

SUBMISSION

To the 2016 Legislation Review currently before the Parliamentary Committee

AGAINST the

Health (Abortion Law Reform) Amendment Bill 2016

I **DO NOT** support the decriminalisation of abortion in Queensland, NOR the repeal of sections 224, 225 and 226 from the Criminal Code.

I believe that the proposed reforms laid out in this new bill DO NOT adequately address the parliamentary Committee's concerns raised re the previous abortion bill presented by Rob Pyne, Member for Cairns.

Conscientious objection

It is particularly concerning that some doctors and nurses, and no doubt other medical personnel such as anaesthetists, may be forced to participate in an abortion *against their conscience*. The bill does little to protect those in the medical profession who wish no part of the abortion industry's killing. We know from the legislation already passed in Victoria (and now Tasmania), that doctors are being "set up" to try and force them to refer for an abortion where it is totally against their conscience. Dr Janet Grossman is one doctor who has had this happen to her. There would be nothing to stop the same despicable thing happening here in Queensland.

A mother's medical condition

There is **never** a case where it is necessary to kill an unborn baby still in his/her mother's womb in order to restore the mother to good health. There may well be a circumstance where the mother's serious illness may necessitate the early removal of the unborn baby where the baby will naturally demise, but there is **no need** to kill that baby during the process. Let me explain – should a mother be diagnosed with uterine cancer and she is 16 weeks pregnant, the mother can be operated on to remove the tumour which would necessitate the uterus and unborn baby being removed. It would be obvious that a 16 week old pre-born baby cannot survive such a premature departure from the safety of the womb, and it would be understood that the baby would die. This would be very sad, however, the baby would die naturally due to his/her prematurity, and not because he/she had been pulled apart, limb by limb, and any remaining body pieces suctioned out by abortion.

This is the "double-effect" principle where the death of the baby is an *unintended*, though expected, outcome of the removal of the cancerous uterus.

There is **no** medical situation whereby the **intentional killing** of an unborn baby in the womb would improve the mother's health. Expert, careful, compassionate medical care is what is called for in difficult medical circumstances, not the 'easy option' of destroying an unborn life.

Abortion after 24 weeks

The proposed legislation states that two doctors would have to agree that a woman pregnant after 24 weeks should have her baby aborted should her going to term be considered a "greater risk" to her physical or mental health. There are a number of serious concerns with this – one doctor could be the abortionist, the second, the anaesthetist. Hardly independent or transparent! As both stand to make money from the abortion, it would be *highly unlikely* that they would come to a decision whereby it was best for the mother to remain pregnant.

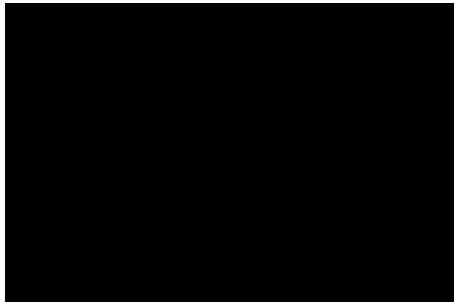
Abortionist make money out of abortion. It would be a bit

like Myers stores telling their customers that that didn't need that new TV to expect an abortionist to advise against abortion!

If the mother's mental health was decreed to be so fragile as she would "go over the edge" by remaining pregnant, who is accessing this – the abortionist? Surely if we are talking about mental health, an independent fully qualified psychiatrist or psychologist should be directed to investigate the mother's state of mind and predictions for her future mental well-being before such a drastic step as the aborting of her baby is undertaken. There appears to be no such safeguard in the proposed legislation. This is a very serious concern.

Buffer zone

Many people talk about abortion, but few talk about **unwanted** abortions. Unwanted abortions far outnumber "wanted" abortions. Having spoken to many, many girls prior to them entering an abortion facility, the vast number of them state "I have no choice", yet the abortion rhetoric is all about "choice". Often these girls are being pushed into an abortion by their boyfriend/husband, their mother/father and even sometimes their 'friends'. These girls and women feel unsupported in their desire to **remain pregnant** and are pushed into the vortex of abortion. One only has to read Melinda Tankard Reist's book, "Giving Sorrow Words", to read women's own stories of how they didn't "choose" abortion – it was a NON-choice! And from personal experience of talking to one young woman outside an abortion mill who was being coerced into an abortion, she was brave enough to choose LIFE for her baby once she saw that I was willing to help support her emotionally and in other ways. That particular baby is now a beautiful little girl nine year old – picture below used with permission of the mother.



Where would this mother be now without her precious little girl if no one had been there for her to talk to outside that abortion facility? No doubt in a vastly different place mentally and emotionally. Often all these women and girls need is to have contact with someone "on their side". If a buffer zone is placed around these abortion facilities, it would ensure that there were many **unwanted** abortions, just like would have happened to this young mum. I strongly urge you to ensure that this proposed legislation does not become law in Queensland. Pregnant women deserve love and support, not abortion, as the answer to their problems.

SUMMARY

I **DO NOT** support a repeal of the Criminal Code statutes re the current abortion legislation.

I **DO NOT** support the *Health (Abortion Law Reform) Amendment Bill*, **nor** any combination of it with the *Abortion Law Reform (Woman's Right to Choose) Amendment Bill*.

I sincerely urge the Committee **NOT** to allow either bill to progress.

Teresa Martin

