
Ealing Council consultation on Mattock Lane Safe Zone (PSPO)

Evidence submission from MSI Reproductive Choices UK

Contents

- 1. About us**
- 2. Summary of MSI Reproductive Choices UK's position**
- 3. Our evidence**
 - 3i. Overview
 - 3ii. Impact of not renewing the PSPO
 - 3iii. Client experiences
 - 3iv. Team member experiences
 - 3v. Equalities and targeted discriminatory harassment
 - 3vi. Pro-choice activity outside the clinics
 - 3vii. Consideration of alternative solutions
 - 3viii. Freedom of speech, protest, and expression
- 4. Conclusion**
- 5. Appendix - attached (2018 evidence submission in full)**

1. About us

MSI Reproductive Choices (formerly Marie Stopes International) is a global organisation with nearly 11,000 team members working in 37 countries to deliver reproductive health services.

We are one of the world's largest providers of high quality, affordable contraception, and safe abortion services. MSI Reproductive Choices UK provides 30% of all abortions for the NHS in England. We also operate a 24-hour contact centre, One Call, where clients can



make enquiries, book consultations, counselling, and abortion care appointments, and speak to a nurse for aftercare advice.

2. Summary of MSI Reproductive Choices UK's position

- MSI Reproductive Choices UK strongly recommends the renewal of the Public Service Protection Order (PSPO) on Mattock Lane for the full three years.
- The PSPO has been effective. Clients are now able to exercise their right to access safe abortion with privacy and dignity.
- However, activity continues nearby (and outside many clinics around the country which do not have PSPOs in place), so we can reasonably expect that anti-abortion activity would resume outside this clinic should the PSPO be removed.
- If the PSPO is removed, we expect the behaviour from anti-choice groups not only to resume, but to escalate.
- The PSPO has been upheld by the High Court and the Court of Appeal, which demonstrates that the PSPO has been successful in balancing the rights of different groups.
- On days with high activity levels, we record an increase in clients deferring or rebooking their appointments for another day. Therefore, this activity outside clinics is not only causing distress; it is having a clinical impact.
- The anti-abortion activity takes various forms, many of which go beyond the remit of peaceful protest and into the remit of targeted discriminatory harassment, which can have a disproportionately negative impact on people who are marginalised on account of one or more protected characteristic.
- Some of the activity perpetuates medical misinformation.
- Involving the police as a solution without a PSPO is not sufficient. Most clients do not want to make a formal complaint, and when police do move the anti-choice groups away from the clinic, these groups simply return at a future date.

3. Our evidence

3i. Overview

Abortion is a common and safe procedure. One in three women in Britain will have an abortion, in accordance with their legal rights as per the 1967 Abortion Act.



Before the Mattock Lane Safe Zone was in place, there was routine harassment of those entering the clinic. It appeared to be particularly targeted at women. For example, there was usually not a presence during the days on which our clinics ran only vasectomy appointments

The anti-choice activity took many forms. Examples include, but are not limited to:

- Shouting at clients and team members, including very emotive, aggressive language such as “find another job,” “murderer” and “baby-killer”
- Calling clients “mummy” or “mum” when they enter or leave the clinic
- Disseminating medical misinformation, mainly verbally
- Following clients and team members up the street
- Displaying religious images or handing out pink and blue rosaries
- Barricading the door, trying to stop clients and team members entering
- Salting the floor (to ‘cleanse’), spraying holy water, or throwing red liquid
- Offering to give money, food or shelter to clients if they agree not to have an abortion
- Spitting
- Praying and singing
- Staring in an unnerving or intimidating manner
- Taking photos or filming
- Using visual aids such as plastic foetus models.

(See appendix for detailed examples and testimonies.)

3ii. Impact of not renewing the PSPO

Although the PSPO has been effective in keeping the activity away from our clinic entrance, the presence has not disappeared. There has been a continued presence outside the safe zone, and one anti-abortion group arranged a vigil-style demonstration outside Ealing



Council's own offices. This suggests that if the PSPO is not renewed, the activity will resume very quickly.

In the five years prior to the 2018 consultation on introducing the PSPO, the activity from anti-choice groups was already escalating in size and in behaviour. Outside other clinics across the country, this escalation continues.

