

Appendix B

Consultation on a Public Spaces Protection Order for the Rosslyn Road area

Results Report

1. Introduction

This report sets out the key findings from the consultation on a Public Spaces Protection Order (PSPO) for the Rosslyn Road area, which ran for six weeks from 29th October to 9th December 2018.

2. Executive summary

There were 3011 responses to the consultation and 1152 additional emails, calls and letters. This report provides detailed analysis of the consultation results. All additional responses are listed in Section 8 and Appendices.

Of those respondents who told us the capacity in which they were responding, almost seven in ten (69%) live in the borough of Richmond upon Thames. 11.6% live inside the proposed buffer zone and 57.7% outside of the zone but within the borough. This corresponds with the postcodes given by respondents, of which 72% are Richmond borough postcodes. Over four in ten (42%) can be categorised as 'directly affected' by the introduction of a buffer zone as per the proposed PSPO.

The headline results of the consultation include:

- Over eight in ten respondents (81%) agreed or strongly agreed that protestor/vigil holders' behaviours have had a detrimental effect on them or others in the local area. Of directly affected respondents, this rises to 88%.
- Eight in ten respondents (80%) agree with the proposal to implement a buffer zone. Of directly affected respondents, this rises to 88%.
- Seven in ten respondents (71%) agree with the boundaries of the proposed buffer zone, rising to 80% of those directly affected.
- Over eight in ten respondents (82%) disagreed with the option to introduce a designated area.

Appendix B

3. Background

The purpose of this consultation was to gather views on a proposal to introduce a Public Spaces Protection Order (PSPO), to address the concerns about the protests/vigils outside the British Pregnancy Advisory Service (BPAS) Clinic in Rosslyn Road, Twickenham.

The consultation sought the views of those who are or may be affected by the protests/vigils and/or the introduction of a PSPO, and other stakeholders. This included those in the locality such as local residents, passers-by or those who work in the area, clients of the BPAS Clinic, protestors/vigil holders, local stakeholders, key partners specifically the BPAS Clinic and The Good Counsel Network, and statutory consultees.

4. Methodology

Data was gathered using an online survey hosted on the Richmond Council website. To ensure the consultation gave equal opportunity to all those who might want to submit responses in different ways and different formats, the online survey was also made available as a paper copy and a dedicated Rosslyn Road PSPO consultation e-mail address was created and publicised under ConsultationRosslynRoad@richmond.gov.uk.

Paper copies of the survey were available at the BPAS Clinic, ETNA Community Centre, Civic Centre Twickenham, and by post on request. The consultation materials and questionnaire are included in Appendices A and B of this report.

To ensure the consultation was widely publicised, the Council promoted the consultation in a variety of ways prior to and during the consultation, including:

- A press release and online version on the Council's homepage entitled "Have your say on proposed BPAS Clinic PSPO", which was released on the day the consultation opened (29th October 2018)
- A further press release was issued near the end of the consultation on 27th November 2018 entitled "Still time to have your say on BPAS Clinic PSPO proposals"
- An associated social media campaign on the Council's Twitter account and Facebook page. This included regular tweets and postings throughout the consultation period
- Hand delivery of a covering letter, a copy of the proposed buffer zone and the draft Order (Appendix A) to 1,668 households and properties within and just outside the proposed PSPO buffer zone area. These were delivered on 30th October 2018
- An e-mail sent to all borough councillors with the consultation documents
- E-mails with a link to the consultation sent to key stakeholders, interested parties and statutory partners including:
 - Richmond Police
 - Reclaim Rosslyn Road campaigners
 - The Good Counsel Network
 - Vince Cable MP
 - Zac Goldsmith MP
 - Twickenham Park GP Surgery
 - Twickenham Park Residents Association
 - East Twickenham Village Group

Appendix B

- Promotion of the consultation by local Community Engagement officers through social media and at the East Twickenham Village Group meeting

The consultation was open to all and respondents were asked for their full postcode and the capacity in which they were responding, to help the Council understand any impact on people in the local area.

The consultation responses were analysed and reported by the Council’s Consultation Team on an anonymous basis under the guidelines of the Data Protection Act. The Consultation Team are qualified researchers and certified members of the Market Research Society, bound by the MRS Code of Conduct when conducting research. The team are also members of The Consultation Institute, a consultation best practice institute, which promotes high-quality public and stakeholder consultation.

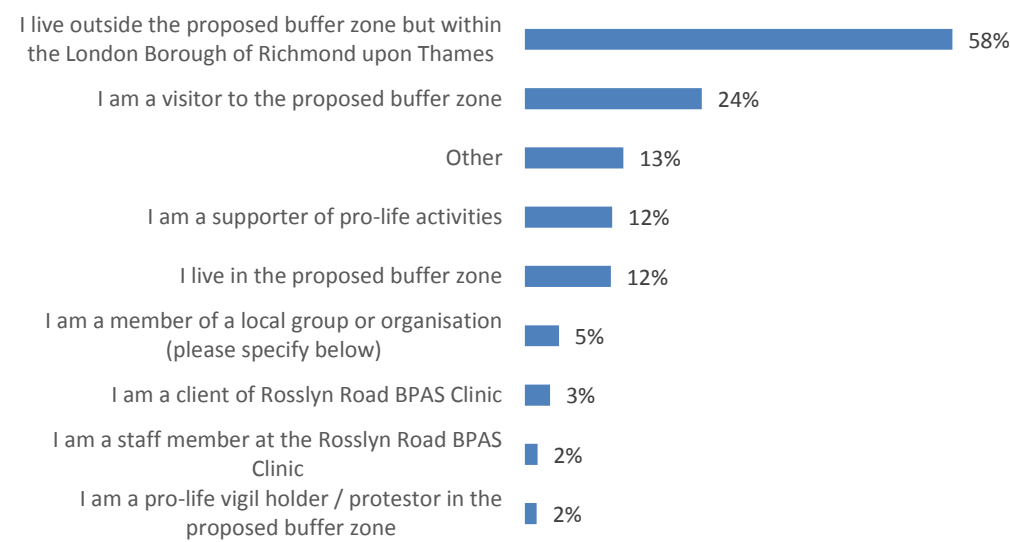
5. Response

In total, the Council received 3011 responses to this consultation. 2989 of these responses were completed online and a further 22 were completed on paper. A demographic profile of respondents can be found in Section 7 of this report.

The Council also received a number of other responses via email and letter. Further detail on these can be found in Section 8.

6. Results

Question 1: In what capacity are you responding to this consultation?



Appendix B

There were 2,941 responses to this question.

The largest group of respondents (58%) live outside of the proposed buffer zone but within the London Borough of Richmond upon Thames. A quarter (24%) are visitors to the proposed buffer zone and 12% of respondents live inside the zone. A further 12% are supporters of pro-life activities.

In what capacity are you responding to this consultation?		
Response	Number of respondents to this question	Percentage of respondents to this question
I live outside the proposed buffer zone but within the London Borough of Richmond upon Thames	1697	57.7%
I am a visitor to the proposed buffer zone	703	23.9%
Other	391	13.3%
I am a supporter of pro-life activities	346	11.8%
I live in the proposed buffer zone	342	11.6%
I am a member of a local group or organisation	135	4.6%
I am a client of Rosslyn Road BPAS Clinic	101	3.4%
I am a staff member at the Rosslyn Road BPAS Clinic	51	1.7%
I am a pro-life vigil holder / protestor in the proposed buffer zone	47	1.6%

NB Respondents were able to select more than one option, so percentages add up to more than 100

Those who selected 'I am a member of a local group or organisation' or 'other' in response to this question were provided with a free-text box to specify. 594 people responded, and their answers fall into the following categories:

- Women's Equality Party
- Pro-choice supporter
- BPAS Clinic staff
- Use the GP surgery next door to the BPAS Clinic
- A concerned citizen
- A member of a local resident group/organisation
- A woman
- Use the ETNA Community Centre
- A former BPAS client
- Supporter of free speech
- Supporter/family member/friend of former BPAS client
- Member or supporter of pro-life/religious organisation
- Work in the buffer zone
- Member of a political party/local councillor
- Member or supporter of Reclaim Rosslyn Road group

Categories of response

The first legal test for the introduction of a PSPO is to demonstrate whether activities are having a detrimental effect on the quality of life of those in the locality. For this reason, the

Appendix B

responses to the main questions (4, 7 and 8) have also been considered by the following respondent sub-groups:

1. Those directly affected by the introduction of a buffer zone
2. Those potentially affected by the introduction of a buffer zone
3. Those not directly affected by the introduction of a buffer zone

The three groups consist of the following:

- 1. Those directly affected by the introduction of a buffer zone**
 - I am a client of Rosslyn Road BPAS Clinic
 - I am a staff member at the Rosslyn Road BPAS Clinic
 - I live in the proposed buffer zone
 - I am a visitor to the proposed buffer zone
 - I am a pro-life vigil holder / protestor in the proposed buffer zone
- 2. Those potentially affected by the introduction of a buffer zone**
 - I am a member of a local group or organisation
 - Other
- 3. Those not directly affected by the introduction of a buffer zone**
 - I live outside the proposed buffer zone but within the London Borough of Richmond upon Thames
 - I am a supporter of pro-life activities

Please note that respondents were able to select more than one option when answering this question.

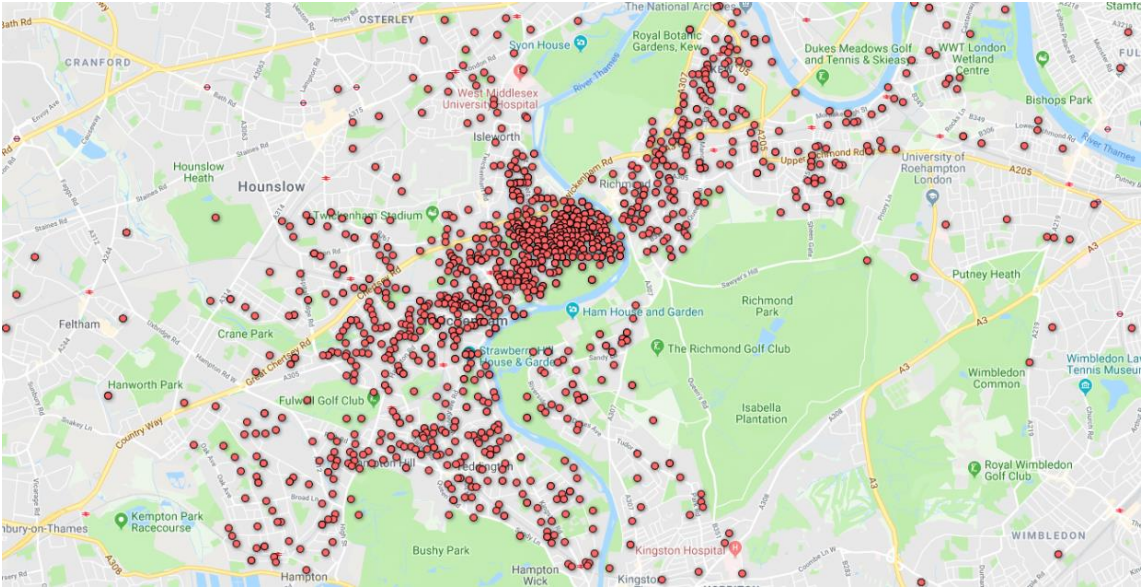
Question 2: What is your postcode?

There were 3,011 responses to this question. The postcodes provided were used to create a map illustrating where people were responding from. The map below shows the distribution of the responses across the United Kingdom:



Appendix B

The map below shows the distribution of responses from the London Borough of Richmond upon Thames area:



2,180 responses (72%) came from postcodes within the London Borough of Richmond upon Thames.

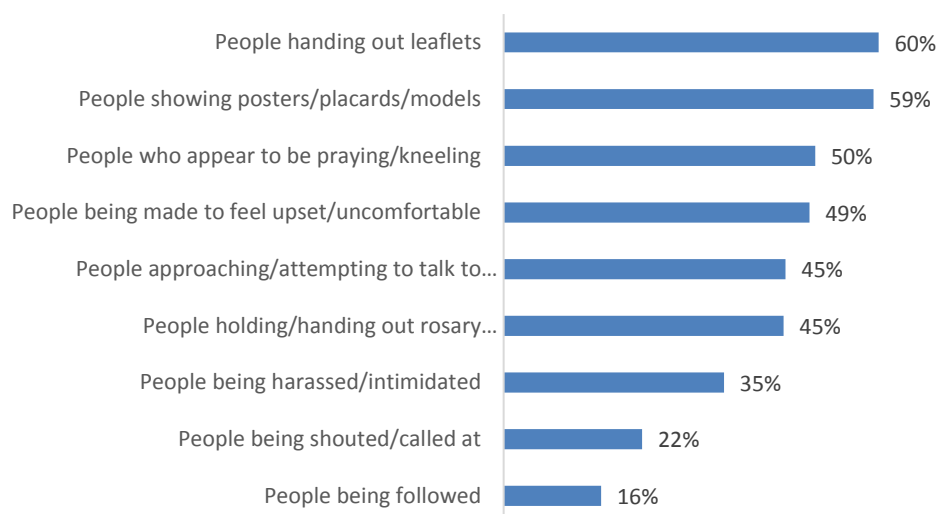
1,383 responses (46%) came from postcodes in either St. Margaret’s and North Twickenham ward or Twickenham Riverside ward, the two wards in which the proposed buffer zone would be located.

The table below shows that the majority of in-borough responses came from the TW1 postcode area:

Response	Number of respondents to this question	Percentage of respondents to this question
TW1	1434	47.6%
TW2	209	6.9%
TW9	128	4.3%
TW11	126	4.2%
TW10	107	3.6%
TW12	79	2.6%
SW14	43	1.4%
SW13	29	1.0%
KT1	7	0.2%
TW3	7	0.2%
SW15	6	0.2%
Other	5	0.2%

Base: 2,180 in-borough responses

Appendix B

Question 3: Have you come across any of the following behaviours in the proposed buffer zone?

Base: all respondents to the consultation (3011)

The behaviours seen most commonly were 'people handing out leaflets' and 'people showing posters/placards/models' which were mentioned by almost six in ten respondents to the consultation (60% and 59% respectively). Half of consultation respondents had also seen 'people who appear to be praying/kneeling' (50%) and 'people being made to feel upset/uncomfortable' (49%).

Response	Yes (number)	Yes (% of base)	No (number)	No (% of base)	Don't know (number)	Don't know (% of base)
People handing out leaflets (Base: 2797 responses)	1794	64.1%	551	19.7%	452	16.2%
People showing posters / placards / models (Base: 2782 responses)	1771	63.7%	570	20.5%	441	15.9%
People who appear to be praying / kneeling (Base: 2723 responses)	1489	54.7%	685	25.2%	549	20.2%
People being made to feel upset / uncomfortable (Base: 2760 responses)	1464	53.0%	753	27.3%	543	19.7%
People approaching/attempting to talk to clients, staff etc (Base: 2718 responses)	1350	49.7%	759	27.9%	609	22.4%
People holding/handing out rosary beads/necklaces with crosses (Base: 2698 responses)	1341	49.7%	749	27.8%	608	22.5%
People being harassed / intimidated (Base: 2681 responses)	1053	39.3%	949	35.4%	679	25.3%
People being shouted / called at (Base: 2628 responses)	661	25.2%	1242	47.3%	725	27.6%
People being followed (Base: 2607 responses)	467	17.9%	1297	49.8%	843	32.3%

NB Percentages are % of individual bases NOT of all consultation responses

Appendix B

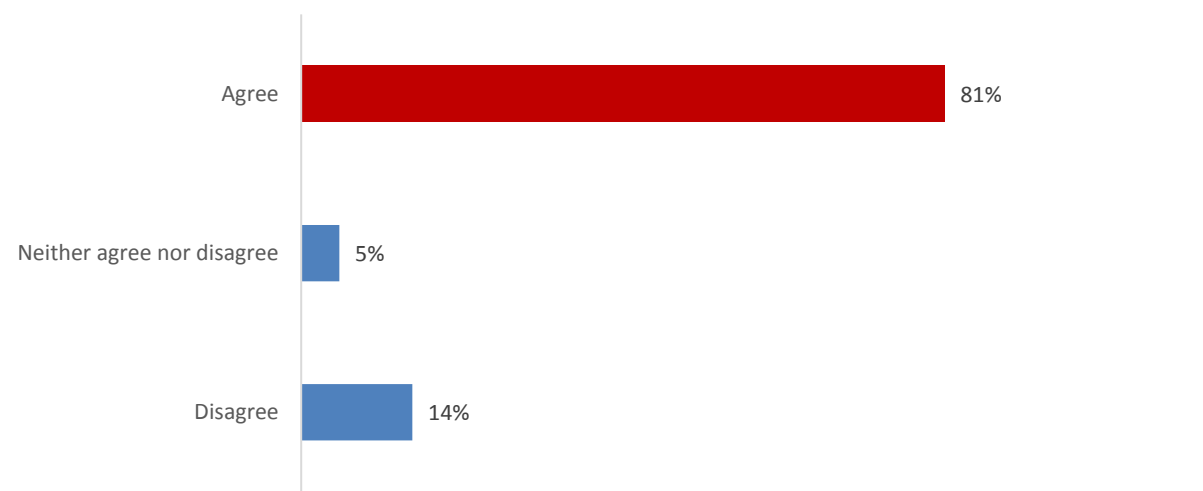
In the 'other' box beneath this question 295 respondents gave a comment. When these comments were analysed, 21 themes were identified. These are illustrated in the table below.

Theme	Number of comments
Theme 1 - Seen people being harassed / intimidated	34
Theme 2 - Respondent does not use / rarely uses this area	31
Theme 3 - Respondent has not seen behaviour, but has read / heard about it, seen photos etc	25
Theme 4 - Protestors blocking the pavement / entrance to the clinic	22
Theme 5 - People being made to feel upset / uncomfortable	22
Theme 6 - People approaching / attempting to talk to clients, staff etc	21
Theme 7 - There is no harassment / vigil holders are peaceful, kind / offering help	19
Theme 8 - People who appear to be praying/kneeling	18
Theme 9 - People handing out leaflets	14
Theme 10 – Respondent / others have tried to intervene / speak to / challenge the protestors	13
Theme 11 - The protestors / vigil holders sing / chant	12
Theme 12 - Protestors are harassed / shouted at	11
Theme 13 - Comments that the images shown can be graphic	10
Theme 14 – respondent has not seen the behaviours listed	9
Theme 15 - People showing posters / placards/models	9
Theme 16 - People being followed	8
Theme 17 – Respondent has seen some / all the behaviours listed	8
Theme 18 - Protestors / vigil holders watch / stare at clients, staff, passers-by, residents in their homes etc	8
Theme 19 - People being shouted / called at	7
Theme 20 - Images are difficult to explain to / may confuse or upset young children	6
Theme 21 - Photos / films of staff /clients / clinic building being taken	6

NB respondents may make comments under more than one theme, so numbers of comments will not add up to number of respondents

Appendix B

Question 4: If you have come across these behaviours, to what extent do you agree or disagree that they have had a detrimental effect on you or others in the local area?



