

CONFIDENTIAL FILE NO.

Prime Minister meeting with
Mother Teresa.

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2007

PRIME MINISTER

April 1988

Referred to	Date	Referred to	Date	Referred to	Date	Referred to	Date
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7.9.90							
10.9.90							
13.5.91							
<u>series closed</u>							

PREM 19 / 3482



Dominic Morris Esq
Private Secretary
10 Downing Street

Richmond House
79 Whitehall
London SW1A 2NS
Telephone 071 210 3000
*From the Secretary of
State for Health*

Dear Dominic,

23 May 1991

GRANT TO THE MISSIONARIES OF CHARITY

Thank you for your letter of ~~13~~ May which accurately records the background to this long standing commitment.

All our enquires have been through the Archbishop of Westminster's office and the official dealing with the case wrote as recently as 26 April and expects a reply when his contact in the Archbishop's office returns from leave at the end of the month.

A number of negotiations for the purchase of a house on behalf of the Missionaries of Charity have fallen through. The latest information we have is that they are in discussion with Brent Council about a site in Kilburn. Our contact tells us that there may also be problems of conscience for the order concerning the ownership of property.

The Department regards the £30,000 promised as a continuing commitment although I have to say that the re-allocation of these funds, year on year, is causing us some administrative difficulty. The funds were originally allocated out of the extra funds made available because of the RPI error, but the commitment will now have to be met out of basic resources for grants to the voluntary sector.

Let us hope that Lord Bethell's enquiry may assist a speedy outcome.

Chris Peden

pp. STEPHEN ALCOCK
Principal Private Secretary

The Lord Bethell MEP
73 Sussex Square
London
W2 2SS

Thank you for your letter of 2 May about your meeting with Mother Theresa during your recent visit to Albania.

Following her meeting in 1988 with Mother Theresa, Margaret Thatcher, in correspondence with the Archbishop of Westminster, promised a one-off grant of £30,000 towards the cost of a house which the Missionaries of Charity were seeking to purchase to provide shelter and support for the elderly and infirm among the homeless.

I understand that the Missionaries of Charity have experienced considerable difficulty in securing a suitable property. Consequently the funds, which I can confirm are still available, have not yet been required. Officials at the Department of Health wrote to inquire about the latest position as recently as 26 April.

I hope that this information will reassure you and that the Missionaries of Charity will soon be able to obtain a suitable property.

Pre: Mtas with Mother Teresa,
Arist





File 14/11

10 DOWNING STREET
LONDON SW1A 2AA

From the Private Secretary

13 May 1991

Dear Stephen

I attach a self-explanatory letter from Lord Bethell. The background is that, following the then Prime Minister's meeting with Mother Teresa back in April 1988, advice from your Department was sought on whether a small amount of Government assistance, in the form of a one-off Grant, could be provided for the purchase of a house Mother Teresa's Order was seeking to buy to provide shelter and support for the elderly and infirm among the homeless. Department of Health kindly provided a draft for Mrs. Thatcher to send to Cardinal Hume (copy of final version attached, as is a copy of his reply), since when we appear to have heard nothing. Is there any further intelligence you can add from your end on whether any work resumed (or a different set of premises were being purchased). Is the £30,000 offer still open?

I should be grateful for your advice together with a draft reply that the Prime Minister can send to Lord Bethell, by Thursday, 23 May please.

Yours ever

Dominic

DOMINIC MORRIS

Stephen Alcock, Esq.,
Department of Health

[Handwritten mark]

UNCLASSIFIED
FM CALCUTTA
TO IMMEDIATE FCO LONDON
TELNO 79
OF 100710Z SEPTEMBER 90
AND TO PRIORITY NEW DELHI

RS
Mr. Powell, No 10 Downing St
What can one say?
11/9
cm 10/9

FOR PROTOCOL DEPARTMENT - !

MY TELNO 271 TO NEW DELHI:
MOTHER TERESA, HON OM

THANK YOU FOR THE MESSAGES FROM THE QUEEN AND PRIME
MINISTER. I HAVE HAD TO KEEP THEM ON FILE.

TO THE SURPRISE OF ALL OUTSIDERS, ON 8 SEPTEMBER MOTHER
TERESA WITHDREW HER RESIGNATION AND WAS RE-ELECTED FOR A
FURTHER SIX YEARS. SHE BOWED, SHE SAID, TO 'GOD WILL'.

103 DELEGATES REPRESENTING THE 3,046 NUNS IN THE WORLDWIDE
ORGANISATION WERE IN CONCLAVE FOR FIVE HOURS. IT APPEARS
THAT NO ONE ELSE WAS CONSIDERED WORTHY OF FILLING MOTHER
TERESA'S SHOES WHILE SHE IS STILL ALIVE.

HER INNER COUNCIL OF SIX HAS BEEN REDUCED TO FOUR, AND ONLY
ONE OF THE ORIGINAL SIX RETAINED.

IN THE CIRCUMSTANCES I RECOMMEND THAT REVISED MESSAGES WOULD
NOT BE APPROPRIATE.

FOR NEW DELHI : PLEASE AMEND THE DRAFT LPR SENT IN THE LAST
BAG.

BAILLIE

YYYY

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TO IMMEDIATE CALCUTTA
TELNO 39
OF 071500Z SEPTEMBER 90
INFO PRIORITY NEW DELHI

RETIREMENT OF MOTHER TERESA

1. PLEASE PASS THE FOLLOWING MESSAGE TO MOTHER TERESA FROM THE
PRIME MINISTER. THERE WILL BE NO SIGNED ORIGINAL.

BEGINS

AS YOU HAND OVER CHARGE OF THE MISSIONARIES OF CHARITY, I WANT
YOU TO KNOW HOW MUCH YOUR TIRELESS WORK FOR THE POOR AND
UNWANTED IS ADMIRERD IN BRITAIN. YOUR CONTRIBUTION TO HUMANITY
HAS TOUCHED THE HEARTS OF MILLIONS AND IS AN INSPIRATION TO US
ALL. I AM SURE THAT YOUR SUCCESSORS WILL CONTINUE TO SECURE THE
WONDERFUL RESULTS YOU HAVE ACHIEVED.

WITH VERY BEST WISHES.
ENDS

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YYYY

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MRS SUTHERLAND

ADDITIONAL 6

PAGE 1
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INDIA

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JT

huc

10 DOWNING STREET
LONDON SW1A 2AA

c:/Foreign/Gozney

From the Private Secretary

6 September 1990

7
CF.

RETIREMENT OF MOTHER TERESA

Thank you for your letter of 5 September enclosing a message from the Prime Minister to Mother Teresa. This may issue (though perhaps the last sentence could begin: "I am sure").

CHARLES D POWELL

R. H. T. Gozney, Esq.,
Foreign and Commonwealth Office

H



Foreign and Commonwealth Office

London SW1A 2AH

5 September 1990

Dear Charles,

Retirement of Mother Teresa

Mother Teresa, who celebrated her 80th birthday on 27 August, will relinquish charge of her Missionaries of Charity on 8 September. We understand that the Prime Minister is an admirer of Mother Teresa's work. She may like to send her a message. I enclose a draft. The Palace have told us that The Queen will also wish to send a message.

Mother Teresa is in relatively good health. She will continue to have an influence over the Missionaries of Charity.

Yours ever,

(R H T Gozney)
Private Secretary

C D Powell Esq
10 Downing Street

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TO PRIORITY CALCUTTA
TELNO
OF

RETIREMENT OF MOTHER TERESA

1. Please pass the following message to Mother Teresa from the Prime Minister. There will be no signed original.

BEGINS

As you hand over charge of the Missionaries of Charity, I want you to know how much your tireless work for the poor and unwanted is admired in Britain. Your contribution to humanity has touched the hearts of millions and is an inspiration to us all. I am confident that your successors will continue the wonderful results you have achieved.

