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From: [redacted]
To: abortionlawreform
Subject: Submission on the "Abortion Law Reform" proposal, QLD
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Research Director
Health, Communities, Disability Services and Domestic and Family Violence Prevention Committee
Parliament House
[redacted]

Tuesday, 21st June, 2016

Abortion Law Reform (Women's Right to Choose) Amendment Bill 2016 and Inquiry into laws governing termination of pregnancy in Queensland

Regarding the above-mentioned Bill, I urge the Parliament to vote against it, and against any amendment that may be proposed.

Submission:
One of the issues the Enquiry covers, is the wilful taking of a human life in utero.

I will investigate:
-Social Justice
-The process of pregnancy
-The unborn baby is NOT "part of the Mother"
-Being aware of the 'natural economy'
-We need to care for **BOTH**: the mother and the baby

The details:
I maintain it is undeniable that a natural process cannot be cut off mid-stream without consequences - here, to the woman when a pregnancy is deliberately terminated; and to the baby – an ugly death.
I also agree that exerting power/destruction over the weak is abhorrent to social justice. Social justice is a concept we are well attuned to in these times, and a mother allowing an abortion of her much smaller and weaker child is not a good look for social justice advocates.

I wonder if the Committee – and legislators – even the public – have considered what that means in fact – what that weaker, smaller human is. At the end of my submission is a description of the developing baby, its rapid 'unfolding' of all its vital parts showing without any doubt that the 'bunch of cells' definitely has life and also both purpose and order; it is not some random blob of matter. It covers the fascinating development over 9 months, but I put it to you that it is also riveting reading.

I am speaking of the being that Rob Pyne wants to be able to surgically or chemically remove from the womb at the will of the mother, at any time in its gestation. Aren't we, as 'humanity', better than that?

Others will have written of the harm, all too common, to the mother, both physically and emotionally, often in the long term, yet life is lived in the long-term. The 'quick-fix' cannot make a pregnant woman un-pregnant. She has already started to biologically unroll the process. She can never go back to her pre-pregnant state. What surprises me is that people who see themselves as advocates of nature and will not sanction anything interrupting the habitat and development of other animals cannot advocate the same standard in the human animal; and equally surprising is that people 'close' to nature would think the normal natural process of pregnancy could be suddenly stopped in its tracks without consequences.

Others would have submitted those consequences; however one consequence people put their heads in the sand about, is breast cancer. Research is continually showing what should be logically obvious - that suddenly stopping, mid-stream, the unfolding process of the breasts preparing for lactation is a recipe for the development of cancer cells.

Of more compassionate and long-term benefit both physically and psychologically, would be to bring the baby to birth and allow the baby to be adopted. Suicidal ideation and fact after an abortion is far higher in number than from an 'unwanted' pregnancy. With all the modern facilities and agencies, we have no excuse not to **care for BOTH**.

If the laws are antiquated as Rob Pyne seems to suggest, then the laws forbidding the intentional killing of all human life are antiquated as they all come from the same era. If Rob Pyne wants a "liberal democracy" as he suggested in his Speech, then we need to, equally, do away with those restrictive murder laws, as well. Clearly the whole idea of wilful killing of anyone

we don't want is out of the question:– Because a human being is hiding its development in the womb does not mean we can kill it at will. It also displays the abhorrent will of the strong disposing of the weak.

The law as it stands has served us well as an educative factor, too; we have to think – why does the law protect the voiceless hidden ones? It's because they have their own M/F identity already, their own blood group, their own DNA and all independent of the mother, and they may well be different from the mother's; the only difference between born and unborn is size and place of residence. Whether before birth or after birth they depend on their mother for a home and nourishment. Voiceless and hidden they may be, but **they are human beings**. That is the point; and thus they have a right to be able to contribute to the world according to their innate gifts. Who knows what an aborted child was destined to contribute to the good of humankind?

