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Legislative Assembly

PARLIAMENTARY DEBATES (HANSARD)

**Fifty-Seventh Parliament
First Session**

Tuesday, 6 August 2019

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TABLE OF CONTENTS

Visitors	1303
Visitors	1303
Bills	1303
Reproductive Health Care Reform Bill 2019	1303
Second Reading Debate	1303
Visitors	1312
Visitors	1312
Announcements	1312
Parliament Video Production	1312
Notices	1312
Presentation	1312
Question Time	1312
Arts and Cultural Projects	1312
Education Week	1313
Building Standards	1314
Water Management	1316
Taxation	1317
M4 East	1319
TAFE NSW	1319
Short-Term Holiday Letting	1321
Agriculture Biosecurity	1322
Committees	1323
Legislation Review Committee	1323
Reports	1323
Committee on Transport and Infrastructure	1323
Membership	1323
Petitions	1324
Petitions Received	1324
Bills	1324
Reproductive Health Care Reform Bill 2019	1324
Second Reading Debate	1324
Business of the House	1324
Suspension of Standing and Sessional Orders: Speaking Time	1324
Bills	1324
Reproductive Health Care Reform Bill 2019	1324
Second Reading Debate	1324
Business of the House	1328
Suspension of Standing and Sessional Orders: Speaking Time	1328
Bills	1328
Reproductive Health Care Reform Bill 2019	1328

TABLE OF CONTENTS—*continuing*

Second Reading Debate	1328
Public Interest Debate	1337
Education Week	1337
Visitors	1346
Visitors	1346
Bills	1346
Reproductive Health Care Reform Bill 2019	1346
Second Reading Debate	1346
Community Recognition Statements	1391
Beat of the Bush	1391
St Francis House of Welcome	1391
Holy Cross Primary School	1391
Terrigal Trotters	1391
Mulgoa Electorate Achievers	1391
Canterbury Electorate Nepalese Community	1392
Mitchell Kenny	1392
Zoe Davis	1392
Maurice Henry	1392
Wendy Stein	1392
Mikayla Hain	1393
Higher School Certificate 2019	1393
Middle Harbour Yacht Club	1393
Anne Cole and Maitland Black and White Committee	1393
Ava Macey	1393
Chaldean National Day	1394
Kevin Flack	1394
National Day of Croatia	1394
5 Lands Walk	1394
Wollongong Wolves Football Club	1394
Woolgoolga Wwi Memorial Restoration Group	1395
Maureen O'donnell	1395
Neville and Unity Maitland	1395
Homelessness Week	1395
Joe Bond	1395
Skye Robinson	1396
Queen's Scout Award Recipients	1396
Greystanes Devils Jrlfc	1396
Scotland-Australian Cairn	1396
Youth in Performing Arts	1396
Charlie Fittler	1397
Window Way 2828	1397
Moorebank Rams Junior Rugby League Inc.	1397

TABLE OF CONTENTS—*continuing*

Women's State of Origin.....	1397
Walgett Community.....	1397
Ministers' Awards for Women in Local Government.....	1397
Myall Creek Massacre Commemoration	1398
Stephanie Flinn	1398
Little Red Café.....	1398
Cathie Angelkovic, PSM	1399
Ivan De Vulder.....	1399
Ballina Marine Rescue Volunteer Lorraine Leuckel	1399
Macarthur FC Bulls.....	1399
Natasha Harper.....	1399
Queen's Scout Awards	1400
Jade Wheatley	1400
St Peter's Primary School Port Macquarie	1400
Frank Presnell, OAM.....	1400
Dr Nicholas Saltos, AM.....	1401
Hills Adventist College.....	1401

LEGISLATIVE ASSEMBLY

Tuesday, 6 August 2019

The Speaker (The Hon. Jonathan Richard O'Dea) took the chair at 12:00.

The Speaker read the prayer and acknowledgement of country.

[Notices of motions given.]

Visitors

VISITORS

The SPEAKER: I acknowledge a range of guests in the public gallery who are present to hear debate on the Reproductive Health Care Reform Bill 2019. In particular, I extend a warm welcome to guests of the member for Sydney, who are seated in the Speaker's gallery. Debates of this nature can sometimes get a little emotional. I request those in the Chamber and those observing proceedings to remain orderly and respectful. People in the public gallery should remain quiet at all times.

Bills

REPRODUCTIVE HEALTH CARE REFORM BILL 2019

Second Reading Debate

Debate resumed from 1 August 2019.

Mr BRAD HAZZARD (Wakehurst—Minister for Health and Medical Research) (12:18): Today the people's representatives in the New South Wales Parliament have the opportunity to right a wrong that was enacted into law 119 years ago. It is a law that no-one since has had the courage to change. It is a law that put women's reproductive rights into the criminal code, and it was enacted when all the legislators in this place were men. It is a law that came into being 25 years before the first woman, the first feminist, came into this place. I speak of Millicent Preston-Stanley, the first female New South Wales MP who, amongst other topics, campaigned on women's rights, sex education, family planning and maternal health. I am particularly proud that Millicent Preston-Stanley was a member of the political party that was the precursor to the Liberal Party and she was one of the early members of the newly formed Liberal Party under Robert Gordon Menzies. This legislation is for Millicent Preston-Stanley and all the women who have followed and fought for women's reproductive rights; women from all political parties and those who have had no involvement in political matters.

Accordingly, I am pleased to speak in support of the Reproductive Health Care Reform Bill 2019, which represents an important and overdue reform to the law of New South Wales and most importantly to ensure that women's reproductive health issues are in a legislative framework that is appropriate for the twenty-first century. Over the past 20 years or so all States and Territories across Australia have moved to reform laws on abortion, but not in New South Wales—not until now. In all jurisdictions other than New South Wales there is now statutory recognition that the termination of a pregnancy is a lawful medical procedure. While there is some variation in the criteria applied and the nature and timing of medical oversight the starting point in all jurisdictions is to recognise abortion is legal.

As the New South Wales Minister for Health and as a former New South Wales Attorney General I strongly believe women in New South Wales are entitled to the same legal provisions that exist across Australia when it comes to having terminations being dealt with as a medical and healthcare practice rather than through a criminal lens. All of us come to this Parliament with an opinion on abortion shaped by our own views and experiences. Every one of us knows that termination of pregnancy is an incredibly difficult and challenging decision for individuals who find themselves facing this issue. We all understand that some individual views are informed by a range of factors including religious or spiritual perspectives as taught by their particular church.

Personally I respect each individual's right to hold her or his opinion but as legislators our role is to govern for the whole population of New South Wales and in so doing I can assure those with concerns about the bill that nothing in this bill will encourage women to have terminations. The bill simply sets a framework that allows women to make their own decision. It empowers women on a journey that started in this Parliament when Millicent Preston-Stanley was elected almost 95 years ago. This legislation ensures that a woman will be

empowered to apply her own views to her own situation but within a medical framework. Her views will be considered within a medical context in discussions with her doctor or doctors.

Those decisions will be untainted by the threat of criminal charges against her or her doctor. Nothing in this legislation will stop a woman also applying her own value judgements, including any religious or spiritual perspective that she may have. I urge my colleagues in this place to support the Reproductive Health Care Reform Bill 2019. It is disturbing that in New South Wales the framework for abortion is still currently found in the Crimes Act 1900. No other State or Territory in Australia has its abortion primary framework in the criminal law. I ask all members to consider whether it is acceptable, whether it is conscionable, that in making this major life decision women and their doctors have to do so with the threat of being charged with a criminal offence that could lead to jail for up to 10 years.

I will now turn to the legal aspects of the bill and thereafter I will also address some of the concerns raised by some of my colleagues in this place and some in the community. What is very clear is that under New South Wales law terminations of pregnancy are potentially a crime. The criminal offence is referred to as "procuring a miscarriage". They remain the same as they were when the New South Wales Crimes Act commenced operation in 1900. The criminal law treats terminations as potentially serious criminal offences. Penalties of between five and 10 years imprisonment apply to any person who performs an abortion procedure or supplies or procures drugs for an abortion.

It also criminalises the conduct of a woman who obtains an abortion. The punishment for this offence is a term of imprisonment of up to 10 years. The Reproductive Health Care Reform Bill 2019 will ensure terminations are regulated as a health service, not prosecuted as a crime. It will bring New South Wales into line with other jurisdictions. It will allow women in New South Wales to have the same rights of access to the full range of reproductive health services that are available to women in Victoria, Queensland and other States and Territories. I stress: New South Wales is the last jurisdiction in Australia to reform to ensure that women's reproductive rights are not framed in a criminal context.

While reform is long overdue in New South Wales there is one advantage of our tardiness in righting this wrong: It allows us the opportunity to reflect, assess the previous reforms and identify the best path forward. To this end the bill broadly adopts the regime established in Victoria in 2008 and in Queensland in 2018. The schemes in those Acts have already been subject to extensive review and consultation, including most recently through the Queensland Law Reform Commission. In adopting this model New South Wales law will reflect those most recent Australian reforms and ensure there will be a consistency of access for women across Queensland, New South Wales and Victoria.

The key principles reflected in the bill are: recognition that termination is a health service and that decisions about health services should be made between women and their doctors; recognition that where a late-term termination is sought there should be further medical consultation and oversight to consider all relevant medical and personal circumstances; establishing provisions on conscientious objection for medical and other health practitioners that are consistent with current professional codes and ethical guidelines; removal of offences that criminalise the conduct of a woman who obtains a termination and a doctor who provides that service; and recognition that there remains a need to ensure that protections are in place against unqualified persons who perform or assist in performing a termination.

I will now address some of the key elements of the bill. Consistent with approaching abortion as a health service, schedule 2 to the bill amends the New South Wales Crimes Act 1900 to remove the provisions that currently criminalise the conduct of women and health practitioners. This means that the risk of criminal penalties will no longer apply to women who obtain an abortion. It also ensures that health practitioners will not be judged under the criminal law for providing or assisting in termination services. Instead, as with any other health service they provide, they will be judged on the safety and appropriateness of the services they provide in accordance with the rules of professional conduct—the same way as they are held to account for any service they provide.

In supporting this change I recognise that some may argue the existing Crimes Act provisions are sufficient to regulate abortion and that they do not unreservedly prevent women obtaining a termination of pregnancy. This is technically correct but in my view woefully inadequate. Since 1900 judicial interpretation of the Crimes Act has established principles for when a termination might be treated as lawful. Those principles have been in place since the decision in *R v Wald* in 1971. In that District Court case Judge Levine concluded that a termination was not "unlawful" under the Crimes Act if a doctor honestly believed on reasonable grounds that:

... the operation was necessary to preserve the woman involved from serious danger to her life or physical or mental health which the continuance of pregnancy would entail.

It is on this relatively slim common law commentary that the regime for lawful abortions in New South Wales has since relied. Women's reproductive rights deserve better. They deserve complete clarity. Women have a right to be free of lingering doubts.

I acknowledge that while this common law interpretation does mean that, to date, convictions under the Crimes Act have been rare, the risk of charge and conviction remains. This threat inevitably impacts on women seeking those health services. It also impacts on medical and other health practitioners. They are left in a grey zone of the law, caught between the possibility of criminal action and their professional obligations to provide appropriate and safe care to their patients. In 2017 a woman in New South Wales was prosecuted for taking a termination drug to abort her pregnancy. If the prosecution had chosen to take the matter to the District Court, the potential penalty would have been imprisonment for 10 years. But the prosecution took the matter to the Local Court, where the maximum penalty available was two years. The woman in this case had a conviction recorded and a three-year good behaviour bond was imposed.

I turn now to the concern for some members on the issue of late-term abortions. I accept this is an issue of some soul-searching and genuine anguish. However, I note that the terms of the bill that recognise 22 weeks as the point at which medical oversight is required is consistent with the recommendations of the Queensland Law Reform Commission report, which was reached after a lengthy review and extensive consultation. The Queensland Law Reform Commission determined that 22 weeks was the appropriate threshold, because it represents the stage immediately before possible survival. This is in line with NSW Health guidelines and is supported by the New South Wales Australian Medical Association [AMA], the Royal Australian and New Zealand College of Obstetricians and Gynaecologists and the Australian Council of Nursing. On 2 August the Royal Australian and New Zealand College of Obstetricians and Gynaecologists issued a statement, which is worth reading on to the record:

A late abortion is only ever performed when there is a compelling clinical need and should follow extensive consultation with the woman and her treating practitioner. The instance of late abortion is slow and there is no evidence, and no reasons to believe, that removing abortion from the Criminal Code will change current clinical practice, nor the number of abortions that will be performed.

Late terminations in NSW are currently performed in accordance with their professional and ethical standards, with reference to the NSW Health framework.

Most terminations take place during the first trimester. I note that the advice I have received is that 91 per cent to 95 per cent occur before 14 weeks' gestation. Around 1 per cent of terminations conducted in the second trimester occur after 22 weeks' gestation and they are uncommon. Many of those 1 per cent of terminations occur because genetic and/or other abnormalities only become apparent later in gestation. I note that today's *Sydney Morning Herald* features a story written by a woman who experienced the heartbreaking decision of a late-term abortion due to the diagnosis of hyperplastic left heart syndrome. She wrote about the agonising choice she and her partner made:

If you don't want an abortion then don't have one, but don't leave the crime lurking in the law. Women, including those in late term pregnancy—must have a chance to be informed and make a choice they do not take lightly or find easy. There was nothing easy about my decision; it was the hardest one I have ever made.

Legislating for a 22-week gestational limit allows time for the diagnosis of fetal abnormalities, providing pregnant women and practitioners the opportunity to make an informed decision. The bill provides that after 22 weeks there is additional oversight by a second doctor. I stress that this is a stricter provision than currently applies in New South Wales. Under the current common law provisions there is no gestational threshold that requires the additional oversight of a second doctor, and as the Royal Australian and New Zealand College of Obstetricians and Gynaecologists stated:

A late abortion is only ever performed when there is a compelling clinical need.

I absolutely refute the spurious arguments that abortions are conducted for no reason at all up until the day of birth. Doctors have ethical and professional obligations that ensure they will not facilitate late-term abortions unless there is a compelling clinical need. For those arguing for amendments to this provision of the bill, I say categorically that those amendments are not required. Doctors will continue to meet their clear professional and ethical requirements regarding late-term abortions and this will continue to be medical practice in New South Wales as it is across all other States and Territories in Australia.

The bill also recognises and addresses the ongoing risk arising from unqualified individuals who may seek to offer termination services without appropriate medical support. With the passing of the bill there is a hope that women will be less attracted to seek out the services of unqualified individuals. Schedule 2 to the bill inserts a new offence of "termination of pregnancies by unqualified persons" in the Crimes Act. Under this offence—which again reflects the law in Queensland and Victoria—an unqualified person who performs or assists in the performance of a termination will be subject to penalties of imprisonment up to seven years.

I turn now to an issue raised publicly by some who oppose the bill. It has been suggested that doctors should continue to be regulated under the Crimes Act in relation to their conduct pertaining to termination of pregnancies. As the Minister for Health and Medical Research I can assure the House that doctors in New South Wales are regulated by appropriate professional and statutory bodies in every aspect of the delivery of their medical services. If they breach their obligations they can be dealt with through those avenues. They can be deregistered and, depending on the extent of their activities, could be subject to civil proceedings and/or criminal offences. The issue of informed consent has also been raised by some members in this place and others in the community. Nothing in the bill changes the current requirements for informed consent—nothing. The AMA's *Good medical practice: a code of conduct for doctors in Australia* states:

Informed consent is a person's voluntary decision about medical care that is made with knowledge and understanding of the benefits and risks involved.

The information that doctors need to give to patients is detailed in guidelines issued by the National Health and Medical Research Council. Its *General Guidelines for Medical Practitioners on Providing Information to Patients* lists several matters it believes treating doctors must discuss with their patients before conducting an examination and/or treatment. Those matters include the possible or likely nature of the disease or illness the doctor proposes to treat; the proposed approach to investigation, diagnosis and treatment; what the proposed approach entails; the expected benefits; the common side effects and material risks—the test being would a reasonable person in the patient's position attach significance to the risk if it were explained to them fully?

The list also includes whether the intervention is experimental or conventional; who will conduct the intervention; the degree of uncertainty of any diagnosis arrived at; the degree of uncertainty about the therapeutic outcome; the likely consequences of not choosing the proposed diagnostic procedure or treatment, or of not having any procedure or treatment at all; any significant long-term physical, emotional, mental, social, sexual or other outcome associated; the time involved; and the costs involved, including out-of-pocket expenses, not just those covered by health insurance, if any.

The National Health and Medical Research Council also recommends that treating doctors encourage patients to ask questions about what is being proposed and the financial implications of undergoing that treatment. This not only includes the patient in the decision-making process, but also enables the treating doctor to gauge the patient's concerns and ascertain what the patient deems to be important. Similarly, NSW Health has a 40-page policy directive Consent to Medical Treatment - Patient Information. The directive states:

As a general rule, no operation, procedure or treatment may be undertaken without the consent of the patient ... Adequately informing patients and obtaining consent in regard to an operation, procedure or treatment is both a specific legal requirement and an accepted part of good medical practice.

It goes on to state:

Consent to the general nature of a proposed operation, procedure, or treatment must be obtained from a patient. Failure to do this could result in legal action for assault and battery against a practitioner who performs the procedure. A number of criteria will need to be met for a patient's consent to be valid. First, the person must have the capacity to give consent—that is, the person must be able to understand the implications of having the treatment. The second requirement is that the consent must be freely given. The patient must not be pressured into giving consent. This would include pressure from hospital staff, a medical practitioner or family. Pressuring a patient into making a quick decision could be considered coercion.

Thirdly, the consent must be specific and is valid only in relation to the treatment or procedure for which the patient has been informed and has agreed to. Finally, the patient must be informed in broad terms of the procedure that is intended in a way the patient can understand. Those criteria must be met irrespective of whether the consent is obtained in writing or orally. The mere mechanical signing of a consent form is, of itself, of limited value. I note in passing there are also specific requirements regarding informed consent to minors. Informed consent is not a new idea for doctors and there is no need for it to be put into the Reproductive Health Care Reform Bill as it is already existing practice.

I turn now to the issue of conscientious objection by medical practitioners. I acknowledge there are, of course, strongly held and differing views about the provision of termination services across the medical and other health professions. It is therefore important to note that clause 8 of the bill will give statutory recognition to practitioners who have a conscientious objection to performing or assisting in a termination. The clause provides for a practitioner who objects to advising on, performing or assisting in a termination to declare this objection to their patient and refer them to another practitioner who they know or believe will provide such a service. There is no compulsion to continue to provide care in those circumstances. The only exception is when the practitioner owes a separate professional duty to act in an emergency. The bill makes it clear that this duty will continue.

I am extremely concerned at the claims by some organisations and individuals opposed to the bill that the Reproductive Health Care Reform Bill in some way imposes new conditions on doctors and health practitioners who have a conscientious objection. Let me be clear: The Reproductive Health Care Reform

Bill 2019 imposes no new requirements on doctors who have a conscientious objection. Doctors do not even have to put the referral in writing. It can be as simple as giving the name of another medical practitioner. Doctors are already required under their medical registration, which is the national regulatory law of Australia, to inform a patient of any conscientious objection they hold and to not use that objection to impede access to treatments that are legal nor allow moral or religious views to deny patients access to medical care.

Similar policies are in place in the New South Wales public health system and the Australian Medical Association Code of Practice. Further, the bill does not alter in any way the existing provisions that, regardless of conscientious objection, in an emergency there is still an obligation to provide care. The Australian Medical Association Statement on Conscientious Objection issued in March 2019 recognises the necessary balance between personal views and the professional obligation to act in an emergency, stating:

A doctor should always provide medically appropriate treatment in an emergency situation, even if that treatment conflicts with their personal beliefs and values.

As I have already said, the changes set out in the Reproductive Health Care Reform Bill are long overdue in New South Wales. If they pass they will finally ensure that women in New South Wales are able to lawfully access the same range of reproductive healthcare services that are available to women in Queensland, Victoria and all other States and Territories. The bill represents a considered and sensible approach; it is sensitive to differing views and seeks a fair and appropriate compromise on those issues. I believe that 119 years after an all-male Legislative Assembly enacted the laws that currently regulate women's termination of pregnancies in the Crimes Act 1900 that this Reproductive Health Care Reform Bill reflects and is in step with the expectations and views of the majority of the public of New South Wales.

Recalling the fight that the first elected woman to this Parliament, Millicent Preston-Stanley, had on a range of topics to support women's family planning almost 95 years ago, I note that she also had challenges in reforming women's health. It was not easy then and it is not easy today. I note that she called for Sydney university at the time to establish a chair of obstetrics. Instead, the university established a course in veterinary obstetrics, leaving her to declare that the university had "horses rights for women". Today, 95 years on, let us just simply ensure rights for women in their reproductive health are finally delivered. I thank all honourable members who have taken part in the cross-party involvement with the Independents to make sure that we have delivered to this place today a bill for the twenty-first century. I commend the bill to the House.

Ms YASMIN CATLEY (Swansea) (12:45): Today I speak in favour of the Reproductive Health Care Reform Bill 2019. This is an historic bill. It is time that women's reproductive health care was treated as a health matter and not a criminal one. Mr Speaker, you will hear me say this again and again throughout my speech: There is no place in the criminal law in this State for abortion. In fact, we are the last State in Australia to have abortion unamended in the criminal code. The bill seeks to rectify this antiquated approach to abortion by removing archaic provisions from the Crimes Act and establishing a statutory system for medical supervision for abortions in this State.

Currently the Crimes Act makes it a criminal offence to procure an unlawful abortion. Women can and have been prosecuted for procuring an abortion. Many would be surprised to learn that as recently as 2017 a Sydney woman was prosecuted for self-inducing an abortion. In fact, many in our community are unaware that abortion remains in the Crimes Act. Those laws are out of step with public perception and expectations and out of step with people's experiences of the law and our healthcare system. In fact, 76 per cent of people in New South Wales are unaware that abortion still remains in the Crimes Act and research has shown that 73 per cent of people in this State actually support the decriminalisation of abortion and regulating it via our healthcare system.

We must change the law on reproductive rights as there is no place in the criminal law in this State for abortion. The co-sponsors of the bill in this place and the other place are most certainly evidence of that. Behind those co-sponsors in their parties are women and men who also support this vital change to the law. I particularly acknowledge those co-sponsors—including of course the proposer of the bill, Alex Greenwich—Trish Doyle, Ryan Park, Penny Sharpe, Jo Haylen, Jenny Aitchison, Shelley Hancock, Brad Hazzard, Jenny Leong, Leslie Williams, Trevor Khan, Abigail Boyd, Felicity Wilson, Emma Hurst and Greg Piper. Never before have we seen such support for a bill, which symbolises the importance of this legislation before us today. I am so proud of each one of them and proud to be in this Parliament with them.

The Reproductive Health Care Reform Bill 2019 makes the law clear on abortion and the reproductive rights of women. Specifically it enables a termination of a pregnancy to be performed by a medical practitioner on a person who is not more than 22 weeks pregnant; enables a termination of a pregnancy to be performed by a medical practitioner on a person who is more than 22 weeks pregnant in certain circumstances; identifies certain registered health practitioners who may assist in the performance of a termination; requires a registered health practitioner who has a conscientious objection to the performance of a termination on a person to disclose the

objection and refer the person to another practitioner who does not have a conscientious objection; repeals offences relating to abortion in the Crimes Act 1900 and abolishes any common law rules relating to abortion; and amends the Crimes Act 1900 to make it an offence for a person who is not a medical practitioner otherwise authorised under the Act to terminate a pregnancy.

I must briefly discuss the rationale behind the specifics of the bill. Firstly, as I have previously mentioned, the bill places reproductive health care, specifically abortions, where they belong—away from our criminal code. Secondly, sections 82, 83 and 84 of the Crimes Act 1900 are rarely prosecuted. Since *R v Wald* in 1971 a medical practitioner may perform a termination where, in their honest belief, there is a serious danger to the woman's life or to her physical or mental health. Our courts have broadly interpreted this decision by considering economic, social and medical grounds when determining "serious danger", and the interpretation includes the time both before and after the pregnancy.

Thirdly, this bill provides much-needed clarity for the medical profession on the legality of abortions in this State. While there is only a small number of prosecutions, there is still uncertainty for doctors and other healthcare professionals who provide abortion services. The bill provides certainty about what is lawful and unlawful. Importantly, it provides clarity around late-term abortions. Medical practitioners will now be able to rely conclusively on the statutory requirements as a base-level standard their services must meet. Specifically, clause 5 of the bill allows a medical practitioner to perform a termination on a person who is not more than 22 weeks pregnant. The 22-week threshold was decided upon after much consultation with medical professionals, including the Australian Medical Association [AMA] and The Royal Australian and New Zealand College of Obstetricians and Gynaecologists. In 2018 the Queensland Law Reform Commission and the associated law reform in Queensland recommended a 22-week threshold because it:

- represents the stage immediately before the 'threshold of viability' under current clinical practice;
- aligns with the Queensland Health Clinical Services Capability Framework for Public and Licensed Private Health Facilities ... pursuant to which terminations from 22 weeks gestation are required to be performed at particular hospitals;
- aligns with local facility level approval process adopted at the Royal Brisbane and Women's Hospital; and
- reflects that terminations after 22 weeks involve greater complexity and higher risk to the woman.

The Royal Australian and New Zealand College of Obstetricians and Gynaecologists stated in its correspondence with stakeholders on this matter:

The decision as to whether or not to have an abortion, or to continue a pregnancy, is multifactorial and is between a woman and her medical care provider.

In the case of a late-term abortion, it states:

... involvement of two doctors and a multidisciplinary team is desirable, but should not be mandatory, and should not obstruct a woman's right to determine the course of action that she chooses to take. A multidisciplinary team may include, but not be limited to, fetomaternal medicine specialists, neonatologists, geneticists, social workers, psychiatrists or other mental health specialists.

The community women's campaign Our Bodies Our Choices notes that while there are many discussions about late-term abortions, the majority of abortions take place in early pregnancy and it is estimated that no more than 3 per cent of abortions take place after 20 weeks gestation. Currently in New South Wales abortions taking place after 20 weeks usually occur in a hospital setting in consultation with doctors, nurses, fetal medicine specialists, social workers and hospital ethics staff. They are not light decisions; they are considered, made with teams of professionals, and with the women at the centre of that decision-making process. Our medical community is extremely adept at dealing with the complexities of all forms of abortion. The bill simply seeks to remove uncertainty for those medical practitioners.

I pay tribute to the professionalism and commitment of doctors, nurses and other healthcare professionals across this State to women's health care. We thank them all for their hard work. Contrary to what some would have us believe, the Reproductive Health Care Reform Bill does not seek to do anything radical. However, what it seeks to do is remove an antiquated obsolete law that has no place in today's society. Abortion has no place in the Crimes Act 1900. As reported in *The Guardian* just last week, the Australian Medical Association stated that the current legislation places women and doctors under a "different and stigmatised legal arrangement to other States". The AMA's statement calls for the clarity the bill provides. The statement in *The Guardian* continued:

The bill "reflects the common law entitlements that currently exist, while removing the stigma and legal uncertainty associated with abortion being included in the Crimes Act ..."

Currently New South Wales law makes abortion a crime under sections 82, 83 and 84 of division 12 of the Crimes Act 1900. Under that Act the procurement of an abortion can attract a punishment of up to 10 years in prison. It is unfathomable that a woman seeking to access a basic healthcare service and the doctor seeking to provide that

service could spend time in prison. In fact, there would be many among us in this House, in the gallery, in this building and in this city who quite easily could have fallen victim to those archaic laws.

Abortion is an accepted form of health care and should no longer be considered a crime. In fact, abortion is enshrined in human rights law. It is a common and completely safe procedure. Many in our State do not even know, as I have said, that abortion is still considered a crime. We are far behind our colleagues in other States on this matter. When we compare the range of services and rights available to women across this country, New South Wales lags behind. Abortion has been decriminalised in Western Australia, Victoria, Tasmania, the Northern Territory, the Australian Capital Territory [ACT] and, most recently, Queensland in 2018. South Australia has partially amended its laws. In those States and Territories abortion is available upon request anywhere from 16 weeks up to 22 weeks, except in the Northern Territory where abortion is available if the doctor is satisfied of certain matters. In those States the conscientious objection of doctors is recognised. In all States and Territories, except the ACT, doctors with a conscientious objection must redirect the woman to an abortion service.

The road to this bill has been a long one. Quite frankly, law reform in this area is long overdue. As the Minister said, it is 118 years overdue. Our laws on abortion under the Crimes Act are based on a regime in the United Kingdom that is older than a century. That regime was removed by the UK Abortion Act 1967. The UK understood that that law was antiquated and sought to remove it many years ago. Clearly, New South Wales is behind the times. The substantive debate on the bill is not about whether individuals believe abortion is right or wrong. It is a debate about the proposition that abortion is a basic healthcare service for women across our State and not a criminal act, as our laws would have us believe as they stand now. Individuals should have the right to access those services as health care if they choose, and that includes women in regional and rural New South Wales. Many people have gone before me fighting for this day when women may freely choose to access services—a day when abortion is no longer considered a crime in our State; a day when it is considered a basic healthcare service in our community.

I will take some time to thank those women. This morning outside the Parliament's fence, Wendy McCarthy addressed the crowd of hundreds of activists supporting the bill. Undoubtedly we would not be here today without her hard work, activism and legacy. We thank her for that. Wendy's career began as a secondary teacher. However, she became involved in activism when she was newly pregnant. She and her husband joined the Childbirth Education Association, fighting for the right for her husband to be present at the birth of their child. What an idea! She founded the New South Wales branch of the Women's Electoral Lobby and went on to work at the Family Planning Association of New South Wales. Later she became the CEO of the Australian Federation of Family Planning Associations. Wendy McCarthy has spent decades advocating, educating and furthering the fight for fair and equitable access to reproductive health in our State and, indeed, across the country. She is known and loved by many who have come after her, fighting for better rights to reproductive health care. It is only fitting that we recognise her work today in Parliament.

Wendy is just one of many women who have fought for decades to repeal unfair laws that restrict women's rights to access abortion and stigmatise the provision of safe, legal abortion. We have also had many incredible trailblazers in this Parliament fighting for better rights for women. The Minister quite rightly mentioned Millicent Preston-Stanley. I am a member of the Labor Party and many members in the Labor Party—women and men—have a proud history in standing up for women's rights. I mention Helen Westwood and Penny Sharpe, who worked together tirelessly to achieve better reproductive rights for women. Some years back Helen had a particularly strong voice in the debate on Zoe's law. Penny has fought in this Parliament for many years for reproductive healthcare rights for women. Most notably, her work on safe access zones for reproductive healthcare clients has meant that women are no longer harassed or intimidated when they are simply trying to access reproductive healthcare services in all their forms. She has a lot to be proud of.

Each debate, fight and bill in Parliament has brought us one step closer to this bill. I also thank my other Labor colleagues, including Labor's new shadow Minister for Women and the Prevention of Domestic and Family Violence, Trish Doyle; the member for Summer Hill, Jo Haylen; and the former shadow Minister for the Prevention of Domestic Violence and Sexual Assault, Jenny Aitchison, who have all co-sponsored the bill. This list is not exhaustive and it is always dangerous when we start mentioning names, but I mention some former women members from the Labor Party—Meredith Burgmann, Ann Symonds, Verity Firth and my good friend Carmel Tebbutt. There are so many more, but those women have helped shape the women who are in Parliament today. We owe an awful lot to them.

I also acknowledge the many groups that have led the charge: Our Bodies Our Choices; NSW Society of Labor Lawyers; Women's Electoral Lobby; the Royal Australian and New Zealand College of Obstetricians and Gynaecologists; NSW Pro-Choice Alliance; Human Rights Law Centre; Fair Agenda; women's health services, including those in the Illawarra and on the Central Coast; Pro-Choice NSW; Family Planning NSW; Women's Legal Service NSW; Arrest us activists; Rape and Domestic Violence Services Australia; NSW Council of Social

Service; various nurses and doctors organisations; supportive religious groups, including the Uniting Church; and the activists whom I consider my friends, Claire Pullen, Emily Mayo, Rosie Ryan and many more.

I also mention our supportive communities of faith. Like all communities, people of faith have varying opinions on abortion, as I, a person of faith, have my view, and I speak to my God about that. The Uniting Church has been standing beside us at the rallies outside Parliament House and has provided statements of support for the bill. It has demonstrated that many in our religious communities support the decriminalisation of abortion and the reform of reproductive healthcare laws in New South Wales. I share that view.

The activists and medical professionals have fiercely and strongly supported the bill and others of this nature before Parliament. They have been here for the long haul for this thankless work. However, we thank them on behalf of all women across our State. While others outside this place would have you think that this is a controversial bill, it is, in fact, not terribly controversial. In fact, no opinion poll in 50 years in Australia has found a popular majority opposed to broad access to abortion and no opinion poll has found more than 10 per cent of voters opposed to abortion in all or almost all circumstances.

In fact, recent research shows that our community believes that abortions should be lawful either wholly or under some circumstances: 87 per cent believe abortion should be lawful in the first trimester, 69 per cent believe abortion should be lawful in the second trimester and 48 per cent believe abortion should be lawful in the third trimester. The law in New South Wales has not caught up with society, but this week in this Parliament it has the opportunity to do so. I hope that is the outcome. I acknowledge the hundreds of people who joined together outside Parliament House this morning to support the bill. Their support and their advocacy have given many of us in here the strength to keep fighting for reform. It is important that we remember and acknowledge those women who have been personally impacted by the archaic nature of our law. In honour of those women fighting this battle outside this place, I will tell some of their stories in this House because I strongly believe it is their story that we are here to tell today. The shadow Minister for women handed me some of those stories and asked me to read them onto the record. This is the first story:

I'm 47 years old. I have 2 healthy kids. Age 13 and 12. 20 years ago I got pregnant to my husband and father to my children at a time I was struggling with severe mental health issues. I was suicidal and self-harming. For me abortion was the only healthy choice. Adoption was not an option. I was too unwell to safely carry a baby and it would have pushed me over the edge.

I don't regret my choice one bit and know I would not have been a fit mother. Years later when I was well and had babies I still had depression and post-natal depression but I knew I was in a good enough head space to cope with it. If I had had my baby 20 years ago I don't know if I would be here to write this now. It is a choice all women should have.

This is the next story:

I've had two terminations, one at 19 and one at 27, both times I was in no position to be raising a child. At 19, my first boyfriend and I got pregnant whilst 'on a break'. He was with someone else and, when I told him, he decided he did not believe me and he walked out of my life.

My mother took me to the clinic on Macquarie Street and said that, whilst she would support me either way, she was by no means about to raise another child and I'd need to decide if I could do this myself. I could not.

At 27, I was living in Scotland and in a relationship with a lovely man but my visa was expiring and I had to go home. He freaked out and we broke up, I peed on a stick in Hungry Jack's on Princes Street, Edinburgh, told him the result and we held each other and cried.

I flew home, he sent some money and, again, I went to the clinic. I could have a 27 year old and a 21 year old now but I also know my life would have turned out very different had I not had access to a safe procedure. At 40, I met my husband. We did three rounds of IVF, all unsuccessful but I do not regret my decisions for one second. Please change the law so that women in NSW are kept safe from harm. I accidentally conceived at 35, I'd been married for years, our relationship was strong and happy, we had decent jobs, fair health... abortion isn't supposed to be 'meant' for women like me. But I was childfree before it even had a name.

Unlike any of my friends growing up, I never wanted kids. My family all just thought I'd change my mind. I never did. When I got caught out during changing my contraception it was a no-brainer. That said, it was harder than I thought, even at 4 weeks those hormones were potent! I was sick, exhausted, my boobs hurt so much I showered with a bra on for the week prior to my procedure, and my emotions were all over.

If my partner had wanted it, I might have capitulated. I knew if I let things develop all those maternal feelings would finally develop and I'd be a great parent and (just like every other parent I know) I'd think it was the best thing I've ever done! But I didn't want to be a parent, and thankfully neither did my partner.

So off I went to a local clinic for an abortion at 5 weeks gestation. I had a surgical under an aesthetic and within hours started feeling sane and like I was getting my body back. It's the best thing I've ever done.

Lastly:

I was 19 and off the pill due to side effects and the condom broke. I had only been seeing the guy for a few months and neither of us wanted a child or were in a position emotionally or financially to care for a child.

I chose to have an abortion. It cost me \$300 ...

The clinic staff were lovely, luckily no protestors outside that day. I had no shame about what I was doing so probably would have gotten in an argument with them!

In the waiting room I remember a very angry looking father with a very sad looking daughter around my age.

My mum came with me.

I had the procedure then woke up in a big chair in a room with a few ladies who were also finished. We were all wearing colourful sarongs and they gave us a biscuit. The vibe in the room was light and friendly.

After being given the all clear, mum drove me home and I camped on her couch for the rest of the day before going back to my house.

At no stage of my life have I regretted having the abortion. There is NO WAY I would bring a child to term only to give them away and have them feel abandoned. There was NO WAY I would bring a child into what would have certainly ended up as a single parent house and struggled financially for the rest of our lives and had the child deal with poverty and being abandoned by a father who didn't want them. And I didn't want a child. So who knows what kind of mother I would have been.

I'm now 36 and have no kids because I still don't want any and am so grateful for my life, my career, my freedom.

I truly believe this is the best outcome for society.

I have also had friends who have had late term abortions. And NONE of them wanted to. But when you're told your baby you've been hoping and wishing and dreaming of has no brain and has zero chance of survival and when it is born then having an abortion AND GIVING BIRTH AND HAVING A FUNERAL is the only option and it is devastating.

Abortion is enshrined in human rights law. Most people do not know abortion is still a crime in New South Wales, and we know that the vast majority of people in this State support the right to choose. For me, it is simple. There is no place for abortion in the criminal law of New South Wales. Doctors, healthcare practitioners, policymakers, lawyers, activists and many members in this Chamber agree. We are the last remaining State to have these outdated, archaic laws hanging over the heads of women and the medical practitioners who are trying to deliver health care to them. It is time to decriminalise abortion in this State. I urge my colleagues in this place to support the bill. I commend the Reproductive Health Care Reform Bill 2019 to the House.

Mr Kevin Conolly: As the first speaker in opposition to the bill, I seek leave to move a motion to suspend standing and sessional orders to permit me to speak for a period of up to 30 minutes during the second reading debate on the Reproductive Health Care Reform Bill.

The SPEAKER: Are you seeking leave to suspend standing orders to move such a motion?

Mr Kevin Conolly: I am seeking leave to suspend standing orders to move such a motion, yes.

Ms Jenny Leong: I seek leave to speak to the member's motion.

The SPEAKER: It is not open to contributions. It is a question of whether anyone objects to the member for Riverstone seeking leave to suspend standing orders.

Ms Jenny Leong: I seek leave to make a personal explanation.

The SPEAKER: I will seek the advice of the Clerk. It is not appropriate for a member to give a personal explanation; this is not a matter that would attract a personal explanation. The member for Riverstone asked me what would be necessary to extend the time available to him, as the first speaker in opposition to the bill, to put the case for the opposition. On the advice of the Clerk, I advised him that the only way for him to do that would be to get the leave of the House—given that he is a backbencher and not a Minister who can move a motion for the suspension of standing orders at any time. If any member objected, leave would not be granted. If leave were granted, the member for Riverstone would then be able to move a motion for the suspension of standing orders. That would be a separate question, which the member has foreshadowed would be for him to have extra speaking time of up to 30 minutes. If that motion was not agreed to he would get the standard 10 minutes, plus five minutes speaking time. The question is whether the member is given leave to move a suspension of standing orders motion.

Ms Jenny Leong: I seek leave to make a contribution and put on record—

The SPEAKER: I have sought advice. It is not appropriate to do that at the moment. The member for Newtown can speak to the suspension of standing and sessional orders motion if it is moved, but she cannot speak to the request for leave. The question is whether leave is granted. If it is, we will go to the next stage, when members will have the opportunity to speak and the member for Newtown will be able to oppose the motion if she wishes. Is leave granted?

Leave not granted.

The SPEAKER: The member for Riverstone will have the call when we return to debate on the bill after question time. I shall now leave the chair. The House will resume at 2.15 p.m.

Debate interrupted.

*Visitors***VISITORS**

The SPEAKER: I extend a very warm welcome to Karl Tartak and Reverend Father Elie Rahm, guests of the Minister for Police and Emergency Services and member for Baulkham Hills, as well as the Hon. Natasha Maclaren-Jones in the other place. I welcome to the Chamber Joe Andrade. Joe was a former member of staff in the Office of the Speaker for some 25 years. Joe is the guest of the Minister for Local Government and the member for South Coast. I also welcome to the Chamber students from Woodport Public School and their principal, Judy Boland, and teacher, Jenni Bladwell. They are guests of the Government Whip and member for Terrigal. I also welcome Heather Lawson, president of Harbord Public School P&C, and Margaret Martin, president of Manly Selective Campus P&C, guests of the member for Manly. I know that the member for Manly hosted a larger group of P&C representatives today. Well done.

I acknowledge Professor Kerin Fielding, wife of the member for Wagga Wagga, and Professor Fielding's sister Vikki Cook and her husband, Alan, and their son Matthew Walsh. Welcome to Professor Fielding's sister Gail Waizer; her husband, Anthony; and the member for Wagga Wagga's friends visiting from France, Daniel and Maryline Preteseille. I also acknowledge Casey Carpenter, a University of Technology Sydney student participating in a parliamentary internship program, guest of the member for Lakemba. I acknowledge the member for Ballina's nephew, Isaac Fazledeen, in the public gallery today. Finally, welcome to guests from Queensland University of Technology.

*Announcements***PARLIAMENT VIDEO PRODUCTION**

The SPEAKER: I again notify members, who have been advised via email, that a video crew will be filming in Parliament tomorrow and on Monday 12 August. The video will be used on screens around Parliament House, on the website and intranet, and at relevant events. It will feature members and parliamentary staff as they go about their jobs in this place. I note that appropriate conditions have been applied. I thank all members in advance for their cooperation.

*Notices***PRESENTATION**

[During the giving of notices of motions]

The SPEAKER: I call the member for Keira to order for the first time.

*Question Time***ARTS AND CULTURAL PROJECTS**

Ms JODI McKAY (Strathfield) (14:21): I put it to the Premier that her Government is lurching from bungles to blowouts to building disasters. Will she give an ironclad guarantee that the Sydney Modern Project will cost no more than \$344 million, the Walsh Bay Arts Precinct will cost no more than \$245 million and the Powerhouse Museum relocation will cost no more than \$1.17 billion?

Ms GLADYS BEREJIKLIAN (Willoughby—Premier) (14:21): It is great to get an acknowledgement from the Leader of the Opposition of how much this Government is doing in New South Wales. We are building not only the roads, the rail, the schools and the hospitals but also the cultural and sporting precincts. It is about time that the Opposition supported us. I am very pleased to lay it out in detail, and I apologise for getting a bit excited but infrastructure in New South Wales excites the Government. When we came to Government the Opposition had left a trail of destruction.

Mr Ryan Park: Talk about light rail.

Ms GLADYS BEREJIKLIAN: I will talk about light rail. The member for Keira has asked me to talk about light rail; I am happy to talk about light rail.

The SPEAKER: Order! I remind the member for Keira he is already on a call to order and I will place him on another one if he continues to interject.

Ms GLADYS BEREJIKLIAN: Let us go one step back from the money required to build infrastructure—a strong economy and a strong budget is needed to do that. When we came to Government we made sure that happened, something members opposite demonstrated time and again they could not do. I am very proud of not only the record of what we have delivered in the last eight years but also what we have delivered since the election.

Ms Jodi McKay: Point of order: We are seeking an ironclad guarantee on those three projects that I mentioned. My point of order relates to Standing Order 129. The Premier is not being relevant. We want an ironclad guarantee.

The SPEAKER: The Premier is being relevant and will continue.

Ms GLADYS BEREJIKLIAN: My colleague suggested I should give an ironclad guarantee, which I have never heard of.

Ms Jodi McKay: Point of order: It relates to Standing Order 129. I am comfortable with whether it is ironclad or ironglad—just give a guarantee.

Ms GLADYS BEREJIKLIAN: I suggest to the new Leader of the Opposition that those opposite put their questions through their tactics committee before they ask them in this place because they do not like the answer. The answer is that since the election we have demonstrated our capacity not only to deliver the infrastructure projects we have announced but also to provide New South Wales with projects for the future. Since the election we have opened the Sydney Metro Northwest, the M4 tunnel and 22 new schools this year alone and we have seen major projects—

Ms Jodi McKay: Point of order: The question does not relate to roads or transport; it relates to the Sydney Modern, the Walsh Bay Arts Precinct and the Powerhouse Museum. We are seeking a guarantee on cost.

The SPEAKER: The Premier has responded relevantly to the question.

Ms GLADYS BEREJIKLIAN: I stress this point, as I do for all of our projects: We will continue to work hard to make sure our projects are built on time and on budget.

The SPEAKER: I warn the member for Shellharbour she will be called to order.

Ms GLADYS BEREJIKLIAN: Our strong economy and our strong budget means that the 1,000 projects we have on the go will be completed.

EDUCATION WEEK

Mrs TANYA DAVIES (Mulgoa) (14:26): My question is addressed to the Premier. Will the Premier update the House on how the Government is delivering high-quality education for students across the State and are there any alternatives?

Ms GLADYS BEREJIKLIAN (Willoughby—Premier) (14:26): I thank the member for Mulgoa for her question. I note that since the day she was elected to this place education and supporting young people have been an absolute priority for her. I acknowledge that it is a very appropriate question to ask in Education Week. In particular, I thank the students of Woodport Public School who are in the gallery today. They caught the train down from the Terrigal electorate to be here today and I acknowledge the Whip for inviting them here during Education Week. I pass on an anecdote given to me by their teacher who is with them today: they were so well behaved and represented their school so well whilst on the train that a citizen rang up the school to congratulate them. We are very proud of them; they are an example to all other students. Yesterday I was very pleased to join local Federal and State members of Parliament—the member for Londonderry was present—to launch Education Week. I acknowledge the great work done by the Minister for Education. We want to ensure that Education Week is about schools not only in Sydney or on the Central Coast but also in Dubbo and further west where we see the many different ways in which our students and schools are excelling.

The SPEAKER: I call the member for Shellharbour to order for the first time.

Ms GLADYS BEREJIKLIAN: Yesterday's launch of Education Week occurred at the same time at two locations—St Mary's North Public School and Dubbo College. I thank both schools for doing such a great job in launching Education Week. The shadow education Minister has not had a lot to say on education but she has got a lot to say now. I still do not know why the member for Lakemba was moved from his job. In all seriousness, I commend the member for Lakemba for the role he played as shadow Minister for Education because I acknowledge that on important weeks like Education Week he attempted to have a bipartisan position.

The SPEAKER: I call the member for Londonderry to order for the first time.

Ms GLADYS BEREJIKLIAN: Education Week is an important opportunity for us not only to acknowledge all the students and their goals and achievements but also to thank all of the hardworking teachers and principals and all the support staff who make our schools the special places of learning that they are. The Government has ensured that we have set aside sufficient funds to upgrade 190 schools. To compare how much those opposite spent on infrastructure I asked for the last budget they set out and I applied the consumer price index. When Labor left government the infrastructure budget for education was around \$695 million. In today's

dollars that equates to \$834 million. This Government's capital budget for the next year alone is \$2.2 billion—more than double Labor's budget. I am all for comparing apples with apples but we are leaving Labor behind when it comes to increasing—doubling—the money we are spending on infrastructure. We know that it is not just the dollars for infrastructure—

The SPEAKER: Order!

Ms GLADYS BEREJIKLIAN: I know that many people in the gallery want to hear me speak about education and I appreciate them respecting Education Week. It is not just about the bricks and mortar we are building; it is also about what is happening inside the classroom. The Bump it Up program we have introduced is proving to be extremely successful. The program focuses on schools that we believe have the potential to do better in literacy and numeracy—key core learning—and on the students. We have seen some amazing results in the 137 schools we have piloted and we are now rolling out the program across all schools to ensure that every child, no matter what school they attend, has the chance to improve their literacy and numeracy—key core subject areas. *[Extension of time]*

In addition to the Bump it Up program we have specific targets for how many students we would like to see improve their literacy and numeracy outcomes. We know that what you learn in your secondary education sets you up for the future. Whether you get a job or continue your study, whether you go to TAFE or university, your school life is critical for that learning experience. I am very pleased to say that we are focusing also on ensuring that students of Aboriginal heritage also have the opportunity to not only know about their culture but finish the HSC. Currently only 30 per cent of students of Aboriginal heritage are completing the HSC and we would like to see that increase.

If we truly believe in equality of opportunity, if we truly believe that every person in this State should be their best, we need to ensure that the education system reflects that. We are reflecting that not only in dollars but also in quality teachers and quality education in the classroom. I take this opportunity in Education Week to sincerely thank the thousands and thousands of teachers, principals, parents and citizens association members and support staff who make our schools special places of learning. In particular, I commend the students for doing their best. If yesterday's launch of Education Week is anything to go by, the future of New South Wales is in fantastic hands. Happy Education Week everybody.

BUILDING STANDARDS

Ms YASMIN CATLEY (Swansea) (14:33): My question is directed to the Minister for Better Regulation and Innovation. Will the Minister explain to the House how this Government's Building and Development Certifiers Act is improving the quality of building regulation and oversight in New South Wales?

The SPEAKER: I call the member for Maroubra to order for the first time.

Mr KEVIN ANDERSON (Tamworth—Minister for Better Regulation and Innovation) (14:34): I thank the member for Swansea for her question and for the opportunity to highlight the Government's good work in cleaning up the mess left by those opposite. I find it funny that an Opposition member is asking a question on Tuesday 6 August about what we are doing about certifiers. The work that has gone into cleaning up that mess has been going for some time—in particular, the reform that this Government is putting in place. The community knows of the reform process, the industry knows of the reform process and this Government knows of the reform process. It seems everyone except the Opposition knows of the reform process because they were too busy in the first half of this year trying to sort out their leadership issues. On 30 December 2018 we introduced the reforms on certifiers—the private certifiers debacle that those opposite introduced. On 26 October we closed loopholes for certifiers. Those who are asleep over there—

The SPEAKER: Order! That is enough interjecting from the member for Kiera and the member for Bankstown during this question.