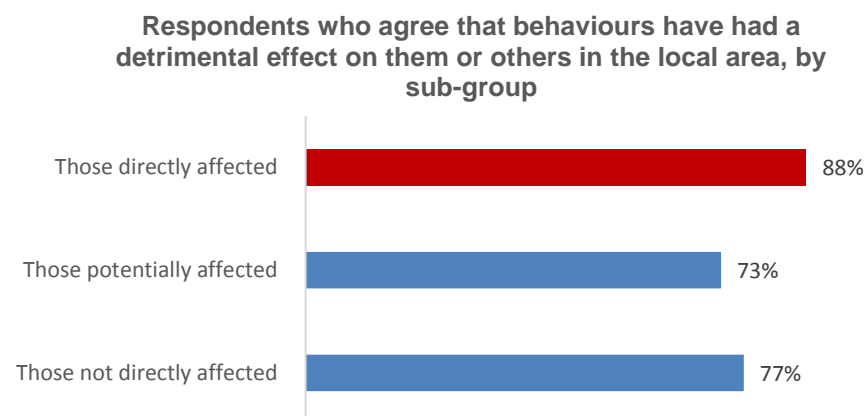
There were 2,500 responses to this question. Over eight in ten respondents (81%) agreed or strongly agreed that the behaviours have had a detrimental effect on them or others in the local area.

If you have come across these behaviours, to what extent do you agree or disagree that they have had a detrimental effect on you or others in the local area?		
Response	Number of respondents to this question	Percentage of respondents to this question
Strongly agree	1803	72.1%
Agree	216	8.6%
Neither agree nor disagree	120	4.8%
Disagree	79	3.2%
Strongly disagree	282	11.3%

As explained in Section 1, the responses to this question have also been considered by respondent sub-group.

The chart below shows that 88% of those directly affected agree that the observed behaviours have had a detrimental effect on themselves or others in the local area.

Appendix B



Response	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
Those directly affected (1157)	925 (79.9%)	92 (8.0%)	21 (1.8%)	24 (62.6%)	95 (8.2%)
Those potentially affected (304)	199 (65.5%)	22 (7.2%)	28 (9.2%)	16 (5.3%)	39 (12.8%)
Those not directly affected (1003)	670 (66.8%)	100 (10.0%)	67 (76.5%)	34 (3.4%)	132 (13.2%)

Question 5: If you answered 'strongly agree' or 'agree' to Question 4, which of the behaviours do you consider have had the most detrimental effect on you or others in the local area?

There were 2,053 responses to this question. The most common responses were 'people being made to feel upset/uncomfortable', selected by eight in ten respondents (83%), and 'people being harassed/intimidated' (75%).

Response	Number of respondents to this question	Percentage of respondents to this question
People being made to feel upset / uncomfortable	1708	83.2%
People being harassed / intimidated	1543	75.2%
People approaching/attempting to talk to clients, staff etc	1415	68.9%
People showing posters / placards / models	1414	68.9%
People being shouted / called at	1104	53.8%
People holding / handing out rosary beads/necklaces with crosses	1061	52.7%
People who appear to be praying / kneeling	994	48.4%
People being followed	887	43.2%
People handing out leaflets	879	42.8%
Other	108	5.3%

NB Respondents were able to select more than one option, so percentages add up to more than 100

Appendix B

The 'other' box below question 5 was used by 164 respondents to specify other behaviours. When these responses were analysed, ten key themes were identified. These are illustrated in the table below.

Themes	Number of comments
Theme 1 - People being harassed / intimidated	32
Theme 2 - All behaviours are detrimental	27
Theme 3 - Do not like the general presence of protestors in this area	21
Theme 4 - People being made to feel upset / uncomfortable	12
Theme 5 - People approaching / attempting to talk to clients, staff etc	10
Theme 6 – People who mention they / others feel judged	9
Theme 7 - People handing out leaflets	8
Theme 8 - People showing posters / placards/models	8
Theme 9 - There is no harassment / vigil holders are peaceful / kind / offering help	8
Theme 10 - Protestors / vigil holders watch / stare at clients, staff, passers-by, residents in their homes etc	5

NB respondents may make comments under more than one theme, so numbers of comments will not add up to number of respondents

Respondents were invited to give any further comments about how observed behaviours have affected themselves or others. There were 1,334 responses to this part of the question. When the comments were analysed, 14 key themes were identified. These are illustrated in the table below.

Themes	Number of comments
Theme 1 - People being harassed / intimidated	544
Theme 2 - People being made to feel upset / uncomfortable	537
Theme 3 - Clients are (already) going through an emotional / vulnerable time (difficult decision to make) / would have already reflected/given serious thought etc	355
Theme 4 - Descriptions of protestors' / vigil holders' behaviours (handing out leaflets, displaying posters, approaching people etc)	211
Theme 5 - People are entitled to access healthcare / workplace privately / without harassment / should be protected / protestors have no right to interfere	193
Theme 6 - Abortions are legal form of healthcare / women have the right to choose	129
Theme 7 - Respondent attends the GP surgery nearby	129
Theme 8 - People who mention they / others feel judged	126
Theme 9 - Children observing protestors' / vigil holders' unusual behaviour / seeing inappropriate images (they ask questions, are upset/confused as a result etc)	99
Theme 10 - There is no harassment or effect / vigil holders are peaceful, kind, offering help	77
Theme 11 - Respondent / others have tried to intervene / speak to / challenge protestors	38
Theme 12 - Protestors blocking the pavement / entrance to the clinic	32
Theme 13 - Protestors / vigil holders have a right to protest / hold a vigil	20
Theme 14 - Protestors / vigil holders watch / stare at clients, staff, passers-by, residents in their homes etc	17

NB respondents may make comments under more than one theme, so numbers of comments will not add up to number of respondents

Appendix B

Question 6: If you are a protestor / vigil-holder, have you come across any unwanted behaviour from any of the following groups in the proposed buffer zone?

Those respondents who had identified themselves as a pro-life vigil holder / protestor in Question 1 were asked whether they had come across any unwanted behaviour in the proposed buffer zone.

Over half of protestors / vigil-holders (59%) had come across unwanted behaviour from a member of the public. Eight people (20%) had experienced unwanted behaviour from a client or visitor of the BPAS Clinic.

Response	Yes (number)	Yes (%)	No (number)	No (%)	Don't know (number)	Don't know (%)
From a member of the public (44 responses)	26	59.1%	13	29.5%	5	11.4%
From a client or visitor of the Rosslyn Road BPAS Clinic (41 responses)	8	19.5%	26	63.4%	7	17.1%
From a member of another protesting group (43 responses)	3	7.0%	33	76.7%	7	16.3%
From an employee, agent or contractor of the Rosslyn Road BPAS Clinic (43 responses)	3	7.0%	31	72.1%	9	20.9%

Respondents were then provided with an 'Other, please specify' free-text box to give details of any unwanted behaviour from other groups.

Although there were three responses to this part of the question, it was not possible to theme the comments.

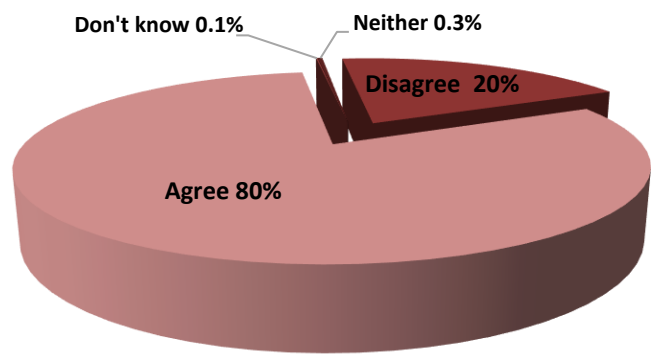
Respondents were then given a further free-text box to provide further detail on this behaviour. There were 21 responses and when the comments were analysed, two key themes were identified. These are illustrated in the table below.

Themes	Number of comments
Theme 1 – Being shouted at / verbally abused	13
Theme 2 – Intimidating / aggressive behaviour	7

NB respondents may make comments under more than one theme, so numbers of comments will not add up to number of respondents

Appendix B

Question 7: Do you agree or disagree with the proposal to implement a buffer zone?

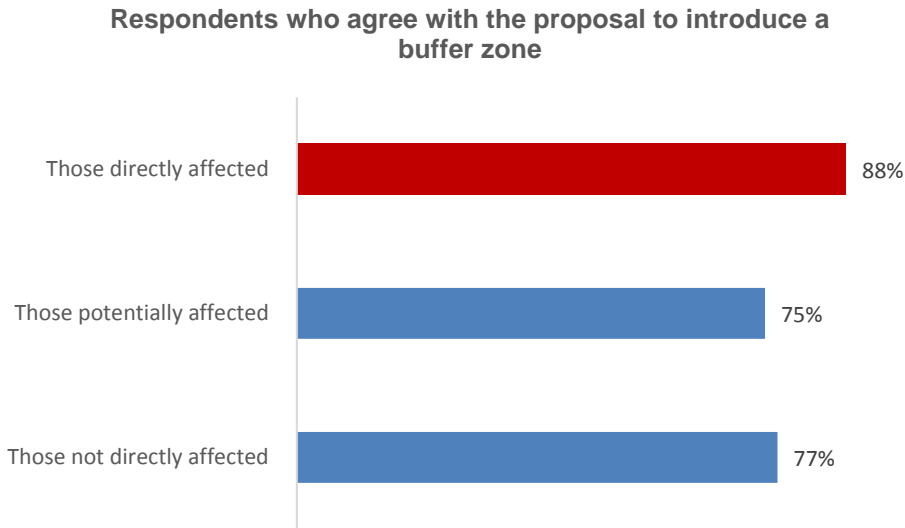


There were 2,965 responses to this question. Eight in ten respondents (80%) agreed with the proposal to implement a buffer zone. One fifth (20%) disagreed.

Do you agree or disagree with the proposal to implement a buffer zone?		
Response	Number of respondents to this question	Percentage of respondents to this question
Agree	2368	79.9%
Disagree	583	19.7%
Neither agree nor disagree	10	0.3%
Don't know	4	0.1%

As explained in Section 1, the responses to this question have also been considered by respondent sub-group.

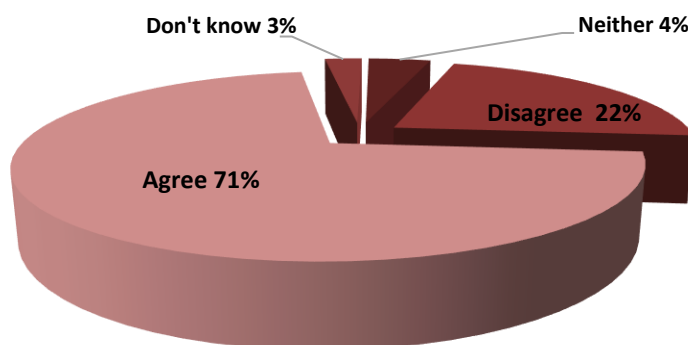
The chart below shows that 88% of those directly affected agree with the proposal to introduce a buffer zone.



Appendix B

Response	Agree	Neither agree nor disagree	Disagree	Don't know
Those directly affected (1181)	1042 (88.2%)	4 (0.3%)	133 (11.3%)	2 (0.2%)
Those potentially affected (401)	301 (75.1%)	3 (0.7%)	97 (24.3%)	0 (0.0%)
Those not directly affected (1315)	1013 (77.0%)	3 (0.2%)	297 (22.6%)	2 (0.2%)

Question 8: Do you agree or disagree with the boundaries of the proposed buffer zone in the Rosslyn Road area?



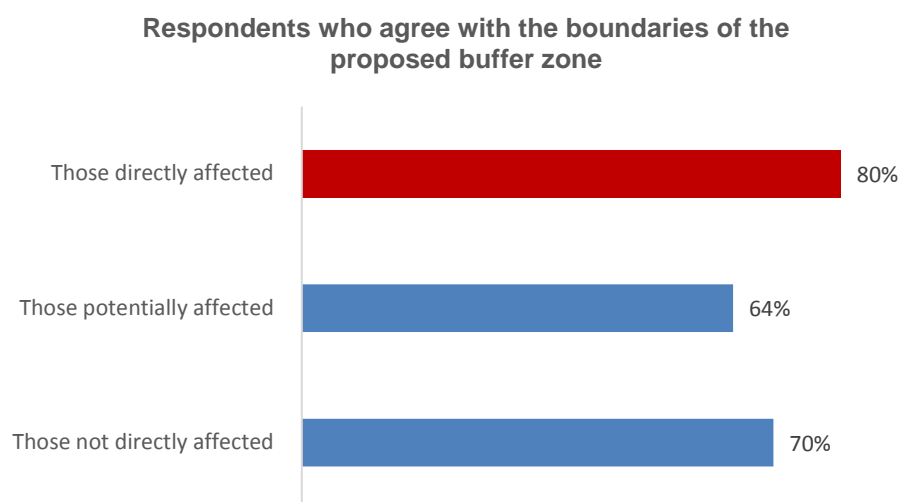
There were 2916 responses to this question. Seven in ten respondents (71%) agree with the boundaries of the proposed buffer zone.

Do you agree or disagree with the boundaries of the proposed buffer zone in the Rosslyn Road area?		
Response	Number of respondents to this question	Percentage of respondents to this question
Agree	2079	71.3%
Disagree	641	22.0%
Neither agree nor disagree	123	4.2%
Don't know	73	2.5%

As explained in Section 1, the responses to this question have also been considered by respondent sub-group.

The chart below shows that 80% of those directly affected agree with the boundaries of the proposed buffer zone.

Appendix B



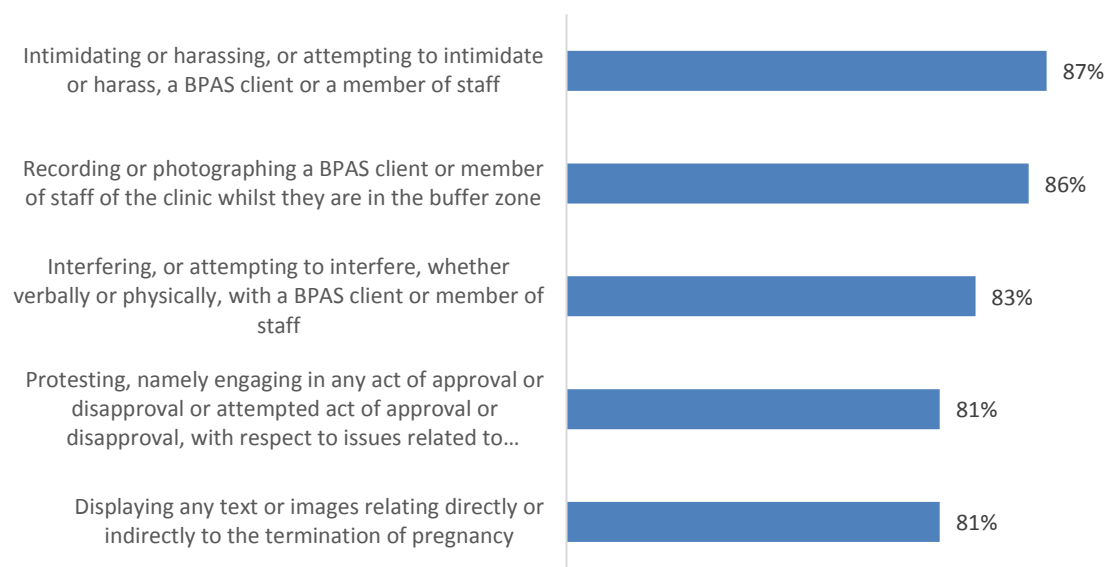
Response	Agree	Neither agree nor disagree	Disagree	Don't know
Those directly affected (1149)	907 (80.0%)	39 (3.4%)	181 (15.8%)	22 (1.9%)
Those potentially affected (397)	254 (64.0%)	29 (7.3%)	101 (25.4%)	13 (3.35%)
Those not directly affected (1306)	908 (70.0%)	54 (4.1%)	308 (23.6%)	36 (2.8%)

Respondents who disagreed with the proposed buffer zone were then asked to tell us why. There were 626 responses to this part of the question. When the comments were analysed, six themes were identified. These are illustrated in the table below.

Themes	Number of comments
Theme 1 – Disagree with proposed buffer zone / proposal affects free speech / civil liberties	187
Theme 2 - Buffer zone is very large / should be made smaller	145
Theme 3 - Buffer zone is too small / should be extended	118
Theme 4 - There is no harassment / vigil holders are peaceful / kind / offering help	102
Theme 5 - Public transport points (e.g. St. Margarets station and/or bus stops) should be included in buffer zone	48
Theme 6 - Queries why the BPAS clinic is not at the centre of the buffer zone/clinic is quite close to one end of zone	8

NB respondents may make comments under more than one theme, so numbers of comments will not add up to number of respondents

Appendix B

Question 9: Do you agree or disagree with each of the following proposed prohibitions in the buffer zone?

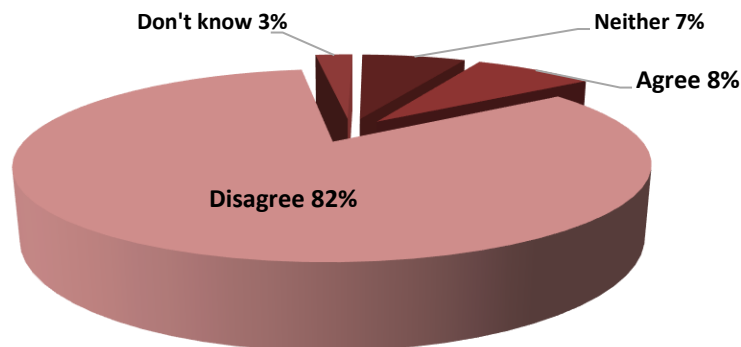
Support for each of the proposed prohibitions was very high, with over eight in ten respondents supporting each of the five prohibitions. The highest levels of support were seen for 'Intimidating or harassing, or attempting to intimidate or harass, a BPAS client or a member of staff' (87%) and 'Recording or photographing a BPAS client or member of staff of the clinic whilst they are in the buffer zone' (86%).

Response	Agree (number)	Agree (%)	Disagree (number)	Disagree (%)	Neither agree nor disagree (number)	Neither agree nor disagree (%)	Don't know (number)	Don't know (%)
Intimidating or harassing, or attempting to intimidate or harass, a BPAS client or a member of staff (2929 responses)	2546	86.9%	311	10.6%	55	1.9%	17	0.6%
Recording or photographing a BPAS client or member of staff of the clinic whilst they are in the buffer zone (2937 responses)	2534	86.3%	169	5.8%	206	7.0%	28	1.0%
Interfering, or attempting to interfere, whether verbally or physically, with a BPAS client or member of staff (2943 responses)	2453	83.4%	425	14.4%	47	1.6%	18	0.6%

Appendix B

Response	Agree (number)	Agree (%)	Disagree (number)	Disagree (%)	Neither agree nor disagree (number)	Neither agree nor disagree (%)	Don't know (number)	Don't know (%)
Displaying any text or images relating directly or indirectly to the termination of pregnancy (2952 responses)	2386	80.8%	492	16.7%	54	1.8%	20	0.7%
Protesting, namely engaging in any act of approval or disapproval or attempted act of approval or disapproval, with respect to issues related to abortion services (2961 responses)	2391	80.7%	543	18.3%	21	0.7%	6	0.2%

Question 10: One option would be to introduce a designated area for protesters/vigil holders to stand somewhere within the buffer zone. Do you agree or disagree with this option?

