

To the Review Committee considering the Abortion-to-Birth Bill,

Thank you for taking the time to read my submission.

I am very concerned about the content of this bill and believe that the unborn babies of New South Wales no longer have a voice to defend them. Politicians should seek to protect its most vulnerable citizens.

This bill would allow parents to kill their child if the child was not the gender they wanted. If a mother gave birth to a child and killed it under normal circumstances it would be deemed as murder. How sad that our society has deteriorated so far that the sanctity of life is no longer treasured.

A child in the womb is still a child. He or she breathes, feels pain, moves and is completely reliant on his or her parents to be cared for. Babies in the womb have a right to life.

A baby who survives an abortion should be given neonatal care. Surely that is considered murder by the medical staff in attendance. Nurses who are committed to the preservation of life would be compelled by law to assist in the taking of life.

There are many doctors who hold the conviction that abortion is not right. This bill will force doctors to refer ladies who would seek an abortion to a doctor who would perform the abortion. This is wrong!

It is sad to think that women have come to the belief of 'My body, my choice'. Where is the voice of the unborn baby? Women should be provided with counselling and informed as to what is done to an unborn baby to cause an abortion. Woman may think it's just like their baby went to sleep and did not wake up. This is far from the truth. Abortions are barbaric. Counsel and support should be given to pregnant mothers to allow the baby to be delivered at full term and educate them on a life option for their unwanted baby.

Please don't be hasty in signing off on this bill. Please take the time to listen to the many people in NSW who value the lives of unborn children in our state.

At my granddaughter's 3rd birthday party today I asked the adult guests if they would be happy to sign a petition opposing this abortion bill. They were keen to sign. Sadly, some were not aware of the destructive intent contained within the bill. All were very disappointed that our premier voted in favour of the bill.

Once again thank you for considering my submission.

Dear Committee on Social Issues,

I am currently working with very vulnerable women/children/families/adolescents who are, and will be directly impacted by this bill. As a Youth Worker who supports young women after sexual assault and with mental health issues/ongoing trauma I view this bill as poorly drafted and dangerous.

While I support reform in this area, this legislation has been rushed through without sufficient time for community engagement and refinement, and as a result is very poorly drafted.

1. It directly contravenes current practice in health services and community services that uphold Child Protection Laws. At present, we rightly prioritise the safety and protection of children (even unborn children) above and beyond the parent, because they are more vulnerable, and require greater protection and support. See the National Framework for Protecting Australia's Children 2009-2020 "Protecting Children is Everyone's Business".

2. I know of many women pressured to have abortions by family members, and even doctors. There is insufficient protection for them, both in this legislation, and in current service provision. Having "more choice" does not always equal more choice in practice. Where are protections for women against abortion coercion in NSW's Reproductive Health Care Reform Bill 2019?

3. The requirement for 2 doctors' approval is poorly drafted for the following reasons: - No requirement that they be independent from each other - Does not prohibit either or both from profiting financially from abortion - No guidance as to how "all the circumstances" should weigh on the decision to abort, making doctors the moral arbiters which is neither their job nor training.

4. There are no provisions to ensure that babies born alive following a failed abortion receive neonatal care.

There are other practical problems but to keep this short: the bill needs to be redrafted. It is irresponsible to allow it to pass in its current form.

I do not think women should be criminally liable for abortions. They are often in difficult situations and this would only add to their hardship. But the morality of taking life warrants very strict conditions and guidelines around it.

Thank you for considering and I hope you will refer the bill for re-drafting.



13/8/2019

**Re.: Reproductive Health Care Reform Bill 2019**

To the Committee on Social Issues

I urge members of the Upper House to amend this bill to address the following problems.

1. The bill allows for abortion up until birth. This means that minutes before a baby is born it has no rights and then upon birth it has all the rights of a human being. Upon what do we base this license to kill a human being in this context? It is the arbitrary killing of innocent human life.
2. The bill does nothing to outlaw abortion on the grounds of unwanted sex of the child. This means that a baby can be killed simply because the parents wanted a son rather than a daughter, or vice versa.
3. There is no requirement for doctors to save the life of a baby that survives the abortion procedure. In other words, we are quite happy to allow a human being outside of the womb to die when, in fact, it could be saved. How is this health care? This is sheer barbarism.
4. The bill make no provision for doctors to conscientiously object to facilitating referring patients for abortions. This will be to the loss of all Australians, as many people wish to become doctors because they wish to save lives, not to facilitate the killing of humans. If doctors are forced to facilitate the abortion process then it is reasonable to believe that many very good-hearted and skilled people will not enter the profession, and the profession will be left only with people who have no conscientious problem taking human life, or letting viable humans die. Do we want such people to make up the medical profession?

This also violates freedom of conscience among doctors. Abortion is still morally controversial. The fact is that there are many people who morally and religiously object to the killing of innocent human life. Should this be so surprising? It should therefore not surprise us that there will be many people in the medical profession who would conscientiously object to having anything to do with facilitating an abortion. Such people should be permitted to abstain from this. There is simply no good reason for disallowing freedom of conscience on this issue.

Thank you for your time.

I am shocked that you are rushing this abortion bill through parliament. If you had given us notice before the election I would not have voted Liberal.

If you pass the bill as expected I will not vote Liberal at the next election

## **Summary**

Women need to be able to give an informed consent

- Women need to be informed of other services available to assist them
- Causes of termination need to be addressed, this requires collection of data

Medical Practitioners have the right to conscientious objection

- Non-mandatory referral

The life of a foetus has some value

- Pain relief during abortion procedures, especially post 15 weeks
- Protection for foetuses born alive

Just in case you need contact details,

To the Hon Shayne Mallard MLC, Chair of the Social Issues Committee

Dear Sir,

Please add my name to hopefully a growing list of people who are submitting to you with regards the Reproductive Health Care Reform Bill 2019.

Without going into great detail, I would like to submit that it is my sincere belief that life starts at conception, and that abortion is killing babies, not about protecting mothers' rights.

Please do not allow this unjust bill be passed.

To the Committee on Social Issues,

I write as a resident of New South Wales to share my support for the passage of the Reproductive Health Care Reform Bill.

I know that a woman may need to end a pregnancy for a range of deeply personal reasons. I support a compassionate healthcare system that allows her to access the healthcare she needs as soon as possible, and close to home.

I'm concerned that the current laws create barriers to people accessing the reproductive healthcare they need and that they have a chilling effect on health professionals' willingness to provide the care that patients need.

I'm also aware that the current system particularly hurts people who are already vulnerable or struggle with access to healthcare, including women in rural communities who have to travel hours to access care.

Reform is urgently needed, which is why I support the Reproductive Health Care Reform Bill.

With regard to particular provisions in the bill, I note:

1. Relating to abortion care access later in pregnancy - I recognise that the decision to end a pregnancy is a profoundly personal one, and that it can arise out of a complex set of circumstances. I believe that the person who is pregnant is best placed to make the decision that is best for them and their family, and that the law should allow them to do so.

I'm aware that screening for fetal health is generally recommended to take place at 18-20 weeks in pregnancy; and I believe it is important that someone who receives an unexpected or negative diagnosis after this test has time to access relevant information, so they don't feel rushed to make a decision.

I also know that there are a number of reasons that a pregnant person might need to access abortion care later in pregnancy – including a devastating fetal diagnosis, health risks, traumatic change in circumstances, and the violence of an abusive partner. Given that, I strongly support laws that provide for compassionate healthcare access, including later in pregnancy.