Mr KEVIN ANDERSON: The industry, community and Government know about it, but not those opposite. I would be happy to brief the shadow Minister but I am not sure which member is the shadow Minister for Better Regulation and Innovation. Put your hand up. There is none. Hang on—there is one at the back. We will take one at the back and we will take one over there as well.

Ms Yasmin Catley: Point of order: My point of order relates to Standing Order 129. The question is very specific. I asked the Minister—

The SPEAKER: The Minister is being relevant. The Minister will continue. I have heard enough.

Mr KEVIN ANDERSON: There is a deal of amnesia across the hallway because last week we talked about appointing a Building Commissioner. Mr David Chandler is implementing the reforms from the Lambert

report which looked at introducing tough new regimes for certifiers. As a reminder for those opposite, the four-point plan is: a revamped compliance operation with 25 to 30 per cent of the industry being audited every year in a strike-force-style approach; a zero tolerance approach to dodgy certifiers; better protection for strata buildings; and increased transparency, which will include better protection for the mums and dads who buy into these properties in good faith. We welcome the appointment of the Building Commissioner, Mr David Chandler, which we announced last week. Quality, transparency and accountability is what we will be doing.

Our Building Commissioner will lead the implementation of the reforms of the building and construction industry, which were tabled last year. I do not know what those opposite were doing earlier this year—obviously looking at themselves in the mirror—but this will be the biggest shake-up of the building and construction industry in New South Wales. The reforms are about quality, accountability and transparency in the building and construction industry. We look forward to working with the New South Wales Building Commissioner, Mr David Chandler. In terms of those opposite asking what we are doing to close the loopholes for certifiers, we have a reform process in place. Those opposite were asleep at the wheel for many months. We are cleaning up the mess they left when they gave us private certifiers. We are getting on with the job of looking after the mums and dads who bought their dream houses in good faith. We are getting on with it.

Ms YASMIN CATLEY (Swansea) (14:39): I ask a supplementary question. We will see who is slow at the wheel. I refer to the Minister's answer. The Building and Development Certifiers Act 2018 is still not proclaimed. It has been 10 months since it was passed in this Parliament. Why did you not know that?

The SPEAKER: Order! I call the member for Kiera to order for the second time. I call the member for Kogarah to order for the first time. I call the member for Swansea to order for the first time. I call the member for Campbelltown to order for the first time.

Mr KEVIN ANDERSON (Tamworth—Minister for Better Regulation and Innovation) (14:40): I thank the member for Swansea for her question. I would like to enlighten her about where this Government is up to on the building reform process. An independent review of the Building Professionals Act 2005 conducted by Michael Lambert identified that the Act was not achieving its policy objectives—

The SPEAKER: Does the member for Swansea have a point of order? I direct the Minister not to encourage those opposite to act inappropriately.

Mr KEVIN ANDERSON: The Government's response committed to introducing a range of priority reforms, including the rewrite of the Building Professionals Act, clarity around a certifier's role and responsibilities, strengthening disciplinary procedures, enhancing independence and improving the facilitation of certifier's functions—basically a clean-up so that mums and dads have that confidence. The Building and Development Certifiers Act 2018, or the BDC Act, was assented on 31 October 2018 and is expected to commence very shortly. Work is underway in developing the supporting regulations which has been and will continue to be subject to public consultation. While those opposite have not been awake there have been significant consultations across the industry. We have been conducting industry roundtables; those opposite may not have been aware of that fact.

Ms Yasmin Catley: I am very aware.

Mr KEVIN ANDERSON: Obviously you have not been. The industry has been consulted on a number of issues that it would like to talk about. The plan to revamp compliance includes a new disciplinary policy penalising certifiers who do not comply with the legislation, better protection for strata buildings, a tougher and tighter code of conditions and provisions, and increased transparency to homeowners through an enhanced online disciplinary register. The audit program commenced in mid-April 2019. This work is ongoing and we can tell you about its quality, accountability and transparency. The focus has been on private certifiers with A1, A2 and A3 accreditation as those categories do the greater portion of the work. The first round of audits we selected showed an extensive review of high-risk certifiers.

As of this month, six audits have been fully completed and eight are in progress. The audit team consists of lessons learnt sessions to refine the audit process to clean up this process. It is expected the audits will reduce in time frame and the commencement of lower risk audits will further shorten time frames and increase the number of audits undertaken. The Building Professionals Regulation 2007 has been amended to temporarily allow professional indemnity insurance and be accepted with cladding exclusions.

Ms Yasmin Catley: Point of order: My point of order relates to Standing Order 129. The question was specifically about the Building and Development Certifiers Act and why the Minister has not known for 10 months that it has not been proclaimed.

The SPEAKER: The Minister has responded with detail on the proclamation and the operation of the Act.

Ms Yasmin Catley: We have had Opal, we have had Mascot, we have had Erskineville, we have had Zetland and we have had legislation in this place that has not been proclaimed.

The SPEAKER: The member for Swansea will resume her seat. The Minister has the call.

Mr KEVIN ANDERSON: The regulations are being worked on as per the consultation process that was implemented last year. They are coming.

WATER MANAGEMENT

Ms STEPH COOKE (Cootamundra) (14:45): I address a question to the Deputy Premier, and Minister for Regional New South Wales, Industry and Trade. Will the Deputy Premier update the House on how the Liberals and Nationals are defending regional communities that depend on water and are there any alternatives?

Mr JOHN BARILARO (Monaro—Minister for Regional New South Wales, Industry and Trade, and Deputy Premier) (14:45): I thank the member for Cootamundra and my Parliamentary Secretary. She is a fantastic Parliamentary Secretary serving a fantastic Minister. I thank the Parliamentary Secretary and member for Cootamundra for the work she is doing overseeing a number of issues in the southern part of the State, especially in the Murray electorate. The member is meeting with councils, meeting with community groups and stakeholders and engaging with those communities even though we lost the electorate in the election. We have to accept that. We let those communities down. But we are not walking away from our obligation.

They cannot be better served than by the member for Cootamundra and Parliamentary Secretary. There is an old saying: Thousands have lived without love; not one without water. This is a serious issue about water in regional New South Wales. Right now communities across regional New South Wales are struggling with the drought. Rainfall averages are at their lowest. Regional suicide rates are double that of places such as Sydney. We are sending more water down the river system through the Murray-Darling Basin Plan to South Australia. Let me put that into context: five thousand Olympic swimming pools of water have been flowing to South Australia every day since 2 January 2016.

Again South Australia wants more. I am here to say there is no more. New South Wales has no more water to give to South Australia. Since the plan's inception regional New South Wales communities have done the heavy lifting. I congratulate the Minister for Water for taking on South Australia at the ministerial council meeting last Sunday in Canberra. The Minister had the support of Victoria, a Labor government. This Minister took South Australia to task for its lack of willingness to participate in an inquiry concerning targets in relation to what happens in the lower lakes. We know in South Australia they rely heavily on the flows out of the Murray-Darling Basin Plan.

The truth is if they lifted the barrages and let the saltwater back into the lower lakes they could fix part of the problem. Part of the problem with the lakes is evaporation—something like 800,000 megalitres of evaporation. Next, if they switched on the desalination plant rather than letting it idle they would have an opportunity to ensure that more water flows into the system. Why don't they? That was the question asked at the ministerial council meeting by the New South Wales Minister for Water, supported by the Victorian Minister, because we want to make sure that South Australia is meeting its targets. South Australia was quick to have a royal commission into the Murray-Darling Basin Plan and come up with a number of recommendations. When the spotlight is on South Australia they do not want an inquiry, they do not want to answer questions and they do not want to tell their communities with transparency what is happening in South Australia as part of the Murray-Darling Basin Plan.

The SPEAKER: I warn the member for Port Stephens to cease interjecting.

Mr JOHN BARILARO: Last weekend we said enough is enough. There is no more to give. Someone said, "Is that an ultimatum; that you will walk away from the plan?"

The SPEAKER: I warn the member for Cessnock to cease interjecting.

Mr JOHN BARILARO: No, it is not an ultimatum. It is bloody stark reality: We have no more water to give. They want another 450 gigalitres of water and we cannot do that. Those opposite will continue to talk about a range of issues in this State and we have accepted that. We had the inquiry and we accepted the recommendations. We put in place a natural resource access regulator.

The SPEAKER: I call the member for Port Stephens to order for the first time.

Mr JOHN BARILARO: It was not comments from the Government or the Minister but recent comments from the Northern Basin Commissioner, the former Australian Federal Police Commissioner, Mick Keelty, who said, "New South Wales' response has been tremendous and it is now up to Victoria, South Australia and particularly Queensland to follow suit." Those opposite want to talk about historic events in this State and we say we have fixed them. We are on the way to doing the right thing. Let me make it clear: I do not stand here and defend anybody who has done the wrong thing, irrigators or not, by taking more water than they were entitled to. Those people should be prosecuted. [*Extension of time*]

The SPEAKER: There has been a higher level of noise today in the Chamber today than there normally is and I will start placing members on calls to order if it continues. I have been tolerant to this point. The member for Port Stephens and the member for Maitland will be called to order if I hear them interject again. The Deputy Premier has the call.

Mr JOHN BARILARO: It is clear that those opposite are using the drought and water as a political football. We heard that from the Leader of the Opposition at the New South Wales farmers' conference.

The SPEAKER: I call the member for Prospect to order for the first time.

Mr JOHN BARILARO: We continue to hear their rhetoric in the public domain through the media. They are not interested in regional communities or the prosperity of those communities.

The SPEAKER: I call the member for Cessnock to order for the first time.

Mr JOHN BARILARO: They will continue to attack the community of regional New South Wales.

Mrs Helen Dalton: Water. Water for southern New South Wales.

The SPEAKER: I call the member for Murray to order for the first time.

Mr JOHN BARILARO: The member for Murray should be careful because question marks may be raised about what she does with water. Let's be careful about playing a stunt with water.

Mr Chris Minns: Point of order—

Mr JOHN BARILARO: Here comes her defence.

Mr Chris Minns: If the Deputy Premier has a point to make he should do it by substantive motion and not play politics with this issue.

Mr JOHN BARILARO: Here comes the protection racket of the Labor Party for the shooters.

The SPEAKER: Order! I call the member for Canterbury to order for the first time.

Mr JOHN BARILARO: We call on South Australia to partner with New South Wales to bring transparency and allow us to review what is happening with targets in South Australia. We are calling on South Australia to be part of the plan and not be obstructionist. If they want to be a genuine partner then work with New South Wales, work with Victoria and let us get on with making sure that there is integrity and transparency around the plan. The future of the plan will be built off the back of integrity and transparency. If this plan fails it will fail at the feet of South Australia. On a final point I say to the South Australian water Minister: Rather than calling names and having pot shots at our Minister—a Minister with integrity and experience—focus on the task at hand.

TAXATION

Ms ELENi PETINOS (Miranda) (14:53): I address my question to the Treasurer. Will the Treasurer update the House on how the Liberals and Nationals are the parties of lower taxes and better opportunities and are there any alternatives?

Mr Clayton Barr: Point of order: My point of order relates to Standing Order 128. With regard to the structure of the question, specifically asking is something "better" is requesting an opinion. As per the standing orders questions are not allowed to ask for an opinion.

The SPEAKER: There is no point of order.

Mr DOMINIC PERROTTET (Epping—Treasurer) (14:54): Who is looking forward to the ICAC hearings? We are. Sportsbet is running some odds: Ernest Wong, \$1.03 to appear—no value there!

Ms Lynda Voltz: Point of order—

The SPEAKER: The Clerk will stop the clock.

Ms Lynda Voltz: My point of order is taken under Standing Order 129, relevance. The question is in regard to taxation in the State. The Minister is using props and is not in any way being relevant to the question he was asked.

The SPEAKER: Firstly, the Minister was not using a prop; I do not regard that as using a prop. Secondly, he had hardly commenced his answer. Ministers are entitled to make introductory comments. When a point of order is taken under Standing Order 129 within the first 30 seconds of an answer, it has to be a strong point of order.

Mr DOMINIC PERROTTET: Mount Druitt, 25 to one, mate—always be worried about the quiet ones. The Coalition is the party of lower taxes and people across the State know that wherever they live and whatever their circumstances, they are always better off under a Liberal-Nationals Government. That is because we believe in providing support for young families, young people, seniors and small businesses right across the State. We believe in providing support for those who need it and that is why we have been reducing taxes right across the board. We can only do that due to our strong financial management and that is what has put us in a strong position. Mr Speaker, I know you love researching points of order and giving interpretations to the House. I ask that you do research into whether there is any government—not just in this country but around the world—that can boast of a financial position like the financial position of this Government.

New South Wales has had average surpluses of over \$1½ billion, record infrastructure spend with close to \$100 billion in infrastructure spending, negative net debt and at the same time we have cut over \$5 billion in taxes over the last four years. Search far and wide and you will not find one other government with this record. Those opposite do not like good news. We have not only turned this State around but we are driving this State forward. We have made \$5 billion worth of tax cuts over the last four budgets. We know that Labor has opposed every one of those measures.

The SPEAKER: I call the member Kogarah to order for the second time.

Mr DOMINIC PERROTTET: I will start with payroll tax cuts, which were opposed by the Opposition at the last election. The increased threshold in the last financial year that we brought in has resulted in 2,000 businesses not having to pay payroll tax over the last 12 months. By 2021-22 that number will grow to 5,000, of which 1,500 businesses are outside Sydney, which is good news for the Deputy Premier. It even includes businesses in Keira, even though the member for Keira opposed the reform. All industries will benefit, including more than 1,000 businesses in the manufacturing and construction sectors and 800 businesses providing professional, scientific and technical services. As well as that, by 2021-22 those businesses still paying payroll tax will save, on average, \$13,625 each year as a result of the increase in that threshold. The 2019-20 increase in the payroll tax threshold to \$900,000 will save businesses \$187 million.

Let us go to stamp duty cuts for first home buyers. We have abolished stamp duty on new and existing homes up to the value of \$650,000 and there are now reductions in stamp duty for homes up to the value of \$800,000. We have abolished the insurance duty on lenders mortgage insurance. Since those measures began in July 2017—bearing in mind that those opposite said no-one would benefit—73,000 first home buyers have stormed back into the market and got the key to their very first home.

The SPEAKER: I call the member Kogarah to order for the third time.

Mr DOMINIC PERROTTET: That is a saving of \$1 billion. Labor sees it as a cost to the budget, but it is a saving to the budget because it is not our money; it is taxpayers' money. The next one is transfer bracket indexation, which we brought in. It was laughed at, scoffed at, by the Labor Party. It is a great reform. Did Labor members support it? No, they did not. From 1 July, the threshold—

Mr Greg Warren: Point of order: My point of order is taken under Standing Order 130. Clearly the Treasurer wants to debate this issue. He is drawing reference to matters that are of debating character. Mr Speaker, I ask you to ask the Treasurer to fall in line with the standing orders and provide an answer to the question. He clearly wants to debate this matter, and under Standing Order 73 he can do so by substantive motion.

The SPEAKER: I do not uphold the point of order.

Mr DOMINIC PERROTTET: How was the member's point of order about relevance? I have never been more relevant. The average property buyer will save \$500 now and that benefit will increase over time. This will cost around \$885 million in stamp duty over the forward estimates, but if this indexation had been in use in 1986 the tax payable on a \$1 million property would be around \$8,000 lower than it is today. This will ensure great savings not for today but for future generations to come. It is a great long-term reform that was opposed by those opposite. It is on top of other tax cuts like removing stamp duty on commercial vehicle insurance, professional indemnity insurance and public liability insurance. We have also removed the tax on crop and

livestock insurance from January 2018, which is resulting in farmers accumulating less debt as there is \$12 million less in taxes for farmers. That is all in addition to the \$2 billion cost-of-living measures that we have given back over the last two budgets. We are giving two Active Kids vouchers, meaning kids right across the State are playing sport for the very first time, which was opposed by those opposite. [*Extension of time*]

Mr Greg Warren: Point of order—

The SPEAKER: The Clerk will stop the clock please, because the member for Campbelltown's last point of order was a time-waster.

Mr Greg Warren: I take my point of order under Standing Order 130. The Treasurer is engaging in debate.

The SPEAKER: There is no point of order. The member for Campbelltown will resume his seat. I call the member for Campbelltown to order for the second time.

Mr DOMINIC PERROTTET: There are also Creative Kids vouchers, baby bundles, free dental checks for kids, reductions in early childhood education costs, fee-free apprenticeships, TAFE and VET places, motor registration relief for toll road users and a \$50 weekly Opal cap. Everywhere we look there are savings right across the board and yet we have Labor putting taxes on houses, on retirees, on boat owners, on small businesses and—the worst of them all was suggested by the member for Keira in the last election—on farmers in the middle of a drought. That is why I miss having the member for Keira as the acting Leader of the Opposition: When it was good, it was great!

The SPEAKER: Government members will come to order.

M4 EAST

Ms JO HAYLEN (Summer Hill) (15:04): My question is directed to the Minister for Planning and Public Spaces. It is now a month after the M4 East opening. Given that two lanes of rapid public transport on Parramatta Road have not been delivered, when it was a condition of the Minister giving planning consent to the M4 East project, what will the Minister now do to make this happen?

Mr ROB STOKES (Pittwater—Minister for Planning and Public Spaces) (15:04): I thank the member for Summer Hill for her question. I recall inviting the member for Summer Hill at the time that our proposal was being considered to talk to me about her concerns. Unfortunately she was unable to meet with me at that time.

The SPEAKER: The member for Canterbury will be quiet.

Mr ROB STOKES: Her staff told me that she was at a Young Labor meeting in Canberra. She was unable to walk along the course to look at the impacts to determine issues in relation to houses for which she may have wanted particular conditions.

The SPEAKER: I call the member for Bankstown to order for the first time.

Mr ROB STOKES: I cannot off the top of my head remember the number of the condition to which she is referring. I do remember the condition, obviously. It is an important condition and it was certainly designed in the light of the fact that no decision had been made at that stage in relation to an east-west metro connection as well. I note the condition remains on foot. I also note that the condition is not timed in terms of its delivery. It remains a condition to be delivered. I can say it is standard practice, particularly in major projects but also in a whole range of development assessment procedures, for a range of conditions to be satisfied over time. I know the Minister for Transport and Roads would be itching to contribute to this question as well.

The SPEAKER: Order! I call the member for Wollongong to order for the first time. I call the member for Rockdale to order for the first time.

Mr ROB STOKES: In relation to this project the conditions remain on foot and it continues to be my expectation that the conditions that were met—and there are quite a number—are met in an orderly and timely fashion, noting that that particular condition does not have a time restriction on it.

TAFE NSW

Ms WENDY LINDSAY (East Hills) (15:07): My question is addressed to the Minister for Skills and Tertiary Education. Will the Minister update the House on how the Government is delivering for TAFE and skills across the State and are there any alternatives?

Dr GEOFF LEE (Parramatta—Minister for Skills and Tertiary Education) (15:07): I thank the member for East Hills for her wonderful question. I know the member is a strong advocate for TAFE, as are all

the members on this side of the House. Who supports TAFE? Those opposite do not support TAFE and it is very sad. But it was very nice during the break when I had the privilege of accepting the invitation from the member for East Hills to visit Padstow and Bankstown TAFE campuses. We were able to see the wonderful horticultural facilities. It reminded me of when I did my training as a horticulturalist. We also joined the floristry class. Whilst the students were very skilled at floristry, my skills need some upskilling before I become a professional. It is true. I am pleased to report to the House that the students were fantastic. The member for East Hills was also fantastic in her skills—well done to her. I give a big shout-out to all the teachers and staff from Bankstown and Padstow TAFEs and congratulate them on their efforts.

The Government is focused on delivering a stronger and better TAFE. It is committed to delivering a world-class skilled workforce, a workforce for the future and for the present. We are offering 700,000 fee-free TAFE and VET courses over the next four years. This includes 100,000 fee-free apprenticeships, 70,000 places for young people looking to combine work and study and 30,000 places for mature age students looking to reskill. In contrast, those opposite could only promise 600,000 fee-free TAFE courses over the next 10 years at the last election. That is not even close to what we are delivering.

The SPEAKER: The member for Auburn and the member for Londonderry will be quiet. I ask that Government members be a little more respectful to their colleague.

Dr GEOFF LEE: To put it clearly, those opposite promised 600,000 places over 10 years and we on this side of the House are delivering 700,000 over four years.

The SPEAKER: I call the member for Londonderry to order for the second time.

Dr GEOFF LEE: We are clearly delivering better.

The SPEAKER: Order! I call the member for Oatley to order for the first time.

Dr GEOFF LEE: It is a delight to update the House that the skills budget for the 2019-20 period is \$2.3 billion, of which approximately 80 per cent is going to TAFE NSW. The TAFE budget for 2019-20 is \$1.85 billion, which is an increase of 3.1 per cent on the 2018-19 forecast expenditure. In contrast, at the last election Labor said if elected it would give 70 per cent of the vocational education and training budget in New South Wales to TAFE. There is a clear comparison. Those opposite want to give TAFE 70 per cent and we are giving 80 per cent. The real question is: Why does Labor want to cut funding for TAFE? Why does Labor want to give TAFE less? Shame on you, Labor.

The SPEAKER: I call the member for Auburn to order for the first time.

Dr GEOFF LEE: It amazes me how the member for Londonderry got a promotion.

The SPEAKER: I call the member for Port Stephens to order for the second time. I call the member for Auburn to order for the second time. That is enough. I call the member for Auburn to order for the third time. If members do not listen in silence they will continue to be called to order.

Dr GEOFF LEE: I congratulate the member for Lakemba on his elevation to be the shadow spokesperson for TAFE. He is a good bloke and I am sure he will do a much better job than the member before him. My only question for Jodi is: What were you thinking at the time?

Mr John Barilaro: Why was he demoted?

Dr GEOFF LEE: I do not know why they were demoted. He was not demoted; he was elevated to the position of shadow spokesperson for TAFE. That is an elevation.

The SPEAKER: The member for Lakemba will be quiet. I have not placed the member on a call to order, but he will be quiet.

Dr GEOFF LEE: We are also investing in TAFE. We are delivering \$137.2 million in capital expenditure for TAFE this financial year. In addition, we are building a new \$80 million TAFE super campus in western Sydney that will train 700 new students in a construction hub. In addition—and the Minister for Customer Service, the member for Ryde, will appreciate this—we are investing \$150 million into the Meadowbank TAFE as part of the education precinct. We know this is going to be a real game changer for the students. Well done, Minister Dominello. I know he is a champion of all things educational, especially for his region. [*Extension of time*]

The SPEAKER: Before the Minister continues, I will give a quick rundown of the members who are on calls to order, because if the interjections continue someone will be removed from the Chamber. The member for Keira is on two calls to order, the member for Londonderry is on two calls to order, the member for Rockdale is on one call to order, the member for Kogarah is on three calls to order, the member for Auburn is on three calls

to order, the member for Swansea is on one call to order, the member for Campbelltown is on two calls to order and the member for Port Stephens is on two calls to order. The Minister will continue.

Dr GEOFF LEE: Mr Speaker, I think it was right that you warn all members who have been placed on calls but as a past teacher I know that sometimes when there are naughty kids on that side it might be windy outside and you might have to put them on detention. They are being very naughty. The good news does not stop there. We are investing \$61.7 million for an additional eight connected learning centres [CLCs] in rural and regional New South Wales. This builds on the 14 we have already delivered statewide. I congratulate the Deputy Premier on his fine initiative. The connected learning centres are fantastic facilities.

The SPEAKER: I place the member for Rockdale on three calls to order. I call the member for Canterbury to order for the second time.

Dr GEOFF LEE: It was great to be with the member for Tweed, Geoff Provest, and the member for Upper Hunter, Michael Johnsen, to officially open the two new CLCs in Murwillumbah and Scone. Well done, guys, on your support for CLCs. They are making a real difference. I saw them firsthand.

The SPEAKER: I call the member for Canterbury to order for the third time. I call the member for Port Stephens to order for the third time. Someone is about to be removed from the Chamber.

Dr GEOFF LEE: It is disappointing that the Opposition is so disparaging about the connected learning centres and calls them "shopfronts". Try to tell that to the regional communities they serve who are benefiting from the improved number of courses available, thanks to this innovative model.

The SPEAKER: I call the member for The Entrance to order for the first time.

Dr GEOFF LEE: The CLCs do a wonderful job in regional and rural areas: They overcome the tyranny of distance, giving everybody the opportunity of a first-class education. Under this Government, the first crop of CLCs has delivered twice as many courses to local students than previously were available, with many more to come. This Government is committed to creating the most skilled, dynamic and qualified workforce in the world. We are ready to skill people up for the jobs of today and the future, and that is exactly what we will deliver.

SHORT-TERM HOLIDAY LETTING

Mr ALEX GREENWICH (Sydney) (15:15): My question is directed to the Minister for Innovation and Better Regulation. Given it has been some time since legislation relating to short-term holiday letting passed this Parliament, will the Minister update the House on the progress of the code of conduct and the consideration of a registration scheme for short-term letting?

Mr KEVIN ANDERSON (Tamworth—Minister for Better Regulation and Innovation) (15:15): I thank the member for Sydney for his question and for his continued interest in short-term holiday letting.

The SPEAKER: I give the member for Canterbury a final warning.

Mr KEVIN ANDERSON: The member for Sydney met with me last month to discuss the code of conduct. I appreciate his input into the process and his advocacy on behalf of his community. A significant number of interested parties, particularly in and around his electorate, are keen to know how the code of conduct is progressing.

The SPEAKER: I remind the member for Canterbury that she is on three calls to order.

Mr KEVIN ANDERSON: Short-term holiday letting is a boom industry in New South Wales that is worth an estimated \$15 billion to the State's economy. The New South Wales Liberal-Nationals Government is working hard to provide certainty to communities, not only in and around metropolitan areas but also in regional New South Wales where short-term letting is often a significant contributor to the local economy. In these times of drought, sometimes short stays can provide the sort of diversified income that is needed to keep a community alive. Councils and other hosts are all interested in short-term rental accommodation.

As the member for Sydney would know, last year the Government announced it will implement a statewide policy comprising a number of initiatives: a statewide planning instrument, permitting the use of dwellings for short-term holiday letting under certain conditions, including limits on the days the activity can take place; a mandatory code of conduct for online booking platforms, letting agents, hosts and guests; and clarification that strata schemes can adopt by-laws that prohibit short-term holiday letting where the property is not the host's principal place of residence. At the same time we want to ensure our whole-of-government framework for short-term holiday letting will work as intended and in line with people's expectations. That is why we will seek further feedback from the community and industry on the code of conduct and the draft planning instrument via a discussion paper. I am sure the member for Sydney can appreciate that it is a complex area that involves planning

policy as well as local government input. I can advise the member that the Government will release a discussion paper in the near future.

Interested organisations and individuals will be invited to provide a submission on the proposed draft planning instruments, the draft code, the draft amending regulation and associated processes. One size does not fit all, so it is important to take all of that information and consultation on board. The Government wants to help property owners earn income from short-term letting and support the expansion of the local and State tourist and visitor accommodation market, particularly in times of drought in regional New South Wales where that supplementary income can mean the difference between making a profit or not. We also need to ensure the safety of guests and protect the local character and amenity of the community.

The Government has engaged with many relevant stakeholders to ensure the draft code incorporates industry and community feedback. I will update the member on some of those industry stakeholders whom we have met with so far as part of the consultation: Airbnb, HomeAway Australia, the Real Estate Institute of New South Wales, the Property Council of Australia, the Australian Short Term Rental Accommodation Association, the Accommodation Association of Australia, the Property Owners Association of NSW, Estate Agents Co-operative, the Owners Corporation Network, the Strata Community Association, Destination NSW, the Tenants' Union of NSW, the Restaurant & Catering Association, Local Government NSW and the Australian Federation of Travel Agents. I also sought the member for Sydney's input into the draft code.

A balance needs to be struck between protecting individuals' privacy and the industry's need to access the exclusion register so they may be protected under the code. I can assure the member for Sydney that the draft code of conduct will include mechanisms to enable compliance as well as enshrining a two-strike policy for industry participants. If a participant receives two strikes within two years for breaching the code, the participant will be excluded from the industry for five years. That is just one example of how we are navigating emerging markets in a modern-day share economy. As the market continues to develop, individuals and organisations will continue to find ways of delivering goods and services to the community. The Government is committed to reviewing the legislation to ensure the market remains equitable for New South Wales residents. I thank the member for Sydney for his interest in this matter. We will stay close to him and ensure he receives a copy of the draft code when it is released in the near future.

AGRICULTURE BIOSECURITY

Mr DUGALD SAUNDERS (Dubbo) (15:20): My question is addressed to the Minister for Agriculture and Western New South Wales. Will the Minister update the House on how the Government is supporting farmers across the State against the threat of trespass and are there any alternatives?

Mr ADAM MARSHALL (Northern Tablelands—Minister for Agriculture and Western New South Wales) (15:21): I thank the member for Dubbo for his question and for being a strong advocate in standing up for farmers in his electorate, particularly Erika and Steve Chesworth and Jim and Emma Elliot at The Little Big Dairy Co. who produce some of the best milk—real milk, not that almond stuff or some of those other products—in country New South Wales. You can't milk an almond.

As all members know, and this issue has been talked about in this House before, drought is one of the most urgent issues facing farmers in regional New South Wales. One of the most serious threats to the viability of the agricultural sector is the growing tide of vegan vigilantes and animal activists who want to shut down agriculture and farming operations in this State. Unfortunately, those people have an ideological view that farming is bad, farms should be shut down and farmers do not have a right to farm in order to feed and clothe the nation and meet the ever-growing food needs around the globe. This State has the very best farmers in Australia and, indeed, the world. Unlike farmers in the European Union, our farmers do not receive massive subsidies—to grow or not to grow—and certainly our farmers receive nowhere near the subsidies provided to farmers in the United States of America. Our farmers work hard and they are doing it bloody tough at the moment. Everybody in this House supports what they do and acknowledges the tough time they are going through at the moment.

To combat that rising tide—the threat of people questioning the farmers' right to exist—as of 1 August 2019 new penalties were introduced in this State. They are the toughest biosecurity penalties in Australia. If protesters—or as I think the Deputy Premier calls them, "mung bean munchers" or "domestic terrorists", and that is exactly what they are—want to continue their illegal activities and disrupt good farming operations, they will be hit with a \$1,000 on-the-spot fine, arrested and charged for a breach of the Biosecurity Act and then face court and fines of up to \$220,000 for an individual and \$440,000 for a corporation. They will also be charged for an act of trespass under the Crimes Act and hauled before court again where they will face not only more fines but also potential jail time. As a government, we are looking to do much more in this space.

It is important to introduce regulations and laws such as this because the activities of activists not only threaten the safety and security of farmers, farming operations and themselves but they also risk bringing contaminants and other disease onto farms and shutting down operations or, indeed, an entire industry. To prove my point, I inform members that in June last year about 30 animal activists broke into a Lakesland poultry farm near Heathcote. They ignored the owner's warnings to leave the property and threatened him with boltcutters. They broke into the poultry sheds and in an attempt to save the chooks in the shed stuffed too many of them into carry cages, so much so that 300 birds died from suffocation. In the police investigation that followed, the RSPCA told police that the carry cages were grossly overfilled, which caused undue stress and injury to the birds. The activists ended up killing the very animals they were trying to save by trying to get them out of that location. The worst thing was that unbeknownst to those animal activists that property was already under RSPCA surveillance because the owner was being investigated for breaches of the Prevention of Cruelty to Animals Act.

The SPEAKER: The member for Rockdale is already on three calls to order. If he continues to interject he will be removed from the Chamber.

Mr ADAM MARSHALL: In fact, in trespassing and killing some of those birds the activists stuffed up an RSPCA investigation, which would have led to the owner being prosecuted for breaching the Prevention of Cruelty to Animals Act. [*Extension of time*]

In another incident this year, in the Goulburn electorate nine activists broke into an abattoir overnight and chained themselves to a conveyor belt. They were on the premises for over an hour and a half before the police were forced to cut the activists' chains and arrest them. Three women refused to walk from the abattoir and had to be carried to the police vehicles by the police. They were subsequently charged under some old laws and the magistrate gave them virtually a slap on the wrist. That will happen no more in New South Wales. Those people will face the harshest penalties anywhere in Australia, and we make no apology for that. Often the toll on farmers when they are subject to those raids is forgotten. I will read a section of the witness impact statement from a pig farmer in Young, who has asked for his name to be withheld for the protection of his family:

As a long-time pork producer in New South Wales, our farm has been raided a number of times by animal activists. In their efforts, they tormented my pigs to get sensational footage to display on social media, proclaiming that we were cruel farmers. The impact this has had on my staff, myself and especially my family was devastating! I have two young daughters who are extremely interested in a career in agriculture but after seeing the negative impact that these activists created, they are starting to question their career choice. It's not that they have lost their passion for agriculture, the problem is how do you "handle" faceless activism?

It is not on and we will not tolerate it.

Committees

LEGISLATION REVIEW COMMITTEE

Reports

Ms FELICITY WILSON: As Chair: I table the report of the Legislation Review Committee entitled *Legislation Review Digest No. 1/57*, dated 6 August 2019.

I move:

That the report be printed.

Motion agreed to.

Ms FELICITY WILSON: As Chair: I table the report of the Legislation Review Committee entitled *Legislation Review Digest No. 2/57*, dated 6 August 2019.

I move:

That the report be printed.

Motion agreed to.

COMMITTEE ON TRANSPORT AND INFRASTRUCTURE

Membership

Mr ANDREW CONSTANCE: I move:

That Christopher John Minns be appointed to serve on the Legislative Assembly Committee on Transport and Infrastructure in place of Jodi Leyanne McKay, discharged.

Motion agreed to.

*Petitions***PETITIONS RECEIVED**

The CLERK: I announce receipt of the following petition signed by fewer than 500 persons:

Route 413 Bus Services

Petition requesting additional services to the 413 bus route, received from **Ms Jo Haylen**.

*Bills***REPRODUCTIVE HEALTH CARE REFORM BILL 2019****Second Reading Debate**

Debate resumed from an earlier hour.

Mr KEVIN CONOLLY: I seek leave to move a motion to suspend standing and sessional orders to permit me to speak for a period of up to 30 minutes during the second reading debate on the Reproductive Health Care Reform Bill.

Leave granted.

*Business of the House***SUSPENSION OF STANDING AND SESSIONAL ORDERS: SPEAKING TIME**

Mr KEVIN CONOLLY: By leave: I move:

That standing and sessional orders be suspended to permit me to speak for a period of up to 30 minutes during the second reading debate on the Reproductive Health Care Reform Bill 2019.

The SPEAKER: Under the standing orders a member of the backbench can seek leave to move a motion to suspend standing orders. The Minister for Health and Medical Research will remain silent. The question is that the motion be agreed to.

Motion agreed to.

*Bills***REPRODUCTIVE HEALTH CARE REFORM BILL 2019****Second Reading Debate**

Mr KEVIN CONOLLY (Riverstone) (15:32): I speak on behalf of unborn children. The unborn child in the womb is a human being. The whole debate about how we treat terminations in law turns on what or rather who is being terminated. Yet proponents of the bill make no reference or offer no answer to that question and they do their best to look the other way from that question. I thank the thousands of people across New South Wales who are not prepared to look the other way. I thank and congratulate all those who have spoken up in recent days. Their voices are only now being heard because, unfortunately, this very significant bill was introduced in this House with the minimum possible notice. But those voices matter. They are the only voices that can speak on behalf of the unborn.

Science supports the cause of the pro-life movement. Science tells us many things about the unborn. We know that a child's heartbeat starts at about four weeks. We know, even though the mother does not become aware of it till later, that at six weeks the embryo begins to make spontaneous and reflexive movements. We know that in females the ovaries are already identifiable at seven weeks. At eight weeks the embryo displays intermittent breathing motions. Significantly, at 16 weeks the fetus reacts to a needle stimulus with a hormonal stress response, releasing noradrenaline or norepinephrine into the blood stream, indicating a capacity to sense pain. We also know that at 21 or 22 weeks the lungs gain some ability to breathe air. This time is considered the age of viability because survival outside the womb becomes possible for some fetuses at that stage.

We know those details and so many more through the capacity of modern science and medicine. Through modern ultrasound techniques every parent now has the opportunity to see their child in the womb. The developments in the field of DNA mean that we can now identify the unique DNA of the separate human person growing in the womb. Doctors can even operate in utero to address serious health conditions of the child before birth. All of those developments and many more serve to confirm and corroborate the truth that the unborn child is a human being. Some people have suggested that support for protecting the life of an unborn child is archaic. I put it that support for the unborn child is the only rational response to the science. In decades gone by, some

people may not have known what we now know about the unborn child. If they did, they had an excuse for not focusing on the humanity of the unborn child. However, in 2019 that can no longer be the case.

I am pro-life. Like most people I am against capital punishment and I am opposed to war wherever it can be avoided. I am also against abortion. I believe that we only really have the right to take human life in self-defence. This is not such a case. It is critical that we answer the question of who is being terminated if we are to talk at all about human rights. The whole concept of human rights arises from the fact of being human. Those rights belong to all human beings regardless of race, age, physical or mental capacity or any other factor. As science affirms that the unborn child is undoubtedly human, this issue cannot be treated as a distraction or a minor consideration. Article 6 of the International Covenant on Civil and Political Rights, one of the foundational statements on human rights, states:

Every human being has the inherent right to life. This right shall be protected by law. No one shall be arbitrarily deprived of his life.

It is a simple statement. Does it apply to the unborn child? I believe it does. If we are going to treat this issue differently, surely we have to address that question and answer it honestly. I respect that people can honestly have different interpretations or understandings of an issue like this but that question should not and cannot be dodged. It is a real question. If the unborn child is a human person—and I believe the science shows that to be the case—where do those human rights lie? The question should not be dodged. It should not be avoided. It should not be brushed under the carpet. There are a number of other statements in that declaration of international civil and political rights which are relevant to this issue but they all derive from that central function. Surely we have to answer the question and answer it honestly. To do that, we first have to confront the question honestly.

I am disappointed that the process that has happened in this place this past week has not allowed us to confront this issue honestly. We have not been open to considering the whole issue from the perspective of the whole community. Legislation has been pushed through and has happened very quickly and almost could have been over before most people in the community knew what was going on. That is not the way to deal with an issue of this magnitude. Proponents of the bill have said that it is about decriminalising abortion, that it provides clarity about the situation and makes clear how to behave in accordance with the law and without fear of criminal penalty. But that is deceptive; in fact, it is misleading. A number of aspects of the bill do not reflect the current law; rather they change it. They expand the capacity for abortion beyond that which even the common law on which it has been based to date would determine.

The current common law sets some rules, albeit weak ones in my opinion. The bill would remove even those. It would allow more abortions to occur, including later ones. I am certain that the community is very uneasy about late-term abortions. I do not believe that there is broad public support for it and I believe the community have only just now had the opportunity to convey that message to their elected representatives. No-one who has followed the weak common law rules has been subject to criminal prosecution. The very rare examples of prosecution that we have heard about occurred because people have not followed those common law rules. So the bill will not just reflect those rules, it will change them. If someone had simply wanted to translate the current common law rules into statute law in order to provide clarity and certainty and remove the fear of prosecution a very different bill would have emerged.

The common law rules arise from cases in 1969 in Victoria and in 1971 in New South Wales—the Levine ruling that we have heard about—and they have been expanded on by subsequent cases. Essentially, these rulings have made abortion legal via the common law for reasons related to the protection of the mother's physical or mental health and include considerations of a social nature in determining what is relevant to that health. To be clear, this bill would do away with such criteria altogether for abortions up to 22 weeks. No longer would that common law test apply. For abortions later than 22 weeks the terminology of this bill requires only that two doctors consider various circumstances. It does not require that any criteria be met, that any test be passed or even that the doctors' opinions be justified by the consideration that they have conducted of the circumstances.

It would simply be sufficient in law that they did consider the circumstances. That is an incredibly low bar. "Consider" means very little. The things that need to be considered are themselves quite vague but the key word is simply "consider". That does not set an adequate test for something of the gravity that we are talking about in this issue. This bill is not just about the decriminalisation of abortion, it is about the expansion of the practice of abortion. It is about the reduction of those few safeguards for the unborn child that do exist and it is about the imposition of a legal obligation on doctors who conscientiously object to abortion to act against their consciences. I heard the Minister for Health and Medical Research say earlier today that that is not the case. He claimed that the current rules and personal standards around doctors would apply exactly the same imposition. That is not so.

Current professional standards require that a doctor does not impede. That is a very different thing from actively referring a patient. It may seem a small thing to the Minister but for a person whose conscience is violated

by referring a patient it is a very big thing. Doctors should not be forced to do what they believe is wrong. Doctors should not be forced to participate in ending the life of a patient—and they do believe the unborn child is their patient. The so-called safeguard of two doctors for later term abortions is no safeguard at all. The bill would allow the abortion of a 39-week-old unborn child for no particular reason, as no particular reason is required by the bill. The bill would outsource the responsibility of this Parliament to make the law to the opinion of two doctors—an opinion, not a professional judgement against any specified criteria.

It is the job of this Parliament to make hard decisions and to make laws. If we are going to bind members of the community to laws, then they should be made in this place by elected representatives who are answerable to the people. They should not be left even to very responsible and professional doctors who are not in the same way answerable to the people. They also should not be left to current professional standards because current professional standards change over time. Laws do not change, not without the conscious intervention of the elected representatives of the people. I do not think it is proper for this Parliament to outsource that kind of decision to two doctors, however reputable, professional or genuine those doctors may be. Most doctors are reputable, professional and genuine. However, I fear that on occasions some may be less so. The bill would, in fact, in law allow abortion for all reasons or none. I read a joint statement by archbishops Glenn Davies and Anthony Fisher of the Anglican and Catholic churches here in Sydney, which speaks about the bill. They say:

It not only allows for abortion up to 22 weeks for any reason and with no inquiries made, it also allows for abortion for any reason even up to birth, provided that two doctors agree "in all the circumstances" that the abortion should take place, as if this is the only—and best—choice for women.

The bishops clearly believe that it is not the only and best choice for women—that abortion should be the immediate recourse. The ludicrous nature of this provision gets even worse. The two doctors are required to consider future circumstances. How can a doctor genuinely consider a woman's future physical or social circumstances? How long into the future are they supposed to look? How can a doctor ethically claim to have considered a woman's future psychological circumstances if that doctor is not a qualified psychologist? See what is being asked here. That is why a weak word such as "consider" is being used in the bill, because a word like "assess" or "evaluate" or "determine" would imply a professional judgement that a doctor could not possibly make consistent with their professional standards and obligations. In my view, clause 6 is not designed to be a safeguard clause; rather, it is designed to be a facilitating clause.

I believe it is an abrogation of the responsibilities of this Parliament to subcontract to the opinions of doctors the decision about what should or should not be legal without providing them with proper criteria, proper guidance—objective standards that are measurable and testable in law. Doctors disagree on abortion just like other members of our community. Will the New South Wales law be different depending on which doctors you ask? Looking at the situation cynically, one would surmise that it will always be possible to find two doctors who are predisposed to permit abortion in any circumstances. They are probably the ones running abortion clinics and advertising online. What kind of safeguard is that for this Parliament to set in law? Children are viable—that is, they can live outside their mother's womb—from around about 22 weeks gestation, maybe even earlier in years to come as science advances further. An unborn child can feel pain from about 19 weeks. There is a threshold beyond that with which I believe the community would be very, very uncomfortable to open the door to more abortions.

There is no public support in my view, or any of the published polls that I have seen, for an increase in the number of late-term abortions, nor for conducting them later than we currently allow under the common law. Members of this Parliament who are pushing for this are the ones out of step with Mr and Mrs Average, who do not support an extreme approach of this kind. In relation to the conscientious objection clause—clause 8 of the bill—there is absolutely no need in this modern era to impose that obligation, since information about where abortions are performed is freely available. A simple google search right now will throw up any number of results. Given the reality—that information is easy to obtain—the imposition by the bill of a legal obligation on conscientious objectors is not about serving the public interest or helping women find a doctor; it is about crushing dissent and forcing doctors to keep their conscientious views hidden or risk being driven out of their profession. This is a most unattractive aspect of an already retrograde bill.

Members of this House who have respect for individual freedom and conscience should reject out of hand this ambit claim in clause 8. The mover of the bill, the member for Sydney, has claimed that the bill will bring the law into line with clinical practice, with community attitudes and with the rest of the country. In important respects, each of those three is untrue. The bill goes well beyond current clinical practice because it goes well beyond the current common law rules, which will no longer apply up to 22 weeks because under the bill no reason is required up to 22 weeks. That is a change that will not bring the law into line with clinical practice. Opening the door to more late-term abortions is out of line with community attitudes.

I accept and acknowledge that there is a diversity of views in the community and that not everybody shares my view of abortion. Understood. But I am pretty confident in saying that the overwhelming majority of people in New South Wales do not want to see the door opened to late-term abortions as easily and completely as the bill will do. The country has a diversity of laws in place in any case, and the bill is oddly enough at the extreme end of what exists in other States around Australia. It is not bringing us into line; it is putting us at the most extreme end of allowing abortions with the least restrictions. Let us not be misled into thinking that this is some simple or uncontroversial modernisation of the law. It is far from that. It is a grave matter; a significant challenge to our community, who should have been given much greater opportunity to consider the bill and to talk to their elected representatives about it.

The bill should have been the subject of a proper process of inquiry, discussion and investigation before it was put to this House. I am disappointed that that was not the case. We can remedy that now: We have the opportunity to consider our votes in this place and to use them in a way that will bring about better process. I note that the member for Sydney, who is sponsoring the bill, has a strong record of protesting cruelty to animals. Good on him for that; that is his right. In his speeches he has stressed the evil of cruelty to sentient animals—that is, to animals capable of experiencing pain. In his debate on the greyhound issue, which caused us all significant challenge in this place, he said:

Racing animals is about greed; animal welfare can never be guaranteed because cruelty is profitable. As a humane society we should not permit, let alone support, such treatment of voiceless sentient beings ...

I put it to the community and to this House that that is exactly what is entailed in the bill; consciously so. Voiceless, sentient beings who will grow, if given the normal opportunities that each one of us has had, into adults human beings in due course. How can we as a society, on the one hand, condemn cruelty to animals but permit the killing of unborn children? It is a challenge. It is a dilemma. It is a question that the community must confront. We should not pretend otherwise.

The member for Sydney also spoke about the Kosciuszko wild horses. I will not go on; I think the point has been made. These issues require genuine consideration. They matter to members of our community. They are important, grave issues of State that should be settled in this House by this House with conscious and careful deliberation. I will move a number of amendments to the bill, which I circulated earlier today in draft form to members of this House. I have worked on those amendments with a number of my colleagues. They are not just my amendments, they are amendments from a group of members. While I am pro-life I cannot support the bill and I will not support it, even if it were amended, because I still think it would be a bad step; a retrograde step in the degree of civilisation in our society.

However, knowing the process and understanding the realities of politics, I will certainly put those amendments vigorously in an attempt to address some of those aspects of the bill about which I have made such strong comments. An amendment will be moved to the provision for late-term abortions, an amendment will be moved to the provision for conscientious objecting doctors and other amendments, perhaps not quite so prominent, will be moved in an attempt to improve the operation of the bill, given that it has been claimed that it should reflect current practice in New South Wales. At least we can bring the bill back to something more like that reality if it is, indeed, the will of members that that should be so. It is not my will; I speak for the unborn. I point out that in every abortion, which is a tragic circumstance, two people who need our compassion: both the woman and the child. Both need our help as a society, both need our supporting hands wherever we can make it possible.

All sorts of dilemmas are thrown up in life and I do not want to belittle them for one moment. I certainly do not want to judge women who find themselves in those dilemmas; that is not my point and that is not what people on this side of the debate are about. We want to support both mother and child. We want to ensure that society is as noble, as good and as uplifting as it can be to enrich the lives of people, not to diminish them, not to cheapen them, not to find what is an unsatisfactory way of resolving very difficult issues. I believe there is goodwill in the House from most because I think we all recognise that these are not easy situations. Nobody is going to pretend that the decisions that women have confronted and the situations in which they have found themselves are easy, and I certainly do not want to give that impression at all. I simply say that those doctors with conscientious objections see two patients before them—they see a mother and a child, and they want to do their very best for both.

Sadly, this legislation would force them to choose only one, and that is not the better way. To have to choose between the two is not the way to make our society more civilised and more caring. I appreciate the indulgence of the House in allowing me this time to speak. I believe it was necessary that a voice against the bill be heard in this manner. I know that members on both sides of the argument will speak and that this debate will go for some time. I hope that we genuinely try to find the best way forward. I hope that we genuinely try to listen to each other and understand where the other is coming from, and make the very best decision that this Parliament can make for all of the people of New South Wales.

The DEPUTY SPEAKER: I acknowledge in the gallery Senator Mehreen Faruqi. Thank you for joining us in the New South Wales Parliament.

Ms JENNY LEONG: I seek leave to move a motion to suspend standing and sessional orders to permit me to speak for a period of up to 30 minutes during the second reading debate on the Reproductive Health Care Reform Bill 2019. It goes without saying as to why.

Leave granted.

Business of the House

SUSPENSION OF STANDING AND SESSIONAL ORDERS: SPEAKING TIME

Ms JENNY LEONG: By leave: I move:

That standing and sessional orders be suspended to permit me to speak for a period of up to 30 minutes during the second reading debate on the Reproductive Health Care Reform Bill 2019.

Motion agreed to.

Bills

REPRODUCTIVE HEALTH CARE REFORM BILL 2019

Second Reading Debate

Ms JENNY LEONG (Newtown) (15:58): I speak as the New South Wales Greens women's spokesperson and the co-sponsor of the Reproductive Health Care Reform Bill 2019. I say at the outset that The Greens NSW are 100 per cent pro-choice. Our policy is clear: Women, and indeed all people with uteruses—and as much as it may blow the narrow minds of some of the people in this place, people who are not women have uteruses—are fully functioning human beings capable of making decisions about their own bodies. The only person who should be examining their conscience and reflecting on whether they have a termination is the person who is reflecting on their choice of whether they should have an abortion.

To quote my good friend and courageous Greens colleague Senator Mehreen Faruqi, who took the long-overdue and necessary step of putting abortion law reform on the agenda by introducing the first bill to decriminalise abortion to this place two years ago, "We must recognise that at the heart of the failure to decriminalise abortion lies the profoundly patriarchal view that women and their bodies must be controlled." We do not talk enough about women's health—reproductive health or maternal health. It is still the norm for people to lower their voices when talking about periods or tampons or contraception or childbirth. It is not uncommon for women to rarely even speak about abortion. Part of this is no doubt due to the general feeling of privacy around our own health, but a lot must be put down to the ongoing influence of the patriarchy, as well as the continued regulation and criminalisation of our bodies and our choices.

