European law, thus violating their Convention rights.

Ben Snowdon, Headteacher at Emmanuel School in Derby, said: 'The consequences of this policy could be devastating for independent Christian schools and many other low-cost independent schools across the country. It is especially concerning for parents who are not from affluent backgrounds and who have children with special education needs.'

'At Emmanuel School, we share the government's desire to ensure that all children have access to high-quality education, but we're deeply concerned that the government's VAT proposals will hinder this aim.'

Andrea Williams, chief executive of the Christian Legal Centre, said: 'VAT will make independent faith schooling unaffordable for many families and may force some small faith schools to close.'

Kristie Higgs

Kristie Higgs, a mother of two, had been working for six years as a pastoral assistant at her local secondary school with an exemplary record.

Kristie was sacked in January 2019 for gross misconduct for sharing her concerns about RSE (Relationships and Sex Education) on a private Facebook post in late 2018. After one anonymous person saw two of Kristie's personal Facebook posts sharing her concerns about sex education lessons at her child's primary school, she was reported to her headteacher. Kristie was told that her private posts could '[bring] the school into disrepute' and was subsequently sacked from her position.

Supported by the Christian Legal Centre, Kristie Higgs challenged her employer, Farmor's School in Fairford, Gloucestershire, for discrimination and harassment on the grounds of her Christian beliefs in September 2020 at the Bristol Employment Tribunal.

In October 2020, the Tribunal concluded that Mrs Higgs's dismissal by Farmor's School in Fairford, Gloucestershire, was not related to the Christian beliefs she expressed on social media, rejecting her claims for discrimination and harassment. The Tribunal agreed with the school's position that it was concerned that readers of her Facebook posts would see them as homophobic and transphobic rather than merely an expression of Christian beliefs. However, it did acknowledge that Mrs Higgs's Christian beliefs on sexual ethics do not equate to homophobia or transphobia.

Supported by the Christian Legal Centre, Kristie Higgs appealed this decision.

In July 2022, Mrs Higgs's appeal was postponed after Mrs Justice Eady was forced to recuse trans activist Edward Lord from sitting as a lay magistrate on the presiding panel.

In January 2023, it was revealed in the media that senior members of the Church of England and the judiciary had met at an undisclosed date to discuss Mrs Higgs's case. The motivations, reasoning, and details for such a high-level meeting are not known.

In March 2023, when the rescheduled appeal hearing was about to take place following Edward Lord's recusal, it was discovered that Andrew Morris, the former Assistant General Secretary of the National Education Union (NEU), would be presiding as a lay magistrate. At this time, the NEU was also a national leader in encouraging the teaching of same-sex relationships and transgenderism to primary school children.

Following both recusals, Mrs Justice Eady was forced to proceed with judging the appeal alone. The appeal took place on 16 March 2023.

On 16 June 2023, the appeal judgment was handed down. Justice Eady allowed Mrs Higgs's appeal against the decision of the Bristol Employment Tribunal and held: 'The freedom to manifest belief (religious or otherwise) and to express views relating to that belief are essential rights in any democracy, whether or not the belief in question is popular or mainstream and even if its expression may offend.'

The ruling set a legal precedent confirming that the Equality Act 2010 protects employees from discrimination not only for their beliefs but also for the expression or manifestation of their beliefs. It confirmed that any limitation of the freedom to manifest religion in the workplace must be prescribed by law and go no further than is necessary in a democratic society for the protection of the rights, freedoms, and reputations of others.

Concluding her judgment and sending the case back for a re-hearing, which further delays full justice for Mrs Higgs, Mrs Higgs, with the support of the Christian Legal Centre, made an application to the Court of Appeal to challenge this decision.

In January 2024, the court granted permission on all grounds for the case to be heard at the Court of Appeal. Rt. Hon. Lady Justice Elisabeth Laing said: 'All the grounds of appeal are arguable with reasonable prospects of success. Even if they were not, this appeal raises at least three important questions about the dismissal of an employee for the expression of her beliefs.'

