

The Abortion Act 1967

edited by

Michael D. Kandiah and
Gillian Staerck

ICBH Witness Seminar Programme

The Abortion Act 1967

**ICBH Witness Seminar Programme
Programme Director: Dr Michael D. Kandiah**

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The Abortion Act 1967

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For example, Dilys Cossey’s memories of meeting women who were seeking an abortion when she was secretary of ALRA should be footnoted as follows:

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Chronology

1861-1966

1861		Offences Against the Person Act
1929		Infant Life Preservation Act
1936		Formation of the Abortion Law Reform Association
1937-9		Deliberations of the Interdepartmental Committee on Abortion (the Birkett Committee); Majority Report recommends clarification of law on abortion on the basis of physical threat to mother; rejects legal abortion on other grounds.
1938		Trial and acquittal of Aleck Bourne
1952		Joseph Reeves Private Member's Bill
1955		Lord Amulree Bill in Lords
1961		Kenneth Robinson Private Member's Bill
1965	MAR	National Opinion Poll shows two-thirds majority in favour of legal abortion in some cases
	JUN	Renée Short introduces Abortion Reform Bill under Ten Minute Rule.
1966	FEB	Simon Wingfield Digby Private Members Bill
1965-6		Lord Silkin's Bill in the Lords

1966-8

1966	12 MAY	David Steel (Liberal MP for Roxburgh, Selkirk, Peebles) draws third place in ballot for Private Member's Bills
	23 MAY	Steel agrees to sponsor an Abortion Reform Bill
	15 JUN	Steel publishes his Medical Termination of Pregnancy Bill
	22 JUL	Second Reading of Bill in House of Commons. Passed 223 to 29.
	NOV	Publication of joint British Medical Association-Royal College of Obstetricians and Gynaecologists report on abortion
	21 DEC	Steel amends Bill
1967	11 JAN	Formation of Society for the Protection of Unborn Children
	18 JAN-MAR	Bill at Committee stage
	2 JUN-14 JUL	Report stage of Bill in Commons
	14 JUL	The amended Medical Termination of Pregnancy Bill passes third reading, 262 to 181
	24 OCT	Medical Termination of Pregnancy Bill passes in Lords
	27 OCT	The Medical Termination of Pregnancy Bill receives Royal Assent
1968	27 APR	Abortion Act comes into operation

Abortion Law Reform

1929-68

Stephen Brooke
York University, Canada

The Abortion Act of 1967 is rightly viewed as one of the most important pieces of social legislation in the post-war period. By permitting safe and legal abortion, it had an immediate effect upon the material quality of hundreds of thousands of women's lives. Though the Act did not sanction abortion on demand, it did help expand the horizons of women's reproductive rights. For these reasons, the defence of its provisions has been a rallying point for feminist and women's groups since the 1970s.¹

More widely, the Act has accrued profound symbolic meaning since 1967. To both supporters and opponents, it was and is a symbol of permissive Britain: with the decriminalisation of homosexuality, and the abolition of the death penalty, the Act signalled a more liberal approach to moral and sexual questions.

Thirty-four years on, we have a great opportunity to review the passing of the Act and its historical meaning through this witness seminar. It is my role to provide some historical background and context and suggest some tentative lines of enquiry.

First, it is important to set out the framework of abortion law before 1967.² Up to the 1960s, the law on abortion was shaped by the Offences Against the Person Act of 1861 and the Infant Life Preservation Act of 1929. The first made it a criminal offence for a person to induce an abortion in any circumstances. The second allowed legal abortion provided the act was done in good faith 'for the purpose only of preserving the life of the mother'.³ Nephritis, tuberculosis, cardiac disease, cancer, insanity and epilepsy were considered acceptable conditions for the termination of pregnancy. Despite its provisions, the Infant Life Preservation Act still left the legality of abortion unclear in many circumstances. Could the threat posed to a woman's life by an unwanted pregnancy be interpreted as including psychological or social criteria? Case law in the 1930s supported only physical threats to women's health, but in 1938, the trial and acquittal of Aleck Bourne suggested that there were psychological threats posed to a woman's life by pregnancy which might justify abortion, albeit on the basis of an exceptional case involving the rape of a 14-year old girl. A year later, an Interdepartmental Committee on the abortion issue recommended that there be a clear articulation of the legality of abortion in cases of physical threat to a woman's life, but rejected any change to the existing law to include other grounds for legal abortion. In the 1940s and 1950s, case law involving abortion made reference to both the Infant Life Preservation Act and the Bourne decision. By the late 1950s, such case law seemed to establish that legitimate threat to maternal health included both physical and mental health.⁴ But this had not been formalised in statute law.

1 See Joni Lovenduski, 'Parliament, Pressure Groups, Networks and the Women's Movement: The Politics of Abortion Law Reform in Britain 1967-83', in Joni Lovenduski and Joyce Outshoorn (eds), *The New Politics of Abortion* (London: Sage, 1986), pp.231-56.

2 On the history of abortion, see Barbara Brookes, *Abortion in England 1900-67* (London: Croom Helm, 1988).

3 *The Infant Life (Preservation) Act* (19 and 20 George 5, c. 34), Section 1, Sub-section 1.

The Abortion Law Reform Association [ALRA] was founded in 1936 by a group of socialist-feminists with the aim of lifting all restrictions on abortion. ALRA wanted abortion legalised in circumstances where a women's physical health was threatened, but also in light of social, economic and psychological criteria. Its activists believed that women, rather than the state or the medical profession, should be the ultimate judges of whether a pregnancy should continue or be terminated.⁵ ALRA was never a mass or even particularly large organisation, but the cause of legal abortion until 1967 owes everything to this small band of activists. Between the 1930s and the 1950s, ALRA concentrated on an extra-parliamentary strategy. It was, for example, very involved in the Bourne case and the Interdepartmental Committee on abortion. In the 1950s, frustrated with the lack of progress outside parliament, ALRA turned its attention to the House of Commons, seeking ways of changing the law on abortion.

Unsurprisingly, no major party was willing to entertain abortion law reform as party policy. In the 1950s and early 1960s, therefore, ALRA worked on converting individual MPs (mostly from the Labour Party) to the cause, in the hopes of passing a Private Member's Bill on the question. Between 1951 and 1966, there were three such attempts to liberalise abortion law. All failed. But in 1965 and 1966, the parliamentary response to two Bills – the first introduced by Renée Short, the Labour Member for Wolverhampton in the Commons, the second by Lord Silkin in the Lords – seemed to suggest that the climate at Westminster was warming to the liberalisation of abortion law. Silkin's Bill in particular demonstrated that the Lords were generally in favour of some kind of legalisation. In consultation with ALRA, he included in his Bill provisions which would permit legal abortion not only in cases of threat to the physical health of the mother, but also in the light of other factors, such as mental health, deformity of the child, and, most controversially, through what was called the 'social clause', which would allow legal abortion upon the consideration of the social conditions of the mother and her existing children.

By 1966, it seemed that both parliamentary and public opinion had moved in favour of some kind of abortion law reform. To a certain extent, this can be traced to the broad relaxation of mores on sexuality that had been developing since the 1920s. But we should not forget more immediate reasons for the change. Health concerns for both mother and foetus were the most important. Reports into Maternal Deaths in England and Wales between 1952 and 1966 showed that by the mid-1960s unsafe abortion was the leading cause of avoidable maternal death. Highlighted by media reports of the horror of backstreet abortions, these long-term statistics undoubtedly did much to advance the cause of legal and safe abortion.⁶ A more immediately shocking health controversy in the early 1960s also did much to encourage public support for legal abortion. In the spring of 1961, there surfaced reports of badly deformed children born to mothers who had taken the sedative Thalidomide. By 1964, 349 children had been born in Britain with serious deformities. International cases such as those of Sherry Finkbine in the United States and

4 Important in this regard were two judgements: the acquittal of Drs Bergmann and Ferguson in 1948 and the guilty verdict against Dr Louis Newton in 1958. For a review of case law up to 1958, see J. D. J. Havard, 'Therapeutic Abortion', *Criminal Law Review*, pp. 600-12. In Scotland, abortion law was somewhat more flexible.

5 In 1966, the membership stood at 1120. On ALRA in the 1930s, see Stephen Brooke, "'A New World for Women'? Abortion Law Reform in Britain during the 1930s', *American Historical Review*, Vol.106 (2001), pp.431-59.

6 In 1952-4, there were 153 deaths from abortion; in 1955-7, 141. See Ministry of Health Report on *Confidential Enquiries into Maternal Deaths in England and Wales 1955-1957* (Reports on Public Health and Medical Subjects No. 1303). In 1966, the *Fourth Report of the Confidential Enquiry into Maternal Deaths in England and Wales* published by the Ministry of Health stated that the two leading causes of maternal death were pulmonary embolism and abortion. On radio and television, the abortion question was treated by a variety of programmes, including *Dr Finlay's Casebook*, BBC's *Gallery*, 15 July 1965 and ATV, *Abortion: A Question of Priorities*, 17 June 1965.

Suzanne Vandepuit in Belgium underlined the heartrending moral choices facing women with such deformed children. In July 1962, a National Opinion Poll showed that 72 per cent in Britain agreed with legal abortion if there was good reason to suspect a deformity in the foetus.

If, because of maternal mortality and the thalidomide tragedy, abortion secured a higher profile with the public in the early 1960s, the cause of abortion law also won over a new generation of supporters within parliament and ALRA. A younger cohort of activists, such as Diane Munday and Madeline Simms, took over the leadership of ALRA in 1964 and adopted an aggressive strategy on the issue. Aided by a grant from an American foundation, ALRA was, for example, able to do widespread opinion polling on abortion and thus approach the media, professional and religious institutions, and, not least, MPs with evidence that the need for abortion law reform was recognised by the public.⁷

Generational change also touched parliament. In the 1950s, within the Labour Party at least, figures such as Tony Crosland and Roy Jenkins were much more willing than their predecessors to discuss issues of sexuality and morality, including the legalisation of abortion.⁸ The parliamentary intake of 1964 and 1966 saw younger MPs entering the Commons, perhaps more sensitive themselves to the need for a liberal approach to social issues and more attuned to shifts in public opinion than previous generations of parliamentarians.

A final shift we might look to is the attitude of the 1964 and 1966 Labour governments. I don't want to exaggerate the agency of the Labour Party in the Abortion Act, as this was David Steel's Bill and ALRA's campaign. But there were key figures within both Labour governments who were sympathetic to abortion reform. The Minister of Health between 1964 and 1968 was Kenneth Robinson, who had put his own Private Member's Bill on abortion in the early 1960s; Douglas Houghton (Chancellor of the Duchy of Lancaster between 1964 and 1966, then Minister without Portfolio until 1967) had long been a supporter of ALRA, in which his wife, Vera, was a leading figure. The most important change in this regard came with the succession of Roy Jenkins to the Home Secretaryship in December 1965. Jenkins was on record as being in favour of abortion law reform and, in office, was much more supportive of reform than his predecessor, Frank Soskice, had been.⁹ Other figures, such as Richard Crossman, by 1967 Leader of the House, were also strong advocates of abortion law reform within the Cabinet and played a crucial role in the passage of David Steel's Bill. The Labour government of 1966 never grasped abortion as a political issue, but its neutrality on the issue was actively sympathetic rather than indifferent. At one critical juncture, the report stage of the Steel Bill, the Labour Cabinet intervened to provide extra sittings for the Bill's passage.

Which brings us to David Steel's Bill. In May 1966, Steel came third in the ballot for Private Members' Bills in the 1966-7 session. As Lord Steel's memoirs suggest, he spent some time choosing between homosexual law reform and abortion law reform, ultimately deciding upon the

7 By 1967, ALRA was in receipt of US\$5000 annually from the Hopkins Funds Board, for a total budget of £7000. Much of this was spent on polling. The grant began in 1962, with an initial subvention of US\$2,000, which increased to US\$2,500 in 1964. After the passing of the abortion act, the Hopkins Funds Board withdrew its funding to concentrate on the American abortion campaign.

8 On Labour and abortion in this period, see Amy Black and Stephen Brooke, 'The Labour Party, Women and the Problem of Gender, 1951-66', *Journal of British Studies*, Vol.36 (1997), pp.447-9. On Crosland, and Jenkins's views, see C. A. R. Crosland, *The Future of Socialism* (London: Cape, 1956), p.355; Roy Jenkins, *The Labour Case* (Harmondsworth: Penguin, 1959), p.135.

9 See, for example, Public Record Office, Kew (henceforward PRO) CAB 134/2852, M(66)2, Home Affairs Committee, 'Abortion: Memorandum by the Secretary of State for the Home Department', 10 Jan. 1966; PRO CAB 134/2851, M(66)1, Home Affairs Committee Minutes, 12 Jan. 1966.

latter.¹⁰

The Medical Termination of Pregnancy Bill Steel published on 15 June 1966 was shaped by discussions he had had with ALRA, Lord Silkin, and parliamentary sponsors such as Labour's Renée Short and the Conservative Joan Vickers.¹¹ It proposed four criteria for legal abortion, to be established by two registered medical practitioners:

- that 1(I)(a) 'the continuance of a pregnancy would involve a serious risk to the life or of grave injury to the health, whether physical or mental, of the pregnant woman whether before, at or after the birth of the child';
- that 1(I)(b) 'there is a substantial risk that if the child were born it would suffer from such physical or mental abnormalities as to be seriously handicapped';
- that 1(I)(c) 'the pregnant woman's capacity as a mother will be severely overstrained by the care of a child or of another child' ;
- that 1(I)(d) 'the pregnant woman is a defective or became pregnant while under the age of sixteen or pregnant as a result of rape.'

Two significant aspects to these criteria were the widening of the meaning of 'life' and, therefore 'risk to life' to include mental considerations after the birth of the child and the introduction of 'social' criteria in Clause 1(I) (c) to acknowledge that existing maternal conditions would be taken into consideration.¹²

The Bill was introduced on 22 July 1966 and passed its Second Reading by 223 votes to 29.¹³ The summer recess then intruded. By the time the Bill went to committee stage in January 1967, supporters, opponents, religious and professional groups had all organised.¹⁴ The opinions and influence of medical organisations, particularly the British Medical Association [BMA] and the Royal College of Obstetricians and Gynaecologists [RCOG], were crucial to the shape of the Abortion Act in this regard. In April 1966, the RCOG acknowledged, reluctantly, that some legal reform was inevitable and set out very strict criteria (based mostly upon risk to physical life or health, or abnormalities in the child) for abortion, to be decided by gynaecologists alone. The BMA followed in July 1966, similarly emphasising that abortion had to be left in the hands of medical practitioners and discouraging any consideration of 'social' criteria for abortion.¹⁵ In November 1966, the two organisations published a joint report rejecting both the 'social' clause of the Steel Bill and the clause dealing with pregnancies as a consequence of rape or sex under the age of 16.

