




Speech By  
**Brittany Lauga**

**MEMBER FOR KEPPEL**

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Record of Proceedings, 16 October 2018

**TERMINATION OF PREGNANCY BILL**

 **Mrs LAUGA** (Keppel—ALP) (4.02 pm): I rise to speak in favour of the bill and against the amendments to be moved by the member for Caloundra. Currently in Queensland women and doctors can be criminally prosecuted for unlawfully accessing or providing abortion. The Criminal Code currently makes it a crime to unlawfully terminate a woman's pregnancy. I support this bill because I want termination of pregnancy to be a health issue for women to address with their doctor, not a criminal one.

The current law in Queensland negatively impacts the accessibility and availability of termination services by causing fear and stigma for women and reluctance by some health practitioners to provide such services. This law also disproportionately impacts women who are already disadvantaged, including Aboriginal and Torres Strait Islander women, women in rural, regional and remote areas and women in low socio-economic groups. All kinds of women seek termination of pregnancy. These women include religious women, mothers, grandmothers, young women, older women, single women, women with children, married women, unemployed women, employed women and women who were against abortion before they knew they were pregnant. None of these women take this decision lightly and to suggest otherwise, as some of the outrageous emails that I have received do, is offensive and sexist.

Women make this decision as the expert in their own life, considering their situation carefully and understanding what will be the best decision for them at this point in their life. I support this bill because I believe that women should have the right to self-determination, the right to reproductive autonomy. Women with reproductive autonomy can control whether and when to become pregnant, whether and when to use contraception, which method to use, and whether and when to continue a pregnancy. Women in Queensland do not currently have reproductive autonomy. Autonomy is one of the ethical foundations of many of the moral and political rights we take for granted today. It should not be taken lightly.

Failing to permit someone to act autonomously is failing to respect something essential to their humanity. I believe that we have a duty to respect the autonomy of others and of ourselves. To take Stuart Mill's words and feminise them, 'For anything that is not anybody's business but hers, her independence is, in fact, absolute. The woman has sovereignty on herself, her body and spirit.' When we disregard or limit a woman's reproductive autonomy we undermine her ability to control one of the most intimate spheres of her life. A woman's reproductive autonomy undoubtedly has a profound impact on the course of her life, and decisions about whether or not to reproduce are among the most momentous choices that we will ever make as women. Reproductive autonomy and freedom is integral to living a good, happy and fulfilling life, whether a woman chooses to reproduce or not.

No choice has a more profound impact on a women's life than her decision whether or not to give birth. Crucial to her personal wellbeing, definitive of her social persona and predictive of her economic horizons, reproductive decisions are very personal and unsurpassably important. Bound up with

sexuality and gender identity, choices about child-bearing and motherhood are emotionally gripping and socially pivotal. Reproductive autonomy affects everything about a woman and her life—the social, mental, physical, emotional and economic spheres of a woman's life.

Depriving a woman of control over her own reproductive system—control over her own body—significantly interferes with her capacity to live her life according to her own beliefs and practices. How can anyone deny a woman the right to live her life according to her own beliefs and practices? Every woman should have the right to choose if and when she has sex, if and when she uses contraception, and if and when she has a baby.

While unplanned pregnancy and abortion are common, they are even more common for women who experience violence and control. Reproductive coercion is a form of domestic violence. Domestic violence can come in many forms and a woman's sexual and reproductive health can be affected. The relationship between domestic violence and poor reproductive health outcomes is well established. As well as other outcomes of domestic violence for women and children, it has a particular reproductive health context. The World Health Organization reports that intimate partner violence may lead to a host of negative sexual and reproductive health consequences for women, including unintended and unwanted pregnancy, abortion and unsafe abortion and pregnancy complications. There is evidence that unintended pregnancies are up to two to three times more likely to be associated with intimate partner violence than planned pregnancies. Reproductive coercion may be the one mechanism that helps to explain the known association between intimate partner violence and unintended pregnancy.

Reproductive autonomy entails demanding not only the right to choose not to procreate but also the right to respect for decisions to procreate. The sense of dignity, the importance of feeling valued and having some say and control over one's life and body are critical to an individual's feelings of being a human being like other human beings. We must give women the choice—the choice to determine what happens to our own bodies, to make decisions about what happens to us and to make decisions about our lives and our bodies. Reproductive control and bodily integrity are implicated in the formation of women's identity as being critical, quite literally, to counting as human beings—people with broader aspirations and needs rather than merely as female reproductive bodies, rather than just being a vehicle for procreation.

Reproductive autonomy is a fundamental right and women must be free to choose contraception, termination and pregnancy without coercion or pressure or threat of prosecution. It is fact that women in rural and regional Queensland, including women in my electorate, are disproportionately affected by the current laws. During the committee's consultation women located in western, regional and remote Queensland raised the issue of lack of access to termination services, including having to travel great distances or even interstate due to the current laws being within the Criminal Code.

Women in my community have told me about the lack of access to termination services and how they have had to spend thousands of dollars to travel to access services. One woman in particular told me about how she had to make the heartbreaking decision to terminate a wanted pregnancy because the foetus was diagnosed with a significant heart deformity at the morphology scan at 20 weeks. No doctors in Queensland would perform a termination, even though the foetus would not survive after birth, so she was required to travel to Canberra at significant expense to have a termination at 22 weeks.

It is stories like this, told to me by women in my community, that reinforce to me the need to have safe and accessible termination of pregnancy services available to all Queensland women. That is why I am voting in support of this bill and against the amendment circulated by the member for Caloundra.

The archaic abortion laws in Queensland need to change. This bill is not about whether you support abortion. It is not about whether we as women members of this place would or would not have an abortion. This bill is about whether we, as the parliament of Queensland, give women in Queensland the right to reproductive autonomy—whether we, as the parliament of Queensland, believe in equality and giving women the right to choose.

Members who vote against this bill are, by voting no, saying to Queensland women that the termination of pregnancy should remain a criminal issue, that if they terminate a pregnancy they will commit an act that is specified in the Queensland Criminal Code. Members who vote no are saying that if a woman is pregnant she should not be afforded the right of self-determination to make decisions about her own body—regardless of any foetal congenital conditions, regardless of her mental or physical health, regardless of whether she was raped or a victim of domestic violence. We will not have fully achieved equality in Queensland until such time as women are afforded control over their own bodies. Queensland women—and, indeed, women everywhere—deserve respect, dignity, choice and control over their bodies. I commend the bill to the House.