



30 June 2016

To whom it may concern,

RE: ABORTION LAW REFORM (WOMAN'S RIGHT TO CHOOSE) AMENDMENT BILL 2016

I am writing in relation to the *Abortion Law Reform (Woman's Right to Choose) Amendment Bill 2016* currently referred to the Health, Communities, Disability Services and Domestic and Family Violence Prevention Committee. The primary purpose of the Bill is to decriminalise abortion by amending the Criminal Code to omit abortion.

Women's Health Victoria (WHV) strongly supports this Bill and the de-criminalisation of abortion in Queensland. Safe and legal access to abortion is good public health practice and plays an important role supporting women's broader health and wellbeing.

WHV is a Victorian statewide women's health promotion, information and advocacy service. We work collaboratively with health professionals, policy makers and community organisations to influence and inform health policy and service delivery for women. WHV is proud to have played a key role in supporting abortion law reform in Victoria in 2008.

Inability to access sexual and reproductive health services, including abortion, contributes to social and economic disadvantage for women and their communities and further exacerbates health inequalities. The ability to access safe reproductive health and abortion services has lifelong impacts for women's ability to participate equally in work and community life, earn an income and care for their families.

The current Queensland abortion law is unclear and outdated. While sections 224, 225 and 226 of the Queensland Criminal Code provide for criminal sanctions and jail terms for women 'unlawfully' having abortions and doctors 'unlawfully' providing them, they give no definition of what constitutes a lawful or unlawful abortion. This has resulted in a situation where women and health professionals are put in a position of great risk. The *Abortion Law Reform (Woman's Right to Choose) Amendment Bill 2016* seeks to amend the law so that all legal distinctions between termination of pregnancy and other medical procedures are removed by repealing sections 224, 225 and 226 of the Criminal Code.



De-criminalisation of abortion in Queensland is a significant and necessary first step on the path to abortion law reform. As part of this first step, WHV recommends careful consideration of any unintended consequences arising from simply removing specific abortion provisions from the Crimes Act, for example in relation to any remaining provisions on child destruction. WHV recommends the Victorian approach which was to both decriminalise abortion and introduce a separate Bill that clarified that abortion was legal, and how access would be regulated.

If the Bill to decriminalise abortion in Queensland is successful, further consultation and deliberation will be required in terms of the development of a comprehensive regulatory framework.

Gestational limit

The current Victorian law (*Abortion Law Reform Act 2008*) allows a woman to choose to have an abortion up until 24 weeks' gestation. The service must be provided by a registered medical practitioner. The law allows for abortion after 24 weeks only if at least two doctors agree that the abortion is appropriate in the circumstances. In making their decision, the doctors must consider all relevant medical circumstances and the woman's current and future physical, psychological and social circumstances. We suggest that the current Victorian law reflects best practice and a tried and tested model in relation to gestational limits.

Safe Access Zones

What we have learnt from the Victorian law reform process is that it is not enough to make abortion legal, it is also necessary to make sure it is accessible.

Subsequent and separate to the Abortion Law Reform Act 2008, in 2015 Victoria finally amended the Public Health and Wellbeing Act to ensure that staff and patients can safely access reproductive health services. Safe access zones legislation enables women, and those accompanying them, to access premises that provide abortion in a safe and confidential manner, and without the threat of harassment or shaming. It also enables health professionals and staff to access their workplace without being verbally abused, obstructed or threatened. WHV recommends that Queensland incorporate safe access zones into any new abortion legislation.

Conscientious Objection

Section 8 of the Victorian Abortion Law Reform Act requires that health professionals who hold a conscientious objection to abortion need to make a woman aware of their conscientious objection to abortion and make a referral to another doctor who does not have the same conscientious objection and will be able to provide the woman with the information she is seeking.



Section 8 provides health practitioners the professional space to object to abortion, without compromising the ability of women to make informed choices about a legal health service.

We recommend that as a minimum, Queensland consider using the Victorian model. However, it is important to note that international examples show that conscientious objection of health professionals to provide abortion can be successfully managed in other ways. For example, regulations in Norway mandate that all conscientious objectors are identified, which ensures that local providers can employ sufficient non-objectors to safeguard service provision.

Mandatory Counselling

It is our strong view that any new abortion law should not contain any requirement for mandatory counselling or referral to counselling as this applies a standard to abortion that does not apply to other common, safe and legal medical procedures. The fact that mandatory counselling is suggested only in relation to abortion, a health decision made only by women, also contributes to gender inequality. For example, male vasectomy does not require mandatory counselling.

The need to address sexual and reproductive health more broadly

Finally, in addition to ensuring safe and legal access to abortion, there is also a need to invest in universal strategies to increase access to sex education and contraception. The development of a statewide sexual and reproductive health framework would support and coordinate a comprehensive approach to advancing sexual and reproductive health in Queensland.

For further information regarding the current law in Victoria and the Victorian law reform process in 2008, please see the Victorian Law Reform Commission's [Law of Abortion: overview of inquiry and full documentation](#).

Yours sincerely,

Rita Butera

EXECUTIVE DIRECTOR

Women's Health Victoria