That is why today in the media I shared my story; that is why we have seen so many women and so many people after so many years share their stories. No matter whether a person is giving birth or is terminating a pregnancy, the important factors are that they should be treated with dignity, they should be respected and they should be allowed to make their choices, informed by the expertise, support and care of healthcare professionals. There is no role for the criminal justice system in these decisions for these procedures, but there is absolutely a role for healthcare professionals and for the person to make their own choices. To make a choice whether to have a child or not is our decision and our decision alone. As I make this contribution today I can hear the echoes of the voices chanting from this morning's protest rally outside, adding to the countless voices before them over decades—the chant that states that not the church, not the State but women must decide their fate.

Let us be clear: If we succeed in getting this change through the New South Wales Parliament it will be the culmination of a campaign that our mothers, our grandmothers, feminists and pro-choice activists have been fighting for over generations. It is those women, those people, those collectives, those groups and those organisations that I wish to thank on the record today. While it might be the lawmaking men who made these laws more than 100 years ago before women were eligible to vote, let alone to be elected to this Parliament and to debate their reproductive rights in this Chamber, and while it might be the lawmaking men still who have spoken first on this reform, there can be no doubt that this is herstory and we must record that in history. To the NSW Pro-Choice Alliance, Wendy McCarthy, the powerful women and powerful 90-plus organisations that have come together on behalf of so many of us who are pro-choice and on behalf of all of us who have a uterus, we should say thank you.

To the pro-choice campaigners across the country and around the world, I say thank you. To the feminists, the organisers, the campaigners from Greens groups, socialist groups, feminist groups, civil liberties groups and human rights groups, I say thank you. To the doctors, nurses, frontline healthcare professionals and legal

community workers who have supported people in accessing what they need to make their own reproductive choices or who have picked them up and supported them when they were prevented from getting the care they need due to the criminalisation and barriers in place, I say thank you. To The Greens women who have stood strong campaigning for the decriminalisation of abortion, to end the stigma and to improve access to health care, and to those MPs who have held the women's portfolios, and my current partners in the mission to destroy the patriarchy—Lee Rhiannon, Cate Faehrmann, Mehreen Faruqi, Tamara Smith and Abigail Boyd—I acknowledge their work and say thank you. It is particularly great that Mehreen Faruqi is able to be with us here today in the Chamber.

This is a good bill, but it is important to remember that we had a bill before this one and, unsurprisingly, the same arguments that were used against The Greens' bill at the time are being rolled out once again. Because fundamentally this is about people wanting to stop people making decisions and having control over their own bodily autonomy. While there have been attempts to discredit The Greens' bill to justify taking an anti-choice position, and there certainly was pressure for Mehreen to not put this on the agenda, Mehreen took that step and made sure that reproductive rights could no longer be sidelined. It is also important to place on record that The Greens' bill was widely consulted on, and received endorsement from many organisations and groups. Mehreen joined with pro-choice advocates and held rallies, community actions and public forums across this State, including in Albury, Newcastle, Gosford, Bega, Wagga Wagga, Byron Bay and all across Sydney.

Doctors, lawyers, students, interest groups and individuals joined in. Thousands of people signed petitions and postcards to their local MPs. Hundreds of doctors, lawyers and criminology academics signed open letters to New South Wales MPs. Right now we stand here together—and believe me I understand what it means to show revolutionary discipline. But it must be said that the forces of the patriarchy are sadly still strong across the political spectrum—particularly for those of us who do not conform to the white-man-in-suit version of lawmaking. Let us be clear: Just as it was in 2016, if we are not successful in achieving reform this time around, it will not be due to any failings in the details of the bill, but as a result of a continuing desire of certain people, organisations and groups to discount women's views and women's capacity, and undermine women's rights.

I have no doubt if we are successful in getting this reform through that more will need to be said. I have no doubt that we, Mehreen, will be reclaiming our time. Because while this reform is much needed and beyond welcome, this reform will not be the end of the struggle to destroy the patriarchy. We will not be silent and we will not rest until we have achieved that goal. This bill is part of a feminist struggle for bodily autonomy and for women to have control over their lives—for reproductive rights for everyone—and we must acknowledge the long and difficult road it has been. Former Greens MLC Sylvia Hale remembers back in 1963 earning the approval of the late Julia Freebury, the Sydney organiser of the Abortion Law Reform Association and a principal activist in the campaign for reform in the 1960s and beyond.

Sylvia recalls she gained Julia's approval because she wore a dress and gloves when handing out leaflets. Julia was convinced of the need to appear normal, conservative and unthreatening when campaigning. Both the Women's Electoral Lobby and the Women's Abortion Action Campaign formed in 1972 in Sydney, with the latter having the five objectives of abortion being a woman's right to choose, repealing of all abortion laws, free safe abortion on demand, free safe contraception on demand and no forced sterilisation. And as we are here in this Chamber today, I love to imagine the Wendy Bacon of the 1970s just down the road at Australia Square, standing on the top of the tallest building in Sydney with her friend and activist feminist Liz Fell, throwing down thousands of pro-abortion leaflets from the rooftop. Thank you for being here, Wendy. Some 35 years ago, in October 1984, the first aim on The Greens NSW election platform—just after the party was formed—under the heading "Social freedom and democracy", read:

For women, the right to reproductive freedom and an unrestricted right to economic independence, as part of a process of breaking down hierarchical structures and beginning to re-order values by eliminating the division between the public and private domain.

From its formation in 1984, The Greens NSW has been the only significant Australian political party not only to advocate for the right of women to determine their reproductive destiny but also to refuse to concede a conscience vote to its elected representatives. In August 2004—15 years ago—I joined Greens Senator Kerry Nettle and other activists to leave piles of coathangers with pro-choice messages outside of the then health Minister Tony Abbott's office, expressing our support for women and pro-choice. As we are seeing around the globe, attempts to wind back our reproductive choices are never ending. It was during the first term of the Howard Government that a deal was done with Democratic Labor Party Senator Brian Harradine, who supported the Government's plans to privatise Telstra in return for restricting access to medical termination drugs such as RU486. Yes, that's right. For those of you who were not around on the activist feminist scene a couple of decades ago, our reproductive rights were bargained away so the Government could deliver on its privatisation agenda.

In 2006 a cross-party group of women senators came together to introduce legislation to overturn the ban. It was during this time that Greens Senator Kerry Nettle caused an uproar by wearing a T-shirt in the Chamber

with the slogan "get your rosaries off my ovaries". My shirt—hand embroidered by a Newtown constituent—is a nod to that part of The Greens activist tradition in Parliament. I stand here as one of 15 co-sponsors of this bill and I pay tribute to each and every one of those co-sponsors for their work and the work of the people in their offices for what has been a tireless effort both publicly and privately behind the scenes to get to the point we are at today. The work has been done and will continue to be done in the coming days and weeks to get through this monumental task. To them, I say thank you. This collaborative approach seems fitting, reflecting the approach taken by the NSW Pro-Choice Alliance, and the collectives formed by previous organisations and groups to advance this change.

It also seems fitting given the overwhelming public support for this reform. The vast majority of people—over 70 per cent—support the right to choose. People in rural areas are even more strongly in support than are their urban cousins. They understand more than anyone the barriers to access. The public position on the need to ensure safe access to abortion is clear—and has been clear for a long time. This is yet another example of the way the community leads and, let's hope, the Parliament follows. But providing leadership on this issue does not come easy. Neither does living with the reality and barriers that successive New South Wales governments—both Labor and Coalition—have failed to remove, stopping women from accessing the reproductive health care choices they need.

The real world impact of this has been significant. For so many of us this is not just political, it is really personal. Today I shared my story of the medical termination I had in the public system when I was 20 years old and travelling in London. I felt that it was important to join the voices of those who feel the need to share their story. To say: These are choices that we need to make. I recognise and acknowledge that I was in a privileged position. I was one of the lucky ones. I was free to make the choices that were right for me, with the privilege of the access to the health care and support that I needed to be able to make the right choices that worked for me.

Sadly, in the 100-year life of part 3, division 12 of the New South Wales Crimes Act, the lives of so many women have been adversely, and very tragically impacted: The ones who sought so-called backyard abortions and died of complications; the ones who experienced forced pregnancies and struggled in poverty to raise their children; the ones who lost the children they were forced to have as they were considered unfit mothers; and the rural, regional and remote women who had to travel vast distances, putting their lives at risk. With every day, every year and every decade that has passed with these barriers in place countless other women have had to recount their stories—to share their experiences—to reveal the details of their personal choices to be able to add weight, truth, power and strength to the argument that when you criminalise our reproductive choices, you prevent us from accessing the health care we need. You cause us harm. You disrespect us. You treat us as second-class citizens and you do not treat us as equals. We say to you that we have had enough.

The Reproductive Health Care Reform Bill will reform the law relating to the termination of pregnancies, including amending the Crimes Act as it relates to abortions, abolish the common law offences relating to abortion and regulate the conduct of registered health care practitioners in relation to terminations. The new Act will set out that a medical practitioner may perform a termination on a person who is not more than 22 weeks pregnant. After 22 weeks a medical practitioner may perform a termination. However, additional requirements are placed on that medical practitioner at this stage, including consultation with another medical practitioner who agrees the termination should be performed, consideration of other relevant medical circumstances, the person's current and future physical, psychological and social circumstances, and the relevant professional standards and guidelines.

Let us be clear, the insertion of those additional requirements is not necessary from a women's rights perspective, from a reproductive rights perspective or from a human rights perspective. The Women's Abortion Action Campaign made it very clear a long time ago that we need a repeal, not a reform. That said, I am not going to let the perfect be the enemy of the good. We clearly need this reform and we need this bill to pass today. Right now with this bill before us we need to acknowledge that there is a part of us that does not celebrate. I need to acknowledge—I will be honest and take strength from Tatyana Fazalizadah—that I do not feel like smiling about it, I do not feel like being thankful or grateful for the fact I am being afforded my rights. As a feminist and as a person with a uterus who has had an abortion and given birth to a daughter, I am outraged, offended and hurt.

I am outraged that it has taken this long and offended that there are still so many men who believe that they have the right to make laws that dictate what we do with our bodies and who try to control and regulate our choices. I am so sick of the hurt that people think they can impose with so much disgusting hate-filled visual and verbal violence on those who hold the completely non-radical position that a medical procedure is best handled by health professionals and that the person having the procedure should be the one making the decision, not the criminal justice system. The sound of men arguing over our personal reproductive health choices hurts my ears and it offends my very core. I have one simple message: If you do not like abortions do not have an abortion, but do not prevent other people from accessing the health care that they need and choose to have.

At long last we appear to be on the brink of decriminalising abortion. But this legislative change cannot be an end to the collective work of women and all people to have access to safe, free and legal reproductive health care and procedures when they require them. In the early 1970s Wendy McCarthy was one of 80 women who took out a full page advertisement in a newspaper making it public that they had had an abortion. As Wendy explained in an article about that act last week, "We wanted to provoke the cops because we thought if it is illegal and they're getting poor women for this, then why don't they come for us?"

Today we must acknowledge that the inequity continues for Aboriginal women and for women from culturally and linguistically diverse backgrounds. It continues because of a lack of education and an ongoing stigma connected to the idea of someone having an abortion. The inequity is stark for those living in remote, rural and regional communities who have limited access to health services and who cannot access termination services because they are not available in public hospitals or clinics. The open letter co-signed by healthcare practitioners in Wodonga, including GP and Greens Deputy Mayor of Albury Amanda Cohn, urged support for reform. They wrote, "We ask that you similarly allow colleagues and our patients the freedom to make these choices safely, in their own communities and without fear of prosecution." Removing abortion from the Crimes Act means it can be part of our public healthcare system, not part of our criminal justice system.

Improving funding for women's health services in rural towns and regional centres, and ensuring communication and support for diverse communities in New South Wales, will be an essential follow-up to this bill if it is finally passed into law. Two years ago Mehreen Faruqi introduced The Greens' bill to the upper House of this Parliament to decriminalise abortion. The Government member who spoke against that bill cited at length an article by Dr Kate Gleeson of Macquarie Law School. The member used her words to assist in justifying his objection to the bill—a bill that could have provided women unchallenged access to health care for the past two years if it had been supported at that time. In the interests of ensuring that what we are telling today is her story, and now that the stigma of criminality looks like it might finally be revoked for women's health care once and for all, I look forward to that member in the other place, and all members of the Government, taking leadership in this area. They must continue to learn from my good friend and long-time Newtown resident Dr Kate Gleeson, who is present today. She writes:

A longstanding lack of political leadership around abortion has meant that the private health sector has been left to carry the majority load in providing women their reproductive rights. As a result, these rights are realised much more readily in the cities than in the towns, and they would appear to depend not only on the flavour of the local law, but also on the personal commitment of a decreasing pool of doctors and ultimately on the prevailing market conditions of the day.

It is time to get this done. It is also time to make sure that if it is done we will work together to reduce the barriers to access—including cost, distance, language and information—so we no longer have to lower our voices when we talk about our health care and accessing our reproductive rights. I commend and thank everyone who has taken action to support the decriminalisation of abortion over the decades. I commend the bill to the House and offer the support of The Greens to finally get this done.

Ms TRISH DOYLE (Blue Mountains) (16:21): I speak in support of the Reproductive Health Care Reform Bill 2019. This is an important day for all people in New South Wales and it is an opportunity to correct an historic wrong. As the Minister said, we must place the issue of abortion where it should be: as a reproductive health issue and not a criminal act. I thank those women who have come forward to share their experiences of accessing health care and I thank those who were sadly denied or made to feel bad for accessing abortion care. I am most appreciative. I acknowledge the brave women and men—doctors, nurses, counsellors and activists—who have stood up for the rights of women. I believe we need to trust women to make the best decisions about their health and their pregnancies because women are the greatest experts on their own bodies and their own lives.

Women know what is right for them and what is right at a particular moment in time. I thank the members of Parliament from across party lines who came together in a working group—Liberal, Labor, The Nationals and Independents—to work collaboratively on this bill to decriminalise abortion in this State and bring us into line with the rest of the country. I thank members across the entire political spectrum who have been working to advocate for this for many decades. The 2003 Australian Survey of Social Attitudes [ASSA] found that 81 per cent of those surveyed believed a woman should have the right to choose whether or not she has an abortion. The 2003 ASSA found that religious belief and support for legal abortion are not mutually exclusive, with 77 per cent of those who identify as religious also supporting a woman's right to choose.

Clearly, the vast majority of Australians support this reform regardless of their religious affiliations. That is not new. Those figures have been sustained now for decades. Surely it is time for legislation to reflect the views of the community. Approximately one-quarter of Australian women have had an abortion in their lifetime. Many of those women were already mothers and had chosen to have a termination of pregnancy due to the circumstances in their lives at that time. Some people may wonder why there is a need for abortion in this day and age. Even

when used correctly and consistently all contraceptive methods can fail. Sometimes women are not in a position to insist on contraceptive use, particularly when violence is involved.

It is unreasonable to expect all women to be able to control their fertility for 100 per cent of their reproductive lives. It is time that we treat abortion like any other sexual or reproductive healthcare service. That is what is expected of us by the majority of people in this State. It is also supported by key professional groups such as the Royal Australian College of Obstetricians and Gynaecologists, the Australian Medical Association, the Public Health Association of Australia and the Family Planning Alliance Australia. They all advocate for the decriminalisation of abortion and equity of access to abortion services. Once the issue of legislative reform has been addressed, we must look at the broader issues of equality of access, affordability and the responsibilities of both public and private healthcare sectors in the provision of abortion services.

I acknowledge that abortion law reform can rouse strong emotions and that for some people of faith this is a difficult subject and one which they cannot support. However, I urge those who oppose this reform on religious grounds to listen to the stories of women. On another occasion I shared some of my own personal story in this place. I spoke about the child I was who grew up in poverty in a family mired in domestic violence. Today, I stand before you as the proud new shadow Minister for Women and say that the personal is the political. At a very difficult time in my life I also needed to seek abortion services. People who oppose this bill need to listen to women's stories, even if those women are making what they see as a morally wrong choice. It is their right to live in accordance with their conscience. People must ask themselves this question: Should women and doctors spend 10 years in jail to satisfy their morality tests? What these women need most is our support and understanding, not our judgement.

At this point I acknowledge the role of women's health centres and Family Planning NSW. In the 1970s and 1980s it was not uncommon for abortion clinics and women's health centres to be raided by the police, who were looking for medical files with the potential for criminal prosecution. Without a change to the law and the decriminalisation of abortion that is potentially still the case. There has been much misinformation surrounding this bill. Currently, in this State around 90 per cent of terminations of pregnancy occur before 12 weeks, with most occurring before 10 weeks. Where second-trimester abortions do occur, most occur for medical reasons such as fetal anomalies. In other cases, they often occur in the context of incest, domestic violence and women having substance dependency or mental health problems. Where women have difficulty in accessing abortion due to factors such as cost, geography and a lack of referral knowledge and options, it is more likely that a woman will access a later term abortion as a result of those barriers or that she will seek an unsafe backyard abortion, risking her life. Let us remove the barriers.

In a practical sense, this bill will not immediately change the status quo—abortions are happening right now in New South Wales, whether those opposed to this bill like it or not. However, the bill will take abortion out of the criminal code and place it appropriately within a health legislative framework. We can then begin the work of providing equitable access through the public health system. Passing the bill will mean that women and their doctors will not face the potential jeopardy of criminal prosecution. By reducing the stigma and providing greater options within the public health system, women should be able to access termination of pregnancy at an earlier stage.

Staff at abortion provider Marie Stopes International informed me that each week they see approximately four or five women seeking access to second-trimester abortions in their Victorian clinic after they have been refused access in New South Wales. Those women have often been turned away from public hospitals and told that abortion is illegal in New South Wales. As they navigate the system in the dark, without knowledge and information about access in New South Wales, their pregnancy advances and they are left with no other option than to access a late-term abortion. Let us remove those barriers.

For women in the regions, it is not simply the cost of the medical procedure that poses a burden. Women will often face significant travel costs and distances. They will need another adult to accompany them home. They may need to stay away overnight, sometimes being forced to leave their children at home. All of this can make access to an abortion out of reach. Sometimes access is about more than money. Far more work needs to be done in the regions to train and support GPs to ensure more consistent access to safe early abortion in rural and regional areas. We want those women supported with access to public healthcare services in their communities. Over the past few weeks I have been contacted by women and doctors wishing to share their stories with me. *[Extension of time]*

One woman living in Wilcannia contacted a Sydney-based women's health centre for help. She was 16 weeks pregnant, a survivor of domestic violence and she already had five children. She had known she was pregnant for some time but had delayed her abortion as she tried to save money to pay for it. The women's health centre assisted her with a no-interest loan and after great difficulty was able to provide her with a referral to a sympathetic doctor. In another example, a woman arrived at the local women's refuge with her three children and

no belongings other than what they were wearing or could store in plastic bags on the train trip from the north-west of the State. The woman had experienced serious domestic violence at the hands of her partner and the father of her children. In previous pregnancies the violence escalated, as it does for many women. She knew that she was facing homelessness and serious uncertainty. She knew she could not go on with the pregnancy.

Later she spoke of the difficulties she was facing but she knew that she had made the right decision. She knew that life as a single mother was not going to be easy and she was glad that she could access a safe abortion with the support of the refuge staff. We have made those women criminals and it is time to reverse that wrong. There are women in this House and in the gallery who have—because of this archaic law—committed a crime. I acknowledge the bravery of my comrade sister Emily Mayo, who began #ArrestUs on social media recently. Emily wrote to me to tell her story and I have asked her if I can share some of it today. She said:

I had an abortion when I was in my early twenties.

I had a one-night stand. I had unprotected sex. It was consensual, uncontroversial. It was a mistake. I remember going to my GP and I was frightened. I knew abortion was in the criminal code but I also knew there was no way I was in a position to have a child.

I remember shaking as I asked the GP about what to do and I remember them explaining to me that I would need to have an ultrasound and come back. I talked to only one friend. I needed to borrow money because I could not afford the out of pocket expenses for the doctor's appointments and the ultrasound.

It was awful asking but she was supportive—she was a little older than me and she said she had gone through the same and that someone had helped her too.

That is an example of women helping women. She went on:

I lived in Inner City Sydney—I was lucky—at least there were clinics near to me.

I had driven past the clinic I was referred to time and time again on my way to work and I had seen the anti-abortion protestors out the front. I was terrified. I called them and I made the appointment.

They explained that terminations were not really legal and that I would need to see a counsellor and demonstrate why having a baby would be detrimental to me and the "unborn child".

Medicare covered some of the cost but I was too frightened to use my Medicare card in case I got in trouble.

I cannot remember how much it was, but for me at the time, it was a lot.

...

It was awful. I felt useless. And I felt absolutely sure of the hard decision I had made.

I had the termination.

I have no regrets.

...

I do not want the women I have supported through this to have to do the same for others. I want reproductive health decisions to be respected. ...

I have a five-year old child now. I am as comfortable with the decision I made to have an abortion, all those years ago, as the decision I made to have a child. I was ready.

New South Wales is ready. It's time.

The success of abortion law reform can only be achieved through a strong coalition and the goodwill of many players over many decades. I acknowledge warrior feminist and lobbyist extraordinaire Claire Pullen, who is in the gallery today. She has been central to this campaign. I also acknowledge campaigners including former MLC Helen Westwood and EMILY's List Australia, Dr Deborah Bateson, Ann Brassil and Family Planning NSW, Margaret Kirkby, the Uniting Church and the Anglican Church in Newcastle, Lyn Muir and the Women's Abortion Action Campaign, Jozefa Sobski and the Women's Electoral Lobby, Rosie Ryan and the Labor for Choice women, the Our Bodies Our Choice Collective, Marie Stopes International, the Pro-Choice Alliance, doctors from Albury-Wodonga who every day assist women from New South Wales, women's health centres over the decades, the early pioneers and the Bessie Smyth Foundation.

I acknowledge the work that Penny Sharpe, MLC, has done in the other place. She has driven this bill out of the legislation for safe access zones to reproductive health clinics, which was introduced last year. I thank and acknowledge my friend, mentor and Federal Labor colleague Tanya Plibersek, who this year put this firmly on the national agenda—much to the distaste of the many who disagreed with her. She recognised that we are building on the work of the many who have come before us. New South Wales, it is time—free, safe, legal. Let us decriminalise abortion. I commend the bill to the House.

Mrs LESLIE WILLIAMS (Port Macquarie) (16:35): Today in this Parliament I stand with other members in support of the Reproductive Health Care Reform Bill 2019—historic legislation that will see the archaic laws of 1900 replaced with laws that are in line with community sentiment and expectations. I thank the

member for Sydney for introducing this bill to the House last Thursday, but do so knowing that it comes from the culmination of the efforts of a working group that included my colleague in the other place the Hon. Trevor Khan, the Hon. Penny Sharpe and the member for Summer Hill. I also acknowledge Minister for Health and Medical Research Brad Hazzard, who provided oversight during the development of the legislation.

After working closely with the Minister for the past two years I know very well that his extensive legislative experience—along with his practical and frank advice—would have been enormously beneficial to those intricately involved. Over the past week many people from across my electorate have asked why I chose to co-sponsor this bill. It seemed to be to the surprise of many that my response was void of complexities and detailed explanations. I am co-sponsoring the Reproductive Health Care Reform Bill 2019 because it is the right thing to do. It is right to allow a woman to access reproductive health services without being treated as a criminal. It is right that doctors are able to provide reproductive health services to women without fear of prosecution. It is right to allow women to choose what happens to their own bodies without having to be shamed and demeaned because of their choice. It is right to provide women living in rural and regional communities access to appropriate and timely reproductive health services.

I acknowledge the 15 co-sponsors of the bill. This is the first co-sponsored legislation ever introduced into the New South Wales Legislative Assembly and has more co-sponsors than any other piece of legislation in the history of the Parliament. We have come together from communities across the State and from a range of political affiliations to jointly support this bill and, importantly, we have come together because we know it is the right thing to do. The Reproductive Health Care Reform bill has a number of objectives relating to the performance of terminations by registered health practitioners. Clause 5 of part 2 allows termination by medical practitioners to a person who is not more than 22 weeks pregnant. Clause 6 of part 2 outlines the circumstances under which a medical practitioner is allowed to administer a termination to a person who is more than 22 weeks pregnant. In considering whether a termination should be performed on a person under that section, a medical practitioner must consider: the person's relevant medical circumstances; the person's current and future physical psychological and social circumstances; and the relevant professional medical practitioner standards and guidelines.

Following consideration of those factors the medical practitioner must be satisfied that, in all the circumstances, the termination should be performed. It has been suggested that the bill being debated today will make it easier for women to terminate later in pregnancy. On the contrary, the Reproductive Health Care Reform Bill requires under clause 6 (1) (b) that a termination after 22 weeks requires the medical practitioner to consult another medical practitioner who also considers that, in all the circumstances, the termination should be performed. Most significantly, the Reproductive Health Care Reform Bill amends sections 82 to 84 of the Crimes Act 1900 that prohibit unlawfully performed terminations, without specifying what the word "unlawfully" means.

That creates uncertainty for medical practitioners because the courts have to interpret on a case-by-case basis whether they believe the termination is lawful in that the medical practitioner forms an honest belief on reasonable grounds that the procedure is necessary to preserve a woman from danger to her life or physical or mental health. There has been criticism that the Reproductive Health Care Reform Bill 2019 has come to this Parliament with little or no consultation. That could not be further from the truth. New South Wales is the last State or Territory in Australia to decriminalise abortion and, like the development of much legislation, it draws on the work of other jurisdictions—in this case specifically Queensland and Victoria. In 2007 the Victorian Law Reform Commission submitted a report to the Victorian Government following 36 meetings and 500 submissions resulting in the development and passing of its Abortion Law Reform Bill.

As recently as 2017 the Queensland Law Reform Commission took a similar path and, after reviewing 1,200 submissions, produced a report that resulted in the Termination of Pregnancy Bill 2018. In both of those States terminations by qualified medical practitioners has been removed from the Crimes Act, but terminations performed by an unqualified person or unqualified persons who assist in the performance of a termination remains an offence and carries a maximum penalty of seven years imprisonment. Similarly, the New South Wales Crimes Act 1900 will be amended as outlined in schedule 2.1 [2] to the bill to make it an offence for a person to perform, or assist in the performance of, a termination on another person, if the person is not a medical practitioner, or other registered health practitioner, authorised to do so under the proposed Act.

I have spoken to a number of constituents in the Port Macquarie electorate who have been ill-informed about the bill as it relates to the ability of doctors and other health practitioners to refuse to be involved in a termination procedure. Part 8 of the bill clearly and comprehensively articulates that medical practitioners will not be forced to perform abortions. A medical practitioner is; however, required to follow the process as outlined in the bill if they are to avail themselves of the protection of conscientious objection. They must, first, disclose that they have a conscientious objection and, secondly, transfer the care of the woman seeking a termination to another practitioner who does not have a conscientious objection. That is consistent with the Australian Medical

Association [AMA] Statement 2019. In April this year Dr Chris Moy, Chair of the AMA Ethics and Medico-Legal Committee, added:

On a matter where there are sometimes intense sensitivities with regard to the rights of individual doctors weighed against the potential for patient care to be affected, the tone and emphasis of the statement has shifted. Instead of taking a prescriptive "thou shalt not" approach which might be counterproductive by being confrontational, the Position Statement takes a reflective approach where a doctor is asked to focus on what really should matter the most: the impact of their decision on the patient in front of them.

Similarly, in a media release dated 30 July this year the Royal Australian and New Zealand College of Obstetricians and Gynaecologists made very clear its position on abortion. It stated:

The College believes that abortion should be regulated as a health procedure and not by the criminal law. Further, the College believes that women have the right to access abortion without their privacy being infringed or being subjected to harassment.

It goes on to say in relation to conscientious objection:

It respects the personal position of all of our members, and recognises the right to conscientious objection in relation to abortion. However, the College emphasises that health practitioners owe a duty of care and must refer the patient to other health practitioners or health services where a woman is able to receive the health care she needs.

Concerns have also been raised with me suggesting that we will see significantly more abortions, including an increase in the prevalence of late-term abortions, if the Reproductive Health Care Reform Bill 2019 passes. Firstly, I am advised that approximately 36,000 abortions took place in New South Wales in 2018 and that 95 per cent of abortions take place before 14 weeks. Those that take place after 20 weeks gestation usually involve complex medical or psychosocial reasons. I refer again to the Queensland Law Reform Commission report that reflects on findings about the incidence of abortions post-law reform in various jurisdictions. The report states:

Australia's termination rate has been steadily declining.

It also states:

Studies of the worldwide incidence of termination have also found that, 'unrestrictive abortion laws do not predict a high incidence of abortion...'

The report also found:

In Western Australia, the introduction of termination legislation in 1998 included a data notification requirement. Published data show that the termination rate declined overall from 19.7 per 1000 women aged 15 to 44 years in 1999 to 16.4 in 2012.

Finally, a recent qualitative study of the impact of the law reform introduced in Victoria in 2008 found little perceived change in the provision of termination services, with no increase in access to termination, including terminations at later gestation. [*Extension of time*]

As a regional member, a registered nurse and a former Parliamentary Secretary for Regional and Rural Health, I know very well that we can do better when it comes to access to health services in our regions. Whilst ever abortion remains criminalised, it will continue to disproportionately impact on women already disadvantaged by remoteness as well as by low socio-economic status, domestic violence and sexual assault. Only when women in our communities can be freed from the stigma and fear associated with making the very difficult choice about their pregnancy and subsequent termination will they be able to access safe, accessible and timely reproductive health services in regional New South Wales.

Decriminalisation of abortion is broadly supported across the medical and legal communities, including by the Law Society of New South Wales, the New South Wales Bar Association, Community Legal Centres NSW, the Royal Australian and New Zealand College of Obstetricians and Gynaecologists and the Australian Medical Association, to name just a few. Studies have reflected that a majority of the community support the decriminalisation of abortion, finding almost 70 per cent of Australians agreed that women should be able to obtain abortions. In 2018 the *Australian and New Zealand Journal of Public Health* found that 73 per cent of New South Wales residents agreed and believed abortion should be considered in the appropriate context as a healthcare service.

I received a letter from the Zonta Club of Port Macquarie, dated 29 July 2019, urging me to support the Reproductive Health Care Reform Bill 2019. It reflected the international organisation's view and, agreeing with the United Nations Commission on the Status of Women, it states in part: "The human rights of women include their right to have control over and decide freely and responsibly on all matters related to sexuality, including sexual and reproductive health, free of coercion, discrimination and violence, as a contribution to the achievement of gender equality and the empowerment of women and the realisation of their human rights".

I understand this is a sensitive, emotive and complex issue and that people will have differing views. I thank those in support of this bill and those opposed to it for contacting my office to voice their opinion. I respect the views of each of them and hope that, likewise, they will respect mine. In closing, I want to share an email

I received from a constituent that clearly enunciates the view shared by many I have spoken with over past weeks. I thank her for her thoughts and her support. She says:

As someone who cares deeply about this issue, I am really proud that my local representative is supporting this bill and I wanted to send a message saying thank you for supporting change, and the autonomy, dignity and wellbeing of those who need to access abortion care.

I believe that a woman knows what makes sense for her health, her body and her future; and that decriminalising abortion is an issue of healthcare and of dignity. It's long past time New South Wales had a compassionate healthcare system that recognised the deeply personal and complex reasons that a person may need to end a pregnancy.

I commend the bill to the House.

Mr DAVID ELLIOTT (Baulkham Hills—Minister for Police and Emergency Services) (16:49):

I offer some observations on the Reproductive Health Care Reform Bill 2019 and acknowledge that members have been given a conscience vote on this bill, which means that the normal processes of parliamentary debate are somewhat different to processes that apply when other legislation is debated in the House. I have never presumed to dictate to a woman what she should and should not do with her body: That is not something I have done in public life and it is certainly not something I subscribe to as a private citizen. As neither my wife nor I have had to face the dilemma of abortion or early termination of a fetus, I accept that I come to this debate with a certain level of bias. I also believe that most members of the Chamber will be approaching this debate with a certain level of bias.

Having said that, I do not subscribe to the argument that either of these predicaments mean I should be denied an opinion or should decline the opportunity to present my views. As I have said publicly and already in the Chamber, I will not be supporting this bill as it stands. There is plenty in this bill that is worthy of the support of this House. For that reason I am quite sad that I must oppose the bill as a total piece of legislation because abortion law reform should never be concluded—it should be an open book. Indeed, what makes us civilised as a society in the Western world is that we maintain an open opinion on how legislation governs the private and personal lives of the citizenry. As I began reflecting on the bill, I was mindful of the need to be consistent in my approach, and I am consistent: I am opposed to all premature death. I celebrate life. I am opposed to capital punishment, to euthanasia, to the ceaseless loss of life on the battlefield and to abortion on demand. I think that termination of a pregnancy needs to be heavily regulated.

I am opposed to the bill unamended because it was not an election issue. I acknowledge the comments of the member for Port Macquarie that we should be introducing legislation because other States have done so. I completely reject that argument because there are not only laws in other States that this State would never consider but also laws in like-minded jurisdictions that I am quite certain this State would find completely repugnant. It was not being advocated for in my electorate. Neither The Greens, Labor, nor other candidates advocated for the reform in the last State election. I had nobody in my electorate asking me about this matter, nor did any of the opposing candidates bring it up in the many public debates that we had. Considering the delicate nature and community anxiety being caused, to my mind the bill is certainly being rushed.

Compared to the length of time this Parliament took to debate the greyhound racing reforms, which were subsequently reversed, and all other legislation relating to premature death, the time we have allowed for this bill to be debated has come up short. There has been a lot of discussion about the working group and the 15 members across the political divide who have drafted this bill. I put on record that I was not included and nor was I asked to be part of that committee. I note that all members of that working committee are advocates and firm supporters of the bill; to my mind it has not been drafted with much objectivity. I caution those who are supporting the bill against saying it is a feminist issue because I know there are plenty of feminists, including my wife and MPs in this Chamber, who oppose the bill. Suggesting that there are political philosophies encompassing the support groups in favour of this bill are both naive and misleading.

I believe the timing of this bill has been completely mismanaged—pure and simple. Those seeking to circumnavigate the parliamentary process and set aside the centuries of convention that this Chamber has used to ensure that debate is objective and transparent have forfeited the right to complain if it ever happens again. Previous speakers have said that the bill will take away the fear and stigma of abortion. If that were the case I would be a co-sponsor of the bill. But it will not do that; no law could ever take away those personal feelings. As a young man, I had a close personal friend who was agonised while telling me that she had had an abortion. She made those comments while acknowledging that she had been, in her words, abused in every way, shape and form. As somebody who is pro-life, it was crushing for me to hear that my dear friend, somebody I loved so much, had to go through that pain and suffering.

For that reason I also want to make sure that the stigma and fear of abortion is removed at every opportunity. Just because something is legal does not mean its fear and stigma will be taken away. I am often reminded by my wife that childbirth is fearful because it is painful; legalising anything illegal related to the

reproduction of human life would certainly not change that. Like so many of us in this Chamber I have consulted widely in the short period available to me to digest this legislation. As the member for Baulkham Hills, I must acknowledge that of the 240 people who called my office and spoke to me personally about the legislation all but 12 asked me to oppose it. I will do that not only to honour their wishes but also because I think this legislation has been ill-timed and ill-thought-out. To get this bill done properly, there must be a lot more public debate and input from all those who have a view different from that of those who support the bill. I oppose the bill.

Mr GREG PIPER (Lake Macquarie) (16:58): As a co-sponsor of the Reproductive Health Care Reform Bill 2019 I support it. I was not on the working committee that drafted the bill, but after reading it and agreeing strongly with its substance I did not hesitate to be its co-sponsor to support my friend the member for Sydney, Mr Alex Greenwich, other members who were involved in it and the other 14 co-sponsors. First, I acknowledge the tremendous work that has been done on the bill by my Independent colleague the member for Sydney; the member for Summer Hill, Jo Haylen; and the Hon. Trevor Khan and the Hon. Penny Sharpe in the other House.

I also acknowledge the support of the Minister for Health and Medical Research and his powerful contribution to the debate earlier today. During the numerous contributions from both sides of the debate today, members have noted that this is a highly emotionally charged matter. However, the reforms contained in the bill are long overdue. As a co-sponsor of the bill I support them. During my 12 years in the New South Wales Parliament, I have seen a number of bills that have tested our moral compasses. The bills forced us to think deeply about an issue, not just in a legal or governance sense, but also in a deeply personal and human sense. This bill should not be dragged down by the partisan beliefs of a person, religious or otherwise. We must open our minds to the other side. As a white male aged around 60, I have to give a heightened consideration to the women in my electorate and the women in my life.

Debate interrupted.

Public Interest Debate

EDUCATION WEEK

Ms FELICITY WILSON (North Shore) (17:01): I move:

That this House:

- (1) Notes that this week is Education Week.
- (2) Acknowledges that every student, no matter where they live, should have access to a high-quality education.
- (3) Notes that the Government is delivering record education funding for students across the State, including \$6.7 billion over the next four years to deliver more than 190 new and upgraded schools.
- (4) Condemns the former Labor Government for closing more than 90 schools and leaving behind a record maintenance.

Let us talk about the good stuff, shall we? Let us talk about Education Week. I think every member in the House will be unified behind Education Week and this year's theme—every student, every voice—which seeks to ensure that students across New South Wales have the opportunity to speak up and that they have the confidence, resilience and capacity to share their views because we want our students to express their ideals and shape the world.

On Monday morning I had the great pleasure of joining a school in my electorate, Middle Harbour Public School, for its Education Week open day. I got to speak to a number of students and I thank the school captains, Sam and Katie, who did a wonderful job of leading the assembly that day. They were in charge of that assembly because Middle Harbour Public School believes in giving its students a voice and making sure they hold leadership positions.

I am excited that the Middle Harbour Public School community and its students are leading an investment into solar panels at the school because they believe in making environmental improvements and a better future for everybody. The Liberal-Nationals Government supports Education Week extensively. The Premier went to an Education Week open day at St Marys North Public School during the week. I think the member for Dubbo mentioned today that there was a live simulcast in Dubbo. That is because the New South Wales Government is making record investments to provide students with state-of-the-art learning facilities and to lift academic standards.

Ms Prue Car: Ironically, you have never invested anything in St Marys North Public School, of which you would be aware, but anyway.

Ms FELICITY WILSON: The New South Wales Government is rolling out a number of unprecedented initiatives and I would love to tell you more about those, not just in the motion.

TEMPORARY SPEAKER (Mr Lee Evans): Order! I call the member for Oatley to order for the second time.

Ms FELICITY WILSON: Everybody here knows that we are delivering an unprecedented infrastructure program for schools across New South Wales—that is, 190 new and upgraded schools through a \$6.7 billion investment. It is an expanded Bump It Up program. The Premier speaks about it regularly. She spoke about it again in question time today, if those opposite were listening—we are not sure. The Bump It Up program is about ensuring that all schools in New South Wales have expanded targets in attendance, wellbeing, equity, numeracy and literacy. This is part of the heart of this motion—ensuring that every student, no matter where they live, should have access to a high quality education because we think students across this State deserve investment in their education and their future.

This has been a key issue to me and it is one of the reasons that I came into this place. In my inaugural speech I spoke about the role that education played in shaping me as an individual and the opportunities that I have had since then. I went to a couple of different schools. One was in the member for Cessnock's electorate. I shared my beautiful Nulkaba Primary School year 1 photo on social media this week—I hope the member for Cessnock gives it a like. I experienced regional schools and Sydney schools; I experienced the public education system and the private and Christian education system. My experience was that there was a disparity. This was 20 or 30 years ago, but there was a disparity in the provision of education and resources for our students, our teachers and their staff.

I want to make sure that there are no barriers to every child getting the best outcomes in their lives. In my own community of North Shore, that is something I invest in regularly in the way in which I advocate for my community. I am proud that among those 190 new and upgraded schools, two of my local primary schools are being upgraded and one of my local high schools—Neutral Bay Public School, North Sydney Demonstration School and Mosman High School. Those three schools are in various stages of planning and progressing upgrades. They will get rid of demountables and put in things like new halls and access to new facilities.

Ms Kate Washington: Bless.

Ms FELICITY WILSON: As the member for Port Stephens says, bless. I thank her for acknowledging that students everywhere should receive investment in their facilities, classrooms, halls and play spaces.

TEMPORARY SPEAKER (Mr Lee Evans): Order! I remind the member for Port Stephens that she is already on three calls to order. I will not put up with that behaviour.

Ms FELICITY WILSON: As this motion says, every student matters. Even if the member for Port Stephens does not think students in my community matter, I think that they do. It is also important for us to reflect today on the fourth point of this motion. It would be a surprise to nobody in this place—we hear it quite often—that Labor let down the students of New South Wales in closing a record number of schools and leaving us with significant infrastructure backlogs. Since 2011 we on this side have been working through the infrastructure backlog that those opposite left behind. Through strong economic management and getting the books balanced, we have made sure that we are investing in bringing down that infrastructure backlog.

Those opposite did not want to invest in the needs of our students and the maintenance of our schools, but we are chipping away at that. I acknowledge former Minister for Education Rob Stokes and the Minister for Education and Early Childhood Learning Sarah Mitchell, who joined me at Neutral Bay Public School to meet with students, teachers, staff and support staff, for the work they are doing to ensure we get that infrastructure backlog down and meet the commitments we have made in doing that. There is a range of other initiatives that we are putting in place as well. We are finally delivering cooler classrooms for our students, with air conditioning where needed. We are finally investing in that. This is something that those opposite like to tell us that they would do, quite regularly, but when they had those 16 long years in Government, what did they do?

TEMPORARY SPEAKER (Mr Lee Evans): Order! I call the member for Wollongong to order for the first time. I call the member for Keira to order for the third time.

Ms FELICITY WILSON: They closed down schools, they refused to invest in the infrastructure and maintenance backlog and they refused to invest in our students, teachers and support services. It is disappointing that those opposite had such a long time to make such a difference for our students and failed to do so.

TEMPORARY SPEAKER (Mr Lee Evans): I remind the member for Gosford that she is on one call to order. I call the member for Gosford to order for the second time.

Ms FELICITY WILSON: It is clear that the Berejiklian Government has a mandate in New South Wales to get on with the job of investing in our schools through a record investment in infrastructure.

Ms PRUE CAR (Londonderry) (17:08): It is pleasing to us on this side of the Chamber that the first topic we are discussing in this new format of a public interest debate is public education. But if we were to believe that this is the most important issue to be debated today, the most significant matter of public debate, you would think there would perhaps be more members on the Government benches. You would also think we would be able to debate this not as the sun is going down outside but perhaps at a time when the media were still able to listen and factor it into the nightly news.

What the Government has done with the new sessional orders in taking this debate away from 3.30 p.m. or four o'clock to now at five o'clock is nothing short of what we are getting used to with this Government—it is sneaky, it is secretive and it is all about avoiding scrutiny and shutting down the people of New South Wales, this slippery new arrangement. When it comes to the Government's motion today on this public interest debate, those opposite talk a big game. But let us talk about what is actually happening in schools throughout New South Wales. I move:

That the motion be amended by leaving out paragraphs (3) and (4) with a view to inserting instead:

- (3) Notes that 139 of the Government's schools promises made at the 2019 election are either unfunded or in planning limbo.
- (4) Calls on the Government to provide funding and construction time lines for all school commitments made during the 2019 election campaign.

Government members can come in here at five o'clock, at the end of the day, and congratulate themselves on what they think is happening as much as they want. They can read the notes that the Premier's office has given them on what they think is happening in education, but let us talk about some examples. That is what we will be doing: shining some light on what is actually happening in these schools. Let us talk about the fact that the 139 schools the Government promised to build or upgrade have received zero funding allocation in the budget or have absolutely no time line attached to them. These are schools in new release areas where the Government has made councils release plans for houses, but where is the funding for the schools? These are areas like Catherine Field in the member for Camden's electorate, and Harrington Park. They include Hurlstone Agricultural High School, Leppington primary school, Marsden Park primary school in my electorate of Londonderry, the Meadowbank Education Precinct, and schools in the electorate of the member for Mulgoa—the list goes on.

Let us talk about the fact that there is overcrowding at our schools, which is absolutely unacceptable when this Government has known of population increases. This week families in the Parramatta area have approached the media because they are desperate for upgrades at a school in Parramatta East where the Government has allowed the number of units to explode, more and more people are moving in, without upgrading existing public schools. The mother of Lewis, a student in year 1 at Parramatta East, claims that her son spent the first term of year 1 without a classroom. That sounds to me like a government that is not committed to public education!

Students at Parramatta East have to line up to use the toilet. I know what would happen if my year 1 son had to line up to use the toilet—it would not be pretty, I can tell you that. This school is across the road from a high-rise disaster that the Government has allowed to blow out the budget by a record \$225 million, but it cannot find the money to upgrade an existing school. These local parents are saying it is devastating and infuriating that their children are being left behind. The Government tells us there are no funds for major upgrades. It clearly has never heard the Treasurer talk about the "new golden century". Those opposite are always in this place crowing about how they are rolling in money, but they do not have their priorities right.

They are obsessed with talking about the previous Labor Government. They seem to conveniently forget that they have been in government now for two terms—that is eight years, if they have forgotten. They talk about our record in public education. Well, let us look at theirs. Let us look at Passfield Park, let us look at what is happening in Randwick, let us look at Parramatta East, let us look at the blowouts at the failed experiment of the Parramatta high-rise and let us give some certainty to parents who deserve their school upgrades.

Mr MARK COURE (Oatley) (17:14): Today I speak in the first public interest debate, following the changes to the standing and sessional orders of this Chamber. What an honour it is to speak about Education Week. I acknowledge the member for North Shore, who moved the motion. Education Week is an annual event that is held during the first week of August to celebrate public education in New South Wales. The theme for 2019 is "Every student, every voice". It is a celebration of the wonderful work of students and teachers and how the education system gives students the skills they need in order to have and express a voice during their own educational journey as engaged global citizens.

In my electorate kids from Mortdale Public School will have the opportunity to learn more about our Indigenous culture and later in the week they will be having a wonderful book fair. At Narwee Public School kids will be participating in dance performances and plays, and at Oatley Public School kids will have the opportunity

to have an open day with parents and guardians to showcase their wonderful work. It is a massive week at Oatley West Public School, with open days, morning teas with parents and guardians, performances—dance, hip-hop dance and song groups, kinder dance—robotics, chess group and the interactive garden group.

The Government is focused on providing the children of New South Wales with the best possible start in life. That is why the Government has invested over \$6.7 billion in education, including the rollout of 190 new and upgraded schools across the State. This includes two schools in my electorate: Penshurst Public and Penshurst West Public schools. I am pleased to update the House that construction has now commenced at Penshurst Public School. The new school will include 47 brand new classrooms and a new library, hall and covered outdoor learning area, in addition to open play spaces—playing courts, seating, shade structures and running tracks. The new Penshurst Public School is expected to be completed by mid-2020.

At Penshurst West Public School early works and designs have now been completed, with the major works contract going out to tender shortly. The upgrades to Penshurst West Public School will include modern teaching spaces and facilities, seven new learning spaces and classrooms, a new student amenities building and a special programs room along with enhanced open spaces. It is expected to be redeveloped by the end of next year. The New South Wales Government's record investment in new and upgraded schools is in addition to the \$1.3 billion to wipe the existing school maintenance backlog—left by those opposite—to zero and the \$500 million Cooler Classrooms Program to provide air-conditioning.

Mr Clayton Barr: You just make up a new number every day.

Mr MARK COURE: You guys might learn something if you listened.

TEMPORARY SPEAKER (Mr Lee Evans): The member for Oatley will address his comments through the Chair. The member for Cessnock will come to order.

Mr MARK COURE: The Cooler Classrooms Program will provide air-conditioning to more classrooms than ever before. The Government is aiming to reduce the cost of before and after school care by up to \$225 per child per year via a capped rental subsidy of up to \$15,000 for providers that run services in New South Wales government schools. The \$120 million strategy over four years includes \$50 million to help schools buy new equipment and expand their facilities. Investing in education invests in our children's future. The Government's investment stretches across all stages of education from early childhood education to primary and secondary schools and through to our TAFE network.

Unfortunately, Labor's track record in my electorate saw the closure of Narwee High School by the previous Labor Government. On a personal note, my son, James, started his first year of schooling at Mortdale Public School, where my wife, Adla, is the P&C vice president. My wife is also the English coordinator at her school where she teaches. Education is therefore a huge passion of mine and I am proud that the Government is continuing to invest in the education system across every facet of this State.

Ms TAMARA SMITH (Ballina) (17:19): After five years of reordering of business in this House, this is the first time that The Greens have spoken in such a debate. I am very pleased to do so, as a member of the crossbench. It is such a shame that in Education Week the motion of the member for North Shore focuses on the Government, rather than on the teachers and students of New South Wales public schools. Before I address the very serious issue of the lack of funding and the complete stripping away of TAFE in New South Wales, I want to recognise in Education Week our teachers and students, who should be congratulated.

Our teachers, who are underpaid, should be in our minds because day in, day out across the State they are the ones who are doing the hard work, often in inferior conditions. I can say that because I was a teacher in public schools for 21 years, including in remote and regional areas. As to the motion before the House, The Greens acknowledge and agree that all students should have access to a high-quality education. We do not agree that there has been record spending by the Government. There is a little thing called the consumer price index, which I will come to. We do know that the previous Labor Government closed more than 90 schools. The member for Balmain, the member for Newtown and I have all experienced that in our electorates. That lack of foresight is being repeated by the Liberal-Nationals Government as we speak.

While the Government is building new schools, there are small schools, particularly in my area, that are suffering under the Department of Education's current policies. The recent Federal election result will mean that for the next three years public schools will not be funded in New South Wales to the minimum Schooling Resource Standard [SRS]. The privatisation of vocational education and training will continue and the opportunity for guaranteed preschool funding for three- and four-year-olds is lost for now. Schools in New South Wales are nowhere near the minimum SRS. The funding gap is significant and funding inequalities between public and private schools are unacceptable.

