

My name is Dragica Debert. I am the lucky mother of a beautiful Chinese boy. My husband and I adopted our son (then aged 2 and a half) from China in 2009.

My husband and I would have loved to have adopted another child from China but Chinese adoptions came to a halt, with the final “batch” of Australian adoptions from China taking place only 2 weeks after ours.

My husband and I also enquired about adoption through the Chinese Special Needs stream where children with mild abnormalities such as hairlip and cleft palate (easily rectified in Australia) were offered for adoption together with children with other abnormalities such as Downs Syndrome. However, the Federal Government closed the programme, so adoption through this avenue also ceased.

And adoption in Queensland, as you know, is an interminably long process as there aren't enough children “available” for adoption ... primarily because *approximately 14,000* Queensland children¹ - most of whom could be available for adoption - are aborted every year.

My husband and I are not alone in seeking (in our case an additional) adoption to no end. Whilst our successful adoption was adoption by choice and not a second option, thousands of infertile couples in Queensland have suffered countless failed IVF attempts at parenthood ... and are left with no alternative parenting option because adoption is stunted through lack of children.

It intrigues me that adoption as an option for women with unplanned pregnancies is demonised on the basis that the mothers have to carry to term their babies and then give them away. Yet, when we are talking about late-term abortion, these same mothers who have carried their children to term (or almost) have their children's lives terminated by cranial decompression, lethal injections into the heart or other brutal acts that surely would be ***far more distressing*** for the mother than passing her child on to a beautiful family?

¹ According to Medicare figures

And so I come to the issue before this Parliamentary Committee:

Whether or not to decriminalise abortion in Queensland with no gestational limit.

What really are we talking about here ...it is not that a woman does not have the right to choose to terminate her pregnancy: Queensland women currently have that right to the extent of 14,000 abortions annually – with no criminal charges laid upon any of the 14,000 doctors or mothers ... (with the exception of the recent Cairns case which was a do-it-yourself abortion ...). It is not that Queensland women are unable to terminate their pregnancies up until birth: we know that Queensland women do ... here in Queensland ... and we have not yet seen any criminal charges laid for any late-term abortions. Have there even been criminal charges laid upon any of the doctors or mothers referable to the 27 babies last year who survived late-term abortions in Queensland and who were not rendered any palliative care and were left to die²? Any criminal charges laid? No. So what ARE we talking about?

The pro-life cause (generally speaking) in Queensland does not say that medical decisions to end a pregnancy at 24, 30, 36 weeks, or whatever stage past the age of viability, ***where the baby has a condition that is incompatible with life outside the womb (such as in the case of anencephaly)*** are unethical decisions, because, in these cases, it is the ***abnormality*** that is the cause of death. Whilst I personally disagree that early induction is the easier and best answer for the mother in these cases, ***no-one is suggesting that these unfortunate events are the late-term abortion acts to which 88 percent of Queenslanders oppose³ with reference to the proposed bill.*** To suggest that these are the acts is absurd. So we are not talking about acts of euthanasia upon babies whose conditions are not compatible with life once born. Well, what ARE we talking about?

² ABC News “Rise in Queensland Babies Surviving Late-Term Abortions and Being Left to Die” by Josh Bavas, 15 June 2016.

³ Galaxy Research Poll 6-8 May 2016

Let's get to the truth of the matter and cease using these sad and **traumatic** cases of euthanasia as a facade for justifying the legalisation of abortion up to birth for any reason.

Let's get to the acts of brutality which this bill is intended to legalise and the real circumstances in which these acts are sought and which only 6 percent of Queenslanders⁴ are demanding – that is:

1. The late-term termination of healthy children carried by healthy mothers ... mothers who have emotionally disconnected from the child in the womb and wish to abort for any reason, and -
2. The late-term termination of children with a disability who might not meet society's eugenic standards but who are otherwise healthy, carried by healthy mothers who wish to abort on eugenic grounds or who find that they are coerced by the medical profession or others into aborting on eugenic grounds.

This is a far cry from the acts of euthanasia upon a child whose condition is incompatible with life outside the womb; who might be dressed in gown and booties and cuddled, cradled and comforted in its loving and distraught mother's arms until it draws its final breath.

