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Research Director Health, Communities, Disability Services and Domestic and Family Violence Prevention Committee *Via email: <u>abortionlawreform@parliament.gld.gov.au</u>*

To the Research Director

Thank you for providing AMA Queensland with the opportunity to give feedback on the Abortion Law Reform (Women's Right to Choose) Amendment Bill 2016.

AMA Queensland is the state's peak medical advocacy group, representing over 6000 medical practitioners across Queensland and throughout all levels of the health system. We have previously advocated publicly on issues of public health, vaccination and medical regulation. Our members take a very strong interest in medico-legal issues given their importance the health system in Queensland.

Unwanted pregnancies can have significant health, social and financial costs. It has been estimated that almost a half of all unplanned pregnancies in Australia end in termination of the pregnancy¹.

AMA Queensland believes Queensland's current laws which criminalise terminations of pregnancy are a barrier to a doctor's first duty – best patient care. Any amendment that provides legal certainty to Queensland doctors when it comes to performing terminations of pregnancy would be welcomed.

AMA Queensland respects the right of medical practitioners to hold differing views regarding the termination of pregnancies². However conscientious objectors should not use their objection to impede access to treatments that are legal or which would impede the patient's access to care³. For this reason, AMA Queensland strongly recommends that if this legislation is passed by the Queensland Parliament, the Government should develop a public information campaign (through a brochure and websites) to inform doctors of their rights and also on their legal and ethical obligations under the new laws and to provide doctors with contact information to organisations such as Children by Choice. AMA Queensland would be happy to review this material and disseminate it to our members.

As per the AMA position statement on *Ethical Issues in Reproductive Medicine*⁴, AMA Queensland would also like to stress the following.

 Where surgical termination of pregnancy is performed, the procedure and the associated anaesthesia should, as with any other medical intervention, be performed by appropriately trained doctors, in premises approved by a recognised health standards authority.

¹ A Chan, W Scheil, J Scott, A-M Nguyen, L Sage Pregnancy Outcome in South Australia 2009 Pregnancy Outcome Unit, SA Health, Government of South Australia. Adelaide, 2011 p55

² AMA Position Statement on Conscientious Objection: <u>https://ama.com.au/position-statement/conscientious-objection-2013</u>

³ AMA Position Statement on *Ethical Issues in Reproductive Medicine*: <u>https://ama.com.au/position-statement/ethical-issues-reproductive-medicine-2013</u> ⁴ *ibid*

- Medical termination of pregnancy should be made available as an alternative to surgical termination
 of pregnancy in cases where they are medically deemed to be the safest and most appropriate option.
- Medical termination of pregnancy should only be performed when adequate services are available to
 manage the process and any complications that might occur in a safe and timely manner. Medical
 termination services should involve a multi-disciplinary clinical team under the leadership of a doctor.

Counselling should be available for patients who are considering either a medical or surgical termination. Counselling education and training should also be made available to doctors and adequate resources should also be allocated to assist patients in making informed decisions around their care and treatment

Finally, AMA Queensland would also like to make clear that it also supports other measures to reduce unwanted pregnancies, including enhancing access to affordable and effective contraception; promotion of respectful, equitable, non-violent relationships; and reducing binge-drinking among young people⁵. All Queenslanders should have access to confidential and accurate information, counselling and educational resources in relation to contraceptive options, pregnancy and reproductive health. This should be delivered in a coordinated manner and should take into account other factors such as a patient's socio-economic status as well as the needs of:

- Culturally and linguistically diverse communities
- people with a disability or impaired capacity
- Lesbian, Gay, Bi-sexual, Transgender and Intersex communities

Ideally this could be delivered as part of the whole-of-government public health plan advocated by AMA Queensland in Part One of our *Health Vision*⁶ and may form part of the work of the Queensland Health Promotion Commission when it is established.

In closing, AMA Queensland thanks you for providing us with the opportunity to provide the committee with a submission on the *Abortion Law Reform (Women's Right to Choose) Amendment Bill 2016.* If you require further information or assistance in this matter, please contact Mr Leif Bremermann, Senior Policy Advisor, on

Yours sincerely

Dr Chris Zappala President Australian Medical Association Queensland

⁵ AMA Position Statement on Sexual and Reproductive Health: <u>https://ama.com.au/position-statement/sexual-and-reproductive-health-2014</u>

⁶ AMA Queensland Health Vision Part One: <u>http://www.amaq.com.au/page/Advocacy/AMA_Queenslands_Health_Vision/part-one-public-health-and-generational-disadvantage/</u>