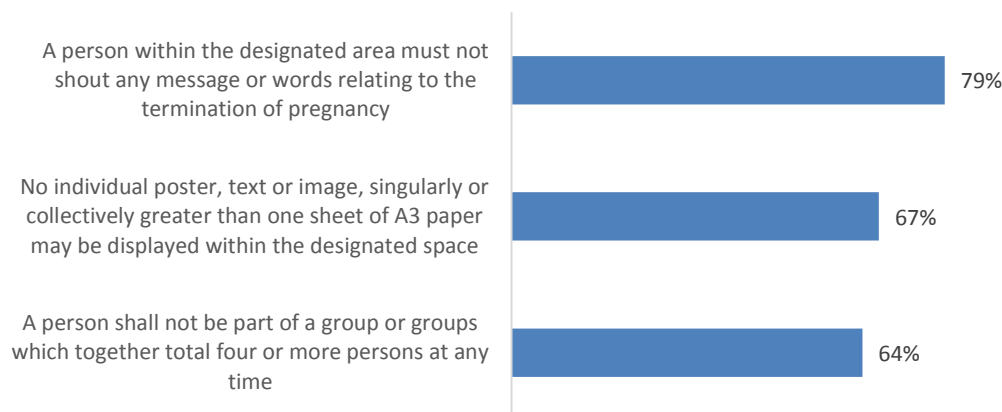


There were 2,911 responses to this question. Over eight in ten respondents (82%) disagreed with the option to introduce a designated area.

Response	Number of respondents to this question	Percentage of respondents to this question
Disagree	2382	81.8%
Agree	231	7.9%
Neither agree nor disagree	208	7.1%
Don't know	90	3.1%

Appendix B

Question 11: If a designated area were to be introduced, to what extent do you agree or disagree with each of the proposed restrictions listed below?



The highest levels of support were seen for the restriction 'A person within the designated area must not shout any message or words relating to the termination of pregnancy', which was supported by eight in ten respondents to this question (79.4%).

Restriction	Agree (number)	Agree (%)	Disagree (number)	Disagree (%)	Neither agree nor disagree (number)	Neither agree nor disagree (%)
A person within the designated area must not shout any message or words relating to the termination of pregnancy (2723 responses)	2161	79.4%	374	13.7%	188	6.9%
No individual poster, text or image, singularly or collectively greater than one sheet of A3 paper may be displayed within the designated space (2725 responses)	1835	67.3%	626	23.0%	264	9.7%
A person shall not be part of a group or groups which together total four or more persons at any time (2728 responses)	1753	64.3%	664	24.3%	311	11.4%

NB Base for percentages = number of responses to each restriction

Appendix B

Question 12: Is there anything we would need to consider regarding location if we were to introduce a designated area?

There were 1,360 responses to this part of the question. When the comments were analysed, 11 themes were identified. These are illustrated in the table below.

Themes	Number of comments
Theme 1 - Do not want designated area in buffer zone / undermines buffer zone / no suitable location	412
Theme 2 – Designated area should be out of sight / far away from the clinic, surgery, travel points etc	400
Theme 3 - Designated area should be located away from residential areas / consider disruption to local residents	135
Theme 4 - Disagree with proposed buffer zone / proposal affects free speech / civil liberties	95
Theme 5 - Designated area would still cause harassment, distress etc wherever it is located / just moves the problem	80
Theme 6 - Comments about the proposed restrictions within the designated area (if introduced)	78
Theme 7 - Suggestions of where the designated area / vigils could be located	76
Theme 8 - Designated area should be located close to / visible to the clinic	71
Theme 9 - Proximity of designated area to children or young people / should be located away from children or young people	62
Theme 10 - People being harassed / intimidated	41
Theme 11 - Enforcement issues/costs	36

NB respondents may make comments under more than one theme, so numbers of comments will not add up to number of respondents

Question 13: Do you think the proposed prohibitions may have an impact, either positive or negative, on any group of people with a protected characteristic under the Equality Act 2010?

There were 2895 responses to this single choice question and four in ten respondents (40%) said that they thought the proposed prohibitions may have an impact on groups with protected characteristics.

Response	Number of respondents to this question	Percentage of respondents to this question
Yes	1155	39.9%
No	975	33.7%
Don't know	765	26.4%

Appendix B

Respondents were then provided with a free-text box to explain their answer. There were 1,226 responses to this part of the question. When the comments were analysed, 10 themes were identified. These are illustrated in the table below.

Themes	Number of comments
Theme 1 - Positive impact for pregnant women (protect BPAS clients, those seeking an abortion etc)	221
Theme 2 - Negative impact on women / unborn children (if vigil-holders can no longer help clients, help them make informed choice)	219
Theme 3 - Negative impact on those with a religious belief	203
Theme 4 - Comments about freedom of speech, rights being reduced (eg unable to pray / participate in vigil)	189
Theme 5 - Positive impact / protect women generally	176
Theme 6 - Positive impact / protect those who work at the BPAS clinic	107
Theme 7 - Comments about protecting / helping those who are vulnerable, have a disability, are most at risk	53
Theme 8 - General / unspecified positive impact	38
Theme 9 - Positive impact on wider community (eg local residents, users of nearby GP surgery)	34
Theme 10 - No impact on those with a particular belief or religion / don't think vigil holders have a protected characteristic	21

NB respondents may make comments under more than one theme, so numbers of comments will not add up to number of respondents

Appendix B

Question 14: If you have any final comments regarding this consultation, please use the space below:

There were 1,263 responses to this question. When the comments were analysed, 13 themes were identified. These are illustrated in the table below.

Themes	Number of comments
Theme 1 – Respondent supports the introduction of a buffer zone / PSPO, wants the protestors / harassment stopped / women protected etc	393
Theme 2 - There is no harassment / vigil holders are peaceful, kind, offering help, advice	246
Theme 3 - People are entitled to access healthcare / workplace privately / without harassment / should be protected / protestors have no right to interfere	181
Theme 4 - Disagree with the introduction of a buffer zone / don't think it is necessary / proportionate / use existing laws	179
Theme 5 – Comments about people being harassed / intimidated by protestors / vigil-holders	130
Theme 6 - Freedom of speech / expression / right to protest should not be curtailed	110
Theme 7 - Wording of PSPO is similar to Ealing, where a decision to introduce a PSPO has been subject to challenge	102
Theme 8 - Comments thanking the Council for the consultation / pleased consultation is happening	96
Theme 9 – Comments about people being made to feel upset / uncomfortable by protestors / vigil-holders	80
Theme 10 - Abortions are a legal form of healthcare / women have the right to choose	79
Theme 11 - There is a right to protest / hold views, but not to intimidate / harass / impose views on others	63
Theme 12 – Protestors / vigil holders have other methods available to them to make their views known (contact MP, protest elsewhere, outside buffer zone etc)	62
Theme 13 - Disagree with the introduction of a designated area	34

NB respondents may make comments under more than one theme, so numbers of comments will not add up to number of respondents

Appendix B

7. Demographic Profile

The table below shows the composition of the consultation sample.

Demographic	Sample base (Unweighted)	Proportion (Unweighted %)
Gender		
Male	809	27.9%
Female	1943	67.1%
Prefer not to say	145	5.0%
<i>Base: 2897 respondents</i>		
What was your age last birthday?		
19 and under	27	0.9%
20 – 24	105	3.6%
25 – 34	344	11.9%
35 – 44	643	22.3%
45 – 54	590	20.4%
55 – 64	482	16.7%
65 – 74	380	13.2%
75+	136	4.7%
Prefer not to say	182	6.3%
<i>Base: 2889 respondents</i>		
Do you consider yourself to have a disability?		
Yes	159	5.5%
No	2568	89.0%
Prefer not to say	157	5.4%
<i>Base: 2884 respondents</i>		
How would you describe your ethnic group?		
White	2414	83.9%
Mixed/multiple ethnic groups	85	3.0%
Asian or Asian British	45	1.6%
Black/ African/ Caribbean/ Black British	17	0.6%
Prefer not to say	284	9.9%
Any other ethnic group	32	1.1%
<i>Base: 2877 respondents</i>		

Appendix B

Please indicate your sexual orientation:		
Heterosexual / straight	2255	79.1%
Gay man	43	1.5%
Gay woman / lesbian	53	1.9%
Bisexual	55	1.9%
Prefer not to say	407	14.3%
Prefer to self-describe:	37	1.3%
<i>Base: 2850 respondents</i>		
Do you belong to a religion or faith group?		
No	1501	52.3%
Yes, Christian	966	33.7%
Yes, Buddhist	21	0.7%
Yes, Hindu	8	0.3%
Yes, Jewish	26	0.9%
Yes, Muslim	11	0.4%
Yes, Sikh	7	0.2%
Prefer not to say	290	10.1%
Yes, other (please specify):	39	1.4%
<i>Base: 2869 respondents</i>		
Are you currently pregnant or have you been pregnant in the last year?		
Yes	164	5.7%
No	2477	86.8%
Prefer not to say	214	7.5%
<i>Base: 2855 respondents</i>		

Appendix B

8. Other responses received

The Council also received a number of other responses in addition to the main consultation results. These are summarised in the table below:

Response Format	Number of responses	For the proposed PSPO	Against the proposed PSPO
Email and voicemail responses (individuals)	16 (15 email and 1 voicemail)	6 (37.5%)	10 (62.5%)
Written and email responses (organisations or institutions)	6 (5 written responses and one e-mail)	3 (50%)	3 (50%)
Be Here For Me e-mail responses	1012	0 (0%)	1012 (100%)
Sister Supporter e-mail responses	118	117 (99%)	1 (0.8%)

The six written and email responses from organisations or institutions came from:

- | | |
|---|--------------------------|
| • BPAS Clinic Public Affairs and Advocacy Manager | <i>In favour of PSPO</i> |
| • BPAS Clinic Treatment Unit Manager | <i>In favour of PSPO</i> |
| • Family Planning Association | <i>In favour of PSPO</i> |
| • The Catholic Union of Great Britain | <i>Opposed to PSPO</i> |
| • Liberty | <i>Opposed to PSPO</i> |
| • St.Cecilia's Abbey, Ryde, Isle of Wight | <i>Opposed to PSPO</i> |

A copy of their submissions can be found in Appendix C.

“Be Here For Me” is a pro-life campaign group which opposed the Mattock Lane, Ealing PSPO and “Sister Supporter” is a pro-choice campaign group which supported the Mattock Lane, Ealing PSPO. Generic e-mail responses were received via these two groups; these can be found in Appendix C of this report.

The Council received 118 e-mail responses sent via Sister Supporter, some of which had additional comments added after the generic statement. In total 117 were in favour of the introduction of a PSPO and one was against. Although no postcodes were provided, it is assumed from the generic statement that none of the respondents were directly affected or lived within the proposed buffer zone, as they indicated that they were not eligible to fill out the consultation.

The Council received 1,185 e-mail responses via Be Here For Me's website. Of these 116 were duplicate responses from several individuals who appear to have accidentally sent multiple responses. In each case the original e-mail was included as a valid response and the duplicates were discounted. There were also 58 responses received after the consultation deadline of midnight on Sunday 9th December, which have not been included in the analysis. Therefore, there were 1,012 responses, all of which were opposed to the introduction of a PSPO.

Those who gave an email response via the Be Here For Me campaign also provided a postcode. Of the 1,012 postcodes provided, 21 came from Richmond borough residents, 985 from the rest of the UK and six from the USA. A map of these postcodes can be found in Appendix D.

Appendix B

Appendix A - Consultation Material**1. Letter to residents/stakeholders**

Dear Resident / Stakeholder, 29 October 2018

Consultation on a Public Spaces Protection Order for the Rosslyn Road area

We are seeking your feedback on a local issue which may be affecting you - the activities of pro-life organisations who protest or keep vigil outside the British Pregnancy Advisory Service (BPAS) Clinic on Rosslyn Road. There is evidence that there have been protests/vigils outside the clinic on and off over the last ten years. From September 2013, the frequency and scope of the protests/vigils has increased to the extent that they have been almost daily. The protestors/vigil holders appear to be associated with, or volunteers of, pro-life organisations, with the primary organisation being The Good Counsel Network.

A range of behaviours have been reported, including displaying images to both residents and visitors to the clinic, approaching people and attempting to speak to them, handing out leaflets and rosary beads, which has made some people feel upset, uncomfortable, intimidated and/or harassed. These protests/vigils have resulted in two petitions being presented to Richmond Council in 2014 and 2018 and a number of impact and witness statements being gathered by BPAS and Richmond Police between 2003-2018 asking the Council to address the issue.

In response to this evidence, the Council wrote to The Good Counsel Network asking them to cease the activities that were causing complaints. The Good Counsel Network describe themselves on their website as "a life affirming women's organisation which offers a free pregnancy test, free advice, medical information, practical help and moral support to women seeking an abortion." In response to the Council's letter, they refuted the description of their vigils and offers of help as protests, and denied that their actions caused harassment, alarm or distress.

There are various actions available to the Council to deal appropriately and proportionately with anti-social behaviour. Having considered all of the options available, the Council feels that a Public Spaces Protection Order (PSPO) may be the most appropriate course of action.

What would a PSPO involve?

A PSPO prohibits specific activities within a defined area. In this case the activities and the defined area (or buffer zone) are shown in the consultation document attached. Failing to comply with the restrictions imposed by the PSPO would constitute a criminal offence. If implemented, the Order would be introduced for three years and reviewed on a regular basis.

Have your say

We would like to hear your views on the issue and whether or not you would support the implementation of a PSPO in the Rosslyn Road area. To take part in the online consultation please go to: <https://haveyoursay.citizenspace.com/community-safety/rosslyn-road>

Appendix B

All other supporting documents can be viewed at:

<https://cabnet.richmond.gov.uk/mgAi.aspx?ID=35875#mgDocuments>

If you have any questions in relation to the consultation or would like a paper copy of the questionnaire, please call **020 8891 1411** or e-mail us at consultationrosslynroad@richmond.gov.uk.

The consultation will launch on **29 October** and will be open until **9 December 2018**.

Yours faithfully,

Robyn Thomas, Head of Community Safety

2. Consultation document

Richmond Council Consultation on a Public Spaces Protection Order for the Rosslyn Road area

Introduction

Richmond Council is consulting residents, interested individuals, groups and other stakeholders on the proposal to introduce a Public Spaces Protection Order (PSPO) to address the concerns about the protests/vigils outside the British Pregnancy Advisory Service (BPAS) Clinic in Rosslyn Road.

A PSPO under section 59 of the Anti-Social Behaviour, Crime and Policing Act 2014 (the ACT) allows the Council to prohibit specific activities, and/or require certain things to be done by people engaged in particular activities, within a defined public area.

To introduce a PSPO the Council has to be satisfied on reasonable grounds that certain conditions have been met. The first test requires that “-activities that have taken place have had a detrimental effect on the quality of life of those live in the locality or it is likely that activities will take place and that they will have a detrimental effect.”

The second test is that “-the effect or likely effect of these activities a) is, or is likely to be, persistent or continuing in nature b) is, or is likely to be, unreasonable and c) justifies the restrictions being imposed”.

Background

The BPAS Clinic, which is located on Rosslyn Road, Twickenham provides abortion advice & treatment, counselling and contraception amongst other services. The clinic sees approximately 50 clients a day during its operating hours of Tuesday to Saturday from 08:00 to 19:00. It is understood that there has been a clinic at this

Appendix B

location since the mid 1970's.

While there have been protests/vigils outside the clinic on and off for over 10 years, these tended to be infrequent and less organised. From September 2013, however, the frequency and scope of the protests/vigils has increased to the extent that they have been almost daily with the number of protestors/vigil holders varying between one to four and on occasion up to a dozen. The protestors/vigil holders appear to be associated with or volunteers of pro-life organisations, with the primary organisation being The Good Counsel Network.

The Good Counsel Network describe themselves on their website as “a life-affirming women’s organisation which offers a free pregnancy test, free advice, medical information, practical help and moral support to women seeking an abortion”

Evidence base and investigation

In response to these daily protests/vigils a group of residents organised and presented a petition to the Full Council meeting in November 2014 raising concerns about the negative impact the protests/vigils were having on the local neighbourhood. The Cabinet Member for Community Safety responded that “the Council would do all that was lawful to stop the problems.”

This was followed by a second petition in 2017-18 by local residents group “Reclaim Rosslyn Road”, calling on the Council to take all measures within its power, including the option of a PSPO, to allow women to access services “free from interference and intimidation.” In response to a question from one of the ward councillors at the Full Council meeting in January 2018 the Cabinet Member for Housing, Public Health and Community Safety at the time responded by saying that he was committed to “identifying all the options open to the Council to deal with issues of anti-social behaviour, causing harassment, alarm and distress to patients attending the BPAS clinic.”

A range of behaviours have been reported, including displaying images, approaching people and attempting to speak to them, handing out leaflets, and rosary beads, which have made some people feel upset, uncomfortable, intimidated and/or harassed. In response to these concerns officers from the Community Safety Service have been liaising with interested parties about their concerns and to review the evidence base. These meetings and the evidence review have taken place from January 2018 to the present.

Officers have analysed the impact and witness statements gathered by BPAS and Richmond Police over the period 2003-2018, of which the majority relate to the period 2013-18 when the protests/vigils became more regular and co-ordinated. The analysis of these statements coupled with the petitions and community safety officer observations, demonstrate that the protests/vigils continue to have a negative impact on some of those who visit, work, reside in the local area or visit the clinic and that they feel harassed, alarmed or distressed by the presence of the protests/vigils.

The Council wrote to The Good Counsel Network asking them to cease the activities that were causing complaints. In response to the Council’s letter they refuted the

Appendix B

description of their vigils and offers of help as protests and denied that their actions caused harassment, alarm or distress.

Why a PSPO?

The Council considered the powers of various Anti-Social Behaviour and Public Order Acts as part of an options appraisal report. These included:

- Negotiated agreement
- Byelaw
- Community Protection Notices
- Dispersal Power
- Protection from Harassment Act 1997
- Public Order Act 1986
- Public Spaces Protection Order (PSPO)

The report concluded that a PSPO could be the most appropriate proportionate and effective power to use.

What would a PSPO involve?

A PSPO prohibits specific activities within a defined area. In this case the activities and the defined area (or buffer zone) are shown at the end of this document. Failing to comply with the restrictions imposed by the PSPO would constitute a criminal offence.

If implemented the Order would be introduced for three years and reviewed on a regular basis.

Have your say

We would like to hear your views on the issue and whether or not you would support the implementation of a PSPO in the Rosslyn Road area.

The consultation will run for 6 weeks between **29th October** and **9th December 2018**.

The consultation is seeking the views of those who live, work, visit or pass through the area, those who access services from the BPAS Clinic, local stakeholders, groups affected by these proposals and statutory consultees.

To ensure that everyone has the opportunity to take part in the consultation the Council will:

- Send letters to those households in the proposed buffer zone and in the immediate surrounding area
- Contact the BPAS Clinic, The Good Counsel Network, other stakeholder groups and statutory consultees
- Set up an online questionnaire and provide paper copies for local venues and on request

Appendix B

- Publicise the consultation via press releases, social media and through the Council's Community Links team

The consultation is open to all and respondents will be asked for their full postcode and the capacity in which they are responding, so that we understand any impact on people in the area.

The draft PSPO and map of the potential buffer zone are included as appendices to this consultation document.

