To Research Director, Health, Communities, Disability Services and Domestic and Family Violence Prevention Committee

Parliament House, George Street, Brisbane Qld

I hereby register my opposition to any proposal to remove protections and provide no safeguards in the matter of the procurement of an abortion in the State of Queensland.

1. What policy objectives should inform the law governing termination of pregnancy in Queensland?

The policy objectives must be (i) to value and preserve life including the health of the mother, the unborn child and other immediate family members (ii) to advocate for those who cannot speak for themselves (iii) to project and facilitate hope for people who feel overwhelmed by an immediate issue, which in the long term can be amenable to positive resolution (iv) the regulation of this issue so that it is handled only by qualified health practitioners

2. What legal principles should inform the law governing termination of pregnancy?

(i) The same principles that proscribe the taking of human life after birth must inform the law governing the termination of pregnancy.

(ii) A terrible exception to 2. (i) forces itself upon those responsible when, in a very small number of cases, the preservation of the mother's life can be effected only by terminating the life of the unborn child, but even this decision is with a view to the greater possibility of life – (a) the life of the mother as a self-sufficient inherent good, (b) the ability of the mother to participate in the nurture of other family members, and (c) the possibility of the mother to bear children in the future.

(iii) legal regulation of this issue so that it is handled only by appropriate qualified health, counselling and legal practitioners

3. What factors should be taken into account in deciding if a termination of pregnancy is lawful?(i) serious danger to the woman's life,

(ii) serious danger of major permanent damage to the woman's physical or mental health

(iii) consent of the woman.

(iv) a victim of rape should be offered "morning after" treatment plus counselling ... all options should be canvassed ... see fuller explanation under 7. below

It is INDEFENSIBLE to include economic considerations as there are always other, less drastic alternatives to addressing economic needs.

4. Should termination of pregnancy be regulated according to the period of gestation? Termination must not be considered differently according to the period of gestation. Life is life whether the unborn child is 1 month old or eight and a half months old.

5. Should the law in Queensland provide for conscientious objection by health providers? All work in this matter must be governed by conscience with respect to the inherent value of human life and the possibility of hope in the face of perceived difficulty. A health provider who cannot in good conscience terminate the life of an unborn child in the very small number of cases where it is indicated for health/medical reasons, must be allowed a conscientious objection. In such instance, it is not sufficient for the practitioner to allow the case to proceed without intervention. Another health practitioner must be asked to take over.

6. What counselling and support services should be provided for women before and after a termination of pregnancy

Extensive medical and life counselling/coaching, support services and where needed, material support must be provided before and (in the very small number of cases necessitated by the exception described in 2. above), after termination of pregnancy.

7. Please inform the committee about your views on any other aspects of the Bill and the terms of reference.

Resort to abortion may have been more understandable in previous eras, but in this present era when medical and social care of mother and child and the wider family are so advanced and capable of producing a good result, there are relatively few instances where abortion is a necessity.

Ref 3. (iv) A victim of rape should be offered "morning after" treatment plus counselling ... all options should be canvassed including delivering the possibly-conceived child, and full medical support given to the woman whichever choice she makes. Rape is ultimately the community's responsibility and the community must carry the cost. In such a case, the rapist must be given no rights and full medical history and examination must be taken for health purposes only for the future child, should the woman decide to forego the "morning after" treatment. The rapist must be always available for further medical examination for the term of his natural life without any recourse to have any contact with the child. The crime which the rapist committed has life-long implications for others so there must be no quibbling over its having life-long implications for him.

Yours faithfully, Donald McPherson