In the face of such medical opinion, Steel amended his own Bill on 21 December 1966, withdrawing Clauses 1(I)(c) and 1(I)(d), broadening the language of Clause 1(I)(a)(i) to expand the doctors' consideration of risk to include 'well-being' as well as physical and mental health, and adding a new Clause 1(I)(a)(2), to permit doctors to consider 'the patient's total environment actual or reasonably foreseeable'. The gesture appeased the medical organisations and religious

10 This decision was based in part upon opinion in Scotland on homosexual law reform. See David Steel, *Against Goliath* (London: Weidenfeld and Nicolson, 1989), pp.49-50; Peter Bartram, *David Steel: His Life and Politics* (London: W. H. Allen, 1981), pp.73-7.

11 See appendices for excerpted texts of the 1966 Bill and the 1967 Abortion Act.

12 See Keith Hindell and Madeleine Simms, *Abortion Law Reformed* (London: Peter Owen, 1971), Appendix 1, pp.245-8.

13 Party voting for the Bill: Labour, 161; Conservative, 51; Liberal, 10.

14 As for religious organisations, the Church Assembly Board for Social Responsibility of Church of England had published *Abortion: An Ethical Discussion* (1966) after the Silkin Bill. While accepting the need for legal abortions in cases of threat to the 'life and well-being' of the mother in the context of the 'life and well-being of her family', the report rejected legal abortions in the case of handicapped or deformed children or cases of rape. The Church of Scotland followed a similar line. The Catholic Church opposed reform. See Hindell and Simms, *Abortion Law Reformed*, pp.90-4; 165-6.

15 See Hindell and Simms, *Abortion Law Reformed*, pp.168-9.

opinion and carved out a middle ground for parliamentary supporters. But the decision to drop the ‘social’ clause alienated ALRA, particularly since this was a constitutional aim of the organisation.¹⁶ Though its members were very disappointed at the truncated Bill, ALRA decided to continue its support for Steel in January 1967.¹⁷

Between January and the end of March, the Steel Bill was in its committee stage. It went through the report stage and third reading in June 1967. At this point, time was the great factor. Richard Crossman (then Leader of the House), Jon Silkin (the government Chief Whip), and Roy Jenkins (Home Secretary) were critical in allowing enough time for the Bill to be passed, an issue debated within the Labour Cabinet. Due to numerous amendments made to the Bill by opponents, there were three exhausting sittings. But on 14 July 1967, Steel’s Act passed third reading in the Commons by a majority of 262 to 181. The majority of the Bill’s supporters were Labour; the majority of its opponents, Conservative.¹⁸ On 24 October 1967, the Lords passed the Bill and three days later, it received Royal Assent, coming into operation as the Abortion Act on 27 April 1968.¹⁹

Issues to Consider

Parliamentary Politics, Pressure Groups and Professional and Religious Institutions/Organisations

A major issue is the interplay between parliamentary politics, pressure groups and professional and religious institutions/organisations (particularly medical organisations and the churches) around the question of abortion. The role of the Abortion Law Reform Association is particularly important. The achievement of abortion law reform in 1967 has been portrayed by ALRA’s surviving participants and by political scientists as the triumph of pressure group politics intersecting with the determination and skill of a particular politician – David Steel.²⁰ This mutual relationship, as Steel and members and ALRA freely admitted, was not always an easy one.

Was the contribution of the ALRA as central as has been portrayed? Or have other significant actor organisations been left out?

Did the ALRA’s view of reform create tensions between ALRA and David Steel?

How crucial were the views of the medical profession to the framing of this debate?

How important was religious feeling and was the role of the Churches a significant factor that had to be contended with?

16 Contemporary Medical Archives Centre, The Wellcome Trust, London [henceforward CMA], SA/ALR/A.11/3/15: ALRA, *Newsletter*, No.17 (Winter 1966): at Annual General Meeting 22 Oct. 1966, clause 4. ‘When the pregnant woman’s capacity as a mother will be severely overstrained.’

17 See CMA, SA/ALR/A.15/5, David Steel Papers, Vera Houghton to David Steel, 30 Jan. 1967; SA/ALR/A.16/4, Lord Silkin Papers, Vera Houghton to Silkin, 22 Dec. 1966: ‘it does not allow the state of the existing family to be taken into account. We therefore do not agree that the proposed addition to (a) is a real substitute for (c) – i.e., the pregnant woman’s capacity as a mother will be severely overstrained by the care of a child.’

18 For the Bill: Labour, 234; Conservative, 20; Liberal, 8. Against the Bill: Labour, 35; Conservative, 146.

19 The statistics on abortions are worth noting. Before 1967, it was estimated that there were about 200,000 abortions carried out annually in Britain, legal and illegal. In 1970, there were 80,000 abortions carried out in England and Wales under the provisions of the 1967 Act.

20 See Hindell and Simms, *Abortion Law Reformed*; Lovenduski, ‘Parliament, Pressure Groups, Networks and the Women’s Movement’; Madeleine Simms, ‘Abortion: The Myth of the Golden Age’, in Bridget Hutter and Gillian Williams (eds), *Controlling Women: The Normal and the Deviant* (London: Croom Helm, 1981), pp.165-86.

The Political Parties and Abortion

David Steel's Act was, of course, a Private Members' Bill, but it would be worth considering the parties' position on abortion. In formal terms, the Labour Party refused to acknowledge abortion as a political issue. In 1965, for example, Labour's chief woman officer similarly insisted that 'the Party had no declared policy on Abortion Laws'.²¹ Though a group of Conservatives published a pamphlet advocating legal abortion in particular circumstances, the Conservatives had no formal policy on abortion.²² In the 1970s, Labour did take up the defence of the 1967 Act as party policy. With the Corrie Bill, it is believed that the Conservative intake of 1979 provided new support.

Were there discernible differences between Labour, Conservative and Liberals or was this indeed a strictly non-party issue?

The Labour Government and Abortion

The attitude of the Labour governments of 1964-70 toward abortion is an important aspect of the Act's success in 1967. In what ways was this helpful?

The role of Roy Jenkins as Home Secretary: his comments during the Second Reading of the Bill conveyed his benevolent neutrality, willingness to lend drafting assistance and to communicate his own support for the reform of abortion law.²³ How crucial was his support?

Parliamentary and Public Opinion on Abortion

Shifts in attitudes within parliament and outside were obviously very important to the success of the Steel Act.

What was the perception of public opinion outside parliament: how important was this? How was it discerned (through opinion polls)?

The perception of constituency opinion outside parliament: how important was this?

What do the participants think had changed in parliamentarians' opinions on abortion? Was it a generational issue? Was it an acknowledgement of changing social mores?

Finally

What do you consider was the immediate or important reason for the success of the Steel Abortion Act?

Was it really a radical Act?

21 Labour Party Archives [hereafter LPA], National Labour Women's Advisory Committee/M/51/9/65, NLWAC minutes, 2 Sept. 1965.

22 See Conservative Party: CPC, *Abortion: A Conservative View*, No. 344 (July 1966).

23 'I am myself convinced that the existing law on abortion is uncertain and is also, and perhaps more importantly, harsh and archaic and that it is in urgent need of reform ... I take this view because I believe that we have here a major social problem.' See *Hansard*, House of Commons Debates, 22 July 1966, Vol.732, c.1141.

The Abortion Act 1967

Edited by
Michael D. Kandiah and Gillian Staerck

This witness seminar on the passage of the 1967 Abortion Act was held on 10 July 2001 in the School of Advanced Studies, University of London. It was organised by the Institute of Contemporary British History and chaired by Professor Pat Thane, then at the University of Sussex, now the ICBH. The introductory paper was presented by Professor Stephen Brooke, York University, Canada. The witnesses included Dilys Cossey, Peter Jackson, Diane Munday, Dr David Paintin, Christopher Price, Madeleine Simms, Jennie Smith, Lord Steel of Aikwood, Simone Aspis, Dr Hera Cook, Helene Grahame, Mary Claire Martin, Gregg McClymont, Dr Wendy Savage and Caroline Woodroffe.

PAT THANE

What we are setting out to do is to explore the background to the 1967 Act which legalised abortion in this country, by hearing from those who played an important part in its passage. It *was* an important piece of legislation and I am very much looking forward to the discussion because of a number of aspects that have always intrigued me. For one thing it is an extremely important piece of legislation in the lives of women, but it actually pre-dates the revival of the women's movement, which we date from 1968 to 1969. So why precisely it happened when it did, in 1967, I think is one important question.

The second set of questions is around *how* it came to happen. It came into being because Lord Steel, David Steel as he then was, as a Liberal Party backbencher put it through as a Private Member's Bill, but it is unlikely this would have been possible without the support of the Labour Party, which was then in government, and it has its place amongst a really quite extraordinary list of liberal pieces of legislation that were passed by that government in the late 1960s – about which we really don't know quite enough, it seems to me, and we have some representatives of the Labour Party here to discuss it. Unfortunately Lord Taverne,* who was going to be here, who was a junior minister in the Home Office, has got a three-line whip in the House of Lords and cannot be here.

We are going to start with an introductory talk, to set it in context, from Stephen Brooke, who teaches history at York University in

Dick Taverne (Lord Taverne), Labour politician. Parliamentary Under-Secretary of State, Home Office, 1966-8.

Toronto, who has been working on this area recently and who in the past has written extremely well on the history of the Labour Party between the 1930s and the 1960s, and particularly on gender aspects of that history.

STEPHEN BROOKE

The Abortion Act of 1967 is rightly viewed as one of the most important pieces of social legislation in the post-war period, and perhaps in the twentieth century. By permitting access to safe and legal abortion it had an immediate and material impact upon women's lives and health. Even though it did not sanction abortion on demand, the Abortion Act also profoundly expanded the horizons of women's reproductive rights and the sphere of their choice and control. And as this conference has borne testament, the Abortion Act has also accrued profound symbolic meaning as a cipher of permissive Britain.

As an introduction to this seminar it is important first of all to set out the framework of abortion law before 1967. Up to the 1960s the law on abortion was shaped by the Offences Against the Person Act of 1861 and the Infant Life Preservation Act of 1929. The first made it a criminal offence for a person to induce an abortion in any circumstance; the second allowed legal abortion provided the act was done in good faith, for purpose only of preserving the life of the mother. Despite this, the Infant Life Preservation Act still left the legality of abortion unclear in many circumstances: could the threat posed to a woman's life by an unwanted pregnancy be interpreted as including psychological or social criteria? Case law in the 1920s and 1930s supported only physical threats to women's health, but in 1938 the trial and acquittal of Aleck Bourne suggested that there were psychological threats posed to a woman's life by pregnancy which might justify legal abortion. A year later an interdepartmental committee on the abortion issue recommended that there be a clearer articulation of the legality of abortion in cases of physical threat to a woman's life, but it did not approve other grounds for legal abortion. In the 1940s and 1950s case law involving abortion made reference to both the Infant Life Preservation Act *and* the Bourne decision. By the early 1960s such case law seemed to establish that a legitimate threat to maternal health might include both physical and mental health, but this had not been formalised in statute law.

Statistics on illegal abortions before 1967 are understandably difficult to ascertain, but it was estimated that in the early 1960s there were between 30,000 and 100,000 illegal abortions a year, so it was a considerable social and legal problem.

The Abortion Law Reform Association was founded in 1936 by a group of socialist feminists, with the aim of lifting all restrictions on abortion. ALRA particularly wanted abortion legalised in circumstances where women's physical health was threatened, but it also wanted legal abortion in light of social, economic and psychological criteria. Its activists believed that women rather than the state or

Lord Silkin (1889-1972), Labour politician. Minister, Town and Country, 1945-51. Brother of John Silkin.

the medical profession should be the ultimate judges of whether a pregnancy should continue or be terminated. ALRA was never a mass or even particularly large organisation, but the cause of legal abortion until 1967 owes everything to this small band of activists. In the 1950s ALRA increasingly turned its attention to the House of Commons, seeking ways of changing the law on abortion. Unsurprisingly, no major party was willing to entertain abortion law reform as party policy, so in the 1950s and early 1960s ALRA worked on converting individual MPs, mostly from the Labour Party, to the cause, in the hopes of passing a Private Member's Bill on the question. Between 1951 and 1966 there were five unsuccessful Private Member's Bills, but by 1966, after one such attempt by Lord Silkin,* the public and parliamentary climate seemed to change; some kind of abortion law reform seemed possible. To explain this we might look to long-term causes: the continuing determination of thousands of women to obtain abortions, even if this meant breaking the law, and the relaxation of public mores around sexuality which had been occurring since the 1920s. But there were also more immediate reasons for the shift, which I think we should consider. Two factors were particularly influential on public opinion. First, persistently high rates of maternal mortality caused by unsafe illegal abortions. In 1966 this was estimated to be the leading cause of avoidable maternal death. Second, the impact of the thalidomide tragedy. By 1964, 349 babies had been born in Britain to mothers who had taken this sedative, babies that were severely deformed. An opinion poll at the same time showed that 72 per cent of the British public believed in legal abortion in a case of foetal deformity.

Sir Kenneth Robinson, Labour politician. Minister of Health, 1964-8.

Douglas Houghton (Lord Houghton of Sowerby, 1898-1996), Labour politician. Chancellor of the Duchy of Lancaster, 1964-6; Minister Without Portfolio, 1966-7; Chairman, Parliamentary Labour Party, 1967-70.

Roy Jenkins (Lord Jenkins of Hillhead), Labour politician. Home Secretary 1965-7; Chancellor of the Exchequer, 1967-70.

Changes in parliamentary and activist spheres are also important. In 1963 a younger generation of ALRA activists, including Diane Munday, Madeleine Simms and Dilys Cossey, began to reinvigorate the organisation, concentrating in particular on public polling and on keeping the issue in the media. At Westminster, particularly after 1966, an influx of younger MPs were more sympathetic than their predecessors had been to including sexual and moral reform as legitimate politics.

A final factor we might look to is the attitude in the 1966 Labour government. I don't want to exaggerate the agency of the Labour government in the Abortion Act, as this was David Steel's Bill and ALRA's campaign. But there were key figures within the Labour government, such as Kenneth Robinson* and Douglas Houghton,* who were particularly sympathetic to abortion reform. The most important change in this regard came with the succession of Roy Jenkins* to the home secretaryship in December 1965. Jenkins was on record as being in favour of abortion law reform, and in office he was much more supportive of reform than his predecessor had been.