Under the Local Schools, Local Decisions policy 1,200 positions, which supported the work of school teachers, were cut from the NSW Department of Education. More than 5,000 teachers have been axed from TAFE and about 150 qualified teacher positions in New South Wales jails have also been cut. With those statistics, I cannot believe that the member for North Shore would want to skate about the Liberal-Nationals Government's record. Inadequate resources means that students are unable to meet expected learning outcomes and ultimately their life chances are compromised. Denying teachers the resourcing and staffing levels essential for the job results in overloaded, stressed teachers running on adrenalin every day of the week.

As to recurrent and capital funding, in this year's budget there were no plans for any significant growth in public vocational education. Despite pledging \$79.6 million over four years to deliver a new TAFE super campus for western Sydney and \$61.7 million for eight new regional Connected Learning Centres, the 3 per cent increase in overall expenditure reveals an underlying, sad motive—this is not a budget that plans for any significant growth in TAFE services in New South Wales. When we look at allocations for "other operating expenses" they are virtually static at \$424 million. That means when allowing for even minimal price inflation the Government is expecting the TAFE system to do more with less. For 100 years teachers have been doing more with less in New South Wales public schools.

This budget came at a time when the number of year 12 graduates studying or training in the year after they left school had fallen to its lowest point this decade. That is why the Stop TAFE Cuts campaign in particular will focus on highlighting how contestable funding for government vocational education dollars has led to cuts in course delivery hours for our students. That is the record we see before us. Education Week is about teachers and students. If the Government wants to put forward a motion congratulating itself it had better be factual and not moralistic.

Mr ANOULACK CHANTHIVONG (Macquarie Fields) (17:24): I thought I had heard it all but the audacity and hypocrisy of this Government knows no bounds. Just when you think you have seen and read it all along comes this motion. Clearly the Government lives in a parallel universe to me and my constituents. In fact, my difficulty with this motion is to know where to begin in attacking the Government. But let me make a start with Passfield Park School. Passfield Park is a special school within my electorate, located in Minto. The school was never designed for special needs students and is woefully inadequate. For years teachers and students have suffered in facilities that do not come up to scratch. There are severe mould problems, putting the health of students, staff, visitors and parents at risk. Students in wheelchairs have to struggle up ramps that are too steep or through doors that are too narrow.

There are no breakout areas or safe play areas for students whose behaviour escalates or becomes unmanageable. What is this Government's response? Not a single dollar in this year's budget, not one single cent. What is worse, when I raised this last week in question time the Premier clearly did not have a clue about the issue. It was pretty evident she did not even know where Passfield Park School was located. In fact, the Premier could only speak about special needs schools in Liberal-held electorates that have received funding from this Government. The Government says that every student no matter where they live should have access to a high-quality education—just not the most needy ones at Passfield Park Special School. Paragraph (2) of the motion is not only false but it is also insulting to the kids and the school community at Passfield Park. That is strike one.

I turn to Hurlstone Agricultural High School, a selective school in my electorate. Just over a decade ago a conga line of then Opposition members went out to Hurlstone to protect and save its farm from developers. "Hands off Hurlstone", they cried. Such was their conviction they even moved a bill in this place to protect Hurlstone forever. Not a single blade of grass would be sold, they said. As was appropriate, the then Labor Government listened to the community and Hurlstone, its farm and its heritage were saved. Fast forward to now and the very same then Opposition members, now Government members, could not move quickly enough to sell off the farm to developers and to move Hurlstone to the Hawkesbury. To boot, they then sealed their hypocrisy by voting against the private member's bill that I moved in this House, which had almost the same sentiment as their bill 10 years before.

Let us be clear, this motion wants to congratulate the Government on delivering new schools when in my electorate the Government is closing an esteemed agricultural high school. The students in my electorate will be left with a school that will be a shell of its former self, located on a postage stamp-sized block of land, only to be surrounded with overdevelopment in due course. The Government shows twenty-four carat gold hypocrisy and double standards that do not get any better or any clearer. It seems that nothing will get in the way of this Liberal Government selling land to developers, not even valuable education land for the kids of south-west Sydney. Strike two.

Summer in my electorate is very hot. Almost every government building in New South Wales, to my knowledge, is air-conditioned but for some reason many of our public schools are not. The matter of non-air-conditioned classrooms is something I and many of my colleagues have raised with the Government.

Every time we are told the same about guidelines—spin, spin and more spin. When pressed on this issue the Government is forced to do something, but it is nowhere near enough. In the meantime, schools in my electorate that suffer intolerably in summer will inevitably miss out—just as my community in Macquarie Fields always misses out on a lift at the railway station, every single time. Strike three.

I have not even mentioned the critical shortage of special needs places in local classrooms or the lack of planning that has left Edmondson Park without a public school or a high school despite a burgeoning population and out-of-control overdevelopment. Then there is the completely unacceptable pedestrian safety issues at Bardia Public School. Strikes four, five and six. Where do I stop? Fair is fair. The motion reads, "every student, no matter where they live, should have access to a high-quality education". Tell that to the kids of my electorate.

Mr STEPHEN BROMHEAD (Myall Lakes) (17:30): I make a contribution to this public interest debate. Education Week showcases our great schools, teachers and students. I highlight some of the achievements of just a few of the schools in the Myall Lakes electorate. It is a great shame to see so many members on the other side of the House playing politics on this issue, rather than showcasing their schools. For the past four years Forster Public School has hosted an amazing showcase of talent through the medium of film. The Film by Pebbly festival has been embraced by the Great Lakes community, with films submitted over the years by Pacific Palms Public School, Tuncurry Public School, Bungwahl Public School, Hallidays Point Public School, Wingham Brush Public School, Forster Public School and Great Lakes College. Students are learning an amazing array of future-focused skills that will see them thrive in the digital world. Students are acting, animating, filming, editing and creating original storylines for a range of exciting films.

This year two homegrown films from Forster Public School and Bungwahl Public School made it to a best of the best festival, Festival by Invitation, and were screened on 22 June in Sydney. Bungwahl Public School's *Fill your Hat* is a beautiful tribute to the power of a small community wanting to help farmers facing drought. Part of the film's beauty is in its final plaintive appeal to audiences to fill the hats being passed around after each performance. The film has been screened at many other student film festivals around New South Wales and has raised more than \$6,000 for drought relief. Bungwahl Public School's 32 students made their mark. Forster Public School's *Revenge of the Handball* is an animated movie created by a group from year 5. The students used a green screen, clay figures and live action to tell the tale of a handball that grew tired of being thrown around and decided to take revenge. Teachers, parents and students travelled to Sydney for the festival and were presented with certificates by the patron of the Film By Pebbly festivals, Bryan Brown.

Taree High school is extremely proud of the way the Gathang language is being embraced by all students in the school. Since the Aboriginal Languages Bill went through this House in 2017 the Taree community have seen a revitalisation of the Gathang language, with the assistance of language teacher Jaycent Davis and Uncle Russell Saunders. The program is helping young Biripi men and women find their voice, embrace their identity and connect with country. Six Taree High School students were part of the Hunter Region Open Girls hockey team who won gold at the NSW Combined High Schools Sports championship in June 2019, gaining a 1-0 win in the final. Two of the girls were also successful in being selected for the NSW Combined High Schools Sports open team.

At Old Bar Public School, where construction of the \$9 million classroom facility is well underway, public speaking is very important. Two year 6 students took part in the local finals of the Multicultural Perspectives Public Speaking Competition. Both girls spoke eloquently and passionately. The girls had to give an impromptu speech with only five minutes preparation time on the topic of space. One of the students was announced the winner on the day and will now represent our Taree area at the regional finals in August 2019. Seven students from Old Bar Public School have had their artworks chosen to be included in Operation Art 2019. The students' artwork will be professionally framed and exhibited at the Armory Gallery, Sydney Olympic Park. Operation Art is an initiative of The Children's Hospital at Westmead in association with the New South Wales Department of Education.

In rugby league, an Old Bar Public School year 6 student was chosen to play for the Hunter Schools Sports Association open primary rugby league team, which was crowned the NSW Primary Schools Sports Association State champions. At Wingham Public School students in the Stage 3 Marimba Group performed at the Manning Entertainment Centre. The band members, who were competing against three other schools, were excited and nervous before their performance. Wingham Public School was excited when the winners were announced because the judges loved their performance and awarded the Wingham Public School Marimba Band first place. It might not be important to those on the other side but it is important to the students at my schools.

Dr MARJORIE O'NEILL (Coogee) (17:35): I gladly take this opportunity to speak during Education Week about the state of education in New South Wales and particularly in the electorate of Coogee. As my colleague the member for Londonderry pointed out, if this Government really believes this issue is important this motion should have been debated much earlier in the day. I acknowledge the motion of the member for

North Shore, which states that every student, no matter where they live, should have access to a high-quality education. I am glad she acknowledges this right to high-quality education and I am sure that she would be extremely disappointed by the way in which her Government has ignored the pleas made by Randwick Girls and Randwick Boys high schools.

These schools are in limbo. Both are underfunded but the boys school is currently being considered for transition to coeducational. Neither school is receiving the upgrades they need due to the lack of clarity around this potential transition. During the 2019 State election campaign the Government admitted that there was both a capacity problem and an infrastructure problem in high schools across the Eastern Suburbs. To address this, the Government committed to major upgrades at both Randwick Boys High School and Randwick Girls High School, a well overdue and welcome announcement.

TEMPORARY SPEAKER (Mr Lee Evans): I call the member for Oatley to order for the third time.

Dr MARJORIE O'NEILL: It was therefore incredibly disappointing to see that in the 2019-20 budget the Government has significantly downgraded its commitment and has budgeted for only minor upgrades. This downgrade is a complete backflip on the Government's election promise and its promise to bring much-needed infrastructure upgrades to the only public high schools in my electorate. Having spoken at length with representatives of both P&Cs, local educators and students, it is clear that the community is crying out for these major infrastructure upgrades. On June 5 I asked the education Minister a simple question on notice: When will the proposed infrastructure upgrades to both Randwick Boys High School and Randwick Girls High School commence?

The Minister's response revealed that in June 2018 an upgrade to Randwick Boys High School and Randwick Girls High School was announced, noting that the scope of the projects could be informed as part of the consideration from the coeducational survey and a decision to make Randwick Boys High School coeducational. It is now 14 months on and we are no closer to an answer on what the upgrades will be and when they might be delivered—total radio silence. If you are confused don't worry, it's a mess. In addition to the backflip, there is potential to convert Randwick Boys to a coeducational school and the downgraded upgrades have been delayed because there is community consultation to convert Randwick Boys to a coeducational school! Community consultation ended in February. This decision is still pending despite the department telling the community that it was to be made in the first half of this year. It is also impossible to get any clarification on the decision.

A recent freedom of information request made by my office was refused by the education department. A letter explains that disclosure of the information would reveal the position of the Minister that would be taken on the matter. That was the point! The point is we want to know what is planned for our schools. We want to know what the Minister has planned. We want some idea about the future of education in the Eastern Suburbs. Information on this survey is being deliberately withheld from the public. We in the Opposition know that there is not only a capacity need in the Eastern Suburbs but there is also a desire for choice. That is why Labor committed to building a new coeducational comprehensive high school in the Eastern Suburbs. Of the eight public primary schools in the electorate of Coogee, all but one in the electorate are at capacity. Where does the Government expect these kids to go? Does it expect all of these kids to go to private schools? That is just in Coogee. Let me talk about the State.

In the first term of the Liberal-Nationals Government, under O'Farrell and Baird, the Government cut \$1.7 billion from the education budget. It cut the demountable replacement program and 212 schools across New South Wales had their budgets slashed from 2013, including eight special needs schools. It is no wonder that New South Wales is not performing when it comes to educational outcomes, in particular when it comes to science, mathematics and reading literacy. In New South Wales 45 per cent of students are not mathematically proficient. In New South Wales mathematical literacy is behind the Australian Capital Territory [ACT], Western Australia [WA] and Victoria. Our scientific literacy falls behind the ACT, WA, Victoria and the national average and our reading literacy is behind the ACT, WA, Victoria, and South Australia. I welcome the amendment to the motion moved by my colleague. It is critical that in Education Week we shine light on the Government and its failings to the people of this State.

TEMPORARY SPEAKER (Mr Lee Evans): Order! The member for Wollongong will come to order. I inform the member for Port Stephens that this is the eighth time she has been asked to come to order. It is only because I will be leaving the chair soon that the member will remain in the Chamber.

Mr Ryan Park: I always give you a break.

TEMPORARY SPEAKER (Mr Lee Evans): The member for Kiera will come to order. That is the fourth time he has been asked to come to order.

Ms FELICITY WILSON (North Shore) (17:41): In reply: It is very clear that the best form of defence is offence. Those opposite want to shout at us but their record for 16 years was an abject failure. Yet they attack this Government, which has made record levels of investment in education. Those opposite claim that the Government is the problem. They left us with a billion-dollar black hole of infrastructure and maintenance—

TEMPORARY SPEAKER (Mr Lee Evans): The member for Gosford will come to order. The member for Canterbury will come to order.

Ms FELICITY WILSON: We are the ones who had to pay off their debt and fix their mistakes and problems. There is an interesting trend emerging from those opposite speaking against this motion—the members representing the electorates of Londonderry, Coogee, Ballina and Macquarie Fields. I would say it is plausible deniability because none of them was in government when Labor had its 16 years of failure. None of them will take responsibility for the state of New South Wales that was left by Labor.

TEMPORARY SPEAKER (Mr Lee Evans): I call the member for Gosford to order for the third time.

Ms FELICITY WILSON: What we know is that there are lies from those opposite about the programs and projects of this Government. What happened when Labor was in government? They could not manage money and they decided to axe programs. What did they cut? They put our children and our students last and chose to cut, cut, cut funding for education.

TEMPORARY SPEAKER (Mr Lee Evans): I call the member for Wollongong to order for the second time.

Ms FELICITY WILSON: When they finally lost government they had a billion-dollar black hole. They cut, cut, cut.

TEMPORARY SPEAKER (Mr Lee Evans): The member for Cessnock will come to order.

Ms FELICITY WILSON: When Labor was in government it put kids on the altar of its failures; it put them last. This Government has invested a record \$6.7 billion in infrastructure projects for schools. The problem is that those opposite are not capable of understanding the facts when it comes to education investment. I like all the preaching that comes from those opposite but they should look at our record investment. They can screech and cry, and the lady can protest as much as she chooses but it does not change the facts.

This Government is wiping out the maintenance backlog and the black hole that they left us with. They did not care about our students. It is particularly sad that in Education Week they rant, rave and attack this Government—the only government in this State that has actually invested in our education system for 24 years. We heard from the member for Oatley of the school closures in his community by Labor. We have a Government that is committed to each student and quality education across the State. We are the only ones that the people of New South Wales trust to invest in our students.

TEMPORARY SPEAKER (Mr Lee Evans): The question is that the amendment of the member for Londonderry be agreed to.

The House divided.

Ayes45

Noes47

Majority.....2

AYES

Aitchison, Ms J
Barr, Mr C
Catley, Ms Y
Crakanthorp, Mr T
Dib, Mr J
Finn, Ms J
Harrison, Ms J
Hornery, Ms S
Leong, Ms J
McGirr, Dr J
Mihailuk, Ms T
Park, Mr R
Saffin, Ms J
Tesch, Ms L

Atalla, Mr E
Butler, Mr R
Chanthivong, Mr A
Daley, Mr M
Donato, Mr P
Greenwich, Mr A
Haylen, Ms J
Kamper, Mr S
Lynch, Mr P
McKay, Ms J
Minns, Mr C
Parker, Mr J
Scully, Mr P
Voltz, Ms L

Bali, Mr S
Car, Ms P
Cotsis, Ms S
Dalton, Mrs H
Doyle, Ms T
Harris, Mr D
Hoenig, Mr R
Lalich, Mr N
McDermott, Dr H
Mehan, Mr D (teller)
O'Neill, Dr M
Piper, Mr G
Smith, Ms T.F.
Warren, Mr G

AYES

Washington, Ms K

Watson, Ms A (teller)

Zangari, Mr G

NOES

Anderson, Mr K
Berejiklian, Ms G
Conolly, Mr K
Coure, Mr M
Dominello, Mr V
Griffin, Mr J
Hazzard, Mr B
Kean, Mr M
Marshall, Mr A
Perrottet, Mr D
Provest, Mr G
Sidgreaves, Mr P
Smith, Mr N
Taylor, Mr M
Upton, Ms G
Williams, Mrs L

Ayres, Mr S
Bromhead, Mr S
Constance, Mr A
Crouch, Mr A (teller)
Elliott, Mr D
Gulaptis, Mr C
Henskens, Mr A
Lee, Dr G
O'Dea, Mr J
Petinos, Ms E
Roberts, Mr A
Sidoti, Mr J
Speakman, Mr M
Toole, Mr P
Ward, Mr G
Wilson, Ms F

Barilaro, Mr J
Clancy, Mr J
Cooke, Ms S (teller)
Davies, Mrs T
Gibbons, Ms M
Hancock, Mrs S
Johnsen, Mr M
Lindsay, Ms W
Pavey, Mrs M
Preston, Ms R
Saunders, Mr D
Singh, Mr G
Stokes, Mr R
Tuckerman, Mrs W
Williams, Mr R

Amendment negatived.**TEMPORARY SPEAKER (Mr Lee Evans):** The question is that the motion be agreed to.**The House divided.**

Ayes51
Noes41
Majority..... 10

AYES

Anderson, Mr K
Berejiklian, Ms G
Clancy, Mr J
Cooke, Ms S (teller)
Dalton, Mrs H
Donato, Mr P
Greenwich, Mr A
Hancock, Mrs S
Johnsen, Mr M
Lindsay, Ms W
Pavey, Mrs M
Preston, Ms R
Saunders, Mr D
Singh, Mr G
Stokes, Mr R
Tuckerman, Mrs W
Williams, Mr R

Ayres, Mr S
Bromhead, Mr S
Conolly, Mr K
Coure, Mr M
Davies, Mrs T
Elliott, Mr D
Griffin, Mr J
Hazzard, Mr B
Kean, Mr M
Marshall, Mr A
Perrottet, Mr D
Provest, Mr G
Sidgreaves, Mr P
Smith, Mr N
Taylor, Mr M
Upton, Ms G
Williams, Mrs L

Barilaro, Mr J
Butler, Mr R
Constance, Mr A
Crouch, Mr A (teller)
Dominello, Mr V
Gibbons, Ms M
Gulaptis, Mr C
Henskens, Mr A
Lee, Dr G
O'Dea, Mr J
Petinos, Ms E
Roberts, Mr A
Sidoti, Mr J
Speakman, Mr M
Toole, Mr P
Ward, Mr G
Wilson, Ms F

NOES

Aitchison, Ms J
Barr, Mr C
Chanthivong, Mr A
Daley, Mr M
Finn, Ms J
Haylen, Ms J
Kamper, Mr S

Atalla, Mr E
Car, Ms P
Cotsis, Ms S
Dib, Mr J
Harris, Mr D
Hoenig, Mr R
Lalich, Mr N

Bali, Mr S
Catley, Ms Y
Crakanthorp, Mr T
Doyle, Ms T
Harrison, Ms J
Hornery, Ms S
Leong, Ms J

NOES

Lynch, Mr P
McKay, Ms J
Minns, Mr C
Parker, Mr J
Scully, Mr P
Voltz, Ms L
Watson, Ms A (teller)

McDermott, Dr H
Mehan, Mr D (teller)
O'Neill, Dr M
Piper, Mr G
Smith, Ms T.F.
Warren, Mr G
Zangari, Mr G

McGirr, Dr J
Mihailuk, Ms T
Park, Mr R
Saffin, Ms J
Tesch, Ms L
Washington, Ms K

Motion agreed to.*Visitors***VISITORS**

The ASSISTANT SPEAKER: I acknowledge Teena McQueen, who is in the public gallery.

*Bills***REPRODUCTIVE HEALTH CARE REFORM BILL 2019****Second Reading Debate****Debate resumed from an earlier hour.**

Mr GREG PIPER (Lake Macquarie) (18:00): From the outset I say that the Reproductive Health Care Reform Bill 2019 should not be dragged down by one's beliefs, religious or otherwise, but rather be elevated by respect for the overwhelming wish of women and the majority of residents in New South Wales. This bill is not solely a legal issue, although it will rightly decriminalise the act of terminating a pregnancy and replace it with a standalone healthcare Act to regulate the procedure. This is foremost a health issue—a women's health issue, and an issue about an individual woman's rights over her own body.

As has already been said, this law has not been changed in 119 years, despite significant reforms being made in every other Australian State and Territory in recent decades. That is not to say there have not been attempts, but on each of those occasions the New South Wales Parliament has always been heavily weighted in number by men—that is, men making decisions about women's bodies. This is not just embarrassing; it is, in my view, shameful. It is shameful that the vanguard of opposition to this reform is once again predominantly white, Anglo men who wish to impose their views on women. Progressive-thinking men know they must consider women and, overwhelmingly, women are saying, "Get your hands off my body and off my reproductive rights."

I have spoken to a lot of women about this issue in recent weeks and I have to say that many were awkward conversations for me to have, not because of the issue itself but because I was a man trying to ask women what degree of autonomy they would like to have over their own bodies, what degree of rights they should have, what health protections they should have and whether or not the law should be restructured to protect decisions they make about their own bodies. It honestly felt like I was stumbling through the 1940s or 1950s—perhaps even the early 1900s. Can you believe that we would still have to ask those questions in 2019? Thankfully I have been given advice and support from all women in my orbit, particularly my wife, staff and friends. I am pleased that friends who are dedicated to their faith have also been able to strongly support the bill because they see that it is about removing from the criminal code termination and a woman's right to decide.

That is not to say that there are not people with opposite views; of course there are and we are hearing from them. While I do not agree with their views, I do respect their right to hold them and understand that they are invariably deeply held beliefs. But this should not be a place where personal or religious beliefs interfere with the personal health of other women. It is not a place where we deny an individual's rights to privacy and dignity, or decisions or choices that are most often made for health or medical reasons. For many years the law has averted its gaze from a woman making a choice to terminate a pregnancy—partly because the courts have taken such a broad definition of the laws as they stand, partly because the laws are inconsistent with the rest of the country and hopefully because somewhere in their conscience the lawmakers knew it was wrong to deny a woman the right to better and safer health outcomes and autonomy over her own body.

Why has the State not taken action and delivered the required law reform? If the State has spent the past 119 years failing to find the courage to decriminalise this procedure, then why on earth would it persist with the current legislation, which leaves women and health professionals exposed to a severe legal consequence for a personal decision or personal health outcome? Only 12 months ago this Parliament passed legislation that provides protection to women requiring safe access to reproductive health clinics. It was the right decision, and one that

provides women with the privacy and dignity they deserve without the intimidation, shaming and bullying that so often occurred outside these clinics, predominantly from those with strong religious beliefs. I will say again that individuals are perfectly entitled to those opinions and freedoms, but such freedom does not and should not mean unfettered freedom to intimidate, coerce, bully and shame others who do not share that same religious or personal ideology.

Why would the State recognise and accept all of that, but fail to take the grey area out of existing laws on termination? This bill does that, and that is why it deserves to be supported. I do not believe any woman takes lightly the decision to terminate a pregnancy, particularly in the latter stages of pregnancy. For most of those women it is not a choice at all, but a medical necessity. Women who might consider an abortion in New South Wales would not do so lightly and should have the same right to do so as women in every other State and Territory in Australia without the risk of coming into conflict with the criminal law. This bill is being greatly conflated to something that it is not: It certainly is not a bill trying to increase the number of abortions in New South Wales and it does not set out to make abortion an attractive or easy alternative to responsible sexual activity and contraception.

This bill effectively codifies under health legislation—the proper place—practices that are being carried out now under common law, but always with the spectre and stigma of it being viewed as criminal. That is wrong and must change. I commend all those who have worked for so many years to have this law changed. I acknowledge those volunteers in the community, those courageous people who have stood up and in some cases been vilified. I also recognise once again all those within this Chamber and in the Legislative Council who have been courageous enough to bring this legislation before this House. This is the right time to make these changes. I commend the bill to the House.

Mr GARETH WARD (Kiama—Minister for Families, Communities and Disability Services)
(18:07): I make my contribution to the Reproductive Health Care Reform Bill 2019. As this is a free vote I believe it is important that I outline to the House, but most importantly to my community who put me in this place, my views on this matter and how I propose to vote. I start by expressing my profound respect for the views that have been so eloquently and mellifluously expressed by all members in this debate. People will not see it on the news or read about it in the paper, but this House is often at its best when considering matters of such profound passion, opinion and emotion. The New South Wales Crimes Act 1900 provides that procuring an abortion is an offence punishable by imprisonment for up to 10 years. The 1900 Act makes clear that administering a drug or a noxious thing, that unlawfully using instruments or other things with the intent to cause a miscarriage will give rise to this offence under the Crimes Act.

It is worth noting that this legislation was carried into law at a time when women did not have the right to vote, let alone stand for Parliament. At a time when the Crimes Act became law our State would not see the first woman elected to this Chamber for a further 2½ decades. It would be more than 100 years until a woman was given her chance to sit in the Speaker's chair or lead the Government of our State. The circumstances in which an abortion is lawful were widened and broadly defined in 1971 by a decision of the New South Wales District Court in which Judge Levine said that an abortion was not unlawful if a doctor honestly believed on reasonable grounds that:

... the operation was necessary to preserve the woman involved from serious danger to her life or physical or mental health which the continuance of pregnancy would entail.

Mental health has since been interpreted by the courts in *CES v Superclinics Australia Pty Ltd* to include:

... the effects of economic or social stress that may pertain either during pregnancy or after birth.

The impact of this decision on the current state of New South Wales abortion law is that an abortion is only lawful if the woman's doctor believes on reasonable grounds that it is necessary to avoid a serious danger to her life or her physical or mental health, taking into account economic and social factors as well as medical ones, and the risks of the abortion are not out of proportion to the danger to be averted.

The result of the Levine decision is that New South Wales is predominantly pro-choice in its practices, but not in its law. Under the latter women are not given the right to choose an abortion, but can avoid a breach of the criminal law if it can be demonstrated that the decision to opt for termination fits within a prescribed and recognised judicial exception. These exceptions are given general and broad interpretation, with around 20,000 abortions occurring annually in New South Wales.

As debate has grown on this matter over the past week, and indeed several decades, I have been surprised to learn how many people wrongfully assume that abortion is already legal. Whilst this has been the practice of every other State, our criminal statute remains the outlier of all other jurisdictions. Many have suggested that the 1971 Levine decision, combined with a general reluctance of the police to prosecute, has meant that abortion law reform is unnecessary as the current practice means abortion is basically legal. I make the observation that in 2006

a Sydney doctor was convicted of carrying out an abortion after she omitted to provide a lawful basis for the abortion. In another case in Queensland in 2010 a young couple was tried and faced incarceration for terminating a pregnancy, but was ultimately acquitted.

Given precedent and practice I ask myself this question: In 2019 should the matter of choosing to have an abortion be a matter for the criminal law only? If the criminal law framework is the wrong place for abortion law, where is the next most appropriate place for this matter to be regulated? And what further detail is required? When considering the principal question I have just outlined, other questions arise. Should a woman choosing to have an abortion be committing a crime punishable by up to 10 years in prison? Should a doctor who assists be also considered to have committed a criminal act? Laws passed by Parliament should reflect community views and standards about what is acceptable and appropriate.

When considering my position on the question of criminality I have spent much time considering the views of my community. I have read every single email and message that has come to my office. The views expressed have been as strong as they have been divergent. As a Christian and a believer I have been asked, and even challenged, on the question before the House today. I deeply appreciate the prayers and best wishes from many of my community who clearly know this is not necessarily a straightforward and simple matter. I deeply appreciate your understanding and your care. I received a powerful message from the Reverend Simon Hansford who is the Moderator of the Uniting Church in New South Wales and the Australian Capital Territory. In a message to members of Parliament Reverend Hansford said:

We reject two extreme positions that abortion should never be available and that abortion should be regarded as simply another medical procedure. It is not possible to hold one position that can be applied in every case because peoples' circumstances will always be different. It is important that women have the space they need to make this difficult decision after careful consideration, and they should have access to high-quality counselling, pastoral care and medical services. The Uniting Church asserts that abortion is a health and social issue and should not be a criminal issue.

I agree with Reverend Hansford. Each and every person walks a different road in life. No set of footprints in the sand is the same. Matthew 7:1 says, "Judge not, that ye be not judged." Whilst we may not like what others do, I do not know a single person who has undertaken an abortion whose heart has not been burdened by a difficult and challenging decision. I deeply appreciate human frailty and that all of us are far from perfect. I take the statements made during my election periods very seriously. When asked my views on this matter at past candidates' forums I have always been consistent. Given the fact that I have always maintained the same view, it would be unpardonably inappropriate for me to change my view now. My view remains that abortion should be safe, legal and rare.

Having arrived at the position that abortion should not be regulated by the criminal law, I would never flippantly support any change that merely abolished the existing provisions without any consideration of the ethical and medical framework, especially a bill that has an abject disregard for human life, dignity and clinical ethics. Previous attempts by The Greens to introduce private members' bills would have, in my opinion, no regard for what I consider to be human life, and I would suggest these attempts by The Greens have been more about politics than good policy. Making the difficult decision to have an abortion is not the same as just another medical procedure. There is a range of factors to consider.

In contrast, this bill has been introduced by a well-respected Independent member of Parliament with oversight from the State's health Minister and the support of the Australian Medical Association. Even with that support, I still need to be convinced that the change being sought treats abortions as a last resort and not as a mere alternative means of contraception. My support is contingent on the bill recognising a point at which human life exists and that any decision to terminate after that point only occur due to a highly compelling clinical need. The bill provides for a new requirement that two doctors need to be involved in the decision. Currently, only one doctor needs to be consulted. The current practice sets the bar too low. The bill provides for a new offence worthy of inclusion in the criminal law: Persons can be criminally pursued if they are not qualified to conduct abortions. The bill provides for a heavy maximum penalty of seven years.

Much has been said about Zoe's law in the context of the abortion debate. Although Zoe's law is not being considered as part of the bill, some commentary on the issue is relevant, given that the current termination practices rest on a judicial decision on a statute that criminalises abortion. The current practice could be reinterpreted by the courts if Parliament were to pass legislation that contradicts the 1971 decision by Judge Levine. Zoe's law seeks to amend the New South Wales Crimes Act 1900 to enable a person to be prosecuted for grievous bodily harm done to a fetus. To achieve this, Zoe's law would give legal recognition to an unborn child, defined as the fetus of a pregnant woman of at least 20 weeks' gestation or, if the period of gestation cannot be established reliably, that has a body mass of at least 400 grams. [*Extension of time*]

During the debate on Zoe's law, the member for Cronulla moved an amendment to the proposed bill that sought to ensure that nothing presently lawful would become unlawful. Without the bill before us passing this

House, the prospect of Zoe's law could mean a court would need to revisit the Levine decision, given that Zoe's law would give a fetus rights that do not presently exist. Zoe's law could have the consequence of limiting or revoking the impact of the Levine decision, leaving women and their doctors in a legal time warp. My support for Zoe's law was based on the amendment proposed by the member for Cronulla: the "Speakman amendment". I believe that members would have fewer questions about the potential impact of Zoe's law should one of the key questions be resolved. Passing the bill would place any question of legislative subterfuge beyond doubt. The bill poses a difficult decision for many members, but, on balance, I believe that the criminal law is not best placed to regulate the matter. I support the bill before the House, subject to amendments.

Ms JODI McKAY (Strathfield) (18:17): I speak in support of the Reproductive Health Care Bill 2019, which is an important issue for the women of New South Wales. I commend all members who have worked tirelessly on this reform and those organisations that have worked hard to bring us here today. As I have said, the Labor Party I lead will be a big tent. There is a place for all views on this issue in our party, which is why each member has been given a conscience vote. I thank the women who have shared their stories and the doctors and other health practitioners who work in this area of health care.

I also acknowledge the many people who have written to me to share their deeply held views, both for and against the bill. I thank the people whose position I cannot adopt for giving me the opportunity to better understand their views. For me, it comes down to one important issue of conscience—is abortion a crime? In this place we cannot legislate morality but we can decide legality. I do not believe abortion is a crime; I believe it is a deeply complex health and social issue. In my heart and as a Labor member of Parliament, I am always concerned about and motivated to help people who face disadvantage, inequality and discrimination. When it comes to abortion, I know those issues are acute, very real and life altering.

I am a woman of faith so I bring that perspective to my decision-making as well. I thank the Reverend Simon Hansford, moderator of the Uniting Church in Australia. That is my church, and I always appreciate the compassionate, calm and reasoned positions it reaches based on Christ's teachings. I have also spoken to a number of religious leaders from the Anglican Church and the Catholic Church, some of whom support the bill. On Sunday night I spent time with a Catholic women who spoke to me about the sacredness of life and the many complex reasons that women seek a termination. I thank them for their wisdom, perspective and the time they gave me to talk through the bill.

Although I was baptised into the Uniting Church, I attend a Catholic church, which is the faith of my husband. Ultimately, I believe in a God of compassion, a God of pity and a Christ crucified on the cross who did not get caught up in the particulars but saw a person as a whole. Christ knew the world was broken. I believe he came and rose from the dead to redeem the world. He wanted to save, not condemn. He stood up for the weak, the sinful and the fallen. He also called out false judgement. I make my decision on the same principles: love, compassion, reaching out to people in this imperfect world and making laws that are humane, just and limit harm. I leave it to theologians and others to debate the morality of abortion and the rightness or wrongness of actions, and I will not judge them for their conclusions. In Luke 6:37, Jesus says:

Do not judge, and you will not be judged. Do not condemn, and you will not be condemned. Forgive, and you will be forgiven.

I am fortunate to have worked with doctors and other professionals in reproductive health care who want to offer comprehensive services to the people of New South Wales, no matter where a person lives or how much money they have in their pocket. They currently work in a tenuous legal environment. Decriminalising the procedure would offer certainty to women and their doctors. It is important to acknowledge that abortion is not a woman-only issue. In many cases the decision to seek a termination is made with the support of a partner. Although I may not mention them in parts of my speech, I acknowledge also the men who participate in the decision-making process.

Between 20 and 25 per cent of women in Australia will have an abortion in their lifetime. The decision is deeply personal and not criminal, invariably heart wrenching and not taken lightly. I believe every child brought into this world must be wanted, loved and cared for. Often due to poverty and disadvantage, too many women find themselves pregnant and do not want, or are unable to care for, a child. There is great inequity in accessing reproductive care if you are economically and socially disadvantaged or if you live in rural, regional or remote New South Wales where women can only access a private provider for a medical procedure and have to travel and pay for accommodation. We should not accept two systems of health care in this State: one for the bush and one for the cities.

The introduction of medical abortion combined with telemedicine should have been a great step forward for rural, regional and remote communities but it has not proved to be the case. I am advised that just 308 of the 26,000 medical practitioners in New South Wales provide medical abortion—just over 1 per cent. Despite efforts to the contrary, we have not improved access to health care for women seeking a termination because we have not given doctors certainty in providing that service. When considering this bill I spoke to professionals

working in the area who shared their stories with me, which I will share with the House. It is important that we hear about those women and understand their stories relating to health care access, which are largely caused by abortion remaining in the criminal code.

They told me about a woman from a town on the South Coast who was 13 weeks pregnant. She had a toddler and was in a domestic violence situation. To access termination services she needed to travel to Sydney. She had a supportive parent who could look after her child while she travelled. However, she needed to travel five hours by public transport. She was on a single parent pension and did not own a car. The clinic informed her that she would need to have a support person accompany her home. That meant that her parent and child would need to accompany her to Sydney and stay overnight. She paid \$700 for the termination of the pregnancy, \$280 on travel and \$70 for accommodation in a backpacker hostel. That is more than \$1,000, a third of which was because she did not live in Sydney.

Then there is the woman who is almost 40, with two children—one just starting school and another who has almost finished high school. She and her partner work on a farm in the Far West. They travelled 15 hours by car to Sydney, a journey that took two days. She and her partner had to take a week off work. She paid \$500 for the termination, \$400 in travel and \$600 in accommodation—a total of \$1,500, two-thirds of which was simply because she lived in a rural area. In decriminalising abortion in this State we will go some way to addressing the inequalities that women and their families living outside metropolitan areas experience. I believe reform is long overdue and should be part of a comprehensive reproductive and women's health strategy for the State.

The strategy should consider the availability of contraception, particularly long-acting reversible contraceptives, women's health services in rural and remote areas of the State, the groups of women most at risk of unwanted and unplanned pregnancies, and, importantly, the accurate collection of data because we simply do not have that. I believe the decision a woman makes about her body is a deeply personal one between her and her doctor. How she justifies that decision and the path that leads her to it is a matter for her and her alone. By acknowledging that women are capable of making that decision for themselves, we do credit to those who take on motherhood and all its responsibilities, joys and burdens. I know throughout the community and in my electorate some people will oppose the decision I make on the bill. I respect their right to their conscience. I have come to my position with much consideration throughout my adult life and it is an expression of my deepest conscience. I commend the bill to the House.

Mrs TANYA DAVIES (Mulgoa) (18:27:2): I oppose the Reproductive Health Care Reform Bill 2019, which is a radical abortion bill. The abortion debate is deeply personal and emotive, with opposing beliefs on either side. But as with any difficult topic, when people come together from all perspectives and experiences with their research and skills it should deliver a better end result. That is why I am shocked that doctors, mental health professionals and other experts who hold differing views to what is contained in the bill as well as the evidence from abortion bills in other States have been excluded from the process of consultation and debate. It is why I am utterly dismayed that the New South Wales Liberal-Nationals Government, of which I am a member, is denying my constituents time to understand a radical abortion bill and, therefore, participate in a crucial debate.

I have been inundated with emails, phone calls and voicemail messages, 99 per cent of which have asked me to oppose the bill. Many have expressed their disgust at how our Government is treating them by ramming through this legislation. They have already announced that they will not support our Government come the next election. The bill is far too extreme and, if passed as it currently stands, would implement the policy agenda of The Greens and the Labor Left. In May 2017 Galaxy Research showed that only 5 per cent of New South Wales voters agree with abortion until birth, with 74 per cent opposed to abortion past 23 weeks. A total of 83 per cent of State voters are opposed to sex selection abortion, with just 8 per cent in favour.

In 2008 the Victorian Labor Government passed the extreme Abortion Law Reform Act 2008, on which Queensland's Termination of Pregnancy Act 2018 was modelled, on which the New South Wales Reproductive Health Care Reform Bill 2019 is modelled. Victoria's Abortion Law Reform Act legalised abortion up to birth for effectively any reason. That resulted in an annual average increase of 39 per cent in late-term abortions, about 50 of which were for what is termed as psychosocial reasons. They were healthy babies of healthy mothers. In 2011 in Victoria a healthy baby of a healthy mother was aborted for psychosocial reasons at over 37 weeks gestation; that is regarded as a full-term baby.

In his contribution to the second reading debate the health Minister informed the House that the Victoria and Queensland laws had been subject to extensive consultation, so why not New South Wales? Why are we treated as less? Tasmania provided 16 weeks of consultation. In New South Wales we have offered our constituents less than two weeks—a fact that many across our communities, including in my community of Mulgoa in western Sydney, will remind us of at the next election.

Abortion intrinsically involves two separate entities: the mother and the baby or babies she is carrying. While much of the abortion debate is centred on the mother, very little debate is entered into on the abortion process for the child. The process of abortion is brutal. I apologise if what I have to say is painful for people to hear. A baby is torn apart by suction and the skull is crushed and removed, with the final process being to clean out the uterus to ensure that it is empty. Recent scientific findings have established that pain receptors—nociceptors, as they are called—are present throughout the unborn child's entire body. Nerves link those receptors to the brain's thalamus and subcortical plate by no later than 20 weeks after fertilisation.

The position asserted by some that the unborn child remains in a coma-like sleep state that precludes it from experiencing pain is inconsistent with the documented reaction of the unborn child to painful stimuli and with the experience of fetal surgeons who have found it necessary to sedate the unborn child with anaesthesia to prevent it from engaging in vigorous movement in reaction to invasive surgery. The Australian code for the care and use of animals for scientific purposes states:

As a guide, when ... fetuses ... have progressed beyond half the gestation ... period of the relevant species ... the potential for them to experience pain and distress should be taken into account.

For humans that point is 20 weeks of pregnancy. For abortions post-20 weeks the child will feel the pain of abortion. In a humane society the child should be protected from pain and anaesthetised before the procedure commences. That is but one example of where robust and inclusive discussion and involvement of all stakeholders should have occurred to develop a better bill. I will move to the essence of the bill and explain why I am deeply opposed to it. Firstly, there is no mention of the term "woman" or "female" in any part of the bill. Instead the term "person who is pregnant" is used to ensure that it is gender fluid.

Why is the bill claiming to enshrine women's rights to their bodies and being celebrated and endorsed by women's rights activists and organisations when women are invisible and, therefore, silent in the bill? It must be amended to refer to "a woman who is pregnant" whenever the bill refers to "a person who is pregnant". Clause 5 of part 2 introduces the threshold for on-demand abortion at 22 weeks. There is no check, balance or assessment of the physical, social, psychological or other status of the woman. It is being said that the bill simply aligns legislation with modern practice, but that statement is false. The bill will strip away current checks and assessments and bring into effect on-demand abortions—no reason whatsoever required.

There is no prohibition on the coercing of a woman or girl into an abortion. There is no sanction against the person who is coercing. There is no requirement in the bill for the medical practitioner to receive informed consent from the woman or girl. Evidence from the Medical Science Monitor shows that up to 64 per cent of pregnant women feel pressured by others to have an abortion. Clause 5 provides unrestricted rights for any doctor to perform an abortion on any woman or girl to 22 weeks with no requirement for the request to be initiated by the woman herself, let alone for her fully informed consent to be obtained. Why select the gestational age of 22 weeks when, if a baby reaches 20 weeks and then the pregnancy fails, that baby becomes legally entitled to a birth certificate, a death certificate and a funeral and its parents can receive a parenting payment? The selection of the 22-week threshold is arbitrary and is not aligned with existing and utilised legal and government provisions.

Part 2 clause 6 deals with the process for abortions after 22 weeks. Clause 6 (1) (a) states that the medical practitioner may perform an abortion if he or she considers that, in all the circumstances, the abortion should be performed. That section gives no threshold or clearly articulated assessment or checklist for late-term abortions. Clause 6 goes on to explain that a medical practitioner shall consult with another medical practitioner who also considers that the abortion should be performed. That appears on face value to be a good double-check. However, clause 8 ensures that any doctor with a conscientious objection to abortion is legally compelled to refer the woman to a doctor who does not have a conscientious objection. In the bill, women who are seeking to terminate their pregnancy or are faced with the decision of whether to terminate their pregnancy after 22 weeks will be consulting with doctors who are pro-abortion. Where is the true independence? And how many times do doctors, medical tests, and diagnoses get it wrong? Often.

The clause would also permit abortion for sex selection—as has been evidenced under Victoria's extreme abortion laws—and for eugenic reasons. That is in direct violation of the Convention on the Rights of Persons with Disabilities. What is deeply disturbing in the Victorian experience is that there is clear evidence that girls are being aborted because some communities value boys over girls. Is that acceptable for New South Wales? I say no. If the bill passes this House unamended, sex selection abortions will be permissible.

I will raise the growing global evidence that links mental health issues with abortion, which should have been considered by the proponents and co-sponsors of the bill. If we are to be truly caring and compassionate to women who are faced with a very difficult decision, we must ensure that the bill has inbuilt requirements for pre- and post-abortion counselling. Abortion-supporting psychologists wrote in a 2008 report of the American Psychological Association Task Force on Mental Health and Abortion that:

... it is clear that some women do experience sadness, grief, and feelings of loss following termination of a pregnancy, and some experience clinically significant disorders, including depression and anxiety.

A 2011 study published in the *British Journal of Psychiatry* found that 10 per cent of mental health problems among women, including 35 per cent of suicidal behaviours, may be attributed to abortion. Those findings were based on the combined results of all studies published between 1995 and 2009 that met strict inclusion criteria. The resulting analysis included 877,181 women from six countries. [*Extension of time*]

In 2012 the *Medical Science Monitor* published research on the medical records of nearly half a million women in Denmark. It revealed significantly higher maternal death rates following abortion compared with following delivery. That finding has been confirmed through similar large-scale population studies conducted in Finland and the United States and it contradicts the widely held belief that abortion is safer than childbirth. In 2018 pro-choice and pro-life researchers in Springfield, Illinois, agreed that abortion contributes to mental health problems for at least some women, according to a new comprehensive review of more than 200 medical studies on abortion and mental health.

There is no disagreement over the fact that abortion may trigger, worsen or exacerbate mental health problems. Rather, the main controversy is over whether abortion is ever the sole cause of severe mental illness. The review of abortion and mental health issues identified 12 findings around which researchers on both sides of the debate agree. Some of them include that abortion contributes to mental health problems in some women; that a significant minority of women have mental illness following abortion; and that there is substantial evidence that abortion contributes to the onset, intensity and/or duration of mental illness. Closer to home, a report into maternal deaths in Queensland has raised concerns about suicide following pregnancy, particularly after abortion. The Queensland Maternal and Perinatal Quality Council report noted:

Suicide is the leading cause of death in women within 42 days after their pregnancy and between 43 days and 365 days after their pregnancy. There appears to be a significant worldwide risk of maternal suicide following termination of pregnancy and, in fact, a higher risk than that following term delivery.

The potential for depression and other mental health issues at this time needs to be better appreciated. We need more research and investigation of the issues. Active follow-up of those women needs to happen. Practitioners referring women for termination of pregnancy or undertaking termination of pregnancy should ensure adequate follow-up for such women, especially if the procedure is undertaken for mental health concerns. Professor Michael Humphrey, the chairman of the council, said that the number of suicides was a key concern. He also said:

It's pretty scary. But this is not just happening in Queensland or Australia. The incidence of suicide in relation to maternal deaths is also seen very clearly in reports coming out of New Zealand and the UK. It's a major phenomenon. There's a lot of evidence that a significant proportion of women who have termination of pregnancies do have mental health issues subsequently. Whether they are mental health issues related to the reason why the woman had the termination or whether they're related to regret afterwards, we don't know.

We need to know that answer. It is undeniable that there is significant evidence demonstrating the link between abortion and mental health illness or distress. Women need to be supported and provided with non-directional counselling as they consider their decision and, far more critically, if they choose to abort their pregnancy. If we truly care for the women and young girls who are faced with crisis pregnancies or who need to consider whether to continue with a pregnancy or not, we will ensure that the bill is amended to give women and young girls visibility and a voice in the bill, to prohibit coercion of a woman into an abortion, to sanction anyone coercing a woman into an abortion, to require legally and fully informed consent by the woman to the abortion, to allow doctors to retain their right to conscientiously object to an abortion, and to legally require ongoing mental health support and counselling for women who need that support when they proceed with an abortion.

Nowhere have I stated that abortion should be outlawed—absolutely not. Abortions need to be available, safe and—if at all possible—rare. Serious, deeply personal and at times tragic sets of circumstances can cause a woman to consider whether or not to end her pregnancy. Those women need our support. The current structure of the bill is inadequate; it does not cover the last points I have raised. It fails to acknowledge that women need support. I simply see the termination of pregnancy as a medical procedure almost akin to the removal of an ingrown toenail. This needs to be highlighted further. The protections for women and the emotional, mental and psychological support that needs to be provided to them must be built into the bill. For those reasons, unless this bill is amended to ensure that there are proper protections for women and that they are properly supported, I cannot support the bill.

Ms JO HAYLEN (Summer Hill) (18:42): I am so pleased to make a contribution to debate on the Reproductive Health Care Reform Bill 2019. Based on comprehensive legislation from Victoria and Queensland, the bill decriminalises abortion in New South Wales by abolishing the common law offences relating to abortion in the New South Wales Crimes Act 1900 and establishing a framework for lawful and unlawful terminations. It

allows for terminations of pregnancies up to 22 weeks and provides for terminations after that point under special circumstances. The bill requires doctors who express a conscientious objection to abortion to refer patients to a doctor who does not object, and it institutes a new offence for performing unlawful abortions. Finally, the bill states that a woman does not commit an offence if she performs a termination on herself.

The eyes of Australia are on this Parliament today. Under sections 82 to 84 of the Crimes Act 1900 a woman can be jailed for up to 10 years for procuring an abortion. As the Australian Medical Association has made perfectly clear, the current law is not appropriate for either patients or doctors. Since Judge Levine's ruling in *R v Wald*, abortions in New South Wales have existed in a legal grey zone and have been performed in licensed private clinics when a doctor determines they are necessary to prevent serious harm to a woman's physical or mental health. New South Wales is the last State or territory where abortion remains in the criminal code. There can be no doubt that Australia is watching us today because with this bill a painful chapter in our history ends. I thank the member for Sydney for bringing the bill to our Parliament and for his absolute commitment and resolve to getting this done.

I was moved by his second reading speech, particularly his touching dedication to his late grandmother. It is a story that resonates with so many women in our community, some of whom are here today to witness debate on this historic bill. Our mothers, aunts and grandmothers have fought for reproductive rights and we carry their torch with us today. I am so proud to have worked alongside the member for Sydney, the Hon. Penny Sharpe and the Hon. Trevor Khan in drafting the bill. I am proud to be co-sponsoring the bill today with 15 members from five political parties and independents—a first for the New South Wales Legislative Assembly. I thank the Minister for Health and Medical Research for his guidance and support, and the Premier, the Leader of the Opposition, the Leader of the House and the Manager of Opposition Business for their early indications of support for the bill.

I thank the Human Rights Law Centre and the Australian Medical Association [AMA] for their assistance in the drafting process and in encouraging support for the bill. I am deeply humbled by the dedication and passion of the many activists and feminists, the many legal, health and women's organisations, who have fought for this reform and brought us to this point today. I will speak more on that contribution later, but I assert from the outset that we stand here today on their shoulders, because of their hard work and because of their commitment to getting this done. Finally, I also thank the many inner west residents who contacted me about this issue. Overwhelmingly, they expressed support for the bill, for decriminalising abortion in this State and for a woman's right to choose. I also acknowledge those who have contacted me to express their concerns or opposition. I know this issue is important to them and although we disagree, I assure them that I have considered their views, respect their right to hold them and thank them for respectfully sharing them with me.