Also, children are the natural economy. The people who now want to terminate their baby's life will be looking for taxpayers to subsidise their living conditions in retirement, but the workers who would pay the necessary taxes would not have been allowed to be born. Fewer babies –> fewer children –> fewer workers –> less tax –> fewer benefits able to be supplied by the government.

The law should not be changed. Women should be given the care they need if they are in an unplanned pregnancy, and what they need is **not** an abortion on their conscience, or the later frequently common problems such infertility (some women abort the only child they ever had). How sad – and unnecessary.

According to the kind of society activists (and I) say we should be, **WE NEED TO CARE FOR BOTH**! We should not touch the abortion law but rather provide help for the distressed mother going through an unplanned pregnancy.

To conclude:

*We want to have proper Social Justice - we don't want a society where the strong destroy the small or weak (pregnant mother and the abortionist, destroying the baby in utero)

*Abortion does not make a woman pre-pregnant; a natural process has been interrupted and interrupting a natural process frequently results in serious health and/or psychological issues, as others will have outlined, including creating the conditions for breast cancer.

*The baby in utero is completely a separate identity and not part of the mother's body; it has its own blood group its own genetic disposition, its own sex, etc. It just needs nourishment and a place of residence - just as born people do.

*Reducing the rate of population increase through wilful abortion is not a smart move for the availability of government welfare to those aborting adults when they reach retirement.

*We are talking about **fellow human beings**, the stronger ones in distress and the weaker, unseen, voiceless ones in danger of death. In the 21st Century we should be able to be clever enough to have programs to **save BOTH**.

Recommendations:

* The abortion laws remain, and remain unchanged, not even changed by amendment.

* A task force be set up to recommend new and innovative ways that **BOTH** mother and unborn child can be saved – the mother to be guided, helped and educated to lead her out of distress; and the unborn child to be saved from imposed death, to birth thence somewhere where it also can be guided, helped and educated to lead a fruitful life.

* The government to adopt the best of the recommendations of the previous clause, for the well-being of **BOTH** mother and unwanted baby; and for the programmes to be implemented throughout the state.

Concluding comment:

I look forward to a Queensland that can brag of having the most advanced understanding and policies of social justice – no more of the strong lording it over the weak, not even if the weak is in a hidden place of residence.

Sincerely

- Merle Ross

[redacted]

Here is the treatise which shows why the unborn baby (which you and I all were) is such a remarkable creature and needs to continue to be protected; but the mother needs help and care, too.

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Every human being starts developing well before birth, at the moment of conception. Unborn children develop and grow at a remarkable speed.

Advances in technology over the last 50 years mean that we now know radically more about life before birth than any previous generation. With modern imaging technology - such as ultrasound scans - becoming increasingly widely used, now we all have the opportunity to gain an insight into the humanity of our younger selves.

Here you will find descriptions of the stages of development of the new human being in his/her mother's womb.

What do human embryologists have to say about the beginning of human life?

> "The scientific answer is that the embryo is a human being from the time of fertilization because of its human chromosomal constitution. The zygote is the beginning of a developing human."

Keith L. Moore, T.V.N. Persaud, Mark G. Torchia, Before We Are Born Essentials of Embryology, 8th edition. Philadelphia, PA Saunders, 2013. p.327

The first month

Fertilisation

Every human being begins life as a single cell, formed when father's sperm fertilises mother's egg. Fertilisation normally takes place in the mother's Fallopian tube, which connects the uterus (womb) with the ovary. The uterus is the size and shape of a large pear: it is made of muscle and it stretches to allow the baby's

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growth throughout the months of pregnancy.

A woman ordinarily has two tubes and two ovaries, one at each side of her uterus. Every month one of the ovaries in turn releases an egg (ovum) which passes slowly along the tube towards the womb cavity

If the egg is not fertilised within 12 hours or so of being released, it dies; it cannot develop further. But if the woman has sexual intercourse during the days of her monthly cycle just before or at the time when an egg has been released from the ovary, then many sperm cells released by her partner may travel up to the Fallopian tube and one may fertilise the egg.