Which brings us to David Steel's Bill. In 1966 Steel, then a young Liberal MP, came third in the ballot for Private Member's Bills. As Lord Steel's memoirs suggest, he spent some time choosing

Renée Short, Labour politician. MP for Wolverhampton NE, 1964-87.

Dame Joan Vickers (Baroness Vickers of Devonport, 1907-94). Conservative politician. MP for Plymouth Devonport, 1955-74.

between homosexual law reform and abortion law reform, ultimately deciding upon the latter. The Medical Termination of Pregnancy Bill Steel published on 15 June 1966 was shaped by discussions he had had with ALRA, including Diane Munday and Madeleine Simms, Lord Silkin, and parliamentary sponsors such as Labour's Renée Short* and the Conservative Joan Vickers.* The Bill set out four criteria for legal abortion, to be judged by two medical practitioners: first, when a pregnancy involves serious risk or grave injury to the physical or mental health of the woman, before or after birth; second, when there is serious risk of deformity to the child; third, when the woman's capacity as a mother would be severely overstrained by the care of a child or another child; and lastly, when the pregnant woman was what was termed a defective or had become pregnant as a result of rape or sex under the age of consent. The critical points in this draft Bill were the clear articulation of risk to health, which included mental health, and secondly what was called the social clause, taking into consideration maternal circumstances.

The Bill was introduced on 22 July 1966 and it passed its Second Reading by 223 votes to 29. By the time the Bill went to committee stage in January 1967, supporters, opponents, religious and professional groups had all organised around the issue. The opinions and influence of medical organisations, particularly the British Medical Association and the Royal College of Obstetricians and Gynaecologists, were crucial to the shape of the Abortion Act in this regard. In November 1966 the two organisations published a joint report rejecting both the social clause of the Steel Bill and the clause dealing with pregnancies as the result of rape or sex under the age of consent. In the face of such medical opinion Steel amended his own Bill in December 1966, withdrawing the clauses dealing with maternal capacity and rape, and redrafting the first two clauses, first of all to expand the doctors' consideration of risk to include well-being as well as physical and mental health, and secondly to permit them to consider the patient's total environment, actual or reasonably foreseeable. The gesture appeased medical organisations and carved out the middle ground for parliamentary supporters, but the decision to drop the social clause *did* alienate ALRA. Though its members were very disappointed at the truncated Bill, the organisation nonetheless decided to continue its support for Steel in January 1967.

Between January and the end of March the Steel Bill was in its committee stage. It went through the report stage and third reading in June 1967. At this point time was the great factor, and this is where the Labour government does play a critical role. Richard Crossman,* who was then Leader of the House, John Silkin,* the government Chief Whip, and Roy Jenkins, the Home Secretary, were critical in allowing enough time for the Bill to be passed. Due to numerous amendments made to the Bill by opponents, there were three exhausting sittings. But on 14 July 1967 Steel's Act passed third reading in the Commons by a majority of 262 to 181.

R. H. S. Crossman (1907-74), Labour politician. Lord President of the Council, 1966-8.

John Silkin (1923-87) Labour politician. Minister of Agriculture, Fisheries and Food, 1976-9. Consultant on EEC politics and administration. Brother of Lord Silkin.

The majority of the Bill's supporters were Labour, the majority of its opponents Conservative. On 24 October 1967 the Lords passed the Bill, and three days later it received Royal Assent, coming into operation as the Abortion Act on 27 April 1968.

THANE

Many thanks Stephen. Can I ask David Steel to tell us first of all how you got involved in this, and then something about the process of getting the Bill through to become legislation.

**LORD STEEL
OF AIKWOOD**

Let me take one step at a time if I may. How did I get involved in it? Quite simply. As Professor Brooke outlined, ALRA, as an organisation, not only lobbied MPs, but lobbied parliamentary candidates. I had fought the 1964 general election, in which ALRA had sent out a questionnaire I think to all candidates – you know, are you for or against changes in the law – and I ticked the box saying that I was in favour. I was then elected at a by-election six months later to find myself in the House of Commons, and when I put my name in for the ballot for Member's Bills it was just because everybody did, there was no particular thought in mind. Having come third in the ballot, I then faced the problem: can you actually turn aside from legislating on something on which you said you would support somebody else's legislation. That was the issue that I was confronted with. After a consultation with ALRA, and having read a very influential book by, I think the name was Alice Jenkins,* called *Law for the Rich*, which was published around the 1950s,* I was certainly convinced that this was a substantial issue, well worth doing and it had already been through the House of Lords in the form of Lord Silkin's Bill. So basically the Bill that I took up was substantially the same as his one and that is how I came to introduce it.

Alice Jenkins. Co-founder of the Abortion Law Reform Society.

See David Steel, *Against Goliath* (London: Weidenfeld and Nicolson, 1989), p.50. Alice Jenkins, *Law For the Rich* (London: Gollancz, 1960).

THANE

What about process, and the relationship with the Labour Party?

STEEL

The relationship with the Labour Party was of crucial importance. I don't suppose it pleases historians, but the word 'luck' comes very firmly into this process. Luck, first of all, in what we dignify as the use of a ballot for Private Member's Bills, which is just an annual raffle. It doesn't sound quite so good when you put it that way, but that's what it is. I was third in the raffle, and therefore you have a good chance of legislating. The second bit of luck was that the ballot took place after the election in 1966, which was a March election, so you had an exceptionally long parliamentary session, starting in March instead of October and going right the way round. And it didn't become law, as we have heard, until October the following year. So instead of an annual parliamentary session, because of the date of the general election we happened to have eighteen months, and we needed every week of that to get the Bill through. So that was another bit of luck.

The third bit of luck was that key people, who had been in support

of ALRA's objectives, were in crucial positions in the Labour government. Roy Jenkins was Home Secretary, Dick Taverne was his junior minister, who was the one who came to pursue me immediately, the day the ballot was announced (and I am sorry he is not here tonight because he would verify that). Kenneth Robinson was Minister of Health and he was the author of one of the six previous attempts to legislate. Because there had been six Bills between 1953 and 1967, none of which had found parliamentary time, but Kenneth Robinson's was one of them. So you had the Minister of Health, who was openly committed to this cause, you had as the government Chief Whip John Silkin, whose father had been the promoter of the Bill in the Lords which I had inherited, and you had Douglas Houghton as chairman of the Parliamentary Labour Party, whose wife was the chairman of ALRA. Now, you couldn't create all these positions – that is what I mean by luck playing its part. The omens were favourable in all these respects, and we needed all of these factors to get the Bill through, in particular when we ran out of time on the report stage and had to push for a second date from the government, an extra date. That was a crucial moment. Dick Crossman, who was Leader of the House, was a sympathiser as well, but it was having all these people in those positions: they were not going to let a Labour government allow a Private Member's Bill of this importance simply to fail through parliamentary time-wasting or attrition and lack of time. It had come so near to being passed that they put their weight behind that decision. Without that second day the Bill would not have got through, and it would have been the seventh unsuccessful abortion law reform Bill.

THANE

But the Labour government hadn't been willing to put it forward as its own piece of legislation.

STEEL

Sir George Sinclair, Conservative politician. MP for Dorking, 1964-79.

No, and indeed none of the political parties at that time would have contemplated that, because it was treated as a non-party issue, which caused problems in all the parties and therefore it was a matter of a free vote. As far as the mechanics were concerned therefore, the people who were crucial in delivering that were Peter Jackson, on my right, who was the sort of unofficial whip for the Labour members, and Sir George Sinclair* for the Conservatives. They did all their sums and they dragooned people and made people come on two Fridays in succession in order to get the Bill through, helped by the almost full time attendance in the Central Lobby of Alastair Service. So that mechanical operation was very important, and I am sure Peter and Chris will want to talk a bit about that later.

THANE

So there were supporters and opponents in all the parties?

STEEL

Absolutely, yes. There were strong opponents in my own party, as

well as in the Labour Party and the Tory Party.

THANE

Could we go on and find out more about the Abortion Law Reform Association, since it clearly played an essential part in the background to this. Diane Munday, you have been identified as one of a young generation who took over in the 1960s. Can you tell us something about how you became committed to this particular cause and then about the role of ALRA?

DIANE MUNDAY

St Bartholomew's Hospital, London.

It was in the early 1950s that I first came across abortion. I suppose I was very naïve but at that time it was something that was never discussed; it was a word that was never said. A young acquaintance died. She was married with three very young children and I was so shocked that I mentioned it to the group of doctors I was working with at Barts Hospital.* They suggested I went with them to the wards on the following Friday evening and learned some of the realities of life.

There I discovered that, each weekend, two wards were routinely put aside for the work of the backstreet abortionists. Later I found that this was not just at Barts but was common practice in most London hospitals. This was because Friday was payday.

When the shock passed this went to the back of my mind. In 1960, myself the mother of three children under the age of four, I became pregnant again. This was before the days of the pill and, with all the contemporary emphasis on the miseries brought about by infertility, it is often forgotten that excessive fertility also brings its problems.

As soon as the pregnancy was confirmed I *knew* that nothing or nobody could persuade me to have another child. I surprised myself by the strength of emotion and the internal drive that led me to seek abortion. It is something I have never forgotten.

Later when I spoke to desperate women I could understand how they felt. If I, with a supportive husband, a comfortable home and enough money even if we were not rich, was prepared to go to any lengths to end the pregnancy – even using the proverbial knitting needle if necessary – the plight of women on their own or living in difficult circumstances was completely understandable.

Fortunately for me, asking around provided the details of a Harley Street abortionist. For a 10 guinea fee a psychiatrist certified my mental health would be impaired if the pregnancy continued and for a further £90 (a great deal of money in those days) the pregnancy was safely ended. Coming round from the anaesthetic I suddenly recalled the young woman in similar family circumstances to mine who, a decade previously, had died. This was because she did not know where to go and, even if she had known, did not have a cheque book to wave in Harley Street. Not believing in a God I could not give thanks in the traditional way but instead made a personal vow that I would do everything in my power to enable other women to have what I saw then, and still see today, as the privilege

of deciding whether or not to have a child without risking their lives.

Having been offered, but not accepted, the drug thalidomide during my third pregnancy I had already joined the almost defunct Abortion Law Reform Association (ALRA). This was because, having thought about the matter carefully, I knew that I would want the right to have an abortion if there was a risk I was carrying a defective foetus.

Following my own abortion experience I attended ALRA's annual general meeting and soon found myself on the committee and subsequently as vice chairman.

As I had no campaigning, committee or other relevant experience this illustrates the dearth of people prepared to become involved with such a contentious issue at that time. For those who did not experience the moral and social climate in the early 60s the atmosphere is unimaginable. Fortunately, all that has changed today.

THANE

We will go on later to the actual process that ALRA was involved in. Jennie Smith, I think you also had an abortion before the Act came into force and since this is so much what the Act was all about, if you could tell us something about the experience?

JENNIE SMITH

Keele University, Staffordshire.

I am very happy to. I want to make this as honest as I can remember, as a witness this afternoon, and I think I need to start with a little bit of background, because it is 30 years ago and for younger people it *is* quite hard to imagine this situation. In October 1966 I was seventeen when I went to Keele University,* which was then considered (by outsiders anyway) as an absolute hotbed of radicalism and permissiveness – in fact it was – and we embarked on the ‘summer of love’. Now although I had done a human biology O-level at school, I and most of my girlfriends were curiously vague in our exact knowledge of our menstrual cycles. We really didn’t have much idea at all of exactly what was going on, and some of us were quite enthusiastically getting into the spirit of the ‘summer of love’, but we were always, always frightened of getting pregnant and even being slightly late for a period was absolutely terrifying. Apart from condoms, which were then very unpopular, and always the responsibility of the man to buy, nothing else was really available for us. We were all aware of the passage of the Abortion Act, but it seemed a very distant slow process to us and abortion itself too terrible to think about, because backstreet abortion was all we had ever heard of. I certainly didn’t then know anyone who had had an abortion and I didn’t even know anybody who had become pregnant accidentally. What we all most wanted was to be allowed to take the contraceptive pill. At the time, the only way you could get it was through the Brooke Advisory Centres.

I waited until I was back in London for my summer holidays – we are talking of the summer of 1967 here – and got an appointment to see a doctor there shortly before the beginning of the autumn

term. Now unless you were married, you had to make a very convincing case that you were engaged or intending to marry your steady boyfriend before you were given a prescription. I was neither of those things, but I did manage to lie convincingly and I got my pills. Back at university, around the middle of the autumn term in October 1967, which was about the same time that the Bill received its Royal Assent, I realised I had been waiting far too long to get started on my pills and therefore I must be pregnant. I was on such bad terms with my parents at that time that I considered them the enemy; in fact the last words my mother said to me before I went to Keele were 'And don't think you can bring your babies home to me.' My boyfriend, a fellow student, was a relatively new relationship and neither of us could imagine getting married. We wanted to get our degrees and we wanted to have careers, and to be honest, being pregnant to me felt like having a cancer growing inside me – something that was going to kill my life. That really *was* the reality at that time. So I tried the remedies that were current then: I had very hot baths, I had lots of gin. A friend at another university sent me something called Widows Welches, we didn't know what they were, I took them and they didn't work. Somebody else suggested taking the entire packet of my contraceptive pills in one go – that didn't work either.

Time was passing very quickly and time really was the enemy. So I went to the Student Health Centre, where the attitude was unsympathetic, judgmental, and I had a pregnancy test, I think it was something to do with rabbits in those days. That took a long time too, and when I found out that it was positive I had no idea how far the pregnancy was advanced, but I did persuade the doctor there at the Health Centre that my mental health would be damaged unless I could have a termination. He gave me the phone number of a private clinic in London where, if the doctor agreed, I might get an abortion, costing £300. I had no money at that time, I had the remnants of my student grant for that term. My boyfriend didn't have any money either, but he did have the courage to go to the Nat-West Bank* on the campus, to see if he could get a loan – I obviously don't know what he said it was for – but £300 was a lot of money in 1967 and unsurprisingly they turned him away. So I must have been about three months or a bit more as the Christmas holidays approached and I was very anxious, but I was equally extremely determined to have the abortion. And by chance a friend of a friend knew somebody who had a contact for illegal abortions, which cost only £25. The good thing about it was that the method didn't involve surgery and if it didn't work the first time you could try it again until it did.

