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Submission to Department of Health          30 November 2016

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November 2016.

Human Life International Ireland

in association with

Ask Majella Crisis Pregnancy Counselling Agency

Written Submission on the Proposal to Regulate Counsellors and Psychotherapists

under the Health and Social Care Professionals Act 2005

Public Consultation,

Professional Regulation Unit,

Department of Health,

Hawkins House,

Dublin 2, D02 VW90.
Dear Sir/Madam,

Preliminary Comments

1. Human Life International Ireland/Ask Majella only first discovered the Invitation to Submit in the Public Consultation process on this subject when it was brought to our attention through reports of the debate at Second Stage of the Private Member’s Bill by Deputy Brendan Howlin, the Health and Social Care Professionals (Amendment) Bill 2016, Thursday, November 17, 2016, 5.48 P.M.

The aim of Deputy Howlin’s Bill is to have added to the list of professionals recognized by the State, that of “crisis pregnancy counsellor”. The invitation was issued on August 31, 2016.

It was noted by Deputy Mattie McGrath, Independent for Tipperary, during the debate on Second Stage that the mention by Minister Harris of that Invitation to Submit was the first he had heard of it.

This submission is also a response to Deputy Howlin’s bill.

2. We at Human Life International Ireland/Ask Majella have, over the past sixteen years of our pregnancy work’s existence, written three times to a Minister of Health to meet and discuss our work. Twice we wrote to then-Minister Micheál Martin, once to then-Minister Mary Harney. All three requests were declined. Minister Harney was at the time criticising in public the so-called “rogue” crisis pregnancy agencies – a term we reject in the strongest possible terms. A request to meet the Crisis Pregnancy Agency at that time was also declined.

3. The origin of Deputy Howlin’s Bill was purported to be outrage at allegedly unfounded claims being made to an undercover reporter posing as a lady with an unplanned pregnancy. The claims were reportedly made by a counsellor from a certain crisis pregnancy agency in Dublin.

An account of the interview was published in The Times Online edition, for Monday, September 5, 2016, and it was given an airing on RTÉ 1, Radio and TV that same day, on several programmes.
4. One of the claims made by the counsellor was that there is a strong link between having an abortion and developing breast cancer, and another was that a woman who has an abortion is at increased risk to abuse (definition below) other children in the same family. Human Life International Ireland / Ask Majella are speaking for ourselves alone in this Submission.

Nevertheless we, in fact, agree with those claims, and we append the Chinese meta-analysis supporting the claim on cancer; there is a clear and undeniable link between abortion and breast cancer.

We refer you to the major study by Canadian psychiatrist and child psychologist, Dr Philip G. Ney, whose work, Deeply Damaged (Pioneer Publishing: Victoria, Vancouver 1997; 3rd Edition 2015) deals thoroughly with the whole issue of abuse, and agrees essentially on that with the counsellor from The Women’s Centre.

See also Philip Ney: “Relationship Between Abortion and Child Abuse,” Canadian Journal of Psychiatry 24:610-20 (1979), (“Abuse in this context means: 1) death, serious physical or emotional harm, sexual abuse or exploitation; or 2) An act, or failure to act, which presents an imminent risk of serious harm.)

Dr Philip G. Ney and his wife, Dr Marie Peeters-Ney have set up a number of organizations that deal with several issues arising from abortion. They have branches in several countries around the world.

5. Programmes broadcast on RTÉ 1, TV and Radio, on Monday, September 5, 2016, interviewed only medical experts who don’t accept the peer reviewed published data re breast cancer and child abuse re breast cancer and child abuse. Minister Simon Harris featured on some of those programmes and declared himself to be “alarmed” and “sickened” at those claims.

We notice the absence of comment, criticism or any action from the Government following the exposure in 2012 of IFPA counsellors encouraging women to lie to conceal their abortions from Doctors (which could endanger the lives of women if post-abortion complications were to arise).

Women were also told how to get illegal abortion pills. The Government, by its silence on those reckless practices, undermines its claim that it is concerned for the safety and welfare of vulnerable women.
We also note the monetary arrangement between the IFPA, the Irish Government and sources abroad seeking to liberalise abortion laws in Ireland, and question the influence of such arrangements on this Bill and indeed all aspects of the 8th Amendment Debate.

6. Missing from the picture was the fact that there was a direct connection between Deputy Brendan Howlin’s Labour Party, and one of the medical experts whose opinion was aired on RTÉ on that day, Monday, September 5, 2016. We refer to Dr Peter Boylan, President of the Institute of Obstetricians and Gynaecologists.

Dr Boylan, in fact, helped to draft the Labour Party policy on the Repeal of the 8th Amendment, and attended the launch of that policy before in the run-up to the last General Election.

7. We are well aware that Minister Simon Harris is favourable to a Repeal of the 8th Amendment, and specifically in relation to life-limiting conditions, or ‘fatal foetal abnormalities’ - a non-medical and undefinable term used by those who favour further liberalisation of the law on abortion.