All other supporting documents can be viewed at:

<https://cabnet.richmond.gov.uk/mgAi.aspx?ID=35875#mgDocuments>

To take part in the online consultation please go to:

<https://haveyoursay.citizenspace.com/community-safety/rosslyn-road>

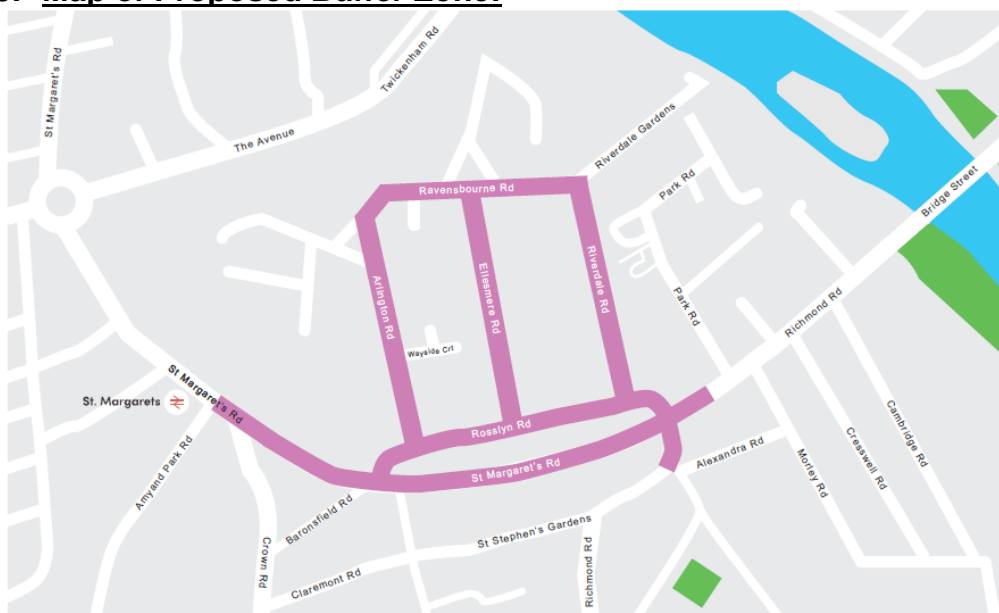
If you have any questions or need help in relation to the consultation please call **020 8891 1411** or e-mail us at consultationrosslynroad@richmond.gov.uk

The most effective way for your views to be fully considered is to complete the online consultation questionnaire or a paper copy.

Next steps

Once the consultation is completed a further report will be submitted to the Council's Regulatory Committee, which will include a full analysis of the consultation. This report will include a recommendation on whether or not to implement a PSPO. The Council will need to be satisfied that a PSPO would meet the necessary conditions and provide a proportionate response to the issues identified. This report is expected to be considered by the Regulatory Committee in early February 2019.

3. Map of Proposed Buffer Zone:



Appendix B

4. Draft PSPO:

London Borough of Richmond upon Thames Council The Anti-Social Behaviour Crime and Policing Act 2014 The Public Spaces Protection Order (Rosslyn Road) 2019

WHEREAS the London Borough of Richmond upon Thames Council (“the Council”) is satisfied that the requirements of sections 59 and 72 of the Anti-Social Behaviour, Crime and Policing Act 2014 (“the Act”) have been satisfied and that it is, in all the circumstances, appropriate to make this Order. This order is made by the Council and shall be known as the Public Spaces Protection Order (Rosslyn Road) 2019.

WHEREAS the Council is satisfied that activities have been and will continue to be carried out in the buffer zone referred to below which have had and will continue to have a detrimental effect on the quality of life of those in the locality, such activities being the vigils, protests or interaction with staff or visitors or patients of the BPAS Clinic in Rosslyn Road Twickenham or such protests that affect residents in Rosslyn Road Twickenham and surrounding roads.

WHEREAS the Council, in making this Order is satisfied on reasonable grounds that the activities identified below have been carried out in public places within the Council's area and have had a detrimental effect on the quality of life of those in the locality.

WHEREAS the Council is satisfied that the effect of the activities is, or is likely to be, of a persistent or continuing nature, and is, or is likely to be such as to make the activities unreasonable and the effect justifies the restrictions imposed by this Order.

WHEREAS the Council is satisfied that the prohibitions imposed by this Order are ones that it is reasonable to impose in order to prevent the detrimental effect from continuing, occurring, or recurring or to reduce that detrimental effect or to reduce the risk of its continuance, occurrence or recurrence.

WHEREAS the Council has had regard to the rights and freedoms set out in the European Convention on Human Rights. The Council has had particular regard to the rights and freedoms set out in Article 10 (right of freedom of expression) and Article 11 (right of freedom of assembly) of the European Convention on Human Rights and has concluded that the restrictions on such rights and freedoms imposed by this Order are lawful, necessary and proportionate.

THE COUNCIL MAKES the following Order in exercise of its powers under section 59 of the Act.

THE ACTIVITIES

1. The Activities prohibited by this Order are:

Appendix B

- a) Protesting, namely engaging in any act of approval or disapproval or attempted act of approval or disapproval, with respect to issues related to abortion services, by any means, including, without limitation, graphic, verbal or written means, and including, for the avoidance of doubt, any form of counselling or interaction with residents or BPAS clients on the street;
- b) Interfering or attempting to interfere, whether verbally or physically, with a BPAS client or member of staff;
- c) Intimidating or harassing, or attempting to intimidate or harass, a BPAS client or a member of staff;
- d) Recording or photographing a BPAS client or member of staff of the clinic whilst they are in the buffer zone; or
- e) Displaying any text or images relating directly or indirectly to the termination of pregnancy.

THE PROHIBITION

- 2. A person shall not engage in any of the Activities anywhere within the buffer zone as shown with a red boundary on the attached map labelled 'The buffer zone'.

DEFINITIONS

- 3. In this Order the following words or phrases are defined as follows:

'Buffer zone' means the area outlined in a red boundary on the attached map and marked 'buffer zone' for the Public Spaces Protection Order (Rosslyn Road) 2019;

'Protesting' means being in the buffer zone (whether by yourself or with others) and engaging in any act of approval or disapproval or attempted act of approval or disapproval, with respect to issues related to abortion services, by any means, including, without limitation, graphic, verbal or written means, and including, for the avoidance of doubt, prayer or counselling;

'Displaying any text or images relating directly or indirectly to the termination of pregnancy' includes but is not limited to, imagery or textual references to abortion, baby, babies, mum, womb, foetus, soul, kill, hell, murder;

'Member of staff' includes any employee, agent or contractor of the BPAS Clinic situated in the buffer zone;

'BPAS Client' includes any patient or visitor to the BPAS Clinic in Rosslyn Road Twickenham.

REQUIREMENTS

- 4. A person who is believed to have engaged in a breach of this order or anti-social behaviour within the buffer zone, is required to give their name and address to a police officer, police community support officer or other person designated by the Council.

Appendix B

5. A person who is believed to have engaged in a breach of this order, or in anti-social behaviour within the buffer zone, is required to leave the area if asked to do so by a police officer, police community support officer or other person designated by the Council.

PERIOD FOR WHICH THIS ORDER HAS EFFECT

6. This Order will come into force at midnight on **[INSERT DATE]**

7. This Order will expire at midnight on **[INSERT DATE]**.

8. At any point before the expiry of this three year period the Council can extend the Order by up to three years if they are satisfied on reasonable grounds that this is necessary to prevent the activities identified in the Order from occurring or recurring or to prevent an increase in the frequency or seriousness of those activities after that time.

OFFENCES

9. Section 67 of the Anti-Social Behaviour Crime and Policing Act 2014 says that it is a criminal offence for a person without reasonable excuse – (a) to do anything that the person is prohibited from doing by a public spaces protection order, or (b) to fail to comply with a requirement to which the person is subject under a public spaces protection order.

10. A person guilty of an offence under section 67 is liable on summary conviction in the Magistrates Court to a fine not exceeding level 3 on the standard scale.

FIXED PENALTY

11. A constable, police community support officer or council enforcement officer may issue a fixed penalty notice to anyone he or she believes has committed an offence under section 67 of the Anti- Social Behaviour, Crime and Policing Act. You will have 14 days to pay the fixed penalty of £100. If you pay the fixed penalty within the 14 days you will not be prosecuted.

APPEALS

12. Any challenge to this order must be made in the High Court by an interested person within six weeks of it being made. An interested person is someone who lives in, regularly works in, or visits the buffer zone. This means that only those who are directly affected by the restrictions have the power to challenge it. The right to challenge also exists where an order is varied by the Council.

13. Interested persons can challenge the validity of this order on two grounds, as follows: (a) that the Council did not have power to make the order, or to include particular prohibitions or requirements; or (b) that one of the requirements of the legislation has not been complied with.

Appendix B

14. When such an application is made, the High Court can decide to suspend the operation of the order pending the Court’s decision, in part or in totality. The High Court has the ability to uphold the order, quash it, or vary it.

Dated.....

**IN WITNESS WHEREOF THE COMMON }
SEAL OF THE MAYOR AND BURGESSES }
OF THE LONDON BOROUGH OF }
RICHMOND UPON THAMES }**

was hereunto affixed and this document }
thereby executed as a Deed }
in the presence of }

Authorised Signatory

Section 59 Anti-Social Behaviour Crime and Policing Act 2014

- (1) A local authority may make a public spaces protection order if satisfied on reasonable grounds that two conditions are met.
- (2) The first condition is that—
 - (a) activities carried on in a public place within the authority’s area have had a detrimental effect on the quality of life of those in the locality, or
 - (b) it is likely that activities will be carried on in a public place within that area and that they will have such an effect.
- (3) The second condition is that the effect, or likely effect, of the activities—
 - (a) is, or is likely to be, of a persistent or continuing nature,
 - (b) is, or is likely to be, such as to make the activities unreasonable, and
 - (c) justifies the restrictions imposed by the notice.
- (4) A public spaces protection order is an order that identifies the public place referred to in subsection (2) (“the restricted area”) and—
 - (a) prohibits specified things being done in the restricted area,
 - (b) requires specified things to be done by persons carrying on specified activities in that area, or
 - (c) does both of those things.
- (5) The only prohibitions or requirements that may be imposed are ones that are reasonable to impose in order—
 - (a) to prevent the detrimental effect referred to in subsection (2) from continuing, occurring or recurring, or
 - (b) to reduce that detrimental effect or to reduce the risk of its continuance, occurrence or recurrence.
- (6) A prohibition or requirement may be framed—
 - (a) so as to apply to all persons, or only to persons in specified categories, or to all persons except those in specified categories;
 - (b) so as to apply at all times, or only at specified times, or at all times except those specified;
 - (c) so as to apply in all circumstances, or only in specified circumstances, or in all circumstances except those specified.
- (7) A public spaces protection order must—
 - (a) identify the activities referred to in subsection (2);
 - (b) explain the effect of section 63 (where it applies) and section 67;
 - (c) specify the period for which the order has effect.

Appendix B

(8) A public spaces protection order must be published in accordance with regulations made by the Secretary of State.

Section 67 Anti-Social Behaviour Crime and Policing Act 2014

(1) It is an offence for a person without reasonable excuse-

(a) To do anything that the person is prohibited from doing by a public spaces protection order, or

(b) To fail to comply with a requirement to which a person is subject under a public spaces protection order

(2) A person guilty of an offence under this section is liable on summary conviction to a fine not exceeding level 3 on the standard scale

(3) A person does not commit an offence under this section by failing to comply with a prohibition or requirement that the local authority did not have power to include in the public spaces protection order.

Appendix B

Appendix B - Consultation Questionnaire

Consultation on a Public Spaces Protection Order for the Rosslyn Road area

We are seeking your feedback on a local issue which may be affecting you - the activities of pro-life organisations who protest or keep vigil outside the British Pregnancy Advisory Service (BPAS) Clinic on Rosslyn Road.

There is evidence that there have been protests/vigils outside the clinic on and off over the last ten years. From September 2013, the frequency and scope of the protests/vigils has increased to the extent that they have been almost daily. The protestors/vigil holders appear to be associated with, or volunteers of, pro-life organisations, with the primary organisation being The Good Counsel Network.

A range of behaviours have been reported, including displaying images to both residents and visitors to the clinic, approaching people and attempting to speak to them, handing out leaflets and rosary beads, which has made some people feel upset, uncomfortable, intimidated and/or harassed.

These protests/vigils have resulted in two petitions being presented to Richmond Council in 2014 and 2018 and a number of impact and witness statements being gathered by BPAS and Richmond Police between 2003-2018 asking the Council to address the issue.

In response to this evidence the Council wrote to The Good Counsel Network asking them to cease the activities that were causing complaints.

The Good Counsel Network describe themselves on their website as "a life affirming women's organisation which offers a free pregnancy test, free advice, medical information, practical help and moral support to women seeking an abortion."

In response to the Council's letter, they refuted the description of their vigils and offers of help as protests, and denied that their actions caused harassment, alarm or distress.

There are various actions available to the Council to deal appropriately and proportionately with anti-social behaviour. Having considered all of the options available, the Council feels that a Public Spaces Protection Order (PSPO) may be the most appropriate course of action. The options appraisal report can be found within the supporting documentation below.

Appendix B

What would a PSPO involve?

A PSPO prohibits specific activities within a defined area. In this case the activities and the defined area (or buffer zone) are shown in the consultation document. Failing to comply with the restrictions imposed by the PSPO would constitute a criminal offence.

If implemented, the Order would be introduced for three years and reviewed on a regular basis.

Have your say

We would like to hear your views on the issue and whether or not you would support the implementation of a PSPO in the Rosslyn Road area.

Please read the consultation document and other supporting documentation before giving us your views below and return to us by the closing date of **9 December 2018**. Alternatively, you can respond at:

<https://haveyoursay.citizenspace.com/community-safety/rosslyn-road>

Confidentiality

All the information you provide will be treated in strict confidence and will not be used to identify you personally. It will not be passed on to anyone else and will only be used for the purposes of this consultation. The analysis is done on an anonymous basis under the guidelines of the Data Protection Act. Anonymised data may be published, including publishing comments on the Council's website.

Your Details

1. In what capacity are you responding to this consultation?

What is a buffer zone?

A buffer zone is a defined area in which people cannot engage in any of the activities prohibited by the PSPO.

Please tick all that apply.

- ☐ I am a client of Rosslyn Road BPAS Clinic
- ☐ I am a staff member at the Rosslyn Road BPAS Clinic
- ☐ I live in the proposed buffer zone
- ☐ I live outside the proposed buffer zone but within the London Borough of Richmond upon Thames
- ☐ I am a visitor to the proposed buffer zone
- ☐ I am a pro-life vigil holder / protestor in the proposed buffer zone
- ☐ I am a supporter of pro-life activities
- ☐ I am a member of a local group or organisation (please specify below)

Appendix B

☐ Other (please specify below)

2. What is your postcode?

This information will not be used to identify you personally but to ensure we are consulting widely across the area. This is required for your submission to be processed.

Postcode:

Your Views

3. Have you come across any of the following behaviours in the proposed buffer zone?

	Yes	No	Don't know
People handing out leaflets	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People approaching / attempting to talk to clients, staff etc	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People showing posters / placards / models	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People who appear to be praying / kneeling	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People holding / handing out rosary beads / necklaces with crosses	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People being harassed / intimidated	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People being made to feel upset / uncomfortable	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Appendix B

	Yes	No	Don't know
People being shouted / called at	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People being followed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Other, please specify:	
------------------------	--

4. If you have come across these behaviours, to what extent do you agree or disagree that they have had a detrimental effect on you or others in the local area?

- ☐ Strongly agree
- ☐ Disagree
- ☐ Agree
- ☐ Strongly disagree
- ☐ Neither agree nor disagree

5. If you answered ‘Strongly agree’ or ‘Agree’ to Question 4, which of the behaviours do you consider have had the most detrimental effect on you or others in the local area?

Please tick all that apply.

- ☐ People handing out leaflets
- ☐ People approaching / attempting to talk to clients, staff etc
- ☐ People showing posters / placards / models
- ☐ People who appear to be praying / kneeling
- ☐ People holding / handing out rosary beads / necklaces with crosses
- ☐ People being harassed / intimidated
- ☐ People being made to feel upset / uncomfortable
- ☐ People being shouted / called at
- ☐ People being followed

<input type="checkbox"/> Other, please specify:	
---	--

Please use the space below to tell us more information about how these behaviours have affected you or others:

--

Appendix B

6. If you are a protestor / vigil-holder, have you come across any unwanted behaviour from any of the following groups in the proposed buffer zone?

	Yes	No	Don't know
From a client or visitor of the Rosslyn Road BPAS Clinic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
From a member of the public	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
From a member of another protesting group	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
From an employee, agent or contractor of the Rosslyn Road BPAS Clinic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Other, please specify:	
------------------------	--

Please use the space below to provide further detail on this behaviour:

7. Do you agree or disagree with the proposal to implement a buffer zone?

<input type="checkbox"/> Agree	<input type="checkbox"/> Disagree
<input type="checkbox"/> Neither agree nor disagree	<input type="checkbox"/> Don't know

Appendix B

8. Do you agree or disagree with the boundaries of the proposed buffer zone in the Rosslyn Road area?

- ☐ Agree
- ☐ Disagree
- ☐ Neither agree nor disagree
- ☐ Don't know

If you disagree, please tell us why:

9. Do you agree or disagree with each of the following proposed prohibitions in the buffer zone?

These are a list of the activities that cannot take place within the buffer zone. They are written in legal language as this is how they would appear in the PSPO.

	Agree	Neither agree nor disagree	Disagree	Don't know
Protesting, namely engaging in any act of approval or disapproval or attempted act of approval or disapproval, with respect to issues related to abortion services, by any means, including, without limitation, graphic, verbal or written means, and including, for the avoidance of doubt, any form of counselling or interaction with residents or BPAS clients on the street	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Interfering, or attempting to interfere, whether verbally or physically,	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Appendix B

	Agree	Neither agree nor disagree	Disagree	Don't know
with a BPAS client or member of staff				
Intimidating or harassing, or attempting to intimidate or harass, a BPAS client or a member of staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Recording or photographing a BPAS client or member of staff of the clinic whilst they are in the buffer zone	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Displaying any text or images relating directly or indirectly to the termination of pregnancy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

10. One option would be to introduce a designated area for protesters/vigil holders to stand somewhere within the buffer zone. Do you agree or disagree with this option?

What is a designated area?

A designated area is a defined location where protesters/vigil holders could legally stand. However there would be restrictions on the number of protesters and the activities that they could carry out.

- ☐ Agree
- ☐ Disagree
- ☐ Neither agree nor disagree
- ☐ Don't know

Appendix B

11. If a designated area were to be introduced, to what extent do you agree or disagree with each of the proposed restrictions listed below?

	Agree	Neither agree nor disagree	Disagree
A person shall not be part of a group or groups which together total four or more persons at any time	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No individual poster, text or image, singularly or collectively greater than one sheet of A3 paper may be displayed within the designated space	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A person within the designated area must not shout any message or words relating to the termination of pregnancy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

12. Is there anything we would need to consider regarding location if we were to introduce a designated area?

Appendix B

13. Do you think the proposed prohibitions may have an impact, either positive or negative, on any group of people with a protected characteristic under the Equality Act 2010?

- ☐ Yes
- ☐ No
- ☐ Don't know

Please use the space below to explain your answer:

14. If you have any final comments regarding this consultation, please use the space below:

About You

The following questions will help the Council to improve its services and be fair to everyone who lives in Richmond borough. The information you provide will be used for statistical and research purposes only and will be stored securely. If there are any questions you do not wish to answer, please move on to the next question.