I was staying at my parents' house for that Christmas and my boyfriend was up north in Sheffield, so I had to do it on my own. I had instructions to buy a bottle of castor oil and some Epsom salts, I couldn't imagine why so I bought them at a chemist. Then I went to Soho, to meet the contact who would take me to the abortionist. Now I thought I was pretty worldly-wise in those days, but my con-

National Westminster Bank.

tact, who was called Harry, turned out to be a pornographic photographer and we were in his studio. In retrospect the photos I could see on the walls and hanging up to dry weren't really that shocking, but it confirmed the illegality and the danger of what I was doing and I felt that I was stepping into the underworld. Harry drove me to somewhere in London I had never seen before, I have no idea where it was, I wasn't supposed to take notice. We stopped at a council estate and went into a flat, Harry stayed in the sitting room and I was taken into a little room where I had to lie down on a plastic sheet on the floor. The abortionist was quite a kindly woman, and her technique was to dilate your cervix, which was quite painful, enough to insert a nozzle and pump in some kind of dehydrating surgical fluid, which would cause spontaneous abortion. Harry said afterwards that she was a midwife.

I had arranged to spend the night at a complete stranger's flat in Tufnell Park. As it was near Christmas all my friends were with their families. The stranger, who was a boy in his late teens, was an American draft dodger and we played cards all night while I waited for something to happen. And it didn't. So I had to wait until after Christmas to have a second go, and this time my boyfriend was able to come down to London to be with me, but we couldn't arrange anywhere to stay apart from my parents' house. So I went through the procedure all over again, while my boyfriend waited for me in Soho, and that time I remember drinking the castor oil, although I still don't know what that was for, but I found out that the Epsom salts were for drying up your milk if you were that far along in your pregnancy.

We went back to my parents' house and halfway through the evening the waters broke. I don't think I could have realised that even a pregnancy of three-and-a-half or four months might cause a painful labour, but I lay in bed in my parents' house muffling my cries, convinced it was going wrong, and I was sure I was going to die. My parents were sleeping a few feet away in their bedroom, there was absolutely no way they could be involved in all this in any way at all. My boyfriend crept into the bedroom and was absolutely terrified. He stole out of the house to a public telephone box to ring Harry, who said, 'Don't worry, it's perfectly normal.' In the morning the bed was completely soaked in blood and the foetus had gone down the lavatory – it was a boy – and I had to explain the ruined mattress to my parents by saying it was an unusually heavy period. Now my parents weren't fools, but they were prepared to believe me after ringing the family doctor, who miraculously didn't think it was necessary to come out to see me.

I made a completely uneventful recovery and when I went back to the Student Health Centre a few weeks later I told them I had had a spontaneous abortion, and they chose to believe me too. I have never regretted having the abortion and I am glad that Harry and the woman helped me to have it, but I have always felt that it was an appalling thing for a young girl to go through and I am glad to have been able to give my testimony.

THANE

That really does make very vividly clear why so many people were committed to changing the law. Dilys Cossey, you were the secretary of ALRA at the time and you must have heard many stories similar to that.

DILYS COSSEY

Yes. My home address was the main address of the Association. We lived in a small flat in Kennington, South London, and our flat was listed in the phone book as the ALRA address. Many women, and their partners, would come to our flat trying to get help for a termination of pregnancy. They were all sorts from all walks of life. There was the clergyman's wife, whose diaphragm had let her down. She came down overnight, by train, second-class from the north-west, with the birth certificates of her five children, to prove that she was a good mother and really could not contemplate having a sixth child. There was the young French woman, whose boyfriend had revealed, as soon as she had realised she was pregnant, that he was already married and (as so often was the case) walked out on her. There was the young English woman, whose partner was from what was then Southern Rhodesia. I learned later that she obtained a safe – but very expensive – termination and they subsequently married.

I could not act as an abortion agency, because we were there not to help provide abortions, but to reform the law on abortion. The only way I could give help and guidance was to supply them with the ALRA literature, which contained a list of its eminent supporters, including obstetricians and gynaecologists. Individuals might realise they could contact these people for help.

The experience of meeting this wide variety of women seeking abortion brought home to me very strongly that you cannot categorise some women as 'deserving' of abortion and others as 'undeserving'. There can be no one single specific ground for abortion. It has to be the woman's choice. I would like to underline what Diane said and what Jennie [Smith]'s evidence has shown: if a woman wants an abortion, she knows she wants it and she will move heaven and earth to get it.

THANE

Can you tell us something about how you got the politicians interested? Diane [Munday] suggested that ALRA was pretty much dead in the early 1960s, but then by 1967 it had become a big issue.

COSSEY

Vera Houghton (Lady Houghton).
ALRA activist.

It was really Diane, Madeleine and Vera Houghton* who kicked ALRA into life. I was brought in on the second wave and recruited as the new, young administrator – well, we were all young in those days. I was not present at the historic meeting when Vera Houghton was elected as chair by one vote. But those who are interested should read the seminal work on the campaign, the Simms and Hindell book *Abortion Law Reformed*.

That was the turning point. Vera Houghton was the one person who was absolutely indispensable to the functioning of ALRA and

the campaign. Sadly Vera cannot be with us today, but she remains as interested as ever. Of course, Lord Steel was indispensable to the passage of the Abortion Act; but Vera Houghton brought her unrivalled organisational, professional and political skills to the development of the campaign. She moulded a team of young, unknown but committed individuals into one of the most effective advocacy campaigns for social reform in my generation.

THANE

What did you do? Battering away at politicians and getting as much publicity as possible?

COSSEY

Alastair Service, ALRA activist. Hon. Parliamentary Officer ALRA, 1964-7.

ALRA approached practically every MP in the House of Commons in the 1964 and 1966 Parliaments. Alastair Service,* who also is unfortunately unable to be here today, was the lobby organiser. When the House of Commons was sitting he would be down there every evening, stationed in the Lobby with his *Dod's Parliamentary Companion* on his knee. This contained pictures of all the MPs, and he would try to match faces to photos. He would then approach them, introduce himself and ask if he could talk to them about abortion law reform. Alastair was – and still is – a charming and elegant person and was a highly effective spokesperson for ALRA. It was a question of dogged persistence, face-to-face conversation, followed by good briefing and backed up by excellent organisation. As I have already said, in the end the organisation was Vera Houghton. People were put into slots where their skills were best used. One of Diane Munday's skills was – and is – public speaking. She went around the country making the case to women's organisations. I remember her underlining how important it was to identify closely with the organisation being addressed, whether it was the National Council of Women or the Co-operative Women's Guild. Part of this identification was to dress appropriately – and in the 1960s that often meant wearing a hat. This would make the audience feel more comfortable about the fact that your subject - the case for abortion law reform – was both challenging and sensitive. I remember at the time of the 1966 draw for Private Members' Bills, Vera, Madeleine, Alastair, Diane and I were in the lobby of the House of Commons putting in cards for the first ten or so MPs in the ballot. Vera had prepared first-rate background briefing packs for the MPs – they were a really professional job. Lord Steel has already discussed the pack of information he received when he was a parliamentary candidate. ALRA's briefing was constant, organised and of a high standard. Certainly the time was right, but the important point is that ALRA took it.

THANE

Madeleine Simms, do you want to add anything about this campaign process?

MADELEINE SIMMS

No, I think it has been covered very adequately.

THANE

What about the politicians who were at the receiving end of this? Chris Price, how did you get involved in all of this?

CHRISTOPHER PRICE

Well I was quite a minor politician, I was a minor politician all my political life, but I had just been elected to Parliament. I vaguely knew Peter Jackson, I can't remember quite how.

PETER JACKSON

The Sheffield connection, maybe.

PRICE

Sheffield-based. We bumped into each other and Peter engaged me with his general tremendous – it is something more than enthusiasm, it is something you have just got to do. He was a bit like Coleridge's Ancient Mariner, getting you with his glittering eye. I had just been made a Parliamentary Private Secretary to Tony Crosland,* who was mad keen on education, but I desperately wanted to do something else and not be tied into that sort of thing. So that's how I got into it, and I was terribly aware of Peter's energy. Then Alastair Service, who quite by accident I had been at university with (he was at the same college as me at Oxford*), put pressure on me, so I was 'sort of' Peter's assistant whip on the campaign. I didn't do as much work as him, but it gave me a chance to stand back a bit.

C. A. R. Crosland (1918-77), Labour politician. Secretary of State, Education and Science, 1965-7.

The Queen's College, Oxford.

One thing was fascinating. We went on from abortion to do divorce the next year and other such things throughout the 1960s – and what it brought out was very interesting psychological influences. The Abortion Bill. Among the Tories I would argue with (and we couldn't have got this through without a significant number of 30 or 40 Tories who stuck with us all the time), that a significant number of them had had mentally handicapped children. Actually, if some future historian were to go through all the keen supporters of the Abortion Bill, I am quite sure they might be able to get a psychological profile of them and try and pinpoint something which made them so enthusiastic about it.

The other thing that I was interested in, and became interested in early in Parliament, was parliamentary procedure. The fact that we have just gone through four years of a rather boring Parliament with miserable backbenchers is because it *takes* four years to try and understand how parliamentary procedures work. For four years you just don't understand – you're a complete dumbo. I got quite interested in moving a closure and all that sort of stuff, and we were well served by people who understood that sort of thing. The person who had *some* influence was an old guy called Charlie Pannell.* When I was in the Lower VIth at Leeds Grammar School and the West Leeds by-election was on where Charlie was being elected, we were doing Pericles's funeral speech and Pericles seemed to say it was the duty of the intellectuals to support the *demos*, the people, and we knew we were the intellectuals, so we all joined the Labour Party, the whole class, including me and Gerald Kaufman* and several others! So I had known Charlie. Charlie was a bit of a hero of

T. C. Pannell (Lord Pannell, 1902-80), Labour politician. MP for Leeds West, 1949-74. AEU sponsored member. Select Committee of Procedures, 1958-9. Joint Selection Committee on Lords Reform, 1962. Minister for Roads and Works, 1965-6.

Gerald Kaufman, Labour politician. Parliamentary Press Liaison Officer, Labour Party, 1965-70.

mine, and he explained, 'Look Chris, this is what you have got to do', and treated me as a grandchild (I was only in my early thirties). There was a good deal of that.

Another piece of luck, which I think I put my finger on, was that actually the opposition figure who was picked to oppose David Steel was the young fogey, as it were, Norman St John Stevas,* who was about 50 or 60 when he was 30!

Norman St John Stevas (Lord St John of Fawsley), Conservative politician. MP for Chelmsford, 1964-87.

STEEL

He was unmarried.

PRICE

Sir Edward Heath, Conservative politician. Leader of the Conservative Party, 1965-75; Prime Minister, 1970-4.

And unmarried, so that neither he, nor indeed Ted Heath,* the new leader of the Tory Party, cared desperately that this is an issue of the right, in the sense that it has become polarised in the United States at the moment. So that is the sort of thing that got me interested and I got interested in parliamentary procedure. I was having a hard time in Birmingham because I had a rather well-known consultant gynaecologist in Birmingham called Maclaren, who was making vicious attacks on me and I suddenly realised why there was all this support when the top people seemed to be all against it. It dawned on me that it was 'a new thing'. So I don't think the Abortion Act *did* pre-date feminism, I think it was one of a number of extremely important catalysts to the feminist movement. I looked in *Hansard* what I said in 1967 on the third reading of the Bill and I said: 'It is nothing to do with abortion, it is part of the process of the emancipation of women, which has been going on over a very long period, and the public opinion behind the Bill is millions of women up and down the country who are saying we will not tolerate a system whereby men lay down, as though by right, the moral laws about how women should behave'. That realisation was a slow realisation, which came partly because of Diane [Munday] and Dilys [Cossey] and Vera [Houghton], all these tremendous and powerful women running this sort of thing. So I was a very, very junior actor, but that was my impression of how I got sucked into it all.

THANE

At the time, did you have a sense there were thousands of women in the country who were in favour of this? Dilys said that the time had come, and I wondered quite what you meant by that.

COSSEY

The prescription of thalidomide and its effect on the developing foetus provided a strong impetus for the discussion of abortion.

STEEL

Absolutely.

COSSEY

Wally Fawkes, known as Trog, cartoonist for various UK newspapers since the mid-1960s.

There was a Trog* cartoon published in *Private Eye* which ALRA used for publicity. The characters were a doctor and a young woman. The caption was: 'Young lady, I gave you a perfectly legal prescription, but you are asking me for an illegal operation'. That

summarised the conflict.

There was also a growing feeling among women about the need for sexual liberation; women wanted to have more control over their bodies and their reproduction. This was all part of the move towards emancipation, which Chris Price mentioned. The 1966-1970 Parliament put through a whole raft of social reform legislation, which reflected social changes for which support and recognition had been building up in the 1950s. The 1939-1945 War put a stop to social - and particularly sexual - reform. In 1939 there was an official Commission on abortion, but its recommendations were overtaken by the Second World War. That war also put a brake on the development of contraceptive services as well as legalisation of abortion. So it was as though the lid was coming off a number of issues that had been repressed.

Women were becoming more articulate. Women of our generation - like Diane and Madeleine - realised that this was a long overdue reform. I too was interested and answered an advertisement in the *New Statesman* for a part-time secretary for the Abortion Law Reform Association, working from home at the grand salary of £2.00 per week (in the early 1960s the going rate for secretarial work was about £15 a week full-time). Vera, Diane and Madeleine interviewed me and said, 'It will be about half a day's work a week!' It turned out, of course, to be what many people would call a full-time job - and indeed even a way of life at the height of the campaign.

STEEL

Sir Norman Birkett (Lord Birkett of Ulverston, 1883-1962), lawyer and Liberal politician. Appointed by the government to chair the Interdepartmental Committee on Induced Abortion, his committee recommended in 1939 that the abortion laws be amended.

Can I chip in a couple of minor things, which have been triggered by what other people have said. First of all, Dilys [Cossey] is absolutely right, we have forgotten to mention the pre-war interdepartmental enquiry with Birkett,* because it was a very well-written report and was one of the things which influenced me, along with the book *A Law for the Rich*, which contained stories of the kind we have heard today, very vivid personal stories. That book was like that. The other thing I want to mention is that I have suddenly remembered one procedural trick when I was listening to Chris [Price], which I had completely forgotten about, and it was this. Douglas Houghton managed to get the Bill into a different committee. Do you remember that?

JACKSON

Committee C, wasn't it?