This leads us to conclude that if the Ealing PSPO was removed, we could expect the activity outside this clinic not only to resume, but to escalate in severity and frequency. Activity has been escalating since 2013 and we have no reason to imagine that Ealing would be an exception.

In addition, anti-choice groups may interpret the removal of the PSPO as a vindication of their behaviour. As a result, there could be a resurgence of activity outside other clinics as well as in Ealing.

3iii. Client experiences

At the request of the police, prior to the introduction of the PSPO, MSI Reproductive Choices UK maintained an informal log of harassment experienced by our clients and those who attend clinic with them.

Harm, distress, intimidation, and trauma

Below are examples that show how this activity outside the clinic is harmful, distressing, intimidating and traumatic for people entering and leaving the building, to the extent that it can make them feel too intimidated to leave the building.

On 10/11/17 one client wrote in the West London log: *"I feel very traumatised seeing photos of babies and embryos outside of this clinic. The lady outside will not remove the photos and would not listen to my complaint. If there is any way you can remove these people / group from standing outside please make it happen. This is unacceptable and wrong."*

On the same day a companion of a client wrote: *"Would like to complain with regards to protestors outside of Marie Stopes Ealing was made to feel very uncomfortable upon entering clinic and handed rosemary [sic] beads and leaflets which I feel is not appropriate and upset my daughter no end."*

A record was made to note that: *"Client + accompanying friend feeling intimidated by number of protestors approaching them – both felt scared and uncomfortable walking past."*

Another record reads: *"Client came to front desk asking if the lady was still outside. Offered to escort the client outside, which she accepted. Client said she found them unnerving and asked how to contact police. I have signposted her to council complaints department. 3 protestors outside @12:23"*

Examples from the West London Centre log include clients telling the protestors that they do not wish to talk to them, and the protestors continuing with harassing behaviour: *"I attended the clinic today for an abortion. The man and lady outside made me feel very uncomfortable."*

He kept trying to speak to me (at least 7 times) despite me telling him to leave me otherwise I would call the police. I feel that they should not be allowed to approach vulnerable women or even young girls who are going through a rough time.”

Clients are also grabbed, as reported in one log: “Client grabbed on arm by protestors to stop them entering – described as aggressive. ‘You’re not allowed in’.”

An internal logged record reads: “10/10/2017 - Client stopped by protestor, client does not speak English. Protestor rang someone on mobile who spoke the same language as client and asked client to come away from clinic and to come for a coffee with them to discuss options. Man who was walking past saw client visibly distressed and brought her in. Our translator told scanner the story.”

Another internal record reads: “02/08/2017 - The client was grabbed by the protestors outside upon arrival to the centre and was told she cannot go in. The translator stated that it was harassment when she was being arrived at reception and the client was explaining herself. The client was asked if she was alright, the issue was escalated to the Operations Manager immediately and the police have been called to deal with the situation. The client has spoken to police and made her allegation to them.”

A further incident is described as follows: *On the way out of the building the protestors (tall man, wearing glasses) shoved a leaflet in the client’s boyfriend’s face and the client’s boyfriend replied “not now, have some respect”. The client and her partner left the premises. A Datix has been raised as this is the second occasion recently that the protestors have been invasive and behaved in an inappropriate manner to clients.”*

Clinical impact

In our 2018 evidence submission, we noted that when there is a large presence outside the clinic, we record an increase in clients who do not attend clinic that day, and instead rebook their appointments for a later date. Our internal incident reporting system has shown us that clients do rebook appointments to avoid the anti-choice groups. This delays their treatment, forcing them to undergo treatment at a higher gestation, which reduces their treatment choices, and although every abortion we provide is safe, the earlier the gestation, the safer the abortion will be.

In addition to causing distress, therefore, this anti-choice activity was having a clinical impact, and would do so again if the PSPO is not renewed.

Testimony from clients about the impact on their access is below, as recorded on our internal system:

“25/03/2017 - Client called in to One Call to tell them that she wanted to cancel her appointment because of the protestors standing outside of the clinic. She will call in again for another appointment at a different date. Attempted to call client in order to offer her support or an escort into the clinic - did not reply.”



