



New South Wales

Legislative Council

PARLIAMENTARY DEBATES (HANSARD)

**Fifty-Seventh Parliament
First Session**

Wednesday, 21 August 2019

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LEGISLATIVE COUNCIL

Wednesday, 21 August 2019

The PRESIDENT (The Hon. John George Ajaka) took the chair at 11:00.

The PRESIDENT read the prayers.

Motions

SYDNEY CBD STABBING

The Hon. NATALIE WARD (11:02): I seek leave of the House to amend private members' business item No. 182 outside the order of precedence for today of which I have given notice by omitting paragraph 1 (d).

Leave granted.

The Hon. NATALIE WARD: Accordingly, I move:

1. That this House notes that:
 - (a) on Tuesday 13 August 2019, a stabbing attack in Sydney's CBD saw a 41-year-old woman stabbed and Ms Michaela Dunn found deceased;
 - (b) despite the high potential for personal danger, in the Australian tradition of bravery and mateship a number of brave and selfless lunchtime city workers, firemen and bystanders did not just stand by; and
 - (c) demonstrating heroism and sheer bravery those new heroes did not hesitate but stepped in when terror struck and stopped the attack, thereby preventing further injury and potential death.
2. That this House acknowledges and thanks:
 - (a) the bystanders who stopped the attack, the firemen at the scene who stepped in, the paramedics and the NSW Police Force for their professionalism in the face of chaos;
 - (b) the following bystanders who stepped in:
 - (i) Mr John Bamford (otherwise known as "chair man");
 - (ii) Mr Luke O'Shaughnessy;
 - (iii) Mr Paul O'Shaughnessy;
 - (iv) Mr Alex Roberts; and
 - (v) Mr Lee Cuthbert.
 - (c) the following firefighter heroes:
 - (i) Mr Mitch Bennetts;
 - (ii) Mr Gonzalo Herrera;
 - (iii) Mr Mike Stuart; and
 - (iv) Mr Bennett Gardiner.

Motion agreed to.

Documents

NSW LAND AND HOUSING CORPORATION CONTRACTS

Production of Documents: Order Amended

Mr DAVID SHOEBRIDGE (11:03): I move:

That the resolution of the House of 8 August 2019 under Standing Order 52 relating to NSW Land and Housing Corporation contracts for public maintenance and planned works be amended by:

- (a) omitting "14 days" and inserting instead "21 days";
- (b) omitting "Housing NSW or the Department of Family Community Services" and inserting instead "NSW Land and Housing Corporation or the Department of Planning, Industry and Environment"; and
- (c) omitting "January 2017 to December 2019" and inserting instead "December 2015 to the date of the passing of this resolution".

Motion agreed to.

TABLING OF PAPERS

The Hon. SCOTT FARLOW: I table the following paper:

Industrial Relations Act 1996—Report of the Industrial Relations Commission of New South Wales for year ended 30 June 2018.

I move:

That the report be printed.

Motion agreed to.

*Irregular Petitions***REPRODUCTIVE HEALTH CARE REFORM LEGISLATION**

The Hon. ROBERT BORSAK: I move:

That standing and sessional orders be suspended to allow the presentation of an irregular petition from 41,000 citizens of New South Wales requesting that the House reject the Reproductive Health Care Reform Bill 2019.

Petition received.

The PRESIDENT: I indicate to members that the Chair alone gives the member the call. When the Chair gives the member the call, I do not require other members to explain why I have made the wrong decision. I called the Parliamentary Secretary.

*Petitions***PETITIONS RECEIVED****Reproductive Health Care Reform Legislation**

Petition requesting that the House reject the Reproductive Health Care Reform Bill 2019 on the basis that the bill will place mothers and their unborn babies at risk by increasing access to abortion, places no effective restrictions on late term abortion and imposes an unwarranted legal obligation to facilitate abortion through referral, received from **the Hon. Scott Farlow**.

Reproductive Health Care Reform Legislation

Petition requesting that the House reject the Reproductive Health Care Reform Bill 2019 on the basis that the bill will place mothers and their unborn babies at risk by increasing access to abortion, places no effective restrictions on late term abortion and imposes an unwarranted legal obligation to facilitate abortion through referral, received from **the Hon. Robert Borsak**. [*During the giving of notices of motions*]

*Notices***PRESENTATION**

The PRESIDENT: Order! I indicate to members that just because the Deputy President was the first to interject, followed by the Assistant President immediately thereafter, that should not in any way indicate to members that they can all interject as well. I will call the Deputy President and Assistant President to order if they continue to interject.

*Rulings***TAKE NOTE OF ANSWERS TO QUESTIONS**

The PRESIDENT (11:15): Yesterday I reserved my rulings on two matters. During debate on the motion to take note of answers to questions, points of order were taken during the contributions of three members: the Hon. Tara Moriarty, the Hon. Walt Secord and Minister Taylor. Consistent with my ruling during the last sitting week, I sought to ensure that my rulings took up the least possible time—members have three minutes in which to make their contributions to the debate—and I reserved my rulings until I could read the transcript. Upon reviewing the transcript I advise as follows: Whilst the majority of the Hon. Walt Secord's contribution was in order, it did make an imputation about the Leader of the Government and it was appropriate that I uphold the point of order taken in that regard. The contributions of the Hon. Tara Moriarty and Minister Taylor were, however, both in order.

MEMBERS' SOCIAL MEDIA USE

The PRESIDENT (11:17): Yesterday at the end of question time a point of order was taken by the Leader of the Government that the Hon. Rose Jackson had reflected on a ruling of the Chair in a tweet on her Twitter account, @RoseBJackson. I have examined the tweet. I understand that it appears to have been meant as

a political criticism of the Government for taking a point of order on her question to the Minister for Mental Health, Regional Youth and Women. However, by stating that the question was "shut down" and ending with the word "shameful", the tweet does in fact reflect on me and my ruling, as well as the Leader of the Government in taking a point of order. The implication is that as Chair I worked with the Leader of the Government to shut down the member.

The issue of members tweeting comments during question time has arisen in other jurisdictions. In December 2012 the Standing Orders Committee of the Legislative Assembly in Victoria tabled a report entitled *Report into use of social media in the Legislative Assembly and reflections on the Office of the Speaker* after a member used Twitter to accuse the Speaker of bias. The committee concluded that the existing rules on reflections on the Chair were sufficient to cover newer forms of communication such as social media. A similar issue arose in the House of Representatives. On 13 March 2013 Speaker Burke ruled the following:

Any use of social media by members reflecting on any occupant of the chair that comes to my attention, would be dealt with as any other comment made outside the House that reflects on the chair; as an important matter of order.