The important questions included the ‘erroneous view that [Mrs Higgs’s] views constituted unlawful discrimination’, and ‘the extent to which an employer may lawfully dismiss an employee for expressing views which are based on her religious beliefs in a forum which is not in the workplace, is not controlled by the employer, and which has a limited number of members.’

In October 2024, Kristie’s case was heard at the Court of Appeal. The outcome of the hearing will be determinative of the law on free speech and freedom to express faith in the UK for many years to come. The Court will determine whether it is lawful for an employer to punish employees for private social media posts expressing beliefs on religious, political, and moral issues. The case has significant ramifications for Christian freedom in the workplace and the freedom of any employee to express biblical principles on marriage and family, some of which may express opposition to LGBTQI+ ideology, in public or private, without the fear of losing their livelihoods. The judgment was reserved, and we now await the result.

Aaron Edwards

Dr Aaron Edwards, 37, a Christian theology lecturer with six young children, was sacked and threatened with a counter-terrorism referral by a Methodist Bible college for a tweet on human sexuality that went viral.

On 19 February 2023, Dr Edwards posted: ‘Homosexuality is invading the Church. Evangelicals no longer see the severity of this b/c they’re busy apologising for their apparently barbaric homophobia, whether or not it’s true. This is a “Gospel issue”, by the way. If sin is no longer sin, we no longer need a Saviour.’

The tweet sparked a debate that went viral. There were users who posted in support of Dr Edwards and his message, but also many who harassed and abused him.

College bosses, however, were soon made aware of the post and contacted Dr Edwards, asking him to take the tweet down as they believed it ‘contravened the College’s Staff Social Media Policy.’

On 8 March, a disciplinary hearing was held, where it was revealed that the college was considering referring Dr Edwards to Prevent, the government’s counter-terrorism watchdog. Following the disciplinary hearing, Dr Edwards was sacked and now believes he will no longer be able to work in higher education again.

He appealed this decision in March 2023 to a panel that had already raised complaints about the tweet. He argued that the decision to dismiss him was disproportionate and failed to balance his freedom to express his Christian beliefs. He claimed that the disciplinary procedure leading to his dismissal lacked ‘requisite fairness’ and that the level of imbalance, exaggeration, and misrepresentation in the investigation was ‘astonishing’ for what was meant to be an unprejudiced process.

Supported by the Christian Legal Centre, Dr Aaron Edwards, 39, took legal action against Cliff College in Derbyshire on the grounds of harassment, discrimination, and unfair dismissal.

The employment tribunal ruled that Cliff College’s actions had been ‘reasonable’, but gave very little detail on why and how it had reached those conclusions.

In a concerning ruling for Christian freedoms and free speech, Judge Shepherd stated that Cliff College was justified in restricting Dr Edwards' rights to freedom of belief, religion, and expression due to the need to protect its 'brand' and 'reputation'.

Judge Shepherd found that Dr Edwards' right to religion was not engaged: 'The Tribunal has found that the claimant's Article 9 rights [freedom of thought, belief, and religion] are not engaged in this case. This is because the claimant did not suffer the treatment on the basis of his religious beliefs in and of themselves or because of a manifestation of his beliefs. The treatment of the claimant by the respondent was not because of his expression of views rooted in Christian beliefs but because of the severe reaction to them.'

Based on this reasoning, any belief expressed by a lecturer in an educational setting or outside of that setting could lead to them being sacked if enough of a 'severe reaction' was brought against them by students and members of the public.

At every stage, Cliff College and the tribunal have also refused to engage with the fact that many students and members of the public did not react 'severely' to Dr Edwards' tweet but supported him, and in fact, were concerned with the college's actions of 'throwing Dr Edwards under the bus.'

Responding to the ruling, Dr Edwards said: 'I am very surprised at the judgment. I believe ours was an extremely strong case and was very well supported by the Christian Legal Centre. It is obvious from the ruling that the particulars of the extensive evidence and arguments were not sufficiently engaged in the judgement, which was conspicuously light on relevant details in terms of how the judgement was reached. I believe this perhaps evidences how entrenched LGBT+ ideology is even within the legal system, which now makes it increasingly difficult for anyone to uphold freedom of expression for views which stand strongly against LGBT+.'