“23/02/2017 - Client prevented from entering clinic by protestors - witnessed by local resident. Client tried for approximately 15 minutes before walking away, appeared in severe distress. Local police number called for them to come and speak with protestors. Client details unknown, but witness details recorded on this incident.”

“28/02/2018 - Clients reported that protestors are throwing water on clients and on ground around clinic - this is hazardous as conditions are currently freezing. When [front of house] member went to speak to protestors at client request, she was racially abused”.

The activity outside of the Centre also often affects our clients’ partners and companions, as one team member described, “Protesters are cruel at times. Make husbands cry as they are so distraught seeing their wives/partners being harassed and made to feel guilty in their choices.”

Restricting access

We have reports of people (usually women) being sent away from the clinic when asking for directions, and in some cases being intimidated out of accessing the clinic altogether.

3iv. Team member experiences

As well as impacting those who are accessing an abortion, the constant targeted harassment outside a place of work has a long-term impact on the MSI team members working within our clinics.

Please find below a statement from Sally O’Brien, Operations Manager at the Ealing Branch of MSI Reproductive Choices UK. Sally O’Brien has worked for MSI Reproductive Choices UK since May 2016.

“The first thing I came upon as I walked up to my new place of work, was a barrier. There were three people standing at the gate, watching me walk along the road and trying to have eye contact with me. I smiled at them and they smiled back and asked me if I was here for an abortion. I politely said no and walked past them, realising that they were probably against abortion and so I did not wish to engage with them. They tried to push a leaflet in my hand, which I declined.”

“It was not a nice feeling to be stopped in my tracks and asked if I was having an abortion. It made me immediately feel as though I was doing something wrong and I could imagine just how a woman who was having an abortion may feel. I was able to shake this feeling off and continue with my interview, but it continued to resonate with me, that there would be women, who had come to a very difficult decision in their lives, that were being stopped and questioned just at the point where they were to enter the clinic. I felt very sad for them and determined to try and help put an end to the harassment that they were receiving.”



“Once I had been within the clinic for a few weeks, it was obvious with my daily entrance that I was employed by the clinic and so the protestors at the gate changed their behaviour towards me. Every day I felt as though I was running a gauntlet, trying not to reach eye contact with these people who would look at me with disdain and make comments under their breath as I walked past. On one occasion a woman was sprinkling salt across the pavement and threw it in my direction as I walked up to the clinic. I did not understand what she was doing throwing salt everywhere; I came to learn that it was used in religion to purify and so I realised that the sprinkling and throwing of salt was to suggest that I was evil or unclean. This was not a nice feeling, to realise that in some way I was being judged for my choice of employment. That my mission to help women in their time of need was considered unclean was distressing for me, but more so I felt the distress for the women who were trying to access the service that I knew must be running the same gauntlet when they came.”

“I met with many women who attended the clinic in distress; I would be told tales of being called a murderer, followed down the street telling them that their babies would haunt them. I witnessed the brother of a rape victim become very distressed that his sister had been stopped and ‘judged’ by them. I have learned of women who have been directed away from the clinic when they have asked the protestors if they are in the right place, in fact I have had a telephone call from a resident who had watched an exchange outside the clinic, where a woman was trying to access the clinic and her way was being barred by the protestors. I was advised by the resident that the exchange had happened for around 15 minutes and eventually the woman had left the area, obviously crying and in distress.”

“On Saturdays there would be counter protestors outside the clinic. Sister Supporter is an organisation who wish also to assist the women accessing the services and they would come, en masse, to stand outside and block the protestors from being able to reach the women as they arrived. Whilst this was a very positive mission that Sister Supporter had, a woman trying to access healthcare and coming across a large assembly outside the gate where she wishes to enter, finds that just as distressing. It highlights even more that there are people who are judging them for their decision and causes just as much distress to have to walk past a large crowd, who are singing and waving banners, as it does to be stopped and questioned about their choice. Sister Supporter are a great organisation who worked very hard to remove the protestors from outside the clinic and were very clear that they would not be outside the clinic if the protestors were not there. They were very respectful when I explained to them that their congregation was just as distressing to the women and they changed how they counter-protested, by instead being silent and ensuring that there was a clear pathway for the women to walk along.”