With very best wishes.

ENDS

HURD

YYYY

MOBABP

SAD

M J WILLIAMS

R21

Prime Minister ②

ARCHBISHOP'S HOUSE,
WESTMINSTER, LONDON, SW1P 1QJ

CD

23/5

20 May, 1988

Dear Prime Minister

19 May at Hop

mt

It was kind and generous of you to write to say that the Government is prepared to make a contribution of £30,000 towards the purchasing of a house for the homeless in the Kilburn area. I and many others are most grateful to you for this kind offer.

Negotiations to get hold of the house are proceeding but I expect the negotiations to be lengthy. I shall speak to the Mother Teresa's nuns about the generous contribution of the Government but point out that nothing must be said publicly about it until such time as the negotiations to purchase the house have been completed. At that point I shall consult you as to the most appropriate way of speaking about the Government's contribution and your own kind personal one.

With kindest regards and best wishes.

Yours sincerely,

Rosil Hume

Archbishop of Westminster

The Rt. Hon. Margaret Thatcher, M.P.,
10 Downing Street,
London SW1A 2AA.

PM: Meeting with Mother Teresa

ARCHBISHOP'S HOUSE

April 88

WESTMINSTER, LONDON, SW1P 3JQ

COMPUTER

11



cc: DHSS

10 DOWNING STREET
LONDON SW1A 2AA

THE PRIME MINISTER

19 May 1988

Y
Your Eminence,

You will know that when I met Mother Teresa during her recent visit to London she spoke to me about the plight of people living rough in London. Her particular concern was for those elderly and infirm people who were in need of care and attention but traditionally refused to accept the help available, especially from officially run institutions.

I understand that Mother Teresa's Order, the Missionaries of Mercy, run a number of houses in London providing shelter and support for homeless people of this sort, and are hoping to raise the money to buy a house in Kilburn for similar use. My purpose in writing to you is to let you know that the Government would be prepared to make a contribution of £30,000 towards the cost of the house, in the event that the purchase were to go ahead.

I should be very grateful if you would be so kind as to convey this offer to Mother Teresa and to the Missionaries of Charity in London. In due course perhaps you could let Mr. Powell in my office know whether or not the project is proceeding and, if so, in what timescale.

I take the opportunity to say how very much I appreciate the marvellous work carried out for homeless people by churches and religious orders in this country.

Yours sincerely
Margaret Thatcher

His Eminence The Cardinal Archbishop of Westminster

288

HC/04860



DEPARTMENT OF HEALTH AND SOCIAL SECURITY

Richmond House, 79 Whitehall, London SW1A 2NS

Telephone 01-210 3000

From the Secretary of State for Social Services

PO 1694/1033

AK

Ms Janice Richards
10 Downing Street
LONDON
SW1

17 MAY 1988

Dear Janice,

Thank you for the letter of
from *Charles Powell*
reply.

29 April

I enclose a draft

Yours Sincerely
E Scarlett

EDWARD SCARLETT
Private Office

ENC

His Eminence The Cardinal Archbishop of Westminster
Archbishop House
WESTMINSTER
London SW1P 1QJ

*To [unclear]
[unclear]*

BJA

You will know that when I met Mother Teresa during her recent visit to London she spoke to me about the plight of people living rough in London. Her particular concern was for those elderly and infirm people who were in need of care and attention but traditionally refused to accept the help available, especially from officially run institutions.

I understand that the ^{the} Missionaries of Mercy, are Sisters of Mother Teresa's Order who run a number of houses in London providing shelter and support for homeless people ^{of this sort} and that the Missionaries are hoping to raise the money to buy a house in Kilburn for similar use. My purpose in writing to you is to let you know that the Government would ^{be prepared} like to make a contribution of £30,000 towards the cost of the house, in the event that the purchase were to go ahead.

I should be very ^{grateful} glad if you were ^{would be so kind as} able to convey this offer to Mother Teresa and to the Missionaries of Charity in London. ^{In due course perhaps you could let Mr. Powell in my office} Perhaps you would be kind enough to let me know ^{ad. if so, in what} whether or not the project is proceeding ^{and the timescale,} and the timescale envisaged for its completion.

^{at} May I take ^{my} this opportunity to say how very much I appreciate the excellent work carried out for homeless people by churches and religious orders in this country.

PRIME MINISTER

His Eminence The Cardinal Archbishop of Westminster
Archbishop House
WESTMINSTER
London SW1P 1QJ

T. Hill
Ch

BJA

You will know that when I met Mother Teresa during her recent visit to London she spoke to me about the plight of people living rough in London. Her particular concern was for those elderly and infirm people who were in need of care and attention but traditionally refused to accept the help available, especially from officially run institutions.

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^{by} ~~May~~ I take this opportunity to say how very much I appreciate the ^{managers.} excellent work carried out for homeless people by churches and religious orders in this country.

PRIME MINISTER

His Eminence The Cardinal Archbishop of Westminster
Archbishop House
WESTMINSTER
London SW1P 1QJ

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I should be very glad if you were able to convey this offer to Mother Teresa and to the Missionaries of Charity in London. Perhaps you would be kind enough to let me know whether or not the project is proceeding and the timescale envisaged for its completion.

May I take this opportunity to say how very much I appreciate the excellent work carried out for homeless people by churches and religious orders in this country.

PRIME MINISTER



10 DOWNING STREET
LONDON SW1A 2AA

From the Private Secretary

29 April, 1988.

PRIME MINISTER'S MEETING WITH MOTHER TERESA

BF //

Thank you for your letter of 25 April. It was very helpful to have this background about Mother Teresa's intention. I have consulted the Prime Minister who would like to see us make an offer of tangible support in the form of a capital grant of the order of £30,000, assuming that the project goes ahead. I am not sure which would be the best way for her to make this offer, but suggest that it might be by means of a letter to Cardinal Hume. Unless you disagree, I should be grateful if you could supply me with a draft.

(C.D. Powell)

Mrs. Flora Goldhill,
Department of Health and Social Security.

KK

File to 84

ba PC

①

PRIME MINISTER

MOTHER TERESA

You asked me to find out more about Mother Teresa's plan to buy a house in Camden to use as a shelter for the elderly and infirm.

It turns out that there are two aspects:

- Camden are demanding a market price of £300,000 for the house. Mother Teresa wonders whether the Government can bring pressure to bear on Camden to drop the price. I doubt whether such pressure would be effective: and I am not sure that it would anyway be consistent with the Government's general approach for it to urge Councils to sell off assets cheaply. Equally there are no doubt some points to be made about Camden's refusal to help;
- DHSS say that they are ready to make a one-off capital grant of £30,000 towards the purchase price of the house. The money would come from the balance available from the underpayment of social security benefits arising from the error in the RPI. This seems a worthwhile use of the money. Would you like to make this offer?

AT FLAP

C.D.P.

Yes please
mt

Charles Powell

28 April 1988



DEPARTMENT OF HEALTH AND SOCIAL SECURITY

Richmond House, 79 Whitehall, London SW1A 2NS

Telephone 01-210 3000

From the Secretary of State for Social Services

Charles Powell Esq
Private Secretary
10 Downing Street
London
SW1A 2AA

25 April 1988

Dear Charles

PRIME MINISTER'S MEETING WITH MOTHER THERESA

Thank you for your letter of 13 April. We have, as you suggested, spoken to Father Pat Browne without raising any expectations that Government support would be forthcoming.