WE ARE HERE TALKING ABOUT A HEALTHY CHILD, PARTIALLY BIRTHED SO A BRUTAL ACT LIKE DR GRUEMANN'S CRANIAL DECOMPRESSION ABORTION CAN BE PERFORMED, AND, IF LUCKY, DIES ... IF NOT, IS LEFT ON A COLD SURGICAL TABLE TO PERISH, FOR SOMETIMES HOURS, IN PAIN AND DISTRESS, NOT COMFORTED IN ITS MOTHER'S ARMS, BUT ON ITS OWN, ALONE. IT IS A HORROR STORY. TO SAY THAT, BECAUSE THE CHILD DOES NOT CRY, IT THEREFORE DOES NOT FEEL THE PAIN AND ANGUISH OF SUCH A DEATH IS IGNORANCE BEYOND WORDS. IN A NORMAL DELIVERY, THERE ARE STEPS TAKEN TO SUCTION AMNIOTIC FLUID FROM THE BABY'S NOSE AND MOUTH OR PLACE THE BABY UPSIDE DOWN ON ITS MOTHER'S BODY FOR THE FLUID TO DRAIN. IN A PARTIAL BIRTH ABORTION, NOT SO, AND NOT ONLY CAN THE BABY NOT CRY BUT WILL EVENTUALLY DROWN IN ITS FLUID.

⁴ Galaxy Research Poll 6-8 May 2016

Are we as a society prepared to say that to perform a torturous act on a baby with the direct intention of killing it because the mother has simply disconnected with the child and no longer wants it ... is justified? How can a person with any ethic or moral grounding say that this is justifiable killing ... justified because the mother chooses not to carry that child **for only a few further days or weeks ahead** to term? How can adoption be regarded as “cruel” and these acts not ...

Adoption in this scenario is not “a cruel option”, surely, for here the mother WANTS to part company with the child and this she can do by creating a win-win-win situation: a win for the mother (from procedural complications and from mental health implications down the track), a win for the child, a win for the adoptive parents. Whilst we cannot legislate to enforce adoption in these circumstances, a woman seeking a late-term abortion should be afforded publicly-funded counselling in which the option of staying with the pregnancy for the remaining days or weeks is approached, highlighting the win-win-win outcome of adoption.⁵

Adoption is the answer to 1. above, for it -

- Prevents an horrific and senseless crime perpetrated upon a child unable to defend his or herself;
- Gives the child a future in a loving family, harnessing his or her unique talents, skills and potential, allowing that child to make a difference in the world into which it is entitled to born, making its own individual and unique mark upon the world;
- Gives one of the many childless couples the baby that they so desperately want;
- Gives dignity to our State and its laws by honouring its responsibility to protect its most vulnerable;
- Gives dignity to our State and its laws by refusing to legalise the horrific acts of partial birth abortion: cranial decompression and brain suction of healthy living babies, lethal potassium injections into the hearts of healthy living babies, et al.

⁵ The provision of such funding would be a far cheaper option than the expense incurred to the State in having to deal with the mental health problems later in life – societal and psychiatric - of women who have aborted late term and who have not been rendered any real support before taking this life-changing, irreversible step.

- Relieves the mother from mental health implications down the track should she inevitably consider, at some stage in her life, “what if ...” – or, worse, if the mother has been pressured into the abortion by the father, family or even medical professionals as so frequently occurs.
- Protects doctors who would have no protection in law if he or she refused to participate.
- Creates a win-win-win outcome as outlined above.

And adoption is the answer to 2. Above, and for all of the same reasons. Mothers of babies with foetal disability deserve far better than the coercion they endure by medical professionals to terminate their pregnancy. Support to keep or adopt should be afforded to parents who are unsure about continuing with such a pregnancy rather than coercion to terminate.

IN CONCLUSION, I place this before you: I look at my boy’s perpetually beaming face as he trains on the floor of the Academy, his giftedness in acrobatics taking him to the world stage next year at the age of 10, and I think of his birth mother in China ... whoever she may be (and we will never know) ... wondering whatever happened to her beautiful baby of 3 months ... (and she will never know) ... and I give thanks for her selflessness, her generosity, her trust ... and the gift of life she gave to this child who shines with the joy of that very gift.

One of his coaches recently said to me ... “everyone loves him”.

What a tragedy and loss to the world had her dire circumstances brought her to the grim alternative of terminating his life..

Adoption ... IS... the answer.

DRAGICA DEBERT