15. Are you:

- ☐ Male
- ☐ Female
- ☐ Prefer not to say

Appendix B

16. What was your age last birthday?

- ☐ 19 and under
- ☐ 20-24
- ☐ 25-34
- ☐ 35-44
- ☐ 45-54
- ☐ 55-64
- ☐ 65-74
- ☐ 75+
- ☐ Prefer not to say

17. Do you consider yourself to have a disability?

- ☐ Yes
- ☐ No
- ☐ Prefer not to say

18. How would you describe your ethnic group?

- ☐ White
- ☐ Mixed/multiple ethnic groups
- ☐ Asian or Asian British
- ☐ Black/African/Caribbean/Black British
- ☐ Prefer not to say
- ☐ Other ethnic group, please specify:

19. Please indicate your sexual orientation:

- ☐ Heterosexual / straight
- ☐ Gay man
- ☐ Gay woman / lesbian
- ☐ Bisexual
- ☐ Prefer not to say
- ☐ Prefer to self-describe

20. Do you belong to a religion or faith group?

- ☐ No
- ☐ Yes, Christian
- ☐ Yes, Buddhist
- ☐ Yes, Hindu
- ☐ Yes, Jewish
- ☐ Yes, Muslim
- ☐ Yes, Sikh
- ☐ Prefer not to say
- ☐ Yes, other (please specify):

21. Are you currently pregnant or have you been pregnant in the last year?

- ☐ Yes
- ☐ No
- ☐ Prefer not to say

Appendix B

Thank you for completing this survey. Please return the completed questionnaire to:

Consultation Team
London Borough of Richmond upon Thames
Ground Floor, Civic Centre
44 York Street
Twickenham
TW1 3BZ

Please note the closing date is **9 December 2018**

Appendix B

Appendix C – Organisation responses

1. BPAS Clinic Public Affairs and Advocacy Manager

Consultation on a Public Spaces Protection Order for the Rosslyn Road area

British Pregnancy Advisory Service response

The British Pregnancy Advisory Service (BPAS) is a British reproductive healthcare charity that offers abortion care, contraception, STI testing, and pregnancy counselling to nearly 80,000 women each year via our clinics in England, Wales, and Scotland.

BPAS has run the clinic on Rosslyn Road in Richmond for many years, providing services for women in South West London and specialised treatment for women from around the UK.

As part of our advocacy work, we have been running the *Back Off* campaign to introduce buffer zones around abortion clinics and pregnancy advisory bureaux since 2014. This is based on the evidence we collect from our clients and members of the public that indicate protests outside clinics are distressing and intimidating.

Position on PSPO proposal

BPAS fully supports the council's proposed Public Spaces Protection Order as an essential move to protect women's rights when accessing legal, essential healthcare.

Further information is provided here as to the experience of the BPAS Richmond clinic on Rosslyn Road, and the impact of protests on our clients, people who attend with them, and the local area.

If any further information is required, please contact rachael.clarke@bpas.org.

Background

Clinic Protests

Clinic protests are a form of activity used by anti-choice protesters to deter or prevent women accessing abortion care. They take many forms, including the display of graphic images of dismembered fetuses, marches that end outside the clinic, filming women and staff members, following women down the street and thrusting anti-abortion literature into their hands, sprinkling sites with holy water, and 'vigils' - large gatherings of people who sing hymns and recite dedicated anti-abortion prayers loudly enough to be heard inside clinics. These protests usually last several hours a day over a number of weeks or months. In several cases around the country, including in Richmond, protests have continued for many years. Despite the distress, harassment, and intimidation women report experiencing as a result of these activities, existing criminal legislation has been ineffective at addressing the harm caused.

The *Back Off* campaign

As part of the *Back Off* campaign we have gathered reports from clients, people accompanying clients, local residents, healthcare workers, and passers-by about their personal experience of clinic protests.

We currently have 2060 individual reports of activity in our *Back Off* database, and a further 120 statements from healthcare workers as to their experiences of protests. This evidence-gathering

Appendix B

has shown 45 clinics affected by protests across the UK since the beginning of 2017. The recent Home Office review of clinic protests found that around the country, 1 in 10 sites where abortions were provided had been subject to protests in the last year.

944 of the reports in the Back Off database, including 463 reports from people who do not work for BPAS (clients, client escorts, local residents, and passers-by) refer directly to BPAS Richmond on Rosslyn Road.

Terminology

It is important to note that those engaged in these gatherings do not consider them protests. They do not believe they are protesting a political or democratic decision, or trying to change the law. Their presence outside clinics is variously referred to as a 'vigil', 'bearing witness', 'education', or 'pavement counselling'. What these activities have in common is that they are methods of sharing speech rather than the content of the speech itself. BPAS do not believe that anti-abortion groups should be prevented from sharing their opinions. Their beliefs and their ability to share them is a fundamental part of democratic society. What we are opposed to is the methods and location they choose to employ.

Action taken by Ealing Council

In April 2018, after a lengthy period of negotiation, discussion, and consultation, Ealing Council introduced a Public Spaces Protection Order (PSPO) outside the Marie Stopes abortion clinic on Mattock Lane. This 'safe zone' extended a significant distance along Mattock Lane, preventing protesters standing outside the clinic gates.

Until this PSPO came into force, several protesters were present every day, increasing in number on Fridays and Saturdays. Reports received by the Back Off campaign highlighted the handing out of leaflets and rosaries, standing immediately by the entrances, approaching clients, displaying signs and posters, singing/chanting, shouting, obstructing, and following clients. More recent reports indicate that the PSPO has stopped this activity, and that local residents, clients, and clinic staff are no longer subject to distress, harassment, and intimidation as they either access services or walk through the area.

The Ealing PSPO was subject to a legislative challenge in the High Court, partly on the grounds that it unduly interfered with the protesters' Article 9 and 10 rights. **The Court dismissed this claim and the Ealing PSPO was upheld in full** – acknowledging that although the PSPO interfered with the rights of protesters, it was justified in order to uphold the rights of others in the vicinity, notably the Article 8 right to a private and family life.

The ruling also made clear that when considering behaviour that has 'had a detrimental effect on the quality of life of those in the locality', people attending the clinic or working at the clinic should also be considered, and that experience should not simply be limited to local residents.

BPAS Services

Most women attend BPAS clinics to discuss their pregnancy options and to access abortion care. This care can take place all on one day, or over several days with a number of visits involved if that is what the woman prefers. Treatment includes a number of stages. The information included here should make clear that the healthcare provided by the BPAS clinic on Rosslyn Road is thorough and fully-regulated, including the availability of pre- and post-abortion counselling, and the provision of options to all women we see. This stands in sharp contrast to the claims made by protesters to vulnerable clients.

Appendix B

Consultation

The process begins with a pregnancy options discussion to explore a woman's feeling about her pregnancy and to discuss whether to continue with the pregnancy and become a parent, continue with the pregnancy and pursue adoption, or end the pregnancy. Although many women are certain of their choice when they book an appointment, other women are keen to discuss their options. Women are able to book more time and speak to a counsellor in depth if they are unsure of their options.

Women are always seen on their own during the consultation to ensure they are not under any pressure to make a particular decision. If any concerns are raised by the woman or about her situation at this point, trained safeguarding staff may become involved. Clinic activity can and does include, for instance, the clinic phoning police and related services about an abusive partner and the woman going directly from the clinic to a refuge; involving social services with concerns about Child Sexual Exploitation for the girl involved; and reporting concerns about existing children who are at risk of domestic violence.

Roughly 20% of women who book an initial appointment with BPAS do not proceed to treatment with us.

Medical assessment

If a woman decides, after her consultation, to end her pregnancy, then medical assessment takes place with a qualified nurse or midwife practitioner. Women are asked about their medical history and given an ultrasound scan to determine the gestation of the pregnancy and to ensure that the pregnancy is not ectopic.

Women are tested to see whether their blood is rhesus positive or negative (to ensure that future pregnancies are not harmed by their body's response to a Rhesus positive pregnancy).

Women are also offered STI testing and contraception counselling to help them with future care.

The nurse or midwife then discusses the options for termination – medical or surgical, with different procedures depending on gestation. All options are provided at BPAS Richmond apart from late medical.

Finally, known risks and complications are explained, any questions are answered, and women sign a consent form to say that they understand the potential risks of any treatment.

At this point, the completed forms are submitted for approval by 2 doctors. As a legal requirement, two doctors must review each woman's notes and authorise the abortion before any treatment takes place.

Treatment

Women may be treated on the same day if staff are satisfied they are certain of their decision or may return on another day (particularly in the case of surgical procedures).

If a woman opts for an early medical abortion (EMA) she is provided with her first set of medication (mifepristone) and then the second set (misoprostol). Currently both sets must be taken on the premises and cannot be taken at home. Side-effects include dizziness, nausea, vomiting, and diarrhoea. Miscarriage symptoms typically begin around two hours after taking misoprostol but can begin earlier.

If a woman opts for surgical treatment, the process will depend on her gestation. For instance, a

Appendix B

Vacuum Aspiration (up to 12-14 weeks) can be performed using local anaesthesia and take 5-10 minutes; whereas later procedures may require women to return on consecutive days and take place under general anaesthesia.

Foetal anomaly

Nearly 100 women in 2017 attended the Rosslyn Road clinic for terminations due to foetal anomaly (TOPFA). These procedures are more likely to take place at later gestations (after the 20-week diagnostic scan), and are for wanted pregnancies where a family has received a diagnosis of a severe or fatal foetal anomaly. These include genetic disorders such as Edwards' or Patau's Syndrome, problems with spinal cord development such as anencephaly (a fatal condition where the brain has not developed), as well as other issues with development. Women in the position are already often exceptionally distressed, and in many cases may be noticeably pregnant.

Regulation of services

All abortion clinics are registered with the Department of Health and abortion is a regulated activity under the Health and Social Care Act 2012 which means that it is governed by the statutory standards of care and procedures for regulation and governance. The Department of Health also issues standard operating procedures for the operation of independent abortion clinics with specific requirements including the provision of 24-hour aftercare (to enable women to contact BPAS if they are worried about symptoms or side-effects), pre- and post-abortion counselling, contraception counselling and provision, and STI screening.

In addition to legislation and common law provisions, there is also healthcare regulation, regulation of medical professionals, and guidelines for best medical practice. These provisions are common to all other areas of healthcare and ensure that clients are treated in line with best medical practice by qualified providers in appropriately licensed and maintained clinics. These provisions include regular inspections of abortion clinics by the Care Quality Commission with full reports published online.

The Rosslyn Road clinic

BPAS is a healthcare charity that is the largest national provider of abortion services. These services are commissioned by CCGs to provide NHS-funded care to women from their local area. BPAS provides a national booking service that enables women to book an appointment anywhere that is convenient for them, which is then funded by their local CCG.

BPAS Richmond on Rosslyn Road provides abortion services and related healthcare advice and services to around 5000 women a year. Around 50% of these women attend from London and CCGs local to Richmond, and the remaining 50% travel from elsewhere in the country, predominantly for specialised care.

BPAS Richmond is licensed to provide surgical abortions up to 23 weeks and 6 days. There are only 11 sites in the UK that provide this service, so some clients have travelled exceptionally long distances to access this care (eg from Scotland).

BPAS Richmond treats women of all ages. In 2017, the clinic treated 270 young women under the age of 18, including 67 girls under the age of 16. These young women, despite their statutory and regulatory safeguarding needs, would be subject to protest activity and the advertising of unregulated 'alternatives' at the clinic gate.

Appendix B

Protest Groups

The proposed Public Spaces Protection Order would not be targeted at any particular group, and thus evaluation should take into account the types of activities seen outside the clinic by all groups who have been involved in protest in recent years. BPAS Richmond has experienced protests from number of different groups who seek to reduce the number of abortions that take place. These include:

- **The Good Counsel Network** – London-based ‘pro-life’ group which also attends Marie Stopes on Mattock Lane in Ealing and Marie Stopes on Whitfield Street in Central London. They class themselves as ‘pavement counsellors’ who also hold ‘vigils’. The hallmarks of this type of activity are prayer and attempting to speak to women on the street as they try to access the clinic, as well as providing literature and rosaries. There are usually between two and five people present from Good Counsel Network at any given site during clinic opening hours – some paid and some volunteers.
- **Helpers of God’s Precious Infants** – Helpers UK are an international group that are predominantly linked with local Catholic churches. Their attendance is usually in the form of a procession to the clinic, a ‘vigil’, and a return procession. This is usually a larger group who begin at St Margaret’s Church, carry with them an icon of the Virgin Mary, and then pray and sing immediately outside the clinic for around 90 minutes. This type of activity happens several times a year – last on the 8th December 2018.
- **40 Days for Life** – 40 Days for Life have been present a number of times at BPAS Richmond, starting in autumn 2013. 40 Days conduct two 40-day long ‘vigils’ outside clinics during Lent and in autumn. These often include being outside from 7am – 7pm, prayer, posters, and the handing out of leaflets. 40 Days campaigns differ in intensity and tactics depending on their leadership and location – it is not possible to predict what kind of impact a presence would have in any given place.
- **Local protesters** – Several seemingly non-affiliated protesters have also been reported to the clinic, most notably two protesters in November 2017 who were filming the entrance despite being asked to stop by clinic employees. This only ceased when the clinic manager went outside and started to film them with her phone.

Snapshot of Activity: 8th November 2018 – 8th December 2018

During the course of the PSPO consultation, clinic staff asked clients and those accompanying them whether they wished to share their experiences outside BPAS Richmond with the council. This has provided us with a snapshot of activity and its impact.

Between 8th November and 8th December, we received 323 written comments from clients and those accompanying them to their appointments.

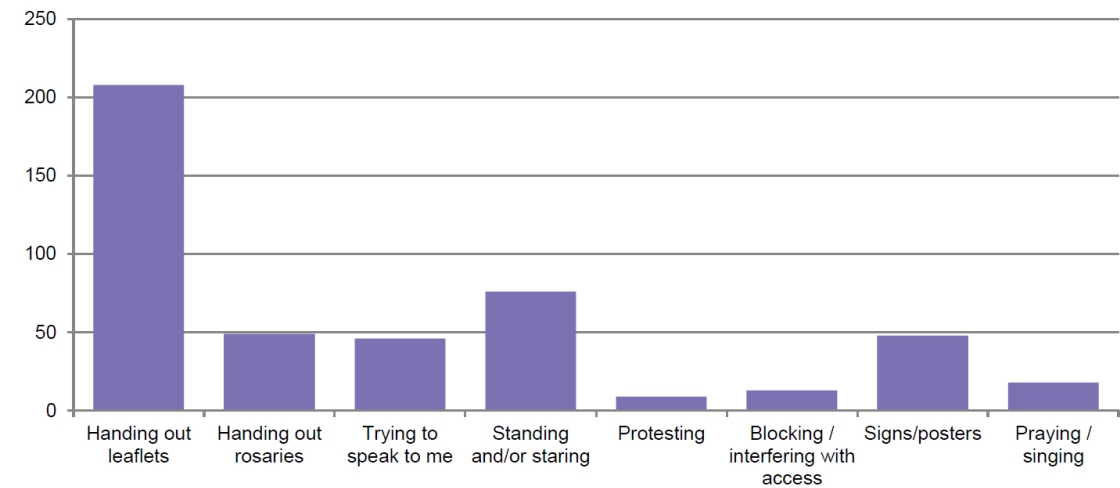
- Descriptions of activity were largely similar – with reports detailing somebody stood by the gate handing out leaflets and trying to engage with people entering the clinic, and additional people on the other side of the road with signs and posters opposing abortion
- Both women and those accompanying them consistently reported the negative impact of protesters, including feeling judged and being made to feel guilty, being upset by the activity, and being made to feel embarrassed and uncomfortable
- Almost all respondents supported the introduction of a buffer zone – and none opposed it, even where they felt the protest had an impact on them personally

Appendix B

Incidents reported

Based on the responses received from clients and those accompanying them during this period, we have counted the frequency of direct references to specific activities taking place outside the clinic. This should be considered in light of what clients themselves might notice when approaching the clinic, and not an exhaustive account of tactics used.

Activities reported to BPAS by clients/escorts
8th November - 8th December 2018

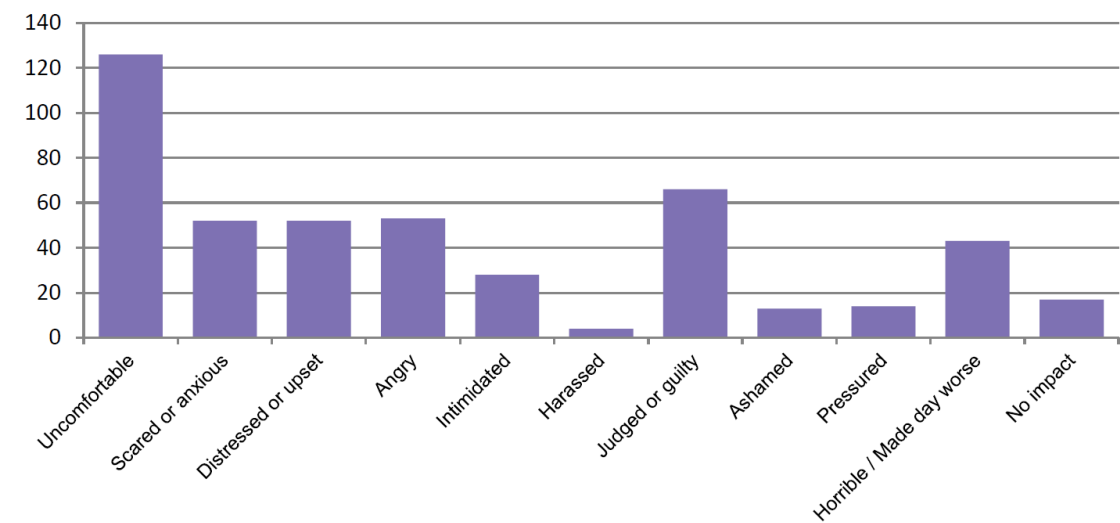


Feelings in relation to protest activity

Clients and those accompanying them are also asked to share how they feel about the protests. This chart details specific references to feelings evoked by the protests outside the clinic.

It is important to note from these two charts that although from the outside activity can appear innocuous (such as standing and praying, distributing leaflets), the impact on clients is sizeable.

Feelings of clients/escorts as reported to BPAS
8th November - 8th December 2018



Appendix B

Key themes

Many women report feeling **distressed** by the presence of protesters and their activities – many highlight that this is especially true because of the situation they are in, in which they have often already made a very difficult decision.

- Client, 17 November 2018 *"[The protesters were] handing out leaflets at the gate, swinging rosary beads, and telling me to choose life rather than murder. [It made me feel] uncomfortable, upset."*
- Client, 30 November 2018 *"[The protesters were] standing outside the entrance – tried to hand us things. [It made me feel] ashamed, angry, misunderstood. We have tried for a long time, including IVF to have this baby – this outcome was not what we wanted."*
- Client, 20 November 2018 *"[They were] showing pictures and trying to hand one a leaflet. [It made me feel] awful – started to cry."*
- Client, 21 November 2018 *"Handing out leaflets, harassing patients, saying inappropriate comments. [It made me feel] awful. Like I'm a horrific person. Like my body isn't my own. Like I'm a murderer."*
- Client, 28 November 2018 *"[The protesters were] displaying religious messages, approaching individuals with leaflets. [They made me feel] horrible, guilty, shaken up, nauseous."*
- Accompanying a client, 5 December 2018 *"[The protesters had] plaques, religious messages, were handing out crosses, staring as you approached. [It made me feel] uncomfortable. Unable to block or avoid these messages from partner."*
- Client, 8 December 2018 *"[The protesters were] chanting and following people. [It made me feel] horrendous."*

Women also report feeling **scared and intimidated** by the protesters – often as they are unsure what to expect and protesters can be present in groups and very close to the entrance of the clinic.