That said, as Minister for Health, he is Minister for Health for all the people of this Republic, and not just for those with whom he agrees politically.

Justice, due process and prudence demands that he listen to the other side.

Technicalities and Issues around Regulation

8. In a letter dated May 20, 2014, addressed to Mr Tom Jordan- (Chair of Health & Social Care Professionals Council CORU) the then Minister for Health, Dr James Reilly asked CORU for their opinion on regulation. We have read CORU’s “Response to Minister for Health on Regulation of Counsellors and Psychotherapists”.

9. The complexities identified in the report were considerable and Minister Harris, himself, during the Second Stage debate of Deputy Howlin’s Bill, identified a number of substantial problems with the Bill. Given his issues with the Bill and the complexities outlined by CORU, it appears that Minister Harris’s main reason for supporting the Bill is ideological rather than being based on something that is readily achievable, or prudent even, in the short term.

10. It is to be noted that Minister Harris in ‘Public Consultation – Submissions invited’ Proposals [page 2 of 4] has already rejected one of the main suggestions made in the CORU Report [(e), p. 10], namely that the two-step approach would expedite
the registration of the professionals in question.

11. We note in the CORU Report [pp. 11–12] that the attempt in the UK to register Counsellors and Psychotherapists there has not materialized.

12. We wonder who exactly would be qualified to assess the qualifications of a crisis pregnancy counsellor, or what objective criteria could be used to decide what qualifications are required? [Question 6, CORU Report, p. 15].

13. We also question the haste with which Minister Harris is keen to proceed, given the admission on p. 18 of the CORU Report that the regulation of Psychologists, including Counselling Psychologists, is not yet complete.

14. We are informed on p. 19 of the CORU Report under Europe that ‘Psychotherapists are being regulated in a number of European Countries, but not Counsellors.’ There have been difficulties in the United Kingdom [p. 20]. Austria does not regulate either Counsellors or Psychotherapists [p. 21]. A mixed approach is in evidence in Canada [p. 21], and in that country Pastoral Counsellors have been exempted [p. 22]. New Zealand doesn’t regulate Counsellors [p. 23].

15. Traditionally psychology, and psychiatry even, have been seen by many commentators as ‘soft sciences’. It is of significance that in the Republic of Ireland one may not become a psychiatrist unless one has already been awarded a medical degree. In the U.S., in several States at least, one doesn’t need a medical degree in order to become a psychiatrist.

16. Even in the harder sciences, it is clear that fashions have come and gone over
the decades. For example, Decades ago people were being advised to eat margarine and not butter. It is widely accepted now that butter is less dangerous to one’s health than is margarine.

A debate is raging about whether statins are of any help in combating bad cholesterol. Not so long ago the general public were advised not to eat more than 3 eggs a week. Then that changed to 1 egg a day, and most recently we are being told that 2 eggs a day will do you no harm.

Though diabetes sufferers generally are still advised to take the blood sugar tablets and the statin, if they have Type 2 Diabetes, or to inject insulin if they have Type 1 Diabetes, there is a growing trend in advising a dietary approach and exercise, rather than either tablets or insulin injections. We all learn from a very young age that ‘doctors differ, and patients die.’

17. A word of caution about excessive reliance on psychology. The U.S. Catholic writer on spirituality, Fr Benedict J. Groeschel, CFR, (founder of the Congregation of the Franciscan Friars of the Renewal who have houses in Limerick and Derry) held a Ph.D. in Psychology from the University of Columbia, New York City, commented that much of what he was taught at Columbia flatly contradicted what he believed as a Catholic about the human being.

Accordingly, though Fr Groeschel considered psychology a useful tool, he cautioned that it has its limits. “What is ‘dogma’ today in psychology,” he said, “will be old hat in 6 months time.” Those who put their trust in such transient guides, simply do not trust in the scientific method. They believe in scientism rather than science. They approach science as if it were always and in all circumstances absolute truth.

18. Some methods or approaches, that are current at present in psychology, too often are absolutized. One such method is ‘the non-directive approach’. That, in practice, is a fiction. No approach is genuinely non-directive. Implicit in it is the idea that there are no absolutes in the context of right and wrong. Even the claim that an approach can be non-directive, is in itself directive. It judges that directive approaches are wrong because they are directive. But the Principle of Non-Contradiction, an essential principle in logic, and accordingly in science true to its name, is that something cannot be, and not be, at the same time.
19. In general, psychology as it is practised in the Republic of Ireland, and in much of the Western World, claims to be non-directive. But psychologists of that persuasion tend to go further, and to reject as false psychology the directive approach.

20. We in Human Life International Ireland/Ask Majella are unashamedly directive. We believe that certain things are always unethical, morally wrong, and that we’d be failing our clients if we were to suggest otherwise to them. We are upfront in our life-affirming approach.

