From:	Erin Domrow
To:	Health, Communities, Disability Services and Domestic and Family Violence Prevention Committee
Subject:	Opposition to the Termination of Pregnancy Bill 2018
Date:	Wednesday, 5 September 2018 8:15:31 AM

Dear Sir/Madam of the Health Committee,

I am writing to voice my concern in regards to the Termination of Pregnancy Bill 2018. Whilst I am sensitive to the needs of a mother of an unwanted pregnancy, my heart's cry is on behalf of the unborn babies who have no voice.

I find it abhorrent that the bill would allow for abortion up until birth for any reason. It has been seen that premature babies born at 22 weeks are able to survive, and are just as precious as any other child.

I believe it is so vital in a good society to value the worth of human lives regardless of their age. It truly is only a small step on from this bill that another bill could push to allow the "termination" of a young child, or a person with a disability.... That is preposterous! I don't see any difference in the value of a human life between a baby of 22 weeks gestation and 40 weeks gestation; just as a baby three months of age has no less worth than a baby 7 months of age.

As a health professional myself, I find it distressing to consider the position of my medical colleagues who are facing a terrible moral dilemma.

Registered Health Practitioners with conscientious objections are addressed in Part 2, Section 8 of the Bill:

"(3) If the request is by a woman for the registered health practitioner to perform a termination on the woman, or to advise the woman about the performance of a termination on the woman, the practitioner must refer the woman, or transfer her care, to—

(a) another registered health practitioner who, in the first practitioner's belief, can provide the requested service and does not have a conscientious objection to the performance of the termination; or

(b) a health service provider at which, in the practitioner's belief, the requested

service can be provided by another registered health practitioner who does not have a conscientious objection to the performance of the termination."

It leaves no doubt that the doctor with conscientious objection must refer for abortion to another health care provider who will help the woman with her abortion request, and therefore be complicit in the result of an abortion.

This Bill also allows no protections for vulnerable women considering an abortion – no independent counselling, informed consent conditions or cooling-off periods. Surely there are other options available to our health care providers and these mothers, which don't involve terminating a human life.

Please help protect these young lives in question and reject the Termination of Pregnancy Bill 2018.

Yours sincerely,

Mrs Erin Domrow