2. Relating to “conscientious objection” provisions – I strongly support a patient's right to access unbiased advice relating to abortion care, and support the passage of provisions that will ensure this.

3. Relating to amendments that were passed by the Legislative Assembly – I understand that expert groups like the Human Rights Law Centre, Australian Medical Association, and the NSW Pro-Choice Alliance have expressed concerns about some of those amendments, and the impact they could have on timely access to care. I urge you to address those concerns.

Finally, I note that the current laws have caused distress and difficulty to access for far too long. It's time for reform. I want to add my voice to that of the vast majority of the community who want to see abortion removed from criminal laws.

Thank you for considering my submission, and noting my support for passage of the Reproductive Health Care Reform Bill.





Dear Sir/ Madam,

I am opposed to the above bill.

I urge your committee to recommend that the bill be rejected by the Legislative Council of New South Wales, for the following reasons:

1. The bill is unnecessary. The current situation in New South Wales allows for abortion in wide circumstances early in the pregnancy.
2. Abortion destroys a small, developing baby. There is something universally wrong with abortion, at least in most cases. Abortion is wrong as a matter of common sense, it is not dependent on religious belief.
3. In my experience as a doctor, I have come across a number of women who have experienced abortion. The majority of these women had been pressured into abortion by their male partner. Several others had abortions after their male partner abandoned them early in the pregnancy.
4. Most women who undergo abortion do so because they are driven by desperate circumstances, not because it is something which they want.
5. On a practical level, abortion leaves women with long term grief and guilt. Numerous studies have shown abortion is associated with higher rates of depression, alcohol abuse, drug abuse and suicidal behaviour compared to women who carry (initially unwanted) pregnancies to term.
6. The bill contains provisions which give the impression that some restrictions exist beyond 22 weeks. In reality, these "restrictions" are meaningless and the bill effectively allows abortion right up until birth.
7. The bill is unjust and inhumane. It is also extreme. There is great community outrage, even disbelief, that the New South Wales parliament is considering allowing unlimited abortion up until birth and yet that is precisely what this bill will allow.

Once again, I urge your committee to recommend that the bill be rejected.

13 August 2019

To Reverend The Hon. Fred Nile, MLC,

Re: Reproductive Health Care Reform Bill 2019

I would like to bring to your attention, and to the attention of the Legislative Council, my strong opposition to Reproductive Health Care Reform Bill 2019. I support you as you seriously consider the significant negative impact this Bill will have on the residents of New South Wales; both present, and future generations; if this Bill is passed. I encourage the Legislative Council, to also seriously consider the significant negative impact this Bill will have on the residents of New South Wales; both present, and future generations; if this Bill is passed. I support you as you vote against this extreme Bill. I respectfully encourage the Legislative Council, to also vote against this extreme Bill.

I am deeply concerned that the Bill proposes "intentional termination of a pregnancy in any way, including, for example, by administering a drug, or using an instrument or other thing", at any time during a pregnancy, for any or no reason, including for gender selection.

I am also deeply concerned that the Legislative Council, are unaware of the stages of development of a person in the womb, and the brutal realities of an abortion procedure. As you know, a beating heart and a functioning brain medically indicates that a person is alive. 6 weeks after conception, a person has both a beating heart and a functioning brain, which medically indicates that the person is alive. 8 weeks after conception, all of a persons' organs and systems are in place in their body. People have been born at 21 weeks, and survived and thrived. Abortion stops a persons' beating heart. Abortion stops a persons' functioning brain. A heart that is not beating and a brain that is not functioning, medically indicates that a person has died. Abortion results in the death of a person. When abortion is decided, a decision is not made about the mothers' body and the mothers' life - A decision is made about another persons' body and another persons' life - A decision that results in the destruction of another persons' body, and the taking of another persons' life. Therefore, I respectfully encourage the Legislative Council, to educate themselves about abortion procedures at different stages throughout a pregnancy, in order to make informed decisions regarding this Bill. I would like to take this opportunity to assure you of my support, and to remind the Legislative Council, that all abortion procedures involve the taking of life.

I am deeply distressed and disturbed that Part 2 Section 5 Subsection (1) and (2) of Reproductive Health Care Reform Bill 2019, if passed, would allow an unborn baby, younger than 22 weeks, to

be killed at any time during the first 22 weeks of pregnancy, for any or no reason, including for gender selection; in any location; without considering all circumstances; without consultation; without considering "all relevant medical circumstances"; without considering the mothers' "current and future physical, psychological and social circumstances"; and without considering "professional standards and guidelines". As babies have been born at 21 weeks, and survived and thrived, I propose that all babies be given every opportunity to survive and thrive, at all stages of pregnancy.

I am equally distressed and disturbed that Part 2 Section 5 Subsection (3) of Reproductive Health Care Reform Bill 2019, if passed, would allow, "in an emergency" an unborn baby, younger than 22 weeks, to be killed, without consent. I propose that, "in an emergency", both mothers and babies be given every opportunity to survive and thrive.

I am also deeply distressed and disturbed that Part 2 Section 6 of Reproductive Health Care Reform Bill 2019, if passed, would allow an unborn baby, older than 22 weeks, to be killed at any time after the first 22 weeks of pregnancy, for any or no reason, including for gender selection, when the baby could be born, and would survive and thrive. Again, I propose that all babies be given every opportunity to survive and thrive, at all stages of pregnancy.

I am equally distressed and disturbed that Part 2 Section 6 Subsection (4) of Reproductive Health Care Reform Bill 2019, if passed, would allow, "In an emergency" an unborn baby, older than 22 weeks, to be killed, in any location; without considering all circumstances; without consultation; without consent; without considering "all relevant medical circumstances"; without considering the mothers' "current and future physical, psychological and social circumstances"; and without considering "professional standards and guidelines"; when the baby could be born, and would survive and thrive. Again, I propose that, "in an emergency", both mothers and babies be given every opportunity to survive and thrive.

Part 2 Section 7 of Reproductive Health Care Reform Bill 2019, is unclear regarding exactly how the Medical Practitioner assesses if counselling would or wouldn't be beneficial - The only way to know for certain is to ask and offer. Therefore, I propose that every mother considering aborting her baby or babies be asked and offered counselling.

Part 2 Section 8 of Reproductive Health Care Reform Bill 2019, fails to acknowledge the Health Practitioners' right to conscientiously object to assist in an abortion. Therefore, I propose that there be safeguards to protect every Health Practitioners' right to conscientiously object to assist in an abortion.

Part 2 Section 9 Subsection (1) (a) (i) of Reproductive Health Care Reform Bill 2019, proposes that "a person" can ask "a registered health practitioner to perform a termination on another person". This is dangerous, and, if passed, will allow vulnerable women to be coerced into

having an abortion against her will. Therefore, I propose that there be safeguards to protect every pregnant mother from being coerced into having an abortion against her will.

Part 2 Section 9 Subsection (3) of Reproductive Health Care Reform Bill 2019, violates the Medical Practitioners' right to conscientiously object to participate as an accessory to abortion. Part 2 Section 9 Subsection (4) of Reproductive Health Care Reform Bill 2019, violates the Medical Practitioners' right to conscientiously object to performing abortions "in an emergency". Part 2 Section 10 Subsection (1) (c) of Reproductive Health Care Reform Bill 2019 violates both the Medical Practitioners' right to conscientiously object to participate as an accessory to abortion, and the Medical Practitioners' right to conscientiously object to performing abortions "in an emergency". Part 2 Section 9 Subsection (3) and (4); and Part 2 Section 10 Subsection (1) (c); of Reproductive Health Care Reform Bill 2019, fails to acknowledge and respect the Morals and Beliefs; Religious, or otherwise; of the Medical Practitioner, proposing to remove the Medical Practitioners' freedom and right to exercise these Morals and Beliefs. Part 2 Section 9 Subsection (3) and (4); and Part 2 Section 10 Subsection (1) (c); of Reproductive Health Care Reform Bill 2019, also fails to consider the consequences faced by Medical Practitioners who's Religion prohibits any participation in abortion, including as an accessory to abortion, and including performing abortions "in an emergency". Therefore, I propose that all Medical Practitioners be allowed to conscientiously object to participate in abortions, including as an accessory to abortion, and including performing abortions "in an emergency".

