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Australian Doctors concerned with the drift  
of ethics away from moral absolutes

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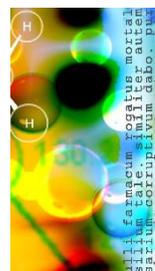
*The Hon Shayne Mallard MLC  
Chair of Committee*

Reproductive Health Care Reform Bill 2019

Submission by the Doctors of

*Medicine with Morality*

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**The Hon Shayne Mallard MLC**  
**Chair of Committee**

## Reproductive Health Care Reform Bill 2019

In seeking to reform the law relating to terminations of pregnancies and to abolish the common law offences relating to abortion as outlined in Purposes(a) the proposed Act is **flawed in its entirety** by what it is called, by what it allows and by what it compels.

### By what it is called. Part 1,1 Name of Act

It is flawed from the beginning when it refers to A Bill for

An Act about reforming the law relating to terminations of pregnancies and regulating the conduct of health practitioners in relation to terminations.

The terms *terminations of pregnancies* and *terminations* used above and throughout the document are used synonymously and imply deliberate destruction of the baby i.e. *abortion*. **But pregnancy may be “terminated” by induction of labour with delivery of a live child.** Of course, child destruction may also be intended. In actuality, at a time of viability, child destruction – if that is intended – is usually a separate procedure to termination of the pregnancy by induction of labour and recognised as such.

This is more than semantics. To speak clarity and truth and to avoid confusion in debate for MPs and the public, the term abortion should be used throughout.

The Bill would then become

An Act about reforming the law relating to abortions and regulating the conduct of health practitioners in relation to abortions.

### The Bill allows

- Unlimited abortion for any reason at any stage of pregnancy up until birth.
- By taking out any legislative disapproval/penalty for abortion it gives implied permission and approval for abortion to be considered a routine part of Reproductive Health Care – including in early pregnancy when it might be seen as an extension of contraception.
- No consideration is given to pain consciousness for the baby, so tacitly this proposed legislation gives approval for the tearing apart of a pain conscious baby and even allows the gruesome procedure of partial birth abortion.
- The amended section on Gender Selection 12(1) states “this House *opposes* terminations being performed for the purpose of gender selection”. This is meaningless unless such is *prohibited*.
- Eugenic selection for other reasons does not rate a mention and is therefore “allowed”.
- It allows destruction of an unborn baby that is capable of life outside the uterus.

## The Bill compels

- Participation by an attending doctor who does not wish to, or cannot, do an abortion to provide a referral to a doctor who can or will.

## Preamble to further discussion

The doctors of *Medicine With Morality* acknowledge the complexity and agony that women face in unwanted pregnancy. We pledge our support to women with unwanted pregnancy and to those who may be distressed because of previous abortion.

But we need to state that abortion is the killing of a human life – consistent with our stand on the intrinsic value of all human life from the time of fertilisation as expressed in the *Manifesto of Human Life* as per our website. Though not yet expressed, individuality is inherent and real in the genetic programming from the time of fertilisation.

Our stand is consistent with the [Preamble to the UN Declaration of the Rights of the Child \(1959\)](#) to which Australia is a signatory (1990) and which states:

Whereas the child, by reason of his physical and mental immaturity, needs special safeguards and care, including appropriate legal protection, before as well as after birth...

The present situation where so many abortions are performed in Australia in the name of “family planning” or “reproductive health care” we regard as being totally unacceptable and we oppose legislation that will facilitate this further.

This bill would give “state approval” for abortion to people who would otherwise not consider this as an option. There would be no moral reason sanctioned by law to help a pregnant female to resist pressure from significant others to “just go and have it done –it’s legal and it’s OK”. It effectively results in viewing abortion as simply another contraceptive option.

But it is not just the life of the unborn that is devalued – with all its implications – it is the life of the pregnant woman as well. Consequences are both psychological and physical and although hotly denied by those promoting “consequence free” abortion on demand there is a need to fully discuss such matters as an essential part of the good medical practice of informed consent. *First, do no harm* applies to the pregnant woman as well as the unborn.