When fertilisation is completed and the nuclei of egg and sperm have combined, a new being comes into existence and is capable of further development. Because the parents are human - belonging to the species Homo sapiens - the new being is also human. Fertilisation (by which we mean conception) marks the beginning of the human lifespan.

A consultant specialising in the care of pregnant women writes:

> "Life does not begin with birth. When born, we are already nine months old... we have a responsibility to learn how to study the life in utero, and how to care for it"[1]

Heredity

The cells of living beings contain DNA (deoxyribonucleic acid), the substance in the nucleus that enable cells to reproduce and transmit characteristics from generation to generation. When cells divide, the DNA takes the form of chromosomes - the units carrying the genes that pass hereditary features from parents to offspring.

Different species have varying numbers of chromosomes per cell: for example, a mouse has 40 while a cat has 38. Human body cells normally contain 46 distinctively human chromosomes. But an egg and a sperm cell contain only 23 chromosomes each, to allow for their adding together at fertilisation: sperm and ovum are termed gametes (from a Greek word for "marriage partners").

When they "marry" they make one completely new cell - the human embryo, zygote or conceptus - with 46 chromosomes carrying a fresh, unique combination of genes. At fertilisation this human embryo is about 0.1mm in diameter. Since characteristics come from both parents the zygote is never the same as, or part of,

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the mother, but is a genetically distinct individual.

The colouring of hair, skin and eyes, the sex of the new human being, and factors influencing height and build, are determined at fertilisation by information on the DNA.

Gender

A baby's sex is determined at fertilisation. A chromosome from the father's sperm determines whether the child is male or female. If an X chromosome is present the baby is a girl; if a Y chromosome is carried by the sperm instead, the baby is a boy.

Twins

Occasionally two eggs are released by the ovary and fertilised. This results in fraternal twins who are different in appearance and may be of different sexes because their genes form from two eggs and two sperm cells.

Rarely, one embryo splits into two and both cells develop separately, as identical twins, similar in appearance.

> "They have the same genetic make-up and apparently the whole genetic message is the same in both of them. Nevertheless, they are obviously different human beings."[2]

Blueprint, builder and house

The embryo is not simply a set of instructions for making a new human being, like a blueprint for building a house. A blueprint is inert and cannot carry out instructions, but the embryo is active and begins work at once.

A house needs builders, carpenters, electricians and plumbers to complete it; but the embryo has the ability to grow spontaneously, moving on to other phases of development and constructing the skeleton, flesh, nerve connections and a waste disposal system of the human body.

After a house is built, a blueprint remains separate; but the embryo - already an essential human by virtue of the genes - is blueprint, builder and "house" together.

Implantation

After fertilisation the single cell splits into two, then the two cells double to four, four to eight, eight to sixteen and so on. Because the cell cluster looks superficially like a berry it is called the morula (Latin for "mulberry"), but the new life is

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always biologically human (species Homo sapiens).

The journey along the Fallopian tube continues slowly for about four days. Growth increases. By the time the womb cavity is reached, the cell cluster becomes hollow and fluid-filled, and is referred to as the blastocyst. However, this is not an inert clump of cells but a busily developing human individual: differentiation (organisation into different parts and functions) is already taking place.

Meanwhile the uterus is forming a spongy lining within which the embryo will implant. To achieve this the embryo burrows into the wall of the womb and is covered over by the lining of the womb. This begins 6 days after fertilisation and is completed within the next 7 days.

If fertilisation has not taken place, the lining of the uterus comes away at the end of the monthly cycle as the woman's menstrual period. But once implantation occurs, the embryo sends out a hormonal signal which prevents the mother's period. This is usually her first indication of pregnancy.

Estimating length of pregnancy

Generally a woman does not know the exact date of her baby's conception. When she misses a period she may take a pregnancy test; she should see a doctor promptly to obtain professional care for herself and her child. The doctor takes the date of the first day of the mother's last menstrual period as the starting-point for a 40-week pregnancy. This gives the baby's gestational age.