For 119 years New South Wales women have fought to exercise fundamental reproductive rights in the face of an unfair law. Historically, they have done so under a cloud of shame and secrecy, sometimes putting their lives at risk for unlawful abortions. In more recent times, women have sought legal abortions but feared the repercussions within a grey area of the law, often navigating social stigma or judgement as they do. Sections 82 to 84 of the Crimes Act 1900 measure a woman's worth by her womb, valuing the life of an unborn fetus over her emotional, financial and physical wellbeing. It ignores the many circumstances that bring women to seek an abortion and is an anachronistic, outdated and, frankly, insulting approach to what is a deeply personal and incredibly complex decision. There is no single reason why a woman seeks an abortion. Our lives are rich, complicated and filled with many unforeseen circumstances, including unwanted pregnancy. One woman has written to me:

I was living in Coffs Harbour. I was kicked out of home. I found out I was pregnant and sought refuge in a women's shelter. They helped take me to Queensland for an abortion. I was 16. I am grateful that I was able to do this, as I was unable to look after myself, let alone a child. If I had stayed pregnant, the small town I lived in would have crucified me. My life would have been vastly different without that assistance.

Another woman has shared her story:

I've had three abortions and have never regretted a single one ... I have recently been diagnosed with bipolar and BPD [borderline personality disorder]; and spent my 20s extremely unwell and unmedicated. If I had had to raise three children whilst being that unwell, it would not have been a life I would want for anyone, particularly them. This service is necessary and a fundamental right.

In relation to late-term abortion, I note that Ann Brassil, Director of Family Planning NSW, recently said:

When I think about the women in this situation, I think of women who each had their own very complex story to tell. Mothers who were looking forward to bringing a sibling into the family but had their hopes crushed by a devastating foetal diagnosis, women fighting health battles who were told continuing the pregnancy could put their own life at risk and sometimes women whose abusive partners had stopped earlier access to care.

There is no single reason why a woman seeks an abortion; there is no simple reason. Our laws should respect the complexity of our lives and not criminalise actions often taken out of compassion and with deep consideration.

I turn briefly to the provisions in the bill. The bill allows for women to seek terminations when up to 22 weeks pregnant if the procedure is performed by a registered doctor. The bill allows for terminations after 22 weeks when two doctors consider that the procedure should be performed given the medical, physical, psychological and social circumstances. When a woman's life is at risk after 22 weeks, or if the life of another fetus is at risk, a single doctor will be able to perform the procedure. It is a false narrative by those who oppose a woman's right to choose that this legislation will see a rise in abortions after 22 weeks. In reality, late-term abortions are rare—95 per cent of abortions take place before 14 weeks.

The bill provides a clear framework under which abortions would occur after 22 weeks. It notes that this is the period where families may learn of serious fetal abnormalities and requires the sign-off of two registered doctors, considering: the person's relevant medical circumstances; the person's current and future physical, psychological and social circumstances; and the relevant professional medical practitioner standards and guidelines. This is hardly late-term abortion on demand. As others have noted, the requirement for two doctors to sign-off on a procedure may represent a stricter regime than currently exists in the "grey area" of the current law. The bill requires doctors with a conscientious objection to disclose their objection and to refer their patient to another doctor, responding to the concerns raised through consultation with doctors, nurses and the AMA. Whilst I do not believe that a doctor's personal moral beliefs should impact their practice, I am resolved that this provision allows doctors to exercise a conscientious objection without limiting a woman's access to treatment.

Critically, the bill creates a new criminal offence in the Criminal Code for anyone who performs or assists to perform a termination without authorisation—with a maximum penalty of seven years. We must never return to the dark days of backyard abortions, where women in this State risked their lives in makeshift clinics run by unqualified hacks, who oftentimes preyed on vulnerable women with few options. The bill explicitly states that a woman does not commit an offence if she performs a termination on herself. Opponents of the bill suggest that these laws are rarely used; however, in 2017 a woman was prosecuted for allegedly taking pills she had bought online with the intention of inducing a miscarriage. Keeping abortion in the Crimes Act treats a core component of women's health care as second-class and robs women of the right to decide what happens to their bodies. It also perpetuates a culture of shame around abortion that is, frankly, ill-informed, dangerous and unjust. [*Extension of time*]

Last year we saw the historic passage of the Public Health Amendment (Safe Access to Reproductive Health Clinics) Bill 2018, which placed a 150-metre buffer zone to prevent those entering a clinic from being abused or harassed by anti-choice protesters. These so-called "curbside counsellors" attempt to manipulate, guilt and shame women out of a deeply personal decision. There was widespread support for that bill because the community agrees that women seeking reproductive health services should be able to do so free from harassment, whether they are seeking an abortion, contraception or any other treatment. That bill was only part of the job. We must now remove abortion from the Crimes Act to ensure women are afforded dignity and respect when making medical decisions affecting their own bodies. Generations of women in this State have campaigned for reform, including many in the NSW Labor Party and the union movement. I consider many of them my mentors and inspiration—women such as Penny Sharpe, Tanya Plibersek, Mary O'Sullivan, Meredith Burgmann, the late Ann Symonds, Carmel Tebbutt, Verity Firth and countless others. Young women in our party also continue to inspire me, women such as Claire Pullen, Rosie Ryan, Briony Roelandts, Charlotte Kennedy-Cox, Chloe Smith and many others.

I acknowledge the incredible work of the Women's Electoral Lobby, Labor for Choice, Our Bodies Our Choices and the NSW Pro-Choice Alliance. They have been on the streets and in this Parliament lobbying for years to remove abortion from the Crimes Act. The bill is a testament to their work and their commitment to the cause. There is more work to be done: Even if this historic bill passes today, women in regional communities will continue to face obstacles to treatment and Indigenous women and women from culturally and linguistically diverse communities will continue to struggle to access culturally appropriate information and services. Women across the State will continue to face financial hurdles, with procedures in private clinics costing upwards of \$1,000. Terminations should be available in every public hospital in New South Wales.

I am a feminist and always have been proudly and unapologetically pro-choice. Fighting for a woman's right to choose is one of the reasons I stand here today as an elected representative. I believe in my heart that women and their doctors are best placed to make decisions about their reproductive health; in fact, I think they are the only ones who should make those decisions. The whole of Australia is watching this Parliament today because as the last State to retain abortion in the criminal code, today's vote ends a painful chapter in our history. They are watching too because they want us to set aside our political banners and work together to achieve this historic reform. I implore my colleagues to support the bill and to get this done for the women of this State who have shared their stories and for the countless women who are placing their faith and hope in us today.

Mr NATHANIEL SMITH (Wollondilly) (18:55): I am disappointed that the Reproductive Health Care Reform Bill is being debated in this Parliament without sufficient opportunity for public consideration or for adequate research and reflection by us. It is based on an erroneous idea that, if passed, it will increase the freedom of women over their bodies. Nothing could be further from the truth. Despite the claims of all the hard work done on the bill it is no more than a cut-and-paste job from the left-wing Queensland Government bill. As one of the greatest English jurists Lord Denning stated in 1981 in a case called *The Royal College of Nursing of the United Kingdom v Department of Health and Social Security*:

Abortion is a subject on which many people feel strongly. In both directions. Many are for it. Many are against it. Some object to the destruction of life. Others favour it as the right of the woman. Emotions run high on both sides.

The most famous abortion case in the British Commonwealth was *Rex v Bourne* in 1939, which heavily influenced Australia's interpretations of the laws of New South Wales and other States and contained the following jurisprudence from Justice Macnaghten:

The law of the land has always held that human life is sacred and the protection the law gives to human life extends also to the unborn child in the womb. The unborn child in the womb must not be destroyed unless the destruction of the child is for preserving the still more precious life of the mother ...

Similar views were expressed in the Queensland District Court ruling by Judge McGuire in the trial of Dr Peter Bayliss and Dr Dawn Cullen in 1986, in which he said:

The law in this State has not abdicated its responsibility as guardian of the silent innocence of the unborn. It should rightly use its authority to see that abortion on whim or caprice does not insidiously filter into our society. There is no legal justification for abortion on demand.

Women have been mistreated by doctors such as Dr Suman Sood, who was convicted on two counts of unlawful abortion in August 2006; Dr George Smart, whose mistreatment was described by Magistrate Kevin Waller as "barbaric"; Dr Neville Marinko, over the road in Macquarie Street; and the notorious Dr Geoffrey Davis, whose company Population Services International ran the Arncliffe Clinic until it was closed down by courageous councillors at Rockdale on town planning grounds, having failed to disclose the true purpose of the "medical centre" as an abortion clinic. He also performed abortions at a clinic at Potts Point.

The abortion provisions contained in sections 82, 83 and 84 of the Crimes Act 1900 whilst rarely used have placed an extra layer of protection on women and their unborn babies. The woman who was one of Dr Sood's victims was 23½ weeks pregnant when Dr Sood saw her. Disciplinary complaints and civil cases did not stop Dr Sood from practising as an abortionist. My colleague the Hon. Trevor Khan, apparently a sponsor of the bill, commented on Dr Sood's case in a speech in 2016. He said:

Let us have a discussion based upon an accurate understanding of history, the law and present-day practices, not on myths and anecdotes. For these reasons I cannot support the bill.

Is this ambush a discussion based upon an accurate understanding of history, the law and present-day practices? Hardly, but I will continue on Dr Sood's case. The Hon. Trevor Khan made the following comments about the Sood case:

The facts of the Sood case are horrendous. I will not recount them all but it is safe to say that there is not much doubt that the professional standards of Dr Sood were appallingly inadequate.

Following Dr Sood's conviction, the *Sydney Morning Herald* reported on 24 August 2006:

[The jury] did not know the New South Wales Medical Board had held at least five investigations into the doctor since 1995. Its professional standards committee had found Sood guilty of unsatisfactory professional conduct and found she had shown "serious inadequacy of attitude or caring for a number of patients who have been subjected to pain and suffering which could have been avoided". The board had heard she saw 50 to 60, and sometimes up to 80, patients a day and was distracted and stressed.

Dr Suman Sood was convicted of procuring an unlawful abortion in August 2006 and was suspended from practice for 10 years. Although she was released by the court on a good behaviour bond, the convictions had more teeth than the disciplinary actions and civil cases. The 10-year suspension is what protected potential patients. If the Greenwich bill had become law before Dr Sood's criminal abortion it is unlikely she would have been suspended for 10 years and she may still have been performing abortions, exposing desperate women to danger. Late-term abortions are dangerous to women. Section 6 in the bill allows for an abortion by a medical practitioner on a woman who is more than 22 weeks pregnant if the doctor considers in all the circumstances the abortion should be performed and has consulted with another doctor who is of the same view. Section 6 (2) is a paraphrasing of the Levine ruling. It states:

In considering whether a termination should be performed on a person under this section, a medical practitioner must consider—

- (a) all relevant medical circumstances, and
- (b) the person's current and future physical, psychological and social circumstances, and

- (c) the professional standards and guidelines that apply to the medical practitioner in relation to the performance of the termination.

In his ruling in *R v Wald* in 1971 Judge Levine said that an abortion was not unlawful if a doctor honestly believed on reasonable grounds that "the operation was necessary to preserve the woman involved from serious danger to her life or physical or mental health which the continuance of pregnancy would entail". In *CES v Superclinics Australia Pty Ltd* in 1995 Justice Michael Kirby further liberalised that ruling when he held that "mental health" included "the effects of economic or social stress that may pertain either during pregnancy or after birth". The barbaric method of late-term abortion, known as partial birth abortion, banned in the United States of America, is a method which has been used by Australian abortionists, including Dr David Grundmann. It involves five steps.

First, guided by ultrasound, the abortionist grabs the baby's legs with forceps. Secondly, the baby's legs are pulled out into the birth canal. Thirdly, the abortionist delivers the baby's entire body, except for the head. Fourthly, the abortionist jams scissors into the baby's skull and the scissors are then opened to enlarge the skull. Fifth, the scissors are removed and a suction catheter is inserted. The child's brains are sucked out, causing the skull to collapse. The dead baby is then removed. The late-term abortion technique known as "cranial decompression", as publicised and practised by Dr David Grundmann of the Planned Parenthood clinics in Brisbane and Melbourne, was banned by the US Congress in 2003 as gruesome and inhumane, yet it would be approved under the proposed bill. The opening paragraph of the US Partial-Birth Abortion Ban Act 2003 states:

The Congress finds and declares the following: A moral, medical, and ethical consensus exists that the practice of performing a partial-birth abortion - an abortion in which a physician delivers an unborn child's body until only the head remains inside the womb, punctures the back of the child's skull with a sharp instrument, and sucks the child's brains out before completing delivery of the dead infant - is a gruesome and inhumane procedure that is never medically necessary and should be prohibited.

Dr Peter Bayliss, a notorious Queensland abortionist, told *The 7.30 Report* in 1994 that partial birth abortion was murder. Dr Grundman was unmoved and kept doing this procedure. Very few abortionists are willing to perform an abortion beyond 22 weeks. It is after then that desperate pregnant women take the risks associated with late-term abortions, sometimes performed by shady practitioners. The criminal law extends extra protection to women whose lives are threatened or are maimed by incompetent abortionists. The current abortion provisions do not carry any time limits. In 1981, a Sydney jury convicted Dr George Smart of performing a miscarriage on a teenager who, as in the Sood case, had been refused a termination by a number of other clinics because her pregnancy was past 20 weeks. [*Extension of time*]

The procedure was botched by Dr Smart and his patient was rushed to hospital for an emergency hysterectomy. The young woman's pregnancy was estimated between 27 and 28 weeks according to the surgeon at Crown Street Women's Hospital. Dr Smart had commenced the abortion by the dilation and evacuation by forceps method in his Macquarie Street clinic, using local anaesthetic to reduce blood loss. After removing some portions of the baby he ceased, telling her he was not prepared to go any further. Subsequently, she was taken by ambulance to Crown Street Women's Hospital. There doctors tried to induce birth but this failed and they carried out a hysterectomy. The baby was 885 grams weight, 37 centimetres long and had a 52-centimetre head circumference. The abortion had been described by the committing Magistrate Kevin Waller as barbaric. Dr Smart, who was then old and sick, was released on a bond. He appealed against his conviction but died before his appeal could be heard.

Another abortionist is Dr Neville Marinko of 195 Macquarie Street, just down the road. On 20 December 1989, 17-year-old Ms B of Sydney, who underwent a mid-trimester abortion by Dr Marinko, suffered a lacerated cervix, lost a litre of blood, almost died and had to be resuscitated. The Professional Standards Committee of the NSW Medical Board stated that "Ms B denied being informed of any complications of the procedure." On 21 February 1991, Mrs M was admitted to Sydney Hospital in a coma as a result of complications during an abortion. She suffered a severe brain injury which left her physically and mentally incapacitated, requiring full-time physical care.

As a result of the damaging publicity, Dr Marinko closed his clinic for two weeks. He came under further investigation by police and water board investigators in May 1991 after the pipe connecting the building at 195 Macquarie Street to the main sewer was found to be blocked and the basement flooded. It was found that the blockage was caused by fetal remains, including arms and trunks. Dr Marinko admitted he had been flushing fetal remains down the toilet. Government medical officers reported to police that the remains were of a 10-week-old baby. In September 1993, the Professional Standards Committee found Dr Neville John Marinko guilty of professional misconduct and imposed strict conditions on his further medical practice.

Another infamous Sydney abortionist was Dr Geoffrey Lancelot Davis. He was sued in the Supreme Court by a woman who had travelled from New Zealand for a late-term abortion in 1982. As a result of Dr Davis' incompetence, during the operation she suffered a tear to the left side of the uterus into her cervix, involving the fornix of the vagina, damage to the left-side ligament, and extensive bleeding. He also allowed the fetal head to

remain in the uterus. It was also alleged he inserted a multi-loaded copper IUD into the damaged uterus. Undoubtedly other cases of negligence have been settled to avoid publicity. The cases involving Dr Sood, Dr Smart, Dr Davis and Dr Marinko are all evidence of the dangers to women of late-term abortions. The criminal law currently acts as a protection to them. That protection should be maintained.

In Victoria, where the main Crimes Act provisions were repealed in 2008, women are dying and suffering serious injuries. One such case involved the death of a woman after an abortion procedure at a Croydon clinic run by Marie Stopes International. *The Age* reported the 42-year-old woman died days after attending the controversial abortion clinic in Croydon. Authorities have confirmed that the woman was taken to Box Hill Hospital and she died on the Sunday after earlier having a procedure at the clinic. The clinic also achieved notoriety due to the conviction and jailing of its anaesthetist, who infected 55 women with hepatitis C. He will spend the next decade in prison after the judge condemned his "truly reprehensible" behaviour.

James Latham Peters, 63, was working at the abortion clinic and passed the disease on to patients by injecting himself before injecting the woman. Fifty women who contracted hepatitis C virus or antibody after undergoing a procedure at the metropolitan clinic have launched a class action in the Supreme Court. People might think some of these cases are gruesome, but they happened. These facts should not be concealed from women seeking a late-term abortion. I urge all honourable members to consider this legislation carefully. There needs to be more time for discussion with a much broader range of those lives who are affected or may be affected under this proposed legislation.

Mr EDMOND ATALLA (Mount Druitt) (19:11): I speak in opposition to the Reproductive Health Care Reform Bill 2019. The stated aim of the bill is reforming the law relating to termination of pregnancies and regulating the conduct of health practitioners in relation to terminations. This issue has attracted much attention in my electorate over the past week. I have had many constituents writing to me, mainly in objection to the bill and one in support. I have dissected the bill into four distinct sections. First, I refer to abortion on demand up to 22 weeks—part 2, clause 5. Under this provision of the bill, abortion is permitted well into the second trimester, namely 5½ months, for any reason without any medical requirements.

Secondly, I refer to clause 6 of the bill which relates to an abortion between 22 weeks and up to the day of birth. This provision allows abortion from 5½ months up until the day of birth provided two doctors, without a conscientious objection, agree that in all circumstances that the abortion should be performed. Circumstances that must be considered include current and future medical, physical, psychological and social circumstances. The third aspect is in an emergency situation. Under clause 6 (1) and (2), a medical practitioner may perform a termination on a person who is more than 22 weeks pregnant without the need to further consult with another medical practitioner. Under this provision termination by a medical practitioner is deemed legal:

... if the medical practitioner considers it necessary to perform the termination to—

- (a) save the person's life, or
- (b) save another foetus.

The fourth aspect I wish to discuss is under part 3, clause 10 of the bill that a person does not commit an offence for termination on themselves. I now make a brief contribution on each of those four clauses of the bill. In relation to the termination of a fetus up to 22 weeks gestation on demand and without the need for medical consent, I do not understand the logic behind the arbitrary selection of 22 weeks or 5½ months. To demonstrate how developed a 22-week-old fetus would be, I did some research. If props were allowed in this Chamber, I would be holding up a photo of a 22-week-old baby capable of sucking on its thumb.

I have even seen news articles about the survival of babies born at 22 weeks. I invite all members to look at an image of a 22-week fetus and ask themselves if their conscience will allow them to participate in a vote legalising the termination of a baby at 22 weeks—a baby capable of being born at that age and surviving. There is no explanation for supporting such a termination other than the reasons that it is a woman's body and it should be a woman's choice. It may have been rare for a 22-week-old fetus to survive in past generations but this is not the case now. Medical advancements mean survival rates of premature babies continue to rise and babies as young as 21 and 22 weeks have a chance of surviving. I cannot support a bill that calls for on-demand termination of a fetus that has every chance of surviving.

Clause 6 of the bill relates to an abortion at more than 22 weeks. It allows the legal termination of a fetus from 22 weeks right up until the day of birth with the agreement of two doctors who do not have a conscientious objection. My objection to this provision of the bill is the consideration of the person's current and future social circumstances. It is unclear how a doctor may be able to predict a patient's future social circumstances when those circumstances are not of a medical nature. What possible social circumstances would arise for the doctors to give consent to terminate a late-term pregnancy? I acknowledge, from time to time, medical circumstances would warrant the termination of a late-term pregnancy but I cannot comprehend the social circumstances that might

arise to allow this consent. I agree with this provision of the bill when a late termination is required in an emergency medical situation and this occurs without the need to consult with another medical practitioner. I understand that this is the current practice in New South Wales.

I refer to part 3, clause 10 of the bill that a person does not commit an offence for self-termination. This is a very grey area of the bill. No details are provided as to why we are allowing a woman to perform a self-termination. I understand that those advocating for the bill argue that it is needed to encourage women to safely seek this procedure by registered doctors. I suggest that this clause of the bill was introduced to allow late-term abortions in situations when a woman has been unable to obtain medical consent to do so. Are we seriously saying that a baby due to be born within days can be aborted by an expectant mother and no law is broken? [*Extension of time*]

I find this clause of the bill totally unbelievable. A recent *The Guardian* news article reported that the New South Wales health Minister has indicated his support for the bill. The Minister has been quoted as saying:

This issue of abortion should be between a woman, her partner and her doctor and not involve possible criminal proceedings against them. It is a medical issue. I agree with the statement that this issue should be between a woman and her doctor. However, this is not what is being advocated in the bill, particularly with regard to an on-demand termination up to 22 weeks, and self-termination with no specified pregnancy time. If the bill was drafted to remove the matter of abortion from the criminal Act and leave it as a medical matter between the woman and her doctor I would suggest there would be a lot more community support. Given that abortions are currently being carried out in New South Wales and there are numerous legal abortion clinics throughout the State and the current practice is consistent with the 1971 District Court ruling then I ask: What is wrong with the current practice?

The circumstances in which abortion is lawful in New South Wales were expanded in 1971 by a decision in the New South Wales District Court in which Judge Levine said an abortion was not unlawful if a doctor honestly believed on reasonable grounds that the operation was necessary to preserve the woman involved from serious danger to her life or physical or mental health which the continuance of pregnancy would entail. Mental health has since been interpreted to include the effects of economic or social stress that may pertain either during the pregnancy or after birth as per the judgement in *CES and Another v Superclinics (Australia) Pty Ltd and Others* (1995). I again ask what is wrong with the current legal interpretation? Why can't we just apply the District Court judgement to the health Act and remove it from the Crimes Act?

Another interesting observation is the register for stillbirth by Service NSW. Babies are said to be stillborn if they show no signs of life after birth and they are of 20 weeks gestation or more, or, if the gestation period cannot be established, a weight of at least 400 grams. Stillbirths are legally required to be registered and the register will contain a notation of the stillbirth. Is it not a contradiction that if a baby was stillborn at 22 weeks they are considered a person to be registered, yet a baby aborted at the same age is not considered to be a person? Members of Parliament should not be put in a position where they are asked to legislate when a baby can be terminated. If we truly believe this should be a woman's choice then leave it as a medical matter between the woman and her doctor. I cannot support the bill in its current form and I will be voting against the bill.

Mr RAY WILLIAMS (Castle Hill) (19:22): I take this opportunity to make a contribution in debate on the Reproductive Health Care Reform Bill 2019. I state from the outset that I oppose aspects of the bill for reasons that I will outline in my speech. I oppose the bill on behalf of the many hundreds of people within my electorate who have contacted me over the past few days. There is absolutely no doubt in my mind that this is one of the most contentious issues I have ever confronted in this place in my 12 years as a parliamentarian. To say that there has been overwhelming animosity towards this bill is an absolute understatement. The outpouring from within my community for me to vote against the bill has been absolutely overwhelming.

There have been well and truly over 450 separate emails and phone calls to my office and I have engaged with the vast majority of those people. I state for the record that I am yet to receive any messages from my community in support of the bill. That information is contained within my office. On behalf of my community and for reasons I will outline in the debate I will be opposing the bill. The heading of the bill to me is somewhat misleading. The bill is not about reproduction; it is about legalising abortion. In my mind that is the direct opposite. We are not discussing reproducing life; we are discussing the destruction of life. Debates about abortion will always be emotive, given that many people would agree the potential for young life is removed through the very process. I have always believed that life begins at conception and therefore ends with abortion. I, along with the majority of people in New South Wales, would also agree that the loss of 80,000 babies a year in this country through abortion is far too high and a figure that we would all hope could be reduced.

Last week, when this issue first arose, it may have come as a shock to many people that abortion is still included in the Crimes Act in New South Wales and is, in fact, illegal. But it would also have come as a shock to

many people to learn that 80,000 or more abortions occur every year in this country. Surely as leaders we all have a role to play in somehow trying to correct the imbalance in which there are many thousands of people who would love the opportunity to become parents through the process of adoption yet sadly only 230-odd adoptions occur in this country each year. People who cannot have children but are completely capable of giving a loving, caring family environment and home to a young baby are denied the opportunity due to the very small number of adoptions that are available—yet 80,000 abortions occur.

Many people would believe that abortion remaining in the Crimes Act for a century has provided somewhat of a deterrent to such actions and provides protections for healthy unborn babies. I agree that abortion should be removed from the Crimes Act due to the stigma that attaches to women who believe they may have done something illegal through the process of having an abortion. My concern regarding the bill, however, is the complete absence of acknowledgment of the growing life of an unborn baby within a mother and the lack of protections for unborn babies during late-term abortions. I understand there will be extreme cases where a woman may need to make that choice to have an abortion, but there seems to be a complete disregard within the bill for the life that is growing inside a woman—in fact, the word "woman" is not even mentioned throughout the bill.

I believe the bill fails to ensure that appropriate support or counselling from specialists will be provided to a woman contemplating having an abortion. Nowhere does it mention where support will be offered to at least give the woman a choice of having her baby and then perhaps putting the child up for adoption. That, in my opinion, is where the first real choice needs to be made by the woman in the first instance—but also together with and including her partner. Despite what many women may think, the fact is that without a man there can be no baby produced in the first place.

The partner plays a very important role throughout this process, but the woman will be making the ultimate decision. She should make that decision with the very best information, the best intentions and the best support possible. The failure to incorporate those measures is the reason that I oppose the current bill. Given that abortions continue to occur in New South Wales, the question could be asked: What is the need to change the legislation? I have stated previously that based on my own family's experiences I believe a woman should be given the choice to have an abortion in extremely rare cases. Outside of that I am disappointed that so many potential young Australian babies are lost each year through abortions in this country.

Now for the difficult part of my contribution. From a young age my mother instilled in me the importance of a woman having the right to choose an abortion, due to the suffering of my brother, who suffered immensely during his short life and passed away prior to his third birthday. My brother Wayne was born spastic—a condition now referred to as cerebral palsy. Although he looked like any other baby, his little body was growing in a tormented and twisted manner which tortured him with pain each and every day of his life. His pain was my parents' pain as they struggled every day to find a cure and stop his suffering. It caused enormous emotional strain on my parents, as they were continually advised to leave my brother behind in hospital and just walk away—something they refused to do as the wonderful, loving parents they were. Wayne's condition drained them not only emotionally but also financially, as they fought for nearly three years to find anything that would help ease his suffering.

Just prior to his third birthday he passed away, with my father insisting he would never bring another baby into this world. My mother, on the other hand, was determined to have healthy children and today my sister and I are extremely lucky to have had such a determined and resilient mother. Wayne's suffering was something that was seldom spoken about in our family. His very name immediately brought tears to my father's eyes. So in this extremely rare instance my mother insisted that if she had known the suffering my brother was to endure, she would have had an abortion, thereby preventing his suffering. My mother and my father carried the burden of my brother's suffering and it stayed with them for the remainder of their lives. While my mother insisted it was a woman's choice to make, at the same time she would remind me that people have a responsibility not to bring unwanted children into this world.

Relaxing the laws surrounding abortion, as this bill proposes, in my mind promotes a sense of apathy towards the responsibility that all sexually active people must bear. People should be aware of and responsible for their actions, as the large majority of our population are. But I believe the majority of people who are responsible for 80,000 abortions each and every year in this country have taken their responsibility too lightly and many unborn babies suffer as a result. At the very least, we should insist on legislation that supports the health of women but also recognises the health and rights of unborn babies. This House passed legislation several years ago called Zoe's Law to do exactly that, but unfortunately, whilst the legislation passed this House, it remains on the table in the upper House. Today we should be debating that bill, which covers an issue we took to the last election. We should not be debating the bill before us, which seeks to legalise abortion and, in my view, unfortunately seeks to diminish the rights of an unborn child. I understand that amendments to the bill will be moved and I look forward to seeing them. I oppose the bill.

Ms JODIE HARRISON (Charlestown) (19:32): I start my contribution to debate on the Reproductive Health Care Reform Bill 2019 by thanking the member for Sydney, Alex Greenwich, for introducing this historic bill. I also thank the other 14 co-sponsors of the bill, who come from across the political spectrum. I particularly recognise the Hon. Penny Sharpe, MLC; the member for Blue Mountains, Trish Doyle; and the member for Summer Hill, Jo Haylen; and the many, many others—particularly women—who have worked tirelessly over many years for women to have full autonomy over their own bodies. I also thank everyone who has contributed to this debate and those who have written to me in a way that respects divergent opinions.

I wholeheartedly support the bill. It creates a standalone Reproductive Health Care Reform Act for the regulation of procedures to terminate a pregnancy and, most importantly, removes those procedures from the Crimes Act 1900. It also amends the Crimes Act to make it an offence for a person who is not a medical practitioner to terminate a pregnancy. My support for the bill will not come as a surprise to anyone who knows me or who has spoken to me on this topic. In fact, at a candidates forum hosted by the Australian Christian Lobby only a week or so before the March 2015 State election I was asked for my view on abortion and I stated quite clearly that I supported a woman's right to choose in relation to her own body.

In August 2017 I supported the motion on abortion law reform moved by the member for Newtown, Jenny Leong. I have been a member of EMILY's List for a number of years. The organisation supports women candidates getting into Parliament to achieve equality—equality that includes choice over our own bodies. This bill brings the law in this area into line with community sentiment, medical practice and the rest of Australia. New South Wales is the only jurisdiction in this country that has not decriminalised abortions performed with consent on a woman by a medical practitioner.

The fact is that, despite modern standards of medical practice and expectations of reproductive health and autonomy, abortion remains a criminal offence in New South Wales. The New South Wales Crimes Act was passed in 1900, and the provisions in relation to abortion were heavily based on the English Offences Against the Person Act 1861. I encourage everyone who opposes the bill, or is uncertain about it, to read sections 82 to 84 of the Crimes Act to see just how archaic the statute law currently is, with penalties of up to 10 years imprisonment for a woman who seeks an abortion and 10 years for someone who administers an abortion. I think it is worthwhile noting that the English law of 1861, on which our current 1900 statute law is based, contained a penalty of life imprisonment for a woman who procured an abortion. Imprisonment of any length of time is simply not in line with community views.

Thankfully, common law has progressed in an attempt to reflect community attitudes, expectations and, importantly, health practice. Other speakers who support the bill have already, importantly, spoken about the common law decisions in New South Wales that have attempted to clarify what a "lawful" abortion is in this State. So in the interests of brevity, and recognising that many will want to speak to the bill, I will not go over that again. However, I will say that I believe it is well past time that this Parliament, being responsible for making statute law in New South Wales, ensures that law in this area reflects community expectations and health practice. The bill does that. The law as it currently stands contributes to the difficulties experienced by rural and regional women to access termination of pregnancy. Access to abortion is often limited by bank balance and location.

Women seeking abortions in regional New South Wales often have to travel long distances to find a medical practitioner who will carry out the procedure or assist in providing a medical termination. The member for Strathfield gave some real examples tonight of how difficult it is for rural and regional women. While ever abortion remains a criminal act in New South Wales, some doctors will be reluctant to provide the service. By reforming reproductive health care, safe terminations will be on their way to becoming more accessible to women living in rural and regional areas.

Some have raised with me that a doctor may be forced to go against their conscience if the bill is enacted. However, the bill provides that a medical practitioner who is requested to provide an abortion may conscientiously object to performing the procedure. It provides that such a conscientious objection must be coupled with a referral to another practitioner who does not have a conscientious objection. That provision simply reflects the New South Wales Ministry of Health's current provisions surrounding abortion, which have been in place since 2014. New South Wales is in desperate need of abortion legislation that provides a clear legal framework for both women and doctors. This reproductive healthcare reform will remove the legal confusion surrounding the procedure. Victoria reformed its abortion laws in 2016, and Queensland did the same last year. It is time for New South Wales to come into line with the rest of the country.

Some argue that decriminalisation will increase the rates of abortion—that this bill will "open the floodgates", as some have said. That has not been the case in Victoria or Queensland, and it is not the case worldwide. A 2018 report "Abortion Worldwide 2017: Uneven Progress and Unequal Access" stated that the abortion rate in countries where abortion is prohibited or only permitted to save the life of the pregnant person was actually higher, at 37 per 1,000 people, than it was in countries where abortion is not restricted by a reason,

at 34 per 1,000 people. This report indicated that the abortion rate is actually slightly lower where abortion is legal and broadly available. Community sentiment is that abortion should not be a criminal act. In 2017 a survey of 1,000 people by the University of Sydney and James Cook University indicated that 73 per cent of people thought abortion should be decriminalised and regulated as a healthcare service. Obviously the desire for reproductive healthcare reform is strong.

There have been some concerns raised about the bill's provisions in relation to the ability to access abortions in the later stages of pregnancy. It is important to note in this debate that the vast majority of abortions currently occur in the first trimester. Up to 95 per cent of abortions occur before 14 weeks. Women accessing abortion after 20 weeks have complex reasons for doing so, reasons which include their own life or health being at risk, a devastating fetal abnormality which could not be detected earlier or that the woman is in a violent relationship in which her partner has prevented her from accessing a termination earlier.

The bill provides regulation around late-term abortions which will improve the health outcomes for women in pregnancy. Earlier speakers, including the member for Swansea, Yasmin Catley, have addressed the detail on this, so again in the interest of brevity I will not cover that now. However, I support the argument already put forward in that regard. The legal community supports decriminalisation. The Australian Medical Association supports decriminalisation. The general community supports decriminalisation. [*Extension of time*]

The Uniting Church supports decriminalisation. Yesterday, the Anglican Bishop of Newcastle, Dr Peter Stuart, wrote to New South Wales members of Parliament supporting decriminalisation. After reiterating his church's view that all human life is sacred. Bishop Dr Peter Stuart said:

After careful reflection, I encourage you to support the overarching proposal to move the legal management of the termination of pregnancy from the criminal code. The healthcare regulatory framework is a better place for governing the complex decision-making associated with pregnancy and matters associated with conscience.

For some women abortion is the best choice at the time. For that reason I believe choice in relation to termination of pregnancy must be legal, safe and available. The choice must be left to the woman, and the woman alone. It is time to bring our legislation in relation to abortion in line with what the vast majority of the general community expects. The law must be brought in line with reality and with modern medical practice. Nineteenth century crimes of the English legal system should not continue to dictate what women can and cannot do with their bodies in New South Wales now. This is a health matter; it is not a criminal matter. Women should have the right to opt for an abortion with dignity and safety in New South Wales, free from risking criminal conviction. This is why I support the bill.

Mr DOMINIC PERROTTET (Epping—Treasurer) (19:43): I speak on behalf of those who cannot speak for themselves on the Reproductive Health Care Reform Bill. This is a challenging issue. There are passionate feelings involved and deeply held personal beliefs. There are confronting stories on both sides that deserve to be heard. It is important that this debate is conducted in a spirit of mutual respect. This debate has been framed around choice, and I agree. Today we have a choice set before us that goes to the core of who we are and who we want to be, a choice that will define us as a parliament, as a place and as a people. That choice is whether we recognise that the unborn also have human rights. I believe the purpose of this Parliament is not to be a platform for the privileged but a voice for the voiceless vulnerable who cannot speak up for themselves. On this issue the supporters of the bill are ignoring that obligation. They are also on the wrong side of history.

The human story can be understood as a long, winding arc to the transformational truth that all lives matter, that we all possess an inherent dignity just by virtue of who we are: male or female, black or white, born or unborn. The best chapters in our history have been when we have recognised the innate dignity of others; the worst have been when people with rights have decided that others should not have them too. The issue of abortion is complex because there are competing rights at play. However, the bill today does not recognise that complexity nor does it recognise human rights; instead it takes them away. It takes them from those for whom they matter most—unborn children.

I do not come at this issue from a position of judgement. I approach it with an attitude of wonder at the mystery of human life. More important to me than trying to be a good Treasurer is trying to be a good father. My wife probably thinks I am a better Treasurer and Labor probably thinks I am a better father. The most defining moments of my life have not been in this Chamber but have been with my wife on her journey of pregnancy and then as our children were born. I have felt them move and kick in my wife's womb months before they arrived. We have embraced them, read to them, spoken to them and loved them all before they took a single breath in this world. When we have lost them through miscarriage—a grief I share with others in this place—we have mourned them as well.

I know that not everyone is lucky enough to be in my circumstances. Every day there are women out there who fall pregnant in difficult and sometimes impossible conditions of poverty, abuse, neglect and violence.

I can understand why many of them in that situation would want to consider ending their pregnancies. But our first response as a community should be to help, not to harm, and to comfort, value and support both mother and child. But that is not what this bill does. It discards any notion that unborn children have any rights at all. This exposes a fundamental contradiction at the heart of the bill and in our thinking about this issue. Why is it when a child in the womb is wanted it is treated as a precious human life endowed with rights but when it is not wanted it seemingly has no rights at all? This is a question that has not and cannot be answered.

The truth is our human rights are not subjective. They do not depend on the feelings of other people or our current circumstances. They exist whether a piece of paper recognises them or not, with the right to life the most important right of all. The bill draws an arbitrary line in the sand at 22 weeks. In many parts of the world the average gestational limit for abortion on request is around 12 weeks, with strict requirements to be met after this period. The bill allows abortion up to five months. During pregnancy lots of couples having a baby will sign up to an information service like BabyCenter to get regular updates about their progress. Here is what a BabyCenter email update for 22 weeks says:

You're 22 weeks pregnant! Your baby's head, body, arms and legs are all more in proportion now, and she's looking much more like a newborn.

At this stage the unborn child has had a heartbeat for months. Its fingerprints have formed, it has its own unique DNA, its hair starts growing and it has been yawning, stretching and moving. Thanks to this bill our law will now stand completely silent while the lives of unborn children up to five months are ended on demand. That is why I cannot in good conscience support a bill that stops the beating heart of an unborn child. A number of supporters of the bill have given the impression that it does no more than codify the current common law situation. Some have suggested that the bill's purpose is merely to stop treating as criminals women who have abortions. However, codifying the current common law could have been achieved simply by inserting a definition of "unlawful" into the Crimes Act 1900. Parliament could also very easily stop women being treated as criminals by inserting a new section into the Crimes Act to the effect that women and girls cannot be prosecuted under the relevant section. Instead Parliament has been presented with a bill that goes much, much further.

There has been a strong focus on the arbitrary nature of 22 weeks, but there is a deeper issue at play. Under the bill the only meaningful difference between a termination before 22 weeks and a termination after 22 weeks is a second signature. As long as another doctor is consulted, a pregnancy can be terminated at any time after 22 weeks up until birth. Some members have said that people who raise the prospect of an abortion up until birth are simply scaremongering and that late-term abortions are very rare and only happen when there is a pressing medical need. If that is the intention of supporters of the bill, it should be reflected very clearly in the proposed law, but it is not. The bill allows abortions to occur in very late stages of pregnancy in circumstances where there is no medical need because that is what this law will allow. That is not scaremongering. It is a matter of fact, not opinion, and is profoundly out of step with community expectations.

For abortions performed after 22 weeks, doctors face no criminal sanctions even if they break the proposed law. For example, a doctor who performs an abortion beyond 22 weeks but fails to consult a second doctor would face no criminal sanction. The only penalty would be a possible professional reprimand. At a bare minimum, the law should retain criminal sanctions for doctors who fail to comply with the legislated procedural requirements even if those requirements are far less stringent under the bill. That is consistent with the provisions of the bill that impose criminal sanctions for abortions performed by an unauthorised person.

The other serious issue is conscience. It will compel doctors and health professionals who cannot in good conscience facilitate an abortion to do so. Today we learned that a doctor in Victoria is being investigated and cautioned because he refused to facilitate an abortion for a couple that wanted a boy, not a girl. Forcing a doctor to refer is akin to making them a participant in the act they disagree with. That is not freedom. How ironic it is that we stand in this Parliament and give ourselves a conscience vote but deny that very same right to others. I am advised that amendments will be moved on this point and I intend to support them. I will do so because no law in any free society should compel a person to participate in an action they believe to be morally wrong.

The real question for us is not are you pro-choice or pro-life. The real question is: What kind of society do we want to be? Hopefully it is one in which new life is cherished, cared for and celebrated; one in which we recognise the importance of mothers, the challenges they face and the difficulties they endure; and one in which we recognise that unborn children also have rights. All members have different views on this issue, but we have one thing in common. We come from a place of great privilege—the privilege of the living. If the bill succeeds and becomes law, particularly in its current form, it will represent a triumph of the powerful over the powerless. There is a choice before the House. I choose life and I encourage other members to do the same.

Ms TAMARA SMITH (Ballina) (19:53): I contribute to the Reproductive Health Care Reform Bill 2019. I commend the 15 co-sponsors—particularly my colleagues the member for Newton, Jenny Leong, and

the Hon. Abigail Boyd, MLC—for their incredible work, and Mehreen Faruqi who for many years campaigned in the upper House with others on this issue of removing reproductive rights from the Crimes Act. I note the work of the member for Sydney. He chose to use his political capital for an important issue and we are very grateful for that. Abortion is legal when a woman's life is in danger in 97 per cent of countries. Two-thirds allow abortion when the physical or mental health of the mother is endangered. Only about one-third of countries offer abortion on social or economic grounds. What is most striking about those studies of abortion around the world is that whether it is legal or not, women are just as likely to have an abortion if they need to.

In 2007 the World Health Organization found that abortion rates are virtually equal in rich and poor countries. Looking at abortion trends from 1995 to 2003, researchers concluded that regardless of restrictive abortion laws, women sought abortions. In other words, restricting access to abortion does not make it go away, it only makes it clandestine and unsafe. Essentially the worldwide unsafe abortion rate was unchanged between 1995 and 2003. Despite the overall abortion rate declining during this period, the proportion of unsafe abortions increased from 44 per cent to 50 per cent. Globally, evidence has shown that when abortion is fully decriminalised the rates of women seeking abortion reduce. If those opposed to abortion are genuinely concerned with seeing fewer abortions, they would support this reform.

That statistic tells us that, firstly, the criminalisation of abortion around the world oppresses women, denies them having reproductive rights and places them in physical harm. One can argue that when stigma and criminality is attached to a medical procedure it always harms the person mentally and psychologically. Secondly, criminalising and stigmatising abortion denies a woman and all people with a uterus the human right to choose what happens to their body. Thirdly, abortion rates as a quantum are not affected or reduced by criminalising abortion or stigmatising women and people with a uterus who seek abortions. Fourthly, the rate of unsafe abortions continues to rise as a result of criminalising abortion and stigmatising women and people with a uterus for having an abortion.

The price of moral judgements over women's reproductive rights and their human right to have control of their own bodies is their physical and mental health and, in many cases, their mortality. It is oppression of women at its most real. For women in regional areas such as mine, it has the added reality of distance and lack of services that adds another set of barriers to supporting women and their reproductive rights. It is important to make clear that it is immoral to suggest that a woman's body is somehow separate from her, that she inhabits it. That clearly demonstrates the absence of human rights. A woman is her body; she embodies herself. The idea that she is somehow floating around in a body and is separate to herself is outdated. Quite frankly, it is disturbing to hear those arguments here.

One-quarter of people with wombs will have an abortion in their lifetime. It is common and a part of basic health care. It is a simple medical procedure. Abortion is the only criminalised medical procedure in Australia, thanks to the archaic law imported from Victorian England in 1900. When people speak about a radical abortion bill, they should look to the States and Territories in our country to see how outdated the law is. It is a travesty that this health procedure has remained in the Crimes Act for more than 100 years. So many studies—too many to count—confirm that making abortions harder to get does not stop them from happening, it just makes them unsafe. This puts the lives of people seeking an abortion and everyone who loves them in danger.

The law criminalising abortion is the single largest barrier to fair and just abortion access and reproductive choice in New South Wales. It particularly affects women in lower socioeconomic and marginalised communities and those living in rural and regional areas. For moral reasons doctors and health professionals are hesitant to support their patients who seek an abortion and the current laws in the Crimes Act put them at risk of prosecution. There has been fearmongering about late-term abortion by those opposed to the bill. They suggest that pregnant people would demand an abortion on a whim up to the day of birth. That is simply not realistic. In Australia only 0.7 per cent of all terminations take place after 20 weeks. They are usually done due to complications meaning that the fetus is not compatible with life, or in situations where due to difficult circumstances the pregnant person has not had access to suitable health care earlier in the pregnancy. The procedures are carried out within a multidisciplinary context in a hospital.

The reform would bring New South Wales law in line with community sentiment. A total of 70 per cent of Australians agree that abortion should be readily available, and 73 per cent agree that abortion should be decriminalised and regulated as health care. Criminalisation of abortion has been a problem for 119 years in this State, and a focus of debate and activism for 50 years. The facts do not support the idea that the bill is new or radical. Improving access to abortion, giving women the autonomy to make their own choices for their own bodies and moving abortion out of the New South Wales Crimes Act have been consistently debated social issues for 50 years in this Parliament. Women are telling us that they want independence over their healthcare choices. Their push for better control of their reproductive and sexual health has been consistent for 50 years. The bill is well

and truly overdue in New South Wales to follow the examples of States like Queensland and Victoria by introducing modern regulation of abortion as a healthcare issue. [*Extension of time*]

This year more than three in every four people surveyed in a New South Wales poll had no idea that abortion was a criminal offence in this State, and 73 per cent thought that the procedure should be decriminalised—three out of every four people had no idea that abortion was against the law in New South Wales. On the subject of late-term terminations, Ann Brassil, CEO of Family Planning NSW, has said:

In all my years working with women this has never been a cavalier decision. The few women forced to consider abortions at this stage are cared for in major NSW hospitals by a team of doctors. Personally, and physically, they face a very difficult procedure that is not easily forgotten. When I think about the women in this situation, I think of women who each had their own very complex story to tell. Mothers who were looking forward to bringing a sibling into the family but had their hopes crushed by a devastating foetal diagnosis, women fighting health battles who were told continuing the pregnancy could put their own life at risk and sometimes women whose abusive partners had stopped earlier access to care.

There are so many reasons. Only 0.7 per cent of all terminations occur after 22 weeks. I will not have time to go through the extensive list of doctors, nurses and experts in the field who support the bill. I will not name them all, but it is interesting to see the list, which includes the Australian Medical Association, Australasian Sexual Health and HIV Nurses Association, Australian College of Nursing, Australian Lawyers Alliance, Australian Lawyers For Human Rights, Australian Medical Students' Association, Australian Women's Health Network, Family Planning Alliance Australia, Family Planning NSW, Women's Centre for Health and Wellbeing Albury/Wodonga, Women's Domestic Violence Court Advocacy Services, Women's Electoral Lobby, Women's Health NSW and Women Lawyers Association of NSW. We are not talking about radical, left-wing organisations; we are talking about the Women's Electoral Lobby, Family Planning NSW, Women's Health NSW and the NSW Pro-Choice Alliance. They represent expert, legal, health and community voices from across the State. The idea that this bill is radical is, quite frankly, ludicrous.

The Australian Medical Association welcomes the announcement of the introduction of the Reproductive Health Care Reform Bill to decriminalise abortion. New South Wales is the last State in Australia to decriminalise abortion, and this has placed the women and doctors in New South Wales under a stigmatised legal arrangement compared with other States. The peak body, the Royal Australian and New Zealand College of Obstetricians and Gynaecologists, welcomes the tabling of this bill and urges all MPs to vote in favour of it. It states that the decision as to whether or not to have an abortion, or to continue a pregnancy, is multifactorial and is between a woman and her medical care provider. In no way can it be said that globally we are moving towards the emancipation of women's bodies from control, exploitation and abuse. Those outside this place chanting in the name of religion believe they have a God-given right to control the reproductive rights of women and prevent them from undergoing a medical procedure because they morally object.

These same moral arguments are used by men and societies to oppress women all over the world, and prevent them from accessing contraception and education about reproductive health. One of Trump's first actions as President was to sign an executive order defunding any international development groups that even give women or girls overseas advice on abortion. That ban, known as the global gag rule, is set to hit women of colour and low income hardest. Health workers have warned it will inevitably cost lives. Women are reclaiming this discourse. It is time for pro-choice people to stop feeling cornered by the prevailing rhetoric into expressing their rights by pleading and start acting like the overwhelming majority—some 71 per cent—who think that a person who can get pregnant is in charge of their own body. Keep your hands off my uterus. I commend the bill to the House.

Ms FELICITY WILSON (North Shore) (20:06): I support the Reproductive Health Care Reform Bill 2019, which aims to finally and unambiguously treat abortion as a matter of women's health care and remove it from the Crimes Act. I come to this debate as a representative of the electorate with the highest proportion of women of any member of this Parliament. I come to this debate as a woman who believes that women's voices need to be heard much more in public life and particularly on this topic. I come to this debate as a new mother of a much-cherished baby and the mother of a girl who will grow up to be a woman in our community.

I have spent much time reflecting on the vast responsibility I have to be a voice for my community, for women today and for women into the future. That is why I have chosen to co-sponsor this historic bill. The issue of abortion is a difficult one. People have very deeply held, often immovable views, and many see it as black and white. However, in my view it is the responsibility of those of us fortunate enough to be in this place to tackle those difficult issues and to use facts, reason and our conscience to make the tough decisions. Not everyone in my community will agree with the decision I have taken, but it is clear that the prevailing view of my constituents is in support of a woman's right to choose. For those who have taken the time to reach out to me during this debate, I thank you. Whether or not you agree with the decision I have taken, I was always going to disappoint some people and I appreciate the predominantly gracious nature of the correspondence I have received. Threats of recriminations should never be brought into this debate and I will always stand by the decisions that I make in this place.

In reflecting on the providence of the current laws, much has been said of these provisions remaining unchanged in the Crimes Act since 1900. In delving deeper, these principles have in fact not changed since they were first introduced in New South Wales in 1871. These laws in effect were based on the United Kingdom Offences Against the Person Act 1861. According to Sally Sheldon in the *Oxford Journal of Legal Studies*, the Offences Against the Person Act 1861 provisions were passed without debate in the Parliament or outside of it. There was no commentary in the newspapers. It seems that society in the Victorian era struggled to discuss the topic even as we do today. In Westminster in 1861 and on Macquarie Street in 1871 through to 1900 there were no women's voices. It took until 1925 for a woman to be elected to this place. Millicent Preston-Stanley sought to rectify that, avidly pursuing an improvement in the rate of women's mortality in childbirth, child welfare reform, institutional care for people with mental illnesses and more equitable custody rights in divorce.