## Re: Pain Consciousness in the baby

Nerve pathways are laid down in early pregnancy and evidence weighs in favour of pain consciousness from about 15 weeks. It is alleged by some that the brain is not necessarily receptive of noxious stimuli and that therefore the baby is not necessarily in pain when he/she reacts to painful stimuli.

But, dear Member of Parliament, what if the baby really does feel the pain as it is pulled apart by sharp forceps? How can it be that you would approve of such a barbaric procedure in any other member of the animal kingdom?

Surgeons operating on the unborn make sure the child is covered by anaesthesia.

The ghastly possibility that thousands of babies every year are in extreme agony as they are shredded seems too much to bear and so it is “successfully” denied. Future generations may look back in wonder and horror that such monstrous cruelty could ever have been permitted by legislation.

The bill should be thrown out.

### **Re: killing the unborn up to birth**

Almost infanticide but without anaesthesia. In promoting “after-birth abortion” – which is infanticide by another clever name – it has been argued that this is more humane than late-term abortion as it has the advantage of an accurate diagnosis and anaesthetisation for the baby while it is killed.

Dear MP, which will you support? Surely infanticide with anaesthesia is preferred over what you are currently going to allow if you support this bill.

The bill should be thrown out.

### **Re: eugenic selection on basis of gender**

We consider gender selection abortion on the basis of gender alone to be a crime against humanity and should be regarded as such by the laws of all countries.

It is a crime against the child whose life is terminated.

It is a crime against the next generation, upsetting the natural sex balance in our world with all its societal consequences.

It is discrimination on the basis of sex, with death of the child as the result.

Gender selection abortion is also a matter of justice for women. Women of various cultural backgrounds can be under pressure to only have a child of a particular sex and be subject to physical or mental abuse if she does not agree to abort in the circumstance of the child being of the wrong sex – most commonly female.

The bill should be thrown out.

### **Re: eugenic selection for other reasons**

We are aware that the unborn child can and is sometimes aborted for remediable defects even when there is the option of adoption by would-be-parents. But it seems that the offer of “termination” to a parent or parents almost automatically assumes “terminating” the life of the baby as well. For the child capable of life outside the womb we see this as a tragedy, yet such is facilitated by the proposed legislation.

This leads to another question of huge significance for our society – *which lives should be terminated?* And what does our answer say about our view of the disabled in our world? What does it mean to have a world free of imperfection whatever that might mean to a particular generation or government? What implications does this have re cost to the community and distribution of scarce funds? Already parents refusing to kill a baby with an alleged “abnormality” are being labelled as “genetic outlaws” for bringing this “financial impost on the community”. We are practicing eugenic purification without calling it that. This also raises the problem of incorrect intra-uterine diagnosis and prognosis of disability.

Most doctors have had instances where abortion has been offered because of “abnormality incompatible with life” and yet where it is decided to carry the baby to term and it is then found the baby is normal or a

procedure may be necessary. At worst the baby may be born dead or have a few hours to live in which case the parent/s may opt to cuddle the baby until the last breath is taken (Perinatal Hospice).

The bill should be thrown out.

**Re: compelling participation by the doctor**

In treating the pregnant mother the doctor has 2 patients, one voluntary, the other not. Therefore, we must care for that unborn human life as much as any other dependent and vulnerable human person.

But, if this bill is passed, doctors will be required by law to take part in the referral process for abortion, even if they object strongly on ethical or medical grounds.

Fundamental to the practice of medicine is the right to liberty of conscience, the liberty to not be involved or complicit in matters considered to be unethical or inadvisable. This liberty is critical for individual doctors and for the integrity and independence of the medical profession as a whole.

The push by the pro-abortion lobby for individual autonomy and “choice” leads to the exclusion of autonomy and choice by doctors in accord with their conscience.

Once again, the bill should be thrown out.

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Signatories follow.