Joshua Sutcliffe

Joshua Sutcliffe, 32, is a maths teacher with an exemplary record.

In 2017, Joshua was suspended and dismissed for allegedly 'misgendering' a female student, 'Pupil A', who self-identified as a boy. He immediately apologised when he realised that 'Pupil A' was in the group of female students he addressed. Supported by the Christian Legal Centre, he took legal action against the school. The case was later settled out of court.

In 2019, Joshua was forced to resign from another school over views he posted and discussed on his personal YouTube channel, critiquing Islam.

Joshua was subsequently reported to the Teaching Regulation Agency (TRA). Despite the issues between Joshua and both schools being settled, the TRA continued to pursue an investigation against him, with a hearing taking place from 9 to 13 January 2023.

Supported by the Christian Legal Centre, Joshua faced a series of allegations before the TRA's professional conduct panel in Coventry in January. These were: (1) misgendering, (2) criticism of Islam, (3) comments on same-sex marriage, and (4) a lack of professionalism.

The professional conduct panel, with the backing of Education Secretary Gillian Keegan, ruled that Joshua Sutcliffe was guilty of unprofessional conduct and banned him from teaching in any capacity for at least two years, potentially indefinitely.

The panel described Mr Sutcliffe as ‘intolerant’ and stated that it was ‘satisfied that Mr Sutcliffe was guilty of unacceptable professional conduct and conduct that may bring the profession into disrepute.’

Despite Joshua’s pleas for leniency and good character evidence from two parents, three lesson observations, and one professional reference, the Chief Executive of the Teaching Regulation Agency, Alan Meyrick, dismissed his positive contribution to teaching and ‘concluded that a prohibition order is proportionate and in the public interest’ to maintain ‘confidence in the profession.’

In May 2024, Mr Joshua Sutcliffe, 34, who has been supported by the Christian Legal Centre, began pursuing a Judicial Review of the Secretary of State for Education’s decision to ban him, which was believed to be the first case of its kind.

A High Court judge ruled on 25 July 2024 that Christian maths teacher Joshua Sutcliffe should continue to be banned from the profession indefinitely for refusing to use the preferred pronouns of a girl identifying as a boy.

In his judgment, Mr Justice Pepperall ruled that, regardless of a teacher’s religious or philosophical beliefs, they must use compelled speech in relation to transgender pupils and ‘respect and celebrate the pupils’ personal autonomy.’ He added that ‘just because misgendering a transgender pupil might not be unlawful does not mean that it is appropriate conduct for a teacher.’

Responding to the ruling, Mr Sutcliffe, who has a young family, said: ‘I still stand by my Christian convictions that it is harmful and detrimental to affirm gender-confused children. This is the belief I am fighting for, which is shared not only by Christians but many who do not believe in harmful transgender ideology.’

Andrea Williams, Chief Executive of the Christian Legal Centre, said: ‘At the Christian Legal Centre, we lived this case in real time alongside Joshua. The way Mr Justice Pepperall describes Joshua in his judgment reads like fiction.’

‘We are looking at the judgment carefully. We will continue to support Joshua for as long as it takes to secure justice.’

Book Review: Evangelicals and Abortion

Historical, Theological, Practical Perspectives

By J. Cameron Fraser

Wipf & Stock, 2024 (£16.99, Amazon.co.uk)

Review by Tim Dieppe

J. Cameron Fraser grew up in Scotland but has lived in Canada for most of his adult life, where he has engaged in pastoral and related ministries. Fraser states that he has been ‘a strong advocate of the pro-life position for decades’ (p. 1). This book is largely a history of the modern pro-life evangelical movement, primarily focused on the USA. It brings us up to the post-*Roe v. Wade* era and discusses his views on the strengths and weaknesses of different approaches. Along the way, he also explores theology, including a fairly detailed discussion of when the soul enters the body. Fraser explains that his aim in writing this book is to argue that ‘contrary to much pro-life rhetoric, abortion is fundamentally a religious issue that requires a religious (biblical or evangelical) solution’ (p. 3).

