

Dr Hayley Thomas

04/09/18

Committee Secretary
Health, Communities, Disability Services and Domestic and Family Violence Prevention Committee
Parliament House
George Street
BRISBANE QLD 4000

To whom it may concern

Re: Termination of Pregnancy Bill 2018

I am writing to express my concerns regarding the above bill.

I am deeply concerned about the changes proposed in this bill. In providing antenatal care I treat two patients – the woman and her unborn child. I respect the principle of personal autonomy and recognise the complex circumstances that can surround requests for termination of pregnancy. However, I also believe that the life of the unborn child must be respected and protected. For this reason, I am deeply concerned about the changes the bill proposes. I believe that the bill's provision for termination of pregnancy for any reason to 22 weeks gestation (section 5) and with minimal additional requirements following this point (section 6) does not adequately reflect the value of the human life of the unborn child, who has no ability to self-advocate.

Additionally, as a medical practitioner who holds a conscientious objection to termination of pregnancy, I am concerned about the implications of sections 8 (3) and 8 (4) of the bill, which impose an obligation to refer for termination, and to provide this service in an emergency respectively. Referring for termination of pregnancy actively facilitates a procedure regarding which I have deep moral concerns. Section 8 (3) and 8 (4) places myself and my colleagues who hold similar views in a difficult position. Essentially, if the bill is passed we will have to either provide referral for termination (or perform this in an emergency) despite our conscientious objection; cease practice in any capacity where we may at some point be asked for referral for termination; or practise with the recognition that we risk disciplinary action should a patient ask for termination and we decline to refer.

I also disagree with the statement in the explanatory notes to the bill stating that its approach to conscientious objection 'achieves consistency with current codes of conduct and guidelines' (p14). The Australian Medical Council's Code of Conduct for Doctors in Australia states that doctors with a conscientious objection should not use their objection to impede access to treatment. However, the proposed bill imposes a requirement not only not to impede access, but to actively facilitate access through referral.

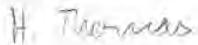
Additionally, I believe that the exclusion of any provision for conscientious objection by ancillary staff and institutions in the bill is inappropriate. I believe that ancillary staff working in the health care setting should have similar provision to act according to their conscience as I do as a medical practitioner. We work in a team environment, and it is important that all members of the team are

respected by being allowed to work in accordance with their conscience. In relation to hospitals, institutions and health services, I believe that the governing bodies of these organisations should have the right to determine which services they provide, in accordance with the organisation's underlying values and principles. The explanatory notes to the bill argue against this on the basis that 'the right to freedom of thought, conscience and religion is a personal and individual right' (p20), rather than an institutional right. However, the provision for institutions to determine which services they provide is an expression of the right of the individuals who establish and manage these organisations to conduct a business or provide a service in alignment with their shared values. Moreover, in a country that values free enterprise, this provision should exist.

Finally, I would like to briefly comment on the safe access zone provisions in part 4 of the bill. I strongly agree that women and staff accessing or working at termination services should be treated with utmost respect and dignity. I also believe that safe access zones raise serious questions about freedom of speech and religion. The explanatory notes to the bill specifically state, for example, that 'prayer vigils' would be prohibited by this legislation. In a country that values freedom of religion, I do think that it is a weighty decision to place restrictions on these activities, and that this is not necessarily required to protect the women and staff at termination services. I believe that current legal provisions against public nuisance, unlawful assembly/gathering and threatening violence are more appropriate than the safe access zones proposed by the bill.

Thank you for considering my concerns and comments in your assessment of the bill.

Yours sincerely



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