STEEL

Yes. Let me explain for the audience. Committees of Parliament, the standing committees, legislative committees, are A, B, C, D, E, F, I can't remember how many there are. The Bills are listed as going into these committees - and it is a bit like a railway station: trains on every platform and you have got the train waiting outside to get into a platform - and one of these committees is listed for Private Member's Bills. Therefore one of the techniques of the opponents was to make sure that that train stayed in the station and

Duncan Sandys (Lord Duncan-Sandys, 1908-87), Conservative politician.

the place wasn't vacated, so that the opponents were dragging on the discussion of the previous Bills, one of which was a Duncan Sandys* Bill on conservation, no doubt very laudable, to stop us getting into committee. And Douglas Houghton spotted a Bill coming out of platform number 3 and he said we will shunt you sideways and get our Bill in there. And that is how we did it. That was a bit of Douglas's, and no doubt Chris as well was involved, procedural expertise which was very important. It is a minor technical thing, but it was actually crucial for the Bill.

PRICE

Michael English, Labour politician. MP for Nottingham West, 1964-83. Parliamentary Private Secretary, Board of Trade, 1966-7.

Can I just mention one other. When we got given the second day for the report stage, it was quite against all Commons procedure that we got given it. There was an MP called Michael English,* who is probably a bit forgotten now, but he was quite right in pointing out that it was pretty well illegal to do what we did. But it was a Dick Crossman/John Silkin fix so that we could go on all Friday and Saturday and Sunday if necessary to get the thing through.

JACKSON

Could I just comment on the significance and importance of Crossman being in place and the additional time. Now there had not to my knowledge, and I don't claim any authority in this matter, been an occasion when a Private Member's Bill had been so accommodated by a government.

STEEL

Never before or since.

JACKSON

No, I think not, that's right. I was asked, and I don't recollect who but there were chains of communication, by someone in government that I should organise letters to go into Dick Crossman. And with Alastair, and I suspect with Chris, I remember going around talking to people who I knew would be sympathetic, to indicate to them the importance of this: this Bill would fail without additional time and we *had* to convince the Cabinet and Dick Crossman had to be written to as Leader of the House, to explain the significance and the importance of this.

Another factor which I am very conscious of, which perhaps Chris wasn't so conscious of at the time, is that I was on the left of the party, a member of the Tribune Group,* and feeling very disenchanted with Parliament and with the Labour Party, particularly on the issue of Vietnam. Frankly, if I had not been a Member of Parliament I would have left the Labour Party on that issue. Now that sense of malaise (I suspect there may be a bit of it now!) within the party had to find opportunities, and one of the opportunities was the Private Member's legislation and I think Chris would agree. I am getting ahead of myself – letters to Crossman. I did make some notes at one time about how many letters I thought went in, but they were getting on for 40 or 50. That was very important. Dick Crossman could sit down in Cabinet and wave all these letters that he was having from Members and explain that the morale of the

The Tribune Group consists of left-wing Labour Party MPs. Their views, generally articulated in the weekly journal *Tribune* (founded in 1936 with the express intention of making the Labour Party a truly socialist party), are often in opposition to the official policies, particularly while the party is in government. The influence and number of participating MPs has tended to be very variable.

Harold Wilson (Lord Wilson of Rievaulx, 1916-97), Labour politician. Prime Minister 1964-70 and 1974-6.

Tony Blair, Labour politician. Prime Minister, 1997-.

party – and he explained this to me later – would be affected unless these opportunities were given. And so the time was given. I think the other factor of which you must be conscious in this context is: in Wilson,* and I am no Wilson fan, we don't have a Blair-type* character. We have someone who would allow debate to take place within Cabinet and would be conscious of the consensus. Obviously, because of the key figures, the Home Secretary, Dick Crossman and others, and what was argued in terms of the morale within the party, that view prevailed. But I think what you will be interested in this, because I want to come on to what I want to say later because it has a bearing on it. Wilson's contribution – and he was not, so Douglas Houghton told me, sympathetic to it, but he was overruled or persuaded by his colleagues – was that we would put at risk a large number of seats. One of his qualities was that he had a phenomenal memory and a great interest in statistics and he reeled off all the seats in the north-west where there were a majority of Catholics and which we would put at risk by giving this time. Well, we didn't put the seats at risk, but his view was purely political and I thought, when Douglas told me, how interesting, that man is clearly not interested in gender politics at all, it goes right over his head, all he thinks about is political advantage. Just on that I would like, before I forget, to make a comment. Personally, I was very much upfront in my constituency. I had two votes of no confidence moved against me by Catholic members of the party, on the grounds that here I was, putting at risk an 816 majority, in that I was articulating the need for a piece of legislation which was opposed by the majority of constituents who were Catholic. We had no census detail on religion, we may do in the future but then of course we didn't, but if you looked actually at school enrolment, the majority of my constituents were Catholic. Canon Baldwin made a pitch in the church and statements were made about how dreadful this man was, this latter-day Herod, and how good Catholics of course should not support him. When it came to the 1970 election I had the lowest swing – I lost the seat, sadly – of any Labour Member of Parliament in the whole of the north-west. Now I put that down to the fact that contraceptive practice and abortion (and you will correct me on this Dilys [Cossey]) amongst Catholic women is perhaps if anything greater than amongst non-Catholic women. I was conscious too of the representation which I received from Catholic constituents, who took very strong exception to statements which were being made by Canon Baldwin about the latter-day Herod and how we mustn't re-elect him. So the conclusion I have drawn from this is that the Church gives the impression, and that politicians think, the Church has power in terms of dictating or influencing their constituents or their followers to vote a particular way, and I can only say to you that my experience – I think it is significant and borne out by my result in 1970 – is that the Church has far less power than it thinks it has. Shall I go on and talk about other aspects?

THANE

Yes do, now you have got going!

JACKSON

Well then, I think it is a great pity that the ‘young man early gone to seed’ is not with us today, namely Norman St John Stevas. I was conscious, and I would like to think my colleagues on the platform will support this, that we didn’t really have an opposition. The opposition was time, and Members not being sufficiently motivated to be there on a Friday, which was not a day that many of them spent in the House, to secure closure. Just to explain, you *must* keep a House with at least a hundred Members in to move closure, because you are dealing with amendments. Then, when you feel they have been debated a sufficient time, you move closure and, to secure that, it is either accepted or not accepted by the Speaker – he accepts the motion – then to secure closure you must have a hundred Members. Not a majority, but it must be a hundred. The other side, if you look at the figures, and this proves my point (because we were organised and they were not), we had a majority of 223 to 29 on Second Reading. I know it was a triumph of organisation: it did not represent the strength of feeling in the House. Then when you look at the third reading, we had a majority of 262 as against 181. Now that figure of 223 was due to Alastair Service, myself, Chris, Sir George Sinclair and others, who had taken it upon themselves to motivate Members [of Parliament]. And it was organisational, it was letter writing, it was following up those letters, it was the lobbying, Stephen Brooke questions whether ALRA is a model pressure group: in my view, that majority totally attests to that. This is an artificial majority and it was brought about through skilful lobbying and activating sympathetic publicity.

It wasn’t until much later, and this point is acknowledged in the paper, that the other side got organised and they had lots of strengths in terms of parliamentary procedure. They didn’t have the numbers there, but they had the time and what their objective was, was of course to spin the Bill out – put down as many amendments as possible, talk to the Speaker to suggest that more time should be given to this amendment or that amendment, too few had been selected, etc. And this is the strategy of defeating all Private Member’s Bills, which David Steel will know very well in another context: to prevent it from making progress and making sure it is not given time. Well as I say, we secured that time and in the context of defeating other Bills, because you should be conscious of the fact that there were three ...

MUNDAY

Sixteen, there were 16.

JACKSON

Really, as many as that. I know I was personally involved in the 1970s in those three. We used effectively the strengths which we had in terms of parliamentary procedure, namely taking up time, to defeat those Bills. I think you were going to invite Dennis Skinner,* I think we owe a lot to Dennis, because he effectively defeated

Dennis Skinner, Labour politician.
MP for Bolsover, 1970-

Corry, who drew first place. Remember, if you draw first place in the ballot you start first, you cannot be blocked by other Bills, so to defeat that we had to engineer time wasting and Dennis Skinner was instrumental in that.

John Stuart Mill (1806-73), philosopher.

I would just like to endorse the point that has been made by others as to how I came to this issue. I came to it through my devotion to my political mentor John Stuart Mill,* and I suppose you would say my interest in this issue relates to my reading of *Subjection of Women*. But that apart, I also had a personal experience just after I was elected, in that I was asked to try and assist a very inadequate man, not in my constituency in Sheffield, who was totally destroyed by his wife being given a three-year sentence for acting as a backstreet abortionist. I can see that house now – it is gone – in Netheredge, Chris [Price], a district you will know. His wife had just been sent down for three years; his wife kept that family together. She was a kind, caring person. She did favours for her neighbours and they insisted on paying because they were so grateful, which of course one understands. Unfortunately one of the beneficiaries of her care was pressed by the police, they had the evidence, they brought the charge, and this wretched man who I sounded off about publicly sent her down for three years. Now her husband could not cope. I think the children were taken into care, and alright, she would eventually come out and the family would be put together again, but I thought how heartless, how brutal. Here is a woman in my view providing a social service and being sent to prison for that. She wasn't in it to make money. A family was destroyed as a result of that. So, like others, I had an intellectual conviction through my devotion to Mill and Malthusianism* and I had a personal experience which was quite traumatic for me. I can still see it now, I can still picture that man and I can see those unhappy children.

Thomas Malthus (1766-1834), economist.

STEEL

Can I add something to what Peter [Jackson] has just said, because this is a historical society and there is one thing that I have noticed in recent times, because I still get involved in this subject automatically – I get letters, I get lobbied, I get shouted at, I get praised, it goes on, it didn't stop in 1968. I am struck by the fact that so many of the present generation, and I include new politicians, are somehow led to believe that abortion was invented in 1966. It is true! They think that there was a world in which abortion did not take place until this awful Act was passed. Now, what we have heard from person after person at this table is what nonsense that is, and I think you are performing a very valuable role.

Thomas Winning (Cardinal Winning, 1925-2001), Roman Catholic priest. Tribunal and Vicar Episcopal for Marriage in the Motherwell Diocese. 1966-70. Archbishop of Glasgow 1974-94, Cardinal, 1994.

Could I say a word about the Churches, because again I agree with something Peter said. I had a recent – a year, a year-and-a-half ago – public controversy in Scotland with the late Cardinal Winning,* who was an outspoken opponent, as one would expect, on this issue. I was walking down the high street of Edinburgh one night after he had had masses of publicity over some case or other and a woman came up behind me and grabbed me by the elbow and said

'I just want you to know that I am a Catholic and that the Cardinal does not speak for me'. I think what you said was true of your constituents then and it is still true today. But very important in my book in moving the Bill forward at the time, because I *am* a Church member, was that the Church of England came out with a very influential report called *Abortion: An Ethical Discussion*, which in my view blew to pieces a lot of the Catholic theology on this issue. But it was very supportive and was followed by less weighty but nonetheless significant support from the Church of Scotland and the Methodist Church. And that was of great comfort to me in my position.

Let me tell you just one funny incident about Crossman. In all this pressure to get the second day, which as everyone has said has never happened before and has never happened since, was totally improper and everyone said it was improper, but the final straw was that I was more or less pushed in through the door of Dick Crossman's room (probably by Peter and Chris and various other people). I was told that you had to go and see the man yourself, it is your Bill, and on top of all the lobbying that everybody else has done you have got to go and argue with him as to why he should give it the second day. And my main argument was that if they didn't, this issue would come back to clog up the legislative programme all the time. That I thought appealed to him as the Leader of the House. But what I do remember about that episode was that I went in, and it is rather like being in the headmaster's study: the Leader of the House's room, oak panelling, Dick Crossman a major national figure as well as Leader of the House, and me a relatively new, young, backbench MP from another party, going to ask him to do this improper thing. He gave me a glass of whisky and I was so nervous I drank it very quickly; then later he said, 'Will you have another', it was down to about a third, and he poured in brandy. Normally one would say hang on, that's the wrong bottle. I wasn't going to say a thing – I drank the mixture, and we got the extra day!

PRICE

Can I just give one bit of confirmation of what David said about the Catholics. In my constituency I had two big Catholic parishes, and one of the priests went on right up to the election saying all the Herod stuff. But the other one never said a word in his sermons and after the Bill had gone through I said, 'I am grateful that you didn't get in on this controversy, but why didn't you?'. 'Oh', he said, 'Christopher, I said to myself, thank God you are a Protestant and so you can do these things.' So there was within the Catholic Church no real unanimity, even within the priesthood of the Church.

And while I am on it one final story about Alastair Service. His lobbying was facilitated by his sheer effrontery. He would walk into, not into the Chamber of the House of Lords, but everywhere in the House of Lords and in those days you didn't wear badges and things.

STEEL

No, that's right.

PRICE

I was chatting to one of the doorkeepers in the House of Lords at one time and I said, 'It is very nice of you to let Alastair do all this', and he said, 'Oh, is he not the eldest son of a peer'.

STEELAlastair always *looked* like the eldest son of a peer!**PRICE**

And this particular doorkeeper let him wander everywhere, because as you say, he looked as though he was going to be the duke of something one day and in those circumstances you were allowed to go in.

SIMMS

Sir William Rees-Mogg (Lord Rees-Mogg), journalist. Deputy Editor, *Sunday Times*, 1964-7; editor, *The Times*, 1967-81.

Glanville Williams, lawyer and academic. Rous Ball Professor of English law, University of Cambridge, 1968-78.

John Carmel Heenan (Cardinal Heenan, 1905-75), Roman Catholic priest. Archbishop of Westminster, 1963-75, Cardinal, 1965-75.

Robert Mellish (Lord Mellish, 1913-99), Labour politician. Joint Parliamentary Secretary, Ministry of Housing 1964-7; Minister of Public Building and Works 1967-9; Chief Whip 1970-4.

Christopher Hollis, Conservative politician. MP for Devizes, 1945-55.

Alice Cullen (1891-69), Labour politician. MP for Gorbals, 1948-69. First Catholic woman to be elected an MP.

Sir Robert Grant-Ferris (Lord Harvington, 1907-86), Conservative politician. MP for Nantwich, 1955-74. Temporary Chairman, House of Commons and Chairman of Committees, 1962-70; Deputy Speaker, 1970-4.

Lord Rawlinson of Ewell, Conservative politician. Attorney General, 1970-4.