Before her time in Parliament she fought for a range of issues of concern to women, including sex education, family planning and maternal and child health, and—as the Minister for Health mentioned earlier in the debate—she campaigned for the establishment of a chair of obstetrics at the University of Sydney Medical School. When the school instead introduced a veterinary obstetrics course, her powerful catch-cry was "horses' rights for women". I have often referred to Millicent Preston Stanley in this place. I am proud that she stood in this place as a member of a party that was a precursor to the Liberal Party. A key passage from her inaugural speech in 1925 often guides me in the role of this place and its decision-making on women. She said:

As women taxpayers and workers, they are subject to the laws you make, the inadequate wages you impose, the taxes you collect, the injustices you perpetuate, the anomalies you tolerate, and they suffer under the many vital and important matters you forget to handle. They are also subject to the many unfortunate results which follow from the neglect of the Legislature to handle effectively many of the great questions which may be considered to be of vital importance not only to women, but to the entire nation.

Why is it that for almost 150 years the members of this place have not seen fit to address the criminalisation of women and doctors when it comes to abortion? It was left up to the courts to first liberalise abortion law in New South Wales. In my view it is our obligation as legislators to frame the laws of this State—not to outsource our courage, but to address those tough issues. That is the obligation and expectation placed on us by our communities. As hard as this discussion and this decision may be for each of us, it is our duty to consider and reflect the views of our communities.

I support us placing the community's views in statute, rather than relying on Judge Levine's 1971 ruling in the case of *R v Wald*. We all know that attitudes have changed significantly since the Crimes Act was drafted and legislated. Medical science and care has also evolved and the vast majority of the community support a woman's right to choose a safe, accessible abortion where needed. Historically our laws gave no agency to women. Women in the abortion debate have been marginalised and stigmatised. This is in direct contradiction to the guiding principle of medical care that the patient should be at the heart of all decision-making around their care, in reflection of their bodily autonomy.

I am staunchly liberal. I believe fundamentally in the individual and their ability to make the best decisions for themselves in each unique situation they face. In the circumstance of abortion, the people best capable of making such a personal and impactful decision are the women. They do so with access to quality care, options for Medicare-funded counselling, compassion and respect. They do this already under the status quo and this bill seeks to enshrine the quality practices established by our medical profession to support women as they make this most difficult of choices. The reasons that women seek an abortion are varied and often complex. I am fortunate that I had a healthy pregnancy and I now have a much-loved and healthy baby. I am grateful to have never been faced with the choice of a termination. Can I say unequivocally that if my husband and I had received horrific news following the 20-week scan that we would not have contemplated a termination? No, I cannot. It is a very real decision that many mothers and partners make about what was a sought-after baby. I do not believe it should incur a criminal threat for a woman or a doctor.

There is a point at which the drafters of the bill, in line with the Queensland Law Reform Commission and the Queensland Act, have sought to introduce a second tier of decision-making by requiring two medical practitioners to approve a procedure after 22-weeks' gestation. Much has been made of the 22-week threshold—whether or not it is appropriate and whether, in fact, any terminations should occur at all after that point. Erroneous commentary has labelled this as "abortion to full term". That is a misrepresentation of the complexities of abortions at any point in time, and particularly of later term abortions. At present terminations post-20 weeks are already undertaken with extensive expert consultation and usually with teams of medical professionals. They occur in complex and challenging circumstances, such as risks to a woman's life, domestic violence or fetal abnormalities that are often fatal.

The 22-week threshold was recommended by the Australian Medical Association in New South Wales and reflects the Queensland law, which followed lengthy work by the Queensland Law Reform Commission. However, in practice approximately 95 per cent of terminations occur before 14 weeks. A report by the Australian

Institute of Health and Welfare in 2005 estimated that 0.7 per cent of all abortions nationally were performed at or over 20 weeks' gestation. Another matter that much has been made of is the conscientious objection of medical practitioners. I took the time to look at the current *Pregnancy—Framework for Terminations in New South Wales Public Health Organisations* produced by NSW Health. It enshrines the principles and practice of conscientious objection in providing terminations in the public health system and is done in concert with the code of conduct under the Australian Medical Association. The document states:

4.2 Conscientious objection

Any medical practitioner who is asked to advise a woman about termination of pregnancy, or perform, direct, authorise or supervise a termination of pregnancy, and who has a conscientious objection to termination of pregnancy must:

1. Inform the woman that they have a conscientious objection and that other practitioners may be prepared to provide the health service she seeks; and
2. Take every reasonable step to direct the woman to another health practitioner, in the same profession, who the practitioner reasonably believes does not have a conscientious objection to termination of pregnancy.

That is the status quo. That is how medical practitioners currently have to treat conscientious objections. Whenever we see a conflict of rights or a perception of rights we need to balance those rights. I am comfortable with the bill enshrining the rights of conscientious objection by allowing a referral—not even requiring a written referral but the provision of a name of an alternative medical practitioner—because when time is of the essence in the context of an abortion a woman's rights trump the rights of a medical practitioner. [*Extension of time*]

I turn now to reflect on the tone of this debate and some of the commentary I have heard. I have a concern about attitudes in this society towards women and some of today's contributions have been particularly unhelpful—comments such as referring to women as being promiscuous, irresponsible or deplorable women, or saying that abortion is an easy contraceptive. This reflects an attitude that is out of touch with our broader community. I have already said that I believe women are best placed to manage their reproductive health and know best what decision to take in each unique situation. I find it particularly offensive to suggest that this is an easy decision for anyone or akin to contraception. I would hope that by decriminalising abortion there is an opportunity for us to reflect on those attitudes that some have towards women, to remove the stigma that women face and allow them to speak about their own medical procedures in the light of health care rather than a criminal offence.

What does the threat of criminal proceedings do to those women who are accessing safe and timely medical care? As we have already said, abortions already occur but a number of health and human rights experts say that the shame and the stigma mean that women are often less likely to access abortion earlier. In rural and regional areas in particular women may risk not having an abortion early enough so it would become a later term abortion. They would have to travel many hundreds of kilometres and pay a lot of money to seek health care outside of their own communities. The approach of the medical fraternity to abortions is enshrined in this legislation. The bill will change the message that is given to our community, particularly to women, that abortion in New South Wales is a healthcare matter and not a criminal matter. The effect of removing the criminality will be removing the stigma from women who seek such care. It will remove the stigma from doctors seeking to provide that care to women.

The Australian Medical Association [AMA] New South Wales supports the bill. The Royal College of Australian and New Zealand Obstetricians and Gynaecologists supports the bill. At present the number of general practitioners who are qualified to prescribe medical terminations is particularly low—about 5 per cent or fewer. Advice from the AMA is that all GPs are trained to provide support and advice to women around reproductive health, including sexual health and pregnancy. However, qualifications to prescribe require optional continuing professional development training. The advice I have received is that the legality of abortions and the grey area for medical practitioners leads to that small number. Why is this important? Why is this an issue? It is because time is important, access is important and so is continuity of care. That is another reason we have a principled approach to conscientious objections.

Like all members of this House, I bring to this place the values of my upbringing. None of us can distance ourselves from how we were raised. In my case, that includes a Christian upbringing and completing my education in a Christian school. I know that none of us can divorce our thinking or beliefs from our decision-making. However, it is my firm view that we are here to legislate on fact, not through religious doctrine or at the direction of religious institutions. I note that different churches within the Christian faith have expressed different views on the bill and within my own church there are different views. While the Sydney diocese of the Anglican Church has expressed opposition, I have also heard from many Anglicans expressing their personal support. I particularly welcome the comments from the Newcastle diocese where I was born and raised—the church that I grew up in and that my family's values stemmed from. The Christianity with which I was raised was founded in compassion

and non-judgement and those are values that I find consistent with my approach to my role as a legislator and to my consideration of the bill.

I state again my responsibility to represent my community's views, women today and women in the future. I speak on behalf of all women. In considering the contribution of the member for Sydney, and his reflection on his grandmother Jacqui, I think about my own grandmother Edna, whose Christian values instilled in me compassion and care for others and a refusal to judge another for the choices they feel they need to make. I hope to see the bill succeed and New South Wales finally enshrine in statute a woman's right to choose.

Mr TIM CRAKANTHORP (Newcastle) (20:20): It is with great pride that I support the Reproductive Health Care Reform Bill 2019. First, I thank the member for Sydney and the 14 other co-sponsors for their efforts, particularly Penny Sharpe, the member for Summer Hill and the member for Blue Mountains from the Opposition. In voting on this legislation we all have a choice. We can choose to remove abortion from the Crimes Act or we can choose to leave it in. We get to choose whether women get to choose. I made my position on this legislation clear some time ago and I will repeat it: I support a woman's right to choose. I support a woman's right to decide what is best for herself physically, emotionally, financially and socially. I support a woman's right to feel safe when doing so. I support a woman's right to make those decisions without guilt, without stigma and without shame.

Like most other MPs, my office phone has been ringing off the hook for the past week and my inbox has been filling faster than I can empty it. While some correspondence has been unkind, most of it has not been. In fact, it brings me great joy to say that I have received more feedback from constituents in support of the bill than those opposed to it. However, I expected nothing less from Newcastle. After all, Newcastle was the city with the highest regional vote in the country in support of same-sex marriage. It is a city that will always stand up for equality and for what is right. I thank every person who contacted me with their view. While I may not have agreed with all of them, constituents engaging in the political process is a very positive thing. Through those constituent engagements I have become aware of the great deal of misinformation circulating, and it has a strong focus on the absolutely ludicrous idea that the reforms would more or less give the green light to every late-term abortion. The fact is that any abortion over 22 weeks must have the consent of two doctors, which is an increase on the current legal requirement of only one. It is believed that less than 1 per cent of all abortions occur after 20 weeks' gestation. Placing a particular emphasis on late-term abortions misleads the public on the reforms.

When we boil it down, the bill is not about abortion. For all intents and purposes there will be little change to the practices that already occur. The bill is a long overdue update to an archaic and oppressive law that solidified a woman's place as lower than a man's. The Crimes Act 1900 was created at a time when women did not vote, did not work and certainly were not in this House. In 1900 a group of men took away a woman's right to autonomy over her own body and, in turn, her choices, her independence and her integrity. The fact that we are righting this wrong is not shocking; what is shocking is that it has taken us so long.

While the bill brings the current law into the twenty-first century, it has been heartening to see some historically conservative institutions stand in support. To that end I acknowledge Anglican Bishop of Newcastle Peter Stuart, who has decided to back the bill on the basis that the healthcare regulatory framework is a better way to deal with pregnancy decision-making. Additionally, it is wonderful that the Uniting Church of Australia backs the bill. It believes the role of the church is to offer care, rather than stand in judgement. During this time it has been my absolute pleasure to witness the mobilisation of my community in their advocacy for change.

On Saturday I attended an event in Newcastle that brought together the Hon. Penny Sharpe, MLC, and our Federal member, Sharon Claydon, MP, to discuss the process around delivering this important reform. For members who are not familiar with how these things happen, it was a very informative afternoon. For members who are familiar—as I am—it was an excellent opportunity to engage with people who were looking to learn more about the path to change. I thank Penny and Sharon for their time and for their insights. Passion was on show a fortnight ago when the Our Body Our Choice rally was held in Newcastle's Civic Park, before a march through the surrounding streets. Particularly inspiring about the event was that it was organised by Merewether High School students Ruby Hackett and Aleeyah Clifford, who had attended a Sydney event and felt so strongly about the issue that they brought the rally to Newcastle. At just 16 years old those young women have shown extraordinary courage and maturity, and I commend them for their efforts.

Many other advocacy groups have contributed their voices to this debate. While there are too many to name today, I acknowledge the work of some including Labor for Choice, the Newcastle Women's Alliance, Fair Agenda, the NSW Pro-Choice Alliance and the Hunter Women's Centre. I also show my gratitude to the founder of the Hunter Women's Centre, Mary Callcott. Mary is a true stalwart of the women's rights movement in Newcastle. For over 40 years she fought for the women of Newcastle to have better access to health and wellbeing services, particularly those who are marginalised or who are experiencing disadvantage. Only a few weeks ago a local Labor Party member was doing a clean-out of her home and came across a series of postcards that had been

designed to be sent to politicians to convey how people felt about abortion law. On the front was a simple sketch of the facade of our Parliament House and the female symbol of the circle sitting atop the addition sign. Its heading was "I'm Pro-Choice...and I VOTE!" and it included one more sentence reading, "I object to any bill that will restrict access to medically safe abortion services."

The reverse side had space for the sender to fill in their details, and the postcards had already been addressed to one of three people: the New South Wales Premier at the time, Nick Greiner; Opposition Leader, Bob Carr; or health Minister, Peter Collins. Those names date the postcards to around 1990, and they speak volumes about Newcastle's decades of commitment to reproductive health rights. Although the senders of those postcards may have played a small and simple part in advocating for the correction of legislative wrongs, I pay tribute to them. They and other people have been pivotal in the long journey to ensure that women have proper access to health care, which culminated in the introduction last year of 150-metre safe access zones around facilities that provide abortions. Today's bill is the next step in that journey. For women in Newcastle it will ensure that they cannot only attend our local Marie Stopes clinic without fear of harassment but also do it with the full support of the law.

I can confidently say that the decision to have an abortion is not taken lightly. Whether it is a medical or surgical termination, there is nothing comfortable or easy about the process. As elected representatives we are required to act in the best interests of our constituents. In this case that means to ensure that women have safe access to reproductive health care. It does not matter if a termination is due to a medical issue with the fetus, a mental or physical health issue with the woman, or an inability to financially or emotionally care for a baby. The reason is not for us to judge or even know. Our role is to provide the best that we can for our communities. In supporting the bill, that is exactly what we will be doing. Opposing the bill is standing in the way of improving health care for a significant portion of our constituents and that is something that I absolutely refuse to do.

As members of Parliament we have a huge responsibility right now. How we vote will change many lives. For those who are considering voting against the bill I ask if this is the legacy you want leave? Is being on the wrong side of history something you want to be remembered for? For 119 years men in this place have told women what they can and cannot do with their bodies. I will not be one of those men. Abortion is not a legal issue, it is a health issue, and it is time our legislation treated it as such. That is why I will be voting in favour of the bill.

Mr ANTHONY ROBERTS (Lane Cove—Minister for Counter Terrorism and Corrections)
(20:30): This evening I acknowledge not only my colleagues in this House but also those in the public gallery. Thank you for your patience, your time and your support on this very important Reproductive Health Care Reform Bill 2019. I also acknowledge and pay tribute to those people of all ages who participated in the vigil outside Parliament House in the cold weather. From the warmth of Parliament House, we extend our best wishes and our thanks again for this support. In addressing the bill today members have heard from the mover of the bill, from the Leader of the Opposition and from the representative of the Government. All of them were accorded unlimited speaking times under standing orders and all of them are supporting this legislation. Unlimited time is not afforded to those who oppose or seek to amend this extreme bill. I am among those who stand strongly opposed to the bill and I do not need unlimited time to explain why. Only with respect to supporting abortion does one need hours to equivocate on why some lives are worth more than others. I refer to Jeremiah 1:5, "Before I formed you in the womb I knew you, before you were born I set you apart."

There should be no debate on the sanctity of human life but here we are. Abortion is in direct defiance of the commonly accepted idea of the sanctity of human life. No civilized society permits one human to intentionally harm or take the life of another human without consequence and abortion is no different. Evidence has shown that abortion can result in medical complications later in life and frequently causes intense psychological pain and stress. This bill has been rushed into Parliament without adequate time for consultation with constituents, without input by numerous and varied stakeholders, which has serious consequences for our society. The process for consultation in New South Wales compared to other jurisdictions who have debated the introduction of similar legislation has been seriously lacking and is quite frankly a disgraceful breach of process and procedure in this House and Parliament. Indeed, it shows a complete lack of respect by those moving the bill towards the people of New South Wales.

I provide the following examples of where effective and informative consultation was undertaken in other jurisdictions. In Victoria, the Government referred abortion law reform to the Victorian Law Reform Commission in September 2007. Thirty meetings were held with faith groups, providers, academics, peak bodies and disability services advocates. A panel of medical experts and two academic lawyers were engaged as consultants, and 519 submissions were received. A report was tabled in Parliament in May 2008 providing three different legislative models before the introduction of a bill in August 2008. In Queensland, an Independent member proposed abortion legislation in May 2016. This was referred to the Health, Communities, Disability Services and Domestic and

Family Violence Prevention Committee. In August 2016, the committee released a report recommending the bill not be passed. A second bill was introduced to address issues raised in earlier consultation. In February 2017 the committee issued a report containing a split recommendation before both bills were withdrawn. In 2017 the Queensland Attorney-General referred abortion laws to the Queensland Law Reform Commission and a consultation paper was released. The consultation paper called for submissions.

In June 2018 the commission reported back and in August a bill was introduced. The bill was then referred to the health committee. In October 2018 that committee recommended its report be tabled, and the bill was then debated and passed. In Tasmania in March 2013 the Minister for Health released a draft bill and information paper, inviting public submissions. In late April a revised bill was put to Parliament and amended. In June 2013, the Tasmanian Legislative Council referred the bill to a standing committee, with several months of hearings and consultation with the public before a final report was tabled in November.

My point is that legislation of this nature requires extensive consultation and consideration by the many and varied stakeholders who hold very strong views on its content, whether they are for or against the bill. I have received urgent letters from leaders around the country expressing their serious concerns with both the content of the bill and the lack of public consultation. I seek the indulgence of the House to read extracts of letters sent to me by community leaders who have not had the opportunity to express their views in this debate. It is critical that their voices are heard as they were not consulted. An open letter from Christian and Muslim religious leaders in Australia states:

We call for the immediate withdrawal of the Reproductive Health Care Reform Bill 2019 from the New South Wales Parliament until further objective discussion is conducted, where all voices have equal opportunity to be heard. We reject a parliamentary process that appears to have been intended to exclude the voices of concerned New South Wales citizens, including the many who belong to our faith communities.

A letter from Bishop Daniel of the Coptic Orthodox Church states:

I am disappointed that such an important public interest matter is being rushed through Parliament without giving the public adequate time to digest and understand how the bill will affect the wider community".

A letter from Archbishop Makarios, Primate of the Greek Orthodox Church in Australia, states:

It is with much heartfelt pain that we have learnt that a bill allowing abortion until birth will swiftly, unexpectedly and with no public consultation be introduced into the New South Wales Parliament.

...

Tragically, the right to life of the indefensible unborn child is increasingly violated despite the protection and advancement of many other human rights.

I will return to and expand upon those letters and other representations at a later point. I hold particular concerns with the Reproductive Health Care Reform Bill 2019 in its current form. The bill has some fundamental failings. It permits an abortion to be performed up to 22 weeks by a registered doctor "for any reason", which allows for sex-selective abortions and abortions based on discrimination against those with disabilities—two examples of serious consequences of the rushed drafting of the bill.

In Victoria, medical practitioner Dr Mark Hobart was formally cautioned by the Medical Board of Australia for not referring a patient to another medical practitioner for sex-selective abortion. Dr Hobart expressed a conscientious objection to aborting a baby girl at 19 weeks' gestation because the Indian couple wanted a boy. The abortion was carried out one week later by a different doctor. Dr Hobart reported the doctor who carried out the abortion for unprofessional conduct because he had performed the abortion solely on the grounds of gender selection. The Medical Board of Australia chose not to take action against the doctor who performed the abortion and instead turned on Dr Hobart. It investigated his actions for failure to refer and then formally cautioned him.

Section 5 of the Reproductive Health Care Reform Bill 2019 fails to refer to the "mother" and instead refers to performing a termination "on a person", thereby making it gender neutral. It seems absurd that a bill that is supposedly focused on health outcomes for women fails to even mention the "women" it seeks to protect. Section 6 of the bill permits termination of pregnancy from 22 weeks' gestation with the requirement of sign off by two medical practitioners and consideration of medical circumstances and the person's current and future physical, psychological and social circumstances. Let us call this what it is. The bill is no less extreme than the Faruqi bill—it permits abortion right up until birth—but is simply better disguised. The bill fails to give the indefensible unborn child any rights whatsoever.

The requirement for a medical professional to consider the current and future physical, psychological and social circumstances of the pregnant woman is mandatory. However, there is no provision stating what inquiries a medical professional would need to make to apprise themselves of a person's personal circumstances, nor what records they must keep to show that this has been considered. How can a medical practitioner know what is required of them to meet this magical threshold? How could a doctor be able to predict a patient's future social

circumstances to come to a justifiable reason for termination? Clauses 5 and 6 of the Reproductive Health Care Reform Bill 2019 do not require consent of the mother prior to an abortion, nor do they make the lack of consent subject to the grievous bodily harm provisions in the Crimes Act 1900 that deal with the child destruction where consent is lacking. [*Extension of time*]

Any medical practitioner who performs an abortion outside of the bill should be subject to criminal sanctions. I and many others have serious concerns with the conscientious objection provision in clause 8 of the draft bill. Clause 8 (1) allows anyone to make inquiries to a medical professional about performing an abortion on another person and requires them to disclose their conscientious objection. Why should a doctor be required to disclose their conscientious objection to anyone who comes fishing for it? They should not be required to discuss abortion with anyone other than the person seeking the abortion or their legal guardian. In the case of conscientious objections, clause 8 also requires the medical professional to refer the client to another health practitioner or health service provider who does not have a similar objection. The forced referral by one doctor to another doctor as a result of a conscientious objection to abortion is manifestly unfair on doctors who hold religious or ethical views which run contrary to abortion. Indeed, it violates the doctor's conscience. In the words of Dr Hobart, the bill effectively:

... stops doctors from counselling women about the negative effects of abortion — for example, psychological and physical side effects of abortion

And it:

... also stops doctors determining if, for example, a woman is being coerced into an abortion.

The bill also goes one step further to specify that failure to make a referral following a conscientious objection is relevant for complaints and disciplinary procedures under the Health Practitioner National Regulation Law and Health Care Complaints Act. This essentially makes a failure to refer the equivalent of performing an illegal abortion in respect of the consequences for the medical practitioner. This is ludicrous! Medical practitioners who perform an abortion outside of the bill should be subject to criminal sanctions. On the flip side, there should be no consequence if a doctor refuses to make a referral which is against their conscience.

It is important that the views of the community are heard in this debate and there is justified concern that opinions of many are being excluded. I say again to those people undertaking the vigil, those that join us here today, many of us share your concerns. To the hundreds upon hundreds of people who have contacted my electorate office by telephone, letter and email supporting our position on this, stating they have huge issues with the bill, I thank you. To the four or five that contacted my office supporting the bill, I thank you also.

I seek leave to incorporate letters from community members on the Reproductive Health Care Reform Bill 2019 representing tens of thousands—if not hundreds of thousands—of voices not given the opportunity to be heard or contribute to this debate. Under Standing Order 271 I seek leave to incorporate letters from the following people: Reverend Anthony Fisher, Archbishop of Sydney; Andrew Levy, Director of Mission, Christ Church Gladsville; open letter from the Grand Mufti of Australia and New Zealand, the Coptic Orthodox Church and the Melkite Catholic Church; Archbishop Makarios; Bishop Daniel, Coptic Orthodox Church; the President of Right to Life Australia; and Dr Margaret Colwell.

TEMPORARY SPEAKER (Mr Greg Piper): I will give consideration to the member's request, with the intention of granting it.

Mr ANTHONY ROBERTS: I along with other members in our community strongly oppose the Reproductive Health Care Reform Bill 2019. I express my concern about the process and procedure that has allowed this bill to be brought on so quickly and the lack of consultation with many in our community. I will not be supporting this bill.

[*Later,*]

TEMPORARY SPEAKER (Mr Greg Piper): Earlier the member for Lane Cove sought leave to incorporate in *Hansard* approximately 10 letters opposing the bill. I advised the member that I would give consideration as to whether the letters could be incorporated. I have conferred with the Clerk, the Speaker and the Speaker's team. I have come to the conclusion that they will not be incorporated in toto. However, I will allow the incorporation of the letter from the Most Reverend Anthony Fisher. *Hansard* has recorded the names of the authors and signatories of the other letters. I have made my ruling in conjunction with the Speaker and the Speaker's team.

Dear Minister

I am writing to make a personal plea to you to vote against the *Reproductive Health Care Reform Bill 2019 (Bill)* this week.

The Bill is deeply troubling, both in terms of its content and the process by which it is being pushed through NSW Parliament. All human life is precious and we should always tread carefully whenever it is under threat.

The Bill would allow abortion at any time provided that two medical practitioners deem it appropriate for physical, psychological or even social reasons. This provides a very low threshold for the allowance of abortion until birth, a practice which is of grave concern to most people, irrespective of their view on abortion. Indeed, according to the Medical Journal of Australia, only 6 per cent of Australians support third trimester abortion for any reason.

It would also require every health practitioner and institution in NSW to participate in abortion, either by performing them or referring a woman to someone who will. Their conscience rights will not be respected. They will be coerced by the state to refer mothers for procedures which those practitioners find repugnant.

There is no need for such an extreme imposition on the rights of health professionals. Abortion is readily accessible in this state and information about its availability can be obtained from a range of sources. There is no just reason to co-opt health professionals into being a part of it against their conscience.

In addition, the Bill provides no support for, nor mention of, the mother of the child. We know that many mothers who choose to abort their child do so because they lack support and feel they have no other option.

The co-ordinated efforts to push this Bill through Parliament without consulting the public or even many MPs is also deeply concerning. There was no mention of the Bill at election time, yet this has now been given priority over other parliamentary business.

Other states that have liberalised abortion laws have had many months of community consultation, allowing for submissions to be made, and to allow parliamentarians to hear from those who they are elected to represent.

This Bill is extreme, both in terms of its content and the process by which it has brought it to you for a vote.

I ask that you vote against it. The vulnerable mothers and children of NSW want and deserve better.

Yours sincerely in Christ
Most Rev. Anthony Fisher OP, DD BA LIB BTheol DPhil
Archbishop of Sydney

Ms SONIA HORNERY (Wallsend) (20:45): Abortion is still a crime in New South Wales. That is a statement which prompts disbelief in many. History has demonstrated a lack of respect for women, including the right to vote, work or attend university. Decisions about women's future were entirely in their parents' or their husband's hands. Debates about their hard-earned empowerment—allowing women to have a choice in their lives and health care—are negated by sections 82 to 84 of the Crimes Act 1900. This results in women and their doctors being in either legal limbo or having potentially dangerous medical procedures outside the medical system. How can doctors, who fear prosecution for accessing or providing abortions, adequately care for their patients? I respect the strong views on either side of the House, which are sincerely and deeply held. Therefore, I urge members to debate the bill with sincerity and dignity.

Approximately one in four women will terminate a pregnancy at some stage in their life. Some 95 per cent of those terminations occur within the first 14 weeks of pregnancy and very few take place after 20 weeks, with a team of healthcare professionals. It is estimated that 36,000 abortions occurred in New South Wales last year. Due to this estimation, criminalisation means that reliable, timely and detailed data on abortion is impossible to collect. It is therefore difficult to develop policy. Now is the time to end the legal limbo. Of particular concern are women in regional and rural areas, those in abusive family settings or those from disadvantaged backgrounds who are disproportionately impacted by criminalisation. Why?

Due to the expense, the tyranny of distance and the lack of availability, abortion is impossible for many. When a woman terminates a pregnancy many people want to know why. Is it for financial or medical reasons, or because of family and relationships? It is nobody's business. The bill is an opportunity for us to speak candidly about terminations. A decision to terminate a pregnancy is not taken lightly or without great angst. As United States Supreme Court Justice Harry A. Blackman wrote in the landmark *Roe v Wade* case:

The right of personal privacy includes the abortion decision. How would you feel if you had a medical situation and you dreaded talking about it with your GP for fear of legal ramifications? That is how we must treat abortion; medically, not legally. On that medical basis I note the support for decriminalisation from the Law Society of New South Wales and the New South Wales Bar Association. I note support from the Royal Australian and New Zealand College of Obstetricians and Gynaecologists as well as the Australian Medical Association and Family Planning NSW. My own observations as a former teacher in remote New South Wales, in communities such as Walgett and Kempsey where I lived for a long time, were that women's lives were endangered by a lack of access to reproductive health care. A local constituent named Rachel said:

All women across New South Wales should be able to access reproductive health care not just those who live in major cities or can travel there. This is health care and health care should be equitable and accessible.

Another constituent's email reinforced this belief. She said:

I believe that a woman knows what makes sense for her health, her body and her future; and decriminalising abortion is an issue of health care, and of dignity. It's long past time New South Wales had a compassionate healthcare system that recognised the deeply personal and complex reasons that a person may need to end a pregnancy.

They are very thought-provoking comments. Abortion remains a crime in New South Wales. Today we have an opportunity to update the 119-year-old law. It is time to decriminalise a medical condition that is privy between a patient and her practitioner, not the law courts. The bill will take abortion out of the realm of the criminal and into the medical, where it belongs. I have been thinking about whether I would reveal a conversation that I had with someone last night. I will share a little of it with this House. Before I share that information I want members to consider the experiences of this person before making any judgements. The person I am referring to is named Roma Irene Richardson of good Irish Catholic stock. Together with her sister and brother she was placed in an orphanage at a young age and remained there throughout their childhood. The brother was separated from the girls and placed in Murray Dwyer orphanage. The girls were placed in Monte Pio orphanage.

This woman became pregnant with her first child at 14 years old. She had her second child at 16. Her husband was a heavy drinker, a heavy smoker and the family had no support. This woman became pregnant again at 16 with her third child. She decided she could not cope and she paid £10 to go to a backyard abortion clinic in Hamilton, Newcastle. That woman, Roma Irene Richardson, is my mother. I understand the reasons why that happened to my mother and she wanted to portray this message to all members so they can understand why that happened to her. She is okay; but she had to have an abortion in a backyard. She wanted to convey the opinion that she believes this is a woman's choice. In conclusion, I thank the working party for caring for New South Wales women. To my community, thank you for the respect and empathy you demonstrated to everyone in your discussions and your support for women across New South Wales. I thank my mother Roma Irene Hornery. She is a wonderful woman who had a really tough upbringing but we have all done really well. I commend the bill to the House.

Mr VICTOR DOMINELLO (Ryde—Minister for Customer Service) (20:54): I have spoken to the Attorney General about amendments to the Reproductive Health Care Reform Bill 2019 that he will move to provide additional safeguards. I will support those amendments. Having said that, I have been given the freedom to exercise a conscience vote on this difficult issue. I will vote to give women that same freedom: to exercise their conscience with the love and support of their family, their friends, their doctors and their church. A major element of this debate is life itself. Should termination be permitted at 22 weeks or 24 weeks? Or, with advances in medicine, will it start with a heartbeat at six weeks? These are profound questions. An equally profound question is whether we should allow fertility clinics to screen embryos for genetic health, gender and eye colour. With rapid advances in artificial intelligence and biotechnology, we soon will have the ability to eliminate genetic disorders, cure cancers and fundamentally change our human form.

A very significant issue of our day is the question of when human life begins. However, a very significant issue for our time will be the question of what is human life. Whilst this debate will certainly determine the legislative position on the former issue, it also illuminates an area of deep uncertainty as to the latter. Data underpins virtually everything. Many of us have heard about the data, information, knowledge, wisdom pyramid. What is certain is that data is growing at a speed that is incomprehensible and almost uncontrollable. What is uncertain is whether we have the vision and a pathway for engineers to build the data architecture and, just as importantly, for ethicists to build the wisdom architecture required for our current and future generations. Form will replace tempus in the parliamentary debates of tomorrow. What this debate has shown is that we need to build the ethical infrastructure for that today.

Mr PHILIP DONATO (Orange) (20:56): Every so often matters come before this House which are difficult, complex, sensitive and controversial to deal with—none more so than the Reproductive Health Care Reform Bill 2019 and issues surrounding and pertaining to abortions. The primary object of the bill seeks, among other things, to remove from the New South Wales Crimes Act 1900 division 12, sections 82, 83 and 84, which pertain to abortion, and to create a legislative framework around the conduct of future abortions. It is not often that this House removes offences from the Crimes Act, so any decision to do so needs to be carefully considered. The offences contained in division 12, sections 82, 83 and 84 of the Crimes Act 1900 carry terms of imprisonment of between five and 10 years. They are significant penalties that reflect the intention of the Parliament at the time of the making of those laws. Those sections have been incorporated into the Crimes Act since its inception in 1900, 119 years ago, and copied United Kingdom legislation at that time.

My research has shown that over the past 20-odd years in New South Wales there have been three reported prosecutions under sections 82, 83 or 84. The most recent case was in August 2017 at Blacktown Local

Court, where a woman was convicted and given a section 9 bond for a period of three years under the Crimes (Sentencing Procedure) Act. Before being elected to this place, I was a police prosecutor for 15 years in local courts throughout New South Wales. Each day that I appeared in the Local Court I must have seen hundreds if not thousands of different types of matters come before the courts. In all that time I never saw one prosecution for an offence under sections 82, 83 or 84. That is despite the fact that over those 20-odd years, there must have been hundreds of thousands of women who had abortions. As I indicated, this is a controversial issue. Personally, over the past week I have given the matter considerable thought.

I have considered my own life experiences and circumstances, and it would be fair to say that, on reflection, I am certainly not pro-abortion. As the father of five children, all of whom attended Catholic schools, and having grown up in an Italian Catholic denomination family, I appreciate and understand the concerns of those who are opposed to abortion. However, I also share a view about and a deep respect for women being able to have control over their bodies and their reproductive rights without fear of criminal sanctions being imposed. I am also of the view that no-one is infallible and there may be times in a person's life when, for whatever reasons, a woman or a couple may choose to have an abortion. They should not be judged—certainly not by me or anyone else—about choosing to make a decision that impacts upon their lives at a very difficult time. This should be done without fear of criminal sanctions or custodial sentences being imposed. Doctors also should not have the fear or risk of prosecution hanging over their heads.

It is well documented that New South Wales is the only State in Australia that still outlaws abortions. I am advised that many women travel interstate to lawfully access abortion clinics, whether in Queensland or Victoria. In fact, many countries throughout the world have now decriminalised abortion—most recently Ireland following a referendum in 2018. On balance and taking into account competing interests and the fact that abortions are presently being carried out and authorities appear to be putting on blinkers and pretending they are not happening—or perhaps wilfully turning a blind eye—it makes me believe abortion should be removed from the Crimes Act. That is not to say I do not have some concerns in relation to aspects of the legislation, and I understand amendments will be moved to it. I will support some of those amendments.

My concerns revolve around the threshold of 22 weeks. First, I am of the view that it should be 20 weeks, as is consistent with the law in Western Australia and New Zealand. Twenty-two weeks is 5½ months into a pregnancy, and I have spoken to people in my community—family, friends, doctors, obstetricians and gynaecologists—who share the same view. I appreciate that an ultrasound can be performed at about 20 weeks' gestation that can detect fetal abnormalities that might not have been detected in previous ultrasounds. However, if the scan detects a significant abnormality in the fetus it would not prevent a woman from being able to access or have an abortion. Another concern that I share is the use of the word "consulted" in clause 6 (1) (b) in relation to two doctors communicating.

There is no definition of "consulted" in the Act and it could be subject to a literal interpretation. Consultation should be extensive, thorough and appropriate. I also have concerns about the use of the word "social" in clause 6 (2) (b) and the lack of a definition. What is considered to be social? Is a doctor qualified to make a determination about a person's social circumstances? Another concern relates predominantly to clause 8 pertaining to the conscientious objection of a registered health practitioner. My concern relates to the use of the word "must" in clause 8 (3) of the bill. In my view it would be much better to use the word "may" to allow a general discretion, not impose a mandatory requirement, where there is a conscious personal or religious belief that may prevent the doctor from acting against their personal beliefs.

I note that on 12 August 2013 the Australian Medical Association [AMA] called on the Tasmanian Government to axe the proposed laws on conscientious objection. In a letter to Paul Harriss, who chaired the parliamentary inquiry into the bill, Dr Hambleton said that the AMA respected the rights of medical practitioners to hold differing views regarding the termination of pregnancies. He said that both the AMA's Code of Ethics and the Medical Board of Australia's guidelines affirm the right of practitioners not to provide treatment that contradicts their moral judgement or religious beliefs. Neither document requires a medical practitioner to assist the patient to access the treatment elsewhere, Dr Hambleton stated. He said the principle was expressly contravened by subclause 7 (2) of the bill, which requires a doctor with a conscientious objection to terminations to refer a woman to another medical practitioner who does not hold such objections. Under the proposed law, failing to do so would constitute a criminal offence. The AMA president said:

As such, subclause 7 (2) removes the rights of medical practitioners to conscientiously object to particular treatments without having to facilitate the patient's access to the treatment.

He went on:

Respect for a conscientious objection is a fundamental principle in our democratic country, and medical practitioners expect that their rights in this regard will be respected, as for any other citizen.

One other concern I have is with the way in which the bill was put before this House. It makes me wonder why there is an appetite for allowing a bill of this seriousness to be pushed through in such haste. It is a shame that the Government does not have the same appetite to rush through legislation to improve and increase water storage capacity, including dams, especially in regional New South Wales, when towns across the State are running out of water.

Those are some of my concerns. However they do not prevent me from supporting the bill. I believe a woman has rights over her body and should not fear prosecution or incarceration if she chooses, for whatever reason, to have an abortion. This is not a decision I have taken lightly. I have taken a pragmatic, factual approach to the issue. It is not a matter of Christian versus non-Christian, Left versus Right, men versus women, nor pro-life versus right to free choice. This is about removing abortion from the Crimes Act and putting it into the healthcare system. It is about removing the risk of prosecution, and possibly jail, for women and medical professionals. It is also about establishing a legislative framework around abortions—a better framework than what is currently under consideration. *[Extension of time]*

Despite what each of us believes in, abortions are already taking place—there are well over 30,000 per year in New South Wales. In fact, many women I have spoken to did not know that abortions were still technically illegal and in the Crimes Act. So in the circumstances I am of the view that abortion should be removed from the Crimes Act. I believe in this day and age an abortion should be treated as a health issue, not a criminal offence punishable by jail through legislation that is nearly 120 years old. I thank everybody who contacted my office to have their say.

Hundreds of people emailed, messaged, phoned, contacted me via social media, attended my office or presented petitions expressing their views on the matter. I respect everybody's opinion. This is a difficult issue, and I have considered it very carefully. Challenging moral issues are never easy and, whilst I cannot keep everybody happy, I believe decriminalisation of abortion is the right thing to do. Nothing in the bill will lead to more abortions. Abortions will now be regulated as a health issue, which is not presently the case. For those reasons I support the bill. However, I indicate that I will also support amendments in relation to the issues I have raised.

Ms ANNA WATSON (Shellharbour) (21:08): I begin by acknowledging Sally Stevenson, who is in the gallery this evening. Sally is from the Illawarra Women's Health Centre at Warilla. She is an outstanding constituent, who does so much for women in the electorate of Shellharbour and in the broader Illawarra region. On behalf of the New South Wales Parliament, I thank her and her team for the work they do. It is grossly underfunded and undervalued, but not by those on this side of the House. I thank Sally for her work and for making the long journey here to listen to this debate. She is an amazing woman.

I support the Reproductive Health Care Reform Bill 2019. I speak in favour of the bill because it is time we recognise in the Parliament of New South Wales that terminating a pregnancy is not a crime. We need to get away from the word "abortion" in our language as it is abhorrent. All Australian States and Territories except New South Wales have already decriminalised pregnancy terminations. It is only this State that continues to favour a criminal approach over a regulated regime of medical supervision. The bill will finally take a pregnancy termination out of the realm of the criminal jurisdiction and into the medical field where it belongs. This bill, which needs to pass in this House and the upper House, will finally bring this issue into the twenty-first century.

I understand that some members in this Chamber and some people in every member's electorate will not support the bill. As representatives, we must respect that the decriminalisation of a pregnancy termination provokes very diverse and broad opinions. These views are sincerely held and we must respect people's right to choose. But we also must face the facts: one in five women in Australia will terminate a pregnancy in their lifetime. Terminations affect women in all electorates, whether publicly spoken about or not, and, with respect, terminations affect women present in this very Chamber, which is something we have heard about today.

Sections 82 and 84 of the Crimes Act are over a century old and a product of that climate. Women did not have a right to vote, women certainly did not have a right to be in this Chamber and our voices were irrevocably silenced in the debate controlling our own reproductive health. Ironically, the British regime on which our laws are based was removed by the British Parliament over 40 years ago in 1967. The criminalisation approach of New South Wales to this issue no longer aligns with current community expectations, both within our State and around the country. We can no longer ignore that research indicates over 70 per cent of this State supports the right to choose. Just as we must respect each individual's right to an opinion in this debate we must also recognise an individual's right to have autonomy over their own reproductive health.

It is also key to remember that the current laws effectively have no practical application in New South Wales. Since the early 1970s New South Wales courts have determined a medical practitioner can perform a termination if necessary to avoid serious danger to the woman's life or her physical or mental health before and

after the pregnancy. A serious danger is interpreted broadly such that any "economic, social or medical ground" is considered—and that is right. The bill will finally establish a statutory scheme ensuring clarity and regulation for medically supervised terminations. Considering those outdated laws are so rarely prosecuted, the actual practical impact of the criminalisation of terminations is further adding barriers to access for those seeking terminations. Fear, confusion, isolation, stress and terror—they are the key words spoken by local women in my community who seek terminations. They are strong words.

There are many reasons why my colleagues in this Chamber have and will speak in support of the bill. However, in the rest of my speech I will highlight an important issue nationwide but also personal to my electorate, an issue that is closely entwined with the bill but absent so far in the public discourse. That issue is domestic and family violence. Police in Australia deal with domestic and family violence every two minutes. So far, that is roughly 440 calls just today while we have been present in this place. One in five women have experienced sexual violence since the age of 15. On average, one woman a week is murdered by her current or former partner.

We have heard the statistics and we know the frightening reality for women in this country. We know that domestic and family violence rates are higher in rural and regional New South Wales. But do members also know that one in four domestic and family violence victims also report coercion over their reproductive lives? This is known as "reproductive coercion". For those unaware, reproductive coercion is a serious and silent facet of domestic violence. Pregnancy can be used as a tool of control and a sign to the violent perpetrator that they have power over their partner's body. Those behaviours can include birth control sabotage—where contraception is deliberately thrown away or tampered with—threats and use of physical violence if a woman insists on condoms or other forms of contraception, emotional blackmail as well as forced sex and rape. Reproductive coercion is an easy, effective and cowardly way of manipulating and controlling a woman by limiting her autonomy over her fertility, reproductive health and choices. It is an additional tool used by perpetrators of violence.

The Global Turnaway Study shows that American women who seek and are denied terminations are more likely to remain in violent relationships than women who are able to access this procedure. Whilst this is still an emerging area of research in Australia, we know enough to understand how serious a problem reproductive coercion is and how much risk our barriers to termination procedures place on women in violent relationships. Those outdated laws still have a real effect. A 2018 paper by Marie Stopes Australia entitled *Hidden Forces on Reproductive Coercion* indicates that women with an unintended pregnancy are four times more likely to experience physical partner violence. Furthermore, the existence of children born into domestic violence relationships strongly decreases any chance of separation.

Access to terminations for women in my electorate of Shellharbour is financially inaccessible, stressful and almost impossible. It is always regional and rural areas that are most disproportionately impacted by out-of-date laws such as these. This is why I have been advocating for the Illawarra Women's Health Centre to receive the proper funding it needs to deal with these issues on a day-to-day basis. With us in the public gallery tonight is the general manager of the centre. She is financed to work 2½ days a week, together with an offsider who relies on donations to help women in the Shellharbour electorate. It is not good enough. I am calling on the Government to ensure that those positions are fully funded now. I am happy to see the Minister for Health and Medical Research in the House today because I know he is sympathetic to those views.

The fantastic non-government, community-based Illawarra Women's Health Centre receives approximately 15 inquiries and provides up to seven terminations a week. Only last week a woman seeking a termination approached the centre. I have been given permission to share her story, one story among many. Out of respect for her privacy, I have changed her name. Mary already had three children, all cherished and loved deeply. Mary entered into a relationship with a new partner. After a period of time he became extremely physically and emotionally violent. He was a perpetrator of domestic violence. It was very clear that this man was a danger to Mary and her children. [*Extension of time*]

I thank the House for its indulgence. After discovering she was pregnant Mary knew that keeping the fetus would endanger the welfare of herself and her children. The most pressing concern to Mary was the serious risk to her unborn child. Mary made the personal, deeply complex and difficult decision to have a termination. The Illawarra Women's Health Centre was able to support Mary safely, confidentially and with financial assistance. Mary's is just one story, a snapshot of a bigger, darker underbelly of reproductive coercion, domestic violence and laws preventing access to terminations.

Mary deserves the right to choose. Shellharbour women deserve the right to choose. Women across New South Wales deserve the same right to choose that their counterparts across Australia already possess. Members should bring New South Wales into the twenty-first century. The framework the bill institutes is well considered, clear and addresses the uncertainty of women and medical practitioners involved in termination procedures. I hope members will stand with me, with the victims of reproductive coercion and with every woman in this State and vote yes for a more compassionate and empathetic healthcare system in New South Wales.

Mr ROB STOKES (Pittwater—Minister for Planning and Public Spaces) (21:19): I thank the House for the opportunity to comment on the Reproductive Health Care Reform Bill 2019. The Premier has authorised a free vote for parliamentary members of the Liberal Party on the bill. I believe it is important to explain to my community my approach to voting in this place. I have received a great deal of correspondence on this issue from my constituents. Putting form letters to one side, a clear majority of the balance of correspondence urges me to oppose the bill. However, I have also received many letters and emails urging me to support the bill or support it with amendment.

In any debate to change existing laws and introduce new laws, it is important to start with an assessment of the existing law. As with many laws, the existing legal position in New South Wales cannot be gleaned simply by reading the relevant sections of the legislation. It is also important to consider the way in which the legislation has been interpreted by the courts through the development of the common law. In the same way that the Australian Constitution—passed in 1900—cannot be properly understood without considering the way in which its provisions have been interpreted by the High Court of Australia, the provisions of the New South Wales Crimes Act, which was also passed in 1900, cannot be properly understood without considering how the courts have interpreted its provisions over the intervening years.

Under the law on termination of pregnancy in New South Wales, as developed through legislation and the common law, termination is defined as lawful if it is conducted by a registered medical practitioner with the consent of the woman and if that medical practitioner has an honest belief, based on reasonable grounds, that the procedure is necessary to preserve the woman from serious danger to her life or to her physical or mental health. Case law has clearly established that the risks to a pregnant woman's physical or mental health can be medical, economic or social in nature. The only condition is that the operation is not out of proportion to the risk intended to be avoided.

The current law establishes a permissive regime that currently facilitates thousands of lawful terminations in New South Wales every year, including hundreds where the fetus is of more than 20 weeks gestation. If the bill currently before the House sought to codify the existing legal position in New South Wales, I suspect it would have a smoother passage through Parliament than the bill, as currently worded, which envisages a more laissez-faire approach to pregnancy termination than currently exists, particularly in relation to abortions in the second and third trimesters of pregnancy.

Women may choose to terminate pregnancy with the support and advice of specialist medical practitioners for a wide variety of reasons. Over the past few days I have spoken to obstetricians who conduct terminations. They told me they roughly categorise those reasons as social and medical. Pregnancy may expose some women to risks of physical violence or social condemnation. Other women face horrific choices about whether to continue with the pregnancy, knowing their unborn child has life-limiting disabilities that hold a future of pain and grief. Women in those circumstances are vulnerable, suffering and need compassion, not judgement. For women in other circumstances, having the choices currently enshrined in our law empowers them to make deeply personal decisions. Termination is lawful in New South Wales in all of those circumstances. The law requires a reason for a doctor to undertake a termination, but the law provides a great deal of flexibility and choice about those reasons, and has done so for many years.

Women who have had abortions in New South Wales under the current legal regime are not criminals under New South Wales law. Any stigma that might be perceived is therefore social or cultural and cannot be changed through changing legislation. I therefore turn to the reasons for the bill. As terminations are currently lawful in New South Wales under a permissive legal framework, the consequence of introducing a more permissive legal framework will be to increase access to abortion on demand. Women already can make a number of choices about their reproductive rights under existing laws, which is completely appropriate in my view. Pregnancy and motherhood have unalterable consequences for a woman's life and a woman should have access to support and information to guide her choice about her body and her future. The difficulty is—and always has been—that potential human beings have rights too and those rights need to be recognised and balanced.

Part of our job as legislators is to make provision for the rights and interests of both current and future generations. While debates on abortion are often characterised as moral and ethical, it is true that any debate about the interests of future generations also has moral and ethical dimensions. For example, the whole notion of sustainability is predicated on the idea that in meeting the needs of existing people we also need to recognise the rights of future people and to meet their needs as well. The rights of children are recognised in the preamble of the United Nations Convention on the Rights of the Child and highlights this tension between offering legal protections for children before and after birth, which is inherent in this challenge.

While the rights of a pregnant woman are paramount, we need to recognise that the rights of a fetus gradually increase as it develops. This gives rise to an incremental balancing of rights between the pregnant woman and the fetus from conception until birth so that after birth a new baby shares the same rights as its mother.

That is why many people are more comfortable with the concept of abortion earlier in a pregnancy and are progressively less comfortable with the concept of terminating a pregnancy at a later stage because all the physical attributes of a potential human being have developed. This is why so many in society struggle with the concept of facilitating improved access to late-term abortions.

Our law asserts that a baby is stillborn if it is delivered at 20 weeks gestation or more and displays no signs of life, or if the gestation period cannot be established and the birth weight is at least 400 grams. The law requires the stillbirth to be registered as a birth, reflecting the emerging personhood of a baby at that stage in their development. Many in our community think it is too late to allow an on-demand abortion at 21 weeks and to not have ethical oversight of this decision in light of the interests of a well-developed potential human being. In the context of abortion, I am satisfied that the rights of future people or potential people are addressed by the need expressed in the existing legal regime to consider that a termination is necessary for the medical, economic, social, physical or mental wellbeing of the pregnant woman.

