Termination of Pregnancy Bill 2018

Committee Secretary

Health, Communities, Disability Services and Domestic and Family Violence Prevention Committee

cc Committee Members

4 September 2018

Dear Sir/Madam

Re: Termination of Pregnancy Bill 2018

It's one of those rare times in life when a constant intrusion of conscience beckons one to action, aided by a television news item we have just seen of a mother celebrating the joyous, and heroic progress of her young son born at 25weeks gestation. Hence you are the recipient of correspondence as the secretariat to the aforementioned Parliamentary Committee. We refer to the *Termination of Pregnancy Bill 2018* recently introduced into the Queensland Parliament.

It is trite and insincere to introduce this as a women's health issue and veil it in terms of modernisation of legislation. Nowhere in our reading of the Bill is a woman's health emphasised; instead this is front and centre a human rights issue and such rights are unchangeable and transcend gender and time-bound considerations.

We elaborate our concerns with the Bill in two principle areas:

Firstly, the arbitrary and non-objectivity in which an unborn is deemed worthy of life and the way dignity of that life assigned: namely;

- How can it be that different jurisdictions considering the same evidence determine different upper thresholds for termination (the proposed Queensland legislation is on the upper end and with no justification requirement)?
- How can it be that Queensland requires the recognition and dignity of a deceased at 20 weeks gestation through funerals and yet unfettered choice termination and disposal up to 22 weeks; and longer, with minimal further justification?
- How can it be that Section 313 of the Queensland Criminal Code institutes severe penalties for the harming/killing of the unborn at any gestation age on the one hand and yet those rights are nullified by unrestrained choice offered in this legislation?

Even without recourse to moral or ethical considerations, there is an incomprehensible logic in operation here. The highest order of gravity needs to be assigned to resolving these anomalies as they are literally matters of life and death.

The second astonishing aspect of the Bill is its simplistic treatment of unwanted pregnancy; its cessation is the sole terminal option; activated by unfettered choice at, or before 22 weeks gestation; and ill-defined endorsement criteria by medical collaboration after that. In these circumstances at or before 22 weeks gestation, the patient determines the diagnosis and the treatment, and the treating practitioner is bound by legislation to concur (if not the first one then certainly the second).

While we freely acknowledge that sometimes the circumstances of pregnancy can be most bleak and dire, we contend that it cannot be considered in most cases as purely a medical condition as one would a tumour that once excised the problem is solved.

The absence in the Bill for alternatives to the terminal outcome, by way of support for women, options, counselling, adoption, financial supplementation etc, is astounding, and could be construed as lazy legislating, but more sadly, simply reinforces a state-sanctioned disposable culture in relation to the unborn.

However, we do acknowledge and support the provisions in the Bill in relation to harassing woman in the process of procuring an abortion, a time when being stigmatised and loaded with guilt is the last thing needed.

Life is life, whether inconvenient, ugly or a surprise. We urge you to consider the issues raised here in the Committee as we contend that the Bill as currently drafted is seriously flawed.

Yours sincerely

David and Janet Spann