I agree with that conclusion and remind all members that reflections on the Chair are disorderly, unless done by substantive motion or by dissent, which are the appropriate forms. I also remind all members that comments made about question time on social media are not protected by parliamentary privilege. As the member is new to the Legislative Council I will not call her to order in this instance—

The Hon. Taylor Martin: Special privilege.

The PRESIDENT: I call the Hon. Taylor Martin to order for the first time. I would not want to be accused of giving him special privilege. I will start again. As the member is new to the Legislative Council I will not call her to order in this instance, but request that she remove the tweet. I encourage all members to avoid reflecting on me or other members while participating in parliamentary proceedings.

Bills

REPRODUCTIVE HEALTH CARE REFORM BILL 2019

Second Reading Debate

Debate resumed from 20 August 2019.

The Hon. SCOTT FARLOW (11:19): Four years, three months and 16 days ago, I stood in this very place and delivered my inaugural speech. In the President's gallery sat my wife, my son and my daughter. Nobody saw my daughter at the time. I did not even dare mention her in my speech. But on that day my wife was five weeks pregnant and she was not sitting there alone. After two unsuccessful pregnancies, one ectopic and one ending in miscarriage, my wife and I have experienced the fragility of life and its formation, the tragedy and the heartache that it brings. We had just that morning had a scan and seen Colette's perfect heartbeat and were filled with optimism that we would add to our family. As appalling as some may find it, a heart beats at four weeks. Thankfully I have the freedom to say that in this place, even if it cannot be said on a bus. In my inaugural speech I said:

Together Penny and I have created what will always be our greatest achievement, our son Christian, whom I love more than words can describe. I hope and pray that he will never be alone.

Those prayers were prayers for our daughter Colette. The hope that she would develop in the womb and join our world as a happy, healthy, smiling, albeit screaming baby. Two months later we went on holidays. Our photo frames around the house highlight those pictures and Colette will always ask, "Where am I?" And she answers her own question, "I know, I was in mummy's tummy." And she is right. It was not an organism, a clump of cells, it was her. It was during that trip, laid up in the hotel, at 14 weeks' gestation that I felt Colette's first kick and realised for the first time the little dancer she was to become.

My wife had felt flutters, much earlier. Her personhood started in the womb. That is the miracle of life. A miracle that all of us sitting in this Chamber are the product of. Both of our children were born premature, Christian at 35 weeks and one day, Colette at 35 weeks and two days. They both spent a week in neonatal intensive care with problems with their breathing and size, leading the paediatricians to plead with us never to do this to them again. Both were delivered by caesarean. I cannot see how the status of their personhood changed from their position in the womb to into the world. They may have relied on the umbilical cord in the womb but they were still people. I believe in their innate rights as human beings in the womb and in the world. I believe they have the right to life and that others, the most vulnerable in our society, deserve that protection too—which is why I cannot and will not support this bill.

Proponents of this bill push the catchphrase "my body, my choice". They claim that it is a "woman's right to choose". It has been said that men cannot proffer a view on this matter. So it is not my view that I proffer but

rather my wife's—a feminist and a woman who has been pregnant four times and carried two children to birth. These are the words and experiences of my wife, Penny:

I am a feminist and I am pleased to be a woman because of all that women can achieve. I grew up believing and fighting in the belief that girls can do anything. It's true we can. I thank the feminist movement for progressing the rights of women. That we aren't just baby making machines. It is something I have fought for throughout my life as a mother and a working mother. The feeling of pregnancy is different for everyone but most common in my experience of discussing motherhood with others is that feeling of carrying life.

When I was 15, a friend who I was born four hours apart from in the same hospital, had a baby. It was a total shock at the time. But I vividly recall her talking about the fact she knew she was pregnant even before it was confirmed. She said she had a sense of responsibility over her body which she had never felt before. She mentioned that walking across the street was now a much more measured process of assessment of risk to protect more than her life. I remembered this but didn't understand this until I fell pregnant myself. Many could view that at the age of 15, below the age of even legal consent, she should have considered an abortion. Instead my friend, back then, talked about life and the life that was living inside of her. My journey to understanding the benefit has been a long one and a journey I truly only appreciated when I became a mother myself. Having had two children though, seeing their baby image, feeling their kicks, I cannot separate out that these unborn children are human lives.

Some may deride my position as that of a conservative Christian. I have religious belief. I have stated that in this House from the moment I entered. The truth, however, that I acknowledge and do not shy away from the fact that I have, is that my views on this matter are more shaped by fatherhood than by religion. Seeing the first scan of your child, feeling their first kicks, watching them in their 3D scan and recognising that face from the womb when they enter the world, screaming and bloody, and of course hoping and praying at every turn for their survival—truly and purely appreciating the miracle and fragility of life.

Having children is an immense honour and privilege and it is a responsibility as well. For many who have undergone abortions their perspective is changed entirely when they do choose to fall pregnant. From those that I know that have had an abortion, every one of them has told me that their views on the matter changed entirely after they delivered a baby into the world. Many have believed, like those that have suffered miscarriage, that the soul has carried over to the child they have born. I do not pass any judgement on women who find themselves in the invidious position of an unplanned pregnancy and choose to have an abortion. I know that it is not a choice that most people take lightly, and it should not be one either.

I have known people who have undertaken abortions and none of them have undertaken the procedure and not been concerned by the decision, either at the time or later in life. The member for Mulgoa in the other place, a former Minister for Mental Health and Minister for Women, has eloquently outlined in her contribution the psychological impact that abortion visits on women. As a society we need to do better in providing support to these women and demonstrating that there are other options available. There is support available to continue a pregnancy, whether that be in keeping the baby or whether that be in putting the baby up for adoption. Unfortunately, our system at present is a single track that will provide the world for wanted babies and pushes a track of only abortion for those babies that are unwanted. This bill will only enforce that track.

Much has been said in this place and the other place about the stigma of these procedures being included in the Crimes Act. There is no evidence that has been provided from other jurisdictions with similar legislation to the one proposed here, that there is a reduction in psychological harm that stems from such a legal move. The only measure by which we can reduce psychological harm is by reducing the number of abortions that are undertaken. There are 80,000 undertaken in Australia. I have heard estimates in this place and in the other from proponents of the bill outlining that there are anywhere between 20,000 and 38,000 in this State every year. That is why we need a requirement for data in this bill—I will be supporting amendments to this effect in the Committee stage. I quote from the story of a father, who outlined his daughter's pregnancy at 18. He writes from his experience:

I also remember taking her to the doctor to get the results of her blood test. I will never forget how the female doctor, who also had a daughter of the same age, tried several times to convince her simply "take this tablet" and it will all go away. My daughter said with conviction "I made one mistake, I will not make another." The doctor stared at us in disbelief. I am so very proud of my daughter and her decision to keep her unborn child. Her dreams of becoming a school teacher are on hold now, a small sacrifice so she can put the life of her son before her own. That accords similarly to the experience my wife had when she was 20 and supported a friend through an abortion. These are not my words but the words of my wife, Penny: At the time I did not have a concept of what was really inside of her. I remember the referring doctor describing to the pregnancy as merely "cells". There were no other options presented except for abortion. I recall being in the waiting room with a range of different people. One woman there with her father urging her to go through with it. One with her boyfriend and I can recall a woman sitting quite casually as if to divorce herself from that room flicking through a magazine. I have often thought about this time and the support I gave my friend, as society's failure to support her as a woman. I say this now having had my own children and to know what it feels like to have a living being inside of me at 12 weeks.

