The parliamentary scene

Pressure on parliamentarians

The effects of pressure groups on the business of the House of Commons have been strikingly apparent in the early months of this year. Two medical topics have dominated MPs' attention: abortion and whooping cough vaccine.

The Abortion (Amendment) Bill

The Abortion (Amendment) Bill introduced by Mr William Benyon, the Conservative member for Buckingham, was based on the recommendations of the Select Committee set up in 1975 to consider earlier amendment proposals drafted by the Glasgow MP, Mr James White.

Mr Benyon claimed that his Bill was intended to remedy abuses in the way that the abortion law was being operated and that there was widespread support for his proposals in and out of Parliament. Clause 1 set an upper limit of 20 weeks' gestation for termination of pregnancy; clause 2 required that at least one of the two doctors recommending abortion must have been registered for at least five years and that neither should be associated or able to obtain financial benefit from the clinic or nursing home carrying out the abortion; clause 3 required the person terminating the pregnancy to inform the woman's general practitioner; clause 4 dealt with penalties; clause 5 dealt with conscientious objection by doctors and nurses; and clauses 6 and 7 gave the Secretary of State powers to license and regulate pregnancy advisory bureaux, referral agencies and clinics. Clauses 8 and 9 dealt with prosecutions.

Mr David Steel, who had been responsible for piloting the Abortion Act 1967 through Parliament, had no doubt about the intentions behind the Amendment Bill. The pressure groups that were bombarding members with letter and leaflets in support of the Bill had one objective: to stop abortion. 'Let us not pretend that the purpose of the Bill is to tidy up the administration of the Act', said Mr Steel in the second reading debate. 'The purpose of the steam behind the Bill is to stop abortion.'

In fact, as Sir Bernard Braine recognized, the fundamental point dividing MPs was that some believed that women should be able to choose whether to continue or to terminate pregnancy and

others argued that Parliament had never intended to legislate for abortion on demand. Clearly many MPs were also disturbed by the 'prospect of financial gain for those authorising and performing abortions'.

Despite the opposition of the Department of Health, the British Medical Association, and many prominent gynaecologists, the Bill was given second reading by 170 votes to 132 and referred to a committee of the whole house for its next stage. The Department of Health agreed to provide expert assistance during the committee stage, but whether or not the Bill ever reaches the statute book will still depend on whether the Government is prepared to find the necessary parliamentary time for it.

Whooping cough vaccine

The Department of Health also found itself under repeated pressure from a campaign by the Labour MP, Mr Jack Ashley, about whooping cough vaccine. Mr Ashley believes that there are large numbers of children with permanent brain damage from adverse reactions to vaccination against whooping cough and he has been pressing for compensation for these children and for an independent inquiry into the value and safety of the vaccine. The Department has repeatedly refused both requests: any question of compensation must, it argues, wait for the report of Lord Pearson's Commission on Civil Liability and Compensation, while its advice from the expert committee on vaccination and immunization is that the vaccine confers valuable immunity and that adverse reactions to it are much less frequent than Mr Ashley believes.

The campaign, supported by several newspapers and given wide publicity on television and radio, has been running ever since the publication in 1973 in a specialist paediatric journal of a description of brain-damaged children. In consequence there has been a sharp drop in the numbers of children being vaccinated against polio, diphtheria and tetanus as well as against whooping cough, so that there is now a real possibility of major epidemics of these diseases. The campaigners accept no blame for this loss in confidence: Mr Ashley claims, indeed, that 'the whole immunization programme is being jeopardized by the refusal of the Secretary of State to respond to grave public disquiet about compensation for vaccine-damaged children and the conflict

of medical experts about the whooping cough vaccine'. Mr Ashley and his supporters might be justified in their noisy campaign if in fact the vaccine is as dangerous and ineffective as they claim; but they will carry a heavy weight of responsibility for the loss of public confidence in vaccination if – as the experts have advised the Government – the vaccine does give useful protection and most cases of alleged brain damage are due to other causes.

Defects of pressure-group democracy

Both issues have claimed parliamentary time and public attention because of determined efforts by pressure groups, and the disturbing aspect of these campaigns is the polarization of attitudes that they induce. No pressure group presents the merits of the compromise, middle-of-the-road view. On abortion, Professor Richard Beard probably spoke for many gynaecologists recently in arguing that a woman should be able to decide whether or not to have an abortion once she has had adequate counsel-

ling, a very different concept from abortion on demand. Yet MPs and others find themselves compelled either to accept or reject an extremist package. Pressure-group democracy also has a great defect in the way it ignores issues that lack emotional appeal. Road traffic accidents are now the most important single cause of death and serious invalidism in early adult life. Each year there are over 7000 deaths and many thousands of young men (and rather fewer women) are left with permanent brain damage or condemned to a wheelchair existence. In comparison brain damage from vaccination – at even Mr Ashley's pessimistic estimate – is a rarity. Yet we know that both the mortality and the crippling effects of road accidents could be cut substantially by legislation to make the use of seat belts compulsory – the annual saving of deaths and serious injuries has been estimated at 13 000. Parliament rejected that legislation last session and seems to have no interest in reintroducing the Bill: for there is no angry clamour from a pressure group, only sober statistics.

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