“Since the PSPO has been in place, there have been very limited numbers of women who are arriving at the clinic in distress. Whereas before almost every woman had a tale to tell and would regularly question why the protestors were allowed to stand outside and harass them, this has now reduced to just the unfortunate few who happen to walk past the area where the protestors are still allowed to stand. It would appear they stop and question everyone who walks past them, as I have had complaints from residents that they continue to approach them, and my own daughter has been stopped as she walked along the street.



Thankfully, because they are away from the main entrance of the clinic and only at one end of the street, we are able to warn women of their existence and they can avoid this area if they wish.”

“Women are now much calmer when they attend, focussed on what they have come to do and able to access the service without fear or harassment.”

“This has never been a question of whether Abortion is right or wrong. I believe everyone is entitled to have an opinion and the right to protest about things we don’t believe in, is a fundamental human right, however, those protests should be in the appropriate space – lobbying decision makers and making representation to the people who create the services, rather than harassing and judging the people who come to use the service that is there. Every human being should be able to access healthcare without fear or harassment.”

“I believe that if the PSPO were to be cancelled, this would be a green light to the protestors to not only continue their harassment, but may also cause them to escalate their behaviour, possibly taking away the women’s rights to free access to our services, by barring their way into the clinic, forcing them away from the area and haranguing them into changing their already considered decision.”

3v. Equalities and targeted discriminatory harassment

Women entering the premises were overwhelmingly targeted by the anti-choice groups, as they were presumed to be accessing abortion care at the clinic. In some instances, women and girls have been harassed outside MSI Reproductive Choices UK premises despite attending for another type of healthcare.

Note that many people seeking abortion are vulnerable. Many have experienced sexual assault, rape, or domestic abuse. This clinic provides abortion up to the legal limit of 24 weeks, and as such, receives clients from around the country who need a later stage abortion. Abortion in the later stages is more likely to be for complex or traumatic reasons, such as rape, child sexual assault, and domestic abuse. This means the clients accessing these premises are disproportionately likely to have experienced trauma.

The judgmental, aggressive behaviour we see outside clinics could be distressing for anyone, but it is especially so for those who have already experienced trauma. For example, it can be a trigger for Post-Traumatic Stress Disorder for people who have been raped or abused. When the anti-choice groups take photographs and threaten to share them, they could be creating a very serious danger for anyone escaping an abusive household or at risk of violent repercussions from their family or partner.

This harassment can be disproportionately harmful to many people who are marginalised on account of a protected characteristic, especially sex, disability, race, religion, and age.



For example, for someone very young and/or at risk of so-called 'honour violence' the impact of these behaviours may be greater. And, as stated above under section 3v ('clinical impact'), one front of house team member was racially abused by the anti-choice groups when attempting to speak to them at the request of a client.

3vi. Pro-choice activity outside the clinics

There are at least five anti-abortion groups that have targeted our clinic in Ealing (Good Counsel Network, the Friday Group, Ealing Pro-Life Group, 40 Days for Life, God's Precious Helpers). As far as we are aware, there is only one pro-choice group (Sister Supporter).

Although the pro-choice groups gather with the intention of supporting those accessing the clinic and shielding their privacy, which is done in response to the anti-choice activity, it is our experience that any activity, regardless of intention can have a negative impact on clients.

The PSPO is not about restricting anti-choice groups' activity on the grounds of personal belief; it applies equally to pro-choice groups.

3vii. Consideration of alternative solutions

While MSI Reproductive Choices UK backs national legislation to protect clients and team members, this is not expected within the foreseeable future.

Removing the PSPO and leaving the issue in the hands of the police is not an effective solution. While we do work with the police, they are limited in the action they can take, mainly because most clients experiencing harassment do not wish to make a formal complaint or press charges. Concern about privacy and confidentiality is a common reason given for this reluctance. Some of our most vulnerable clients may also wish to avoid police involvement in their lives on account of their perceived migration status or their engagement in sex work, which even if not illegal can lead to caution about sharing personal information with the police.