Some proponents of the bill have justified its short passage through this place on the basis that there has been 119 years for people to make up their mind on this legislation and everyone already has a view. The proponents of the bill have said that there are no complications in the bill—none. It is simple. It is straightforward. We have been told, "For those arguing for amendments to the bill, I say categorically, those amendments are not required."

Through the amendments moved by the bill's co-sponsors in the other place, we have already seen that that simply is not the case.

I concede that there is community support for the decriminalisation of abortion. If the bill simply did that and codified the existing arrangements, then community opposition would not be so widespread. I will even agree with the polling commissioned by The Greens that found 73 per cent support for the proposition. I am open to abortion being dealt with outside of the Crimes Act. I and most members of this place who are opposed to the bill have not sought to change the current arrangements. The bill is not simply codifying the current arrangements. It is not just correcting a clerical error. The public does not see abortion as a black-and-white argument. They have a fairly complex view on where laws surrounding abortion should sit and they do not fit neatly into either a pro-life or pro-choice characterisation. Polling undertaken by Galaxy, commissioned by Abortion Rethink, shows that the following about the people of New South Wales: 74 per cent do not support late-term abortions past 23 weeks; 60 per cent oppose mid-term abortions past 13 weeks; and 83 per cent oppose sex selective abortion. All of those things are allowable under the bill before this House.

However, 61 per cent of the people of New South Wales do support conscientious objection, 80 per cent support a two- to three-day cooling-off period and 90 per cent believe a woman should have the right to independent counselling from a source that has no financial interest in her decision. None of those are captured sufficiently in the bill and I foreshadow that I will be moving amendments in the Committee stage that will attempt to address some of the failings. There has been no overwhelming public sentiment crying out for this legislation in such a manner. In New South Wales, 48 per cent of people believe that the current law is about right. Only 16 per cent believe that the current law is too restrictive. The proponents of the bill like to describe this legislation as archaic; a regime in a 119-year-old Act. If that is the argument, we had better throw out the entire Crimes Act 1900 and let us not forget the Constitution Act of New South Wales 1853, which is now more than 166 years old.

It is a furphy to say that this law is 119 years old and that a woman or a doctor can be held liable for a criminal offence for procuring or performing a termination. If that were the case, my wife could have been held liable for an offence in undergoing a termination with our first ectopic pregnancy, where she had to go through two rounds of Methotrexate. The truth of the matter is that since 1971 the law in this State has not prohibited abortions. What the law does is prohibit "unlawful" abortions. The test as developed from the decision in *R v Wald*, or the Levine decision, held that a lawful abortion required the consent of the patient; that the termination was skilfully performed by a qualified medical practitioner; and that the termination was necessary to preserve the woman's life, physical or mental health. *CES v Superclinics Australia* in 1995 further expanded that definition of health to allow for the consideration of economic, social and medical circumstances, during or after the course of the pregnancy. This is a fairly liberal regime already, which is why there is no overwhelming public call for the laws surrounding abortion to be further liberalised in this State.

This legislation does far more than simply codify the current arrangements, which is why it opens the door to abortions on the grounds of sex selection and disability, purely because an abortion can be undertaken for any reason or no reason under proposed section 5 of the bill. You would think if you were simply decriminalising abortion you would pick up and implement the current restrictions that are imposed at common law. Rather, this is all dispensed with under the bill for terminations of less than 22 weeks gestation, which is more than five months. While terminations in New South Wales under the NSW Health Pregnancy—Framework for Terminations in New South Wales Public Health Organisations are assessed with respect to three classes determined by the age of gestation—those being less than 13 weeks gestation, 13 to 20 weeks gestation and more than 20 weeks gestation. This is not reflected in the bill. It only differentiates between terminations at less than 22 weeks and greater than 22 weeks—an arbitrary line that picks up the practice in other States and not the current law in New South Wales.

The community has significant concerns about the prospect of late-term abortions, as do I. Where terminations after 22 weeks are permissible in other jurisdictions globally, they are largely matched with very restrictive conditions. In this legislation, the restriction around abortions after 22 weeks is only that they are performed by a specialist medical practitioner, with the consultation of one other and that they consider all relevant medical circumstances and the "person's current and future physical, psychological and social circumstances". This is not a sufficient standard for the termination of a fetus that is of viable age. I say that because there are babies that have survived at less than 22 weeks. Terminations at such a late stage of pregnancy should be governed by much stronger restrictions. To pick up the terminology of the member for Pittwater in the other place, there are growing and competing rights of the mother and unborn baby as the gestational age increases. This is not a sufficient restriction to pick up those rights of the unborn child. I will be supporting amendments to try to improve the bill in that regard to increase restrictions around late-term abortions and to constrict them to only situations where they are necessary.

Under the bill there is no criminal sanction for any medical practitioner; they are completely excluded. I can understand why that is the case in the performance of a termination within the remit of the legislation, but they are immune from any criminal penalty under the bill. That means that a medical practitioner can undertake a termination on a woman without complying with the terms of the bill, such as something as grievous as not gaining consent, and bear no criminal penalty. Criminal liability under the bill in division 12 only attaches to the termination of a pregnancy performed by an unqualified person. Any common law offences are also extinguished by schedule 2.1 [4] to the bill. These are provisions that do nothing to protect vulnerable women.

Another significant objection and concern I have with the bill is the provisions that relate to conscientious objection of medical practitioners. Medical practitioners have contacted me with respect to the provisions in the bill. They have ranged from obstetricians, gynaecologists and general practitioners expressing concern with the provisions. Those practitioners have told me their belief is the requirement to refer to a medical practitioner that they believe will perform an abortion will make them complicit in the process. The submission of the Christian Medical and Dental Fellowship of Australia to the social issues committee inquiry concerning clause 9 reads:

Many practitioners with conscientious objection to abortion would agree that effective referral would make them complicit in the act, therefore removing any right of conscientious objection from this Bill. This clause should be deleted.