- Client, 8 November 2018 *"Bothering and upsetting other clients and myself. [It made me feel] fearful, upset, and anxious in a place that I should feel safe."*
- Client, 17 November 2018 *"Standing outside, holding leaflets. We didn't see what was on them because we managed to take a different route in and avoid her. Gave us dirty looks and muttered at us after. We felt pressured into finding a different route in. Felt attacked and intimidated, scared to hear what she was going to say/see what she wanted to give us. Makes an already unpleasant and traumatic experience ten times worse."*
- Accompanying a client, 10 November 2018 *"One was blocking the entrance gate, handing out/forcing leaflets upon people entering. Three others standing opposite with holy sign, praying. Extremely distressing for my daughter, who is already suffering from extreme anxiety. It is also intimidating and judgemental."*
- Client, 16 November 2018 *"Handing out leaflets and plastic rosary beads. [It made me feel] uneasy, targeted, unsafe."*
- Client, 27 November 2018 *"Standing/sitting in front of the clinic, trying to talk to me and to give me information papers. I felt very uncomfortable and it was no good feeling, very unsafe."*

Appendix B

- Client, 8 December 2018 *“[The protesters were giving out] leaflets – trying to communicate. [It made me feel] intruded [upon], more nervous about my procedure, less worthy.”*

Women report that the presence of protesters, even if they have no engagement with them, causes them to feel **guilt, shame, and pressure to change their minds**, and to feel that they are being **judged**.

- Accompanying a client, 24 November 2018 *“[They were] setting up and staring at us as we walked past, muttering all the while. [They made us feel] like we shouldn’t be here.”*
- Client, 8 November 2018 *“Offering leaflets and rosaries. There’s posters with babies and bible quotes. A lady said a prayer as I walked in. [It made me feel] guilty, bad. I felt very judged.”*
- Accompanying a client, 21 November 2018 *“Standing outside and opposite the clinic – handing out flyers and also had posters beside them. [It made me feel] embarrassed and as if going into the clinic was almost evil – as if we were taking a life.”*
- Client, 8 November 2018 *“[They were] pressuring me against my decision. Showed me a model of a fetus. I felt pressured and shamed as this was already a difficult decision to begin with.”*
- Accompanying a client, 7 December 2018 *“They walked up towards me and my sister as soon as we got near the gate. They were trying to give us leaflets. The presence of the protesters made me and my sister feel awful. This is a hard enough thing to do as it is without people judging you and making you feel worse.”*
- Client, 8 December 2018 *“[They were] standing across the road. [They] made me feel even worse about my decision and made me feel like I’m a horrible person.”*
- Accompanying a client, 4 December 2018 *“[The protesters were] influencing our decision that we already had a hard time going through. [They made me feel] like we were doing something wrong, angry, every situation is different.”*
- Accompanying a client, 28 November 2018 *“[They were trying to] give me religious items and offer advice. At the same time, they insinuated that we will go to hell. [They made me feel] like me and my girlfriend were monsters.”*

Many women and their escorts are understandably **angry** with protesters for attempting to infringe on personal healthcare decisions, often in a way that draws attention to the purpose of the clinic and why they are going there.

- Client, 21 November 2018 *“Standing directly outside gate to building, trying to talk and hand out leaflets/necklaces. [It made me] angry because we’re ending a wanted pregnancy due to fatal condition.”*
- Accompanying a client, 6 December 2018 *“They had moved from opposite the front entrance on the other side of the road – to right at the main gate. I feel angry, frustrated, emotional.”*
- Client, 25 November 2018 *“[They were] handing out leaflets. [It made me feel] extremely angry and upset. Women do not exactly relish having to come here. They should not have to put up with that.”*

Appendix B

- Client, 8 November 2018 *“Staring at women approaching the clinic. Made me feel uncomfortable and angry during an already stressful and upsetting situation.”*
- Accompanying a client, 14 November 2018 *“Standing right next to main gate entrance with leaflets and rosary beads. Opposite front door with posters and pictures. My daughter felt angry and intimidated.”*
- Accompanying a client, 28 November 2018 *“Made me feel angry as they don’t know people’s circumstances and making people feel upset and scared of their choice and guilty.”*

Their presence can deter women from attending their appointments because they are **fearful to walk past the protesters** – this is particularly true given the location of the clinic where it is difficult to avoid encountering somebody walking up and down Rosslyn Road.

- Client, 7 December 2018 *“[The protesters were] handing out leaflets and rosaries. I haven’t stopped crying since I came in. I was upset and scared anyway and this nearly made me turn around and go home.”*
- Accompanying a client, 24 November 2018 *“Offering rosary beads and protesting that abortions are horrible. It made my partner very upset and confused almost to the point that she didn’t want to come near the building.”*
- Accompanying a client, 17 November 2018 *“Blocking the gate handing out leaflets. Lady had wandered down the road and almost ran to intercept us. [Made us feel] uncomfortable and pressurised.”*
- Client, 27 November 2018 *“[They were] standing outside of the clinic. They did not approach me or say anything to me. [They made me feel] extremely uncomfortable and anxious. I actually went round the side of the clinic to gain access to the front door without having to come into contact with them out of fear of what they may say or do. Making a decision like this is hard enough as it is without being judged.”*
- Client, 23 November 2018 *“Trying to speak to me as I walked in and when I tried to ignore them, they tried to give me a leaflet. Hence why I had to end up taking the side entrance.”*
- Accompanying a client, 1 December 2018 *“Stopped at gate, given a leaflet, tried to get into a conversation, said there was other ways, tried to change my wife’s mind. [It made me feel] awkward, worried, didn’t want to talk to them, nervous about going past them.”*

Protests in the longer term

In recent years we have received **122 reports from people external to BPAS** (ie clients, people accompanying clients, local residents, passers-by) about protest activity outside BPAS Richmond.

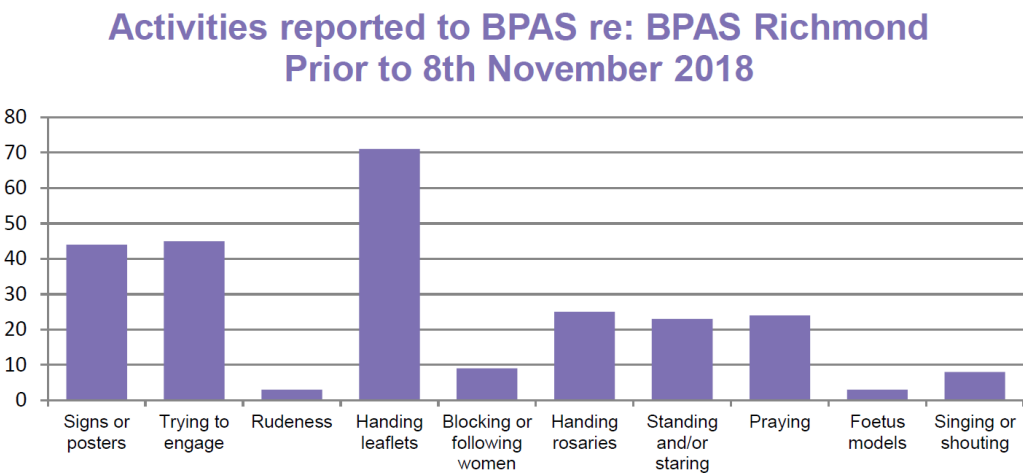
- None of the feedback we have received about the protest has been positive.
- Concerns are primarily raised about **intimidation, harassment, distress caused to women attending the clinic, and the impact of the protests on the local area**
- 71 of these comments are from clients, 18 are from client escorts, and 28 are from local residents or passers-by

Appendix B

- The earliest report of activity we have is from 2003, with all but six occurring after 2014 when the Good Counsel Network began attending on a daily basis.

Incidents reported

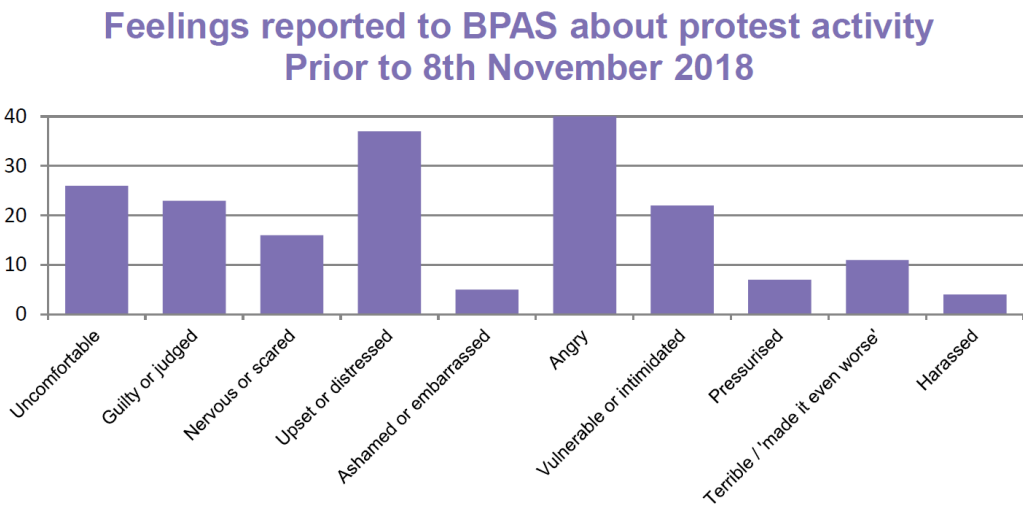
Based on comments received prior to 8th November 2018, we have counted specific references to activities as they are reported to have occurred outside the clinic. These reflect what clients and their escorts experienced when entering and leaving the clinic, as well as reports from local residents on what they have observed on Rosslyn Road.



Feelings in relation to protest activity

Anybody who contacts BPAS through our online form to report clinic activity or using a client comment form in a clinic is asked to share not only the activity that takes place but how it makes them feel.

It should be noted that the make-up of feeling differs in long-term responses compared to the snapshot data earlier. This reflects the different make-up of respondents and when former clients contact us via our website, the time they have had to reflect on their experience.



Appendix B

Noteworthy incidents

Although protest activity is regular and persistent outside BPAS Richmond, some incidents are worth noting separately owing to their severity.

- **November 2017.** Clinic manager reported that a client in the consultation centre was upset as two protesters outside had a handheld video camera and were filming the entrance to the clinic. A member of staff asked them to stop and they laughed. They only departed when the clinic manager got her phone out and threatened to film them.
- **March 2017.** Report received from clinic manager – “Client attended yesterday with her partner who did not want her to have an abortion. Client has advised us that he is violent towards her. Today client attended alone for the EMA [Early Medical Abortion] 1st part. Whilst here at the unit she received a call from her partner saying he knows that she is here. Also she received a text message from one of the protesters telling her not to go ahead with the abortion. It has transpired that the partner gave one of the protesters his and her mobile numbers.”
- **December 2016.** Internal report. “A client’s father got really upset as a protester touched his daughter’s arm and tried to give her rosary beads. He started to shout at the protesters and the protesters called the police. Police arrived and spoke to the client and her parents. Police stayed until client had finished her consultation to ensure that there was no more trouble when they left the building.”
- **July 2016.** Internal report. “A man arrived at mid-day – he laid down near the gate – protesting about ‘all the dead babies’. Police called – very little they could do.”
- **January 2016.** Footage from C4 Dispatches television programme ‘Britain’s Abortion Extremists’ of Justyna - an employee of the Good Counsel Network outside BPAS Richmond (copy available upon request). Justyna tells the undercover reporter of incidences where she had provided medical advice to women who had been told by doctors that their health was at risk if they did not have an abortion. Dispatches says they film her telling two women that their doctors might have got it wrong. Justyna provides no evidence that she has any medical qualifications. She tells the undercover reporter: “She said she’s not well and she said that she has heart problems so she said, you know, they advise her abortion. I said you know you can take the baby out even earlier because you know the babies can be treated even at 23 weeks outside the womb... Sometimes they don’t survive but at least, you know, the baby, there was a chance, you know what I mean?”

Key themes

Protesters can be **intimidating** to clients and local residents, by their actions and by their presence alone.

- Client, 2018 *“I went 3 times, there were always 2 of them standing outside. One man opposite was standing and staring at me with graphic pictures and signs while a woman right next to the entry tried to give me leaflets and tried to talk to me. Very intimidating, [it made me feel] sad and guilty. Even though they weren’t aggressive, it still had an impact on me.”*
- Local resident, July 2018 *“On 6 July 2018 I passed by at 12:45 and found there were another 3 people, 2 men and another woman, standing silently facing the clinic across the road. They were spaced at about 3 yard intervals, not together or talking, just standing in a row watching. I found it creepy and intimidatory.”*

Appendix B

- Passer-by (canvassing for May elections), April 2018 *"We walked past, and I glanced down at [the protestor's] bag and the slogan as we went by. This appeared to irritate him as then he got up and started to follow us up the road. He shouted after us: 'what political party are you from?' (We were wearing badges.) We ignored him. He shouted again: 'So you think it's OK to murder babies, do you?' We walked away from him."*
- Client, 2015 *"I had just spent two days with the clinic and on both days that I attended they were stood right outside shouting and making themselves heard. In my last day there I had stepped out the front door and walked down the steps to which I was swarmed upon by a lady shoving a leaflet in my face saying 'it's not too late' and even one lady saying 'have you already done it'."*
- Client, January 2015 *"Protester came out into my face, stopped me in my way and forced upon a leaflet for me to take. As I looked at the leaflet it was against abortions. I was left feeling very upset."*

There are many reports of clients being **upset and distressed** by the protesters – this can be exacerbated for women who are attending the clinic for terminations for medical reasons or foetal abnormality who are also handed leaflets calling them 'mum'.

- Client, 2018 *"[They made me feel] scared, upset and ashamed. My husband and I were there for termination due to foetal anomaly and so were already very distressed by the situation. The sight of them standing there at the entrance gate at the front of the building meant we felt we had to walk around the side of the building to gain access to the property, with our heads down as we walked past them already inside the gate to get to the main front entrance. They did not make contact with us in the end. It added additional unwanted and unnecessary stress and upset on an already devastating day."*
- Client, April 2018 *"[The protesters were] making a terrible situation even worse. [They made me feel] terrible. After telling them not every situation is cut and dry. It made me cry, shake."*
- Client, 2018 *"I was so worried about walking into the clinic. On approach to the Richmond BPAS I was already feeling anxious and emotional. When I saw the protesters my feelings were heightened and brought me to tears; And this was before I even had to walk past them."*
- Local resident, 2014 *"Before the first time I saw the posters of dismembered babies, I did not realise there was an abortion clinic in my neighbourhood. There was nothing to signal that the building was any different from the other ones. I had had my first miscarriage a few months before and it was still heavily on my mind. Seeing those dead babies reminded me of that awful time. I was upset, and angry of being so graphically reminded of it."*

There are many reports of clients and escorts feeling that they are being **blocked, followed, or interfered with** by protesters – often those who are standing immediately by the gate. Women also report that they decline a leaflet or to speak with a protestor but the protestor continues to approach them.

- Client, June 2018 *"I had one push past my mother to try and hand me a leaflet and also had someone follow us up to the door and take a picture which would of got me from behind."*

Appendix B

- Local resident, 2018 “[The protesters] lurk around the gate and get right up in [the clients’] faces and keep talking even when they have been told their advice is not welcome.”
- Client, 2017 “They handed me a leaflet as I entered, nauseous and terrified, and told me they could save me. One of them held a huge placard with bible quotes. They changed throughout the day with more graphic images as the day progressed – aborted fetuses accompanying bible quotes seemed like an oxymoron to me. The protester as I left said a prayer for me and followed me down the road until I got in my car.”
- Client, December 2017 “[The protesters were] stopping me from going in, gave me a leaflet and said ‘this is your child’.”
- Client, January 2015 “Today I felt harassed by the “pro-life” anti-abortion campaigner outside of the clinic who refused to take no for an answer when she gave me a leaflet. She told me I was condoning murder.”

Women routinely report feeling **guilty and that they are being judged** by the protesters for their choice. This can be exacerbated when Helpers of God’s Previous Infants ‘vigils’ take place multiple times a year which involve hymns and group prayer, some of which can be heard inside the clinic.

- Client, December 2017 “[The protester was] shaking her head at me and genuinely making me feel really guilty like I’m killing a life. She was disgusted. Made me feel so guilty and awful.”
- Client 2017 “[They were] handing out rosary beads, leaflets. Worst of all, they were singing songs when I was in the waiting room, could hear them through the window. It made me feel horrific and so so so angry.
- Client, November 2016 “They would walk up to you before even getting to the clinic and bother you about feeling guilty about doing this to a child. As this was a medical reason and not personal choice I felt very hurt and it was uncomfortable and even upset me to the point of tears.”
- Client, October 2016 “She advised me to steer clear of the clinic as they wouldn’t provide me with the help I needed. She also gave me a pamphlet. It made me doubt my decisions as she guilted me in my choice. In the pamphlet there was also a letter/poem from ‘your baby’ which was also quite distressing.”

Protesters routinely use **religion and prayer** to exacerbate women’s feelings of guilt, and evoke concepts such as hell and sin as they engage with women outside the clinic.

- Client, September 2018 “Rude, explaining that I have made the wrong decision and I should end up in hell!! Not exactly the best feeling when you are going through a stressful and traumatic time and being made to feel not worthy of anything”
- Client, October 2016 “They told me having an abortion was a sin, they gave me a necklace and told me I would have a girl.”
- Client, October 2014 “I was walking to the clinic this morning around 8, a lady approaches me at the entrance stating she works with some charity - thought she was part of the clinic team, then she started advising me and making me aware of an abortion procedure (that it is against religions, killing a soul that God wants in the world for a

Appendix B

reason, stating she will be there for me emotionally, physically and financially). I was feeling embarrassed badly in front of the others walking by. I would love to place a complaint about the feeling she made me feel in a very hard day for me. And it's the wrong place for her to be."

Staff experience

Direct responses to consultation

Almost 50 BPAS staff have provided responses to the council consultation detailing their personal and professional experiences of protest activity.

Staff strongly support the introduction of a buffer zone, and many provide examples of the distress caused to clients by the presence outside.

The council has also received a letter from the BPAS Richmond Clinic Manager detailing the impact on his staff and patients and urging the introduction of a buffer zone.

Wider experience

As part of the Home Office review earlier in the year, Richmond staff shared some of their experiences of clinic protests at Rosslyn Road. These include the impact of protests on their own personal wellbeing, as well as their experience treating clients who have encountered protesters outside and are often upset.

- Staff member, BPAS Richmond – *"[I feel] very intimidated. Every day now I enter and leave work via the back door to avoid the confrontation and them running towards me as I walk in the front gate. They can be persistent when I and other people have told them we do not want to engage with them. I don't leave work to go for lunch anymore because I don't want a conflict. I sit away from the staff room window so they cannot see me eating my lunch inside work. I have had to advise my sister and partner to come via the back door when collecting me from work to avoid them. I am cautious about driving my car to work so they don't know the car I drive or my number plate."*
- Staff member, BPAS Richmond – *"I have been called a murderer when I walked a woman from her car as she felt unable to walk by the protesters. She rang us from her car sobbing – as I walked in with her they shouted that I was going to murder her baby."*
- Staff member, BPAS Richmond – *"Clients are incredibly stressed. They often factor the protesters into their decisions regarding treatment. An early medical abortion over 2 days is the most effective form of a safe procedure, but clients will often say to me that they have made the choice to have a simultaneous early medical abortion (where both pills are taken on one day) because they don't want to face the protesters again when they return to the clinic."*
- Staff member, BPAS Richmond – *"One of my clients disclosed at the end of the consultation that a lady stopped her outside, grabbed her arm saying to not kill her baby because they will help. The client told me that was very upsetting and made her nervous. She asked me if I considered her a killer because she knows that she cannot manage to support her child."*
- Staff member, BPAS Richmond – *"I remember one woman who turned away, intimidated by the protests, she felt like she was being judged - only to return 4 weeks later when she was 20 weeks. It seems that they only succeed in delaying things for some women."*

Appendix B

- Staff member, BPAS Richmond – *“Several years ago a protester took my photograph and car registration number.”*

Potential solutions

A Public Spaces Protection Order is the only solution that is both effective and has been supported by the courts in dealing with clinic protests.