He has told us that the London Borough of Camden have offered to sell a house in Kilburn, North West London, at the market price of £300,000, for use by the Missionaries of Charity as a shelter for elderly and infirm homeless people. The Missionaries are a religious order based in West London who run three existing shelters for the homeless in London.

Father Browne thinks that most, if not all, of the purchase price can be raised from private sources but Mother Theresa believes that Camden should be prepared to sell at below market value because of the proposed use of the house by the Missionaries as a shelter for the homeless. She has suggested that the Government bring pressure to bear on Camden to drop their price.

We have indicated to Father Browne that it is unlikely that the Government would be able to intervene in this way but you may wish to pursue this with the Department of the Environment.

If, however, the Prime Minister wished to make a goodwill gesture and offer tangible support, we would be able to offer the facility for making a one-off capital grant (say, in the order of £30,000) towards the purchase price of the house, assuming the project were to go ahead. We would provide the grant from the balance of money available from the underpayment of social security benefits arising from the error in the Retail Price Index. This means that the grant would not be paid at the expense of the Department's other priority commitments.

E.R.

Our judgement is that it is unlikely that Mother Theresa or the Missionaries would make a formal approach to the Government for help. You will need, therefore, to consider whether the Prime Minister might wish to take the initiative on this occasion.

I hope this is helpful. Please let me know if we can usefully provide any additional information.

Yours sincerely

Flora Goldhill

FLORA GOLDHILL
Private Secretary

~~PRIME MINISTER~~

has seen.
C/O 17/4.

cc Mr. Ingham

Robert Maxwell telephoned me this morning to thank you profusely for your message to the Daily Mirror about the campaign in support of Mother Teresa. He hoped we had noticed the prominence which had been given to it. He recognised that the Mirror was not your favourite paper which made your gesture doubly kind.

He also mentioned that the Mirror Group were proposing to start a European newspaper to try to give wider coverage to developments in the European Community and the European Parliament. The aim would be to build up the European institutions in people's estimation and make their affairs more relevant. He was meeting M. Delors on Sunday to discuss this. He asked me to let him know if there were any particular points which the Government would like him to take into consideration. I could not think of any on the spot but promised to get back to him if we had any particular thoughts.

CDP

C. D. POWELL

15 April 1988

CF

CHARLES

Mother Teresa originally belonged to The Loreto Order but a long time ago was given permission to go it alone. She now runs her own outfit and one of the titles she operates under is the Missionaries of Charity. She is the spiritual leader of that organisation.

The Statement on Afghanistan was made at 1400 London time.

DEBBIE

14 April 1988

NI137 HHH 168

Rose Diwata (2)

CD
13/4

THATCHER WILL HELP HOMELESS, SAYS MOTHER TERESA
MOTHER TERESA OF CALCUTTA TONIGHT MADE A PERSONAL PLEA TO MRS
THATCHER TO EASE THE PLIGHT OF BRITAIN'S HOMELESS.

THE NOBEL PEACE PRIZE WINNER WENT TO DOWNING STREET TO URGE THE
PRIME MINISTER TO HELP HER PROVIDE A HOSTEL FOR THOSE WHOSE PLIGHT
MOVED HER TO TEARS ON A NIGHT-TIME TOUR OF LONDON'S DOWN-AND-OUTS.

AFTER THE 40-MINUTE MEETING THE FRAIL-LOOKING 77-YEAR-OLD ROMAN
CATHOLIC MISSIONARY SAID HER TALK WITH MRS THATCHER WAS
"WONDERFUL".

ASKED IF THE PRIME MINISTER WOULD HELP HER WORK, MOTHER TERESA
REPLIED SIMPLY: "SHE WILL."

DOWNING STREET SAID MRS THATCHER HAD LISTENED TO MOTHER TERESA AND
TOLD HER OF THE WORK ALREADY BEING DONE BY VOLUNTARY BODIES AND
CHARITIES.

EARLIER, MOTHER TERESA DESCRIBED HER TWILIGHT TOUR OF LONDON'S
"CARDBOARD CITIES" AT A GLOBAL SURVIVAL CONFERENCE IN OXFORD.

SHE SAID SHE HAD SEEN PEOPLE SLEEPING IN "COFFIN-LIKE" CARDBOARD
BOXES AND THE SIGHT MOVED HER TO TEARS.

132025 APR 88



SUBJECT cc MASTER.

file
CUPC10 DOWNING STREET
LONDON SW1A 2AA

From the Private Secretary

13 April 1988

Dear Flora,

PRIME MINISTER'S MEETING WITH MOTHER TERESA

The Prime Minister had a talk this evening at No.10 with Mother Teresa.

Mother Teresa gave an account of her work in Calcutta and the various initiatives which she had taken elsewhere in the world to establish hostels and hospices for the homeless. She then told the Prime Minister of her excursions in London over the past two nights to visit the homeless and those sleeping rough. She referred in particular to Lincoln's Inn Fields and an underground car park near the Temple. The Sisters of her Order were doing all they could to help these people and provide them with care. Her particular concern was with those who could no longer cope with living rough but would never go into any officially-run institution. She believed that such people would accept being looked after by the Sisters. She had one project to establish a home in Chertsey with support from a number of local businessmen. But she was also keen to establish a hostel in Central London and had identified a property which the council were willing to sell in Camden Town. She would welcome the Prime Minister's help (but was not at all specific what form she would like this help to take). The Prime Minister described the work done by various charities in the United Kingdom in providing help for the homeless and establishing hospices for those who were terminally ill, as well as the Government's activities in this field.

The above is a reconstruction of what Mother Teresa said in a rather more coherent form than it came out. I think we need to establish rather more precisely what help it is that she is seeking. She was accompanied to the meeting by one of Archbishop Hume's chaplains. He is Father Pat Browne who can be contacted on 834-4717. It might be useful if someone more expert than I were to contact him to follow up Mother Teresa's talk with the Prime Minister and try to establish discreetly whether any specific help is being sought from the Government which it is in our power to offer. I should be grateful if you could let me know the outcome.

I should add that Mother Teresa gave a brief account of her views on abortion and her so-called "abortion by adoption" campaign, but did not refer specifically to legislation currently before Parliament.

I am copying this letter to Deborah Lamb (Department of the Environment) and to Robert Culshaw (Foreign and Commonwealth Office).

*Yours sincerely,
Charles Powell*

Charles Powell

Mrs Flora Goldhill
Department of Health and Social Security.

HOMELESSNESS

Homeless news 7

I SHARE THE HON GENTLEMAN'S CONCERN ABOUT THE HOMELESS. THAT IS WHY WE ARE TAKING POSITIVE ACTION TO REVITALISE THE PRIVATE RENTED SECTOR. IT IS FOR LOCAL AUTHORITIES TO DECIDE ON THEIR OWN HOUSING PRIORITIES WITHIN THEIR AREAS.

BED AND BREAKFAST ACCOMMODATION

WE ARE ENCOURAGING LOCAL AUTHORITIES TO WORK WITH THE PRIVATE SECTOR AND HOUSING ASSOCIATIONS TO SECURE THE ACCOMMODATION NEEDED. AUTHORITIES SHOULD BE DOING A LOT MORE TO FIND ALTERNATIVES TO BED AND BREAKFAST ACCOMMODATION, AND TO SEE THAT THEIR OWN HOSTELS AND OTHER PROPERTIES ARE FULLY USED - THERE ARE STILL OVER 100,000 EMPTY COUNCIL DWELLINGS.