Might I just add one thing. I think people are being rather benevolent about the Catholic influence in the House at the time. There may have been divisions within the Catholic community about abortion, but they presented a very convincing united front in public, which made a lot of politicians extremely nervous. And we haven't actually mentioned the Catholic institutions outside the House, like the League of St Cosmas and St Damian, these Catholic medical-midwifery-nursing organisations, which were very busy and influential. And most important I think was the fact that the Catholic editor of *The Times* William Rees-Mogg* throughout the period (he was first assistant editor and then editor until 1981) resolutely turned down all correspondence from our side, unless it was signed by a very distinguished person he could not afford to censor. Occasionally we would desperately want to get a letter in and we'd ask a Member of the House of Lords or someone like Glanville Williams, Rous Ball Professor of Law at Cambridge,* people like that to sign it, and then occasionally Rees-Mogg would graciously consent to publish it. But there was one occasion when Cardinal Heenan* produced an incredibly mangled collection of abortion statistics, in which he got the illegal abortions and spontaneous ones all mixed up in one column, and I wrote in to give the correct figures and got a very polite letter from Mogg saying that unfortunately he didn't have the space to print it (although of course they had plenty of space to print the original misleading letter). The *Telegraph*, although not Catholic-dominated in the way that *The Times* was, was simply very, very right-wing and when the Society for the Protection of the Unborn Child [SPUC] was formed they just printed day after day any handouts they sent them. I noticed in the quarterly ALRA newsletter which I edited from 1963 to 1969 that we referred to the *Telegraph* as 'the house magazine of SPUC'.

So I think, looking back after all this time, while one can be quite amused by some Catholic attitudes and antics, we have to remember the damage they did to women by their tactics, and the parliamentary bills that were talked out or delayed by the likes of Robert Mellish,* Christopher Hollis,* Alice Cullen,* Robert Grant-Ferris,* Lord Rawlinson* (a former Tory Attorney-General, who

John Biggs-Davison (1918-88), Conservative politician. MP for Chigwell, 1955-74.

William Wells, Labour politician. MP for Walsall 1945-74.

Peter Mahon, Labour politician. MP for Preston South, 1964-70. Contested Liverpool, Scotland, in 1971 as the first 'Against Abortion' candidate in the UK.

Simon Mahon, Labour politician. MP for Bootle.

was very keen on traditional morality for others, while he himself left his wife and three children for another woman), John Biggs-Davison,* William Wells,* Peter Mahon,* Simon Mahon* and many more. And there were others, notably Norman St John-Stevas, later Lord St John of Fawsley, who tried to destroy the Abortion Act from the moment it was passed. The Catholics did not give up easily! We should not forget any of this 40 years later by an excess of charity, because it has lessons for other social reform groups opposed by single-minded fanatics.

STEEL

Judy Steel (Lady Steel of Aikwood), Liberal Democrat politician. Wife of Lord Steel.

No, no, I don't want to be charitable at all, I agree with you. I remember we used to call SPUC the Society for the Promotion of Unwanted Children. And they were a real menace, because you had people like Maclaren and one or two other major medical figures and they really did put the pressure on MPs. But I think the point that we were trying to make was that the rank and file of Catholics did not get influenced by all that stuff and I will tell you just one other story about Catholics in my own constituency. I had a very active branch chairman in my party who sort of disappeared after the Abortion Bill, and I never connected it with the Abortion Bill, I thought he had moved away. In the 1970 election I was going into an election meeting and suddenly this chap appeared in my sight. I started to say where have you been and Judy* was kicking my ankle, so I thought I haven't got this quite right. She said afterwards, 'He's a Catholic and he stopped supporting you because of the Abortion Bill'. I said 'Well, why is he back?'. Well apparently, he had a conversation with a parish priest and said 'It is such a pity about the Abortion Act, I used to be a great Liberal' and so on, and the priest said 'Yes it is a great pity, I have never let it stop me voting for him myself'. And there was a Catholic priest who just took that view, yes it is a great pity, but I vote for him, so this chap thought oh well, it's alright then to come back into the party and work for him.

THANE

Can we bring Dr Paintin in, because a very important group involved in this are the doctors, whom we haven't talked about at all. You were a medical adviser to ALRA, among other things, weren't you?

PAINTIN

Yes, that's right; I was a member of the ALRA Medico-Legal Council.

Perhaps I should give my history. I was a medical student in Bristol, where I qualified in 1954. I did a year as a junior doctor in the academic department of obstetrics and gynaecology in Bristol. I had been taught that abortion was ethical only if done to save a woman's life or to prevent grave permanent damage to her health. Such abortion would have been performed by a gynaecologist in Bristol only once or twice a year. But each day the gynaecological

wards in the Bristol General Hospital were admitting as emergencies up to ten women with pain and bleeding in early pregnancy. These women were regarded as having incomplete miscarriages; they went to the operating theatre, the uterus was cleaned out, and they went home the next day. Nobody seemed to be aware that many if not most of these women were suffering from the results of abortion induced in the back streets of Bristol. This was still true for me when I was duty gynaecological house surgeon actually evacuating incomplete abortions late in the evenings in 1955. This was typical of the blind eye that the whole of the British medical profession turned towards the problem of unwanted pregnancy and its treatment by abortion in the 1950s. Our forensic medicine teachers told us how strict the law was, and how dangerous it would be to our professional status if any of us were to do an abortion without a second opinion, and unless there was a grave threat to the woman's life. We didn't discuss abortion: it just wasn't an important issue for young doctors at that time.

Sir Dugald Baird (1899-1986),
physician.

I decided to become an obstetrician gynaecologist, and by chance was appointed as a junior doctor in Aberdeen to work with Professor Dugald Baird (later Sir Dugald).^{*} There I was surprised to find that on the end of every operating list there were between one and three terminations of pregnancy. These were being done not because there was a grave risk to the women's health but because they were poor women, usually with several children, who had told the Professor that they just couldn't cope with another child. He had agreed with them and had said 'Right, we will terminate your pregnancy'. He asked me 'How do you feel about helping to do this?' I didn't know *how* I felt but, as the abortions were authorised by the Professor, I felt able to go along with his practice. Dugald Baird explained that he had been advised that although abortion was illegal under the common law of Scotland a senior gynaecologist in good standing in his profession was very unlikely to be prosecuted if he terminated a pregnancy because it was his honest opinion that this was the right thing to do. The fact that the Offences Against the Person Act 1861, the foundation of abortion law in England and Wales, does not apply in Scotland gave him very considerable protection.

Dugald Baird had statistics showing that his policy of liberal abortion for deprived women living in Aberdeen had led to them having smaller families and healthier children, and in a reduction in the maternal complications associated with high-risk, fourth, fifth and sixth pregnancies. These statistics for Aberdeen were better than for comparable populations in Dundee and Glasgow. By the time I left Aberdeen, I was convinced that a doctor could provide abortion ethically, and that safe abortion in an NHS hospital was much preferable to clandestine abortion in the back streets.

In 1963 I became a clinical lecturer at St Mary's Hospital Medical School in London. Professor Ian MacGillivray, my head of department, had also worked with Dugald Baird and shared his views on abortion. Professor MacGillivray and I felt able to terminate preg-

nancies then, well before the law was clarified and expanded in 1967, at a rate of one to three a week. We felt able to do this because case law had shown that abortion provided by a doctor could be lawful. Particularly the ruling by the judge in 1938 when Mr Aleck Bourne was acquitted of a charge of illegal abortion after he had terminated a pregnancy resulting from the brutal rape of a girl aged 15. The judge had said that abortion was lawful to protect a woman from becoming a physical or mental wreck. Other cases in which doctors were acquitted, in 1948 (*R v Bergmann and Ferguson*) and in 1958 (*R v Newton and Stungo*), had shown that what mattered was the honesty of the doctors' opinion, and that the threat to mental or physical health did not need to be as severe as implied by the judge in the Bourne case. We protected ourselves by always having a supporting opinion from the woman's GP or from a psychiatrist. We were also protected by our academic status and because the abortions were provided openly within the NHS, at no cost to the women. I was strongly opposed to private practice, and considered that the NHS should provide prompt high quality care for everyone.

When I moved to London I joined ALRA, and was rapidly recruited by the chair, Vera Houghton, as a medical advisor. ALRA was seriously short of gynaecologists who supported the wider provision of abortion, and who were willing to speak to groups of MPs, and to respond to the media. Peter Diggory, a gynaecologist at Kingston on Thames was also willing to be involved. As a result, he and I became the only two young consultant gynaecologists in London who were active in this cause. We were part of the ALRA group that helped David Steel with the medical aspects of the draft Abortion Bill, and with the wording of amendments during its passage through Parliament (senior gynaecologists who advised ALRA and supported abortion law reform in the 1960s included Professor Dugald Baird, Professor Ian MacGillivray, Professor J K Russell and, until his death in the mid 1960s, Professor Will Nixon).

Something that was not come up so far tonight is the importance of Lord Silkin's Bill. It was during the debates on this bill in 1965 that I was first involved in Parliamentary activity. Lord Silkin's Bill was an attempt to put into statute law existing case law on abortion, and to add some humanitarian clauses that would allow abortion for rape or when the woman was judged incompetent to be a mother. It wasn't a very satisfactory Bill from my point of view: it would not have met the needs of most women requesting abortion for social reasons. But it was the most liberal that the Lords could accept at that time. In retrospect, its main merit was that it aroused considerable interest in abortion in the medical establishment, the media, and the general public. It was a result of the groundwork done by Lord Silkin that the BMA, the Royal College of Obstetricians and Gynaecologists, the Royal Medical Psychological Association, the Medical Women's Federation, and various Christian denominations such as the Church of England, the Methodist Church and the Society of Friends, all had useful reports on abor-

tion available when David Steel agreed to take the Abortion Bill in the Summer of 1966. Lord Silkin prepared the way for David Steel. The first-reading draft of David Steel's Bill was based on the final version of Lord Silkin's Bill, particularly the sub-clause 1a that that would have allowed abortion if the continuance of the pregnancy would involve a serious risk to the life or grave injury to the health, whether physical or mental, of the pregnant woman whether before, at, or after the birth of the child.

Those words in that clause, 'grave' and 'serious', would have made the new law almost useless for women who wanted an abortion because they knew that going on with the pregnancy would disrupt their lives – the reason for most unsafe illegal abortions. Some women might have been squeezed into the law by using clause that read 'the pregnant woman's capacity as a mother will be seriously overstrained by the care of a child or of another child' but a woman like Jennie, who has just spoken to us, would have been unlikely to have been helped. We needed a law that was broadly phrased and that would allow wide and flexible interpretation. I think David Steel showed considerable wisdom, considerable judgement, when he overruled ALRA when amending the Bill for its subsequent Parliamentary stages. ALRA felt strongly that the bill must contain 'social clauses' that would allow abortion specifically after rape, when the girl was under 16, and when she lacked the capacity to be a mother – they knew that a law that allowed abortion only when there was a grave risk to health would not provide the abortions women needed. But David Steel realised that the Bill needed the support of the medical establishment if it were to have any chance of it becoming law – and that the medical establishment did not support the 'social' clauses considered necessary by ALRA. It was with the guidance from the reports from the medical establishment that David Steel deleted the words 'grave' 'serious' qualifying risk to health from sub-clause 1a and introduced the requirement for the medical assessment of health to include 'the woman's actual or foreseeable environment'.

The bill still contained a 'social' clause and this is still in the Abortion Act: termination is allowed if the continuance of the pregnancy would threaten the health of the woman's children. But as time has passed it has become apparent that a social clause of this type was not necessary. The Abortion Act *is* permissive, and all the abortions that women consider necessary can be provided if health is defined as 'a state of physical, mental and social well being and not merely an absence of disease or infirmity' (Constitution of the World Health Organisation 1946). The problem for women is that they have to find two doctors who agree that health should be defined in this way. This was a considerable problem in 1968 when the Act became effective because few NHS gynaecologists felt able to adopt a liberal point of view. At first, gynaecologists were not sure how permissive they could be, and there was establishment pressure against those who did a large number of abortions – they were regarded as outsiders and risked losing the respect of their col-

leagues. But attitudes changed as it became apparent that women could now have terminations legally when social factors threatened their mental health, and that this interpretation of the law had at least the tacit support of the Department of Health. I increased my abortion case load slowly, and by 1970 felt able to use two half-days a week to provide a limited local service. My senior part-time consultant colleagues were not happy about this but didn't actually obstruct it. I was protected by my academic status and by all my clinical work being within the NHS. In time, the older generation retired and their successors began to accept I was acting morally, and began to support what I was doing. A further improvement in local abortion provision followed the appointment of Richard Beard as professor of obstetrics and gynaecology at St Mary's Hospital Medical School in 1972 (Richard Beard had conducted a pioneering study of day care abortion at Dulwich Hospital).

The Abortion Act has been a success. There was a four-year learning curve for women and their doctors and by 1972 the number of abortions notified for women in England and Wales had risen to 108,100. Emergency admissions to gynaecological wards because of incomplete abortion/miscarriage had declined to about a third of what they had been in 1967: by 1977. Deaths from illegal abortion in England and Wales had ceased. These data provide evidence that the Act resulted in the transfer of abortion from the illegal to the legal sector. The 'horror-horror' headlines about the rise in abortion numbers from 1968 to 1972 were due to lack of insight by journalists and the general public into what was really happening. Women were not terminating pregnancies they would have continued before the Act but were benefiting from safe legal abortions that otherwise they would have felt compelled to obtain illegally and with considerable danger to themselves.

THANE

David Steel wants to say something about the doctors.

STEEL

David Paintin has moved us on to a very important part of the discussion, which I am not entirely certain Stephen Brooke got right in his paper, and that is the question of the alteration to the Bill during its passage. Let me go back to the beginning. At the time of the introduction of the Bill, the Royal College were sort of lukewarm on our side, I think that is a fair way of putting it, and they varied in their enthusiasm. The President was clearly not very keen, Sir John Peel, but the Secretary of the Royal College, whose name I have forgotten, said to me 'Look, if you are going to do this Bill, you ought to come and see an abortion, see what it involves'. I said 'Yes, that is a fair point, I will', and I went accompanied by John Dunwoody, who was a doctor and a Labour MP, really to look after me rather than do anything else. We went and we saw an operation, and I asked to see the case notes. Now this was very interesting, because if I had to retitle Alice Jenkins's book *Law for the Rich* I would call it 'Law for the Rich and Articulate', because it turned out

when I looked at the case notes that I could see no overwhelming medical reason on the narrow basis that David mentioned, but this woman was a teacher, who had clearly been able to argue convincingly with the Secretary of the Royal College that she should have an abortion. It wasn't that she had pots of money, but she had influence and she was able to get it done cleanly and legally – well, he thought it was legal anyway. I looked at this and I thought this is the sort of case that the Bill is designed to promote. So he was basically sympathetic, but the others were not.