BPAS have considered the use of, or are aware of police use of, a number of pieces of other legislation to address the issues presented by clinic protests. None of them were successful. This does not mean that harm was not being caused, merely that law and order legislation is largely ill-equipped to deal with the unique mix of tactics, targets, and location that combine to cause those that experience them harassment, alarm, and distress. Proposals have included:

- **S5, Public Order Act 1986 (used).** Two Abort67 activists were prosecuted under this section in relation to one of their signs of dismembered fetuses which they were displaying outside the BPAS Brighton clinic. They were acquitted as the judge ruled that although he believed harassment, alarm, or distress had been caused, the signs had not been threatening, abusive, or insulting.
- **S14, Public Order Act 1986 (used).** In 2014, police officers in Richmond issued Good Counsel Network employees and volunteers with a Section 14 notice indicating that they considered the group posed a ‘serious risk of disruption to the life of the community’. The Metropolitan Police reviewed the issuing of these notices and concluded that they had been issued incorrectly.
- **S1, Protection from Harassment Act 1997 (considered).** This is generally inappropriate for use outside abortion clinics as it requires a course of conduct against an individual rather than a location or organisation, which is not usually the case given the number of times clients attend clinics; and it also requires victims to report harassment to the police and if they wish to pursue a prosecution, to be willing to give evidence in court which would require disclosing their confidential medical records.
- **Part 3, Anti-social Behaviour, Crime and Policing Act 2014 (considered).** The issues with this are two-fold – firstly that the powers only last a maximum of 48 hours and these groups are often present for more prolonged periods so will simply return once the order has expired; and secondly that it requires an Inspector-level police officer to confidently judge the balance the freedoms from harassment and of expression and assembly. Given our experience of different police forces, we are not confident that police would accurately balance these freedoms.
- **S61 and S68, Criminal Justice and Public Order Act 1994 (considered).** These set out the offence of aggravated trespass – where a person trespasses on land and, in relation to any lawful activity which persons are engaging in, does anything which is intended to have the effect of intimidating those persons so as to deter them from engaging in that activity. It was concluded that trespass takes place only in very isolated circumstances and would not address the vast majority of protest activity.
- **S3A, Protection from Harassment Act 1997 (considered).** This allows for civil injunctions to be taken out in relation to harassment. It is our opinion that an individual civil remedy for this persistent issue is insufficient and incorrectly places the right of women to access healthcare unimpeded as the responsibility of a provider rather than the government. Articles 8 and 14 of the Human Rights Act, and s149 of the Equality Act

Appendix B

2010 all indicate that the state has the responsibility to ensure women are able to access healthcare without discrimination, harassment, or victimisation. A reliance on civil injunctions would be a reliance on independent providers to mitigate this responsibility.

Appendices

Please find attached the full database of submissions from clients, escorts, local residents, and passers-by to BPAS and the Back Off campaign about protests outside BPAS Richmond. These have had personally-identifiable information including postcodes and contact details removed but are otherwise unredacted.

Accounts timestamped '1 January 20xx at 00:00' should be read as occurring at some point in that year (without specific date information provided).

Contact

Please direct any questions or requests for further information to:

Rachael Clarke
Public Affairs and Advocacy Manager
British Pregnancy Advisory Service



Appendix B

2. BPAS Clinic Treatment Unit Manager

Regulatory Committee
Richmond Council
Civic Centre
44 York Street
Twickenham
TW1 3BZ

Matthew Richards
Treatment Unit Manager
BPAS Richmond
15 Rosslyn Road
Twickenham
TW1 2AR

4th December 2018

Dear Councillors,

I have been working in BPAS for 2 years and am now the Treatment Unit Manager of BPAS Richmond Cluster.

BPAS Richmond sees between 40-50 clients per day, and sees women coming to the clinic for all different reasons, many with complicated social and medical backgrounds including women who are having termination of planned pregnancies due to fetal anomaly. We also see on average 50 under 18 year old clients a month.

The unit itself is comprised of 51 members of contracted staff and often hosts training for other clinicians based in units around the BPAS organisation.

During my time working at BPAS Richmond I have witnessed anti-abortion protestors outside the Clinic every day we are open (Tuesday-Saturday). There will be at least 2-4 protestors outside the clinic; protestors will stand outside the clinic entrance handing out Anti-Abortion leaflets and Rosary Beads (blue and pink), and other protestors will stand opposite the clinic on their knees praying with religious and anti abortion posters.

The protestors' activity has a detrimental impact on women accessing our service. Their presence can often cause many clients to turn away and not come into the Unit, this is especially the case for younger clients and those with complex psychological and emotional needs.

The protestors will actively engage with clients, putting pressure on them to continue with their pregnancy, not discussing with them how our service offers a comprehensive pregnancy option discussion and supports women in their pregnancy journey.

Appendix B

Protestors have sought out vulnerabilities in clients as a means to manipulate their decisions. For example a client attended for a consultation for termination of pregnancy with her partner that she was in a domestic abuse situation with. The protestor spoke with the abusive partner about client needing to continue the pregnancy. The partner gave the client's contact information to the protestor with the scheduled termination date. Subsequently, the protestor texted the client on the day of the termination telling the client not to have the termination and stating what she was doing was wrong. This greatly impacted the client's mental wellbeing and health, causing undue additional distress to the woman at a very vulnerable time.

This unsolicited activity by the protestors towards clients has in turn had a significant impact on staff within the unit.

After women have been blindsided by protestors' comments and actions they will come into the clinic visibly distressed, angry and confused. Staff will take on the support role for the client and offer counselling and reassurance towards them as best as they can. At times clients are confused and feel that the protestors are there because the Unit allows this and they feel betrayed by the staff, creating an environment of hostility towards staff that are trying to support and care for these women. Staff will do their best to support and reassure these upset women but this can take a considerable toll on them.

Staff will also try to avoid using the main entrance at fears of reprisals from the protestors and often use the back entrance to access their place of work. Staff feel helpless and powerless watching women be harassed by the protestors and become frustrated with this.

Having a Public Space Protection Order (PSPO) implemented around the Richmond Clinic would tremendously help towards allowing women to feel they can access a safe place to discuss their pregnancy options without judgement. There would not be a deterrent waiting at the gate of the service they are so desperately seeking and they would be able to access a service that is safe and secure to them without having to feel what they are doing is "wrong".

I hope that you will implement a PSPO to show that Richmond cares about the safe access of women's reproductive rights and believes in the right for people to access medical care without prejudice.

Yours Sincerely,

Matthew Richards
Treatment Unit Manager
Richmond Cluster.

Appendix B

3. Family Planning Association



FPA response to Richmond Council Consultation on a Public Spaces Protection Order for the Rosslyn Road area

About us

FPA is one of the UK's leading sexual health charities and the national affiliate for the International Planned Parenthood Federation. Our mission is to champion people's right to sexual and reproductive health and wellbeing through advocacy, campaigning, education and information.

We do this through the provision of evidence-based sexual health information to the public and professionals, as well as a pregnancy choices, post abortion and post pregnancy counselling service in Northern Ireland.

Whilst FPA does not provide services in Richmond, our staff and services users have comparable experience of graphic verbal and written protest, as well as physical, verbal and emotional intimidation, which has left some visitors and staff feeling upset, uncomfortable, intimidated and/or harassed.

Given the similarity of the methods of protest employed in Richmond and outside our service in Northern Ireland, we wish to share some of our experiences with Richmond Council. As part of this, we have drawn on comments written by service users in a comments book situated in our waiting room.

Consultation questions

Question 7: Do you agree or disagree with the proposal to implement a buffer zone?

FPA strongly agrees with the proposal to implement a buffer zone outside the BPAS clinic on Rosslyn Road. Women have the right to access reproductive health services without the threat of intimidation or harassment.

Question 8: Do you agree or disagree with the boundaries of the proposed buffer zone in the Rosslyn Road area?

We agree with the proposed boundaries.

Question 9: Do you agree or disagree with each of the following proposed prohibitions in the buffer zone?

- a) Protesting, namely engaging in any act of approval or disapproval or attempted act of approval or disapproval, with respect to issues related to abortion services, by any means, including, without limitation, graphic, verbal or written means, and including, for the avoidance of doubt, any form of counselling or interaction with residents or BPAS clients on the street.**

Strongly agree.

FPA strongly supports the prohibition of protesting related to abortion services in the buffer zone, as outlined in this consultation.

Whilst we support the right to protest, services users and staff members have the right to access and provide abortion free from the threat of intimidation, harassment and assault.

In our experience anti-choice protesters have a deeply negative impact on service users, their family members, staff members and other members of the community. Protesters can, for

Appendix B

example, unduly influence an individual's decision to access, or not access, sexual and reproductive health services. We are aware of clients who have discontinued counselling because of the protesters who assemble outside our building.

Our clients do not find the presence of protestors or their vigil, prayer or 'counselling' to be helpful. In fact, the response is the opposite and often the start of a counselling session is taken up with discussing an incident which has occurred on the way into the building.

Protestors also have a negative impact on staff members who are subjected to emotive and coercive language. An FPA staff member was followed from the building on a number of occasions during her pregnancy. The employee was subjected to unsolicited conversations while these individuals attempted to force leaflets on to her on separate occasions as she attempted to leave work in her mothers' car and in a taxi.

b) Interfering, or attempting to interfere, whether verbally or physically, with a BPAS client or member of staff.

Strongly agree.

Numerous FPA service users have reported experiencing verbal and physical interference as they attend our clinic in Northern Ireland. This has an inevitable negative emotional impact on clients. As such FPA strongly agrees with the prohibition of interfering, or attempting to interfere, whether verbally or physically, with a service users or members of staff, within the buffer zone, as outlined in this consultation.

The comments below reflect some of the experiences of service users.

"I stood waiting for a taxi. Protestors tried to get me out of building to talk and when I left to go into taxi, followed me across to taxi and tried to prevent me getting into taxi."

"My daughter, 15 years old, was approached by a blonde haired woman and asked where she was going. I told her we were capable of making an educated choice. She then began a verbal tirade with comments such as "this is your grandchild" and "what if your daughter dies during an abortion?" Both my husband and I told her to stop but she continued and tried to block the door way entrance. In our opinion this is harassment and will cause emotional and mental strain on any woman and their partner/family attending the clinic."

"On arrival we were harassed by anti-abortion campaigners. Very rude and inconsiderate of how my girlfriends feelings were hurt. I have heard the centre has regular problems with this and all the centre is doing is helping young females as much as they can. Staff are very thoughtful and the anti-abortion campaigners should be stopped from harassing people in an already vulnerable state. They even try to stop you from entering the building. I will be reporting harassment to PSNI and hopefully this helps future visitors"

c) Intimidating or harassing, or attempting to intimidate or harass, a BPAS client or a member of staff.

Strongly agree.

Whilst we support the right to protest, services users and staff members have the right to access and provide abortion free from the threat of intimidation, harassment and assault. As well as having a negative impact on service users and their family members (as outlined throughout), intimidation and harassment has a deeply negative impact on staff members.

Richmond Council should be aware that in [2015 an individual was convicted for assaulting an FPA employee](#) in the belief she was a pregnant woman leaving a counselling session. The

Appendix B

individual followed the staff member down the street after she left our office, attempted to put leaflets into her handbag and eventually hit her with the clipboard she was carrying. Despite this conviction the protestor continues to stand outside our office without sanction.

d) Recording or photographing a BPAS client or member of staff of the clinic whilst they are in the buffer zone.

Strongly agree.

The unauthorised filming or photographing of service users or members of staff of the clinic by anti-choice protesters as they enter or exit a clinic is a method of intimidation and FPA strongly supports the prohibition of photographing service users and members of staff.

This does not apply to security cameras, which may be in operation for the purposes of maintaining the safety of the premises where it is located.

e) Displaying any text or images relating directly or indirectly to the termination of pregnancy.

Strongly agree.

Protesters outside FPA's clinic in Northern Ireland regularly use text and images relating to the termination of pregnancy to intimidate service users. As outlined, in the statements below made by women who access our services, this causes upset, anxiety and embarrassment.

"[I] came to the centre with my mum for some advice and help regarding a crisis pregnancy and was greeted by an anti-abortion protestor with pictures. They stood at the door and I couldn't get past her to get in and she told me that the picture was what my baby looked like in my womb. I was very upset by the incident and they have no right to do this, and I think something should be done about this."

"Me and my friend were harassed on the way in. She was pressuring us to take leaflets. She was also lecturing us about abortion. We were quite upset and embarrassed by the situation. Something should be done about this."

"Myself and friend attending FPA were harassed by a lady forcing leaflets and pictures upon my friend. Being a nurse and having experience in all areas of pregnancy etc. and ethical dilemmas I was unfazed, but my friend was more upset than she let on to be. Everyone has a right to an opinion, but should not be forced. As a nurse and friend I will support my friend whatever she chooses."

Question 10: One option would be to introduce a designated area for protesters/vigil holders to stand somewhere within the buffer zone. Do you agree or disagree with this option?

Strongly disagree.

Whilst we support the right to protest, women have the right to access abortion free from intimidation and harassment and outside a clinic is not the appropriate location to oppose abortion provision, **in any form**.

The presence of protesters, even those which are subjected to restrictions, is enough to intimidate women.

In our experience, harassment does not always take place immediately outside the building. An FPA employee was, for example, followed around a supermarket in an attempt to intimidate

Appendix B

her while another was confronted while she was shopping. Service users have also reported that have been followed and approached near our office.

One service user reported: *“Leaving the building with sister, mother and uncle at approximately 12.30pm. Sister has been attending for counselling sessions for previous few weeks (which are really helping her)! Accosted outside door by red haired woman. Told her we didn’t need her advice. She told me, rudely, that she wasn’t speaking to me, she wanted to speak to my sister. I told her we’d phone her if we wanted her advice. She proceeded to follow us up the street, trying to push her leaflets on us. In the meantime the man who was with her followed our uncle shouting about how this would be his grandchild! Very intimidating, pure harassment and the first week it happened my sister didn’t want to come back. Something needs to be done to remove these people.”*

Given this, we would urge the council not to allow a designated zone for protesting in the vicinity of the clinic.

Finally, we would add that non-directive counselling services are available from a number of sources and as such it not necessary for anti-choice protesters, who often have no counselling experience or qualifications, to attempt to provide them.

Question 13: Do you think the proposed prohibitions may have an impact, either positive or negative, on any group of people with a protected characteristic under the Equality Act 2010?

Yes. The proposed restrictions protect women from sex discrimination and gender based violence.

General recommendation No. 35 on gender-based violence against women of the Committee on the Elimination of All Forms of Discrimination against Women, states that “abuse and mistreatment of women and girls seeking sexual and reproductive health information, goods and services” is a form of gender-based violence, which may amount to “cruel, inhumane or degrading treatment”.ⁱ

14. Final comments

For twenty years FPA employees and clients have been subjected to the unacceptable behaviours described in this response. This has left the organisation and those accessing our services feeling helpless, voiceless and stigmatised.

Clients, staff and other health service users, whether accessing ours or other services should be protected, and as such we support the proposal to introduce buffer zones.

For more information, please contact:

Emily James (Policy and Public Affairs Manager)
FPA
23-28 Penn Street
London
N1 5DL



ⁱ Committee on the Elimination of Discrimination against Women, [General recommendation No. 35 on gender-based violence against women, updating general recommendation No. 19](#), 2017

Appendix B

4. The Catholic Union of Great Britain

RESPONSE OF THE CATHOLIC UNION OF GREAT BRITAIN TO THE RICHMOND COUNCIL CONSULTATION ON THE PROPOSED PUBLIC SPACES PROTECTION ORDER AROUND THE BPAS CLINIC

Introduction

1. The Catholic Union of Great Britain is an organisation of lay Catholics providing a Catholic viewpoint on issues of concern in politics and public life. It seems to us that a Public Spaces Protection Order ('PSPO') in the form that is currently proposed by Richmond Council would be neither in the public interest nor lawful.
2. We say that for the following reasons:
 - (a) The materials disclose that there are variety of competing interests related to activity outside the BPAS facility and significant disputes of fact at least as to:
 - (i) What is happening;
 - (ii) Who is engaging in what conduct; and
 - (iii) Its effect on users of the clinic (there is evidence of people objecting and evidence of potential users being thankful for the benefits they received from people outside the clinic);
 - (b) A local authority is not equipped to resolve these issues. It does not have appropriate procedures to ensure that it is independent of both sides, that both sides are properly represented and it can objectively weigh admissible evidence. Where there are significant disputes such as these the proper forum for their resolution is a Court;
 - (c) The 'Options Appraisal' produced by the Council sets out a number of other options including a negotiated agreement and applications that could be made to a court in relation to the conduct the subject of the Council's Motion. The statutory guidance (see section 73 of *Anti-social Behaviour, Crime and Policing Act 2014* ('ASBCPA')) produced by the Home Office and which the Council must follow, contains a number of references to 'necessity' and 'proportionality'. A PSPO cannot be regarded as 'necessary' or 'proportionate' in circumstances where there are substantial disputes of fact and none of the options for resolving the issues through the courts has been attempted (never mind found to be ineffective);
 - (d) The most significant evidence when considering 'necessity' and 'proportionality' is the evidence of children being born as a result of some of the activities outside clinics such as these. A measure that criminalises activity that has had this result would be almost impossible to defend as 'necessary' or 'proportionate' on any conventional public law ground;

Appendix B

- (e) We expand on this, below, but the terms of the proposed order would appear to be clearly contrary to the European Convention on Human Rights.
- 3. We will deal with three aspects of the proposed order in a little more detail:
 - (a) The European Convention;
 - (b) The statutory test of ‘reasonableness’; and
 - (c) The police evidence to the Home Affairs Select Committee and the Home Secretary’s decision following the Home Office review.