GOVERNMENT STEPS TO TACKLE HOMELESSNESS

- MADE OVER £5 MILLION AVAILABLE LAST YEAR THROUGH THE ESTATE ACTION INITIATIVE, BRINGING 1,200 EMPTY AND RUN-DOWN COUNCIL DWELLINGS BACK INTO USE.
- OUR MIXED FUNDING HOUSING ASSOCIATION INITIATIVE, PROVIDING A TOTAL OF £30 MILLION INVESTMENT IN BETTER INTERIM ACCOMMODATION FOR THE HOMELESS.
- MOST RECENTLY THE EXTRA £25 MILLION ALLOCATED TO AUTHORITIES TO SPEND THIS YEAR.
- CAPITAL EXPENDITURE ON HOUSING THIS YEAR (1987/88) WILL BE £3.7 BILLION, OVER 6 PER CENT HIGHER THAN LAST YEAR'S (1986/87) FIGURE (CASH TERMS). PLANS FOR NEXT YEAR WERE INCREASED BY £384 MILLION IN THE AUTUMN STATEMENT.

THE YOUNG HOMELESS

YOUNG PEOPLE CAN ALSO BENEFIT FROM A NUMBER OF OUR OTHER MEASURES, INCLUDING:-

- OUR HOSTELS INITIATIVE - OVER 14,700 PLACES APPROVED SINCE APRIL 1981, TO BENEFIT YOUNG SINGLE HOMELESS AND OTHERS.
- MAKING IT EASIER FOR COUNCIL TENANTS TO SUB-LET, AND INTRODUCING SHORT-HOLD TENANCIES.
- INCREASING THE PROGRAMME OF GRANTS TO VOLUNTARY BODIES CONCERNED WITH HOMELESSNESS TO £600,000 THIS YEAR.

BOARD AND LODGING REGULATIONS

I DO NOT BELIEVE THE BENEFIT SYSTEM SHOULD BE USED TO ENCOURAGE YOUNG PEOPLE INTO EXPENSIVE AND INAPPROPRIATE ACCOMMODATION. THAT WOULD BE NO SERVICE TO THE TAXPAYER, THE FAMILY OR THE YOUNG PERSON.

VACANT HOUSING: AT 1 APRIL 1987

- THERE WERE 112,000 EMPTY COUNCIL HOUSES AND FLATS IN ENGLAND, OF WHICH SOME 28,000 WERE EMPTY FOR MORE THAN A YEAR.
- IN LONDON NEARLY 27,000 HOMES (3.3 PER CENT OF STOCK) WERE EMPTY, 10,000 OF THEM FOR MORE THAN A YEAR.
- THREE BOROUGHES - HACKNEY, NEWHAM AND TOWER HAMLETS - IN APRIL HAD OVER 5½ PER CENT OF THEIR STOCK VACANT.
- THE NUMBER OF LOCAL AUTHORITY PROPERTIES EMPTY FOR MORE THAN A YEAR IS NEARLY THREE TIMES THE NUMBER OF FAMILIES IN BED AND BREAKFAST ACCOMMODATION.
- CAMDEN, BRENT, AND TOWER HAMLETS USE BED AND BREAKFAST EXTENSIVELY WHILE OTHERS, SUCH AS GREENWICH, WHICH SUFFERS SIMILAR PROBLEMS, MANAGE TO AVOID IT.
- RENT ARREARS OWED TO LOCAL AUTHORITIES IN ENGLAND ARE RUNNING AT A LEVEL OF NEARLY £200 MILLION - 5 PER CENT OF THE TOTAL RENT COLLECTABLE. NEARLY HALF OF THE ARREARS IS OWED BY ONLY 20 AUTHORITIES, WHICH HAVE ARREARS OF BETWEEN 8 AND 38 PER CENT.

BRENT: £6.5 MILLION RENT ARREARS, 38% OF RENT COLLECTABLE.

SOUTHWARK: £14.7 MILLION RENT ARREARS, 28% OF RENT COLLECTABLE.

of great importance, and the leader of the Liberal party, the right hon. Member for Tweeddale, Ettrick and Lauderdale (Mr. Steel) deserves full credit for what he did then. The Act removed many social ills which we all hated and has given us 20 years of comparative stability in dealing with the problems and arguments that go on.

Hon. Members can set an example on this matter by moving ahead with consensus. It is apparent that the debate on the Bill is not producing that. It has been said that the various alternatives could be fully discussed in committee. We all know what happens with the composition of private Member's Bills Committees—without any disrespect to the hon. Member for Liverpool, Mossley Hill (Mr. Alton)—and we know the difficulties of taking up on Report matters which have been fully debated in Committee, but that is part of our constitutional proceedings. If the Bill goes through Second Reading to Committee, it will be extremely difficult to debate any other position in the House.

We have a great opportunity to look at the problem from the point of view of moving ahead with consensus. The hon. Gentleman has not disguised the fact that, because of his religious beliefs, he is entirely opposed to abortion. The position of the Synod of the Church of England has been mentioned. I am a member of the Church of England and I understand that position, but I cannot help noting that there is much picking and choosing as to which view of the Synod of the Church of England one accepts on a particular subject.

However, allowing for that, I am aware of the religious beliefs that are expressed and held most strongly. Crusades do not always lead to the most desirable results, as we know from history. Above all, they lead to considerable intolerance. It is essential that we in this House should be tolerant of those outside whose ethical and religious views do not coincide with our own, and on this subject, there are a considerable number of our fellow citizens whose views do not coincide with our own.

The 1967 Act was based on a combination of provisions from the Infant Life (Preservation) Act 1929 and new provisions. The way ahead on the basis of consensus is now very clear. The 1929 Act could be amended to give a limit of 24 weeks, which would in fact mean 22 weeks. Such a proposal would gain the support of the whole medical profession, as cited in opinion polls and on television. According to all my inquiries, the medical profession accepts that a limit of 24 weeks—in practice 22 weeks—would deal with the advances in medicine over the past 20 years and at the same time with the practical arrangements available for dealing with these problems. If the House had been able to give a lead with a Bill containing that proposal, that Bill would have gained overall agreement and we could then have moved forward to another period.

The particular problems mentioned, such as that of private clinics, need to be dealt with in some other way. They are controversial in themselves and are not affected by the Bill. The problem of private clinics can be dealt with separately, through the Health Service or, if the House so wishes, by legislation. My greatest concern is that, after 20 years of stability, we should now take advantage of the advances in medicine and the practical arrangements that can be made—which in some cases may be lacking—to take a further step forward. I wish that that had been the purpose of the Bill. As it is not, I shall oppose the Bill, although I shall strongly support any Bill from another

place that reduces the limit to 24 weeks—in effect 22 weeks. That would gain the overall acceptance of the medical profession, of whose advice the House should take great note.

12.17 pm

The Minister for Health (Mr. Tony Newton): As has been very clear, this is an issue on which there are deeply held and totally conflicting views; it is correspondingly difficult for any Minister to speak in a debate such as this. In his opening speech, the hon. Member for Liverpool, Mossley Hill (Mr. Alton), fairly acknowledged the difficulties of the subject. He also stated clearly, and I thought rightly, that the Bill does not itself set out to challenge the principle of legal abortion. He rightly made it clear that he thinks that abortion should not be legal, but he recognises that it is; indeed, a large part of his case rested on the fact that he did not propose to reverse the basic position. The hon. Gentleman presented the Bill as one that attempts not to return to the pre-1967 position but to modify the working of the law to make it more acceptable to the substantial body of opinion—whatever its exact size, none of us can dispute that it is substantial—that is affronted by the scale of abortion in recent years, and particularly by abortion at a relatively late stage in pregnancy. He argued that the gain from achieving a change in the balance would outweigh the contrary arguments adduced in the debate.