It is recommended that legislation only require healthcare practitioners to respectfully inform patients about their conscientious objection and inability to refer for abortion, with no further requirement to act. Healthcare practitioners with a conscientious objection to abortion should be protected against professional disadvantage as a result of their conscientious objection.

We have heard many members talk about the Australian Medical Association submission. When you look at who will be raising conscientious objections, I would have thought that the Christian medical practitioners would be the ones that you would turn to first to see if their fears with respect to conscientious objection were realised in the bill and that their concerns were taken into account. General practitioners in particular have expressed that concern to me, as they believe they are the most exposed under this legislation. I will be supporting amendments, similar to those moved by the only medical doctor in this Parliament, Dr Joe McGirr, to address those concerns.

I thank all of the communities across New South Wales, particularly the communities of faith, that have mobilised and expressed their position on the bill. We have seen the Hon. Robert Borsak this morning upping the numbers to more than 80,000 signatures on petitions against the bill. This is a piece of legislation that was sprung on the people of New South Wales. It is my belief that the urgency with which this process has been embarked upon has further fuelled passion and grievances in this debate and further fuelled a feeling of isolation, particularly from religious and faith communities. That is not to mention the limited time with which people have had to examine and have input into a bill of this gravity. I particularly thank members of the Liberal Party, both opposed to the bill and supportive of it, who have contacted me about it. Whatever their views, I have appreciated their feedback. As their representative in this place and in line with the views espoused by Edmund Burke to the electors of Bristol, I owe them not just my industry, but my judgement. That judgement leads me to oppose this bill and I implore other members of this place to do likewise.

The Hon. TAYLOR MARTIN (11:39): We are told by the proponents of the Reproductive Health Care Reform Bill 2019 that it will simply decriminalise abortion in New South Wales, although for almost 40 years abortion in and of itself has not been a crime here. Only unlawful abortion has been a crime—a common misconception that has given rise to the opportunity not only to remove abortion from the Crimes Act but also to codify other factors relating to abortion under the guise of simple decriminalisation. It would give those additional factors the blessing of the newly elected Parliament and, unfortunately, the Government, which accommodated the expeditious introduction and almost immediate passing of the bill through the lower House. The bill not only decriminalises the act of terminating the life of a child but also takes abortion to an extreme point that is way beyond what the community considers acceptable. It does so while under the guise of "simply decriminalising" the act of ending a life.

People should take a moment to consider why abortion is the only medical procedure that requires its own Act of Parliament. No other medical procedure requires it. The reason is that it is the only medical procedure that seeks not to save or improve a life, but to end a life. The bill allows for late-term abortions with the approval of just a second medical practitioner. The bill provides for no-questions-asked abortion on demand for a child up to 22 weeks gestation. It would create the conditions for sex-selective abortions to take place in New South Wales with no possibility of a conviction for those involved. The bill provides no requirement for women to be provided with appropriate independent counselling—let alone alternative options to abortion, such as adoption. The bill does not provide protection for women who are coerced into having an abortion. The way that doctors with a conscientious objection to abortion have been treated through this process is beneath not only our democratic system but also our society.

I do not believe that the case for this bill has been established. It is generally accepted that there are around 30,000 abortions in New South Wales each year. That means that since the turn of the century there has

likely been more than half a million abortions in New South Wales alone. You can count on one hand the number of people in that time who have been successfully prosecuted for unlawful abortions under the current law. It is my firm belief that where those prosecutions have occurred, they reflect the community's expectations around abortion. The community expects that people who self-perform abortions—with or without drugs—and doctors who perform dangerous late-term abortions will be held accountable for their actions. In 2017, when this House was considering a bill that would enable euthanasia in New South Wales, I said:

It is our obligation as legislators to objectively consider all outcomes and to strive to investigate to the best of our ability all unintended consequences that [will] arise.

I was reminded of that very thought when I read the transcript of last week's hearings on the bill by the social issues committee and particularly the evidence given by Rabbi Schapiro, who said:

Any bill should be viewed in light of the extremities to which it might be taken. The bill we are discussing today would allow abortion on demand for any reason that someone desires, because ... for medical reasons the present law allows for abortions, for the life of the mother and so on. ... the present bill will allow abortion for any reason desired—if it gets in the way of a person's education, career or, in extreme cases, if I do not like the gender or even the eye colour, if it were able to be known, and it soon will. If it does not suit me, I can abort. This will cause a flippant view of life in an age where we see a devaluation of life ...

He went on:

We need to strengthen, not weaken, the sanctity of life.

While I do not share the rabbi's Jewish faith, I certainly agree with his observations on the need to recognise and strengthen—

The Hon. Penny Sharpe: You want to watch video games, do you?

The PRESIDENT: Order! I have made it very clear that members should be heard in silence. I congratulate members on the fact that that has occurred to date, and I expect it to continue.

The Hon. TAYLOR MARTIN: Penny, I have not interjected during any other member's speech.

The PRESIDENT: Order! The member will proceed with his contribution.

The Hon. TAYLOR MARTIN: I certainly agree with the rabbi's observations on the need to recognise and strengthen the sanctity of life and not to weaken it. This bill has attracted huge community interest—certainly more than any other bill during my time in this place. There is huge concern with the extreme possibilities that the bill sanctions. Last week I was sitting in a hearing into the use of battery cages for hens in the egg production industry, which is an inquiry into the welfare of animals. Organisations and members of the public were given more than five weeks to get their submissions together. The hearings were not rushed. The inquiry has received thoughtful contributions from all sides of the argument—including, importantly, a government contribution. The committee will consider the report in late October, meaning that the inquiry will have had a running time of almost five months. That is in stark contrast to the inquiry into this bill, which lasted barely five days.

While on the topic of last week's hearings into the bill by the social issues committee, on Monday the Hon. Greg Donnelly brought to the attention of many members that while that committee took evidence over three days last week, not a single government witness appeared: not a single representative from NSW Health—not even the chief obstetrician, whom the health Minister had referred to over the past two weeks when questioned on sex-selective abortions. On the same day, an inquiry into koala welfare had nine government witnesses give evidence. Why is it that the life of an unborn human is worth so much less to this Parliament than the welfare of a live animal? Maybe there just was not enough time; but that is kind of the whole point. We are told to just accept it: that because some clandestine "working group" of two members of the Labor Party, a Nationals MLC and an inner-city Independent MP came up with this draft bill, it is somehow untouchable when it comes to amendments. It is like the immaculately conceived private member's bill—only it is not.

