

PRIME MINISTER

Dr. Vaughan has now concluded his review of departmental (1974) guidance to Health Authorities in respect of contraception for the under-16s.

He proposes to state his conclusions in a Written Answer on Tuesday, 6 May.

In essence, he intends to strengthen the wording of the guidance to place still greater emphasis on the desirability of involving the patient's parents, but to stop short of making this a requirement if a doctor's professional judgement is against it in a particular case.

30 April 1980



DEPARTMENT OF HEALTH AND SOCIAL SECURITY  
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*From the Minister for Health*

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30.4.80

*Dear Mike,*

CONTRACEPTION FOR THE UNDER SIXTEENS

The Prime Minister has received correspondence on this subject, which has recently been the subject of public interest and controversy. She may wish to know that, with the agreement of the Secretary of State, Dr Vaughan is now ready to make a statement on the conclusions of our Ministers' review of the Department's 1974 guidance to Health Authorities.

An answer to a Written Question is to be used as the vehicle for the statement. Mr Michael Colvin has put down a question which Dr Vaughan intends to answer next Tuesday 6 May. A Press Notice will be issued.

I attach a copy of the proposed statement.

*Yours ever*  
*Jeremy Knight*

J E KNIGHT  
Private Secretary

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## CONTRACEPTION FOR THE UNDER SIXTEENS

[QUESTION (Mr Michael Colvin)]

To ask the Secretary of State for Social Services, if, in the light of his review of the question of the provision of contraceptives to school-children without parental knowledge or consent, he is yet able to make a statement.]

## PROPOSED ANSWER

1. I have reviewed that part of DHSS Circular HSC(IS)32 issued in May 1974 on Family Planning Services which gives guidance to Health Authorities in relation to the young. Attached to the Circular was a Memorandum of Guidance, paragraphs 40 to 45 of which dealt with this question. There have been suggestions that paragraphs 40 and 41 may have encouraged doctors and others to believe that they might in all cases advise about contraception and prescribe for girls under the age of consent without the involvement of their parents or those legally responsible for them.
2. My review has led me to conclude that although these paragraphs provided a factual statement of the position in law and of professional practice, they could with advantage have placed greater emphasis on the moral and social perspective in which this question should be considered.
3. The guidance stated (paragraph 41) that "it would always be prudent to seek the patient's consent to tell the parents". I do not consider that this gives sufficient emphasis to the vital importance of parental responsibility. I would therefore very much hope that in any case where a doctor or other professional worker is approached by a person under the age of 16 for advice in these matters, the doctor or other adviser would always seek to persuade the child to involve the parent or guardian at the earliest stage of consultation; and would proceed from the assumption that it would be most unusual to provide advice to individuals about contraception without the consent of the parent, or guardian (or other person in loco parentis).

4. It is, however, widely accepted that consultations between doctors and patients are confidential and I accept the importance doctors attach to this principle. It is a principle which applies also to other professions concerned. If it were abandoned in relation to under age patients, a situation would quickly develop where many young people would decide not to seek professional advice at all. They could then be exposed to the immediate risks of pregnancy and of sexually transmitted disease, as well as of other long-term physical, psychological and emotional consequences. In these circumstances, the aim of supporting stable family life would in no way have been furthered.

5. I accept therefore - in all the circumstances - that provision must be made for the occasional possibility of counselling, and if necessary contraception, being provided to young people without the knowledge of their parents or guardians. This must be a matter for clinical judgment. I am here thinking particularly of young people whose parents may be unconcerned, entirely unresponsive, or grossly disturbed. Some of these young people are away from their parents and in official care. I am mindful also that in any such case the nature of any counselling and the decision whether or not to provide contraception must be a matter for the doctor or other professional worker concerned.

6. I propose to consult the appropriate professional bodies on the basis of this statement, with a view to amending the relevant paragraphs of the Memorandum.

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