I would say to the hon. Member for Birmingham, Ladywood (Ms. Short) that the hon. Gentleman is at least entitled to seek the judgment of the House on the proposal that he has put before it, rather than on what is in his mind but which he has not brought before the House.

I think that the House already knows that which I must state clearly, that the Government have no collective view on the merits of the proposal by the hon. Member for Mossley Hill. The considerations involved are clearly both moral and practical. Some hon. Members will see the moral considerations as overriding, while others will see as paramount the practical considerations. I think it is fair to say that most hon. Members who have spoken will not see the matter in such a clear-cut way, but will want to strike a balance between the two conflicting sets of considerations. At the end of the day, each hon. Member will have to decide for himself or herself what the balance should be and how we should vote on the Bill.

In such a debate, my role as Minister for Health is not to speak for the Government in the ordinary sense, but to set before the House such advice as I can give from the advice available to me, which I think might help hon. Members to make a decision. I must necessarily concentrate on the practical issues, because being Minister for Health gives me no special status to advise others on matters of conscience or morality.

First, I shall comment on the legal position. It has been clearly recognised in the debate that the Bill represents a clear change in principle from the abortion legislation introduced by the right hon. Member for Tweeddale, Ettrick and Lauderdale and passed in 1967. That is because the Abortion Act 1967 contains no upper limit for the gestational age at which an abortion may be performed. It must be accepted as a matter of law that to introduce such a limit is to introduce a distinct and new concept compared with the present position.

As hon. Members have said, the Infant Life (Preservation) Act 1929 applies in England and Wales and

[Mr. Tony Newton]

protects any foetus capable of being born alive. It also contains a rebuttable presumption, and the fact that it is rebuttable is significant. It is that a foetus of 28 weeks gestation is capable of being born alive. As the House knows, in the light of our capacity to keep very young infants alive, the Government have given their support, and similar support has just been echoed by my right hon. Friend the Member for Old Bexley and Sidcup (Mr. Heath), for a measure currently under discussion in another place. That measure seeks to reduce the gestational age at which this presumption is made from 28 weeks to 24 weeks. However, it is a proposition of a different kind from the one that is now before the House, because the Bill before the House would make illegal all abortions after the 17th completed week of pregnancy, except in cases where it was necessary to save the life of the mother or if the life of the child could not be sustained.

I shall make the point a little clearer. Under the Infant Life (Preservation) Act—this is why I emphasised the word “rebuttable”—it is open to a doctor who has performed an abortion outside the limits thought to be provided by the Infant Life (Preservation) Act to prove that the child was not capable of being born alive. The onus of proof at that point is shifted; the House ought to bear that significant point in mind.

I know that many hon. Members wish to speak and I shall try to keep my speech brief. I had intended to spend a few moments advising the House as clearly as I can on the views about the current capacity of a foetus to be born alive. I shall say only that I am advised that the 22nd gestational week is considered by doctors to be the earliest time at which there is the slightest possibility of a foetus being born alive, because before then the lungs are not mature enough to function, even if ventilated.

The House will be aware that the Royal College of Obstetricians and Gynaecologists, as well as the British Paediatric Association, the Royal College of General Practitioners, the Royal College of Midwives and the British Medical Association, produced a report in 1985 on foetal viability and clinical practice. That report recommended that the age at which a foetus is considered viable should be reduced from 28 weeks to 24 weeks. Earlier this year, that recommendation was confirmed by that same group of organisations when they looked again at their 1985 report.

Alongside the support that I have already said the Government have extended to the proposition in the form of a Bill—not a Government Bill—introduced in the other place, the Department has taken a number of significant steps effectively to implement the recommendation about 24 weeks. We have done that in two ways. First—this has already been referred to, but I should make it clear—we have made it a condition of approval for private sector nursing homes that no abortions are carried out after 24 weeks. The position is less clear in the NHS, but the Department has arranged for the report to be drawn to the attention of the fellows and members of the Royal College of Obstetricians and Gynaecologists.

As has been said on several occasions, the number of abortions after 24 weeks is now very small. On the latest figures for 1986, there were 29 at the 25th week or above. Hon. Members will have their own views about whether a number as small as even 29 is to be dismissed, bearing in mind that we are talking about individuals who will

have their own views and circumstances, including in a large number of cases the fact that by then they will know that their baby is likely to be born handicapped. However, I think all hon. Members will accept that on those figures, and with the continuing likelihood of a further decline in the number of abortions occurring so late, the practical effect of introducing a 24-week limit into the Abortion Act would be small, according to our current experience.

Mr. Steel: Can the Minister tell us how many of those 29 abortions were carried out under section 2 of the Act—in other words, that were related to foetal abnormalities—and how many were carried out under the main section?

Mr. Newton: I do not have the breakdown of those 29 with me. However, I understand from a point made earlier that the figure is about 20 per cent. I think that that is right, but if it is wrong, I shall ask that some message be passed to me so that I can correct that later.

Mr. Alton: Before the Minister leaves that point—he is, of course, right—does he therefore recognise that inserting a 24-week rule will not make any difference if people are concerned about abortions on eugenic grounds? What does the Minister have to say about late social abortions, 92 per cent. of which after 18 weeks are performed on perfectly healthy children?

Mr. Newton: I shall come to that point in a moment.

I have already made it clear that it is important that to understand that the practical effect on reducing the number of abortions of a time limit of 24 weeks would be small. Nevertheless, there are some who would see establishing the principle of a limit as a significant gain. Hon. Members must judge those issues for themselves. I shall not try to give them a steer, as a Minister, on how they decide to vote.

There has been a good deal of reference to the statistics involved. I shall set them out as clearly as I can, although I fear that they do not add much to what has already been said. If such a Bill had been in force in 1986, about 8,000 of the 172,000 abortions that were performed in that year in England and Wales would not have taken place.

The hon. Member for Mossley Hill pointed to the fact that many abortions at 18 weeks and over are performed on foreign women. The exact statistic is that, out of the 8,276 abortions in England and Wales at 18 weeks and over in 1986, 3,688 were to non-residents. For this purpose, non-residents include women from Scotland, Northern Ireland, the Channel Islands and the Isle of Man, as well as women from foreign countries. Abortions performed on women resident in foreign countries amounted to 3,461, which was 42 per cent. of the total. The vast majority of those women came from France, Spain and the Irish Republic.

That reflects—in one case it would be more accurate to say that it reflected—the difficulties that women have in obtaining abortions in those countries. In Eire, abortion is illegal. In France, abortion is available on demand up to 10 weeks gestation, but is severely restricted after that. However, in Spain a law legalising abortion in certain circumstances was passed in 1985. The numbers of women coming to this country from Spain are now dropping rapidly.

Sir Bernard Braine: With regard to foreign women, can my right hon. Friend defend a practice whereby we are

effectively breaking the law of other countries? Perhaps more importantly, from the point of view of those women, what guarantee is there that a quick abortion at a London clinic will be followed up by the aftercare that is absolutely essential, psychologically and medically, for women who have had an abortion?

Mr. Newton: As a matter of common sense, all of us would accept that it is less than desirable for women to be crossing international boundaries in order to receive medical treatment of that sort. Undoubtedly, many hon. Members on both sides of the House will take the view that it is wrong for women to come to this country for abortions when they cannot obtain them in their own country, and that view will be held partly for the reasons adumbrated by my right hon. Friend the Member for Castle Point (Sir B. Braine). That is something about which I must leave hon. Members to make up their own minds.

