

Submission on
Abortion Law Reform (Woman's Right to Choose)
Amendment Bill 2016

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

from
Brisbane Rape and Incest Survivors Support Centre



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Brisbane Rape and Incest Survivors Support Centre (BRISSC) is a support service for women in Brisbane, aged 15 and over, who have experienced sexual violence at any time in their lives. BRISSC supports the aims of *Abortion Law Reform (Woman's Right to Choose) Amendment Bill 2016* as we believe abortion should not be a crime.

The Queensland Criminal Code statutes on abortion date from 1899, before women had the right to vote. Community attitudes have changed, and women now have more rights. Unfortunately, not all women have the right to control their bodies and choose to terminate a pregnancy if needed.

Existing legal principles that govern termination practices in Queensland

Abortion should be removed from sections 224, 225 and 226 of the Queensland Criminal Code, and put into legislation related to health services. It should not be considered a crime to terminate a pregnancy. Women, in consultation with their doctors, are capable of making the decision to terminate a pregnancy. Any laws regarding gestational limits on abortion should be made according to medical evidence. Women and their doctors should be making the decisions, not legislators or courts.

Because the current laws are unclear to most people, doctors and hospitals are often reluctant to become involved in abortion. According to Prochoice Queensland, there is no data collection on abortion in Queensland, but it is estimated that only around 1% of the state's abortions each year take place in public hospitals. The law creates a two-tiered system of access which unfairly impacts already-disadvantaged women. Women who have the means to pay for abortion through the private system, and who live in coastal, metropolitan areas, or can afford to travel to the coast, can easily access abortion in Queensland. Already vulnerable women, for example, women pregnant after sexual assault, those with serious health conditions, those experiencing severe violence, women who are homeless, and women on low or no incomes, are regularly turned away from Queensland public hospitals when requesting abortion. Decriminalisation of abortion would help make abortion available through the public system, ensuring all women have access, regardless of income, circumstance, or where they live.

BRISSC's auspicing body, the Women's Community Aid Association, receives regular requests from women in the community needing money to access abortion. BRISSC regularly supports women who have become pregnant through rape, and we see firsthand, the difficulties arising when they do not have the financial resources to pay for an abortion.

Sexual violence, incest and rape are violations of a person's bodily integrity, leading many survivors to feel out of control and powerless. One of the most significant steps towards healing from sexual violence is regaining agency and control, particularly over one's body. Thus, no or limited access to pregnancy termination compounds the trauma and powerlessness survivors are already experiencing.

Survivors have brought to our attention that the kind of health system that would be conducive to wellbeing and recovery is a system that is free or affordable, accessible, and does not question why they need a termination. The private health system currently does not provide this.

Conscientious objection

The right of medical practitioners to conscientiously object to providing patients with care to which they have objections must be balanced against their professional obligation to provide timely, high-quality care.

We do not support health professionals being given a right to conscientiously object to referring women for abortions, as this can severely limit women's access to abortion. This is especially true when women live in rural/remote areas where there are no other health services. Even in circumstances where there may be an alternative private service, if women cannot afford to pay for this alternative service, then she cannot receive it.

Queenslanders support decriminalisation of abortion

It is estimated that half of all pregnancies in Australia are unplanned [1], and that the majority of these occur while women are using contraception [2]. No contraceptive is 100% effective; the most common contraceptive in Australia, the oral contraceptive pill, is around 91% effective at typical use, meaning that up to nine women out of every hundred using it will fall pregnant in a year [3]. The World Health Organisation estimates that even if every heterosexual couple used contraception perfectly every time they had penetrative sex, there would still be six million unplanned pregnancies per year [4]. At least one in four Australian women will have an abortion at some point in their lifetime [5]. Laws which criminalise abortion risk criminalising over a quarter of the female population of Queensland.

Reliable opinion polling consistently shows that around 80% of Australian adults support a woman's right to choose. The 2003 Australian Survey of Social Attitudes (AuSSA) found that 81% of those surveyed believed a woman should have the right to choose whether or not she has an abortion [6]. The 2003 AuSSA also found that religious belief and support for legal abortion are not mutually exclusive, with 77% of those who identify as religious also supporting a woman's right to choose [6]. A survey conducted by Auspoll in 2009 of over 1000 Queenslanders found that almost 4 out of 5 voters wanted the law changed so abortion is no longer a crime [7]. A review of over 20 years of data on attitudes to abortion published in October 2009 found that "more than half the electorate in Australia and in Queensland support freedom of choice, and a further third support the availability of abortion in special circumstances... As far as attitudes are concerned, Queensland is no different from the rest of Australia." [8]

On average, only approximately 4% of the Australian community are opposed to abortion in every circumstance; Betts states that "Such opposition as there is concentrated among a few religious groups and among people aged 75 and over." [8]

The Royal Australian College of Obstetricians and Gynaecologists, the Public Health Association of Australia, and Sexual Health and Family Planning Australia (now called the Family Planning Alliance Australia), all advocate for the decriminalisation of abortion and equity of access to abortion services. A 2010 survey published in the *Medical Journal of Australia* found that 85% of practicing obstetricians and gynaecologists are not opposed to abortion, and 89% of these doctors agree that abortion should be available through the public health system in all states and territories [9]. The Australian Medical Association Queensland said in 2009 that current abortion laws are unclear and do not provide certainty for doctors or for women. The AMAQ stated that Queensland's "abortion laws are a barrier to a doctor's first duty – best patient care" [10]. In late 2011, United Nations Special Rapporteur for Health Anand Grover released a report examining the interaction between the right to health and criminal laws relating to sexual and reproductive health. In it, he stated that the right to sexual and reproductive health is a fundamental part of the right to health. He also stated that criminal and other legal restrictions on abortion violate the right to health, and that the application of such restrictions as a means to achieving public health outcomes is 'often ineffective and disproportionate'. The report urged all UN member states to decriminalise abortion [11].

References

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[11] *Right of everyone to the enjoyment of the highest attainable standard of physical and mental health*. Available in full on the United Nations website at http://www.un.org/ga/search/view_doc.asp?symbol=A/66/254