

**SPUC Submission to BCAP Consultation on
Post-Conception Advice Services**

The Society for the Protection of Unborn Children (SPUC) would like to add the following comments to [our submission](#) to the previous BCAP consultation. For reasons we will explain, we are opposed to all four proposed changes to the BCAP Broadcast Advertising Code.

Proposals 1 and 2 - Expansion of permission to advertise

Allowing commercial, abortion-providing/referring Post Conception Advisory Services (PCAS) to advertise on television immediately treats abortion 'services' as if they were like any other service. Allowing advertisements for organisations whose aim and primary function is providing abortions is equivalent to allowing advertising for abortion itself. The BCAP document tells us (p.11) that "BCAP does not assume a moral standpoint on the termination of pregnancy". It goes on "Those services that provide terminations are not for BCAP to comment on, nor are the circumstances in which women use such services." Yet to decide, in the face of much opposition, to widen the allowance for abortion advertisers is precisely to act in accord with a particular view as to what the moral and social value of abortion is – in this case a choice-worthy act which can well be provided for by commercial outfits competing in the marketplace.

This move will increase the number of abortion providers able to advertise abortion services. Abortion has never been regarded as simply 'another service' – indeed as a purportedly 'medical' service performed almost entirely on social grounds, it occupies a rare position in our society. There are many reasons why the advertising of abortion and related services will be socially harmful, not least that it has the effect of normalising the treatment of children as wanted or unwanted products.

Adverts affect people, perhaps especially women who find themselves unexpectedly pregnant. PCAS such as Marie Stopes and BPAS operate on the assumption that there are unwanted babies, the solution to which can be abortion. Pregnant women, who may well be under pressure to abort from a boyfriend, spouse, family member or from friends, will be exposed to the further message, from commercially interested organisations, that 'help' is available. These organisations offer no practical help to women who wish to keep their babies, yet nowhere does this have to be mentioned. There is no evidence produced that there is any public support for allowing wider advertising by commercial PCAS and a number of surveys show deep and widespread unease among the population over the present abortion laws, let alone the promotion of abortion by organisations such as BPAS that actively support further extreme liberalisation of those laws.

Women who have had abortions and have been damaged by them are nowhere seriously addressed in the consultation yet they will be among those most affected by the changes in the code and will be deeply dismayed to see abortion and related services treated as any other commercial product. For those who refused pressure to have abortions (for example, those who gave birth to babies with, say, Down Syndrome) the message will go out implicitly that their choice could have been otherwise and that they or others might have been better off if these children had been aborted.

There is evidence that risks of serious effects of abortion, both psychological and physical, are not adequately described by organisations with commercial interests in abortion. Broadcast advertising will provide even less information of a sort which may affect revenue for such providers. An obvious contradiction exists, and, given the present near non-existence of detailed information currently offered by state-approved abortion providers, there is no reason to think that this will be resolved by BCAP

proposal 2. The change in proposal 2 will not be of benefit to prolife organisations, but will, in practice, allow for increased scope for commercial providers to advertise.

Proposal 3 - Requirement for 'suitable credentials' on the part of those wishing to advertise.

Those groups which refuse to refer for abortion and which offer practical assistance to pregnant women who want to keep their babies are highly unlikely to qualify as having 'suitable credentials'. Already they are very seldom referred to by GPs faced with women in distress over their pregnancies and they might well, by the very fact that they refuse to be involved in the abortion process, be deemed not to have the right credentials, regardless of how professional they are.

This new proposal does not benefit them, even if they could afford to advertise (they do not receive the kind of state support given to abortion providers nor are they commercial ventures). Meanwhile, the commercial outfits displaying 'suitable credentials' will have further increased dominance through advertising, which will be partly paid for, indirectly, by the taxpayer via NHS contracts. In short, this proposal, in practice, benefits only abortion providers. Already Marie Stopes has advertised on television (on a questionable interpretation of the existing code) and BCAP describes the advert on p.13 of the consultation document as one which constituted merely as "the alleged advertising of abortion even though the advertisement made no mention of terminations". Apparently an advert aimed directly at women who believe they are pregnant on the part of an organisation whose main purpose is to 'end pregnancies' is not advertising abortion. This statement raises issues of impartiality which need to be addressed before important consultations such as this present one are acted upon.

Proposal 4 - Requirement that services must state if they do not refer for abortion.

This requirement singles out, as in some way especially noteworthy, those organisations which are not directly or indirectly part of the abortion industry. The assumption is that abortion is so normal a procedure that those groups wishing to assist women in bringing their babies to term are required to warn women explicitly that they will not 'assist' them in doing the very reverse. Such a requirement would not be made of other counsellors (for example, those aiming to dissuade people from going to an assisted suicide clinic). Moreover, such a 'warning' may deter those most in need of practical help and whom the counsellors in question sincerely believe are not well served by abortion.

Abortion providers, in contrast, are not required to inform women that they offer no serious practical help for those who might wish to have their babies, and who might reasonably expect to receive such help from those offering pregnancy advice.

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