Others will take a somewhat different view of foreign women coming to this country. For women to contemplate visiting another country and experiencing an unfamiliar health system in order to have an operation of this sort is an indication of the great pressure that develops for a woman who has an unwanted pregnancy. Therefore, to some extent it suggests that, if the limits are made too restrictive, the same consequences may follow for some women in our country, whether in terms of seeking to go abroad or returning to back-street abortions.

Mr. Nicholas Bennett: We should also look at that bearing in mind that there are clear financial links. There is a business contract involving foreign women coming to this country. Is it not the case, as shown by the Royal College of Obstetricians and Gynaecologists, that 60 per cent. of late abortions carried out in private clinics were performed by 11 doctors?

Mr. Newton: I have inquired about that, and I am told that the Department is not aware of any evidence to that precise effect. The Department monitors carefully, on the basis of unannounced visits apart from announced visits, the operation of private sector clinics. If we find evidence of abuse, we act to deal with it.

That cross-boundary international flow raises the question what will happen when women with an unwanted pregnancy find themselves denied an abortion in their locality. That has to be considered by hon. Members.

I am not in a position to do what the House might like me to do, which is to make any sort of estimate as to what the possible effects would be in relation, for example, to illegal abortions if the Bill is passed in its present form. One of the happiest facts—I accept that there are unhappy facts too—of what has happened since 1967 is that the number of deaths from criminal abortions has dropped to nil in recent years. It is equally the case—I want to recognise this clearly—that because the Bill would not affect the vast majority of abortions that take place in this country, and because there would undoubtedly be added difficulties in undertaking illegal late abortions, it is unlikely that the passing of this Bill would lead to the sort of back-street abortions that we saw in the early 1960s and before.

Against the background of the number of women who go to great lengths in order to obtain an abortion, it would

be rash to say that there would be no risk of some degree of return to abortions outside the law. That is something the House will have to bear in mind.

Mr. Campbell-Savours: Will the Minister accept that the delay in provision in some parts of the country might be responsible for the demand for late abortions in some areas?

Mr. Newton: It is very difficult for me to assess the various factors that may be involved. I am not in a position to confirm the proposition that the hon. Gentleman has put to me.

The hon. Member for Ladywood has mentioned that one of the difficulties is the variable availability of NHS abortions around the country, for reasons that I, at any rate, would frankly not wish to disturb. Whatever else we may disagree about, we surely agree it would be wrong to compel consultants and nurses, who have a conscientious objection to the performance of abortions, to undertake them.

Mr. Rhodri Morgan (Cardiff, West): Will the Minister give way?

Mr. Newton: I am happy to give way, but I am anxious about the pressure on time.

Mr. Morgan: The Minister has said that consultants should be free not to carry out abortions or late abortions if they find that repugnant. However, he is missing the point that those consultants may also appoint staff within their areas who agree with their views and that that may have a major impact on the availability of early or late abortions on the NHS in such areas.

Mr. Newton: I readily recognise that that is a matter on which there are a number of insoluble problems and many dilemmas. I stick to my fundamental proposition, that I would not wish to be a Minister for Health who is in the business of seeking to compel clinicians to undertake procedures of which they conscientiously disapprove.

Some reference has been made to particular cases that have been highlighted by the BMA concerning the possible implications for young girls who do not recognise or attempt to conceal their pregnancies, and menopausal women who fail to recognise that they are pregnant until it is too late. To help the House to judge those points, and in recognition that they need to be balanced against other views, I can inform the House that, out of a total of 8,276 abortions at 18 weeks and over, 2,865, or over one third, are to women under the age of 20. A further small proportion, about 3 per cent., or 253 abortions at 18 weeks and over, are to women aged 40 and over. Again, hon. Members must make their own judgment about the significance of those figures.

There is one other category that has not been referred to in the House and for which I cannot give any statistics or evaluate in general terms, but which should be mentioned—the possibility of women whose infection with the AIDS virus is not recognised until a late stage of pregnancy. Clearly, under present circumstances, that problem will grow. I emphasise that it is for hon. Members to weigh all of these factors against many other considerations.

The last major point upon which I feel I ought to seek to offer some information and guidance to the House relates to the many references that have been made to

[Mr. Newton]

handicap and in particular, the tests and the timing of the tests that can presently or prospectively be available to discover handicap and allow choice to be made.

Mr. Toby Jessel (Twickenham): When my right hon. Friend gave us some figures just now, I thought that he would refer to the approximate 4,800 abortions per year at over 18 weeks that are carried out on women from England. He has not said what proportion of those abortions are carried out by the NHS for which he is responsible. The Minister and his colleagues have made us well aware of the immense pressures due to the increased demand on the NHS and thus the demand on its operating facilities. In view of that, how can it be argued that someone who is waiting for an operation—there are many people, some in pain, waiting for operations of all sorts on the NHS—should have a lower priority than the late abortion of a healthy baby?

Mr. Newton: I note my hon. Friend's views. However, given the views implied by his question, I do not think that I would want, in return, to express an opinion about the particular needs of particular people without knowing rather more about the circumstances in which they find themselves and what has led them to request a particular form of medical attention.

It is important to say something about the handicap issue and the question of tests. Obviously, completely new tests may eventually become available that may alter the position, but as I am advised, the position on the main tests currently available is as follows. The first test, serum alphafetoprotein, is usually done at 16 weeks. It is a test on the mother's blood to identify women who are more likely than average to have a foetus with an open neural tube defect, particularly a proportion of spina bifida cases. The test usually shows up as abnormal in anencephaly. Amniocentesis is normally done at 16 weeks. It is used to assist in confirming the presence of a foetus with open neural tube defect, or to give cells that can be cultured, to determine whether there is a genetic or chromosomal abnormality if there is reason to suspect that they may be present.

That cell culture takes two to three weeks, and if it fails, as it sometimes does, the test may need to be repeated. Abortion stemming from the findings is seldom possible much before 20 weeks, and in latter tests it sometimes may be as late as 24 weeks.

Untra sound scanning is mostly carried out at 16 to 18 weeks. The later it is done, the more accurate it is in assessing foetal abnormality. Its main uses are to assist in determining the gestational age, which may be important in interpreting other tests for foetal abnormality, to detect multiple pregnancy and to see abnormalities of foetal structure.

The test that has perhaps been referred to most in the debate, and in which there is most interest in the future, is chorionic villus biopsy, which is normally carried out at the earlier stage of between 8 and 12 weeks gestation. It is a relatively new procedure and can be used as an alternative to later examination of cells in amniotic fluid obtained by amniocentesis at between 16 and 18 weeks. It is used for the detection of genetic or chromosomal abnormalities if there is reason to suspect that they may

be present. I am told that it is not an alternative to the procedures of alphafetoprotein testing or ultrasound scanning.

The House must bear in mind that, as yet, chorionic villus biopsy is no universally available, and that its safety and accuracy are still being studied. Clinical experience so far shows that, in general, results are accurate, although a small percentage of chromosome abnormalities need to be confirmed later by amniocentesis. There may be a problem regarding safety, in that miscarriage after amniocentesis is between 1 and 2 per cent., whereas after chorionic villus biopsy it appears to be twice that figure. Sometimes, there is the further problem of infection following this procedure.

Mr. Wigley: Interpreting what the Minister has just said, will he confirm that at present—other tests may be developed in the future—it is essential to give a choice to mothers who may be passing genetic defects? Those defects may lead to severe disability. Does the Department have a view of the implications of the Bill in those terms, given the Minister's responsibility in regard to disability?

Mr. Newton: I hope that the hon. Gentleman will allow me to proceed with a carefully noted piece. I shall cover the points that he has raised.

