

Termination of Pregnancy (Live Births) Amendment Bill 2024

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SUBMISSION:
*Termination of Pregnancy
(Live Births) Amendment Bill*
2024

AUSTRALIAN CHRISTIAN LOBBY

About Australian Christian Lobby

The vision of the Australian Christian Lobby (ACL) is to see Christian principles and ethics influencing the way we are governed, do business, and relate to each other as a community. ACL seeks to see a compassionate, just and moral society through having the public contributions of the Christian faith reflected in the political life of the nation.

With around 250,000 supporters, ACL facilitates professional engagement and dialogue between the Christian constituency and government, allowing the Voice of Christians to be heard in the public square. ACL is neither party-partisan nor denominationally aligned. ACL representatives bring a Christian perspective to policymakers in Federal, State and Territory Parliaments.

acl.org.au



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8 May 2024

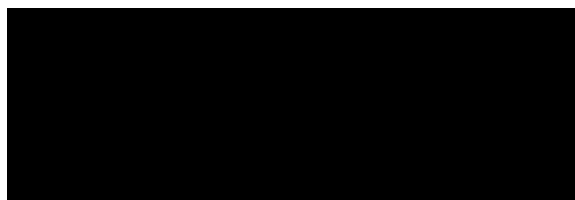
Dear Committee Secretary,

The Australian Christian Lobby (ACL) is grateful for the opportunity to make a submission on the *Termination of Pregnancy Live Births) Amendment Bill 2024*.

We would appreciate an opportunity to meet with you to discuss our submission.

Thank you for your careful consideration of the following submission.

Yours Sincerely,



Rob Norman

ACL Queensland State Director

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Executive Summary

The Australian Christian Lobby (ACL) is a grassroots political movement with a nationwide support base of over 250,000 individuals, approximately 45,000 of whom reside in Queensland.

The ACL extends its appreciation for the *Termination of Pregnancy (Live Births) Amendment Bill 2024* inquiry and urges the Health, Environment, and Agriculture Committee to advocate for its endorsement by the Queensland Parliament.

Article 6 of the Universal Declaration of Human Rights ¹ affirms the entitlement to life, liberty, and security of persons for all individuals. Similarly, Article 24 of the Convention on the Rights of the Child ² stipulates the right of every child to the highest achievable standard of health, necessitating the provision of essential medical care and attention to newborns. *This bill* represents a necessary advancement in safeguarding the inherent dignity and human rights of infants born alive after the termination procedure. By aligning with existing legislation in South Australia and New South Wales, this bill demonstrates a national trend towards ensuring equal care for all newborns. Supporting this bill isn't just about legal clarity; it's about upholding fairness, compassion, and respect for all human life.

The ACL enthusiastically supports the passage of the *Termination of Pregnancy (Live Births) Amendment Bill 2024*.

¹ [Universal Declaration of Human Rights - Human rights at your fingertips - Human rights at your fingertips | Australian Human Rights Commission](#)

² [Summary of the Convention on the Rights of the Child \(unicef.org.au\)](#)

Queensland Neonatal Deaths Related to Termination of Pregnancy: Statistics from 2010 to 2020

The incidence of neonatal deaths in conjunction with termination of pregnancy procedures is progressively escalating, evidenced by an increasing percentage of neonatal deaths attributed to such circumstances. In 2019, this percentage reached a peak of nearly one-quarter (24.6%) of all neonatal deaths, where "termination of pregnancy" was identified as the principal condition. Based on these statistics, an average of approximately thirty infants dies annually after birth following an abortion procedure.

Year	Number of Deaths	Percentage of Neonatal Deaths
2010	21	9.0%
2011	20	9.5%
2012	21	10.8%
2013	22	10.6%
2014	28	13.9%
2015	32	17.2%
2016	31	16.2%
2017	35	18.0%
2018	29	17.4%
2019	48	24.6%
2020	41	20.9%
Total	328	15.28%

(Note: The preceding data was obtained from Queensland Health's "Perinatal Annual Reports" for 2020. These reports are accessible from Table 10.13 of each document and contain statistics concerning neonatal deaths associated with the condition of "Termination of pregnancy")

Legislative Discrepancies and the Need for Standardised Care Protocols for Newborns Post-Termination

Queensland legislation permits medical practitioners to conduct terminations of an unborn child at any stage of the pregnancy. However, unlike comparable statutes in South Australia and New South Wales, the *Queensland Termination of Pregnancy Act 2018*³ does not delineate protocols for cases where a child is born alive following a failed abortion procedure.

Under the South Australian *Termination of Pregnancy Act 2021*⁴, Section 7—Care of Person Born After Termination, the following provisions apply:

1. **Applicability:** This section is invoked when a termination of pregnancy results in a live birth.
2. **Duty of Care:**
 - Subsection (2) specifies that nothing in this Act prohibits the medical practitioner who conducted the termination, or any other registered health practitioner present, from fulfilling their duty to provide medically appropriate and clinically safe treatment to the newborn.
 - (a) Clinically safe,
 - (b) Appropriate to the newborn's medical condition.
3. **Equality of Care:**
 - Subsection (3) explicitly states that the duty of care owed to a person born due to termination is identical to that owed to any other live-born individual, thereby clarifying any potential ambiguity about the standard of care.