New South Wales deserves better than a copy and paste job from Victoria or Queensland. It is not a compliment for this bill to be compared to the versions in those States. At the very least, the people of New South Wales deserve to be listened to and consulted. They deserve to be treated with enough respect to have the conversation, rather than ramming the bill through and hoping there will not be too much political damage because the member for Sydney's name is on it and Government members are simply co-sponsoring it. We did not give the public the proper chance to have their say on the bill, and I suspect they will simply have their say at a later date. It will not be forgiven or forgotten by the people who care about this issue. Their opinion is important, and they should not be ignored by those—particularly in this place—who believe they are morally superior to everyday Australians who have been blindsided by the introduction and rushing of this flawed bill through this place.

The view that abortion should be decriminalised is widely accepted in the community. Most people want women to be able to access abortion without fear of prosecution or conviction. However, the community does not want abortion to be a free-for-all. They do not want abortion on demand, they do not want late-term abortion and they do not want sex-selective abortion. That is supported by the YouGov Galaxy poll conducted last weekend for the Australian Christian Lobby, which found that 83.9 per cent of people in New South Wales were against sex-selective abortion, while 7.5 per cent are undecided. Furthermore, 69.8 per cent of the more than 1,000 respondents to the poll were against abortion after 22 weeks. The bill codifies in law the termination of a pregnancy—the termination of a life. If enacted, it will become the only medical procedure that will have its own Act of Parliament: an Act that brings back the lawful use of the death penalty—the crime being an inconvenience or, in some cases, the wrong sex.

Under our watch we have allowed, and in some part actively sponsored, this half-baked, weak piece of legislation which will result in the unnecessary deaths of many in order for some members to be able to say that they progressed change—that they decriminalised something which was not even a crime, and that they took no prisoners while doing so. There was no consultation, no consideration of sex-selection abortions, no consideration of pain felt by the unborn child, no consideration of the child who may remain alive after an unsuccessful termination, and no consideration of the pain felt by the mother who was coerced into something she did not want.

The bill does not even give consideration to the fact that it is a woman who goes through the process. The word "woman" is conspicuously missing from the bill, which only uses the word "person". I acknowledge the members of the public and those organisations that have raised with me privately, or raised publicly, the problems with this bill. One major issue that I simply cannot accept is the attitude that this Parliament is taking towards life—that if you are wanted, and you unfortunately die in utero, that is a sad event, and your life mattered; but if you are an inconvenience and not wanted, and you die in utero because somebody exercises their "right" to choose to terminate, well that was simply a choice and your life somehow did not matter.

It would be an incredible shame if this bill was to pass this House in its current form. It is clear that the proper consultation that should occur prior to a bill being introduced has not occurred, and that is why there is such outrage in the community over the way it has been handled. The limited consultation that has happened to date has raised significant problems that will occur if abortion is removed entirely from the Crimes Act. For the reasons I have outlined today, I oppose the bill.

The Hon. SHAOQUETT MOSELMANE (11:52): The intention of the Reproductive Health Care Reform Bill 2019 is to decriminalise abortion and bring the State into line with the rest of the country. Let me say at the outset that I respect all parties and all individuals involved in the debate in Parliament and outside. I believe all the participants in the debate are sincere and have good intent, irrespective of where they stand on this issue. Many have made powerful arguments, and I have had to change my speech as I listened to them. I had to delete some sections of it, particularly after I heard the contribution of the Hon. Trevor Khan. But as the Hon. Trevor Khan noted, members' views are based on what their consciences tell them, and I will make my remarks based on my conscience.

As a member I have made a conscientious decision but I am not judging others. That is our job and our responsibility in this House. I can do nothing more than make a decision today that is based on my conscience. In this debate much has been said about the right of women to control their bodies. No-one doubts the right of women to have control over their bodies and their reproductive health. I believe that women should have access to the best available health care, irrespective of what the health issue is. As legislators we must take all steps to provide the best possible medical care to mothers—especially the poor, the needy and the underprivileged. When it comes to abortion, no woman makes her decision lightly. This is why there should always be more than sufficient support in place to ensure that the best health care is provided when a termination of pregnancy is requested or required.

The bill as proposed has a number of significant shortcomings. I do not intend to go through them other than to note three key issues. Firstly, the bill as it currently stands does not prevent sex-selection abortions. No civilised society would or should allow gender selection. That is simply abhorrent, and it must be rejected. Secondly, there is nothing in the bill to protect doctors who, for whatever reason, object to abortion. The bill as it stands would force doctors with a conscientious objection to refer women to other doctors who will perform the procedure. We should not be forcing doctors to terminate life against the Hippocratic oath to do no harm. Doctors' religious or ethical freedoms should at all times be upheld, respected and enforced.

Thirdly, I have concerns about late terminations. I find this unacceptable. By 22 weeks the fetus is really a baby and it can be born and live a full life. I do not accept that abortion on demand for any reason, or for no reason at all, should be allowed. What I also find unconscionable is that babies born alive as a result of a failed abortion would be denied life-sustaining attention and left to die on a side table. In all conscience I cannot vote in support of this. I heard the Hon. Trevor Khan on this but I need to be reassured that protections will be added to the bill to ensure that it will not be allowed to happen. If the intention of this bill is to allow qualified doctors to

legally perform an abortion to preserve a woman's life or her mental or physical health, or to perform abortions in cases of possible fetal abnormality, I can understand it, but I do not support the concept of late-term abortion on demand.

Abortion is horrific. One should never accept the scenario where all you need to do is to tap your credit card to abort a child—tap and go. In all conscience, I cannot agree with this concept of privatisation of life and death. Life is not a commodity or a consumer product one can dispose of at will. No-one in our society, secular or religious, lives in isolation. We are all part of communities that bind us together as a society of human beings. We live in a rules-based society. In this place we are elected to make rules to guide our society. We have rules at home, rules in the community and rules in this House. For reproductive health care to work there have to be some rules around it. I support decriminalisation but there have to be rules that are acceptable to society. I fight for the underprivileged, the underdog, the poor, the needy and the down-trodden. I am always fighting for workers and for the working class. Every day I stand up for them in their struggle to gain better lives. How could I not stand up for the voiceless? How could I not fight for someone's right to life? In all conscience, I cannot support this bill. I will therefore vote against it.

The Hon. WES FANG (11:57): Last night, when I sat down to pen my speech I planned for it to be short. The Reproductive Health Care Reform Bill 2019 is fundamentally about whether abortion should be part of the Crimes Act 1900 or not. It is on that basis—and that basis alone—that I support the bill. I do not believe that abortion should be part of the Crimes Act 1900. I believe that that is the only issue that needs to be addressed here. Issues around late-term abortions and gender selection have been raised, and we will deal with those in the Committee stage of the bill. The fundamental question for me was whether I supported the bill because it removes abortion from the Crimes Act. I do.