However since fertilisation only occurs when the ovum is released from the ovary, some two weeks from the beginning of the last period, the baby's actual (conceptional) age is also two weeks less. Full-time delivery occurs 38 weeks after fertilisation, but 40 weeks after the mother's last menstrual period. (In this booklet all developments of the embryo and foetus are dated from the time of conception, or fertilisation unless stated otherwise.)

Protection and life support

During and after implantation the embryo develops a protective, fluid-filled capsule which surrounds and cushions the developing body to prevent injury. Embryo and fluid are enclosed in two membranes, an inner amnion and an outer chorion.

The chorion is covered in rootlike tufts, some of which form the early placenta - an organ made by the baby and the mother which transfers nutrients from the mother's bloodstream and removes waste products from the child's, though

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mother's and baby's circulatory systems remain separate. The placenta also produces hormones to maintain the pregnancy. In the ninth month it will alter the mother's hormonal balance and triggers off the birth process - although we are still unsure what causes labour to begin.

The baby is connected to the placenta by the umbilical cord, the lifeline channelling nourishment in and taking wastes out, which will be cut close to the baby's abdomen at birth and will leave the mark of the navel. During pregnancy the baby obtains oxygen from the mother's blood via cord and placenta, so does not drown in the surrounding fluid.

Body development

By 25 days from fertilisation the body is developing. Head and trunk appear and tiny arm buds begin to form, followed by leg buds. The early embryo seems to have a "tail", but this is really a protective covering for the spinal cord. Because the central nervous system (brain. spine and spinal cord) is so important, governing sensory and motor functions, the embryo's body is designed for rapid growth of head and back.

By 21 to 25 days the baby's heart is beating. Other internal organs are present in simple form and functioning as they grow. Early facial features appear. The doctor who performed the first-ever blood transfusion to an unborn baby has described the embryo at the end of the first month from fertilisation:

"By 30 days, just two weeks past mother's first missed period, the baby - one quarter of an inch long - has a brain of unmistakable human proportions, eyes, ears, mouth, kidneys, liver, an umbilical cord and a heart pumping blood he has made himself."[3]

The second month

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Growing

The embryo increases in size from 5mm at four weeks to 4Omm by the end of the eighth week. The baby in the womb is usually measured from the top of the head to the bottom of the spine (crown-rump lengths).

Hands and feet

By the sixth week from fertilisation tiny fingers appear, followed within days by the toes. By the seventh week the baby has individual fingerprints; no two sets of fingerprints are ever the same. Even in utero the baby has unique characteristics.

Eyes and ears

By six weeks the eyes which appeared in simple form in the first month develop lens and retina; the eyelids start to take shape.

The ears continue to develop: by seven weeks the outer ear is present, and the inner ear, with its hearing and balancing mechanisms, is well established (see 'Hearing')

Movements

Spontaneous movements begin at seven weeks:

> "By 45 days, about the time of the mother's second missed period, the baby's skeleton is complete in cartilage, not bone, at first; ... he makes the first movements of his body and new-grown limbs, although it will be another 12 weeks before his movements are strong enough to be transmitted through the insensitive uterus to be detected by the mother's sensitive abdominal wall."[4]

Brain function

Brain waves have been recorded by EEG (electro- encephalograph) in the human embryo 40 days after fertilisation.[5]

Response to touch

Human embryos of five weeks gestational age have been seen to move away from an object touching the mouth area. The sensitive area extends to include the rest of the face in the sixth and seventh weeks and the palms of the hands and soles of the feet in the eighth and ninth weeks respectively.[6]

A British study shows that the baby's movements begin at the same time as sensory nerves begin to grow into the spinal cord in the second month of pregnancy; the nerve fibres respond to touches to the skin and movement of the limbs: at this stage the baby's sensory nerves "appear to be more sensitive than those of the adult or newborn baby."[7]

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From embryo to foetus

Around eight weeks the baby's cartilage skeleton begins to turn into bone. The body is essentially complete. Now the baby can be referred to as the foetus - a Latin term meaning "young, offspring." Latin- or Greek-derived names are given to human beings at successive phases of development, e.g. "zygote" for the newly-conceived, "neonate" for newborn baby, "adolescent" for growing-up teenager, "geriatric" for a pensioner. These terms simply identify different stages in the human lifespan which begins at fertilisation.