Similarly, the New South Wales *Abortion Law Reform Act 2019*⁵, under Section 11—Care of Person Born After Termination, mirrors these provisions:

4. **Scope:**
 - This section applies if a termination results in a live birth.
5. **Medical Duties:**
 - Subsection (2) maintains that no aspect of this Act inhibits a practitioner's obligation to offer care that is:
 - (a) Clinically safe,
 - (b) Suitable to the medical needs of the newborn.

³ [Termination of Pregnancy Act 2018 \(legislation.qld.gov.au\)](https://www.legislation.qld.gov.au)

⁴ [TERMINATION OF PREGNANCY ACT 2021 - SECT 7 \(austlii.edu.au\)](https://www.austlii.edu.au/au/other/dfat/special/tpa2021/tpa2021_s7.html)

⁵ [Abortion Law Reform Act 2019 No 11 - NSW Legislation](https://www.legislation.nsw.gov.au)

- Note: Section 10(3) indicates that this Act does not restrict a practitioner's duty to adhere to professional standards or guidelines. Additionally, Section 14 authorises the Secretary of the Ministry of Health to issue guidelines on performing terminations at approved health facilities, and mandates that registered health practitioners comply with these guidelines while performing or assisting in terminations.

6. Uniformity of Care:

- Subsection (3) reiterates that the level of medical care provided to a newborn from a terminated pregnancy must be equivalent to that given to any other newborn to ensure consistent and unbiased medical treatment.

The Queensland government should amend the *Termination of Pregnancy Act 2018* to align with the legislative frameworks of South Australia and New South Wales. Standardising care protocols across these jurisdictions would help to promote a nationally uniform approach to healthcare, guaranteeing that all newborns receive equivalent care and legal protections, irrespective of their birth circumstances. Such alignment not only supports ethical medical practices but also upholds the fundamental dignity of every individual.

Whistleblower Testimony Underscores Need for Post-Abortion Care Legislation

In 2023, Senators Alex Antic, Matt Canavan, and Senator Babet supported reintroducing the *Human Rights (Children Born Alive Protection) Bill 2022*, initially proposed by former Member for Dawson, George Christensen.⁶

The proposed Bill recognises:

- Hundreds of babies are born alive nationwide following abortion procedures.
- In numerous Australian states, there is no statutory requirement for doctors to provide medical assistance to children born alive following an abortion.
- These babies are entitled to the same medical treatment as any other human being.

In a formal address to the Senate⁷, Senator Alex Antic referenced a whistleblower testimony from an unidentified midwife employed at a prominent Australian hospital.

⁶https://www.alexantic.com.au/children_born_alive?fbclid=IwZXh0bgNhZW0CMTAAR2iE3IzXZlZ6NH7XsmPAhp91pECTY1zWxG9Olifxa54ATT3oCj_DLYmas_aem_Aci9EjM-bLd1bwg7lVSjZlJuxSYzdLFU7l0xorpnlfH7kxSLiHTuDBwXnDVOIGulHBRIIDMCP7qjKueF5lclO31dul

⁷<https://www.facebook.com/watch/?v=1426018397943530>

The midwife's testimony highlighted,

"The frequency of the number of babies being born alive is approximately 20%, maybe slightly less. Occasionally, the activity observed may merely be twitching, not necessarily indicative of viability. Infants born significantly premature are generally less likely to survive or sustain life for an extended period, though instances of live births do occur."

The midwife further detailed an incident wherein "Recently, a healthy and normal baby at 21 weeks and six days gestation was aborted and subsequently lived for five hours. Throughout the night, the midwives cared for the baby even while continuing their duties, as the parents' declined involvement. This account is corroborated by two midwives who were directly involved, and entries in the birth and deaths register. The prolonged survival of the infant was attributed to its considerable size, highlighting occasional inaccuracies in prenatal scans concerning foetal measurements."

This testimony serves to underscore the urgent need for legislative measures to ensure appropriate care for infants born alive after failed abortion attempts.

Recommendations

The ACL welcomes all initiatives aimed at protecting infants born alive after failed abortion attempts. In addition to supporting the *Termination of Pregnancy (Live Births) Amendment Bill 2024*, the ACL recommends:

Recommendation 1: In cases where the death of the infant is unavoidable following an abortion procedure, the baby must receive palliative care, with due attention given to pain relief and addressing the emotional needs of the dying baby.

Recommendation 2: All babies born alive following an abortion procedure and subsequently dying in the hospital are entitled to a birth certificate, death certificate, and proper burial or cremation arrangements by established protocols and legal requirements.