



miscarriage, stillbirth & newborn death support

Sands Queensland submission to the Health, Communities, Disability Services and Domestic and of the Queensland Legislative Assembly inquiry into aspects of the law governing termination of pregnancy in Queensland.

Introduction

Every year in Queensland approximately 700 families face the heartbreak of stillbirth or newborn death and many thousands more experience early pregnancy loss. Sands Queensland is a peer support organisation providing emotional support to parents whose baby has died at any time during pregnancy or in the neonatal period through miscarriage, stillbirth, neonatal death or interruption (termination) of pregnancy.

We appreciate this opportunity to make a submission to the Health, Communities, Disability Services and Domestic and Family Violence Prevention Committee of the Queensland Legislative Assembly inquiry into aspects of the law governing termination of pregnancy in Queensland.

We note under the terms of reference for the inquiry, the committee is to consider, report and make recommendations on aspects of the law governing termination of pregnancy in Queensland on options regarding:

- existing practices in Queensland concerning termination of pregnancy by medical practitioners
- existing legal principles that govern termination practices in Queensland
- the need to modernise and clarify the law (without altering current clinical practice), to reflect current community attitudes and expectations
- legislative and regulatory arrangements in other Australian jurisdictions including regulating terminations based on gestational periods, and
- provision of counselling and support services for women.

Sands Queensland has been providing support, information, education and advocacy for parents and families who experience the death of a baby through miscarriage, stillbirth, newborn death or other pregnancy losses since the early 1980s. In that time we have assisted many bereaved parents in our community that have been faced with serious adverse diagnoses for their babies during pregnancy and have made agonising decisions to either continue or end the pregnancy. In this context, we note the suggested questions for consideration in the Inquiry Information Paper and, in particular, wish to address questions 4, 5 and 6, namely:

4. Should termination of pregnancy be regulated according to the period of gestation? If so, how should the law apply to particular gestational period?
5. Should the law in Queensland provide for conscientious objection by health providers?
6. What counselling and support services should be provided for women before and after a termination of pregnancy?

Responses to relevant questions

4. Should termination of pregnancy be regulated according to the period of gestation? If so, how should the law apply to particular gestational period?

Sands Queensland urges the committee to be mindful of the potential for further harm and distress for parents who receive an adverse diagnosis for their baby during pregnancy. The list of fatal or life limiting conditions which can be revealed through pre-natal screening is long and heartbreaking. Many of these conditions are discovered through scans typically done at 20 weeks and it may take some time after these scans for diagnoses to be confirmed and for parents to consider their next steps. There are also many circumstances that may impact on a woman's ability to access scans "on time" including stability in her personal life, where she lives and availability of medical services.

In considering this issue, we draw the Committee's attention to sections 4 to 7 of the *Abortion Law Reform Act (Vic)* which, in our view, properly addresses these concerns in a way so as not to cause any further stressful impacts during what is already a very emotional time for all concerned (see also the *Reproductive Health (Access to Terminations) Act 2013 (Tas)*). Most other State legislation goes part of the way to addressing these concerns but, in our view, the Victorian and Tasmania legislation best assists in not contributing to parent's grief. If Queensland legislation is to be amended, we are of the opinion that, in the most part, it should take the form of the Victorian and Tasmanian laws.

Sands Queensland recognises that the decision to continue or end a pregnancy after an adverse diagnosis is extremely difficult. Excessive legal restrictions and more complex approval process requirements have the potential to further compound and complicate parents' grief. We believe this is a decision that parents should be able to make with the advice of their doctors.

5. Should the law in Queensland provide for conscientious objection by health providers?

If there is provision made for conscientious objection by health providers, Sands Queensland believes that the duty of care to refer on to others who do provide a full range of services must also be articulated in any further legislation.

As a matter of principle, all Queenslanders should have access to the full range of public health services, regardless of where they live. This important principle was again recognised with the inclusion of relevant sections in the *Abortion Law Reform Act 2008 (Vic)*¹ and we are of the opinion that no Queenslanders' health or wellbeing should be disadvantaged based purely on their geographical setting.

¹ *Abortion Law Reform Act (Vic)*, s8

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

Sands provides non-judgemental emotional support to parents faced with an adverse diagnosis for their baby during pregnancy, and ongoing bereavement support for parents whose baby has died either as a result of their condition or because parents have made the difficult decision to end the pregnancy.

We are also sometimes contacted by women who have had termination for social reasons. Where possible, we refer these calls to other relevant support services. We support the provision of quality opt-in, non-judgemental counselling and support for women before and after a termination of pregnancy.

Process

This submission was approved by a quorum of the Management Committee of Stillbirth and Neonatal Death Support Group (Qld) Inc.

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