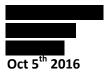
Pamela Doherty



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

Re: Health (Abortion Law Reform) Amendment Bill 2016

I am writing this second submission to reiterate my strong support for Cairns Independent MP Rob Pyne's first bill the Abortion Law Reform (Women's Right to Choose) Amendment Bill 2016. This support is outlined extensively in my first submission, which I have attached.

The Health (Abortion Law Reform) Amendment Bill 2016 does not effect the criminalisation and only adds some legislative regulation to providing abortion. This means that the Abortion Law Reform (Women's Right to Choose) Amendment Bill 2016 needs to be passed in conjunction with this second bill to be decriminalised in Queensland.

Therefore my support for the Health (Abortion Law Reform) Amendment Bill is **only in conjunction with** the passing of Abortion Law Reform (Woman's Right to Choose) Amendment Bill.

Responses to the clauses proposed

- **only a doctor may perform an abortion**: a person who is not a doctor (or a registered nurse administering a drug to perform an abortion under the direction of a doctor) would commit an offence. I support this clause.
- a woman does not commit an offence by performing, consenting to or assisting in an abortion on herself. I support this clause but strongly recommend the complete decriminalisation of abortion in Queensland to remove the risk of prosecution for medical professionals, women and anyone supporting a woman; and bring our current legal principles into step with current termination practices.
- an abortion on a woman who is more than 24 weeks pregnant may be performed only if two doctors reasonably believe the continuation of the woman's pregnancy would involve greater risk of injury to the physical or mental health of the woman than if the pregnancy were terminated. I do not believe gestational limits should be included in the legislation regarding abortion. The report on pregnancy outcomes from South Australia's Department of Health in 2013 reports the 91.9% were performed within the first 14 weeks of pregnancy.¹ The small numbers of women who will choose to terminate a pregnancy after 20 weeks gestation do so in severe circumstances, such as severe maternal illness, diagnosis of a severe foetal anomaly, domestic violence or other exacerbating circumstances. These women should be able to access an abortion timely and in addition should not have to face additional barriers, such as a board of ethic approvals.
- **conscientious objection** no-one is under a duty to perform or assist in performing an abortion; however a doctor has a duty to perform an abortion if it is necessary to save a woman's life or prevent serious physical injury. Also, a registered nurse has a duty to assist

in such circumstances. I do not support this clause. All medical practitioners should prioritise the needs of their patients and not their own moral conscience on health matters. They should not be able to legitimately impose their own views on women who wish to terminate their pregnancies.

• patient protection or 'safe zones' a protected zone of at least 50 metres must be declared around an abortion facility; certain behavior, e.g. harassment and intimidation, is prohibited within a protected zone. Publishing images of a person entering, leaving or trying to enter or leave an abortion facility is prohibited. I support this clause with two recommendations. Firstly that the safe zone is extended to 150metres in line with the Tasmanian and Victorian legislation and secondly that ministerial approval is not required to approve a safe zone.

Conclusion

Abortion can be an emotive issue for some members of the community; however the reality is that abortion is a necessary reproductive health procedure accessed by millions of women each year.

Queensland woman and doctors deserve to be able to access or provide the procedure without the threat of prosecution.

I urge the Health, Communities, Disability Services and Domestic and Family Violence Prevention Committee to recommend that both bills are passed and are also debated and voted on together as a package.

¹ Pregnancy Outcome Report in South Australia 2013, p.55. Available online