However, to extend abortion on demand for any or no reason fails to take account of the interests or rights of the potential human being involved. I am not saying that a woman takes a decision to terminate lightly. That is why the very general obligation to have a reason for a termination would already include any woman who wants to exercise that choice. Removing any requirement for a woman or her doctor to consider the reason to terminate will create an even more laissez-faire system, which fails to meet our obligation to consider the rights of both existing and future generations. If we were simply codifying the current legal position and existing practice and modernising legislation to describe what currently happens, we would be considering a different bill.

Yet what is proposed is an approach that privatises moral and ethical decisions about the impacts of a termination on a potential human being, taking the view that this is a moral and ethical matter for the pregnant woman to consider alone, or with the counsellors of her choice and that the community at large has no role in considering the rights of the unborn. I am uncomfortable with that because society does have a concern for future generations. Indeed, a concern for the interest of future generations is one of the foundational principles of this Parliament.

With my colleague and friend the Attorney General, I foreshadow moving a series of amendments in an attempt to bring what we believe is a better balance to ensure that informed choice is provided to every woman considering a termination; to respect the rights of medical practitioners to a reasonable choice about whether to conduct, or otherwise facilitate, a termination in circumstances where they have a strong moral or ethical objection; and to ensure that late-term abortions are only conducted by highly qualified specialists with appropriate peer review. The amendments are designed to provide legislative expression to the circumstances that have been explained to us by senior clinicians as best practice. [*Extension of time*]

In conclusion, I thank the obstetricians and other medical specialists with whom I consulted in considering this legislation. It is worth noting that, while some supported the bill, all but one encouraged me to consider amendments on the basis that none of them—those senior clinicians—felt that the existing bill was perfect. I learnt a great deal from speaking with them and gained a greater appreciation of their medical skill, their compassion and the difficult area in which they practise. We as a society owe our obstetricians and general practitioners a great deal. I end on a note of love. Law is an unavoidably clunky mechanism for regulating human society and relationships; legislation leaves little room for nuance. That is why the existing law is suitably broad and flexible.

But like all law, it involves making judgement. Both opponents and proponents of the bill are unavoidably making judgements about how our society should be organised, and about relative rights and obligations. Setting all this aside, however, we all must recognise—I think we all do—the wonderful and often vulnerable people who are at the heart of this debate: women who in many instances are facing awful choices, life-altering choices, choices that I am certainly not in any position to judge, but women who need the support and compassion of every one of us.

Mr JAMIE PARKER (Balmain) (21:31): I contribute to debate on the Reproductive Health Care Reform Bill 2019 and thank all members who have spoken on it. The fact remains that today abortion is still a crime in New South Wales. Abortion offences are still contained in sections 82 to 84 of the Crimes Act 1900, which means that in New South Wales women and their doctors can still be prosecuted for accessing and providing abortions. The laws have not changed in over 119 years and we are lagging behind other jurisdictions. This criminalisation matters; it is important and it is significant. Accessing abortion in New South Wales can be expensive, time consuming, stressful and, in some cases as we have heard from members of Parliament, almost impossible—especially in rural and regional settings.

The current laws contribute to problems with access—generating stigma, confusion and a fear of prosecution that can discourage doctors and facilities from providing the full range of reproductive health

services—and make it difficult for women to access the help they need. Before I talk about the details of the bill, I will address a few parenthetical issues. Some members have said the bill is rushed and that it offends their sensibilities because of the speed with which it has been introduced. I note that those very members have stood on the other side of the House and moved motions to gag me from speaking in debates. Those members have moved that bills not rest on the table for five days and have introduced bills to be voted on and moved through the House on the same day. This feigned opposition—this hypocrisy—must be pointed out. Of course it is important that we spend time to address those matters, but just because it is important for those members does not mean that issues that are important to me and my party should be rammed through the Parliament, which has happened on many occasions in the eight years that I have been in this place.

For me, a conscience vote has dubious merit. I am here to represent a political party and, most importantly, to represent my community. We know that when it comes to this issue members of the public in the gallery and community members expect their MPs to reflect their community, the people who elected them and often the people who did not elect them. If that were the test—which is the most common test—my community overwhelmingly supports this bill, and that is the view not only of those who have chosen to send me letters but also the result of very well-known opinion polling. We know that in 2016 the Australian Election Study undertaken by the Australian National University found that almost 70 per cent of Australians agree that women should be able to obtain abortions readily. As we heard in the House earlier, in 2018 a study published by the *Australian and New Zealand Journal of Public Health* found that 73 per cent of New South Wales residents agree with decriminalisation and believe abortion should be regulated as a healthcare service.

I thank all those who have worked on the bill, including the mover of the bill, and all those who have raised, debated and discussed this bill for many years. In particular, I acknowledge Dr Mehreen Faruqi, a Senator representing New South Wales, who was the first MP to seek to break the silence on this matter in the New South Wales Parliament. For decades there have been attacks on successes that feminism has achieved in this nation. In my view it was a strong position taken by Mehreen, her supporters and those in our community who backed the bill to say that the demoralisation of the campaign that has been imposed upon women for many decades must end. Women and their supporters, including me, must recognise that there is support in our community for decriminalising abortion.

It is important to remember also that the bill is supported by a wide range of organisations, as we have heard—the Law Society of New South Wales, the New South Wales Bar Association, the Royal Australian and New Zealand College of Obstetricians and Gynaecologists, the Australian Medical Association and Family Planning NSW, and I think it is fair to say that this Parliament broadly supports decriminalisation. There is also the question of abortion at different stages of pregnancy. I have listened to the debate and examined the evidence, and it is clear that most abortions take place during the first trimester. Between 91 per cent and 95 per cent occur before 14 weeks. Abortions after 22 weeks are very rare—the evidence suggests it is somewhere between 0.7 per cent and 2.8 per cent, and usually for very complex medical or psychosocial reasons. These abortions take place in a hospital context with a multidisciplinary team.

It is important to recognise and address the 22 weeks. A woman may seek an abortion at that stage for a range of complex reasons, including continuing the pregnancy would put her life at risk, fetal abnormality discovered during an ultrasound at 18 or 20 weeks gestation, or she is in an abusive relationship and her partner has prevented her from accessing an abortion earlier. Some fetal abnormalities cannot be diagnosed until between 18 and 20 weeks gestation and results can take weeks to process. There may also be uncertainty around diagnosis that require additional weeks of fetal development for certainty. Legislating for a 22-week gestational limit allows for the diagnosis of fetal abnormalities, providing pregnant women and practitioners with the opportunity to make informed decisions. It also reflects existing decriminalisation amendments in Victoria and Queensland that allow for gestation limits of 24 weeks and 22 weeks respectively, as recommended by peak medical bodies.

I turn now to barriers to access. Apart from those who take the position that there should be no abortion on any terms, the majority of people in this Parliament who think abortion should be decriminalised have addressed barriers to access. We know from evidence that barriers to access increase rather than decrease the incidence of termination because the terminations are forced underground. The supporters of the safeguards—they are in fact barriers—go against their stated position because we know that the outcome of these barriers that masquerade as safeguards have no impact on the incidence of terminations. I draw to the attention of members the NSW Pro-Choice Alliance document that refers to mandatory counselling. The Victorian and Queensland law reform commissions both concluded that neither counselling nor referral to counselling should be mandated.

I also draw members' attention to a very important speech that was given by Reverend Dr Margaret Mayman from Pitt Street Uniting Church, in which she addressed this issue head-on. She saw what is really at the heart of the argument for so-called safeguards or barriers—the rhetoric suggesting that women make the decision to have an abortion, especially a late-term abortion, without due care and consideration. She said that recognising

the moral agency of women and the capacity of women to make good decisions about whether to continue with a pregnancy is crucial for human flourishing, which should be the goal of religion.

The Reverend highlighted that denying women the ability to take control of their fertility and make decisions to determine their future is a punitive strategy that simply punishes women. It is not a trivial decision. It is a decision that women should be able to make free of any fear that they will be criminalised or prosecuted. That is also at the heart of the view that I hold, which is that women are best placed to make that decision. They make it carefully and with very significant thought. A press release dated 30 July 2019 from the Royal Australian and New Zealand College of Obstetricians and Gynaecologists stated:

RANZCOG respects the personal position of all of our members, and recognises the right to conscientious objection in relation to abortion. However, the College emphasises that health practitioners owe a duty of care and must refer the patient to other health practitioners or health services where a woman is able to receive the health care she needs.

To me, that clearly highlights that this issue has been considered and that the solutions are before us. It is remarkable that many of those people who seek to oppose these reforms would be the last to argue to increase support for parenting. Australia has some of the worst maternity leave provisions in the OECD. Where is the rally outside Parliament House to increase maternity and paternity leave provisions? Where is the rally outside Parliament House to better pay those workers who are amongst the lowest paid in our nation—those who choose child care as a profession?

I find that contradiction rather troubling; it simply feeds the argument that this debate is more about controlling women than it is about children. This law is a throwback to a time when women could not even vote. It was the height of paternalistic and patronising lawmaking by men who sought to control women. I want to send a message to all men here today that we must stop trying to impose our views on women. It is their choice, not ours. I support this bill. It is important not only to act today but also to continue efforts to highlight the need for reform in this area.

Ms JENNY AITCHISON (Maitland) (21:42): In February 2007 I was sexually assaulted on a work trip to Africa. I was unable to access any medical assistance until I returned to Australia as I had flights booked. I was in shock, in trauma, alone and unable to change my itinerary. I did the calculations as I sat on planes and waited in airport terminals. I knew that it would be too late for me to get the morning after pill within the required time frame before I could get back to Australia. I also lived in a regional area so the wait for a doctor or for access to a specialist reproductive clinic meant that I would have no chance of getting that pill within the required time. I would just have to hope that I had not been impregnated.

I was told in my earlier years that conception would be difficult for me and despite my heartfelt desire to have children, and the love I have for my two children, I still do not know what I would have done if I had become pregnant in that circumstance. However, I do know that abortions should be safe, legal and rare. Many brave women have shared their stories—in this place and in other public spaces, particularly over the past few weeks—of making the choice to have an abortion. I pay my deepest respects to them all. I remember, too, and pay my respects to those whom we have lost because our draconian laws placed the beliefs of others above their health. I have always supported a woman's right to choose whether she has a child. I also supported the former Chief Minister and health Minister of the Australian Capital Territory, the Hon. Wayne Berry, as he worked to decriminalise abortion in the Australian Capital Territory. In the early 1990s in Canberra I stood at polling booths to support decriminalisation. I have been a long-time member of EMILY's List. At the recent State and Federal elections at polling booths and elsewhere I have been questioned on my views—sometimes quite aggressively—and I have always been clear.

As a teenager, I supported my friend who found herself pregnant and, not being allowed by her parents even to have a boyfriend, had to make the trip to Sydney to have an illegal abortion in secret before returning to work in Canberra that night. I will never forget her pale face, her fear and her distress. Recently I spoke to a close friend who was devastated to find that the abortion she had some years ago was illegal. She had never contemplated that aspect before. She made the right decision for her based on the welfare of the three children she already had and the fact that she was suddenly single and needed to provide for them. The terrible part about this debate is that it made her again question her decision, stigmatising her actions and shaming her. It is truly heartbreaking to observe this. My heart goes out to her and to all the other women who have made this choice and who have had to go through this traumatic triggering again.

Last week I listened to Jessica, a young paramedic, say she no longer wants to go into women's bathrooms and have to spend the first few vital minutes, as women lie bleeding on the floor, trying to reassure them that they are not going to be in trouble before she can help save their lives. In my former roles as the shadow Minister for the Prevention of Domestic Violence and Sexual Assault and acting shadow Minister for Women, I heard countless stories of how the fact that abortion is still a crime in this State has hampered women's attempts to escape domestic, family or sexual violence. This shame, this stigma, this fear of the law must stop. I was honoured

to lead for the Opposition in this place on the Hon. Penny Sharpe's safe access zone bill, which was co-sponsored by the Hon. Trevor Khan. I stayed in the Chamber throughout that debate. I listened to the speeches of all members in this place. Last night I re-read them, as I have read every email and letter that has been sent to me on this topic.

I thank everyone from across Australia who has sent me representations in a respectful manner. I particularly thank Reverend Simon Hansford, and Reverend Margaret Mayman for her wise words at the rally this morning. I thank Bishop Peter Stuart, the Anglican Bishop of Newcastle, for his letter supporting this bill. Their support has been very much appreciated. Regardless of all the views expressed, I wish that all the correspondence I have received in the past few weeks had been so respectful. I thank my staff who have had to read emails or take phone calls that have been graphic, abusive and distressing at times. I apologise that they have had to deal with that. I am a co-sponsor for this historic bill. I thank the working group for the honour and privilege of being one of the co-sponsors. This is an important debate and I am glad we are finally having it.

A lot has been said in the public debate about conscience and religious freedom. Although I stand by every single word I said in the debate on the safe access zones bill, today I want to address conscience and religious freedom. I was brought up as a Catholic and my beliefs on social justice have always felt consistent with the teachings of the Catholic Church, except in relation to abortion. I knew at close range the difficulties and lifelong consequences of unplanned pregnancies—friends who themselves were adopted, friends who adopted out children and then grieved for them for years knowing those children were having lives that they could never see, friends who had abortions under often horrendous circumstances or who had abortions and then had difficulties conceiving later and blame themselves, and those who faced medical issues or even death if they persisted with their pregnancies.

As I said last year, life is complex, messy and unique. None of us knows what is ahead of us or how we will face it. It just did not make sense to me—and it still does not make sense to me—that the compassionate and caring God I know would judge these girls and these women for the choices they made in circumstances where they were disempowered, financially insecure, mortally ill, emotionally unprepared—or whatever else it was that led to them that most difficult decision. Many years ago, in the *Catechism of the Catholic Church* from Vatican II, I found my answer. *Gaudium et Spes (Hope and Joy)* states:

Deep within his conscience man discovers a law which he has not laid upon himself but which he must obey ... For man has in his heart a law inscribed by God ... His conscience is man's most secret core and his sanctuary...

Article 6 of *Dignitatis humanae*—or *Of the Dignity of The Human Person*—states on moral conscience:

Man has the right to act in conscience and in freedom so as personally to make moral decisions.

The question of conscience on this issue has vexed many people of faith. I thank Patsy McGarry for his comments in *The Irish Times* during the Irish referendum on abortion when he said:

Before then, no homicide was involved if abortion took place before the foetus was infused with a soul and became a human being. "Ensloulment" was the word used to describe this. That, it said, took place at "quickening", when there is the first movement in the womb.

In 1591 Pope Gregory XIV set "ensoulment" at 166 days of pregnancy, almost 24 weeks. In 1869, Pope Pius IX moved the clock to the moment of conception under penalty of excommunication.

Mr McGarry went on to say:

Nevertheless, the matter is still subject to debate in the Catholic Church. Even as recently as 1974 the Vatican's Congregation for the Doctrine of the Faith acknowledged that the issue of ensoulment was still an open question ...

In summary, it is possible for a good Catholic in good faith to act contrary to the teachings of the church.

I do not presume to call myself a good Catholic, but I am a person of deep faith in a compassionate God. I have been gravely offended by those who have assumed that I am not. I ask members opposite who oppose the bill on the basis of their conscience and on the basis of their faith to let women in this State make their own decisions based on their consciences and their faiths. I will not be one to judge others. As Matthew 7:1-2 says:

Judge not, that ye be not judged. For with what judgment ye judge, ye shall be judged: and with what measure ye mete, it shall be measured to you again.

Most importantly, we must remember that by respecting the beliefs and privacy of others we do not diminish our own faith; in fact, we strengthen it. I feel that has been lost in this debate. I speak today not to defend my own vote in favour of the bill, but to reach out to other members who may feel conflicted by their faith. I do not wear my faith on my sleeve and many members may be surprised to hear me talk about it, but I think we need to talk about it because I know some members are struggling with it. There is a place for people of faith to ensure that women are able to access safe and legal abortion in New South Wales through decriminalisation. Women who are poor, in regional, rural and remote areas or are disempowered by those around them should be free to make a

choice about what happens to their own bodies. In our hearts, members know that this will reduce late-term abortions. [*Extension of time*]

For those who argue it has been legal to have an abortion in New South Wales since 1971 when Judge Levine delivered his decision in *R v Wald*, consider that just two years ago a woman was prosecuted for self-inducing an abortion. I understand that this case has since been used to deny women access to abortions. If members read that case—and I urge them to do so—they will see that there were a lot of other issues going on and she was the last person who should have been prosecuted. Women from my electorate have told terrible stories of being unable to access medical abortions, causing more trauma, more expense and more delays. I agree with the Leader of the Opposition when she said that we must ensure that women from regional, rural and remote electorates are able to access safe and legal abortions.

We can no longer be hypocrites in this place. We cannot put the rights of potential future, emerging or imagined children above the women who stand in front of us. We either support women who seek abortion, and treat them with compassion and love, or we treat them as criminals. That, at its heart, is the simple question we must ask ourselves. We are in this place to make laws that reflect the will of the people in our community, not to make moral judgements on them. More than 73 per cent of people support safe and legal access to abortion for women. Many people in New South Wales do not even know it is a crime. After 119 years it is past time for the New South Wales Parliament to reflect the support that exists for women in our community.

The law was made nearly 20 years before women were allowed to be elected to this place, and it was not even debated in this Parliament until two years ago. Some members have argued the technical aspects of the bill—I leave that to them. After 119 years, I say enough. As a previous speaker said, we should not let perfection stand in the way of good. In fact, many of the amendments go against the very aims of the bill. I wish a woman's voice had been enough to start the conversation in this place. Sadly, one woman's voice is still not enough. I thank all those people who have raised their voices to bring us to this point. I hope our voices will be heard at last. I thank each and every member of the 90 organisations that form the NSW Pro-Choice Alliance. I do not have time to go through them individually, but I thank them so much.

I think back to 2007 and those agonising moments that stretched into hours, then days and weeks while I waited to find out if the violence that had been perpetrated against me would leave me with a pregnancy and perhaps a child, as well as the lifelong trauma, pain and suffering of my rape. It was just too much. That will never leave me. As a victim and a survivor, I say to everyone in this place it is wrong that if I had been impregnated I would have been subject to the same Act as my perpetrator, the Crimes Act 1900. Abortion simply does not belong in the Crimes Act. I commend the bill to the House.

Ms GABRIELLE UPTON (Vaucluse) (21:56:4): I speak in debate on the Reproductive Health Care Reform Bill 2019 as a mother, a Catholic, a lawyer and a person who tries to be compassionate and not judge others. I am not a doctor or an expert in reproductive health. Members have travelled different paths in life to get here, but in this House each of our views is equal, and that is a strength. I thank the Premier for giving us a conscience vote on the bill. It raises complex ethical, moral, health and legal issues. A conscience vote recognises the sensitive and personal nature of the issues that are coming before the Parliament. It allows us the rare opportunity to base our vote on our conscience; we are not bound, as we usually are, by the views of our party or our electorate.

My conscience is the thing that I must listen to, wrestle with and, ultimately, account for so that I can sleep easy at night. People watching Parliament will characterise each of our positions in black-and-white terms. Ultimately, we will either vote yes or no on the bill, so that is fair enough. But I encourage close observers of this debate to look beyond that. Some of us have agonised over our vote and have had to reconcile competing claims and pressures to vote what seems like a simple yes or no. It has been anything but simple. I have read all of the texts, emails and correspondence on the bill that have been sent to my electorate office. There are strong views, and people have entrusted me with deeply personal stories. Some have urged outright rejection, some have raised amendments and others fully support the bill. I am sure it was just as deeply emotional an experience for them writing to me as it was for me reading what they wrote. I thank them genuinely, one and all.

As I have said in this House before, I do not personally support abortion. Yet I have never been put in a situation where I have had to make a choice about whether to continue a pregnancy. I do not judge women who choose to terminate their pregnancy. I cannot imagine their agonising dilemma. Do we need to do more to provide women faced with that agonising dilemma with alternatives, with more practical support, with more help? I am left thinking that we do, particularly given what I have learnt and heard leading up to this debate in this House. However, my fundamental concern with this bill is that it codifies late-term abortion. The question that I have truly wrestled with is: When is an unborn fetus human? At 22 weeks and beyond I believe it is a human—it is a baby. I call on my own experience as a mother, twice. I remember the kicking, the hiccups, the movement of the babies during my pregnancies, before and beyond that time. They were signs of life that I cannot ignore.

I was very concerned about the welfare of my babies when that movement disappeared for any period of time and totally elated when I found out all was well. My pregnancies, like others, were delicate. They were anxious at times but a joyful and forever life-changing experience overall. I now have two wonderful young adult children. My babies had loving homes awaiting them. I know that not every pregnancy is like that, I know that I was fortunate. So a bill that raises complex ethical, moral, health and legal issues requires a yes-or-no vote from each of us. I will vote no. I will not support the bill. In closing, I thank all my colleagues for their respectful, stoic and strong advocacy in this House, whatever views they hold. We are at our best in this place when we do that and I believe we genuinely serve the New South Wales community well. I thank the House.

[Interruption from gallery]

TEMPORARY SPEAKER (Mr Greg Piper): Order! I call visitors in the public gallery to order. I call to order whoever was whistling. That is completely out of order in this Chamber. I thank visitors for their otherwise respectful attention to the debate.

Ms JULIA FINN (Granville) (21:57): I make a contribution to debate on the Reproductive Health Care Reform Bill 2019. At the outset, I make clear that I do not think medical termination should be treated as a crime. It should not be within the Crimes Act. No woman who has a termination and no medical professional who provides those services should be treated as a criminal. For decades in New South Wales that has been the case. Each year tens of thousands of medical abortions are performed without anyone being prosecuted. I do not believe there is any great urgency to deal with this matter and I am very concerned that a wide range of views has not been formally canvassed on this issue. Consideration of this most contentious bill has been woeful and undemocratic. Last week there was an appalling attempt from within the Government to ram this bill through as fast as possible and to intentionally ignore the opinions of people who do not agree with it.

Prior to the last election Labor committed to referring this issue to the Law Reform Commission. I believe that is an entirely appropriate and sensible approach. This is one of the only examples of where case law and interpretation have overtaken legislation without review in this place for decades. There are many who believe on the basis of that case law interpretation that abortion is legal in New South Wales. We are basing this bill on recent reforms in Victoria and Queensland. Reform in those States followed lengthy community consultation, which was often difficult and unpleasant—I acknowledge that. But consultation is warranted on this bill. By basing our reforms on those States without consulting our own community on this most sensitive topic, we are valuing the opinions of Victorians and Queenslanders over the opinions of the communities we represent.

Whilst I support the main intent of the bill to remove abortion from the Crimes Act, I believe it is flawed and requires significant amendment. I hope that, despite the ridiculous time frame within which this has been presented, we can give clarity to current practice in New South Wales where medical terminations are carried out in the first 20 weeks of pregnancy without prosecution, and later in grave medical circumstances. I hope that we do not pass a law that allows late-term abortions in excessively broad circumstances nor self-administered abortions in any circumstances at any stage of pregnancy. I hope we do not pass a law that will see doctors penalised for not referring a patient who is seeking an abortion. I hope that if this bill passes there will also be a concurrent and conscious effort to make it much easier to raise a child on your own, to make it easier for low-income families to raise a child, to end the scourge of violence against women and to achieve equal pay for women. Addressing these practical daily issues will mean fewer women who have an unplanned pregnancy will feel the need to terminate the pregnancy. But all of those important changes are beyond the scope of the bill before us.

This is one of the most contentious issues. People on both sides express very strong opinions, and many people in the middle prefer not to discuss it at all. It is a debate about whether we are considering one life or two and the point at which it becomes about two lives. It should be a wider debate. I consider myself pro-choice. However, I was raised Catholic and attend mass regularly. I have many close friends and know many people whose opinions I respect and regularly canvass who consider themselves pro-life and abhor abortion. They are not anti-women or crazy religious zealots. I do not know anyone who thinks women should be sent to jail for having an abortion, but they are deeply troubled by being seen to sanction abortion, especially without addressing many of the issues that make women feel they need an abortion. They just think women should not have abortions except in the most grave circumstances.

This is a very difficult issue that should be subject to a wider debate. It is one thing to know that there is a wide range of views on this issue expressed over decades; it is another to formally canvass them in a consultation process for the legislation before us. We should give all members of the community an opportunity to put their views forward to be heard. It is one thing to be able to express a view about abortion; it is another to be able to consider the detailed provisions of legislation related to it. It is not okay to sideline or ignore the opinions of people who disagree with you in a democracy. As legislators, we have an obligation to listen and to find common ground where possible, even on this most divisive issue.

I have spent the past 10 days contacting people from my community and their religious leaders about this bill out of respect, despite considering myself pro-choice. These are people who have always given me their time and who have invited me to share in their most significant events. Since this has come to light hundreds upon hundred of people have contacted me, with 95 per cent opposed to the bill. It is not right and it is not fair to sneak this legislation through when those people are not looking to avoid confrontation. Like many people in the community, I do not find this a comfortable topic. I do not have children and have never been pregnant, despite having wanted to have children for many years. I do not want to judge other women, especially those who are faced with an incredibly difficult decision—one I have never faced and one that no woman wants to face.

I believe that decision is between them and God. And whilst I do not want to pass judgement, I am not at all comfortable with abortions for gender selection, nor with women being coerced or offered inducements to have abortions. I am glad that that is rare. Despite this, I cannot deny that whenever told of a friend or relative who is choosing to continue an unplanned pregnancy—despite it appearing to be very challenging due to their age or the resources available to them—I am filled with joy and optimism that they have made the right decision. It is one thing to disagree with the statutory application of laws that reflect the traditional teachings of the church that have been part of your life since childhood, but it is far more difficult to vote against them as a legislator. We are here to make laws for everyone in New South Wales, regardless of faith.

When I was very young, I could not imagine a situation where I would ever consider having an abortion. Then some of my friends had abortions and I did not consider them criminals. I thought they had very good reasons which were not for me to judge. More significantly and more horrendously, when I was 20 I was raped. This is something I do not like talking about but I think it is an important perspective to hear in this debate as most people, even those who are pro-life, do not think a woman who has been raped should be forced to continue the pregnancy. After I was raped, I lived in fear for a few weeks of being pregnant. Thankfully, I was not.

Unlike most women who are raped, I went to the police a few days later and also had a traumatic medical examination. The police did not question the man who raped me for five months, despite me ringing them regularly. It went to trial three years later. He was acquitted. Despite this, I was awarded victims compensation as it was found that on the balance of probabilities the rape had occurred. Throughout this period and for a time after I suffered from post-traumatic stress disorder [PTSD]. I did not even know what PTSD was when I was diagnosed. From time to time, I still find this very upsetting. In the eyes of those who think an abortion can only be justified if the woman is raped, at what point, if ever, did I satisfy that requirement? A child would have been born long before the committal hearing. Is citing the reason enough without a police complaint? I believe judging a woman's reasons for seeking abortion is deeply problematic in the early stages of pregnancy. The reasons for an abortion are between the woman and God.

I am proud to represent an electorate of great diversity—ethical, cultural and religious. This bill is an issue of great concern to many in my community. We are told that, as legislators, we should not bring our personal moral judgments into this debate. Our role is to make laws and see them enforced. In that context, having severe penalties for abortion in the Crimes Act that are not enforced seems problematic. I acknowledge that. But I also acknowledge that in the community that I represent my constituents include thousands of people from countries where legislation is enacted through a moral lens and often that legislation is not enforced. From that perspective, the current way abortions are treated in New South Wales, without penalties, despite being in the Crimes Act, does not seem particularly problematic.

During the last election campaign I was subjected to an unrelenting attack on this issue. There was an effort to portray me as an aggressively secular, atheist, social progressive, totally out of step and antithetical to the community I represent. Most specifically, I was targeted on abortion. I was called a child murderer at pre-poll and accused of supporting full-term abortions. I was stopped in the street, at railway stations and in Merrylands RSL and asked—often but not always—aggressively about the issue. A direct mail was sent out by my opponents to Maronite families in the 2160 postcode area and delivered on the day before the election. It is ironic that the Liberal Party would do that and then four months later try to rush legislation through Parliament to legalise abortion and potentially allow late-term abortions if self-administered or medically under certain circumstances.

I am still not quite sure what a full-term abortion means. However, I do not support terminations being performed after the point at which life could be sustained, unless there is a serious physical or psychological complication. It is rare for a premature baby born prior to 22 weeks to survive. I understand that about 10 per cent of babies born at 22 weeks survive and the youngest to survive was 20 weeks and five days. In New South Wales a fetus that does not survive is considered a stillbirth and not a miscarriage after 20 weeks. [*Extension of time*]

The Australian Medical Association [AMA] supports a 22-week limit. Very few women have abortions after 14 weeks and even fewer after 20 weeks. Of course, that is because at the moment abortions are only available after 20 weeks in grave circumstances. I would prefer to retain the 20-week limit—or even earlier, given that 95 per cent of abortions are carried out prior to 14 weeks. I also have concerns about consideration of future

physical, psychological and social circumstances for approving a late-term abortion—particularly social circumstances, which are so hard to predict. It is too broad. It may reflect the current considerations, but those are carried out under what we are told is an oppressive legal cloud—A cloud that, if lifted, could in practice broaden things considerably. We need to constrain that wording to prevent that from occurring. I believe a woman should have a right to choose. But with that right comes responsibility—in this case, the responsibility to make a decision in a timely manner before the point at which life could be sustained.

Going through this during the election campaign, with the Liberals adding abortion to the mix in the most appalling and callous manner, despite the Premier's pro-choice stance, was horrendous—especially when I was being called a "child murderer". I am sure that many people in my situation would have avoided this incredibly difficult topic at all costs after this. On the contrary, in the last few months I have spent a lot of time reading about the medical and ethical aspects and talking to people in my community about this issue, including some of the people who raised it with me during the election campaign. This can be a respectful debate, but it takes time and listening. The Premier tried to deny the people of New South Wales the opportunity to debate this bill respectfully last week with her mad rush to push it through Parliament as soon as possible.

We have found some common ground and, in spite of the Government's efforts, there is a lot of mutual respect. We have not found an easy solution to this difficult and emotional issue—or a consensus. Some of the pro-life people I have spoken to are far less comfortable about abortion being in the Crimes Act than they were. But all of them are unhappy that this is being debated so quickly and without the involvement of the wider community, especially given that those provisions of the Crimes Act are not enforced and thousands of abortions are performed legally in New South Wales every year. I share their disappointment about this unnecessary haste.

This brings me to the substance of the bill. I have strong reservations about part 3 of the bill relating to self-administration of abortions. It is proposed to remove this from the Crimes Act without replacing it with any penalty or deterrent whatsoever. It is unclear whether the 22-week term limit applies to it, but I imagine it may not. It also conflicts in most cases with it being unlawful for an unqualified person to perform a termination. This is troubling for many reasons. First, at any stage of pregnancy it is dangerous to self-administer an abortion. When medical terminations are available, you would like to imagine that self-administration would never occur. However, unfortunately it does.

Secondly, some women, particularly young women who cannot afford or who cannot access services—and who are too ashamed to tell their parents, families or friends about their situation—often resort to this. The methods used to procure a miscarriage in the early stage of pregnancy are disturbing—from ingesting poisons, inserting coathangers, applying bleach or having someone punch them repeatedly in the stomach to induce a miscarriage. All this could cause lasting damage and is dangerous—not to mention the enduring psychological impacts. While I do not want to consider this a criminal offence, I do not want to condone it either by removing it from the criminal code without any legal deterrent whatsoever. The bill says that backyard abortions are okay if you do it yourself. Yet we are being told time and again that this bill will stop abortions being performed by anyone who is not medically qualified.

This brings me to the more troubling issue of self-administered abortion where the fetus is older than 22 weeks and a termination is not supported by two medical practitioners. This was the situation faced by a young woman in 2015. She lived not far from me, in Toongabbie. She self-administered a poison she had obtained from the internet at 28 weeks gestation. It caused her to go into labour and her child to be born prematurely. She was in an awful situation, with her partner having decided he no longer wanted to be a father. I understand she was turned away by a number of services as she had passed 20 weeks. She was prosecuted for self-administration and for seeking to procure a miscarriage. While she faced a terrible situation, I do not think it justified her decision—not at 28 weeks when a fetus is viable. Some 90 per cent of babies born at 28 weeks survive. Her child was born prematurely because of the poison she swallowed.

I am deeply concerned that decriminalising self-administration without any alternative legal deterrent will create an extremely dangerous loophole, which I cannot support. In addition, the short time frame for consideration of this bill is appalling. I have done my best to consult widely on this issue with people who are vehemently pro-choice and pro-life, as well as those who are far quieter about this issue. I have consulted those who think a woman has the right to choose whether to continue her pregnancy at any point and those who think life begins at conception. I have consulted with those who, like me, think there is a point in a pregnancy when an imminent life or a viable fetus must be considered. As I have already mentioned, I still have not spoken to or heard from anyone who thinks women should go to jail for having an abortion. I thank everyone who has contacted me with concerns about this bill. They deserve to be heard and have their opinions considered.

Mr MARK SPEAKMAN (Cronulla—Attorney General, and Minister for the Prevention of Domestic Violence) (22:19): It is hard to think of a more deeply emotive or divisive public policy issue than abortion. I recognise that the vast majority of contributors to the debate on abortion are sincere and well meaning.

This is equally true of those motivated to protect the lives of unborn children and those motivated by compassion for pregnant women. I have grappled with this debate. I have sought and had the benefit of views from a broad range of groups and individuals while considering what position I will take when the vote comes for this bill. I especially want to thank, first, the incredible women who have dedicated their careers to preventing domestic and family violence and supporting victims, and whose wisdom has guided me in my short time as the Minister for the Prevention of Domestic Violence.

Secondly, I thank the Australian Medical Association, the Royal Australian and New Zealand College of Obstetricians and Gynaecologists, and other doctors and advocates from whom I have gained valuable insight. Thirdly, I thank faith leaders, including my own local minister, and those who have prayed for all MPs as we make our decisions about the bill. Fourthly, I thank the women of the Cronulla electorate whom I have met or spoken with over the past couple of weeks and who have shared their often harrowing personal stories with me; and I thank the hundreds of my Cronulla constituents who have contacted me since the announcement of this bill.

For some, the decision on this bill is clear-cut: pro-choice, yes; pro-life, no. My own view is far more nuanced. I believe that life begins well before birth, that all life is precious and that the number of abortions in New South Wales causes me great sorrow. But a focus on the criminal law will not solve this complex issue. For my own part, I believe life is God given. But my reasoning that follows is the same whether someone is a person of any faith or none. My starting point is that all life is precious, including the lives of unborn children. For that reason abortion is not just another medical procedure. The State—the community—has an interest in protecting those lives as much as it has in protecting children after they are born. But it does not follow that the criminal law is the best way to protect the unborn.

Currently the Crimes Act 1900 provides for three abortion offences. Under section 82 a pregnant woman who unlawfully administers to herself any drugs, or unlawfully uses any instrument or other means with intent to procure her miscarriage is liable to 10 years imprisonment. Under section 83 anyone who unlawfully administers to, or causes to be taken by, any woman any drug or noxious thing, or unlawfully uses any instrument or other means with intent in any such case to procure her miscarriage is liable to imprisonment for 10 years. And under section 84 anyone who supplies or procures any drug or instrument, knowing that it is intended to be unlawfully used with intent to procure the miscarriage of any woman, is liable to five years imprisonment.

These sections are circular. They do not prohibit abortion outright. They prohibit "unlawful" abortion. It is left to the case law to tell us what is an "unlawful" abortion. The case law test appears to be that an abortion is lawful where there is a reasonable belief that abortion is necessary to preserve a woman from serious danger to her life or physical or mental health at any time during or after the pregnancy, taking into account social and economic factors, and that the danger of the operation is not out of proportion to the danger intended to be averted. There have been two known convictions for these offences in the past 20 years.

In 2017 a woman was prosecuted under section 82 for taking an abortion drug while pregnant at 26 weeks gestation. The woman had ordered the drug online at the urging of her partner and after several abortion clinics refused to perform an abortion due to the advanced stage of the pregnancy. The fetus was born alive via caesarean section and survived. She was convicted of the offence of self-administer drug with intent to procure her own miscarriage and sentenced to a three-year good behaviour bond. In 2006 then practising Dr Suman Sood was convicted of two offences: one count of unlawfully administering a drug to a patient at 23 weeks gestation with intent to procure miscarriage and one count of unlawfully causing a patient to take a drug with intent to procure miscarriage. Those offences were pursued after a jury had acquitted him of manslaughter. The court sentenced him to a two-year good behaviour bond. All this suggests that already in New South Wales abortion is widely available; the rare prosecutions have only been for late-term abortions.

The evidence indicates that the existing common law or criminal law in this State does not prevent abortions. I have spoken widely to a number of constituents and doctors and no-one has ever been able to point me to an example of an abortion that has been avoided because of our criminal law. It does not appear to have stopped one abortion. In 2007 a study undertaken by the World Health Organization in Geneva and the Guttmacher Institute in New York took a snapshot of abortion rates around the globe. It collated national data from countries where abortion was legal and compared them with estimated abortion rates in countries where abortion is outlawed, with those data based on hospital admission numbers, interviews with family planning experts and surveys of women. The conclusion was that abortion rates are similar in countries where abortion is outlawed and those where it is legal. The director of the research project told *The New York Times*:

What we see is that the law does not influence a woman's decision to have an abortion. If there's an unplanned pregnancy, it does not matter if the law is restrictive or liberal.

The study also found a clear correlation between more accessible contraception and lower rates of abortion. Western Europe, for example, where abortion is legal, had the lowest recorded rate of abortion of 12 abortions

per 1,000 women. The current criminal law does not appear to have stopped abortions. We can also look to the health departments in South Australia and Western Australia. In those States the rate of terminations dropped: in South Australia, from 16.7 to 13.5 for every 1,000 women between 2003 and 2015; and in Western Australia, from 18.6 to 16.4 per 1,000 women between 2003 and 2012. Correlation does not equate to causation, but the take-outs are that abortion is already widely available in New South Wales and that the criminal law has not stopped its practice and probably makes no difference to abortion rates.

I recognise that women do not make the decision to have an abortion lightly. Every abortion is traumatic. But the statistic that perhaps one in four pregnancies in New South Wales is terminated by an abortion sadly suggests that our society as a whole fails to give adequate weight to the lives of unborn children or to adequately support, with compassion, women or their families to care for children. Ultimately, those high rates of abortion are best reduced through cultural change, education and improved support for families—not the criminal law. As a general proposition, criminalisation only serves to stigmatise and demonise women and delay abortions that would occur anyway. Would I like to see far fewer abortions? Absolutely. Do I want to see women thrown into jail for having abortions? Absolutely not.

Where does this leave us? There remains a role for regulation, albeit a restricted one. First, even if we do not want to see women in prison, even if we do not want to stigmatise women, having some safeguards in the law has a role in contributing to and shaping our attitudes to respecting the interests of unborn children—especially those late in pregnancy. Secondly, it is appropriate to have modest safeguards to ensure completely informed decisions and appropriate levels of care, recognising the gravity of the consequences of choices involved. Thirdly, there is room in the law to recognise deeply held views and respect freedom of conscience.

All of these are valid considerations. It is a valid consideration that we are talking about the lives of unborn children. It is a valid consideration that women do not make these choices lightly and that the criminal law does not stop abortions. It is a valid consideration that without shaming women, stigmatising women or throwing women into jail, there is a role for a modest statement in the law to shape society's attitudes to respect the rights of unborn children and to respect those interests. All those considerations, of course, pull in opposite directions, and it is a question of whether the bill gets the balance right in considering the competing considerations. *[Extension of time]*

Although I broadly support dealing with abortion other than through the criminal law, I am unsure whether in good conscience I can support the bill without amendment. With my colleague the member for Pittwater, I will later move amendments to the bill that maintain choice but also put in place some modest safeguards to address community concerns about its current drafting. I am troubled by the lack of reference in the bill to the informed consent of the patient. I am troubled by the open-endedness, at least on the face of the bill, for late-term abortions—whatever might be current medical practice. While there is majority support for the general notion of abortion not being dealt with by the criminal law, I sense that there is great community unease with late-term abortions.

While patient health can justify requiring referrals by those practitioners with conscientious objections to performing abortions, I am troubled by the overreach of the bill in this respect. With my colleague the member for Pittwater, I will move amendments to the bill to address those concerns—and I note that other amendments have also been proposed. Once I see the final form of the bill, taking into account the considerations identified pulling in different directions, I will then decide how I vote.

Ms PRUE CAR (Londonderry) (22:31): It is very late in the day and I think almost every member of this place will contribute to debate on the Reproductive Health Care Reform Bill 2019—a complex and emotional piece of legislation—so I will keep my comments brief. Much has been said recently about the bill, but more importantly much has been said over the years about the need for this reform in New South Wales. We have heard the views of many experts in the fields of law and health care. I am an expert in neither of those fields—medical or legal—but I come to the debate in this place with a few characteristics. I am a woman and I am a mother—a single mother at that. I am a policymaker and I am a Catholic from western Sydney. Being all those things, I am very proud to support the bill because, in my mind, it is long overdue.

Like many members before me, I start by thanking the unprecedented number of co-sponsors of this legislation. The sponsors come from across the aisle, as Americans say. They are people who struggle to get along at the best of times but have come together on something that is quite simple. There have been attempts to say the bill is about things that it is not; it is actually very simple—and I will get to my views about its simplicity later in my contribution. More important than acknowledging my colleagues is acknowledging my community. While this legislation is a matter of conscience, like my colleagues I never lose sight of the fact that we are here to represent the communities who have elected us. It is a great privilege and a responsibility to represent those communities, and I thank the many people from across the spectrum of my community who have contacted me about this issue. I note that community members representing both sides of this argument have contacted me.

I can say, quite sincerely, that I make this contribution with an enormous amount of respect for the divergent opinions that have come to me. I have read every single one of them. Like most members of Parliament, my office has been inundated with correspondence from people with views across the spectrum. In particular, I thank the women who have come forward to me. Women have made representations to many members of the Parliament and, as a female member of Parliament, I have had my fair share of stories from very brave women. I say to them, "I have heard you." Also, to the many people in my community who have asked me not to support this legislation I thank them for voicing their opinions on this issue. I believe in being very forthright and honest with the community that has sent me here. Therefore, I tell the members of that community that I cannot agree with them on this issue. I have made that clear from the get-go in local media and in communications with my electorate. I believe in being up-front about the way I think on issues.

This is clearly a matter of conscience and my conscience is speaking very loudly to me. My conscience screams to me to support this legislation. My conscience tells me that this is an outdated law and that abortions are lawful and should be removed from the Criminal Code. That is what this bill does. This bill is not about making women have abortions. This bill is not about forcing medical practitioners to agree to let women have abortions. There are protections for medical practitioners in this bill, as we have heard time and time again. My conscience tells me that the harrowing, difficult decision that a woman may make about her pregnancy is a health issue.

A lot of people have said that this decision is between a woman and God, if she is a woman of faith. But I believe this decision is between a woman and her doctor. It is a matter of health care. The fact that a decision to have an abortion in this State can make a woman a criminal who could be locked up in jail is utterly ridiculous. My conscience tells me that women should be able to access terminations in New South Wales with dignity and without the risk of becoming criminals. I cannot escape the fact that women should be able to exercise independence and choice about their own bodies. They should not live with the fear of being arrested because they want to exercise that choice about their own bodies.

No matter how the baby got there, women are faced with horrible situations every day. We have all heard horrible stories of women enduring domestic violence and of women who are raped but every day women who are not in a financial, mental or physical position to have a baby fall pregnant. If those women consult a doctor they should be able to lawfully have an abortion in this State. I think that the majority of the population of this State would agree with me that a woman who does so should not be deemed a criminal. Unlike many of the women who have been brave enough to speak to me and to other members, I have not been in a position where I had to make a decision about abortion. I could never understand what it would be like to be in that position. But I have been into a clinic that performs abortions with someone whom I love very much. After seeing some of the situations of the women there it has been extremely upsetting to hear arguments that a woman could take this decision lightly. It is beyond comprehension that anyone could make such an assertion if they had been inside such a clinic.

I also, probably controversially, want to address the misunderstanding that large swathes of the population in western Sydney are somehow homogenously against this reform. That is not my experience. I have been raised in those communities and it is where I am raising a child, a little man. I want him to grow up in a world where women can have choice over their own bodies with dignity. My son attends a religious school with many kids from families of extreme levels of faith and it is not my experience they are homogenously against this reform. I am very concerned about people who use areas of Sydney to try to further their argument in this debate.

In my mind this bill is very simple. It simply brings New South Wales up to date with other States and Territories. It is actually the opposite of what people have been calling it—a radical abortion bill. It is the opposite of radical, as we are the last jurisdiction standing still on this matter. This place is slow at the best of times but this law is centuries old. To put that in perspective, the law emanates from Victorian England—a time when it would have been unlawful for someone like me to pursue a no-fault divorce. That is what we are talking about. This reform is so long overdue that it is shameful. This issue should be treated simply as a women's health issue. I am proud to support this bill. In the future I will be proud to say that I was a member of this place when a law was passed to change the prospects of women in this State.

Mr ROY BUTLER (Barwon) (22:41): I speak on the Reproductive Health Care Reform Bill 2019. I do not like abortion. I do not like that it is a feature of our community. But the fact is it has been, it is and it will continue to be. I am a father of three kids and I could not imagine life without them. I was 23 when my wife fell pregnant with our first child. Abygaël, our daughter, was not planned, but it was never an option for either of us to do anything other than bring our first daughter into the world. But not everyone has had the good fortune we have. I am a man and as such I will never bear a child. I have not walked a mile in the shoes of a woman who has had to make such a difficult decision.

Let us not diminish what a difficult decision this is for a woman. As this time she should be supported to make such a decision that she is comfortable with and that she agrees to, with the input of a medical professional.

I would suggest the last thing a person needs at such a time in their life is additional stigma and shame for a procedure being associated with the Crimes Act. It is the only medical procedure to be mentioned under this legislation. Our medical practitioners who work every day to ensure their patients are of sound mental and physical health should not face future criminal prosecution for acting in the best interests of their patient.

There are changes to this bill that I would support. There should be a cooling-off period between consultation and procedure to allow the woman to discuss her plans with whomever she wishes. This may be as short as 24 hours. I am not advocating for drawing out the process but I do believe time should be provided for a person to consider a procedure in light of information from their doctor, as is the standard for any medical procedure. Late-term abortions are a particular concern to me and my constituents. I would support amendments that seek to tighten the circumstances under which one could occur. If a woman wishes to make the decision to terminate a pregnancy, that is a decision between her and her medical practitioner.

My research on this bill has focused on ensuring that all clinical obligations of a medical practitioner are maintained—that is, that the practitioner must be satisfied they are acting in the best interests of the patient at all times. I needed to be sure that this bill does not diminish any of the requirements of a medical practitioner to act in this way. The decision to end a pregnancy is not one made flippantly. A number of people have raised with me the difficulty of making this decision and the difficulty of finding a doctor they can speak to openly about their options and who can practice without the fear of criminal law. That is what we are talking about in relation to this bill. This bill does not seek to increase the number of terminations nor remove the onus on practitioners to ensure that termination is absolutely necessary. What it does is recognise that terminations are a medical procedure and that they are happening in the State. We are talking about bringing New South Wales into line with other States and modernising our laws to reflect what is actually happening every day.

During the short window of time for people to contact me regarding this bill I have received a large amount of correspondence on this matter. The views expressed are to be respected in this place. However, the views of groups of people should be balanced against the rights of people to make choices about their lives. This bill will allow women a choice on the path they wish to go down. It will give health professionals confidence in the service they are providing. It will not force health professionals into providing a service. It will not change my opinion that I do not like abortion. It will not change the opinions of many people on this issue. It will not change the fact that abortion is a very difficult decision to make and something that people feel very strongly about.

Mr ALISTER HENSKENS (Ku-ring-gai) (22:45): I thank the many constituents who have communicated their views for and against this bill to my office. I have read all the emails and had relayed to me the opinions for and against that were given over the phone. I have taken those representations into account but I am obviously only able to vote one way or the other on this bill. I also thank my colleagues who have shared their different opinions on the bill with me for the respectful way in which we have been able to discuss it. Abortion is an issue about which people have strong opinions. Discussing and hearing different points of view respectfully is important in arriving at the best decisions and I believe makes for better laws.

When studying the constitutional law of the United States of America during my Master of Laws degree I was surprised that a contentious social issue such as abortion law could be decided under a so-called Bill of Rights by nine unelected judges of the highest court of the country, the United States Supreme Court. In *Roe v Wade* that court found a right to an abortion through what I consider a tortuous legal interpretation of the United States Bill of Rights, which said nothing expressly about abortion. The law around this subject is an issue of contentious social policy for which elected members of Parliament should be responsible to the people of their community. It is not law that should be made by unelected judges in a constitutional context where Parliament cannot amend it. It is a good example—along with the contentious American right of the freedom to bear arms—of how bills of rights take power away from parliaments and citizens and give too much power to judges who are not accountable to anyone for their decisions.

When I was a criminal law student at the University of Sydney law school, unlike law schools in America, we spent all of about three seconds on the law of abortion because we were told that the decision in *R v Wald* [1971] 3 NSWDC 25 legalised abortion in New South Wales. We never read the case nor considered why or how it made abortion legal in New South Wales. We were taught that it was a reality that abortions could be legally obtained in this State. In recently reading Judge Levine's decision in *R v Wald* for the purposes of understanding the current state of abortion law without this bill, I noted that he identified that the Crimes Act 1900 used the terminology of an "unlawful" miscarriage. He reasoned this must mean that it has been possible since 1900 to have a lawful intentional miscarriage or abortion.

As a piece of judge-made law, *R v Wald* identified the circumstances in which a lawful abortion could be performed in New South Wales and can be performed today. The three requirements were: if there was the consent of the patient; if the abortion was skilfully performed by a qualified medical practitioner; and if the

medical practitioner had an honest belief on reasonable grounds that the operation was necessary to preserve the patient from serious danger to life or physical or mental health. Because Judge Levine's decision in 1971 was judge-made law, this Parliament has had an opportunity in the intervening 48 years to pass legislation overturning it or to otherwise seek to regulate lawful abortions in New South Wales. That has not happened prior to this bill coming to this Parliament. However, in those 48 years Judge Levine's decision—interpreting the words of the Crimes Act that allow legal abortions—has been confirmed by higher courts in our court system.