As you know, women have experienced life-threatening health conditions whilst pregnant, and successfully given birth to their babies prematurely via induced labor or Cesarean Section, in order to receive life-saving medical treatment, resulting in both the mother and baby/babies surviving and thriving. Babies born with disabilities, abnormalities, or life-limiting illness, have gone on to live fulfilling and successful lives, actively contributing to their local communities, and to society as a whole. Babies born with life-threatening illnesses have received successful medical treatment, and survived and thrived. Therefore, I propose that both mothers and babies be given every opportunity to survive and thrive, at all stages of pregnancy.

I would like to bring to your attention, and to the attention of the Legislative Council, that Part 4 Section 15 Subsection (1) of Reproductive Health Care Reform Bill 2019 states that the Legislative Assembly "opposes" the killing of unborn babies "for the sole purpose of gender selection". I support you as you oppose the killing of unborn babies for the sole purpose of gender selection. I respectfully encourage the Legislative Council, to also oppose the killing of unborn babies for the sole purpose of gender selection.

Schedule 2 Section 2.1 Subsection [4] of Reproductive Health Care Reform Bill 2019 is dangerous and should be removed, as it proposes to abolish "Any rule of common law that creates an offence in relation to procuring a person's miscarriage". I would like to bring to your attention, and to the attention of the Legislative Council, that this would abolish all safeguards for vulnerable pregnant women, including Schedule 2 Section 2.1 Subsection [2] of Reproductive Health Care Reform Bill 2019, which proposes that it be an offence for "an unqualified person"

to perform "a termination on another person." Therefore, I propose that Schedule 2 Section 2.1 Subsection [4] of Reproductive Health Care Reform Bill 2019 be removed in order to safeguard vulnerable pregnant women at risk of Domestic Violence and forced miscarriage.

Thankyou for opposing this extreme Bill. I appeal to the Legislative Council to also oppose this extreme Bill.

To the Committee on Social Issues,

I write as a resident of New South Wales to share my support for the passage of the Reproductive Health Care Reform Bill.

I know that a woman may need to end a pregnancy for a range of deeply personal reasons. I support a compassionate healthcare system that allows her to access the healthcare she needs as soon as possible, and close to home.

I'm concerned that the current laws create barriers to people accessing the reproductive healthcare they need and that they have a chilling effect on health professionals' willingness to provide the care that patients need.

I'm also aware that the current system particularly hurts people who are already vulnerable or struggle with access to healthcare, including women in rural communities who have to travel hours to access care.

Reform is urgently needed, which is why I support the Reproductive Health Care Reform Bill.

With regard to particular provisions in the bill, I note:

1. Relating to abortion care access later in pregnancy - I recognise that the decision to end a pregnancy is a profoundly personal one, and that it can arise out of a complex set of circumstances. I believe that the person who is pregnant is best placed to make the decision that is best for them and their family, and that the law should allow them to do so.

I'm aware that screening for fetal health is generally recommended to take place at 18-20 weeks in pregnancy; and I believe it is important that someone who receives an unexpected or negative diagnosis after this test has time to access relevant information, so they don't feel rushed to make a decision.

I also know that there are a number of reasons that a pregnant person might need to access abortion care later in pregnancy – including a devastating fetal diagnosis, health risks, traumatic change in circumstances, and the violence of an abusive partner. Given that, I strongly support laws that provide for compassionate healthcare access, including later in pregnancy.

2. Relating to “conscientious objection” provisions – I strongly support a patient’s right to access unbiased advice relating to abortion care, and support the passage of provisions that will ensure this.

3. Relating to amendments that were passed by the Legislative Assembly – I understand that expert groups like the Human Rights Law Centre, Australian Medical Association, and the NSW Pro-Choice Alliance have expressed concerns about some of those amendments, and the impact they could have on timely access to care. I urge you to address those concerns.

Finally, I note that the current laws have caused distress and difficulty to access for far too long. It’s time for reform. I want to add my voice to that of the vast majority of the community who want to see abortion removed from criminal laws.

Thank you for considering my submission, and noting my support for passage of the Reproductive Health Care Reform Bill.



To the Committee on Social Issues

Please stop this abhorrent and violent bill towards unborn children. The true end game of the pro-abortion movement is not about compassion for rape or incest victims but the right to kill inconvenient humans, for any reason - or no reason - and backed by the full power of the state.

It's no surprise that countries and states where abortion is already a settled right are supportive of euthanasia - if you've already managed to rid yourselves of one group of inconvenient humans, why wouldn't you start looking for others?

Let's end all the lies and euphemisms and be honest. Killing out of convenience is a lucrative industry.

Rape and incest makes up for less than 1% of abortion cases but at least 99% of pro choice arguments. Can you imagine living in a world where a "rapist's baby" has no right to life because of someone else's violent actions?

Treating an ectopic pregnancy is NOT an abortion. The child cannot survive to term in a tubal pregnancy while the mother can die if not treated, so we're not even talking about that.

Abortion is never medically necessary to save the life of the mother. It never has been and it never will be. This has been stated repeatedly by OBGYN's all around the world. If the mother is in danger, the baby gets delivered and it can survive from 22 weeks.

Why are we advocating for elective on-demand unrestricted abortion for any reason and at any stage? Such as gender, disability, race, socio-economic conditions, convenience etc. Did you know that African-American babies are the most vulnerable in the United States because abortion is seen as a social cleansing method? And that 100% of Down Syndrome babies are aborted in Iceland due to eugenics?

Everyone likes to use the exception rather than the rule to justify abortion and it's mostly because they don't realise what it actually is and how many babies have been killed under the guise of "reproductive healthcare."

As early as 8 weeks when a heartbeat is detected, a developing baby will be flushed out using chemicals. Sometimes they are burnt to death with a fatal injection. All the way up until birth, a baby will be dismembered to death in the womb - each limb ripped out using forceps one by one. The skull will be crushed and when the procedure is done, the abortionist will piece the

body together to ensure she/he got everything out before selling it off to a company that procures baby parts.

Even in partial-birth, an abortionist will stick a large needle in the head during delivery and suck it's brains out until it dies. This is happening in New York, Nevada and Illinois because a partially birthed baby isn't considered a human being and therefore doesn't have the same human rights to life as you and I.

We can keep deflecting from the main issue and use rhetoric that makes us feel better about killing innocent babies or, we can choose to accept that it is wrong to intentionally kill an innocent human life, that abortion intentionally ends an innocent human life and therefore, abortion is wrong.

I'm also concerned for the doctors and nurses who perform these murders. Are we also considering them? The babies they will see, how will they process seeing dead babies? How will they grieve? Will they have constant bad dreams? We could be sending these professionals down a path where they also need continual help/counseling.

Thank you for reading our urgent request. Please stand up for the voiceless future children of NSW.

“Any country that accepts abortion is not teaching its people to love, but to use violence to get what they want. That is why the greatest destroyer of love and peace is abortion.”