The European Convention

- 4. Section 72 ASBCPA states that the local authority ‘*must have particular regard to the rights of freedom of expression and freedom of assembly set out in articles 10 and 11 of the Convention*’. The statutory guidance requires (page 17) that ‘*any use of these powers must be compliant with the Human Rights Act 1998*’. While the original Home Office guidance states: ‘*Agencies...must have regard to the Articles 10 and 11 of the European Convention on Human Rights which provide for the right for lawful freedom of expression and freedom of assembly, ensuring that...the making of a public spaces protection order is not used to stop reasonable activities where no anti-social behaviour is being committed*’.
[Anti-social behaviour is defined in section 2 ASBCPA as ‘*conduct that has caused, or is likely to cause, harassment, alarm or distress to any person*’ and some conduct in relation to residential premises. It does not extend to mere protests, to acts of ‘approval / disapproval’, to counselling or to prayer (all of which are to be made criminal by the proposed PSPO, see below)].
- 5. Therefore the Act and the statutory guidance (and the general obligation in the *Human Rights Act 1998* requiring a local authority to act compatibly with Convention Rights) require the Convention to be applied. The cases make clear that Article 10 is directly engaged in circumstances such as these (and is referred to expressly in the preamble to the draft PSPO).
- 6. The most relevant case is *Annen v. Germany* (application number 3690/10) decided by the European Court of Human Rights on 26th November 2015. The case is important both for its statements of general principle and its statements as to how those principles apply in the particular context of anti-abortion activity. As to general principle, the Court said this:
 - 50. *The Court considers, and it was not disputed by the Government, that the civil injunction issued by the national courts amounted to an “interference” with the applicant’s right to freedom of expression as guaranteed by Article 10 of the Convention. Such interference will infringe the Convention if it does not satisfy the requirements of paragraph 2 of Article 10.*
 - ...
 - 52. *The fundamental principles concerning the question of whether an interference with freedom of expression is “necessary in a democratic society” are well established in the*

Appendix B

Court's case-law and have recently been summarised as follows (see Delfi AS v. Estonia [GC], no. [64569/09](#), § 131, 16 June 2015 with further references):

“(i) Freedom of expression constitutes one of the essential foundations of a democratic society and one of the basic conditions for its progress and for each individual's self-fulfilment. Subject to paragraph 2 of Article 10, it is applicable not only to 'information' or 'ideas' that are favourably received or regarded as inoffensive or as a matter of indifference, but also to those that offend, shock or disturb. Such are the demands of pluralism, tolerance and broadmindedness without which there is no 'democratic society'. As set forth in Article 10, this freedom is subject to exceptions, which ... must, however, be construed strictly, and the need for any restrictions must be established convincingly ...

(ii) The adjective 'necessary', within the meaning of Article 10 § 2, implies the existence of a 'pressing social need'.

53. Another principle that has consistently emphasised in the Court's case-law is that there is little scope under Article 10 of the Convention for restrictions on political expressions or on debate on questions of public interest

(underlining added)

As to the particular context of anti-abortion activity, it said:

62...The Court also points out that the applicant's campaign contributed to a highly controversial debate of public interest. There can be no doubt as to the acute sensitivity of the moral and ethical issues raised by the question of abortion or as to the importance of the public interest at stake

...

64. Having regard to the foregoing considerations and, in particular, the fact that the applicant's statement, which was at least not in contradiction with the legal situation with regard to abortion in Germany, contributed to a highly controversial debate of public interest, the Court, in view of the special degree of protection afforded to expressions of opinion which were made in the course of a debate on matters of public interest...

7. In fact, in English domestic law, Article 10 occupies a privileged place. In *R v. Home Secretary Ex parte Simms* [2000] 2 AC 115 at 126 -7, Lord Steyn in the House of Lords said: ‘...the starting point is the right of freedom of expression. In a democracy it is the primary right: without it an effective rule of law is not possible...’.
8. The terms of the proposed PSPO would appear to be directly inconsistent with these principles. Proposed paragraph 1 a) is in the following terms:

Appendix B

Protesting, namely engaging in any act of approval or disapproval or attempted act of approval or disapproval, with respect to issues related to abortion services, by any means, including, without limitation, graphic, verbal or written means, and including, for the avoidance of doubt, any form of counselling or interaction with residents or BPAS clients on the street;

“Protesting” is defined as including “prayer”.

9. An order by an English local authority in these terms which has the effect of making activities like ‘approval / disapproval’, ‘prayer’, ‘counselling’ and ‘protesting’ criminal should not require recourse to the European Convention. Most right-thinking members of the British public are likely to be horrified at government authority being used in this way. However, the European Convention provides a legal basis for this reaction. Such an order cannot be lawful.

Unreasonable

10. There is real doubt as to whether PSPOs were intended to be used in this context at all. They appear to be a tool a local authority can use to ensure that public spaces are free from what people generally would regard as anti-social behaviour. The sorts of activities envisaged would appear to be excessive public drinking, certain dogs, legal highs, public gambling or certain types of driving.
11. In keeping with this apparent intention, the test in section 59 (3) includes a requirement that the activity being prohibited be ‘unreasonable’.
12. Expressing ‘approval / disapproval’, offering counselling, praying or handing a person a leaflet offering alternatives to abortion or other like activities do not fit easily within this scheme. As we say above, we understand that there is evidence that people have been born who would not otherwise have been as a result of activities such as these. Whatever a decision maker’s view as to the current state of the law on abortion, a decision that activity having that effect is ‘unreasonable’ would seem hard to justify on conventional public law grounds either.

Duty to consult the Chief Officer of Police and the Home Office Review

13. Section 72 (3) and (4) ASBCPA require that the Chief Officer is consulted before making a PSPO. The written evidence from the Home Office to the Home Affairs Select Committee hearings on buffer zones contains the following passages:

[In December 2016]...all forces confirmed that they were not aware of any significant regional or local issues and felt that they had the necessary and appropriate powers to manage such protests

...

The police assessed that the overwhelming majority of demonstrations were conducted peacefully and lawfully, without any public order / criminal concerns or need for police intervention. Pro-life groups denied harassment and intimidation, claiming that they only seek to dissuade and offer support to those seeking the services of family planning clinics.

Appendix B

Complaints about the activities of pro-life demonstrators directly to police from those attending healthcare clinics were seemingly few.

On 13 September 2018, the Home Secretary announced the result of the Home Office “Abortion Clinic Protest Review”. The Review found that anti-abortion activities are predominantly passive in nature and the Home Secretary said that in this country it is a long-standing tradition that people are free to gather together and to demonstrate their views within the law. He concluded that “national buffer zones” would be disproportionate and it is the view of the Catholic Union that the PSPO proposed by Richmond Council would also be disproportionate.

Conclusion

14. The proposal to make a PSPO fails to give proper weight to the interference in articles 9, 10 and 11 of the European Convention on Human Rights that it would represent. By contrast, the proposal gives disproportionate weight to the views of those local residents who would prefer that activities outside the BPAS facility did not take place. The fact that the activities are unpopular with some people is not a sufficient or lawful reason to ban a broad range of behaviour which is otherwise lawful and a peaceful exercise of human rights over an extensive area. The PSPO is not the appropriate or lawful way to deal with this situation.

The Catholic Union of Great Britain

8 December 2018

Appendix B

5. Liberty

LIBERTY

ASB Team/PSPO Consultation
London Borough of Richmond upon
Thames

7 December 2018

LAWYERS

HEAD OF LEGAL CASEWORK

Emma Norton, Solicitor

Rosie Brighthouse, Solicitor

Debaleena Dasgupta, Solicitor

Lara ten Caten, Solicitor

Megan Goulding, Solicitor

BY EMAIL TO consultationrosslynroad@richmond.gov.uk

The solicitors employed by Liberty are individually authorised and regulated by the Solicitors Regulation Authority

Dear Sir/Madam

Consultation on the Public Spaces Protection Order for the Rosslyn Road area

We write in respect of the proposal by London Borough of Richmond upon Thames Council ('the Council') to make a Public Space Protection Order ('the PSPO') creating a buffer zone to ban protests outside the British Pregnancy Advisory Service ('BPAS') clinic on Rosslyn Road.

Since their introduction, Liberty has been concerned by PSPOs that are too widely drawn, vague, and that disproportionately impact the most vulnerable, and has been campaigning on the issue for some time. Encouragingly, a number of local authorities have responded to concerns regarding such proposals by choosing to amend or withdraw them altogether.

In particular, we are concerned by provisions in the draft PSPO that ban the following activities:

- "Protesting, namely engaging in any act of approval or disapproval or attempted act of approval or disapproval, with respect to issues related to abortion services, by any means, including, without limitation, graphic, verbal or written means, and including, for the avoidance of doubt, any form of counselling or interaction with residents or BPAS clients on the street;"
- "Displaying any text or images relating directly or indirectly to the termination of pregnancy."

These provisions are too widely drawn and likely to inhibit lawful protest.

Appendix B

The issue of PSPOs banning protests outside sexual and reproductive health clinics is one of competing human rights. On one hand, a PSPO that makes certain forms of protest a criminal offence could violate the rights to freedom of expression and assembly under Articles 10 and 11 of the European Convention on Human Rights ('ECHR'). Section 72(1) of the Anti-social Behaviour, Crime and Policing Act 2014 requires the Council to have particular regard to these rights in making PSPOs; these provisions may even impose on public authorities a positive obligation to protect and facilitate freedom of expression and assembly.

On the other hand, women have a right to sexual and reproductive health and to make informed choices regarding their own sexuality and reproduction; including whether or when they have children. Denial of this right violates multiple human rights, including the right to life under Article 2 ECHR, the right to freedom from torture under Article 3 ECHR, the right to privacy under Article 8 ECHR (which encompasses the right to personal autonomy and the right to health), the right to education under Article 2 of the First Protocol ECHR, and the prohibition of discrimination under Article 14 ECHR.

As a result, we consider that where there is evidence of misuse of protest rights, and distress to women, some forms of restriction under very specific circumstances may be acceptable outside sexual and reproductive health clinics, to ensure that women's right to access to abortion is protected and that unlawful actions are prevented. However, any such restrictions must afford sufficient respect for freedom of speech and assembly.

PSPOs are a form of restriction we oppose, due to their potential for misuse and the wide discretion they give to councils when it comes to enforcement. The Government itself was so concerned about the widespread misuse of PSPOs by councils that it issued statutory guidance on 17 December 2017 to try to curb it.¹

A major issue of concern for us is that the restrictions included in PSPOs (as is the case here) often overlap with existing powers that police already have under primary legislation, in curbing anti-social or criminal behaviour; however enforcement action and penalties under the PSPO regime do not contain the safeguards included in other legislation. In this way PSPOs are used to circumvent the intentions of Parliament.

The Council should therefore re-consider alternative forms of restriction around sexual and reproductive health clinics instead, such as:

¹ https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/679712/2017-12-13_ASBS_Revised_Statutory_Guidance_V2.1_Final.pdf.

Appendix B

1. **Increased policing outside clinics** where there is reason to believe that misconduct is likely. Such increased policing is likely to deter any misconduct and ensure that protests remain lawful and do not unreasonably interfere with the rights of women seeking access to abortions.
2. **Public Order Act 1986 ('POA').** The POA prohibits causing harassment, alarm or distress (sections 4-5). It includes a power, in section 14, which allows for the regulation of static demonstrations where the purpose is to intimidate others not to do an act they are entitled to do. In its Options Appraisal Report, the Council states that this option is undesirable as protesters can use the defence that their activities are reasonable, and the police might agree with their view. However under Section 59(3)(b) of the 2014 Act the Council must be satisfied, before making a PSPO, that the effect of the prohibited activities "is, or is likely to be, such as to make the activities unreasonable." Therefore if reasonableness is a defence that may be open to protesters in this case, then it should follow that in the same case the proposed PSPO could not be enforced as the person in question would be behaving in a reasonable manner that is not anti-social.
3. **Protection from Harassment Act 1997 ('PHA').** The PHA creates an offence of carrying out a course of unwanted conduct (section 2). While it might be difficult for individual women to access this remedy (for various reasons, including the difficulty in establishing a course of conduct against a single individual and the burden individual enforcement places on women), a clinic – or possibly a representative of women seeking abortions – may be able to seek prospective injunctive relief. The Options Appraisal lists as 'Cons' the fact that criminal cases require a standard of proof 'beyond a reasonable doubt' and that it requires a 'course of conduct'. It is correct that a prosecution under the PHA will not be the solution in every case but a PSPO should also not operate in a blanket manner without consideration of specific circumstances. The majority of protesters are unlikely to behave anti-socially and should not face potential criminalisation for the sake of those who do.
4. **Dispersal powers under the 2014 Act.** The Council's concern that the dispersal power has to be used against named individual does not withstand close scrutiny; the same should apply to any fixed penalty issued under a PSPO. The council also complains that the dispersal power is valid for only 48 hours. This is a safeguard, in recognition of the potential impact that any dispersal power would have on fundamental rights of free speech and assembly. It is right that the right to curtail protest should be subjected to safeguards.

Whilst it is ultimately for the police to decide whether to increase policing in any given area, this is a more proportionate option than a PSPO and in our view ought to

Appendix B


be fully explored in conjunction with the police first, before dismissing it as unsuitable or less suitable than a PSPO.

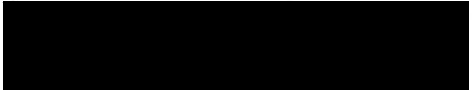
The Home Secretary recently announced that he has decided against introducing abortion clinic buffer-zones. The Home Secretary's written statement included the following:

*"In making my decision, I am also aware that legislation already exists to restrict protest activities that cause harm to others. [The Public Order] Act also gives the police powers to impose conditions on a static demonstration if they believe it may result in serious public disorder, serious damage to property or serious disruption to the life of the community or if the purpose of the assembly is to intimidate others."*²

We would urge the Council to consider first using existing powers and liaising with the police to try and manage the problem, before reaching a decision on whether to implement the proposed PSPO.

Yours faithfully


Lara ten Caten
Solicitor



² <https://www.parliament.uk/business/publications/written-questions-answers-statements/written-statement/Commons/2018-09-13/HCWS958/>

Appendix B

6. St Cecilia's Abbey, Ryde, Isle of Wight

We, the 24 voters named below, wish to express our total opposition to the imposition of buffer zones outside abortion clinics.

1. It would be a serious erosion of civic liberty.
2. There is no harassment or intimidation by pro-Lifers taking place. If there were, it would be dealt with by existing legislation. There have been no arrests. The police are not asking for these buffer zones.
3. Abortion clinics are making a lot of money. They obviously do not want women to change their minds. They do not offer alternative solutions. They want women to have abortions. They are not a neutral party in this debate. Furthermore, Marie Stopes clinics have been found guilty of malpractice by the Care Quality Commission, including "neglecting to obtain proper consent from patients".
4. Those who attend these peaceful pro-Life vigils are freely giving their time to offer compassionate support and practical help to vulnerable and often desperate women, who feel pressurized into ending the life of their baby precisely because of lack of support and practical help. Ask the many women who have changed their minds for their views and whether they have any regrets.
5. If those campaigning for buffer zones are really *pro-choice* as they claim, why are they so enraged that women should have this last chance to choose life for their baby? They should be happy whatever their choice.

Appendix B

7. Be Here For Me generic email response

Dear Sir or Madam,

Please see my response to the Consultation on a Public Spaces Protection Order for the Rosslyn Road area below.

I am aware that I have the option to respond through the online consultation, but I prefer to respond by email as it is more convenient for me to do so. I have provided answers to a select number of questions, and the answers are my own - I take full responsibility for them. Please do ensure that they are included in the final consultation report.

Thank you.

Introduction

Your Details

2 What is your postcode?

Postcode:

Your Views

7 Do you agree or disagree with the proposal to implement a buffer zone?

Disagree

8 Do you agree or disagree with the boundaries of the proposed buffer zone in the Rosslyn Road area?

Disagree

If you disagree, please tell us why:

I am very concerned to see that the proposed buffer zone covers a very wide area, extending to places that are not even within eyesight of the BPAS centre. As the PSPO prohibits such a broad range of legal and even charitable behaviours, I think it is very inappropriate for the boundaries to be drawn so extensively.

9 Do you agree or disagree with each of the following proposed prohibitions in the buffer zone?

Proposed prohibitions - Protesting, namely engaging in any act of approval or disapproval or attempted act of approval or disapproval, with respect to issues related to abortion services, by any means, including, without limitation, graphic, verbal or written means, and including, for the avoidance of doubt, any form of counselling or interaction with residents or BPAS clients on the street:

Appendix B

Disagree

Proposed prohibitions - Interfering, or attempting to interfere, whether verbally or physically, with a BPAS client or member of staff:

Disagree

Proposed prohibitions - Intimidating or harassing, or attempting to intimidate or harass, a BPAS client or a member of staff:

Disagree

Proposed prohibitions - Recording or photographing a BPAS client or member of staff of the clinic whilst they are in the buffer zone:

Neither agree nor disagree

Proposed prohibitions - Displaying any text or images relating directly or indirectly to the termination of pregnancy:

Disagree

13 Do you think the proposed prohibitions may have an impact, either positive or negative, on any group of people with a protected characteristic under the Equality Act 2010?

Yes

Please use the space below to explain your answer:

I think that pregnant women would be negatively impacted by the proposed prohibitions because they remove the opportunity for women to receive information on help and support available to them if they didn't want to have an abortion. I also think people of religious faith would be negatively impacted by the proposed prohibitions they would restrict individuals from participating in a vigil to pray for those affected by abortion.

14 If you have any final comments regarding this consultation, please use the space below:

Final comments

I am very concerned that Richmond is proposing to introduce a very extensive PSPO to criminalise activities that are otherwise peaceful, lawful, and charitable. The proposals do not take into account the many women who have gratefully accepted offers of help and support as they were on their way to having an abortion, believing they had no other alternatives. There is no question that anyone who does actually intimidate or harass women entering the BPAS clinic should face charges, but it is not reasonable to bring in such extensive prohibitions that go far beyond activity that is genuinely problematic. I am also very concerned that the broad wording of the PSPO is almost identical to the one that exists in Ealing, which is currently subject to a court challenge on the basis that it violates the Human Rights Act. I think it would be premature and imprudent to introduce similar prohibitions before that court challenge has concluded.

Appendix B

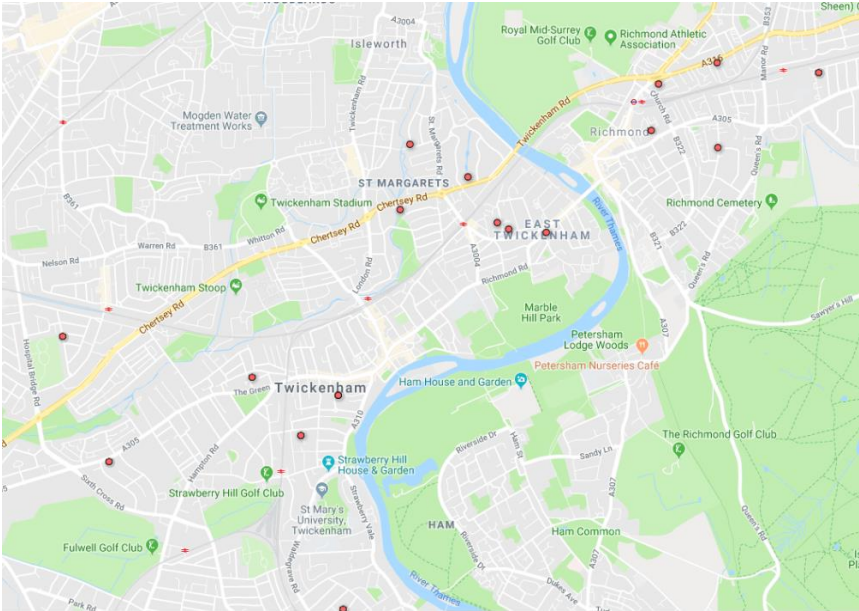
8. Sister Supporter generic email response

I am writing in support of the proposed Public Spaces Protection Order on Rosslyn Road. Although I am not eligible to fill out the consultation, I am distressed to hear that women and pregnant people are being intimidated and harassed whilst using a legal healthcare service. I believe it is a proportionate response to move protesters further away from the clinic, granting service users the anonymity they are entitled to.

Appendix B

Appendix D – Be Here for Me responses: postcodes

Richmond borough postcodes (21)



UK postcodes (985)



Appendix B

USA postcodes (6)