However, I reflected last night on some of the contributions to the debate and a quite shameful political attack in the context of this sensitive topic. I think the contribution of the Hon. Robert Borsak last night was quite shameful. The way that he attacked The Nationals in this debate on a very serious topic was unbecoming.

The PRESIDENT: I remind the Hon. Wes Fang that it is inappropriate to make imputations against another member. A member may indicate whether he agrees or disagrees with another member, but the Hon. Wes Fang is going far beyond that. I ask that he cease doing so.

The Hon. WES FANG: I disagree with the Hon. Robert Borsak's description of the Government as being tricky. He said that the majority of The Nationals in the other place voted to support the bill. And he is correct, but it is certainly a failure of the member to point out that every single member of the party that he leads, the Shooters, Fishers and Farmers Party, voted for the bill. Every single one, 100 per cent of them, supported it. I believe the member has thrown those lower House members under a bus. It was quite telling that not one of the cabal of 15 people at the press conference yesterday who had an issue with the vote was a lower House Shooters party member. To come into this House and attack the Nationals party members in the other place for having supported the bill as a majority when his own party, the party that he leads, 100 per cent supported the bill—

The PRESIDENT: Order! According to sessional order, proceedings are now interrupted for questions.

Questions Without Notice

MENTAL HEALTH SERVICES

The Hon. ADAM SEARLE (12:00): My question is directed to the Minister for Mental Health, Regional Youth and Women. Given Bureau of Health Information data released this morning shows a crisis in mental health related emergency department presentations, with an 18 per cent increase in mental health related presentations, 40 per cent of mental health patients now waiting longer than four hours in emergency departments and 30 per cent of mental health patients waiting longer than clinically recommended times, what steps has the Government taken to reduce those waiting times?

The Hon. BRONNIE TAYLOR (Minister for Mental Health, Regional Youth and Women) (12:01): I thank the member for his question where he refers to the report that came out from the Bureau of Health Information [BHI] yesterday. We welcome the report and the data that it gives us. To a few points that I found in the report, almost all adults with a mental health issue in New South Wales had a regular care provider and the majority reported positive experiences. Adults in New South Wales mental health are more likely than those in comparative countries to discuss their worries and stresses with their regular care provider. This speaks to what a fantastic job we have done in our reform process in destigmatising mental health. Because of that destigmatisation of mental health we are seeing an increase in people putting their hand up to access services and access help. I think that is actually a very positive thing when we talk about that—

The Hon. Walt Secord: Point of order: The member has clearly misunderstood the question. The question refers to the BHI report released this morning. She is clearly referring to something else.

The Hon. Trevor Khan: To the point of order—

The PRESIDENT: I indicate to Government members that I will decide whether it is a point of order or not. Speaking to the point of order as the Deputy President is doing is correct, not screaming across the Chamber.

The Hon. Trevor Khan: You will be unsurprised to hear me say that was not a point of order. It was self-evidently a debating point.

The Hon. Walt Secord: To the point of order: I should have said that my point of order goes to relevance. I ask that you direct the Minister to be directly relevant. I apologise.

The PRESIDENT: As the Hon. Walt Secord did not do that, but did something else, there is no point of order. I believe that the Minister is being directly relevant to a number of parts of the question—a lengthy question that raises quite a number of matters in its preamble, if I can use that term. The Minister has the call.

The Hon. BRONNIE TAYLOR: The New South Wales Government, as members know, as I have said numerous times, has invested a record \$2.2 billion into mental health services and infrastructure for people living with mental illness. I know that the honourable member in his question specifically asked about emergency presentations. Members know that emergency departments are not the most ideal place for people to present in any circumstance—you present to an emergency department when you have an acute onset of your illness. The Government is also investing over \$25 million through its suicide prevention plan to look at different avenues for mental health consumers to be able to access different models and different types of places where they can go as a first point of call.

I also draw the attention of the House to the fantastic work that is happening at St Vincent's Hospital in this space, where they are completely redesigning their emergency department, specifically looking at the presentation of mental health clients to that emergency department so that they can look at a more appropriate continuum of care for them. I am really excited about the work that I am seeing at St Vincent's in this space and I would encourage all members in this House with an interest in mental health to have a look at that. It is a model we will watch closely. It is a model that looks at acute intervention but also at step-down and step-up services as well. That is another thing that the Government is doing.

I also note the great work that the nurses and specialists are doing. The doctor at St Vincent's has been working on this model of care for over a decade and now we are seeing that come to fruition. That is a direct response to looking at how we can make our mental health system much stronger. I also draw the attention of the House to the Mental Health Act 2007, which is based on a principle of least restrictive care, which was introduced and passed in this House and was something that everyone agreed on. That is what we really need to look at—we need to look at that— *[Time expired.]*

ARTS AND CULTURAL SECTOR

The Hon. TAYLOR MARTIN (12:05): My question is addressed to the Special Minister of State, and Minister for the Public Service and Employee Relations, Aboriginal Affairs, and the Arts. Could the Minister update the House on how the Government is leveraging arts and cultural leaders to support the arts and cultural sector in New South Wales?

The Hon. DON HARWIN (Special Minister of State, Minister for the Public Service and Employee Relations, Aboriginal Affairs, and the Arts, and Vice-President of the Executive Council) (12:05): I was absolutely delighted to announce last week the establishment of 10 new Artform Advisory Boards, which will leverage the expertise of arts and cultural leaders across the sector. They are drawn from a diverse pool of artists, small and medium organisations and cultural institutions from all over Sydney, western Sydney and regional New South Wales, with more than 300 expressions of interest. Indeed 40 per cent of the board members have been drawn from western Sydney and regional New South Wales. I repeat: 40 per cent.

From Jamie-Lea Trindall, who is at Outback Arts, who will be advising on Aboriginal arts and culture—and who I had the pleasure of visiting last week in Coonamble—to young leaders like Casey Green, currently a producer of classical music at the Sydney Opera House, the boards represent the diversity of the arts and cultural sector in this State. I could also add Ryley Gillen, a 26-year-old artistic director of an orchestra who was in *Illawarra Mercury* this morning saying:

It has the potential to really make a big difference ... It's going to allow a lot more things to come to life and not slip through the cracks.

The Hon. Walt Secord: How about Richard of Bathurst? How about Richard of Bathurst? How about Richard of Bathurst?

The PRESIDENT: I indicate to the Hon. Walt Secord that that was his three; number four and he is out. I will call the member to order if he makes one more interjection. I gave him three interjections without calling him to order; I am not giving him a fourth. The Minister has the call.

