



5 April 2013.

**Submission re “Reproductive Health (Access to Terminations) Bill 2013”**

I write on behalf of the doctors of *Medicine with Morality* to highlight some of the consequences to individuals, the medical profession, and the future of medicine in Australia if the proposed bill is passed.

Firstly, it 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”. No “cooling off” period is required and it would effectively result in viewing abortion as simply another contraceptive option. The effect of state approval should not be underestimated. Most political leaders agree that we should be looking at ways of reducing abortion rather than facilitating it.

Secondly, it will result in abortion for any reason up to 24 weeks for any reason and thereafter if it is considered by two doctors that continuation of pregnancy involves “greater risk”.

There are no limits in the proposed bill to the existing – almost unrecognised publicly – practice of eugenic selection, already being performed for readily correctable abnormalities such as cleft lip. It is almost now an expectation that mothers will abort Down Syndrome babies and the term “genetic outlaws” has been applied to mothers that resist this expectation. While there is disagreement within the profession and the public on such matters, we need to recognise that this bill will result in unrestricted abortion for any perceived “defect” including wrong sex.

No consideration in this bill is given to the subject of foetal pain. There is good reason to at least consider that foetal pain can be felt from 20 weeks. Future generations will condemn this generation for gross cruelty and inconsistency with our care of the helpless elsewhere in the animal kingdom.

Finally, doctors would be required by law to take part in the referral process for abortion, even if they object strongly on ethical or medical grounds. The right to liberty of conscience, the right not to engage in procedures that we consider unethical or medically unwise for the patient is fundamental to the practice of medicine and the future of society.

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