

# BMA meeting: Provide women with access to non-directive independent abortion counselling, say doctors

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Women considering an abortion should all have access to non-directive counselling by an organisation independent of the abortion provider, doctors at the BMA's annual representative meeting in Bournemouth have agreed.

Proposer of the motion Mark Pickering emphasised that independent counselling should be optional and would provide women with "a safe space" to consider and talk through their options, and that the motion was not "a pro-life stitch up."

"I want to reassure those who are worried that this motion might be about obstructing access to abortion by the back door, it is not. It's designed quite simply to increase choice for women," he said. "I'm not talking about enforced counselling or any kind of cooling off period, I'm simply asking that any woman should know that if she wishes she can get counselling."

Pickering, who is a member of the Christian Medical Fellowship, suggested that GPs who refer women for an abortion and organisations that provide abortions—independent, private and charitable—should all be obliged to inform their patients of the availability of independent counselling, although the women themselves would be free to choose whether to take it up or not. NHS counsellors such as those in general practices, groups like BPAS, and Christian groups such as members of the CareConfidential network could all potentially provide such counselling.

London obstetrician and gynaecologist Wendy Savage argued however that insisting on independent abortion counselling is an "insult" to medical professionals and that many independent organisations are biased in favour denying a woman an abortion. "[Seeking independent counselling] may also increase the risk of the woman delaying an abortion, and we all know that the longer the pregnancy goes on, the higher the risks are, even though these risks are small," she said.

Tony Calland, the chairman of the BMA ethics committee, said the wording of the motion was unfortunate in that it referred to counselling that was independent of the abortion provider. He said that the NHS provided abortions, but it was not being argued that the NHS should not also provide counselling. For that reason, the part of the motion insisting that women considering abortion should be able to access counselling that is independent of the abortion provider was passed as a reference and will not become official BMA policy.

Last year Conservative MP Nadine Dorries moved an amendment to the Health and Social Care Bill that would mean counselling for women considering an abortion could only be provided by independent agencies and not by abortion providers such as Marie Stopes or the British Pregnancy Advisory Service that have a financial interest in carrying out terminations.<sup>1</sup>

The amendment was defeated in the House of Commons over concerns that charities might lose their role in providing counselling and that the move would risk delaying abortions. However, MPs are currently considering opening up abortion counselling to independent organisations including anti-abortion groups.<sup>2</sup>

Delegates at the BMA conference also "deplored" picketing and intimidation around abortion services and urged the BMA to work with the Department of Health to develop standards for the quality of abortion counselling.

1 Hawkes N. Attempt to strip abortion providers of counselling role is defeated. *BMJ* 2011;343:d5743.

2 Quinn B, Taylor M. MPs consider plan to give anti-abortion groups role in pregnancy counselling. *Guardian* 24 February 2012. [www.guardian.co.uk/world/2012/feb/24/anti-abortion-pregnancy-counselling-mps](http://www.guardian.co.uk/world/2012/feb/24/anti-abortion-pregnancy-counselling-mps).

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