The Hon. DON HARWIN: Our State's cultural institutions will play a leading role in the Artform Advisory Boards with the Australian Museum's director and chief executive officer, Kim McKay, chairing the Museums & History Board and the Sydney Opera House's head of contemporary music and Vivid LIVE festival director, Ben Marshall, chairing the Contemporary Music Board. They have enormous experience and insights to bring to this new process. The new Artform Advisory Boards will play a significant role in assessing the merits of funding proposals across each of the art forms. This will not only inform strong recommendations for funding but will also provide consistency, stability and a strategic approach in funding for the New South Wales arts and culture sector—and that is why this change is taking place. I formed the view that sector leaders like Liz Ann MacGregor were right when she said:

I'm not a fan of the peer review system. There is no consistency in approach and it's full of flaws.

The boards will also be tasked with providing strategic advice to government to help shape policies and identify opportunities to grow and promote arts and culture across the State. I am really excited about what a huge difference this new approach is going to make to the excellence and impact of the arts in New South Wales. I thank the Hon. Taylor Martin for his question—no doubt he will be interested to note that the former director of the Maitland gallery, Brigitte Uren, is one of the new advisory Artform board members.

MENTAL HEALTH SERVICES

The Hon. PENNY SHARPE (12:09): My question is directed to the Minister for Mental Health, Regional Youth and Women. What is the Minister's response to statements by the Australasian College for Emergency Medicine President Dr Simon Judkins who said that doctors are "seeing patients across the system spending three, four or five days in emergency departments" and that it is "effectively inhumane to expect patients to wait for more than a day in emergency departments"?

The Hon. BRONNIE TAYLOR (Minister for Mental Health, Regional Youth and Women) (12:09): I thank the Hon. Penny Sharpe for her question. I did see those comments made by the doctor and he is entitled to his opinion in that area. The New South Wales Government has launched an investment of \$87 million over three years to implement the *Strategic Framework for Suicide Prevention in NSW 2018-2023*. I talked about that before in the sense that of that money \$25 million has been specifically allocated to look at mental health patients presenting to emergency departments [EDs] and how we can perhaps reframe that and look at different models of care used in other places. New South Wales is committed to delivering mental health care in the least restrictive environment, which in most cases will be community care. We are continuing to support more care into the community through the NSW Mental Health Reform.

Work is being done to improve the time that people spend in the emergency department. Many people when they are presenting for a mental health issue into the emergency department have very complex needs. It is often not just a mental health issue that they are being assessed for but their physical needs as well. We need to support the fact that these expert clinicians are doing holistic, multidisciplinary assessments that are sometimes very complex and require time. Mental health patients presenting to EDs can have a range of highly complex medical needs and obtaining an accurate assessment takes time, as I said.

It also involves obtaining a corroborative history from families and carers who might not be with the patient at that time. We must continue to do better at reducing the wait times for anyone in an emergency department because 24 hours is too long. In the south-western Sydney and western Sydney context we are seeing extremely rapid population growth, which is placing a strain on our hospital system. But, for example, the \$632 million stage two Campbelltown Hospital redevelopment will include a significant expansion of mental health services and the new \$740 million Liverpool Health and Academic Precinct will include a new ED and enhanced levels of care. There is also \$25 million included in the Bankstown-Lidcombe Hospital emergency department redevelopment.

I also draw members' attention to the Western Sydney Local Health District which is trialling new ways to reduce ED presentations. This is a really exciting model. The Western Sydney Local Health District Mental Health Acute Assessment Team provides two mental health specialist clinicians working alongside paramedics to assess people in the community and facilitate access to care in the community, emergency department or inpatient settings. This service has now been shown to reduce the number of people presenting to emergency departments.

That is what this Government is looking at: new and innovative modes of care that will reduce those presentations and keep people as well as they can be.

The Hon. PENNY SHARPE (12:12): I ask a supplementary question. Can the Minister elucidate her answer. I listened very closely to her answer. In her answer she stated that "24 hours is too long" for people with mental health issues to be in emergency departments. She also talked about "holistic and multidisciplinary assessments". Will the Minister elucidate how long it is taking to do those assessments and if 24 hours is too long, why are we still getting too many patients that are there for three, four or five days?

The Hon. BRONNIE TAYLOR (Minister for Mental Health, Regional Youth and Women) (12:13): I thank the Hon. Peter Sharpe for her supplementary question. I did say that 24 hours is too long for a mental health patient to be in an emergency department and that every day we are continuing to make our mental health system stronger so that we can reduce that time. In terms of her comments about being a multidisciplinary, holistic assessment, absolutely our clinicians are doing a complete assessment.

The Hon. Penny Sharpe: How long does it take to do that?

The Hon. BRONNIE TAYLOR: That is a matter for the expert clinicians to answer, and as each—

The Hon. Penny Sharpe: Do you think it takes more than 24 hours?

The Hon. BRONNIE TAYLOR: Excuse me!

The Hon. Scott Farlow: Point of order: The Minister is giving the member an answer to her question. The member does not need to interject and continually re-ask the question.

The Hon. Mick Veitch: You might get this one.

The Hon. Scott Farlow: I might.

The Hon. Penny Sharpe: Yes, I reckon this one's in.

The PRESIDENT: As I reminded Government members I do not need them to rule for me, I do not need Opposition members to indicate whether they may or may not be right. It makes it harder for me. They are not helping me. At my discretion I allowed the Deputy Leader of the Opposition to ask a supplementary question. She asked an appropriate supplementary question and the Minister was being directly relevant in her answer. Interjections are disorderly at all times. I uphold the point of order. The Minister has the call.

The Hon. BRONNIE TAYLOR: When an individual with a mental health issue presents to an emergency department their issues are often complex, as I have said. That patient is assessed by expert clinicians. An expert clinician should be encouraged by those on all sides of the House to take as much time as they need to provide a proper and holistic assessment.

The Hon. Penny Sharpe: I am just asking how long it takes.

The Hon. BRONNIE TAYLOR: That is the answer.

SEXUAL VIOLENCE

Ms ABIGAIL BOYD (12:15): My question without notice is directed to the Minister for Mental Health, Regional Youth and Women. Given that it has been two years since the *Change the course: National report on sexual assault and sexual harassment at Australian universities (2017)* was released by the Australian Human Rights Commission, and that yesterday was the national day of action against sexual violence, can the Government provide an update on what it has been doing to address the sexual violence crisis occurring in our State?

The Hon. BRONNIE TAYLOR (Minister for Mental Health, Regional Youth and Women) (12:15): I thank Ms Abigail Boyd for her question. The Government is constantly working on issues in relation to this. I note that she mentioned specifics about a report that was done two years ago. As the question refers to a member in the other place I will take it on notice and seek more detail. I point out to the honourable member that this year the New South Wales Government took the positive step of joining Our Watch and that will enhance our ability to look at all of those issues.