The third month

Development

By the end of the twelfth week the baby measures almost 90mm and weighs 45g. The baby's face, at first broad, now becomes narrower; the eyes are closed for protection from about 10 weeks until the sixth month. Boyhood or girlhood is now obvious.

Sensitivity

Two British consultants, one caring for pregnant women and the other for children after birth, describe human development at this stage:

> "Nine weeks after conception the baby is well enough formed to bend his fingers round an object in the palm of his hand. In response to a touch on the sole of his foot he will curl his toes or bend his hips and knees to move away from the touching object. At 12 weeks he can close his fingers and thumb and he will open his mouth in response to pressure applied at the base of his thumb."[8]

From a simple, generalised response to stimulation at 6 weeks gestational age, the

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foetus develops an almost complete range of responses to touches on the skin by 12 weeks.[9]

Feeling pain

The brain and nerve fibres must be functioning for anyone to feel pain.

Brain cells which are essential for consciousness in the adult are known to be present in the foetus by 10 weeks. Nerve fibres which transmit pain impulses are known to be present before fibres inhibiting pain are completed.

According to a scholarly study of the available evidence, this "implies that the first trimester foetus may be more susceptible to pain than slightly older subjects."[10] The first trimester of pregnancy is the first three months.

In other words, if the baby can experience pain before the body's mechanisms to suppress pain have developed, this means that the baby may be able to feel pain at a much earlier stage than was previously thought, and perhaps even more keenly in the first three months of pregnancy than later.

The same study concludes that there is a likelihood that the

> "foetus has started to acquire a sentient capacity perhaps as early as six weeks, certainly by nine to ten weeks of gestation. Anatomical examination of such foetuses indicates the probability that differentiation sufficient for reception, transmission and perception of primitive pain sensation has already occurred."[11]

Practising for life outside the womb

"At 11 weeks after conception the foetus starts to swallow the surrounding amniotic fluid and to pass it back in his urine. He can also produce complex facial expressions and even smile."[12] Swallowing prepares the baby for taking in milk at birth. Thumb-sucking has also been recorded in the foetus.[13]

Foetal breathing movements have been detected as early as 11 weeks[14]. Although the baby does not breathe air inside the fluid-filled amnion, these movements help develop the respiratory organs.

Four to five months

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Enlargement of baby and uterus

By sixteen weeks the baby measures 140mm from crown to rump, just over one third of the size he or she will be at full term, and weighs around 200g. The heart now pumps 30 litres of blood a day. The uterus expands and changes shape to accommodate the growing baby; pregnancy begins to show externally.

The doctor can tell approximately how advanced the pregnancy is by locating the fundus (the top part of the uterus between the Fallopian tubes, which stretches upwards towards the mother's chest as the uterus expands).

Hearing

There is evidence that from four months the foetus responds to sound. Doctors testing unborn children for deafness, while monitoring their reactions to noise with ultrasound (a technique for visualising the children in utero), have observed eye movements and "blink-startle" responses in foetuses of 16 to 32 weeks gestation.[15]

The authors of a textbook on the unborn which is used in medical schools world-wide explain why the foetus can hear while immersed in fluid:

> "The ears of the foetus function as early as the fourth month, and there is evidence that it hears a good deal. One might object that if a person dives under water and someone else talks to him he hears only a muffled sound. This is true. The sound is muffled by the cushion of air remaining in the auditory canal outside the ear drum. But the foetus living in the amniotic fluid has no muffling air cushions around its ear drum - and water conducts sound better than air does. The silent world of the foetus (or, below the surface of the ocean) is a fantasy, unfounded in reality."[16]

The baby hears sounds from the outside world as well as from the mothers heart and digestive system: "In fact the inner ear of the foetus is completely developed

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by mid-pregnancy, and the foetus responds to a wide variety of sounds. He is surrounded by a constant very loud noise in the uterus - the rhythmical sound of the uterine blood supply punctuated by the noises of air passing through the mother's intestine.

