

From: [Chris McCormack](#)
To: [Abortion Bill](#)
Subject: Health (Abortion Law Reform) Amendment Bill 2016
Date: Thursday, 6 October 2016 11:16:09 AM

I commend this submission to whom it may concern. The Health (Abortion Law Reform) Amendment Bill 2016 is a troubling proposed bill on many levels.

1. It is contradictory. It states that only registered medical professionals may legally perform abortions without possible conviction but later in the bill states that a woman may legally perform an abortion upon herself.
2. It claims to honour the right of conscientious objection for medical practitioners who refuse to carry out or assist in an abortion but also states that they must perform an abortion when the mother's health is at risk. The well-being of the unborn baby and mother are not mutually exclusive and best medical practice is not to kill one human in the hope of preserving the other. I would argue that it is possible to preserve the lives of both mother and pre-born baby using all the available medical technology at our disposal. Medical practitioners and especially those assisting may be forced to accept questionable medical judgements from their superiors and carry out the subsequent procedures which are anathema to their beliefs, rendering the so-called right of conscientious objection meaningless.
3. The bill recommends enforcing "bubble zones" around premises where abortions take place. The current occurrence of harassment of people entering or exiting abortion facilities would be virtually nil. I strongly doubt police forces are inundated with requests by members of the public for assistance when attending these premises. Peaceful, respectful prayer vigils occur near a very small number of these facilities and any resistance to their presence would most likely stem from abortion providers. This part of the legislation is unconstitutional as it infringes upon the right to peaceful assembly and the unconstitutionality of similar laws recently introduced in Tasmania, Victoria and the A.C.T. are currently the subject of a legal challenge.
4. The proposed bill states that an abortion may be performed beyond 24 weeks if approved by two medical practitioners when the physical and/or mental well-being of the mother is deemed to be at risk. Given that as the law currently stands, abortions may legally be carried out only when the physical/mental health of the mother is at risk, basically this has defaulted to any woman requiring an abortion will be granted one. There seems to be no current checks or balances in place to gauge whether mothers seeking abortions really are at risk of physical/mental problems. If the law is changed allowing abortions up until birth, there seems to be no reason to believe that a more stringent and thorough appraisal of the mother's state of mind/physical health would be undertaken. This would mean that the default setting would become abortion legal up until birth for any reason whatsoever. This would lead to an exponential increase in the number of abortions (a 600% increase, post- abortion up to birth legalisation in Victoria) and the resultant well documented increase in physical and mental problems of post-abortive mothers.

I urge the committee to reject the proposed bill.

Chris McCormack


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