If the indications of accuracy and safety are confirmed by research, and no other hazards of the chorionic villus biopsy emerge in the study, obstetricians may be expected to want to offer a choice of chorionic villus biopsy or amniocentesis when women whose previous family history shows the need for genetic or chromosome studies present early enough in pregnancy. Women would be likely to be told that, although there are occasionally problems with accuracy and a somewhat higher miscarriage rate, chorionic villus biopsy can provide a good indication of whether the foetus has chromosomal or gene abnormalities that are otherwise detectable through amniocentesis.

It can do so early in pregnancy, thus making possible the option of a safer and less unpleasant termination before 12 weeks for some groups of women. There are indications that a majority of women would choose chorionic villus biopsy, but that a substantial number would opt for amniocentesis at 16 weeks.

Mr. Barry Sheerman (Huddersfield): The figures that the Minister has given are interesting. My wife and I lost our first baby because it suffered from hydrocephalus spina bifida after a full-term pregnancy. For the next four healthy children that we had, we were under a great deal of strain. For the first two there were no tests, but for the last two they were available, and we had the option, which we would have taken if we had a severely disabled child. What worries me profoundly about the Bill is that parents such as myself and my wife will not have that choice.

Mr. Newton: I am sure that all hon. Members will wish both to extend their sympathy to the hon. Gentleman for his experience—it has been interesting to hear about that experience—and to take it into account in deciding what their view should be.

In considering these tests, there are one or two further points that I must make. First, in dating a pregnancy, the margin of error either way is commonly as much as 10 days. Secondly, if a foetal abnormality is detected by one diagnostic method, a further method may have to be used

to confirm the diagnosis and that can mean some delay, especially if the woman has to be referred to a different hospital. Thirdly, delays in systems can sometimes occur for a variety of reasons, whether staff absences, equipment failure, because the woman is ill, because a relative, perhaps a child, is ill, or because of something as mundane as transport difficulties.

All those matters must be borne in mind, but they lead to the conclusion that, as the Bill stands, with the provision that only a child likely to be born dead or with physical abnormalities so serious that its life cannot be independently sustained, would be excluded from its working, there is likely to be some increase in the numbers of severely handicapped children both, whose mothers might otherwise have decided to have an abortion.

Mr. Alton: Is the Minister saying that, if the 8 per cent. that fall into the category that he has described were to be excluded by an exemption clause in Committee, he would accept the overwhelming burden of evidence that the 92 per cent. who would be perfectly healthy children, should not be aborted?

Mr. Newton: I hope that I have made it clear that I am seeking to put factors before the House which hon. Members should bear in mind and that I do not attempt to press my judgments upon them. I am sure that it is right for me to stick to that position. In view of the reference to the fact that more than 90 per cent. of abortions at 18 weeks and over are for reasons other than foetal abnormality, which is undoubtedly correct, it is also fair for me to put before the House—

Mr. Thurnham: Is my right hon. Friend aware that Professor Stuart Campbell said on Tuesday that he would stake his professional reputation on the fact that there are far more class 4 terminations than are recorded, because of administrative failures in the system?

Mr. Newton: I note what my hon. Friend said with interest, but that is not a matter on which I shall attempt to make a judgment.

The House should also note that the proportion of abortions done on grounds of foetal abnormality increases considerably with gestational age. At 18 weeks, the proportion is 6 per cent.; that rises to 21 per cent. at 24 weeks and to more than 70 per cent. above 24 weeks. At least that is something which the whole House will wish to bear in mind.

I have probably said as much as I can usefully and helpfully say to the House as Minister for Health. I emphasise again that, neither in that capacity nor in my capacity as a member of a collective Government, am I advising the House and hon. Members in any way as to how they should vote on this Bill. The House is perhaps entitled to know, and perhaps it is right for me to say, that in my capacity—I emphasise this strongly—as an independent Member of Parliament with his own purely personal views, I would be more than ready to support the introduction of a clear legal time limit for abortions. But I do not find myself conscientiously able to support the passage of the Bill in the precise form in which it has been presented to the House today.

12.49 pm

Ms. Jo Richardson (Barking): I am sure that most right hon. and hon. Members who were in the House in the 1970s will remember that this is by no means the first

attempt to restrict the Abortion Act 1967. I well recall, as if it was yesterday, the first attempt, in March 1975, because it was almost a year after I had entered the House; that was the James White Bill. It was followed somewhat later by the Bill sponsored by the hon. Member for Milton Keynes (Mr. Benyon), and then later by John Corrie's Bill. All those Bills were fought off by the strength of public opinion and by the common sense and sense of justice—I use the words advisedly—of the House of Commons.

Now, in 1988, it is 20 years since the 1967 Act, during which back-street abortions, as the Minister said, have completely disappeared and a new generation of young women and men has grown up with a law that has allowed women—often with difficulty even under the present Act and often with unnecessary delays—to obtain a termination safely and legally.

Let me dispel two myths that have been referred to here and in the press during the past few weeks. The first myth is that the present Act gives women the right to choose. It does not. Two doctors must agree, and the need to obtain an abortion must comply with one of the provisions in the Act. Abortion is not another method of contraception. That is another thing that is widely said, and quite untrue. Anyone who believes that can have no idea of the agony of mind that all women undergo before making the momentous decision to have an abortion.

The second myth is that women opt for an abortion on trivial grounds, such as that it would restrict their social activities or affect their figures. They are much more serious people than their critics give them credit for. Certainly an unintended pregnancy, often as a result of contraceptive failure, will give many women much to think about. The hon. Member for Birmingham, Edgbaston (Dame J. Knight) referred to the choice that women have of being able to take contraceptive pills or use contraceptive devices. I am sure I do not have to remind her that there is such a thing as contraceptive failure, and that quite a number of women have had to resort to an abortion in the end because of it.

Dame Jill Knight: I said that contraception has never been so widely disseminated, that there has never been so much education about it, and that it has never been so good.

Ms. Richardson: I can recall a number of studies done in the past two or three years which have put much fear into the minds of women about the effectiveness of the contraceptive devices they are using—of the pill, for example. What about the cuts in family planning services that are being made? I was in Stevenage about 10 days ago and visited its family planning clinic, which is faced with a 50 per cent. cut in resources over the next 12 months. That will mean an increase in the number of women who may become pregnant as a result of not having proper treatment.

Whatever the reason for an unintended pregnancy, it affects the mental and physical health of a woman in terms of her children or other family responsibilities, adding further strains to an already over-strained household income. Damp, overcrowded housing conditions or homelessness may well be factors that must also be considered. Social research has proved many times that those factors have a direct impact on mental and physical health.

The British system of support for pregnant women is not all that good. Indeed, it is about the worst in western

EXTRACT FROM BRITANNICA

Teresa (OF CALCUTTA), MOTHER, original name AGNES GONXHA BOJAXHIU (b. Aug. 27, 1910, Skopje, Macedonia), founder of the Order of the Missionaries of Charity—a Roman Catholic congregation of women dedicated to the poor, particularly to the destitute of India—and recipient of the 1979 Nobel Peace Prize.

The daughter of an Albanian grocer, she went to Ireland in 1928 to join the Institute of the Blessed Virgin Mary, sailing, only six weeks later, to India as a teacher. She subsequently requested permission to work with the poor of Calcutta.