I, for one, had not appreciated that ‘the evangelical position on abortion that we might think is an obvious reading of Scripture is less than fifty years old at the time of writing’ (p. 1). The view that human life begins at conception was once seen as a distinctively Roman Catholic position, different from the then-evangelical stance. Notable evangelical figures such as Bruce K. Waltke and John Stott initially argued in 1968 and 1971, respectively, that the foetus was not fully human and, therefore, that abortion was justified. The Southern Baptist Convention passed a resolution in 1971 supporting legalised abortion. However, by the late 1970s, these same groups were advocating the position they had previously labelled as Roman Catholic.

This change in viewpoint resulted from a closer examination of Scripture, particularly the key passage in Exodus 21:22-25. Fraser leads readers through the finer points of exegesis here. There was also a realisation that the early Church Fathers, the Reformers, many Puritans, and later theologians were clearly anti-abortion. Furthermore, the creeds speak of Christ’s conception. What ultimately catalysed the modern evangelical pro-life movement was the film series and book *Whatever Happened to the Human Race?* by Francis Schaeffer and C. Everett Koop.

Part 1 of the book focuses on this history of evangelicals and abortion, including a discussion on the nature of evangelicalism and the influence of pro-life and pro-choice views on US politics. There is also a chapter titled ‘Lessons from the Early Church and Beyond’, which outlines a history of Christian views on abortion.

Part 2 is theological, arguing why evangelicals should be pro-life. This section includes a chapter on interpreting Exodus 21:22-25 and another on abortion and the image of God. A chapter on related issues discusses contraception, IVF, embryo research, and vaccines developed using aborted foetal cell lines.

Part 3 is practical, covering various strategies and approaches of the US pro-life movement. A chapter titled ‘Adoption Not Abortion’ critiques this slogan for its lack of compassion for the trauma of relinquishing a baby; abortion may seem an easier choice for a mother than handing over her child for adoption.

The book's longest chapter by far, comprising nearly 40 pages, is 'Evangelicals and Abortion in a Post-Roe World'. Here, Fraser catalogues multiple responses to the overturning of *Roe v. Wade*, including international perspectives, and concludes that this overturning was not achieved 'based on a cultural consensus', noting further that 'this consensus is even more lacking in the developed world outside the United States' (p. 146). Few, if any, would disagree with this conclusion. The question is what our response should be to this.

Fraser discusses Rod Dreher's *The Benedict Option* as a response to an increasingly anti-Christian culture, though this was written before *Roe v. Wade* was overturned. He stresses the importance of crisis pregnancy centres, noting earlier in the book (p. 2) that there are now more crisis pregnancy centres in the USA than abortion clinics, which is quite an achievement. Fraser highlights the evangelical Christian Action Council, founded in 1975 as a political lobbying group, which later shifted its focus to establishing pregnancy centres and changed its name to Care Net. Its website now states: 'Care Net works to end abortion not primarily through political action, but by building a culture where women and men receive all the support they need to welcome their children into the world, form strong families, and create their own success stories.'¹

This organisation abandoned hope that courts and legislatures would protect women from abortion. Fraser considers this shift significant and highlights other pro-life ministries that focus more on compassionate responses to abortion than on political action. For Fraser, this is the way forward for the evangelical pro-life movement.

The final chapter seeks to conclude the book. Fraser argues that cultural change is necessary and that it requires persuasion, not imposition. Laws imposed on a culture opposed to them will not endure unless there is also persuasion. Fraser even suggests that Texas's famous 'heartbeat law' may not have helped reduce abortions, as people sourced abortion pills from elsewhere or travelled out of state to obtain an abortion, though data on this is conflicting. In the end, Fraser doesn't entirely dismiss the impact of political action but clearly favours compassionate care, asserting that 'This is where lives are being saved and the life-changing gospel is being proclaimed, as the only basis of a transformed society, practising the politics of the cross' (p. 169).