At the same time, we are decidedly non-judgemental. It is not up to us to decide the guilt or innocence of those women who reject our advice on abortion, and go ahead and have the abortion; or those women, who after having an abortion, come to us seeking counselling. In that way we are trying our best to follow the teaching of Jesus Christ himself: ‘Judge not, that you be not judged’ [Matthew 7: 1].

21. We in Ask Majella do not recommend or refer for abortion. We give evidenced based information on the adverse effects of induced abortion on women’s health to help the client make as fully informed decision as possible. We deal with all women in a caring professional and compassionate manner. We help them explore their situation in a calm relaxed fully informed manner. We recognise two patients the mother and her unborn baby.

We have personnel qualified in gynaecology, obstetrics, nursing, public health, counselling, natural family planning, marriage counselling, ultrasound scanning, pharmacy and post abortion counselling. We take a “total package” approach, accompanying a woman before, during and after the birth of her child, integrating with all other ancillary services.

We all have a duty to do all we can to build a society that cares for all. Therefore those who make our laws have a moral duty to uphold the uniqueness and sacredness of every human life from conception to natural death. Without the right to life all other rights are meaningless.

22. We stand by our Constitutional rights in Bunreacht na hÉireann to freedom of expression, Article 6.1°.i; freedom of conscience, the profession and practice of religion, Article 44.2.1°; and in this context especially, the freedom from disabilities and discrimination on the ground of religious profession, belief, or status, Article 44.2.3°

23. We draw to your attention that conscientious objections were recognized in the Health (Family Planning) Act 1979, Section 11, but note with alarm
that conscientious objection was restricted, possibly in an un-Constitutional way, in the Protection of Life During Pregnancy Act 2013, section 17. (2), and (3).

24. If it is the intention of the Government to ban our work, unless we submit to conditions that go against our Constitutional freedoms as enumerated in points 22 and 23, we must make you aware that we will resist by every legal means at our disposal.

25. The 8th Amendment* to the Constitution is still in operation and all people, organisations and government are obliged to respect and uphold it. The government has a solemn duty and special role in upholding the Constitution. The work of Ask Majella upholds the Amendment in that it acknowledges the rights of and seeks to encourage others to protect the unborn child.

In a time where special regard is placed on protecting the rights of minorities, surely unborn children are the most vulnerable minority especially worthy of our advocacy and protection. We believe everyone has the right to be born – and not to be deliberately killed before birth - and this inherent right is not contingent on a third party.

Ask Majella must be allowed to continue its directive, lifesaving work. In truth, many clients have come to us adamantly abortion-minded, only later to be delighted they kept their baby. Too many have regretted their abortion. Let us as a society be caring and big hearted enough to give every person a chance of life.

26. As well as this our submission, we hereby request a meeting with Minister Simon Harris to discuss these issues.

Yours Sincerely,

Patrick McCrystal
BSc Pharmacy
Executive Director
Human Life International (Ireland)

Submission emailed and hand delivered.
Attached; Chinese meta-analysis on abortion and breast cancer.

*The State acknowledges the right to life of the unborn and, with due regard to the equal right to life of the mother, guarantees in its laws to respect, and, as far as practicable, by its laws to defend and vindicate that right.

**Studies**

**Induced Abortion and Increased Risk of Breast Cancer**

Out of 74 studies from 1957 to 2013 56 concluded a link between induced abortion and an increase risk in developing breast cancer. That is 75%.

[http://www.bcpinstitute.org/epidemiology_studies_bcpi.htm](http://www.bcpinstitute.org/epidemiology_studies_bcpi.htm)

Two of the most recent studies:

**Study 1**

*Abortion and the Risk of Breast Cancer: Information for the Adolescent Woman and Her Parents*

**Author:** Jane Anderson, MD, FCP

**The American College of Pediatricians – December 2013**

**Conclusion:**

Evidence suggests that IA prior to a full-term pregnancy contributes to the high rates of breast cancer seen around the world. The current studies demonstrating a dose-related association between pre-term induced abortion and breast cancer strongly suggest a causal effect. Although further study is warranted, this risk must be known by adolescent females. The American College of Pediatricians recommends that all medical professionals provide this information as part of complete health care to all adolescents and their parents. It is important that parents reinforce this information to their daughters. All health educators should include this information in any health/sexuality education class in which abortion is discussed.
Study 2

A meta-analysis of the association between induced abortion (IA) and breast cancer risk among Chinese females

Cancer Causes & Control

February 2014, Volume 25, Issue 2, pp 227–236

Authors

Yubei Huang, Xiaoliang Zhang, Weiqin Li, Fengju Song, Hongji Dai, Jing Wang, Ying Gao, Xueou Liu, Chuan Chen, Ye Yan, Yaogang Wang, Kexin Chen,

Conclusion

IA is significantly associated with an increased risk of breast cancer among Chinese females, and the risk of breast cancer increases as the number of IA increases. If IA were to be confirmed as a risk factor for breast cancer, high rates of IA in China may contribute to increasing breast cancer rates.