

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

RE: Abortion Law Reform (Women's Right to Choose) Amendment Bill 2016.

Unplanned pregnancy and abortion are a reality of women's lives. Termination of pregnancy is estimated to be the outcome of around one in four pregnancies, and up to one in three women will have an abortion in their lifetime.¹

The community has consistently, and overwhelmingly, supported the removal of abortion from the Criminal Code. I urge you to support the Abortion Law Reform (Women's Right to Choose) Amendment Bill 2016 to decriminalise abortion in Queensland.

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.² This report 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.² 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.³

Unfortunately this area of health is surrounded by stigma and misleading inaccurate information, particularly about the safety of abortion and its impact on women. The most common myths are that an abortion will affect a woman's future fertility, that it causes breast cancer and that there are long-lasting psychological impacts of abortion. These myths have been debunked by experts below.

The Royal Australian and New Zealand College of Obstetricians and Gynaecologists (RANZCOG) states that serious complications after abortions are rare, and that mortality and serious morbidity occur less commonly with abortions than with pregnancies carried to term.⁴ Women who have an uncomplicated termination are not at an increased risk of being infertile in the future.⁵

Around the world reproductive health and anti-cancer organisations have rejected any association between abortion and an increased risk of breast cancer. This rejection is based on scientific investigation; documented in reputable medical publications and has been endorsed by the World Health Organisation.⁶

RANZCOG has reviewed the evidence on the psychological impact of abortion and concluded that "psychological studies suggest that there is mainly improvement in psychological wellbeing in the short term after termination of pregnancy [and that] there are rarely immediate or lasting negative consequences."⁷

It must be emphasised that the current emotive debate around "live births" and "abortions to nine months" is entirely false and misleading. Currently terminations after 20 weeks gestation are rare, and are usually due to extreme circumstances including domestic violence, diagnosis of fetal abnormality,

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The committee has a responsibility to ensure our laws reflect current community attitudes and expectations. This enquiry must be based on the views of experts working in the field with the best available evidence.

Yours sincerely,

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Postal address:

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Name: Associate Professor Elizabeth Mackinlay, UQ

(Woman and Gender Studies)

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