-Mother Teresa, Nobel Peace Prize, 1979.

To the Committee on Social Issues

I am writing to you to express my absolute disgust and disagreement on the Reproductive Health Care Reform Bill 2019.

I am incredibly disappointed by the way the voting of this bill was handled and voted in without public knowledge of its intent and purpose.

I whole heartedly oppose the discriminatory legalisation of sex selection abortion. I whole heartedly oppose zero protection for women who are coerced into having an abortion due to abusive circumstance. I also oppose

the members who voted against providing life-saving treatment to babies born alive after an abortion.

This is NOT progress. This bill is incredibly out of touch with the country of Australia and an inhumane step back for women in society.

I have volunteered a number of years of my time to a pregnancy and parenting supportive organisation. I have seen the devastating aftermath abortion has had on women. It increases mental health issues, depression and suicidal tendencies by more than 70% in women who already have mental health issues.

It is anything but a quick fix solution.

This bill is dangerous to women mentally, emotionally and physically, and it is blatantly irresponsible in its coldhearted means to destroy lives and it has no consideration on the consequences for the future.

I expected much more from the Australian government and its members.

I am thoroughly disappointed and disgusted in every person who brought this bill to attention and gave it the support it never deserved.

I expect this bill to be reconsidered or I fear public outcry will absolutely follow.



Good Morning,

I am writing concerning the Reproductive Health Care Reform Bill 2019.

I would like to make my concerns known in relation to the Bill. I have serious concerns with some of the matters in this Bill. The first concern I have is due to the 'gender selection' issues. I believe that it is disgraceful that this Bill allows people to abort their children simply based on them not being the 'correct' gender.

I also have concerns that this Bill will allow babies who are born alive as a result of an unsuccessful abortion to be left on their own to die. This could take minutes or hours. This is completely against any human rights. This is evil and cruel. Imagine the horror, the pain that these children will go through as a result of this Bill.

I thank you for considering my view,

To the Committee on Social Issues,

I am making a submission to the Committee as a mother of four and a concerned citizen on what this bill proposes for our state. My opposition to this bill are for the following reasons.

1. The Reform Bill 2019 goes above and beyond just asking for abortions to be decriminalised. The fact is abortions already occur in NSW. While I do not agree with abortion at any stage, the fact is, it already occurs. I know of women who have had abortions and who are not and would never be pursued for criminal actions.

The law already allowed them to terminate their pregnancy on the grounds that to continue the pregnancy placed them at physical or mental risk.

I ask you to consider, does the current provision in the Crimes Act require reform when the statistics show -

**Fact:** Only 12 people have been prosecuted for abortion related offences in the past 25 years with only 4 being found guilty but no custodial sentences handed down (BOSCAR statistics)

**Fact: Abortion rate in NSW each year? 25,000 to 30,000**

*Hence, does the current law really require reform when there is a rate of prosecution of 0.00016% to 0.000133%*

The proponents of this bill have said that women agonise over the decision to terminate a pregnancy and they should not be labelled as criminals or dealt with under the Crimes Act. Again I ask, our statistics show tens of thousands of women have had abortions in NSW and yet there is no statistic that can point me or our community to any substantial fact that says these women have been prosecuted, discriminated against or otherwise adversely affected because of their decision.

I have experience in my practice of women who have had abortions who wished they knew what it would be like afterwards. There is regret, there is guilt, there is loss. They express needing support before having the abortion as there may have been alternatives. They think of what if. This reform bill does nothing to address these needs.

2. The bill is not about reform, it is asking for permission to allow termination of unborn children on demand.

The provision in the bill for terminations at 22 weeks and up to birth is unconscionable.

**Fact:** One only has to read the many literature and publications that maps the journey of an embryo to become a fully formed foetus and baby to recognise that at 22 weeks that baby has distinct organs, fingerprints, muscle movement, can kick and beyond 22 weeks takes every form of a baby. It has bones that will break, lungs that breathe, a heart that beats and sustains its life.

**Fact:** Victoria which decriminalised abortion in 2008 has seen late term abortions increase by 39% in the past decade and abortions for psycho-social reasons have increased by 32%.

This bill cannot be allowed to pass to allow the termination of life because a relationship has broken down, or one's career will be impacted, or the child is the wrong gender. It is ironic on this latter point that those who are proposing this bill, claim to uphold the rights of women to choose, when the bill allows for sex selection to be an allowable reason to terminate a pregnancy when statistics show that *female babies* will be the overwhelming victims of this choice.

I ask you to consider safeguards to prevent the terminations on demand.

3. The lack of provision in this bill for medical care for a baby born alive during an abortion procedure amounts to neglect and at the very least manslaughter.

**Fact:** In 2017 7.4% of babies in NSW were born pre-term i.e. gestation of 36 weeks or less.

**Fact:** 66% of babies born at 24 weeks will survive to go home and 98% of babies born at 30 weeks will survive.

**Fact:** By definition babies born alive during abortion are no longer foetuses and meet the definition of 'born alive rule', they should be recognised as a living person and appropriated their rights.

This reform bill fails to safeguard medical care for a baby born alive. Instead the bill proposes it is acceptable for that baby to die. In hospitals they have a rule that pre-term babies be resuscitated if they reach the gestational age of 24 weeks and given appropriate care. If born before 24 weeks, they are to be given comfort care. This bill fails these babies born alive during abortions for the mere reason that these babies are *unwanted*. This is not a good reason. This is not humane nor upholds the dignity of human life.

4. There is a lack of provision in this bill to protect healthcare professionals, doctors, nurses, allied health who disagree with abortions to be complicit by requiring them to refer to another health provider.

This bill cannot be allowed to pass where it subjects health professionals who morally and ethically object to the abortion by compelling them to refer the patient. As a health professional myself, I took on my profession for the reason of helping those who need care and are

vulnerable. I cannot in good conscience refer someone to another provider with the knowledge that it is to terminate an unborn child.

5. The lack of community consultation and the fast-tracking of this bill through the lower house. I am disappointed along with many in the community that a bill has been allowed to pass in our lower house without the robust debate and time given for consultation with the constituents our parliamentarians represent.

My last comments to the Committee is from my own experience as a father of four and a Catholic. My first child, I had a miscarriage at 10 weeks. My baby whilst small, had a heart beat, and while some may not even consider my baby a person, he was to my wife and I. A loss that we still feel 15 years on. Our fourth child was born at 27 weeks. A tiny girl who is now 8 years old and defied statistics, as she fought her way out of Neonatal ICU and Special Care to be home with us by the time she was 37 weeks old. She is thriving. I think of how tiny she was, fighting for life along with others at the NICU and parents watching vigil. Hence I cannot fathom how our state can allow the lives of babies being aborted at the same gestational age as my premature daughter and other babies at the NICU as justifiable under the banner of choice. It's not.

I hope the Committee takes the time to fully consider what this reform bill is truly proposing and has the courage to push back on its proponents. The Committee and Parliamentarians are accountable to us as a state and judging by the reaction of the community, the passing of this bill in the Legislative Assembly goes against the wishes and opinion of that community.



To the Committee on Social Issues,

I write as a resident of New South Wales to share my support for the passage of the Reproductive Health Care Reform Bill.

I know that a woman may need to end a pregnancy for a range of deeply personal reasons. I support a compassionate healthcare system that allows her to access the healthcare she needs as soon as possible, and close to home.

I'm concerned that the current laws create barriers to people accessing the reproductive healthcare they need and that they have a chilling effect on health professionals' willingness to provide the care that patients need.

