

From:
To: [Abortion Bill](#)
Subject: Submission against the Second Pyne Abortion Amendment Bill
Date: Tuesday, 4 October 2016 11:09:24 PM

Dear Committee on the Second Pyne Bill, the Health (Abortion Law Reform) Amendment Bill 2016.

As a citizen of Queensland I would like to submit my opposition to the Bill.

Fundamentally abortion does not help women. It provides a "solution" to a "problem" by creating many other problems and often worse situations for the woman, and of course it leaves the baby dead. After an abortion there is a minimum of one dead and one wounded, but often the number of wounded is unseen. There is now much research showing the psychological effects of an abortion last for many years and often actually compound the problems rather than offering a solution to them.

There is no medical reason to perform abortion after 24 weeks of pregnancy, as there is never a situation in which a viable unborn baby needs to be killed to save the mother's life.

If the mother has a serious condition and the pregnancy needs to be ended, the best way to do this typically is by caesarean section which would result in the health issue being resolved quickly, the mother recovering and her baby being given every chance to survive with the best neo-natal care.

If a mother wants to end a late-term pregnancy, there is no reason why the baby has to be killed in the process. There are plenty of infertile couples who would love to adopt an unwanted baby.

There are long adoption waiting lists in Australia, and last year there were only 54 adoptions of Australian-born children to non-relatives. This is due in large measure to the fact that approximately 80,000 unborn children are killed by abortion in this country every year.

There should be an absolute ban on all late-term abortions. This is supported by 85% of Queenslanders. In fact, 72% of Queenslanders also are opposed to mid-term abortions past 13 weeks of pregnancy (Galaxy poll, May 2016).

I am astonished that the Bill specifically states that if the rule was broken, it would not be an offense for the doctor who kills the viable baby. There would be no penalty.

A law without consequences is no law at all.

It is a good provision for doctors and nurses who do not wish to be involved in performing an abortion to have legal protection through conscientious objection, especially as 79% of Queenslanders support conscientious objection provisions for doctors and nurses (Galaxy opinion poll, May 2016).

However, it is unnecessary that the Bill includes an exemption to conscientious objection rights in the case of an "emergency" abortion, because there is no such thing. Abortion is understood by the public to mean an operation or procedure which has the intention of killing an unborn child. There can never be an emergency abortion. If it is an emergency it would be normal for a caesarean section to be performed.

Sir William Liley, of New Zealand, said: "The only thing medical about abortion is that doctors do them and must handle the complications afterwards. No matter how bad mother's heart disease, renal complaint, diabetes or mental illness, no one would be

suggesting abortion was essential if mother wanted the baby.” The truth is that abortion is a medical solution to a social problem.

This Bill is also seriously deficient in that it does not address the following issues.

Independent Counselling:

The law on abortion should have safeguards for women and particularly be addressing a woman’s right to know. Ninety-four percent of Queenslanders believe that before having an abortion, a woman should receive free independent counselling and information on the development of her unborn baby, the nature of the procedure, the physical and psychological risks of the operation and the alternatives of keeping the baby or adoption, so that she can make a fully informed decision.

This Bill should include a requirement for mandatory independent counselling before abortion, including the provision of an informed consent booklet which includes information on the nature of the procedure, the physical and psychological risks of abortion, the development of the unborn child, alternatives to abortion and support agencies. There must be an appropriate mandatory cooling-off period of at least 72 hours or 3 days.

In 2003, the Women’s and Children’s Hospital in Adelaide changed its policy and made independent counselling by social workers mandatory and it led to a drop of 25 per cent in the number of abortions at that hospital over the next 12 months. There are a lot of unwanted abortions which mandatory independent informed consent counselling could prevent.

Parental consent:

75% of Queenslanders believe this should normally be required for girls under the age of 16 to have an abortion. Of course, 16 is the age of consent in so far as sexual relations are concerned. It is outrageous that under current case law, Queensland parents have no rights at all in deciding whether their under-age daughters can or should have an abortion. It is totally unacceptable that this has been taken out of the hands of parents. In normal circumstances, they should be involved in the decision-making process on such a major life decision. The statute law needs to be changed.

Please consider carefully your decision regarding this law. Thank you.

Kind regards

Mikaela Shay

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