After studying nursing, Mother Teresa moved into the slums. Municipal authorities, upon her petition, gave her the pilgrim hostel near the sacred Kālī's temple where she founded her order in 1948. Sympathetic companions soon flocked to her aid. Dispensaries and outdoor schools were organized. Mother Teresa, who adopted Indian citizenship, and her Indian nuns all donned the sari as their habit. In 1950 her order received canonical sanction from Pope Pius XII, and in 1965 it became a pontifical congregation (subject only to the pope). The order opened numerous centres serving the blind, aged, lepers, cripples, and the dying. Under Mother Teresa's guidance, the Missionaries of Charity built, near Asansol, India, a leper colony called Shanti Nagar (Town of Peace).

In 1963 the Indian government awarded Mother Teresa the Padmashri ("Lord of the Lotus") for her services to the people of India. In 1964, on his trip to India, Pope Paul VI gave her his ceremonial limousine, which she immediately raffled to help finance her leper colony. In 1968 she was summoned to Rome to found a home there, staffed primarily with Indian nuns. In recognition of her apostolate, she was honoured on Jan. 6, 1971, by Pope Paul, who awarded her the first Pope John XXIII Peace Prize.

In the late 1970s the Missionaries of Charity numbered more than 1,000 nuns who operated 60 centres in Calcutta and more than 200 worldwide centres, including foundations in Sri Lanka, Tanzania, Jordan, Venezuela, Great Britain, and Australia. By 1970 her foundations in Calcutta alone had saved nearly 8,000 destitute outcasts from death.

FACSIMILE



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Parliamentary Clerk

URGENT

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_____ PAGES TO FOLLOW

Homelessness

Line to take

We share the general concern about homelessness. That is why we are taking positive action to revitalise the private rented sector and to increase the choice of rented accommodation in other ways. The primary responsibility for helping the homeless rests with local authorities. We are encouraging them to work with the private sector and housing associations to secure the accommodation needed. Where they need to use temporary accommodation authorities should be doing a lot more to find alternatives to bed and breakfast, to see that their own hostels and other properties are fully used (there are still over 100,000 empty Council dwellings) and generally to examine their own procedures. For our part we have taken steps to target extra resources on reducing the use of bed and breakfast through our Estate Action initiative (nearly £5½m since August 1986 to bring 1200 Council dwellings back into use), our mixed-funding housing association initiative (a total of £30m investment in better interim accommodation for the homeless in 1987/88), and the extra allocations made or about to be made to local authorities for this purpose (£25m announced last autumn for spending in 1987/88 and a further £28m announced last month for spending in 1988/89).

HOMELESSNESS

Background

Local authorities have a duty under Part III of the Housing Act 1985 to secure accommodation for homeless people in specified priority need categories (families, the pregnant, the old or disabled, etc); they also have a duty to give all homeless people reasonable preference among others in selecting Council tenants. Decisions on who are homeless, whether they are in priority need, and how to accommodate them are a matter for authorities.

2. The number of homeless households whom authorities have accepted responsibility to accommodate has risen steadily to over 100,000 a year. So has the number in Bed and Breakfast (10,370 at 31 December). The problem is largely concentrated in London (30% of homeless acceptances, 80% of B&B). Social factors (rising divorce rate, young people leaving home earlier) are an important cause of homelessness.

BACKGROUND NOTE ON 1987 SEVERE WEATHER INITIATIVE

History

1. In January 1987 during a spell of exceptionally severe weather, PS(H) asked for measures to be taken urgently to provide assistance via voluntary agencies to people whose health and safety were at risk because they were without shelter.

Planning

2. An approach was made to the main voluntary agencies concerned on the basis that DHSS would meet the extra costs involved in providing additional assistance during the severe weather. It was agreed with Treasury that the money would be found from within the Department's existing allocation for voluntary sector funding.

Execution

3. On terms approved by Ministers (Annex B) voluntary agencies, co-ordinated by the charity, Crisis at Xmas, set up a number of temporary shelters in London and some provincial centres. Additional facilities were also provided by the Department's own resettlement units and by voluntary hostels funded under Schedule 5 of the Supp Ben Act 1986. Additional warm clothing, bedding and food were also provided to those who refused shelter.

Costs

4. A total of £92,157 was spent on the exercise which lasted approximately three weeks. It was mounted in extreme haste and without any lead-in time for planning and it became clear as the dust settled that there had been a degree of over-provision and duplication of effort. Several shelters closed down after a day or two because of under-use and there was spare capacity in resettlement units throughout the period. Some

of the expenditure incurred was not strictly within the agreed criteria and the cost of the provincial centres was disproportionately high compared with the London based operations. Adequate facilities could probably have been provided at about two-thirds of the actual cost incurred.

Funding

5. There was some initial uncertainty about the proper statutory basis for funding the initiative. Legal advice subsequently confirmed that Sch 5 of the Supp Ben Act 1976 provided the appropriate power and the money was accordingly found from the Schedule 5 budget.

Current Position

Ministers are currently considering whether or further such initiatives should be developed in a more planned way.

WSS makes grants to national voluntary organisations which provide a service, as well as accommodation, to homeless single people in need of care and support

Grants in 1987/88 to four organisations amounted to £99,100.

PRIME MINISTER

Mother Teresa will be calling on you alone at 6 o'clock tomorrow evening. According to David Alton, the subjects she would like to discuss are homelessness and late abortions and there are a couple of notes on these in the folder.

We have already had a number of press enquiries about the meeting, and it is not possible to keep it totally secret.

Do you wish to stick to the line that it is a private meeting?

Or

Are you prepared to have a very brief photo-call when Mother Teresa arrives?

if she agrees - yes.

Prime Minister

I am sure it is better to announce it. It is bound to leak. Agree?

PAJ
(P. A. BEARPARK)

12 April 1988

C.D.P. 12/4.

PRIME MINISTER

David Alton MP phoned this afternoon to say that Mother Teresa of Calcutta is in town for tomorrow and Wednesday and would very much like to pay a call on you to discuss late abortions and homelessness. She would be content for the visit to be either public or private.

Your diary for tomorrow and Wednesday is attached. Tomorrow is absolutely impossible, but I suppose we could move Sir Julian Bullard on Wednesday morning if you wished to. Do you want to see Mother Teresa then?

Mr. Alton also asked me to mention that he will be speaking in Finchley tomorrow and felt that as a matter of courtesy you should know.

PAJ

What about 6 p.m.

or Wed. evening -

for a private visit.

P. A. Bearpark
11 April 1988

PRIME MINISTER'S ENGAGEMENTS FOR THE WEEK BEGINNING
TUESDAY 12 APRIL 1988

Tuesday 12 April (House resumes)
0900 Questions Briefing Team
0930 Meeting with colleagues
1000 Lord Young +PG
1030 DEPART NO.10 + CDP
BETWEEN 1130
AND 1145 ARRIVE WINDSOR GREAT PARK
1200 KING OF NORWAY ARRIVES
RETURN TO NO.10
1300 Lunch and Questions Briefing
1515 QUESTIONS
1545 CRANLEY ONSLOW MP
1600 MICHAEL ALISON MP, BARONESS COX, S/S EDUCATION
+ AH + BG
RETURN TO NO.10
1630 Week Ahead Meeting
1715-1800 Home Secretary + NLW
Change
1905 DEPART NO.10
STATE BANQUET + DT - WINDSOR

Wednesday 13 April
0900 Interview with Woman Magazine + TP
1000 Keep free for NLW
1130 Sir Julian Bullard + CDP
1200 Australian Parliamentarians + CDP
1245 for
1315 Lunch in honour of the King of Norway - No.10
1530 Baroness Platt + PAB
1600 E(ST)
1700-1800 Keep free for CDP

Grey Scale #13



A 1 2 3 4 5 6 **M** 8 9 10 11 12 13 14 15 **B** 17 18 19