I'm also aware that the current system particularly hurts people who are already vulnerable or struggle with access to healthcare, including women in rural communities who have to travel hours to access care.

Reform is urgently needed, which is why I support the Reproductive Health Care Reform Bill.

With regard to particular provisions in the bill, I note:

1. Relating to abortion care access later in pregnancy - I recognise that the decision to end a pregnancy is a profoundly personal one, and that it can arise out of a complex set of circumstances. I believe that the person who is pregnant is best placed to make the decision that is best for them and their family, and that the law should allow them to do so.

I'm aware that screening for fetal health is generally recommended to take place at 18-20 weeks in pregnancy; and I believe it is important that someone who receives an unexpected or negative diagnosis after this test has time to access relevant information, so they don't feel rushed to make a decision.

I also know that there are a number of reasons that a pregnant person might need to access abortion care later in pregnancy – including a devastating fetal diagnosis, health risks, traumatic change in circumstances, and the violence of an abusive partner. Given that, I strongly support laws that provide for compassionate healthcare access, including later in pregnancy.

2. Relating to “conscientious objection” provisions – I strongly support a patient’s right to access unbiased advice relating to abortion care, and support the passage of provisions that will ensure this.

3. Relating to amendments that were passed by the Legislative Assembly – I understand that expert groups like the Human Rights Law Centre, Australian Medical Association, and the NSW Pro-Choice Alliance have expressed concerns about some of those amendments, and the impact they could have on timely access to care. I urge you to address those concerns.

Finally, I note that the current laws have caused distress and difficulty to access for far too long. It’s time for reform. I want to add my voice to that of the vast majority of the community who want to see abortion removed from criminal laws.

Thank you for considering my submission, and noting my support for passage of the Reproductive Health Care Reform Bill.

To the Committee on Social Issues,

I write as a resident of New South Wales to share my support for the passage of the Reproductive Health Care Reform Bill.

I know that a woman may need to end a pregnancy for a range of deeply personal reasons. I support a compassionate healthcare system that allows her to access the healthcare she needs as soon as possible, and close to home.

I'm concerned that the current laws create barriers to people accessing the reproductive healthcare they need and that they have a chilling effect on health professionals' willingness to provide the care that patients need.

I'm also aware that the current system particularly hurts people who are already vulnerable or struggle with access to healthcare, including women in rural communities who have to travel hours to access care.

Reform is urgently needed, which is why I support the Reproductive Health Care Reform Bill.

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Thank you for considering my submission, and noting my support for passage of the Reproductive Health Care Reform Bill.

To the Committee on Social Issues

I am writing to strongly oppose the Reproductive Health Care Reform Bill 2019 for the following reasons:

- It is understood that this bill would legalise abortion on the basis of sex-selection, which would mean that healthy baby girls/boys could be aborted simply because the parents want a boy/girl;
- It is understood that this bill allows open-slayer abortion, including late term after 22 weeks;
- It is understood that there is no requirement that neonatal care be given to a child born alive as a consequence of undergoing an abortion procedure;
- It is understood that there is no mandatory requirement for counselling in the bill, which would provide women with an opportunity to discuss other options (i.e. giving the baby up for adoption/ support networks available) rather than having an abortion;
- It is understood that this bill would force doctors and nurses to participate in an abortion, even if they object to abortion on ethical or religious grounds; and
- It is understood that there is currently no requirement that medical practitioners report abortion procedures performed on girls under 16 years to the Secretary of the Department of Communities and Justice.

For the above reasons, I submit that the the subject bill must be rejected.

To the Committee on Social Issues,

I write as a resident of New South Wales to share my support for the passage of the Reproductive Health Care Reform Bill.

I know that a woman may need to end a pregnancy for a range of deeply personal reasons. I support a compassionate healthcare system that allows her to access the healthcare she needs as soon as possible, and close to home.

I'm concerned that the current laws create barriers to people accessing the reproductive healthcare they need and that they have a chilling effect on health professionals' willingness to provide the care that patients need.

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Reform is urgently needed, which is why I support the Reproductive Health Care Reform Bill.

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Thank you for considering my submission, and noting my support for passage of the Reproductive Health Care Reform Bill.

## Re: Reproductive Health Care Reform Bill 2019.

I wish to register a very strong protest against the Abortion Bill making abortion easier when in fact it should be made harder, so as only to allow it where the life of the mother is threatened i.e., as the least force necessary in an act of self-defence. Abortion is the murder of a human being, and I ask that the Legislative Council Committee do what you can to halt this mass murder abortion industry in NSW. The orthodox teaching of Christianity is that when Jesus took humanity into his Deity, he who was fully God became fully man from the time of he was “conceived” in St. Mary’s womb (St. Matthew 1:20, Authorized Version of 1611), thus showing the Creator of the universe and man’s final judge dates human life from conception. And “when Elizabeth” the pregnant mother of John the Baptist “heard the salutation of Mary” the mother of Jesus “the babe” of John Baptist “leaped in her womb; and Elizabeth was filled with the Holy Ghost” (St. Luke 1:41) for St. John the Baptist was “filled with the Holy Ghost, even from his mother’s womb” (St. Luke 1:15). Hence in the Anglican 1662 *Book of Common Prayer* the Calendar remembers the Annunciation with the conception of the Son of God’s humanity (though not his pre-existing Deity) on 25 March, and nine months later his birthday on 25 December; or on 8 December “conception of the Blessed Virgin Mary” (not to be confused with the Roman Catholic idea of a so called “immaculate conception” of Mary in Anne’s womb), and nine months later on 8 September “Nativity of the Blessed Virgin Mary”, in both instances making the point that human life begins at conception. The Book of Nature teaches the same thing, as seen by the fact that a person’s human chromosomes are gotten at conception.

The God of heaven and earth thundered from Mount Sinai, “Thou shalt not kill” (Exodus 20:13, King James Bible of 1611), and “murderers... shall have their part in the lake which burneth with fire and brimstone” i.e., hell (Rev. 21:8, King James Bible); and consonant reason also shows that to allow these abortions or any other murders diminishes the value of the sanctity of human life in the minds of the general population, which has spill on consequences in terms of a general lowering of the value of human life and worth in the society. I urge you to work against the MASS MURDER ABORTION industry, something a number of USA politicians are much more prepared to do, than it sadly seems ones in NSW are. For example, *My Christian Daily* of 17/5/2019 (<https://mychristiandaily.com/alabama-breaks-the-mould-and-bans-most-abortions/>) reported, “the Alabama Senate has passed a law that says abortions should not be allowed under any circumstances, apart from at risk to the mother’s life. ... The Senate voted 25-6 in favor of the law and was signed into law by Governor” of Alabama. “The new law would mean that any doctor who supplies and performs an abortion would be punishable with a sentence of between 10 and 99 years in prison ... .” The Governor of Alabama said, “Today, I signed into law the Alabama Human Life Protection Act. To the bill’s many supporters, this legislation stands as a powerful testament to ... [the] deeply held belief that every life is precious and that every life is a sacred gift from God.”





My comments are addressed to the Social Issues Committee;

Is your mandate to choose who has the right to live and who will die with your approval?

Is abortion up to the time of birth now to become socially acceptable?

Is sex selective abortion now to become legal in Australia?

Babies born alive under this Bill may now be terminated or allowed to die without medical intervention as a result of this Bill?

Medical staff face de-registration if they refuse to actively assist or refer women for the disposal of human life?

Women who inwardly question the wisdom or morality of their decision to seek abortion face coercion without counselling?

