

To the Health Committee, Parliament House, George St, Brisbane Qld 4000.

It is my personal opinion that one of the differences setting Australia apart from other countries globally is our understanding of the innate value of human life. The argument can be frequently and furiously debated as to when a human life begins. My submission is to keep it simple, if it turns into an adult human being by natural process it is a human being in infant form. This includes an unborn foetus, after all it is the unborn foetus that becomes a fully grown adult as a result of natural process. While I do understand the debate that many pregnancies are not viable, what is and is not viable seems to have become a grey area in modern medicine. Also I should say that in my considerable experience working with people post and pre abortion, no one that has carried to full term regretted it and everyone that did not not only regretted it but also suffered extreme psychological trauma as a direct result.

Please consider the following points in your deliberation.

- In response to part 2:5 and 6:(1) & (2):
 - Although I disagree on the basis of my aforementioned position, I understand there is reasonable supporting evidence for these sections to be accepted. My only submission to be considered as an addition to these sections is that there be an accountability/oversight register. This would require all doctors to register not only who the procedure is performed on but the doctors that agreed the procedure was necessary. This would then be overseen by an ethical standards committee of some variety.
- In response to part 2:6:(3)
 - Simply put, historically medical practitioners have not been trust worthy making decisions about womens health. One could site many hundreds of cases where women were given electro shock therapy for falling pregnant outside of marriage (my great grandmother being one). If this is not enough there are many more hundreds of cases where women were given hysterectomies with out their consent. These where frequently performed while the women were receiving other medical treatments. So I submit to you this question; Who is the write person to make these decisions for a woman when she is incapacitated?
- In response to part 2:8
 - No person should be forced to refer or partake in any way in a practice to which
 they conscientiously object. This is a democracy and as such although we have
 no bill of rights these freedoms should be valued. Consider if you were this
 practitioner being forced to make this referral how would you feel? We must
 maintain the integrity of peoples capacity to object.
- In response to part 3:10
 - I agree, however what protections are in place for persons convinced by others to do this to themselves?

Other considerations:

Informed people make better decisions. I am certain that each of the members has and will make a concerted effort to ensure they have all the information, but who provides this information to the woman considering an abortion? A woman considering the abortion of her unborn child is in a state of trauma or distress. If they were of sound judgement and had adequate support they would find another way. I have seen this to be true time and time again. My final submission is this: Let all persons considering an abortion be given by law a

document outlining the facts around the physical and mental impacts of abortion both positive and negative as well as a list of all pro and anti abortion support services available. This should be available at the time of initial consultation and with any pharmaceutical abortion drugs and in all places/clinics surgical abortion is available. It is a persons human right to be given all the information and not just one part.

Thank you for your consideration, Sincerely

Chris Owens
CEO Connected By Change



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