

From:
To: [abortionlawreform](#)
Subject: Abortion Law Reform - individual comment
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Research Director
Health, Communities, Disability Services and Domestic and Family Violence
Prevention Committee
Parliament House
George Street
Brisbane Qld 4000

Dear Sir / Madam

Thank you for the opportunity to make a submission regarding the *Abortion Law Reform (Woman's Right to Choose) Amendment Bill 2016*.

Abortion (action to terminate a pregnancy) is a very emotive issue, as are all issues to do with pregnancy. Pregnant women deserve our very best care, socially, psychologically and medically. Unwanted pregnancy can be a very traumatic time for women and those who are close to them, and decisions to terminate or continue pregnancy can be heart wrenching. I do not want to blame any woman for making this difficult decision.

Ethically the two principles involved are *do no harm* and *autonomy*. The title of the bill recognises a woman's right to chose, that is, it recognises the ethical principle of autonomy. However, it does not recognise the principle of "do no harm". The tension between these two should be openly and respectfully debated in discussion of this bill.

The principle of "do no harm" generally takes precedence over "autonomy". For example, where a person is a danger to themselves or others they can legally be detained in a mental health facility. If this is accepted as a general rule, then the debate centres on, "What is human", or when is a biological human a human in the ethical sense.

My view is that ethically human life begins at conception. I realise there are a variety of other views, but the very variety of views does rather point out that any view other than "ethically life begins at conception" is quite subjective. The majority of Queenslanders are uncomfortable with abortion when the baby looks very much like a human being. Most I think are horrified when unborn babies are killed at a stage when they are viable outside the womb. However, there are ethicists (like the Australian Professor Peter Singer) who say that we should extend abortion to infanticide, because it is illogical to kill a baby in the womb for certain conditions, but allow it to live with the same conditions once it is out of the womb. Both the unborn baby and the new born baby are "unaware", so lack personhood.

For those who adopt a position other than "ethical life begins at conception", there is the burden to state when and why ethical human life begins at a different point, and why they would in fact oppose infanticide. Infanticide has of course been acceptable in many societies in the past, including classical Roman society. (So claims that "when does human life begin" is a modern debate are false.)

Other arguments, that is, in addition to the argument we do harm when we destroy a human life, are in summary as follows:

1. Government should act to protect the least powerful in society. The unborn baby is the

least powerful of all.

2. There is good evidence that unborn babies feel pain during the termination process. This again contravenes "do no harm". When we butcher animals it is important they feel no pain.
3. Women are often not informed of all their choices. At very least they should be informed of all options for continuing a pregnancy, including adoption. They should also be supported in the continuation of pregnancy. They should also be informed of the long term consequences of abortion.

This includes being fully informed of the evidence regarding mental health after abortion. Despite claims to the contrary by those who support "choice" (and those who profit from it), there is now evidence from a meta-analysis of research that women who have had an abortion are more likely to suffer poor mental health. (Hardy, G., Benjamin, A., Abenhaim, H. Effect of Induced Abortions on Early Preterm Births and Adverse Perinatal Outcomes. *J Obstet Gynaecol Can.* 2013. 35(2):138–143. See also a British Medical Journal editorial on this subject, *BMJ 2014;348:f7553* at <http://www.bmj.com/content/348/bmj.f7553/rr/683322>.)

Unfortunately health "experts" may not explain the alternative to termination of a pregnancy where the baby has a life limiting condition. The alternative is loving palliative care, where the mother can say good-bye to their child in a way which enhances the prospect of a successful grieving process.

4. Abortion of babies with disabilities is a clear message to others with disabilities that they are unwanted.

For these reasons I respectfully ask the parliament to reject the bill.

I do support the removal of section 225 "The like by woman with child".

The pregnant woman is all too often the victim in this, and to prosecute them is to prosecute the victim. In the same way that some Scandinavian countries have removed the offence of being a prostitute, but retained the offence of using (abusing) a prostitute, I would support the removal of section 225 with the retention of section 224.

Thank you once again for the opportunity to comment.

Dr Neil Parker MBBS MPH FAFPHM MACS

I submit this as an individual, but disclose that besides being a registered specialist in Public Health Medicine I am a registered minister with Queensland Baptists.

I was previously medical superintendent in a village hospital in Bangladesh, then founded the Darling Downs Public Health Unit, and have served on Education Committees for my Specialty as well as serving on the Queensland Baptists Board and the Board of St Andrews Toowoomba Hospital.



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