We have seen what has happened in America, China and North Korea where the abortion industry is either enforced or thriving.

Euphemisms like “Reproductive Health” and “Family Planning” will not cover our shame as a nation or atone for the sacrifice of our children.

Human life is precious and unique; every iris and fingerprint is different.

Many seek to adopt, love and care for babies destined for abortion.

What sort of society allows the “abortion” of full-term babies?

This in anyone’s language is murder.

We rightly abhor eugenics, Nazi treatment of human beings, Chairman Mao and Stalin's murderous tactics and yet we are now set to introduce our nicely worded termination tactics!!

It is simply not true to state that this won’t happen.

The legislation is fashioned in such loose terms as to ensure that it will.

We have seen the evils that result...the sale of foetal parts to the highest bidder, total disregard for the dignity of women and “the products of reproduction”.

I respectfully ask you to desist from legalising the abortion industry.



Dear .....

Please forward my email to appropriate people if the above address is not correct.

Gareth Ward is my local member and I am very disappointed in him that he voted for this bill which is essentially anti life, it is murdering a living human being. It is unthinkable that this bill has even been put forward in the first place! I am 100% against this "bill" for many reasons. The main one being that it murders the child and sentences the mother/father to a lifetime of guilt even though she may pretend that all is ok and that her reasons were valid, deep down there is a price to pay. Over time the pain and grief never goes away - this is true of losing a child/baby at any age, including the time inside the womb.

Not right Australia. This bill should be withdrawn from all the other states too, Australia is becoming inhuman in its attitude towards people. Our politicians seem to have their own agenda and are ignoring the will of the people.

Signed

To the Standing Committee on Social Issues,

I am asking for some amendments to be made to the Reproductive Health Care Reform Bill 2019 , that was passed in NSW Parliament last week.

As babies born at 24 weeks are considered viable I ask that life saving measures be put in place for those infants from this age that survive the abortion process.

As a health care professional who has worked in a NICU it is incomprehensible that abortions can be performed up to full term.

The long lasting mental health effects on women who choose this course of action must be considered and increased funding given to counselling services.

Whatever the reason that a woman feels an abortion is her best course of action , support, mental health care and counselling services are crucial at every stage of the process and should be mandatory.

May compassion please be considered in your decision making process,

To The Committee on Social Issues,

I am writing with regard to the Reproductive Health Care Reform Bill 2019.

There has been a complete failure of the proponents of the Bill to facilitate due process of debate, community consultation or inquiry into the provisions of the Bill.

I am opposed to the Bill which legalises abortion even until late term removing any rights of the unborn, allows parents to abort based on gender selection, forces medical practitioners with a conscientious objection to nevertheless direct their patients to an abortionist, and doesn't protect women who may be coerced into taking an abortion by forceful others.

I hope that you realise how serious these facts are and put a stop to this Bill.

I opposed this Bill because it is extreme and inhumane.

I will never vote for killing a 22 week baby on demand when that baby has every chance of living. I will never vote to terminate a late term pregnancy up to full term for social reasons, I will never vote to allow a woman to self-terminate her own pregnancy at anytime during the cycle. I will never support allowing a baby born alive when an abortion goes wrong not to be saved and left on the table to die. I will never vote for a Bill that legalises sex-selection abortion. The Bill that passed the Lower House allows for all of these inhumane aspects. If you agree with me, please put in a submission, even if it's very brief to let the Committee know how the public feels about this Bill.

How come they legal to kill baby unborn no Mercy on human been but they have good care about Animal thank you Austalian Government

## REPRODUCTIVE HEALTH CARE REFORM BILL 2019: BORN ALIVE PROTECTION

Hi,

I want to know what protections will be in place for babies that survive the abortion procedure and are born alive. Born alive is defined in the Crimes Act 1900.

The MP Tanya Davies on Thursday the 8th of August made the following comments in parliament:

“I repeat that under Victoria's reformed abortion law, from 2009 to 2017 there have been 3,104 abortions performed at 20 weeks or later and in more than 10 per cent of cases—which is more than 300 babies—those late-term abortions resulted in the delivery of a live-born baby because the baby survived the abortion process.

From 2009 to 2017 in Victoria it has been calculated that 332 babies were born alive after a late-term abortion process, but it does not appear that in a single case those children who survived the process were given any neonatal care. As a consequence, they were just left to die. Current Department of Health procedures in New South Wales already make it clear that the law requires that a child born alive as a result of an abortion must be assessed and given appropriate neonatal care. The new subsection (d) for which I am seeking members' support would clarify that requirement in the context of this new abortion law.”

(<https://www.parliament.nsw.gov.au/Hansard/Pages/HansardResult.aspx#/docid/HANSARD-1323879322-106744/link/57>)

This amendment was defeated.

In part of here statement Tanya Davies stated: “Current Department of Health procedures in New South Wales already make it clear that the law requires that a child born alive as a result of an abortion must be assessed and given appropriate neonatal care.”

My first question is where does it say this? I have not been able to find any information from the Department of Health that this is a requirement.

On examination of the Crimes Act 1900 I found the following reference:

CRIMES ACT 1900 - SECT 20

Child murder--when child deemed born alive

20 Child murder--when child deemed born alive

On the trial of a person for the murder of a child, such child shall be held to have been born alive if it has breathed, and has been wholly born into the world whether it has had an independent circulation or not.

The REPRODUCTIVE HEALTH CARE REFORM BILL 2019 itself states the following:

Part 1 Preliminary



### 3 Purposes

The purposes of the Act are—

(a) to reform the law relating to terminations of pregnancies, and

Note. Consequent on the enactment of this Act amendments were made to the Crimes Act 1900 to repeal the provisions of that Act relating to abortions and to abolish the common law offences relating to abortion.

My question:

If a baby is born alive as a result of a failed abortion procedure, and is breathing as defined in the Crimes Act 1900, if the doctor who performed the abortion failed to render proper medical care and as a consequence that baby dies, will that doctor be charged with murder?

In the REPRODUCTIVE HEALTH CARE REFORM BILL 2019 it states:

Part 3 Protection from criminal responsibility

11 Person does not commit offence for termination on themselves.

Despite any other Act, a person who consents to, assists in, or performs a termination on themselves does not commit an offence.

My question:

What if a pregnant woman were to acquire the drug mifepristone and misoprostol illegally in an attempt to perform an abortion on herself without the supervision of a doctor. She then consumes these drugs. Her abortion attempt fails and the baby is born alive as described in the Crimes Act 1900. If she then fails to ascertain medical care for the baby that is classified as born alive will she be charged with murder?



To: Committee on Social Issues

Re: Reproductive Health Care Reform Bill 2019

Dear Sir/ Madam,

We are writing to express our deep concern about the proposed bill. The bill would facilitate late term abortion with the approval of two doctors.

Our concern is therefore two-fold:

1. The abortion of completely formed, sentient human babies cannot be seen as acceptable by any civilised society. These babies have human rights equal to those of their parents. This is a fundamental reality, and to ignore it risks the quality of life for our whole society.
2. The potential pressure on doctors and other healthcare professionals to comply with these procedures is beyond the moral scope of their jobs. They may feel they have no choice but to comply for professional reasons, even though they may have moral objections. We need to better protect our doctors.

Please consider these views as paramount to the well-being of our community, for which we wholeheartedly care for.

To: Committee on Social Issues

To: Committee on Social Issues

I have contacted the Committee in relation to the Reproductive Health Care Reform Bill 2019 to express my opposition to it. While I think the measure is bad in and of itself, I think that even supporters of the bill would share my interest in problems that have occurred abroad, and my concern that there is nothing in the bill to prevent their recurrence here.

