

**Health (Abortion Law Reform)  
Amendment Bill 2016**

**Submission No. 1241  
Received 6 Oct 2016**

Submission copied into email:

SUBMISSION

I support the Health (Abortion Law Reform) Amendment Bill 2016.

I also support the related bill which would repeal abortion from the Criminal Code and I support both of these bills being considered by the Parliament together.

I support the provision that only a doctor may perform an abortion (or a registered nurse administering a drug to perform an abortion under the direction of a doctor). This would ensure that abortions were performed in the best possible circumstances, safeguarding women's health against unnecessary risks.

I support the provision that a woman would not commit an offence by performing, consenting to or assisting in an abortion on herself. This would remove any fear on a woman's part about seeking help after an abortion performed illegally under the previous provision.

I support the provision that 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 her physical or mental health than if the pregnancy were terminated. In practice, abortions later than 24 weeks are very rare in Australia, and are performed only when not doing so would lead to very significant negative consequences for the woman. Putting this practice into law would remove any confusion about this, and ameliorate fears on the part of practitioners that this was illegal. involve unusual and complex circumstances.

I support a conscientious objection provision so that no-one has a duty to perform or assist in performing an abortion, with the exception that doctors would have a duty to perform an abortion if necessary to save the woman's life or to prevent serious physical injury; and also, for a registered nurse to have a duty to assist in such circumstances.

I support the provision for patient protection or "safe zones" of a minimum of 50 metres around clinics, and the provision preventing publication of images of people entering or leaving abortion clinics or facilities. I support this because of the harassment of women at abortion clinics that has occurred for a long time, sometimes causing distress and possible lack of privacy.

I ask the Committee, in its consideration of this matter, to take into account the following factors:

- The current abortion law in Queensland is unclear. Unclear laws encourage disrespect for the legal system in general, and create difficulties for police. This may also contribute to a reluctance on the part of doctors to provide services.
- Most Australians support the position that abortion should be a matter for the woman to decide, in consultation with her doctor.
- Parenting is a complex and demanding responsibility, even in the best circumstances. This responsibility should not be forced on people who recognise that they are not ready, for whatever reasons.
- Pregnancy and parenthood should not be a punishment for contraceptive failure. Even with perfect usage, all contraceptives have a failure rate, and perfect medication usage is not achieved by many mature adults managing chronic and serious health conditions. Furthermore, many young people do not know how to access contraception, particularly in rural areas.
- Women may rely on partners' statements about using contraception which are then not followed through.
- Unplanned pregnancy is more common in situations of domestic violence, because of the woman's lack of control over when intercourse takes place.
- Children resulting from pregnancies about which the mother feels ambivalent or rejecting are more likely to result in parenting which requires intervention by the child protection authorities. Our child protection system is already over-stretched, with overloaded workers and not enough high-quality foster carers. Forcing women to continue with pregnancies they would otherwise terminate can only exacerbate this.
- People opposed to abortion say that adoption is an alternative to abortion. While technically this is true, the reality is that most women do not choose to give up their babies for adoption, even if the circumstances of the conception and/or pregnancy have been distressing for them. And when they do, this is not a "no cost" resolution for the woman, who is likely to experience significant life disruption, long-term grief and loss, and more likely to experience mental health issues.
- When women have children earlier than they would choose, their entire life trajectory is affected in terms of finances, parenting competence education, employment and relationships.
- The current laws contribute to a situation where many Queensland hospitals refuse to provide abortions.
- Women in remote and rural areas in particular are faced with significant disruptions and costs when they choose to access abortions, through time off work, travel costs, and accommodation costs. If abortion were to be placed on the same basis as other services, Queensland Health would be able to provide financial support for women who have to travel to have abortions, on the same basis as travel for other health treatments.

I urge you to support these bills.

Sincerely,

Katrina Barben

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