

16 December 2022

Re: Abortion Legislation – Proposal for reform in Western Australia
abortionlaws@health.wa.gov.au

[Medicine With Morality](#) was formed in early 2006 to unite doctors across Australia in response to an increasing drift of medical ethics away from moral absolutes.

Vision: To preserve, in an age of rapid scientific and technological change, traditional medical ethics consistent with absolute values and to preserve the liberty of medical professionals holding these values to practise medicine according to their conscience.

We do this by way of [letters and submissions](#) to Members of Parliament and parliamentary committees considering legislation impacting on these ethical standards.

With respect to the proposed reforms to abortion legislation in WA we have three main areas of concern: the pregnant mother, the baby in-utero, and the attending doctor.

The pregnant mother.

Our primary concerns are for the mother's immediate psychological/emotional state in relation to having had her baby aborted. Common associated factors may be an expectation or apparent "no-choice" or "coercion" by others. Distress in the future can occur when other factors reinforce it being a "bad-choice" e.g. subsequent inability to have children or problems with pre-term onset of labour and the multiple problems for the premature baby. I speak with 20 years of obstetrics in my 55 years of general practice.

While primarily the above is part of good obstetric medicine the relevance of this to the proposed legislation is in respect of ensuring a fully informed consent free of coercion and fully informed of possible future consequences impinging on health of the mother. Therefore we would see any lessening of mandatory counselling as being an unwise move.

The baby in-utero.

Consistent with the [Manifesto](#)

"We affirm that human life has intrinsic value at every stage of life and dependency from its beginning to its natural end and must be protected against experimentation or exploitation" we affirm that the unborn baby is unequivocally human and has intrinsic value from fertilisation.

In this day we believe that every pregnant woman knows this as a fact and while she may try to deny this because of present circumstances, nevertheless this fact will subsequently impact on her emotionally with

regret or severe depression and also in her relationships with others particularly if that relationship is lost e.g. and bizarrely with the “father” of the baby who was the “coercer” of the abortion.

While once again we believe the above to be part of good obstetric medicine we believe that where destruction of life is concerned the law should be involved particularly

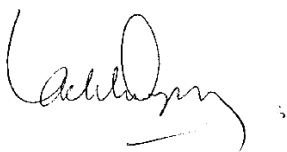
- When it is evident that force or coercion is a part of the decision making
- When gender-selection abortion is performed for babies of the “wrong sex” (for that reason alone, not because of sex-linked abnormalities incompatible with life) remembering that adoption not only preserves the life of the baby as well as meeting the wishes of many would-be parents on a waiting list
- When abortion is performed for other abnormalities for which there are also waiting lists of adoptive parents e.g. Down Syndrome babies. We view with sadness the killing of some 90% of these babies of varying ability to have a place in society, many at high levels when given the opportunity [I have one more chromosome than you. So what?](#)
- When babies at a time of viability have been subject to an abortion procedure and “accidentally” born alive, some having been put on one side and left to die. These may have been aborted due to abnormalities incompatible with life but at the very least they should be cared for on perinatal hospice principles while others should be cared for in a special nursery

Another area of concern to be “flagged” for the future legally – yes, legally – is the issue of providing anaesthesia for about-to-be-aborted babies post first trimester when there is considerable evidence that such babies experience pain and it is finally recognised and accepted by society and by governments around the world that the travesty of pulling baby’s arms and legs off without anaesthesia is an evil not to be tolerated.

The attending doctor.

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 opportunity and the liberty to counsel mothers-to-be re options – including adoption – and to discuss a longer-term future is an essential part of wholistic care. Such doctors do not “tell” their patients what to do and such counselling must never be prohibited by law or discounted to patients.



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For further thought see <http://www.medicinewithmorality.info/letters-and-submissions/>

 Aug2019 [Reproductive Health Care Reform Bill 2019 NSW](#) Particularly with respect to

- Pain consciousness in the baby
- Eugenic selection on basis of gender and other reasons
- Compelling participation by the doctor

 Apr 2013 [Medicare Funding for Certain Types of Abortion Bill 2013](#) re Gender Selection Abortion

These excerpts are listed below for ease of reference.

 Aug2019 [Reproductive Health Care Reform Bill 2019 NSW](#) Particularly with respect to

- 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.
- Eugenic selection on basis of gender and other reasons
 - 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.
- 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.

 Apr 2013 [Medicare Funding for Certain Types of Abortion Bill 2013](#)

re Gender Selection Abortion

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

Gender selection abortion is a crime against the child whose life is terminated, the child who is sacrificed because of the choice of a parent.

Gender selection abortion is a crime against the next generation, upsetting the natural sex balance in our world with all its societal consequences – and it seems likely on succeeding generations also.

Gender selection abortion is discrimination on the basis of sex, with death of the child as the result. Globally, this particularly means lethal discrimination against babies of female sex.

On the basis of these arguments gender selection abortion should be regarded as criminal, at the very least illegal on the grounds of discrimination law, and the law of the land should reflect this.

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.

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