Firstly, the supposed safeguard of requiring two doctors approving abortions after 22 weeks is not adequate. Reports from the UK have revealed that doctors have not performed their duties correctly so much as treating the process as a "box ticking" exercise. For instance, there are incidences of doctors pre-signed forms to approve abortion (<https://www.nationalrighttolifenews.org/2012/07/facts-suggest-abortion-doctors-in-14-nhs-trusts-should-be-prosecuted-for-perjury/>) and that another doctor made a false declaration because the reason for the termination, the female sex of the unborn child, was unacceptable (<https://www.telegraph.co.uk/news/investigations/11973688/Abortion-doctor-who-agreed-to-gender-based-termination-suspended-for-three-months.html>).

Secondly, there is nothing in the bill to protect the interests of women being trampled under the commercial interests of abortion providers. In this regard, the UK Government's Quality Care Commission found that staff at Marie Stopes International were pressured to persuade women to proceed with an abortion because their performance bonus depended on it (<https://www.independent.co.uk/news/uk/home-news/abortions-marie-stopes-clinic-bonuses-persuade-women-investigation-a8012171.html>).

Thirdly, the bill needs to include measures to ensure that the practice of selling the products of abortion to biotech companies does not happen here. Dr Deborah Nucatola, the Senior Medical Director of Medical Services, Planned Parenthood Federation of America was filmed admitting and negotiating the sale of body parts of aborted humans and demonstrating techniques to harvest particular organs. It is not unlikely that similar practices could occur here unless measures are put in place to prevent them (See: <https://www.youtube.com/watch?v=jjxwVuozMnU> for edited version, <https://www.youtube.com/watch?v=H4UjIM9B9KQ> for full version and [http://www.centerformedicalprogress.org/wp-content/uploads/2015/05/PPFAtranscript072514\\_final.pdf](http://www.centerformedicalprogress.org/wp-content/uploads/2015/05/PPFAtranscript072514_final.pdf) for a transcript of the conversation).

Fourthly, what scrutiny and reporting will there be to ensure that abortion providers stick to the rules and to the law? Dr Kermit Gosnell operated a clinic in Philadelphia which was not supervised or regulated owing to the political sensitivities of race and abortion. As a result, he

was free to exploited vulnerable poor women and to perform illegal abortions (See: <https://www.steynonline.com/3710/big-government-back-alley>). There needs to be proper scrutiny and reporting to ensure that such abuses do not occur in Australia.

There may be a tendency among some members of the committee to dismiss my submission on the basis of my declared opposition to the bill. To them, I would say that abortion legislation in the UK and USA (presumably) did not set out to achieve those outcomes, yet that's what happened. If abortion is indeed to be decriminalised, the appalling abuses that ride on the coat-tails of such legislation needs be prevented. Good intentions alone are not enough.

Please permit me to be blunt. This brutal way of ending life is the worst kind of murder. Those who approve of this bill should thank their parents for giving them life. It is evil.

To whom it may concern ,

I am totally opposed to this Bill . I believe life starts at conception and abortion is murdering babies regardless of their age or development .

The idea that a human being can be exterminated for any reason is barbaric - who has that right?

It's a living baby Hear the Silent Scream of the unborn and Stop It Now !

Where is your conscience and conviction ? If you don't know or care- be warned God is your judge !

Save the Babies and help the mothers !

Praying for a just decision !

God bless your heart !

I wish to register my opposition to this bill as I believe it is condoning murder of an innocent human being. To allow abortion of a baby who has their foot still in the birth canal is unbelievable. Any baby over 22 weeks old has a right to life even if it is unwanted. What madness is it to say that it is better to kill a baby that is unwanted by the mother (and father) than let it live. Life is precious. I object to this bill in total, no one has the right to kill another person, particularly one that is so innocent and unprotected but I totally oppose any abortion taking place after 22 weeks of the baby's life. Killing a baby because it is a girl?



"We respectfully ask that this late submission be accepted as we have not been given enough notice to lodge a submission in time."

Dear Honourable Member of Parliament

I wish to express my concern towards the proposed bill to legalise abortion in NSW. As the 'Great South Land of the Holy Spirit', this bill goes against the grain and values of our forefathers who worked so tirelessly to establish this country on Christian and Biblical standards that have stood the test of time.

This bill is not the right thing to do, killing innocent lives who don't have a voice for themselves. There are consequences for such foolish actions and we will all suffer as a country. Popularity doesn't mean the right decision.

Concerned Australian citizen

To whom it may concern.

We are opposed to the current Abortion bill before the Senate as this is an approval of death to many foetus who will never have the opportunity to live on this earth. Another word for it is murder which we all oppose. There are 2 different standards - a standard for those who have a voice and those who dont.

Please be wise in making your decision as every life is precious and a gift from God.

To the Legislative Council of the NSW Government.

We are writing to you to beg you not to pass the Reproductive Health Care Reform Bill.

We whole heartedly reject and stand against the preposed laws that this bill would allow. This bill is unAustralian. Australia is a Nation made up of people who believe that everyone has a right to a fair go. Allowing survived aborted babies to die and allowing abortions based on gender selection is no different than Hitler and the Nazis gassing the innocents because they did not deem them worthy of life in their eyes. IS THIS WHAT OUR NATION HAS COME TO?!!!! We support every Australians' right to be born! We are not a barbaric nation.

Who in their right mind would walk past any injured child and leave them with out help, let alone a newborn baby who has every chance at life. And by the way, although I do hold the very strong belief that there are only two genders, male and female, hasn't the greens and leftist parties just thrown a hissy fit about gender fluency and not naming genders! Now they want to support a bill that allows murder based on the gender of male and female!!? Decide!! Is there such a thing as gender or not? Either way gender is no reason for murder.

- This bill would legalise abortion on the basis of sex-selection.
- This bill will allow for late-term abortions from 22 weeks up until birth.
- There is no requirement that neonatal care be given to a child born alive as a consequence of undergoing an abortion procedure.
- This bill will required doctors to facilitate, or refer, an abortion, even if they have a conscientious objection.
- There is currently no requirement that medical practitioners report abortion procedures performed on girls under 16 years to the Secretary of the Department of Communities and Justice.

None of these points are morally, socially, physically, mentally, environmentally or economically beneficial for our Nation.

With all of our hearts we ask that you reject this bill or at the very least agree to the amendments passed by the Legislative Assembly.

Dear Sir/ Madam,

I am opposed to the above bill.

I urge your committee to recommend that the bill be rejected by the Legislative Council of New South Wales, for the following reasons:

1. The bill is unnecessary. The current situation in New South Wales allows for abortion in wide circumstances early in the pregnancy.

2. Abortion destroys a small, developing baby. There is something universally wrong with abortion, at least in most cases. Abortion is wrong as a matter of common sense, it is not dependent on religious beliefs.

3. Most women who undergo abortion do so because they are driven by desperate circumstances, not because it is something which they want.

4. On a practical level, abortion leaves women with long term grief and guilt. Numerous studies have shown abortion is associated with higher rates of depression, alcohol abuse, drug abuse and suicidal behaviour compared to women who carry (initially unwanted) pregnancies to term.

5. The bill contains provisions which give the impression that some restrictions exist beyond 22 weeks. In reality, these "restrictions" are meaningless and the bill effectively allows abortion right up until birth. And any type of abortion.

6. The bill is unjust and inhumane. It is also extreme. There is great community outrage, even disbelief, that the New South Wales parliament is considering allowing unlimited abortion up until birth and yet that is precisely what this bill will allow.