Loud noises from outside the uterus such as the slamming of a door or loud music reach the foetus and he reacts to them."[17] Tests using different types of music indicate that the baby even appears to have preferences: "A four- or five-month-old foetus definitely responds to sound and melody - and responds in very discriminating ways.

Put Vivaldi on the record player and even the most agitated baby relaxes ... In a film made at the City of London Maternity Hospital, Yehudi Menuhin demonstrated that it was possible to contact the unborn via music."[18] Babies learn to recognise their mothers' voices whilst in the womb[19] and even to recognise stories which are read to them in the womb[20]

Newborn babies whose mothers watched Neighbours during pregnancy have been seen to stop crying and become alert when they hear the theme tune after birth.[21]

Sensitivity to light

From the sixteenth week the foetus responds to light. If a blinking light is shone on to the mother's abdomen, the foetal heartbeat fluctuates.[22] "In late pregnancy, some light penetrates through the uterine wall and amniotic fluid, and foetal activity has been shown to increase in response to bright light."[23] The womb is a more stimulating environment than some people think; its occupant is alert and responsive.

The fifth month and beyond

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After 20 weeks the baby is 190mm from crown to rump and weighs 460g. Head hair, eyebrows. eyelashes and nails are growing. To protect the baby's skin from prolonged contact with the amniotic fluid, a greasy substance called vernix covers the body.

Between this stage and birth the baby will gain weight and will develop an insulating layer of fat beneath the skin. He or she will also receive maternal antibodies against some infections as a temporary protection until the infant's own immune system is better developed.

Waking and sleeping

Foetal activity is affected when the mother is tired or under stress.[24] The baby is usually most notably active when the mother is lying down at night. The mother feels the baby's kicking and may notice sharp movements when the baby gets hiccups after drinking the amniotic fluid or practises its breathing movements.

In later pregnancy the foetus has been observed to show "behavioural states" - waking, calm sleeping, and "rapid eye movement sleep" which is associated with dreaming in adults.[25]

The quest for comfort

The baby still has some room to manoeuvre inside the womb and seeks the position which feels most comfortable:

> "It is very easy to demonstrate now with ultrasound that the babies make the most of all the space and room available to them ... We know that foetal comfort determines foetal position, that changes in maternal position provoke baby to seek a new position of comfort."[26]

Survival outside the womb

If the baby is born too early, there is still a good chance that he or she will survive, given special medical care. A document from the Royal College of Obstetricians and Gynaecologists (the professional body of doctors who treat pregnant women) states:

> "In 1984, 72 per cent of liveborn infants of 22 to 27 weeks' gestation born at the Bristol Maternity Hospital survived, as did 64 per cent of infants of 500 to 999 grammes birthweight."[27]

These percentages had increased from previous years. With advances in technology and in understanding of human foetal development, premature babies' chances of

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survival are improving.

These figures refer to the length of the pregnancy from the time of the mother's last menstrual period. and not to the age of the baby from fertilisation. which would usually be two weeks less. (see 'Estimating length of pregnancy', section 1, above)

Birth

The same before and after birth

After delivery babies who have been studied in utero show the same individual behaviour that was observed while they were in the womb:

> "After birth you see many babies sleeping in the odd positions that they chose to rest in within the uterus prior to birth ... The good drinkers in utero are the good drinkers in the nursery and the dainty, tedious swallowers in utero are the tedious ones out of the uterus as well ... The behaviour traits also bridge the birth."[28]

From the one-celled zygote to the multi-million-celled infant and adult, every human being is a distinct individual.

from https://www.spuc.org.uk/abortion/human-development-of-the-unborn-child