For example, in 1982 the Chief Judge in Equity of the New South Wales Supreme Court, Justice Helsham, followed and upheld Judge Levine's decision in the case of *K v Minister for Youth and Community Services* [1982] 1 NSWLR 311. That case concerned a classic example of what some doctors call a social abortion, one where there was no risk to the physical health of the pregnant teenage woman but a situation where the pregnant teenager did not believe she was ready to look after the child. The court upheld her legal right to have the abortion. Those decisions were found to be correct and were upheld by the highest State court, the New South Wales Court of Appeal, in *CES v Superclinics Australia Pty Ltd* (1995) 38 NSWLR 47. In that case Justice Kirby made it clear that, when a doctor considers the danger to a woman's health, regard may be had to the woman's economic, social or medical circumstances in order to make an abortion legal, and that those dangers did not need to arise only during the course of the pregnancy.

I have to decide whether I support the bill as the parliamentary representative of my electorate. I give the legal history because it is important to understand the legal context of the bill. The legal analysis explains that New South Wales has had legal abortions since 1900 and effectively abortion on demand since 1971 by reason of Judge Levine's interpretation of the Crimes Act. The available historical abortion statistics reveal the widespread nature of the incidence of legal abortions in our community. From 1984 when the statistics began until 2014, which is the last year of the statistics, the number of New South Wales abortions reported to Medicare have fluctuated greatly. There is no linear progression over time. In the 20 years from 1984 the number has changed from year to year within the range of 20,000 to 32,000 abortions per year. Based on other statistics, one estimate given by the Hon. Trevor Khan is that about 28,000 abortions took place in New South Wales in 2017.

This analysis accords with my life experience. Teenagers who attended my public co-educational high school in Newcastle were well aware of the legal right to an abortion. Family Planning NSW was a body that young women knew about and sought advice from on all issues to do with contraception and abortion. I was aware that there were teenage pregnancies that resulted in some births, and many years later I learnt that some girls in my year at high school had terminated pregnancies. Based on the evidence, my life experience and my legal knowledge, I draw the conclusion that whether this bill is passed or rejected it is probable that neither one more nor one less legal abortion will take place in New South Wales than currently takes place.

In assessing proposed legislation, I try to approach all issues with reason rather than emotion. As a general philosophical position, I believe in free markets, free enterprise and the freedom of association. I have been a strong defender of freedom of speech and freedom of religion. I believe that properly informed individuals are capable of reasoned choice in the world. For example, during the recent Federal election campaign Prime Minister Scott Morrison explained that the reason behind the tax-cut policy was his strong Liberal belief that people can make better decisions on their own behalf about how money should be spent than government can. Likewise, I think that women should be able to make their own choices about how they live their lives, informed by whatever religious or ethical framework they operate in and unburdened as much as possible by government.

When legislation came before Parliament last year to put in place abortion exclusion zones, I gave a detailed speech arguing against it because I thought it unnecessarily interfered with freedom of speech and freedom of religion. However, for the same reason I believe in basic freedoms like freedom of religion and freedom of speech, I believe women should have the freedom to make lawful choices in this area. I support the intent of the bill, which is to take the issue outside the Crimes Act. I do not think the criminal law has a place in what is one of the most difficult decisions that a woman, with or without her partner, may make in life. The moderator of the Uniting Church in Australia—one of the major Christian faiths—supports the bill. I was raised a Presbyterian, one of the many faiths that created the Uniting Church, so it is perhaps not entirely surprising that I take a similar view to the Uniting Church moderator, even though I acknowledge that senior leaders of other Christian faiths and other religions and constituents have written to me with contrary religious and moral views on the bill.

I have always understood that sound medical opinion is that an abortion should never be a woman's primary contraceptive strategy, having regard to the risks to a woman's physical and mental health when having an abortion. In this debate it must be acknowledged that there are sometimes very cogent medical justifications for an abortion. Sometimes a fetus cannot survive beyond birth for various reasons. The mother is carrying a growing fetus that will be born and die shortly after birth, creating unimaginable grief for the pregnant woman and her partner—a grief much greater for some than the anguish of a decision to terminate. Sometimes a pregnancy

can so endanger the life of a pregnant woman that its continuation may kill both the mother and her fetus unless there is a termination. Sometimes people who greatly want a child are confronted with the reality that an abortion is an unwanted but best medical outcome in the circumstances, and sometimes young, or even not so young, women unintentionally fall pregnant. In my view none of those are circumstances warranting the intervention of the criminal law, which is the situation that the bill is remedying. [*Extension of time*]

In my contribution on the abortion exclusion zones last year I noted that there were equity issues with regard to accessing abortions in the public health system. The bill does not address those issues. That is a missed opportunity. Best practice in the termination of pregnancies occurs in our public system and having them available is fair and will give women the best outcomes. Women as young as 14 years of age have the legal capacity to give consent to a medical procedure under section 49 (2) of the Minors (Property and Contracts) Act 1970. Those young, and sometimes vulnerable, women can now legally decide to have an abortion and they may not have any family or other support because of their particular circumstances. They are young women who may not feel comfortable informing their parents that they have fallen pregnant but want a termination. They may not have a family situation that is conducive to support if they wanted to tell someone.

Those young women require proper psychological support for what can be a very traumatic decision, but this law does not make it available. It does not provide public funding for it and nor does the current law. At the moment the practice in the public system is to offer counselling to women who have a physical medical reason for a termination. I agree with recommendation 2 of the statement by the Royal College of Obstetricians and Gynaecologists on abortion, updated in March 2019, that all people who contemplate having an abortion should have non-mandatory counselling made available. Preferably three relevant principles relating to non-mandatory counselling should be included in the bill or developed after if it is passed in Parliament. First, the Government should make publicly funded professional counselling available to any person who wishes to have a termination, and their partner. Secondly, a person wishing to have a termination should be told by the medical practitioner that that person can have access to publicly funded professional counselling if the person chooses. Thirdly, in the case of a person under the age of 18, publicly funded professional counselling should be recommended by the medical practitioner before and after the termination.

I am concerned that the bill does not adequately deal with the important matter of psychological support for women having an abortion and their partners. As access to public hospitals and public funding for counselling may raise issues under sections 39 to 46 of the New South Wales Constitution and may require the Minister for Health and Medical Research or other Minister to move such amendments, I leave those matters for their consideration. I also believe that there should be an obligation of good medical practice under clauses 5 and 6 of the bill. Currently there is no obligation for the medical practitioner to meet a standard when performing the procedures allowed by clauses 5 and 6. The definition of "termination" in the dictionary of the bill states that it can be performed "in any way". I would prefer that an obligation be inserted that states:

Terminations performed under sections 5 and 6 of the Act be performed in accordance with the professional standards and guidelines that apply to the medical practitioners in relation to the performance of the termination.

It is anomalous that consideration of those standards is required by clause 6 (2) (c) but there is no obligation to then go on and follow those standards in the provision of the professional services. Understandably, there are concerns about clause 6, which deals with late-term abortions. At the moment the current law dealing with legal abortions in *R v Wald* makes no distinction between early and late abortions. Theoretically, they are currently legally available and there is no regulation around them.

I am told—and this has been confirmed by the Minister for Health and Medical Research in his contribution to the bill—that presently late-term abortions only occur in accordance with professional standards if there are strong medical reasons for them. I am told that they take place in surgical wards with a team of health professionals, including anaesthetists. I have seen a proposed amendment that would require them to take place in public hospitals with some extra medical oversight. I believe it is an amendment worthy of consideration. With regard to clause 8, whilst I believe the right to a conscientious religious objection—

[*Interruption from gallery*]

TEMPORARY SPEAKER (Ms Sonia Hornery): The Clerk will stop the clock. The attendants will remove from the public gallery the person who is interjecting.

Mr ALISTER HENSKENS: With regard to clause 8, whilst I believe the right to a conscientious religious objection is an important incident to the freedom of religion, where a medical practitioner cannot advise a patient or perform a termination because of their religious convictions, in my opinion they have a conflict of interest in a legal sense. The doctor is in a position of trust with the patient, but is unable to give full advice to the patient about all their medical options because of the personal interest of the doctor. In such a situation, the doctor should inform the patient of the conflict. Again, I am prepared to listen to any reasonable amendments proposed

to this provision. For the above reasons, I support the decriminalisation of the law of abortion, which the bill seeks to achieve. I believe aspects of the bill can be improved. I hope the House is able to consider amendments reasonably to improve the bill as currently drafted.

Debate adjourned.

Community Recognition Statements

BEAT OF THE BUSH

Ms JANELLE SAFFIN (Lismore) (23:02:3): I congratulate the town of Tenterfield on hosting the successful and inaugural Beat of the Bush, a five-day winter music program, from 8 July to 12 July. I congratulate Mrs Kim Rhodes, the volunteer liaison focal point officer, on her enormous effort and commitment to bring this world-class music and arts event to Tenterfield. Beat of the Bush was billed as the event bringing music to regional kids and their communities across drought-stricken New South Wales and Queensland. Hartbeat of the Bush Inc. and Cuskelly College of Music presented the fantastic and uplifting program that included local kids from year 3 to year 12—no music experience required—who were immersed in singing, songwriting, choral, piano, strings, brass, jazz, concerts, and fun and friendship. Families participated and enjoyed the night-time concerts. May Beat of the Bush continue to go from strength to strength.

ST FRANCIS HOUSE OF WELCOME

Mr GUY ZANGARI (Fairfield) (23:03): Today I commend Mr Maurizio Vespa and the staff and volunteers of St Francis House of Welcome for their tremendous contributions and dedication to supporting those in need throughout our community. The House of Welcome was inceptioned by religious brothers and sisters of south-west Sydney who recognised the ongoing struggles of families and individuals in the area and committed themselves to stepping in and giving their support to assist those who were going without. The St Francis House of Welcome started from humble beginnings in an old butcher shop in Carramar before expanding its services and relocating into the old St Joseph's Convent. Following its expansion, the House of Welcome now offers a variety of outreach and support services to those in need, including mental health support, food hampers, work skills opportunities, catering and so much more. On behalf of the Fairfield electorate, I thank everyone from the St Francis House of Welcome for their ongoing dedication and support for the most vulnerable people in our community.

HOLY CROSS PRIMARY SCHOOL

Mr ADAM CROUCH (Terrigal) (23:04): Last Friday I had the pleasure of joining the 350 students at Holy Cross Primary School for their National Tree Day event. Holy Cross has a number of fantastic initiatives like the Wiping Out Waste program, the Green Classroom and the Bush Tucker Rainbow Serpent Pathway. It was a pleasure to present baby trees to class representatives at a school assembly with my Federal member and counterpart, Lucy Wicks, and to partake in a smoking ceremony. National Tree Day is an Australia-wide event that is the country's largest community tree planting and nature protection event. Its aim is to plant one million new native trees and shrubs. As Principal Craig McNee said at the school assembly, trees are the lungs of the earth. They are incredibly important and I am proud that this is an initiative that the New South Wales Government supports.

TERRIGAL TROTTERS

Mr DAVID MEHAN (The Entrance) (23:05): It gives me great pleasure to pay tribute to the wonderful work being done on the Central Coast of New South Wales by the Terrigal Trotters running club of which I am a proud member. In June the club organised the sixteenth Bay to Bay Running Festival during which over 3,000 competitors from across the Central Coast and further afield took part. The event prides itself on aiming participation at all members of the community, from elite athletes who have represented Australia to weekend joggers. The event was a huge success, raising a record sum of \$132,000 to be distributed to local charities and community groups. This sum makes the total amount the running club has raised for charity to well over \$1 million. The organisers of the Bay to Bay Event are all volunteers. I congratulate them on behalf of this House and the community for what they do. I am sure the House would like to join me in congratulating Terrigal Trotters on its efforts in providing much-needed funds for worthwhile causes and for its commitment to the wider Central Coast community.

MULGOA ELECTORATE ACHIEVERS

Mrs TANYA DAVIES (Mulgoa) (23:06): I offer my sincere congratulations and highlight the achievements of three outstanding young people from Glenmore Park. Eighteen-year-old Jazmine Alessio has been crowned Miss Teen Australia International 2019. Jazmine will now head to the United States to compete for the world title against five other young women from around the globe. Jazmine has worked hard to raise funds

and raise awareness for the Heart Foundation after the passing of her grandfather from heart disease. Natalie Bishara has been nominated for the Freemasons of NSW/ACT Community Service Award in the 2019 Seven News Young Achiever Awards. These awards acknowledge, encourage and most importantly promote the positive achievements of all young people in New South Wales. I congratulate Natalie on her nomination.

Finally, I congratulate Kiah Bolt from Glenmore Park High School, who has been recognised for her outstanding contribution to Aboriginal education in New South Wales public schools at the 13th Annual Nanga Mai awards. Kiah received the Student Encouragement Award presented to students who have demonstrated excellent attendance, progress in learning and a positive attitude to the school. Kiah is one of 17 successful students, talented performing artists, confident public speakers and outstanding sportspeople to win the award this year.

CANTERBURY ELECTORATE NEPALESE COMMUNITY

Ms SOPHIE COTSIS (Canterbury) (23:07): Last month it was great to join the Nepalese community in my electorate in Earlwood to support fundraising efforts to build necessary social infrastructure like schools in Nepal, particularly after the devastating earthquake that happened a few years ago. You, Mr Temporary Speaker, were also in attendance and spoke very well. Jointly, we supported the Nepalese community in their efforts. I give huge thanks to Rishi Acharya, General Secretary of the Nepalese Australian Association, the executive and the many volunteers for their ongoing commitment to support the Nepalese community in Nepal and their fantastic work.

MITCHELL KENNY

Ms ROBYN PRESTON (Hawkesbury) (23:08): I congratulate Mitchell Kenny on making his National Rugby League [NRL] debut on 23 May 2019 for the Penrith Panthers in their win over the Parramatta Eels, even though that is the team I support. Mitchell Kenny is a Hawkesbury local, having attended Arndell Anglican College and currently residing in McGraths Hill. Mitchell first played rugby league with the Windsor Wolves in the under 5s. True to the effort and determination that is reflective of the Hawkesbury, he went on to work his way up the ranks in his teenage and adult years before making his debut at the age of 21. Mitchell's success extends beyond the sporting field. He is currently studying education part time at the University of Technology, Sydney. I congratulate Mitchell Kenny on his NRL debut. I wish him the best of health and continued success, and look forward to seeing him run out onto the field and giving it his best.

ZOE DAVIS

Mr TIM CRAKANTHROP (Newcastle) (23:09): Today I congratulate Merewether High School captain Zoe Davis on her participation in the YMCA New South Wales Youth Parliament. Zoe took on the role of shadow education Minister and presented a very impressive three-part bill where she sought compulsory foreign language lessons for students from kindergarten to year 10, changes to the high school English syllabus and the introduction of an annual workshop on racial discrimination and Indigenous culture. I met with Zoe before the Youth Parliament and was inspired by her vision and her confidence. At just 17 years old, she has already proven herself to be a considerate and articulate young woman. I am sure this is not the last we will hear from Zoe. We can rest assured her future is very bright.

MAURICE HENRY

Ms STEPH COOKE (Cootamundra) (23:10): My warmest wishes and thanks go to Maurice Henry, the outback mechanic who has won the hearts of locals and travellers around tiny Bribbaree throughout his 70 years in the job. He has delivered two babies and rescued countless stranded drivers in his role as an NRMA roadside assistant. He has been recognised by the Institution of Engineers and has served at his workshop, M. K. Henry Motors, since 1962. But at 84 it is high time to hand over the reins to another local, Justin Boyd. On behalf of the Bribbaree community and beyond, I wish all the best to Mr Henry in his much-deserved retirement.

WENDY STEIN

Ms KATE WASHINGTON (Port Stephens) (23:11): It was a chance visit to Papua New Guinea that inspired Wendy Stein to launch her first healthcare program, with the support of Salamander Bay Rotary. Fourteen years later this impressive Rotarian has been awarded the Australia-wide honour of being named the Outstanding Rotarian of the Year 2018-19. Wendy was shocked by the high incidence of maternal deaths, child mortality and domestic and gendered violence in Papua New Guinea [PNG]. Maternal deaths and child mortality in PNG are among the highest in the Asia-Pacific region.

Faced with such alarming statistics, Wendy set about supporting the people of rural and remote areas of PNG, initiating a range of health and family planning programs that are saving lives. Wendy has even secured the vessel *Kula Spirit*, which travelled from Port Stephens to PNG but now acts as a floating medical centre providing

primary care, family planning and eye care. There is no stopping Wendy Stein. She is currently seeking funding to assist in education and clean water programs. I thank Wendy for making a difference to the lives of many. I congratulate Wendy on her well-deserved recognition as Outstanding Rotarian of the Year.

MIKAYLA HAIN

Mr MATT KEAN (Hornsby—Minister for Energy and Environment) (23:12): I pay tribute to Hornsby Berowra Eagles Junior Australian Football League [AFL] player Mikayla Hain, who celebrated 50 games for the club. Mikayla first joined the club in 2016 and has racked up some pretty impressive statistics over the four years. This season she is part of the North West Lightning division 1 under 16 team, which is an alliance of girls' teams from Hornsby, Westbrook and Pennant Hills AFL clubs. Mikayla has given up netball after 10 years to focus on her first love—AFL.

Over the past four years Mikayla has had an impressive record, kicking 14 goals and playing in last year's grand final. She is also in her third season as an AFL junior umpire. Mikayla attends the Killara High School and is the first girl from the Hornsby Berowra Eagles who has achieved the milestone of 50 games. Mikayla is a mad Sydney Swans fan and has grown up on AFL her entire life—thanks to dad, Barry, and mum, Danielle. I have no doubt Mikayla will continue to kick some goals on her AFL journey. I congratulate her on playing an impressive 50 games and I look forward to hearing of her success in the next 50.

HIGHER SCHOOL CERTIFICATE 2019

Ms LIESL TESCH (Gosford) (23:13): I take the opportunity to wish all the students in my electorate and across New South Wales the very best of luck as they commence their Higher School Certificate trial exams. As a former high school teacher, I acknowledge the nerves they may be currently experiencing but I have complete faith in each and every one of them and their ability to succeed. I say to all of you: Trust in the work you have done and that of the teaching staff who have guided you to this point. Also, know that whatever the result at these trials, you are amazing and worthy. Education is the key. Knowledge is power and we get that through education. Education will open doors and help to lay paths ahead. I also mention at this time the mental health of our students. Maintaining a healthy balance of both physical and mental energy is essential for our kids. We must support our students through these often tough exam processes and ensure that they focus on their mental health as much as on their academic results. Best of luck guys; you've got this!

MIDDLE HARBOUR YACHT CLUB

Ms FELICITY WILSON (North Shore) (23:14): Congratulations to Middle Harbour Yacht Club on its eightieth anniversary. On 21 June the club celebrated its formation in 1939, when two sailors, Togo Middows and George Griffin, together with an enthusiastic group of sailors, formed the Middle Harbour Cruising Yacht Association. Over the years the club has grown and established a reputation for quality and for producing some of the best and talented sailors. On that night we were fortunate enough to be joined by the renowned Tom Burlinson and his swing band. The money raised on the evening will go to the Middle Harbour Yacht Club Foundation, with the aim of creating a permanent fund to be administered independently from the club to preserve and develop future assets. The money raised will also go towards the Frank Likely Youth Academy of Sailing, with awards being granted to a wide variety of recipients to support deserving young sailors learning to sail and to those who need support in higher-level competitions. I offer my thanks in particular to Commodore Peter Lewis and to the committee for hosting this fantastic evening. I look forward to seeing you soon.

ANNE COLE AND MAITLAND BLACK AND WHITE COMMITTEE

Ms JENNY AITCHISON (Maitland) (23:15): I pay tribute to the life of Anne Cole—a beautiful and generous woman—and the group to which she gave 40 years of service, the Maitland Black and White Committee. The Black and White Committee is one of our city's great institutions. Its yearly Garden Ramble, through the grounds of beautiful private homes, is a fixture in our annual calendar and its luncheon, which attracts around 400 people, is a must-do event that attracts speakers of Australian and world renown. These grand events are staged to raise money for Vision Australia and all funds raised stay in the Hunter region to help people who are blind or who have low vision. Anne gave her time generously for four decades in support of this important cause. Sadly, she passed away earlier this year and was greatly missed at the fifty-first annual Maitland Black and White Committee luncheon, which was held in April. Anne will not be forgotten. Her memory is preserved by her friends, who recall her many years of service, which included terms as president, secretary and publicity officer. I am sure their good work will continue in her honour. Vale, Anne.

AVA MACEY

Mr ADAM MARSHALL (Northern Tablelands—Minister for Agriculture and Western New South Wales) (23:16): I recognise Moree's junior swimming superfish, Ava Macey, on her top four finish at the

recent School Sports Association Swimming Championships in Melbourne. Ava has consistently improved throughout the year and bested both her entry time that she achieved at NSW Primary Schools Sports Association Championships and her personal best by 1.3 seconds to qualify for the finals, where she again beat her personal best by a further 0.68 seconds. Ava trains five mornings a week at the pool in Moree and it was the first time she was selected in the New South Wales team as part of the national championships. I congratulate her sincerely, as well as coach Angela Walker, on this amazing achievement and wish her all the very best for future championships.

CHALDEAN NATIONAL DAY

Dr HUGH McDERMOTT (Prospect) (23:17): On 6 July 2019 I had the pleasure of joining the Chaldean League of NSW for their Chaldean National Day celebrations. The Chaldean League wishes to strengthen Chaldean communities through utilising the energies, expertise and investment of the Chaldean people across the world. This year the Chaldean National Day celebrations in New South Wales helped to raise funds to support the construction of St Joseph Church in Mt Druitt. I acknowledge His Grace Archbishop Mar Amel Nona of the Chaldean and Assyrian Catholic Diocese of Australia and New Zealand for his presence at the event; guest singers, Ayman Xaxoy and Delon Aliraqi, for the terrific entertainment that they provided; and President Samir Yousif, Rouwell Shammass, Laith Alchinno and Salah Kina, along with other members of the Chaldean League of NSW, for all their hard work in organising such a tremendous event.

KEVIN FLACK

Ms MELANIE GIBBONS (Holsworthy) (23:18): Today I recognise Mr Kevin Flack, who has been volunteering at Moorebank Liverpool District Hockey Club for more than 40 years. Kevin began his time volunteering for the hockey club when his children took up the sport and he has not left since. He does any job that is needed for the hockey club—from mowing the lawns, to picking up rubbish and helping out at the club canteen. Kevin also secured funding for three Olympic-grade hockey fields and for someone who has made an outstanding contribution to the Moorebank Liverpool District Hockey Club, he only displays humility, wishing for no appreciation or want for any awards. I am sure this House would agree that Kevin deserves acknowledgement and thanks for his tireless commitment to our community and his commendable 40-plus years of service to the Moorebank Liverpool District Hockey Club.

NATIONAL DAY OF CROATIA

Mr GUY ZANGARI (Fairfield) (23:19): On Saturday 29 June 2019 I had the great pleasure of attending the King Tom Club to celebrate the twenty-eighth anniversary of the National Day of Croatia. Croatia has a proud and rich history. As a modern European nation, it continues to make tremendous contributions to the broader international community. We were honoured to be joined by Ambassador Betty Pavelich Sirius and Consul General of Croatia Ivica Glasnovic, alongside the many community leaders, local councillors, State and Federal members, local residents and, of course, Croatian Australians from far and wide. I commend the Croatian Folkloric Ensemble Vukovar for their wonderful display of traditional performances. They never cease to impress. On behalf of the local community, I extend commendations and congratulations to Mr Tony Beuk and Mr Damir Temic of the Croatian Australian Community Council on organising such a fantastic event and on their ongoing dedication to the Croatian Australian community.

5 LANDS WALK

Mr ADAM CROUCH (Terrigal) (23:20): On 29 June the 5 Lands Walk weekend was held in my electorate of Terrigal. The annual event is focused around a 9-kilometre walk through Macmasters Beach, Copacabana, Avoca Beach, North Avoca and, of course, finishes in Terrigal. It presents an opportunity for locals and visitors to be part of our strong community spirit through events at each of the five lands. This year I was at Macmasters Beach for the official opening of the walk. It was fantastic to be there with Gavi Duncan from the Darkinjung Local Aboriginal Land Council, who played a didgeridoo and sang simultaneously, which is part of Gavi's charm and talent. Students from Kincumber Public School performed a fantastic dance. I thank Suzy Miller, who organised the opening event at Copacabana. Of course, thanks must go to Con Ryan, the 5 Lands Walk president, and all committee members for making this year another huge success. Over 21,000 people attended the event on the weekend and injected almost \$2 million into the local economy. Ninety-nine per cent of participants rated the event as good or excellent. Again, I congratulate Con and the team on another fantastic 5 Lands Walk.

WOLLONGONG WOLVES FOOTBALL CLUB

Mr PAUL SCULLY (Wollongong) (23:21): I congratulate the Wollongong Wolves on taking out the men's National Premier Leagues NSW title this year, beating the Rockdale City Suns 2-1 on the weekend. I acknowledge the hard work of the side and of coach Luke Wilkshire, building on the work of Jacob Timpano

before him. The Wolves officially take out the title this weekend at WIN Stadium. I encourage everyone to go and support the team, who will be breaking a 31-year drought. This is the first time the Wolves have won the premiership trophy since 1988. If ever there was a reason for an A-League side to be in Wollongong, it is the Wolves' success this year. The team have taken football in the Illawarra to another level. By taking out this year's title they have ensured that their proud history continues.

WOOLGOOLGA WWI MEMORIAL RESTORATION GROUP

Mr GURMESH SINGH (Coffs Harbour) (23:22): The Woolgoolga WWI Memorial Restoration Group work away quietly to honour the memory of our war veterans. I was thrilled to visit them recently to share the great news that they have successfully received \$4,500 in round two of the Community War Memorials Fund. The investment will help the group bring back to life the Woolgoolga Soldiers Memorial, one of the mid North Coast's few surviving 1920s historical objects. Restoration of the memorial, which is currently in sections while in storage, is a welcome development for the dedicated members of the Woolgoolga WWI Memorial Restoration Group and our community. I congratulate Denys Younger, a descendant of some of the men originally listed on the memorial, along with Andrew Harland and Geoff Morrow on spearheading this iconic project. I acknowledge All Areas Demolition Excavation proprietor Kev Sparks, who has generously provided a storage space for the memorial. The Woolgoolga War Memorial is one of many projects across the State to receive funding from the New South Wales Government to repair, protect and preserve our community war memorials.

MAUREEN O'DONNELL

Mr ROY BUTLER (Barwon) (23:23): I acknowledge Wilyakli Elder Maureen O'Donnell for her tireless commitment to the Broken Hill Local Aboriginal Land Council, the Aboriginal land rights movement, social justice, native title rights and all Aboriginal people in Far West New South Wales. Maureen has held many positions in the community, such as police community liaison officer, health community engagement officer and field officer at Mutawintji National Park—her incredible list of achievements goes on. Maureen has been fighting for the rights of her people for many years. She is held in high esteem and is well respected by her local community. A plaque has been unveiled at the Broken Hill Local Aboriginal Land Council building in recognition of Maureen's commitment.

NEVILLE AND UNITY MAITLAND

Mrs TANYA DAVIES (Mulgoa) (23:24): I congratulate Neville and Unity Maitland from Glenmore Park, who celebrated their fiftieth wedding anniversary on 11 June. Neville and Unity are childhood sweethearts who met in their hometown of Maymyo in Burma. They have spent the past 24 years in Glenmore Park where they have raised their family. They have six children, 19 grandchildren and will have now had their fourteenth great-grandchild. I congratulate Neville and Unity on their golden anniversary. I hope it was a wonderful celebration with family and friends.

HOMELESSNESS WEEK

Ms LIESL TESCH (Gosford) (23:24): This week is Homelessness Week. Unfortunately, one in 200 people around Australia is experiencing homelessness on any given night. That is about 30,000 people sleeping rough in New South Wales—a number that continues to increase. This is an important issue for us as a Parliament and as a society. We should do better. There are so many people in our communities lending a hand to those in need alongside fantastic local organisations like Coast Shelter, Orange Sky Laundry, UnitingCare, Vinnies and the recently formed Soul Soup. I commend Mary Mac's in Woy Woy, which provides food and essential supplies to vulnerable members of my community each and every day. To mark this year's Homelessness Week they have launched Shout a Mate a Plate to encourage the community to assist them in running their meals programs. I congratulate Mary Mac's on the excellent work they do in supporting and valuing all coasties, and I highlight Catherine Pantehis for coordinating those programs. I encourage anyone who is able to contribute to the worthwhile cause by shouting a mate a plate.

JOE BOND

Ms STEPH COOKE (Cootamundra) (23:25): I congratulate Gundagai's Joe Bond, a dedicated State Emergency Service volunteer with 45 years of service to his name, who was a finalist in the 2019 Rotary Clubs and Districts of NSW Emergency Services Community Awards. Joe is exceptionally humble but an integral part of the team at Gundagai. A founding member in 1974, he has been active with the unit ever since, attending 20 to 30 local road crashes every year and amassing 14 SES medals. While he did not take out the overall win, it is an exceptional achievement to be nominated among the State's finest. I thank Joe for all of his work over the decades.

SKYE ROBINSON

Ms JENNY AITCHISON (Maitland) (23:26): I recognise the contribution of Skye Robinson, a big sister with a heart of gold. Skye worked tirelessly to ensure that her little sister, Karisma, and her peers with special needs were given an opportunity to celebrate the completion of their year 10 studies. Karisma has an intellectual disability and worked harder than most to complete year 10. A number of her friends could not afford a traditional coming-of-age celebration and others simply wanted to mark the milestone in a judgement-free environment of acceptance without bullying. Skye rallied the community to bring those dreams to life. Professional DJ Mark Wilson and hairdresser Tim Tanner from Viva Hair joined the cause. Three photographers volunteered their time to capture every happy moment, some local 4WD enthusiasts came along to keep an eye on proceedings and ensure the students' safety and Woolworths Rutherford provided a cake. Individuals within the community came forward to donate suits, dresses and car travel. I congratulate all concerned, and I thank Skye Robinson. It is people like Skye who make our community strong.

QUEEN'S SCOUT AWARD RECIPIENTS

Mr MATT KEAN (Hornsby—Minister for Energy and Environment) (23:27): I acknowledge three special young women who have received the Queen's Scout Award, the highest honour a Scout can achieve. Lucy Falvey, Amy Mutton and Chloe Lawler have all worked incredibly hard to achieve this award. I congratulate them on their dedication and service to the Scouting movement. Chloe Lawler is an amazing young lady. She has been a member of Dural Scouts since she was 12 years old and worked incredibly hard to achieve this award. Lucy started in Girl Guides at five years old in England and after moving to Australia was one of the youngest guides to become a patrol leader at Glenwood Girl Guides. At 14 years old she switched to Scouts, joining the Dural brigade. She has been working for many months towards her goal of the Queen's Scout Award. Finally, Amy has been with Dural Scouts since she was 10 years old and has had experiences including an exchange in Denmark and completing an open water scuba diving course as part of her Queen's Scout Award. I congratulate Amy, Chloe and Lucy on their achievements. I know these ladies are destined to go on to great things.

GREYSTANES DEVILS JRLFC

Dr HUGH McDERMOTT (Prospect) (23:28): On 13 July 2019 the Greystanes Devils Junior Rugby League Football Club held its fortieth anniversary celebration dinner. It was a terrific event that paid tribute to the achievements and joys that the club has brought to the local community over the past four decades. The Greystanes Devils club was founded in 1979 and hit the ground running with two premierships in its debut year. The club has grown significantly and now has 15 registered teams, from under sixes through to the open men's and women's teams. The Devils also continue to contribute strongly to the community off the football pitch through its annual charity day, which raises, on average, \$5,000 to \$10,000 for various local charities each year. I acknowledge club president Colin Eisenhuth, secretary Sarah Fuller, registrar Rebecca Telfer and assistant treasurer Carl Albrecht, along with all other members of the Greystanes Devils committee, for their tireless efforts for our community.

SCOTLAND-AUSTRALIAN CAIRN

Ms FELICITY WILSON (North Shore) (23:29): I congratulate Mosman Council on hosting the annual inspection of the Scotland-Australian Cairn at Rawson Park in Mosman. The inspection takes place every year and is organised and run by the council, which is the principal warden, and the Scottish Australian Heritage Council. The Scotland-Australian Cairn was a bicentennial gift from the people of Scotland as a commemoration of the landing of Captain Arthur Phillip in 1788. The cairn's stones, which represent the diverse geology of Scotland, were carefully gathered from each parish in Scotland by the Royal Main and brought to Australia. This year we were fortunate enough to be joined by the Rt Hon. the Lord Lyon King of Arms, Dr Joseph Morrow, CBE, QC, who inspected the cairn on behalf of the people of Scotland to ensure that it is continually well maintained. It was a great honour to have a member of the Queen's household in Scotland attend this event and inspect the cairn. I thank all those who attended the event, including councillors Roy Bendall and Corrigan and members of the Scottish Australian Heritage Council. I congratulate Mr John Coombs, who was made an honorary warden of the Scotland-Australian Cairn on the day.

YOUTH IN PERFORMING ARTS

Mr DAVID MEHAN (The Entrance) (23:30): I acknowledge the fantastic work of Gary Jackson with Youth in Performing Arts [YIPA]—an institution on the Central Coast—as part of Laycock Street Community Theatre's annual program. Recently I was fortunate to attend a performance and it was a fantastic night. YIPA aims to provide performers from school age to the age of 21 who reside in or attend a school within the Central Coast area with the opportunity to provide live entertainment in a non-competitive environment. YIPA encourages a whole bunch of different performers from across the spectrum of performing arts. I congratulate Mr Jackson on

a successful program for the Central Coast community, with a platform to provide a diverse range of entertainment.

CHARLIE FITTLER

Mr ADAM MARSHALL (Northern Tablelands—Minister for Agriculture and Western New South Wales) (23:31): I recognise Armidale teenager, singer, songwriter and virtuoso Charlie Fittler on the release of his first song as a recording artist, *This Guitar Can't Drink a Beer*, which was co-written with country music star Travis Collins. I congratulate Charlie on his song—it is brilliant. I note also that last year Charlie attended the Academy of Country Music in Tamworth and won the chance to go into producer Simon Johnson's Hillbilly Hut studio to record the track. I commend Charlie for his dedication to balancing his promising and burgeoning country music career with his school studies. I wish him all the best for the future.

WINDOW WAY 2828

Mr ROY BUTLER (Barwon) (23:32): I congratulate the community of Gulargambone on its successful Window Way 2828 beautification project, which was recently celebrated with a street party. The Gulargambone community has been ravaged by ongoing drought, but it has not let that get in the way of the creativity of its residents. This year five buildings in the main street were repainted in vibrant colours, with local artists creating different themed window displays for each building. It is great to see passion still thriving in this community and the festival provided an opportunity for families in the area to take a break from the drought and enjoy the street party. Well done to the organising committee and the community as a whole.

MOOREBANK RAMS JUNIOR RUGBY LEAGUE INC.

Ms MELANIE GIBBONS (Holsworthy) (23:32): I congratulate the Moorebank Rams Rugby League Football Club on its successful gala day. At the event I had the pleasure of meeting some of the club members and seeing the draft plans of how the Government's \$400,000 election commitment will be utilised. I am very happy that our commitment will be of particular benefit to women and those with disability, as well as the local community as a whole. It is fantastic to see vibrant sports clubs such as the Moorebank Rams playing a vital role in our community. Clubs like the Rams are important as they keep our sporting spirit alive. It gives me great pleasure that we are helping facilitate the club's growth. Once again, I congratulate the Moorebank Rams Rugby League Football Club on a successful gala day. I cannot wait to see the future developments of the club.

WOMEN'S STATE OF ORIGIN

Mr ADAM CROUCH (Terrigal) (23:33): Whilst the State of Origin men's tournament often gains all the media attention, today I highlight the success of the State of Origin women's tournament. On 21 July the New South Wales women's team smashed the Queensland Maroons 14 points to four. On the New South Wales side there were two Central Coast locals: Isabel Kelly from Berkeley Vale and Kirra Dibb from Copacabana in my electorate of Terrigal. Kirra played an incredible game on the night and set up a number of plays that resulted in points being scored. That ultimately meant that New South Wales succeeded in winning the game and the fourth consecutive State of Origin Shield. The game was Kirra's debut as a representative player. There were many people back home on the Central Coast cheering her and the entire Blues team on. I congratulate Kirra on an absolutely brilliant debut on the New South Wales side.

WALGETT COMMUNITY

Mr ROY BUTLER (Barwon)—The community of Walgett in north-west New South Wales has been through tough times lately. The ongoing effects of drought in the area were exacerbated by the recent fire in Walgett's one and only supermarket. The Walgett community should be recognised in this instance for their support of each other under difficult circumstances. The community of Walgett has received many charitable donations with Food bank, Walgett CWA and other groups pulling together hundreds of food hampers to deliver to those who need it most. Thank you on behalf of the Walgett community to Adam Marshall, MP, for his swift action. And thank you to the Walgett community and these services for pulling together in this tough time and showing the real heart of a rural community.

MINISTERS' AWARDS FOR WOMEN IN LOCAL GOVERNMENT

Mr PHILIP DONATO (Orange)—This year seven outstanding women of the Orange electorate were nominated for the 2019 Ministers' Awards for Women in Local Government. I wish to acknowledge each of these women for stepping up to represent the communities of their respective local government areas, forgoing countless hours each and every week travelling throughout their council areas to help improve and deliver information, support, services, events and infrastructure for the individuals, families, community groups, schools, businesses, and visitors of their communities. These women are leaders in their communities, providing invaluable skills,

experience, and perspective which contribute to important decisions that benefit their communities. Those women are:

Cr Jennifer Weaver of Cabonne Council

Cr Marlene Nash of Cabonne Council

Cr Phyllis Miller OAM of Forbes Shire Council

Cr Jennifer Webb of Forbes Shire Council

Cr Joanne McRae of Orange City Council

Cr Barbara Newton of Parkes Shire Council

Cr Patricia Smith of Parkes Shire Council.

Congratulations and thanks to all of you for your leadership and service to community.

MYALL CREEK MASSACRE COMMEMORATION

Mr PAUL LYNCH (Liverpool)—I rise to recognise the 2019 Annual Service of Commemoration held at the Myall Creek Memorial. This year the commemoration was held on Sunday 9 June. The commemoration is of an infamous massacre of over 28 Wirrayayraay men, women and children at Myall Creek, north of Tamworth in 1838, 181 years ago. Massacres and killings on the frontier were certainly not rare as a range of historians have established. What was unique about Myall Creek is that some of the white perpetrators were held to account and several were executed – although the squatter who led the group escaped. The Guest Speaker for the commemoration this year was Professor Lisa Jackson-Pulver a Deputy Vice-Chancellor from the University of Sydney. Others whose presence should be recognised were Aunty Lizz Connors and Aunty Sue Blacklock; Roger Knox; Kelvin Brown; Ivan Roberts and Graeme Cordiner.

STEPHANIE FLINN

Mr MATT KEAN (Hornsby—Minister for Energy and Environment)—I was pleased to see the amazing Stephanie Flinn from Hornsby Heights has received her OAM Medal in a ceremony recently at Government House. Stephanie is a truly special community member having been a Rural Fire Service Volunteer for over 40 years. She first joined in 1976 following her Mum and brother who had also joined. Since that time she has held a number of positions and was even at one point the Deputy Captain of her unit. Her dedication to the service and to ensuring the safety of our bushland shire is something the entire community can be grateful for.

Steph has also been an active member of the Golden Kangaroos Concert Band, joining up the same year she started with the RFS. Steph first found a love of music in the concert band at Hornsby Heights Public School and has been hooked ever since. In her more than 40 years with the Kangaroos she has performed in everything from retirement villages to local halls and schools. Thank you Steph for everything you have done for our community. You are one of a kind and I can't think of a more deserving OAM recipient.

LITTLE RED CAFÉ

Mr STEPHEN BROMHEAD (Myall Lakes)—Mr Speaker, I rise to congratulate Dundaloo support services who have recently taken ownership of the Little Red Café in Wingham Plaza. The Café provides Dundaloo's participants with learning skills, related to food preparation and customer service, and to give opportunities to put those skills into practice in paid employment. Those staff heading up and taking involvement in this initiative are:

- Tracey Tattersall
- Lauren Walsh
- Hannah Boyd
- Jane Bercini
- Kathy McPherson
- Mel Kelly
- Tullulah Greeves
- Talia Dawson

July 31st saw the Café's Adam Polley complete his first shift in employment. This was a fantastic day and we are extremely proud of him for this achievement. He is rightly very proud of himself. Along with Dundaloo, I look forward to more participants over the coming weeks, months and years following Adam in opportunities at the café.

CATHIE ANGELKOVIC, PSM

Ms SONIA HORNER (Wallsend)—Elmore Vale resident Cathie Angelkovic was recently honoured in the Queen's Birthday Honours List for her outstanding public service to Revenue New South Wales. As the Director of the Revenue NSW Collection Centre, Cathie was praised for successfully transforming a service delivery centre that provided very basic information into an award-winning collection centre, recognised nationally by both private and government industry groups. Congratulations to Cathie for her NSW Public Service Medal. Thank you for your outstanding Service to the people of the Wallsend electorate and NSW.

IVAN DE VULDER

Ms JO HAYLEN (Summer Hill)—I acknowledge the sad passing of Ivan de Vulder. Ivan was a friend and a comrade. He will forever be remembered for his boundless compassion, his smile, his encompassing hugs and his tenacity in fighting for fairness and equality. Whether it be fighting for LGBTIQ+ rights, for the environment, or for animal rights and the protection of animals, Ivan did everything he could to change the world for the better. A familiar face on the campaign trail, he was always there, shoulder to shoulder with his comrades, offering support and solidarity.

In the marriage equality postal survey, when LGBTI+ people were subjected to daily abuse, Ivan was there, urging people on and making sure everyone was OK. When elections were down to the wire, and the urgent call went out for help, Ivan was there. He was a proud member for Rainbow Labor, of the Labor Environment Action Network, and the founding member of Labor for Animal Rights. Ivan's passing is an immeasurable loss to our party and to our progressive community. I send sincere condolences to Ivan's family and friends, as well as to everyone who will miss him so dearly in our Labor family. Vale Ivan.

BALLINA MARINE RESCUE VOLUNTEER LORRAINE LEUCKEL

Ms TAMARA SMITH (Ballina)—I wish to congratulate Lorraine Leuckel who was recently presented with her 15-year National Service Medal for her volunteer work with Ballina Marine Rescue. Using her nursing skills, Lorraine has served our community as the unit's first aid officer and is also an experienced radio operator. She is passionate about educating the community and has taught resuscitation skills to hundreds of local people. Lorraine serves on the unit's rescue boat and has achieved the level of Competent Crew.

As well as her extraordinary practical service on our beaches, Lorraine was part of the committee that worked tirelessly to lobby and plan for the construction of the Ballina Marine Rescue's purpose built communications tower which opened in 2016. This tower now connects Ballina to Marine Rescue NSW and will keep our community connected even in severe storms. Remarkably, Lorraine has raised thousands of dollars for Ballina Marine Rescue over the years by organising charity theatre nights with another fantastic local community group the Ballina Players. I congratulate Lorraine on receiving this medal and on behalf of the community thank her for her tireless service.

MACARTHUR FC BULLS

Mr GREG WARREN (Campbelltown)—From next year, residents in Campbelltown and the wider Macarthur region will have an A-League team of their own that they can cheer for every week. I was at the launch where the club name, Macarthur FC Bulls, was officially unveiled. The team colours were revealed with black, white and gold chosen. I truly can't wait to see the team run out for its first game at Campbelltown Sports Stadium in the 2020/2021 season. I have spoken to many local football clubs that have been buoyed by the healthy participation numbers of players in Macarthur. Having a local side to call their own can only serve as inspiration for the next generation of football stars. Campbelltown and the wider Macarthur region have a wonderful reputations for producing some supremely talented sports stars. From rugby league players like John Skandalis and Chris Lawrence, to former Olympian Jim Piper. Former Socceroo Brett Emerton also hails from our region as does current Matilda Alanna Kennedy. With the addition of Macarthur FC Bulls, it's fair to assume there will be plenty of more names added to that list in years to come.

NATASHA HARPER

Ms ELENi PETINOS (Miranda)—I congratulate Natasha Harper of Sylvania on being awarded a national apprentice award for the second time earlier this year. Natasha, who is studying her certificate III in Automotive and Marine Trimming Technology at Ultimo TAFE, was awarded Apprentice of the Year in the Specialised Textiles Association Awards for Excellence. This award, which highlights the achievements of future

tradespeople and encourages continued excellence in the industry, has now been awarded to Natasha for the second consecutive year. In having been awarded Apprentice of the Year in both 2018 and 2019, it is clear that Natasha continues to work extremely hard and excel in her chosen field.

In addition to studying her certificate III, Natasha is also undertaking her training at Covergirl Marine Trimming, a business that designs, manufactures and installs boat covers in Port Hacking and the St George area. Natasha's achievements demonstrate not only her skills and dedication to her studies, but exemplify the rewarding result of pursuing one's passions. I congratulate Natasha on her outstanding achievements and extend my best wishes for her future endeavours.

QUEEN'S SCOUT AWARDS

Mr DAVID ELLIOTT (Baulkham Hills—Minister for Police and Emergency Services)—I wish to congratulate Hills constituents Amy Mutton, Chloe Lawler, and Lucy Falvey on receiving the Queen's Scout Award from 1st Dural Scout Group. To achieve this prestigious award, a Venturer Scout must be able to set a goal, plan progress towards that goal, organise their self and others, and maintain the determination to overcome difficulties and finish the task at hand. Completion of the Queen's Scout Award is a major milestone in a Venturer's Scouting journey and carries an extraordinary reputation within Scouting and the community. I commend Amy, Chloe, and Lucy on receiving the highest award in the Venturer Scout section, and I extend my deepest gratitude with respect to their tireless commitment and dedication towards this worthy cause.

JADE WHEATLEY

Ms JODIE HARRISON (Charlestown)—I would like to acknowledge my constituent, Jade "Red" Wheatley from Garden Suburb who is a double amputee and well-recognised adaptive surfer who I have previously spoken about in this place for his selfless fundraising achievements. Jade's recent fundraising project, Walk for Waves, was a 12 day walk covering 160 kilometres from Newcastle Beach to Manly to raise awareness and much needed funds to develop Adaptive Surfing in Australia and around the world.

Due to the nature of the sport and the competitors, Adaptive Surfing requires a lot of extra resources such as beach safety and access teams, water safety crews and equipment to manage the risk to an appropriate level to run high performance adaptive surfing competitions. Jade has helped create the Bali Adaptive Pro which will be held in September and costs around \$11,000 to run. Jade is a strong advocate for others with a disability who still wish to surf and I thank him for his commitment to helping people with disabilities find liberation and fitness in the ocean.

ST PETER'S PRIMARY SCHOOL PORT MACQUARIE

Mrs LESLIE WILLIAMS (Port Macquarie)—I recognise today our young student scientists from St Peter's Primary School for leading the new revolution in outdoor activities by introducing Science, Technology, Engineering and Mathematics into the playground. They call themselves the Steam Pits and their challenge is to enhance the learning experience of their peers in STEM subjects through a variety of lunchtime challenges, increasing student's awareness and passion to learn more about how mathematics and science encapsulates our daily lives, all be it through Lego building or paper plane design.

Undertaken twice a week at lunchtime, the Year 6 masterminds behind the project; Liam Poppleton, Ryder Day, William Abell, Tom Rosenbaum and Tobey Pol are excited about the opportunity to develop new challenges for younger students who wish to learn more about problem solving, through competitions and just by simply having fun. The team of five have now developed the Lego Meteor Shower challenge that calls on students to make a paper cup tower to stand up against Lego. This is among a dozen or so tasks the Steam Pits have devised to challenge students thinking and problem solving skills. I congratulate each student for their passion and commitment to learning.

FRANK PRESNELL, OAM

Mr ADAM MARSHALL (Northern Tablelands—Minister for Agriculture and Western New South Wales)—I recognise the extraordinary life of Guyra local and community legend Frank Presnell, OAM, who sadly passed away recently, just two weeks prior to what would have been his 100th birthday. Frank was a man who always put the community first and wasn't afraid to roll up his sleeves and get involved. A founding member of the iconic annual Guyra Lamb and Potato Festival. Frank was also a long-term active member of the Guyra Rotary Club and the Guyra Show Society, of which he was a former President, life member and patron.

He was regularly seen at local and regional shows, sheep sales and anywhere there was something to do in the community and a working bee to be involved in. Frank's community service of more than 45 years was recognised with a Medal of the Order of Australia and he has left a huge legacy in the community and in his

family, with 13 grandchildren, 33 great grandchildren and 4 great, great grandchildren and many adopted grandchildren. Frank Presnell was truly one of a kind and will be sorely missed by many.

DR NICHOLAS SALTOS, AM

Mr TIM CRAKANTHORP (Newcastle)—I would like to congratulate Dr Nicholas Saltos in New South Wales Parliament today on being made a Member of the Order of Australia in this year's Queen's Birthday Honours. The community owes a great debt of gratitude to Dr Saltos for his life-changing work in the City of Newcastle and the Hunter Region, through a distinguished career that has included:

- Over forty years of service as a physician;
- Being the founder of the Hunter Lung Cancer Clinic;
- Holding the post of conjoint clinical professor at the University of Newcastle's medical school

This work continues through his role as an honorary medical officer at the John Hunter Hospital in Newcastle. This honour recognises Dr Saltos' significant service to medicine and education. I am delighted to congratulate him on behalf of the people of the City of Newcastle and the Hunter Region.

HILLS ADVENTIST COLLEGE

Mr RAY WILLIAMS (Castle Hill)—I was honoured to attend the official opening of the Middle School Building at the Hills Adventist College. It was a special moment cutting the ribbon and unveiling the new state-of-the-art facility alongside the NSW Minister for Education. I would like to thank all of those people, both individuals and businesses involved in the ongoing development of the school. Thanks to the NSW Government and the Seventh-day Adventist Schools (Greater Sydney) Ltd for your financial contribution. This Government is investing more in school infrastructure than ever before. Special acknowledgment to Principal Dr Malcolm Coulson and all the college staff for your continued dedication to enhancing the education of students in the Hills. This new facility was dedicated to the Glory of God by local Pastor Martin Vukmanic. I look forward to watching students in the Hills district benefit from these upgrades for years to come.

**The House adjourned, pursuant to standing and sessional orders, at 23:34 until
Wednesday 7 August 2019 at 09:30.**