When the police do ask the anti-choice groups to move, the activity only moves a very small distance away, and returns at a future date.

Police resources are finite, and when limited in how much they can realistically help, police involvement on a case-by-case basis does not seem to be an effective use of police time. Often by the time the police arrive the situation has de-escalated, or the protestors have left.

As per our 2018 evidence submission, Centre Manager Sally O'Brien said:

"Police will always come when called, but then their hands are tied. There is no specific law that deals with group harassment - public order laws require a police officer to witness the offence and then to request a stop in behaviour before they have any powers. They cannot



deal with harassment in retrospect and our clients are often too distressed to get involved in such matters and make statements etc. You can't have a crime without a victim, so police again are tied. It is not their fault, they sympathise, but they are bound by the laws that they police with."

"I am aware that there is nothing they [police] can actually do and it doesn't seem appropriate to pull police officers away from dealing with things that they actually can deal with. I made an agreement with police to keep a book of events and to only call them if I had a particular client who wished for police to be called and involved in the situation - hence the creation of the protest log at our clinic."

In 2018 a representative from Good Counsel Network told the Home Affairs Select Committee that they would reject any compromise that would move them away from the clinic entrance or prohibit them from directly approaching clients.

3viii. Freedom of speech, protest, and expression

As a pro-choice, progressive organisation, MSI Reproductive Choices UK fiercely supports freedom of expression, and the right to protest, even for those we disagree with.

We believe that given the behaviours described above and the stated goals of some anti-choice groups involved, this activity falls into the category of targeted discriminatory harassment, not legitimate protest.

When challenged through the courts, the PSPO has been upheld, both by the High Court and the Court of Appeal, in part because it successfully balanced the freedoms of different groups.

Based on their own comments, the goal of some anti-choice groups who attend our clinics is not to simply express personal views. They seek to actively "counsel" or pressure clients out of having an abortion. Before the PSPO was introduced, anti-choice groups usually had one person acting as a "pavement counsellor" to stand by the gate or door of the clinic, with the clear goal of preventing clients from entering. There was usually a larger group a little further away, praying and sometimes singing. A separate group, known as the Friday Group, routinely had four or five individuals standing beside the gate.

As mentioned above, in 2018 a representative from Good Counsel Network told the Home Affairs Select Committee that because their purpose is to individually "counsel" every client who approaches the clinic (regardless of whether the clients want to be "counselled" or not) they would reject any compromise that would move them away from the clinic entrance, or prohibit them from directly approaching clients. If the Good Counsel Network's explicit intention to intercept clients on their way into the clinic, this indicates that these anti-choice groups move beyond expressing their own freedoms, and into encroachment upon other people's rights.



We would also note that people are still able to protest abortion in many ways, in many spaces, through many channels, including within the nearby designated area. Anyone who is pregnant and considering their options can seek out anti-abortion opinions online or in person very easily. As a pro-choice organisation, we believe people should be able to make the choice that is right for them at the time. Sometimes that will be a decision not to have an abortion. But that decision should be made based on accurate information and support, not out of fear, or as a response to untruths.

At the point where the client is attending our clinic, they have usually made their decision. This is not the place for “debating” their choice with strangers, and indeed, the goal of the anti-choice groups is not to debate ideas, but rather, to intimidate or bully people (usually women and girls) out of the decision that is right for them.

4. Conclusion

MSI Reproductive Choices UK strongly recommends the renewal of the Public Service Protection Order (PSPO) on Mattock Lane for the full three years.

If the PSPO is not renewed, we believe the anti-abortion activity described above will resume, and escalate, as has been happening in other parts of the country.

This activity (which we consider to be targeted discriminatory harassment) causes distress for clients, staff, and residents. Our evidence and client experiences suggest it disproportionately impacts groups marginalised on account of a characteristic protected under the Equalities Act.

The activity also has a clinical impact. It perpetuates medical misinformation and causes some clients to reschedule their appointments for a later date to avoid the anti-choice groups.

Alternative solutions have been explored and are either not feasible or not forthcoming in the foreseeable future.

The right to access medical care, including abortion, in privacy and with dignity is a fundamental one, and the PSPO has been effective in securing that right.