But during the passage of the Bill there came the report jointly by the Royal College and the British Medical Association against what they called 'the social clause' at that time, which was taken from the Silkin Bill – I can't remember if the wording was precisely the same. But one of the grounds was that the pregnant woman's capacity as a mother would be severely overstrained by the care of a child or of another child, and that became known as the social clause. That was the subject of attack by the medical bodies and at that point I went to see Dugald Baird in Aberdeen. I had forgotten that I ever knew that David had worked under him, but that was interesting. And Dugald Baird persuaded me of two things. One was that the law in Scotland was not quite as rosy as it was painted, because he told me that he had had a phone call from the Lord Advocate's office at the time when the Lord Advocate happened to be a Catholic, saying 'We have noticed that you are performing these abortions, and you are really at the edge of the law and we don't think you should be doing this'. So the next time he had a case, he told me this story himself, he rang the Crown Office in Edinburgh and said 'I have got a woman here in the operating theatre, I just want to know whether I can perform an abortion or not'. They said 'Well how do you expect us to judge?', and he said 'Precisely!'. So he said to me, 'Whatever you do, don't let them drop Scotland out of the Bill on the spurious grounds that it is easier under the common law; it *is* easier under the common law, but I am the only person doing it'. Aberdeen was different from Glasgow, Edinburgh and the other medical centres.

So I saw him and I saw Professor Miller of the chair of psychiatry, and I mentioned them both in a speech in Aberdeen only last week, because they were very influential in my mind. What they said to me was really what David was saying, which is that you shouldn't have a separate social clause, because that is not the good practice of medicine. Medicine ought to look at the totality of a person and their condition. That is why the Act as it was eventually passed does in fact bury the social clause in the general grounds for which two doctors can decide to have an abortion. But – when I came back, having had this visit to Aberdeen, and said to my friends and colleagues and ALRA and the Committee 'I think we should amend the Bill', there was consternation all round. It wasn't ALRA versus the MPs, let me be quite clear, this is where I think the paper is not quite right. ALRA felt naturally a proprietorial interest in the Bill, but the truth is that no lobbying organisation, once a Bill is in Par-

liament, really can have an ultimate say in it: it becomes a parliamentary matter. So ALRA was probably a bit disgruntled, but don't imagine that all the MPs were happy, because there was considerable dissent. I remember the argument being put to me, justifiably, that if you do this and amend your Bill, it will open up more amendments at the report stage. That was quite a convincing argument against amending it.

But what persuaded me to amend it, apart from the substantive arguments which Dugald Baird had put to me, was my feeling that with the medical bodies coming out against that clause, I knew that we had in fact in the House of Commons a small band of enthusiastic reformers, an even smaller band of enthusiastic opponents, but a large middle ground, who would be very tempted under pressure from the medical bodies, the *Times* newspaper, SPUC and letters from constituents and so on, to take the easy way out and say 'Oh well, I'll vote for an amendment to take out the social clause and then I can say I have voted for reform of the abortion law'. I have seen it happen in other Private Member's Bills, where people cop out. The big middle ground is not really interested in the issue, but broadly will go along. So there was a risk that we would have lost the social clause and you could have ended up with reform of the abortion law which was so tightly medical and narrow in its definition that it wouldn't have stood the test of time and it wouldn't have the objective we wanted.

That was the reason why we put through the amendments and we now have the Act and the social grounds are there, buried in the medical grounds, which two doctors have to take into account when they decide. And I think that was the right thing to do.

PAINTIN

I want to comment further on the reports from the medical establishment that guided the drafting of the Act. The senior doctors who produced the reports did not think there would be a marked increase in abortion numbers. Rather that practice would continue as before but with security from prosecution. In particular, they objected to suggestions that women should have a right to abortion if they had been raped or were under 16 – they said this would remove medical discretion and women would be able to ask for an abortion saying, for example, 'It is legal for me because I am 15½.'. This opinion was common to the BMA, the RCOG and the Royal Medical Psychological Association. They all insisted that doctors must be in control and that abortion was a decision that could only be taken by doctors.

The first and crucial section of the Abortion Act is titled 'Medical Termination of Pregnancy'. There was no alternative for Parliament in 1967 but to give doctors complete control over abortion — provision had to be compatible with existing medical attitudes and grafted onto current practice. Also, abortion was considered to be a relatively dangerous procedure that should only be available when considered necessary by a doctor. This has limited availability for

some women. But, looking back over 30 years, has had some important beneficial effects. The Act, by making abortion a treatment decided upon and provided by doctors, has made the abortion decision difficult to challenge by the police or in the courts – responsibility is shifted from the woman to the doctors. So that when a man has attempted to stop his partner having an abortion the judge has had to explain: ‘The abortion has been recommended by her doctors, it is a medical matter and neither you nor I have any power to interfere.’ A further benefit is that medical control over termination of pregnancy gives women some protection from the vehement groups who oppose abortion on moral grounds: the women tend to be portrayed as victims and the doctors – who are more able to absorb the stress – as the wrong-doers who have allowed her, who have even ‘encouraged’ her, to have the termination. The fact that the law has made abortion a medical treatment has been important in convincing health authorities that access to abortion is an essential part of women’s health care, and something that should be provided free of charge by the NHS.

There is a negative side to the Act. Most women make a rational decision to terminate their pregnancy before they see a doctor but the law requires two doctors to certify that the abortion is necessary. Few women have illnesses that are so severe that a doctor must recommend the termination of a wanted pregnancy. That women are able to decide for themselves is recognised by the abortion laws of most other developed countries, all of which were introduced after Britain led the way in 1967. Abortion in the first trimester has become much simpler and safer (because of the increased use of manual vacuum aspiration under local anaesthesia, and of medical methods using mifepristone-misoprostol). Day care is possible for healthy women and early medical abortion can be safe in the woman’s own home (as shown by studies in the USA). The doctor’s duty in most abortion requests is similar to that in any other medical or surgical treatment—to make sure that the woman understands what she is asking for, how the treatment is given, and the probable benefits and risks. Legal abortion no longer needs statutory regulation to be safe, and most women do not need medical help in making a wise decision.

THANE

Diane, you have been dying to talk for ages.

MUNDAY

Two points.

David Paintin mentioned earlier that the Bill and then the Act were compromises. That is right and those of us who went along with David Steel’s drafts and amendments recognised that, although we disagreed with the principle of some of the contents, it was his Bill and therefore his right to deal with it as he saw fit – although there were times when we considered withdrawing our support completely!

On occasions we felt he was going much too far in bending to reac-

tionary opinion. Particularly in the light of things that have been written and said subsequently, it is interesting to note that even at that time most of the campaigners believed it should be a woman's right to choose with no kinds of conditions or approvals written in to the law.

I certainly steadfastly advanced the view (and this goes back to my own experiences and what I was saying earlier) that abortion is not a negation of the maternal instinct but an extension of it which comes into force when a woman knows she cannot cope with a child – or another child as the case may be – and give it the love and care that should be every human person's birthright.

We accepted compromise because it was all that could be achieved at that time. It really hurt when, later, some members of the women's movement accused the early campaigners of having sold women out to the medical profession.

STEEL

Yes, I agree.

MUNDAY

In hindsight it is clear that David was much wiser than we were and achieved as much as was possible at that time and in that climate of opinion. But now it is well past the time to move on.

The second point I want to make is that there is one phrase in the 1967 Act which protects doctors from prosecution and which was inserted accidentally – and, looking back, very comically.

At the end of discussion in the House of Lords on the clause allowing a pregnancy to be ended if 'the continuance of the pregnancy would involve risk to the life of the woman...' a comparison 'greater than if the pregnancy were terminated' was inserted by one of the strong opponents of abortion. Vera Houghton, Madeleine Simms and I were sitting at the front of the public gallery and could not believe our ears. I cannot now remember who proposed the amendment but know it was one of our implacable opponents.

STEEL; COSSEY

Manningham Buller,* that's right.

MUNDAY

Sir Reginald Manningham-Buller, Bart. (Viscount Dilhorne, 1905-80), Conservative politician. Attorney General, 1954-62. Nicknamed Bullingham Manner, during the *Lady Chatterley's Lover* trial.

What happened was that, once again, the anti-choice people had been fooled by their own propaganda which alleged that abortion was a highly dangerous procedure even in the hands of qualified doctors. So, by putting in this comparison, they believed they were restricting the numbers that could legally be performed.

The reality was that statistics showed medically performed abortions to be much safer for the mother than continuing through pregnancy and giving birth. So, in one sense, that phrase gave carte blanche to doctors to terminate any pregnancy. At the time there was such uproar and confusion in the House during these amendments that it was difficult to keep track of exactly what was happening. Nevertheless those of us who knew that medical abortion was safe were pretty sure that the law had been unintentionally liberalised and not restricted as had been intended. Little incidents

like that stand out very clearly in my memory.

COSSEY

David [Steel] has drawn attention to the effect in our country of legalisation of abortion, but we also had an impact on the world and particularly on continental Europe. Immediately after the British abortion law was reformed, hundreds, if not thousands, of women from Germany, France, Spain, Portugal, Italy and even some from the United States came to this country for the legal abortions they could not obtain at home. And as those countries in their turn liberalised their own abortion laws, so the numbers fell. Of course, the classic case today is Irish women coming from both the South and the North of Ireland. This is very sad. But at least they get legal, safe abortion, although it is very expensive for them. This was not something we realised at the time of the passing of the 1967 Abortion Act, but it set a useful precedent for other countries. They actually learned from our mistakes and have wider laws. For example in countries like France and Scandinavia, abortion is available on request in the first trimester or the first 14 to 16 weeks. So there was a significant global impact.

THANE

I think we should let the audience ask some questions.

HELENE GRAHAME

Can I make some observations from a slightly different perspective? From the early 1960s onwards I worked for the Family Planning Association [FPA], which only became integrated with the NHS provision of birth control services later during that same decade. There were certain things that one observed. Peter Diggory, a gynaecologist, not able to be here tonight unfortunately, was one gynaecologist who was available in London when the FPA had what we called 'hard cases'. Hard cases usually came to us from one of the large body of the voluntary workers in the FPA of that time who kept the clinics functioning. They were usually well-educated, middle-aged women with deep convictions about the need for contraception and abortion. The women that they tried to help were almost always a domestic or a relation of a domestic: women living on the edge of poverty and unemployment. It was never anybody's sister; it was never anybody's family: they could navigate the circuitous route to Harley Street and an abortion on 'psychiatric grounds'. It was always somebody who was of a social class and status and income level who didn't know where to go and needed to be treated free. The unpaid workers were also the same people who saw, very much in advance of the FPA, for which they worked and campaigned, why the FPA needed to take an interest or should have taken an interest in the problems and consequences of failed contraceptive methods. But that is *not* in fact what the FPA did at that time. I can remember that, when Peter Jackson MP was collecting information and statistics about the provision of local authority family planning services, in the run-up to the Parliamentary campaign to make family planning part of NHS community

health services, I was actually forbidden to send him information.

THANE

Oh gosh, really.

GRAHAME

Yes, I remember it very well, because we were collecting and collating information and publishing it nationally, about local authority spending on family planning services and identifying them, authority by authority, for spending nothing or next to nothing on family planning. I was told I must stop sending any such vital material to Peter Jackson, because it might antagonise or influence the way the Conservative Health Minister, then Keith Joseph,* might regard the provision of family planning clinics or even a grant to the FPA for filling the gap. For a very similar reason the FPA drew its skirts aside from any public involvement with abortion. Vera Houghton, the redoubtable Vera you have all been talking about, decided the time had come to create another organisation for birth control and abortion which would not be strangled by charitable status. The Birth Control Campaign, as it was called, could extend membership to a wider group of organisations and provide a new and authoritative voice, less easily identified with the pro-choice movement. At that point Vera Houghton decided it would be useful to have somebody representing the FPA on the Committee, because of the kind of access that we had to research and practice doctors, to all kinds of levels of opinion and to people who could offer services and experience. The FPA grudgingly agreed that I should be a member of the Committee but, throughout the meetings that were held by the BCC, I was never listed as an attender. Everything I said or agreed to do was credited to somebody else, so that it would have been impossible for anybody from the Department of Health to discover that the FPA had played any part in the organisation. Later on, the same groups of elderly, energetic and dedicated women in London saw that, once the law was liberalised, there would be an immediate need for doctors and clinics. This was particularly true in London because there were hardly any doctors in the NHS hospital service to carry out abortions, even if their hospital appointments had allowed them to do so. When these committed clinic volunteers decided to set up the first London pregnancy advisory service, there were difficulties in trying to recruit doctors who were interested, not necessarily in doing the abortions, but in doing the medical examinations, counselling and signing the obligatory legal forms. The FPA's Medical Officer, a pro-choice activist, Dr Sara Abels, lost her job, because she wrote individually to doctors working in FPA clinics and invited them to work for the Pregnancy Advisory Service, the new abortion service in London. So I think, to add to this, we need a perspective of who should have been in the barrel, who could have been in the barrel, but was far too anxious about creating waves with the Conservative government, just because of the remote possibility that it might at some point give a small grant to the FPA.

Sir Keith Joseph (Lord Joseph of Portsooken, 1918-94), Conservative politician. Secretary of State for Social Services, 1970-4.

THANE

Thank you, that is an important point. David Steel wants to say one more thing, then he has to leave unfortunately.

STEEL

International Planned Parenthood Federation.

I must apologise for leaving and not staying for the reception, but I have another meeting on a much more boring domestic housing issue at 7.30 which I have to attend. The FPA story is an interesting one when you think today of the pressure on the IPPF* from right-wing politicians in America on precisely those grounds, so it is still going on. I just want to say two things before I leave. One is to remember the comparative figures for abortion, we haven't discussed this, but the international statistics are computed on the number of abortions per thousand women of child-bearing age. I have got the 1994 figures here, there may be other people who have later ones. In Britain in 1994 the figure was 12 abortions per thousand women of child-bearing age. That compared to 12.5 per thousand in Catholic France and 28 per thousand in the United States, which is where it is a much more hot political potato.

Dr John Marks, physician. Chairman of BMA Council, 1984-90.

The last comment I want to make is to give you a comforting quote from Dr John Marks,* who retired as Secretary-General of the BMA in 1992 and in his retiring lecture he said this – this is a quotation I keep handy whenever I am still under attack: 'Looking back over these forty years, it seems to me that the event which has had the most beneficial effect on public health during that period was the passage of the Abortion Bill.' And that I think underlines what David Paintin was saying and we should remember that. I have found this evening fascinating and I am sorry not to be able to stay.

THANE

Very many thanks.

HERA COOK

Audrey Leathard, *Fight for Family Planning* (London: Macmillan, 1980).

