




Speech By
Hon. Mark Bailey

MEMBER FOR MILLER

Record of Proceedings, 17 October 2018

TERMINATION OF PREGNANCY BILL


 **Hon. MC BAILEY** (Miller—ALP) (Minister for Transport and Main Roads) (12.57 pm): I rise to speak in support of the Termination of Pregnancy Bill 2018. I start by acknowledging the very heartfelt and sincere perspectives that people have on this matter on both sides of the issue. I would like to acknowledge and thank all members for a very respectful debate. I think that it is to the credit of the parliament that it has been so.

This bill is about women. It is about trusting women to make their own health and medical decisions for themselves, because they are in the best place to make those decisions. I would like to acknowledge all the women who for many years—and many decades, many generations—have fought for their rights and the rights of other women and for their leadership on this issue, including the women in the government and across the Queensland community, including the Labor movement.

It is well known that I have been a long-time supporter of the decriminalisation of abortion in Queensland. For many years, I have been vocal on this matter. I believe that no-one in my electorate or in the wider community would be surprised to hear my stance today. Health and medical matters are an issue for a woman and her doctor to discuss. They are not a matter for the Criminal Code. In terms of fertility and pregnancy, the time is certainly long overdue in our state for women to stop being criminalised for making their own health choices in consultation with their doctor. Although it may be true that there have been few or no convictions under the current laws, it is undeniable that the current law has been used as a weapon against women—outside clinics, in hospitals, in workplaces, in lounge rooms, in discussions; in so many places—and it is time for that era to end.

The first issue of importance is access to terminations on request up to 22 weeks gestation. That has been an issue that has been well raised by many people. There are many reasons a woman may seek a termination of a pregnancy. It is not my role, nor any other person's role, nor the role of the government or the police, to judge those reasons. That medical decision should be made by a woman in consultation with her doctor or doctors. We know that a woman who has a much wanted pregnancy may be faced with the terrible decision as to whether to continue a pregnancy based on adverse medical advice about the viability of her pregnancy. The gestation limit of 22 weeks will give a woman who receives a poor or fatal foetal diagnosis at her 18- to 20-week scan the time she needs to seek further expert medical opinions and make difficult decisions without feeling rushed.

Sitting suspended from 1.00 pm to 2.00 pm.

 **Mr BAILEY:** It is vitally important, not just for women in my electorate who, as residents of Brisbane, have access to health service options, but also to women who live in regional and remote areas of Queensland who require extra time to travel to meet with doctors, make important decisions and travel to a medical facility.

This bill also reflects the reality that a very low number of terminations may occur after the 22nd week of pregnancy. South Australia is one of the only states to collect and publish data relating to terminations. In that state over 90 per cent of abortions occur in the first trimester each year with less

than two per cent occurring after 20 weeks gestation. These are wanted pregnancies that involve complex and very personal circumstances. It may be that there is a great danger to the mother or child or both or a termination may be required to save the life of another foetus in a multiple pregnancy and difficult decisions must be made. This bill seeks to reflect that reality rather than shaming and criminalising the women facing these difficult decisions. As part of this bill, after 22 weeks gestation two doctors must agree that performing an abortion is appropriate in all of the circumstances. There has been some very irresponsible and, to be frank, clear untruths being circulated regarding this bill, in particular on social media, designed to scare and to mislead people.

Another important aspect of this bill is the introduction of safe access zones. There are a number of medical facilities on the south side that offer reproductive health services and some of these have been targeted by those verbally abusing, threatening and impeding entry of the women and men who attend these clinics, as well as the medical staff who work there every single day. This bill proposes to establish safe zones around the entrances of medical facilities that provide termination of pregnancy services. This is to protect the safety, wellbeing and to respect the privacy and dignity of people accessing medical services—a basic human right—provided at termination services premises as well as people who need to access those premises in the course of their duties and responsibilities. Earlier this year we saw New South Wales become the fifth Australian jurisdiction to enact legislation that establishes safe access zones around facilities that provide termination services. I believe it is a fundamental right to access any health service without fear of harassment or intimidation.

Another important aspect of the bill is the provisions for conscientious objectors. We recognise that some practitioners may wish to exercise their right to conscientious objection to termination of pregnancy services. However, it is important to note that all women need to have certainty in access to the medical services that they require. For this reason doctors who have a conscientious objection will be required to refer their patient on to another health professional who does not have a conscientious objection. This will be particularly important for women in regional and remote communities.

It is time to move on from the 19th century—1899, in fact—when the current bills were drafted. We are a different society. We are a different community. Our medical knowledge, the quality of our health care and respect for the rights of people to live freely and make their own decisions have all advanced and expanded immeasurably in the last 119 years. I respect women who do not support abortion and their choice to lead their own lives accordingly and I acknowledge their sincerely held beliefs. However, I do not believe it is right or fair for one group's moral framework to be imposed on others by the state to override the legitimately held view that women should have the right to make their own choices with their health.

The current laws do not provide certainty or fairness for patients or for health professionals. Abortion is a personal health matter. It does not belong in the Criminal Code. It has been estimated that one in four women in Australia will terminate a pregnancy for a variety of reasons and circumstances. These are our partners, our mothers, our sisters and our friends; they are our workmates and they are our neighbours. Opportunities like this come very rarely in our state and I commend the many generations of women who have fought for the reform. We in support of this reform stand upon their shoulders. In the context of the domination of men exercising power that has prevailed for millennia across most cultures, it is the modern values of this era that have challenged the subjugation of women, challenged the denial of women and challenged the control of women. Over time we have reformed the law and I see this in that context. Those sections in the Criminal Code should be repealed.

I respect the fact that other people have different moral views on this, but my belief is that the rights of an individual start at birth. Until that point, a foetus is dependent on the mother and it is the mother's right to make her own health and medical decisions. While I have respect for the member for Caloundra and the sincerity of his views, I cannot support his amendments. I think it is a robust piece of work from the Queensland Law Reform Commission and, in fact, I find it demeaning that counselling has to be mandated. I think women and their doctors are best placed to deal with those issues. To make it compulsory for counselling to be offered, when I think it is pretty obvious that if you need it it is there, is demeaning to women.

In relation to social circumstances, there are myriad issues for women to deal with in terms of pregnancy. It is not our role in a blanket way to make those decisions for women. In terms of referrals, women must have access to health services wherever they may be. It is not appropriate for women to have the threat over their heads of the Criminal Code. I am hopeful that this bill will pass and those sections will be repealed. I acknowledge all those who have fought for this reform: people I have worked with closely and members of the Labor movement. I acknowledge all of the women over many generations who have been an important part of this reform process, especially Alana and Jess Tibbitts in recent times. Abortion is not an issue for the Criminal Code; it is an issue for women. I trust women. I hope this parliament trusts women. If it does it will be an historic day.