In my view, Fraser has created too sharp a dichotomy between political action and compassionate care. We can, of course, have both, and I would argue that both are needed. I think he is overly pessimistic about the effectiveness of political action, though I agree that persuasion is essential. In his conclusion to the chapter on evangelicals in a post-Roe world, Fraser argues that the slavery abolitionists would not have succeeded without the earlier revival brought about by Whitefield and the Wesleys, which continued to impact the culture. He argues that revival is the missing factor in our day and that 'without it no amount of political and legal action will succeed in abolishing, or at least decreasing, the evil of abortion' (p. 157). It is, I believe, overly pessimistic to say that nothing can be achieved politically without revival! Revival would certainly be a blessing, but we must fight for just laws and the lives of the unborn, with or without it, while praying all the while that revival would come.

I found this a compelling overview of the history and current state of the evangelical pro-life movement. It is well-referenced, with an impressive 17 pages of bibliography and a 10-page index in a book of just 220 pages! Recommended for all those interested in or involved with pro-life ministries.

Tim Dieppe is Head of Public Policy at Christian Concern.

¹ See: <https://care-net.org/>

Book Review: Right to Die?

Euthanasia, Assisted Suicide and End-of-Life Care

By John Wyatt

IVP 2015 (£8.44, 10ofthose)

Review by James Mildred

I recently spoke at the Grace Baptist Association South East annual conference day on the topic of assisted suicide. In preparation, I re-read John Wyatt's *Right to Die*, which is all about assisted suicide and euthanasia. In doing so, I was reminded how brilliant it is. If you want to read one book on this topic from a clear, compelling Christian perspective, this is it.

What makes the book so good?

Firstly, Professor John Wyatt is eminently qualified to write on this issue. He's been heavily involved with the Christian Medical Fellowship and is the Emeritus Professor of Neonatal Paediatrics at University College London. He's been writing on the topic of assisted suicide for decades. He also attends All Souls, Langham Place.

Secondly, he writes clearly but also compassionately. He understands that not everyone who supports assisted suicide is an evil person bent on getting rid of older people. The book is polemical in one sense, because Wyatt is arguing against assisted suicide. But he combines a commitment to God's truth with a gracious tone. In this way, he follows the example of our Lord Jesus, who came from the Father, full of truth and grace (John 1:14).

Thirdly, he helpfully traces the origins of the push for euthanasia (when doctors administer the lethal injection to the patient) and assisted suicide (when doctors give the patient a lethal drug and they take it themselves). What's so striking is the link between evolutionary teaching and calls for assisted suicide. If we are simply a bag of chemicals and life is about the survival of the fittest, why not let the old and frail kill themselves?

Fourthly, the book takes off as Wyatt responds brilliantly to the core arguments for assisted suicide. He challenges the idea that assisted suicide is compassionate, pointing out that while Christians will want to be compassionate, this never involves assisted suicide. Instead, we support palliative care, a holistic form of care that provides for the patient's mental, spiritual, emotional and physical needs. He also questions the autonomy argument for assisted suicide.

The most striking insight is Wyatt's assertion that, at the heart of Christian compassion, we say to people, especially when suffering, 'It is good that you exist! It is good that you are here.' Assisted suicide, by implication, says the very opposite.

Even though this book was written in 2015, its relevance is clear. Across the UK, there are serious attempts to legalise assisted suicide. 2025 could be the year that every part of our nation ends up with assisted suicide laws in place. Wyatt's book will show you why, as Bible-believing Christians, we must resist any such law change. It will also remind you of God's better story.

Suffering is part of life. But in Christian teaching, suffering is never meaningless. It is also linked to future glory (2 Corinthians 4:16-18). This book is compelling, concise and compassionate. I would urge you all to read it.

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The Social Issues Bulletin is published by the Social Issues Team of Affinity

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*Affinity is a partnership of gospel churches, evangelical agencies
and individual Christians committed to working together to
advance the work of the gospel in the UK and Ireland and
around the world.*



Registered with the Charity Commission for England and Wales
with registered charity number 1192455

ISSN 2755-5615

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