I have got two questions. The first one is on the birth control campaign. Audrey Leathard says in *The Fight for Family Planning** that members of the birth control campaign felt through the late 1960s that they couldn't come out and say they were a woman's rights, organisationally, but they had an interest in birth control as a woman's right. They had to fight on grounds of population control and so on. And I wondered whether during the 1960s there were points at which you felt that the issue of women's rights wasn't one that was going to help the cause. The second question is a related one, which is that as a historian working on the 1960s one of the things that I feel – and I actually think this is true to a lesser extent even today – is that what happens to young women is often something that is simply not taken seriously. The kind of experience that Jennie Smith was describing is somehow trivialised, and I wonder whether that was something that you felt was the case in your attempts to promote abortion as a serious cause.

SIMMS

Well yes, I think that is true, and it is partly because they didn't wield any political heavy artillery. If you compare, even now, the pressure exerted by women compared to the animal lobby, the dis-

Patricia Hewitt, Labour politician. MP for Leicester West, 1997-. Secretary of State for Trade and Industry, Minister for Women, and e-Minister in Cabinet, 2001-.

The Department of Trade and Industry.

Yvette Cooper, Labour politician. MP for Pontefract and Castleford 1997-. Junior minister, Dept Health, 1999-2001, Parliamentary Secretary for Public Health 2001-2, Parliamentary Secretary, Lord Chancellor's Department, 2002-.

Fiona MacTaggart, Labour politician. MP for Slough. PPS to Chris Smith as Secretary of State for Culture, Media and Sport December 1997-2001.

ability lobby, the hunting lobby, the gay lobby, who terrify MPs if they are seen sweeping into the House of Commons, there is no equivalent power. The women's movement has virtually collapsed in this country. Now I think that is something we haven't discussed and it is very important in this context. I had a letter this week from the Rt Hon. Patricia Hewitt,* the Minister for Women in the Cabinet Office – she also looks after DTI* in her spare time! She writes that, and you may be a bit surprised to hear this, abortion is not really a matter for the Women's Unit! She goes on to say 'I do think the issues you have raised fall within the remit of the Health Department. They are based at Richmond House, 79 Whitehall'. I wrote back, I didn't actually say that I did know the address because I had worked in the Department of Health myself, to tell her that I had in fact been in touch with Yvette Cooper,* the junior minister at the Department of Health, who had informed me the only way of changing legislation in our field was the Private Member's ballot. She said you know about the Private Member's ballot, it is very important. Previously I had got a letter from Fiona MacTaggart,* who I thought was a feminist of sorts, who informed me that 'attitudes to abortion are not a necessary badge of feminism'. Now I think we have to ask ourselves what has happened to Labour women MPs; why have they become so feeble and apolitical, because in the 1960s we had always assumed that if there was going to be another Labour government, with a big majority and a large number of women MPs, then all our legislative problems would be solved. Of course, many women MPs are quite young, have never had to struggle to obtain an abortion, have no idea what things were like for most women before the Abortion Act was passed in 1967. It has all been handed to them on a plate. It is sobering to be reminded that even now, a quarter of women, even those who manage to obtain a legal abortion, still have to pay for it themselves. If this was a male operation it would be considered a great scandal in the NHS. Because it is women, and this ties in with what you ask, it does not seem to matter too much. For whatever reason, women in this country are not yet politically sophisticated enough to be wield forceful and sustained political pressure in their own interests. This will come in time but it may take another generation. In the abortion context, this may be something to do with the Abortion Law Reform Association having been a rather middle class outfit, as most social reform organisation are. I sometimes feel in my more cynical moments that as soon as abortion became readily available to middle class women, they were able to forget about everyone else, and the campaigning fervour declined.

GRAHAME

William Birtles, barrister. Specialist in environmental, planning and local government law.

MUNDAY

Just briefly on that, maybe you should write to Patricia Hewitt's husband,* a lawyer who was Chairman of PAS at one time.

He was at one time on our group of lawyers, advising the

committee!

COSSEY

In the early 1970s ALRA broadened its aims to include abortion on request. One of the supporting organisations was the National Council for Civil Liberties, for which Patricia was then working. She attended the meeting at which this change was made.

MUNDAY

I know, and her husband was one of our lawyers.

PRICE

National Council for Civil Liberties.

I think there is something very deep in this. We are not going to quarrel about it, but the interesting thing – it is the voice of the old fogey. In America the words are pro-choice on the one side and right to life on the other, and I agree that for the former research officer of the NCCL* to write – she didn't write it, somebody else did, to sign – that sort of letter just shows she is getting lazy in her old age.

MUNDAY

No, she wants to keep her job.

PRICE

Yes, and that sort of thing. But that happens to everybody and there are some issues which are like that. I don't think we should personalise this in attacking particular women. The only point I want to make is that my present attitude to the law, with all its inadequacies and everything, is: if it works, really don't try and fix it or you might find yourself in an American situation and the thing very much more polarised, a situation with American lobbyists imported into this country. I quite agree with what David Paintin said, which is that technology is going to sort this out within our lifetime. Technology is the only thing which brings massive changes in the world, which Private Member's Bills and legislation have absolutely nothing to do with at all. And I believe that we should wait for technology to fix it and not try to amend the law now, because it *might* do more harm than good now.

MUNDAY

Absolute heresy.

PRICE

That's a heresy? It is a political instinct.

MUNDAY

The law doesn't work. There are too many late abortions and the majority of late abortions are caused by delays in the system dependent on needing two doctors' opinions. That has always been a problem and it always will be. The law does not work well for women.

**MARY-CLAIRE
MARTIN**

Thank you all very much, it was very moving. I should start by saying my grandmother, who was a single parent with four children who was also a doctor, had an illegal abortion in the 1940s and she

William Wilberforce (1759-1833) politician and anti-slavery activist. MP, 1780-1825.

Television programme.

would have been completely ruined if she hadn't been able to have it. I want to make an historical point about pressure group politics, which is that I don't think it is widely known that the abolition of the slave trade started off with a group very like yourselves in the 1770s, of Quakers who wrote to every Lord Lieutenant and everybody they could think of, even though they themselves didn't have civil rights, before William Wilberforce* took it up as a parliamentary issue. Another issue, about media, is that I distinctly remember sometime between 1966 and 1969 there was an episode of *Dr Finlay's Casebook** which took up the moral issue of the doctor, whether he performed an abortion on a woman who had been raped. It would be very interesting to know the exact date, whether it was before or after the Bill.

MUNDAY

It was before. I still do some talking in schools and I always say it was the things we couldn't control, but took advantage of, and I reckon that issue of *Dr Finlay's Casebook* moved the campaign on three years for us without us doing anything. It raised the issue in a way we were not able to, you are right.

COSSEY

Ken Loach, film director.

Up The Junction. A novel by Nell Dunn (1963) which was subsequently made into a film in 1965.

Ken Loach* also featured abortion in the film of the book *Up the Junction*.* I was very impressed by his thoroughness and concern because he came in person to collect briefing from ALRA and took away a complete set of our literature.

GREGG McClymont

Did any of the MPs opposed to abortion reform have arguments other than religious, especially Catholic arguments? Were there any other arguments?

PRICE

Dame Jill Knight (Baroness Knight of Collingtree), Conservative politician.

Shirley Williams (Baroness Williams of Crosby), Labour and then SDP politician, who is a practising Roman Catholic.

The most telling argument in the report stage in the House of Commons was Jill Knight's* confession that she had had two miscarriages. Jill Knight was a fellow Birmingham MP of mine, although in the other party, but she was a rather typical Tory MP. She got up and described what it was like to have a miscarriage and the one point in the whole passage of the Bill where Roy Jenkins almost mistook the House of Commons was when he got up immediately afterwards and was very patronising to her. He lost the House for a very short period and then he got it back again. But mostly it was people like Shirley Williams,* who were on a three-line whip from the archbishop.

MUNDAY

Can I say that very early on the anti-choice campaigners and parliamentarians recognised that their moral and religious arguments were not acceptable to the majority of MPs or voters. So they constantly changed their ground: this time they claimed that abortion was a dangerous operation (as already mentioned) which posed great risks to women and therefore that by opposing legal abortion they were doing women a good turn and saving them from harm.

Later, when statistics clearly showed that abortion in the hands of the medical profession was very safe and posed no threat to women, the opponents of a liberal abortion law moved their ground again by claiming there were adverse mental effects and psychological harm was done that often did not show up until many years later. A characteristic of the debate over the past 40 years has been of anti-abortion campaigners continually shifting their arguments as their current ones were disproved or rejected.

**CAROLINE
WOODROFFE**

I am enjoying this enormously, but two bits of the record I want to set straight. One is the question whether the Birth Control Campaign hesitated to say we were working for the rights of women. I was involved in the Birth Control Campaign from the beginning and I never hesitated to say this. The other is the contribution from Brook Advisory Centres, of which I was the Director, which I think was considerable, in that we slid quite easily into incorporating pregnancy testing and referral for abortion into our services, which continued to be paid for by the NHS under contracts. We simply included referral for abortion in with our service.

WENDY SAVAGE

The London Hospital, a teaching hospital in East London.

A general teaching hospital in a working class district of London.

I have been Press Officer for Doctors for a Woman's Choice on Abortion for longer than I care to mention, but I missed all this in the 1960s because I was out of the country between 1962 and 1969. But it was my experience in Africa, seeing women die from self-induced abortions, that made me realise what a problem it was. Because as David Paintin says, as a student you never saw these things, we never saw women with spontaneous miscarriages at the London,* because they all went up to Mile End.* I worked in the Receiving Room [A&E these days] for nine months and I only once saw a woman who came in bleeding, and that was because the ambulance drivers thought they wouldn't make it to Mile End. She was a woman who had put potassium permanganate into the vagina, which was a terrible, useless way of procuring an abortion, but it gave bleeding so some unscrupulous people used to give this to women who were desperate to terminate their pregnancies. And that is the only time I saw a woman in all my training who was having an illegal abortion.

But I would just like to say I have always been interested in the fantastic book that Madeleine Simms and Keith Hindell wrote, *Abortion Law Reformed*, with the historical things they put in about the way that the feminists got contraception through the Labour Party and all those sorts of things, and the fact that in 1935 the British Medical Association had set up a committee to look at abortion because of the high rate of maternal mortality, which had not changed for over a hundred years. And illegal abortion was a major factor, because the birth rate had fallen during the Depression to its lowest level ever, without any useful contraception around except for barrier methods with no spermicidal creams and things. The BMA then, in 1936 or whenever they produced their report, said

that the law should be changed and they said they thought there *should* be a social clause, but this was something that the whole country should discuss and not just the medical profession. That is such a forward-looking thing compared with the way they behaved in the middle 1960s, so I just thought I would like to throw that in.

SIMONE ASPIS

I am a disabled activist. I am all for a woman's right to choose to have an abortion or not to have an abortion, and I want to ask you, in the 1960s, did any of you consult with disabled people whether they wanted not to exist simply on the grounds of being disabled and what consultation has been done with disabled people in deciding whether they should have the right to exist? Again, I will say, the 1967 Abortion Act was progressive in a woman's right to have a termination, but I think there needs to be a distinction between is it a woman's right to pick and choose the type of baby that she gives birth to as well.

SIMMS

I think the answer to that is we didn't consult anybody and that if you believe in a woman's right to choose, then this must be one of the aspects that it is the woman's right to choose about.

ASPIS

Including gender, and ethnicity?

SIMMS

Personally I think so, because I don't see that this is a problem, once you have agreed the principle that women do have the right to choose and to decide what kind of degree of burden, maybe, they can bear in the long term in the family. And that is a decision you can't make for other people, people have got to make it for themselves.

I wonder if I could just make a general announcement about the Douglas Houghton papers, because I think there are a number of historians here and it occurred to me that you have heard an awful lot said about Lady Houghton and about Douglas Houghton, who was a major Labour politician and chairman of the Parliamentary Labour Party. All his papers are now in the Labour Party archive at the Rylands Library in Manchester. His widow, who is in her mid-eighties and nearly blind and living in a residential home in Hove, is enormously lively and has a wonderful memory and she is terribly keen for somebody to write about him and his interesting career. He died at the age of 98, a few years ago, and a tremendous sweep of social history is encompassed. He started a radio programme, *Can I Help You?*, which he ran for years, and that was because very few people had paid income tax before the war, and when the soldiers all came back all of a sudden there were lots of people who wanted to know about tax and who were actually being taxed. That started it, but he went on to cover a whole range of social issues. So if anyone is interested in this or has a research student who is doing a PhD who might be interested, please do get in touch with either Dilys or myself.

COSSEY

We have written a pamphlet summarising Douglas's life. He was a person concerned about many humanitarian issues, and in the end a fantastic human being. It is individuals like Douglas who really merit examination for the breadth of his vision and his concern, particularly as his life effectively spanned the whole of the twentieth century.

THANE

Vera sounds pretty interesting too!

COSSEY

Yes. She thinks that there is not enough fire in the belly nowadays!

THANE

I think it has been absolutely fascinating and thanks to everybody.

Appendices

I

Medical Termination of Pregnancy Bill 1966 [excerpt only]

1. - (1) Subject to the provisions of this section, a person shall not be guilty of an offence under the law relating to abortion when a pregnancy is terminated by a registered medical practitioner if that practitioner and another registered medical practitioner are of the opinion, formed in good faith –

(a) that the continuance of the pregnancy would involve serious risk to the life or of grave injury to the health, whether physical or mental, of the pregnant woman whether before, at or after the birth of the child; or

(b) that there is a substantial risk that if the child were born it would suffer from such physical or mental abnormalities as to be seriously handicapped; or

(c) that the pregnant woman's capacity as a mother will be severely overstrained by the care of a child or of another child as the case may be; or

(d) that the pregnant woman is a defective or became pregnant while under the age of sixteen or became pregnant as a result of rape.'

II

Abortion Act 1967 [excerpt only]

1. - (I) Subject to the provisions of this section, a person shall not be guilty of an offence under the law relating to abortion when a pregnancy is terminated by a registered medical practitioner if two registered medical practitioners are of the opinion, formed in good faith –

(a) that the continuance of the pregnancy would involve risk to the life of the pregnant woman, or of injury to the physical or mental health of the pregnant woman or any existing children of her family, greater than if the pregnancy were terminated; or

(b) that there is a substantial risk that if the child were born it would suffer from such physical or mental abnormalities as to be seriously handicapped.

In determining whether the continuance of a pregnancy would involve such risk of injury to health as is mentioned in paragraph (a) of subsection (I) of this section, account may be taken of the pregnant woman's actual or reasonably foreseeable environment.'