7. We seem to be entering into an age where we can justify in law the killing of a person as opposed to preserving a persons life. Is this not a contradiction?  
Abortion as described in the bill and the euthanasia laws sweeping the country seem to indicate a mindset of death and not life. I urge you to pull the pendulum back to making the subject how can we improve quality of life for pregnant women, their unborn child and their respective futures.

I urge your committee, with deep concern and pleading, to recommend that the bill be rejected.

Dear Parliamentary representatives, please consider my concerns regarding the late term abortions of “very much alive” babies!!!!

Parliament must recognise the medical advancements that have reduced the age of surviving premature birth to about 22 weeks.

"This is clear evidence of the child's full humanity.

"Scientific evidence shows that babies feel the excruciating pain of abortion. (In surgical procedures to save an unborn child) fetal surgeons have found it necessary to sedate the unborn child from engaging in vigorous movement in reaction to invasive surgery.”

The science on what is happening in the womb confirms the full humanity of the unborn child and in so doing, calls into question the humanity of destroying it.

Thank you for taking time to read my concerns, yours

To the Committee on Social Issues,

“Reproductive Health Care Reform Bill 2019”:

Thank you for taking a moment to consider this submission. I am writing to express my opposition to the Reproductive Health Care Reform Bill 2019, in particular the legalisation of late term abortions for any reason.

Proponents of late term abortions argue that this bill will reduce the number of late term abortions. This rationale is flawed for at least three reasons. First, this has not been the case in Victoria over the past decade, rather, late term abortions have significantly increased. Second, the bill expands the reasons why late term abortions can be performed. Third, the two-doctor-approval requirement does not require the doctors' opinions to be independent of one another, nor is the two-doctor requirement even legally enforced.

Our society must seek solutions to the complexities of abortion other than ending the life of another human being (preventative education, adoption, mental health support, etc.). I believe a child is ‘viable’ from the moment of conception, not from when a government or adult seems it so. The mother's body must be respected, but we must also respect the body that is inside her.

To add to this, I am greatly concerned for the mental health and welfare of the doctors and nurses performing the abortion procedures. They do not get to use their own discernment, neither do they have a choice as to whether they carry out the procedure, the repercussions of which may be lifelong emotional and mental trauma. This especially being the case if they are not allowed to give care to a late term abortion that has been born live.

Please consider all involved in an abortion, not just the mother or parents of the baby, but the baby itself and healthcare professionals.

Re: Reproductive Health Care Reform Bill 2019

I am writing to ask you to vote against the Reproductive Health Care Reform Bill 2019.

As a community we should be doing everything we can to support women who find themselves dealing with unwanted pregnancies. The issues surrounding these circumstances can cause much stress and complexity for these parents, and they need all the care we can give them. I am not opposed to helping those women who need our society's help, but there are numerous issues with this bill, the main ones are as follows:

- It allows for sex-selection terminations, ending the life of a child just because their parent thinks they are the "wrong" sex. How is this helping women or providing reproductive care? This is a truly regressive policy in opening up the legal right to do something that we have condemned other cultures for.
- It trivialises concerns over conscientious objections to ending an unborn child's life, by forcing doctors who object to refer a woman who wants an abortion to another doctor willing to provide one.
- It allows for permitting a child's life to be ended right up until birth for "the person's current and future physical, psychological and social circumstances", which provides no limitations or guidelines as to what is an acceptable reason to allow a life to be ended.
- There is no consideration given for the psychological and emotional impacts on nurses and doctors who would be required to allow a child who survives this attempt to end their life to just be left to die. There is not even a suggestion that we provide palliative care while we allow these newborns to die.
- The requirement for "informed consent" is woefully inadequate, with no specificity as to the ongoing physical and emotional effects on the mother, and a lack of explanation about what exactly is going to happen to the unborn child.

I also find the lack of community consultation, and the rushing through of the bill, very disturbing. For such an impactful bill to be hidden away from the public, especially from those who seek to look after women who find themselves in these situations, is in itself an admission that there would be opposition to it, and that it would not stand under public scrutiny.

This issue matters a great deal to me, and the outcome will greatly influence my vote at the next election.

To the Committee on Social Issues,

I write to you to convey my concerns with the Reproductive Health Care Reform Bill 2019, which will be legalised in the state of my primary residence.

1. Section 5 in the Bill provides for abortion on demand moving well into the second trimester. The unborn child has at this stage developed all organs, fingertips, and eyelids. Only 12% of Australians support legal abortion into the second trimester, according to the 2008 study here, [https://www.mja.com.au/system/files/issues/193\\_01\\_050710/dec11141\\_fm.pdf](https://www.mja.com.au/system/files/issues/193_01_050710/dec11141_fm.pdf). This Bill is not representative of the majority of our community's values. Furthermore, the 22week threshold for abortion on demand is based on the arbitrary and ever-reducing medical metric of viability. When the fetus becomes viable outside of the womb is not an indicator of its humanity or its consciousness.

2. The Bill allows effectively unrestricted access to abortion till birth, in Section 6. Third trimester abortions would, in addition to current legislation, be allowed under "social circumstances" or with consideration of future circumstances. Additionally, the Bill negates the need for "serious danger" to the woman. The intention of Bill is clearly to permit abortion on demand for whatever reason what so ever under birth.

The need for the approval of 2 doctors is undermined by a lack of legislation on their required actions, or even a penalty for misconduct. They do not even need to review the case of the woman to provide approval. The support for third trimester abortion is even less so, as the skin of the child is opaque, and multiple studies have shown they have sufficient brain capacity to dream.

3. Post 20 weeks, a fetus is able to feel pain, as demonstrated in the paper, 'Anesthesia for fetal surgery', by EE Lin and KM Tran (2013). An amendment should be passed to ensure fetuses receive anesthetic treatment before undergoing abortion.

4. An amendment should be passed so that fetal remains are treated in accordance with the Human Tissue Act, and not sold for profit like Planned Parenthood did in the US.

5. Section 9(3) of the Bill requires medical practitioners who have a conscientious objection to abortion to refer the person who is seeking an abortion to another medical practitioner who does not have an objection to the practice. This section is an attack on the Human Rights of medical practitioners who believe abortion involves the taking of an innocent human life.

The amendment was voted down in the Lower House due to the potential to disadvantage women in rural areas, however given the accessibility of information in the modern age, it would not be difficult for a woman, even in rural areas to utilise the Internet, or Google to determine the location of a medical practice who provide abortion.

I strongly hold that the act of abortion results in the ending of innocent human life. My significant other, also a resident of NSW, is currently studying in medicine and holds the same beliefs as I do. It would be an extreme violation of her beliefs to force her to associate herself with an abortion, the act of ending an unborn life. This Bill holds dangerous clauses which endangers our Human Rights, and it makes us deeply fearful.

There are a significant number of other issues with the bill, however those listed here are of special concern to me. This Bill as it stands should not be allowed to pass into the Law of this State.



Dear Mr Frappell,

Please convey to the Committee my total opposition to this Bill.

It is conservatively estimated that 30,000 healthy babies are killed each year by abortion in NSW alone.

Abortion should be a health issue, not a convenience. The sanctity of life is being disregarded and this Bill will only serve to worsen the situation.

I am alarmed that the Bill is being rushed through so hastily and that there was no mention of it as an issue in the recent election. It is an extremely important issue which deserves due consideration and debate.

If the government wishes to retain power at the next election, I suggest that you reconsider your position on this issue and reject this Bill.