HIGHER SCHOOL CERTIFICATE

The Hon. LOU AMATO (12:16): My question is addressed to the Minister for Education and Early Childhood Learning. How is the Government making sure that the Higher School Certificate remains a strong credential?

The Hon. SARAH MITCHELL (Minister for Education and Early Childhood Learning) (12:16): I thank the Hon. Lou Amato for his question. Last week marked the start of this year's Higher School Certificate

[HSC] with the commencement of the drama practical examinations. Drama is indeed an important part of our education landscape. It provides students with the opportunity to engage the mind, the body and emotions into a collaborative expression of all that it means to be human. I wish this year's drama cohort the very best as they progress through their HSC exams. I am sure that is the sentiment shared by all in this House.

The New South Wales HSC is offered in the Australian Capital Territory and by several international schools and is recognised in every Australian State as well as by prestigious universities in Europe, the United States, Canada and the United Kingdom. Since the first HSC in 1967, over 2.3 million people have received an HSC. It is truly a world-class credential. Over the past 50 years the HSC has changed to remain relevant. For example, it used to be 100 per cent based on examination results. Now, half of the final HSC mark is based on school assessment.

In 2016 the Government introduced the Stronger HSC Standards reforms. This resulted in 23 new syllabuses for English, mathematics, science and history, including a new science extension course for high-achieving students. Under these reforms, assessment requirements for all HSC courses have been streamlined to limit the number of formal assessment tasks students are required to undertake in each course. Most of the new syllabuses will be examined in the HSC for the first time this year in 2019. The calculus-based mathematics courses were released in 2017 and will be examined in the HSC for the first time next year in 2020.

I think it is also necessary to point out that the HSC is a mammoth logistical effort. The exams each year require 60 tonnes of paper, 7,000 boxes, 40,000 return envelopes, 50 tonnes of steel cabinets, 17,000 consignments tracked, 8,200,000 exam pages scanned and 51 kilometres of security wrapping. Yet year in, year out it runs smoothly. Largely this is thanks to the dedication of the thousands of teachers and volunteers across the State who devote their time to ensuring that our kids have the best chance possible of doing well in their HSC.

I acknowledge also the parents and caregivers of current HSC students because, as many members in this House would be aware from either their own personal experiences as parents or from the time when they were students, we all understand that the whole family lives the experience of the HSC and some people do this several times if they have a number of children. I know from the meetings that I have had and the letters I have received that the passion for the education of their children is real and it is important to acknowledge the support of families during the HSC period. I commend them for the support that they provide to their students and I wish all of our students doing the HSC the very best of luck.

SERVICES

Ms CATE FAEHRMANN (12:19): My question is directed to the Minister for Mental Health, Regional Youth and Women. Recommendation 6 of the Government's review of seclusion, restraint and observation of consumers with a mental illness in NSW Health facilities states that "NSW Health should have a single, simplified, principles-based policy that works towards the elimination of seclusion and restraint". Where is this policy up to and when will the use of seclusion and restraint be eliminated in New South Wales?

The Hon. BRONNIE TAYLOR (Minister for Mental Health, Regional Youth and Women) (12:20): I thank the honourable member for her question. I know she has a keen interest as she has moved a motion on this subject before. The safety and wellbeing of patients and staff are absolutely paramount in providing good, high-quality care. We are committed in NSW Health to reducing and, where possible, eliminating the practice of seclusion and restraint in mental health services across New South Wales. In 2017 the NSW Chief Psychiatrist and a panel of five local and international mental health experts undertook a statewide review into seclusion, restraint and observation of consumers in NSW Health acute units and declared emergency departments.

The review was an important opportunity to analyse the use of restricted practices, compare New South Wales with national and international standards and hear from consumers, carers and other stakeholders. The review included local and international evidence, a self-audit of practice, community consultations and site visits to 25 facilities, including consultations with more than 300 leaders and 300 frontline staff from acute mental health units and declared emergency departments. It also received more than 100 written submissions. The New South Wales Government released the review report on 18 December 2017. The report included 19 recommendations along the themes of culture and leadership, patient safety, accountability, governance, workforce, consumer and care engagement, data and the built and therapeutic environment.

The review also reported that seclusion and restraint events are associated with physical and psychological harm to both consumers and staff. New South Wales has developed an implementation plan to prevent the use of seclusion and restraint. The implementation plan includes 27 high-level public actions. All actions will be completed in 2019. As of 31 March 2019, 11 of these actions had been completed. The public phase-in implementation plan and accompanying seven facts sheets are available on the NSW Health website. All organisations with responsibility to carry out implementation actions have reported progress.

NSW Health will continue to work closely with a range of partners, including the Mental Health Commission of New South Wales, non-government organisations, peak bodies, health professional associations such as the NSW Nurses and Midwives' Association, and consumers, carers and families. Consumers, carers and families have vital contributions to make and will be partners in mental health service planning and decision-making. Each local health district and specialty network has worked with consumers, carers, families and staff to complete a local seclusion and restraint prevention action plan. NSW Health will closely monitor the implementation process, receive regular progress reports and issue public updates as objectives are reached. Monthly updates are publicly available on the website.

Ms CATE FAEHRMANN (12:23): I ask a supplementary question. Could the Minister please elucidate her answer in relation to the implementation action plan? She said that all actions will be completed by the end of 2019. My question asked: When will the use of seclusion and restraint be eliminated? Does that mean that seclusion and restraint will be eliminated by the end of the implementation plan she is referring to, by the end of 2019?

The Hon. BRONNIE TAYLOR (Minister for Mental Health, Regional Youth and Women) (12:24): As I said, we are working towards all the recommendations in the report. Just recently visiting mental health facilities you can actually see some of the results of the report coming through in increased funding for therapeutic environments which clinicians are clearly stating is reducing their use of seclusion and restraint, both chemical and physical. That is a really positive thing and is as a direct result of the review and the recommendations. As I said, we are looking to having all of those completed by the end of 2019.

The Hon. WALT SECORD (12:24): I ask a second supplementary question. Would the Minister elucidate her answer? In her answer she referred to patients in seclusion and being restrained three times as "customers". What did she mean when she referred to mental health patients as "customers"? She referred to "customers" three times in her answer. What did she mean? Three times she called them customers.

The PRESIDENT: Order! The member has asked the supplementary question. He does not need to keep repeating it.

The Hon. BRONNIE TAYLOR (Minister for Mental Health, Regional Youth and Women) (12:25): I have referred to mental health patients as consumers, so people who are using mental health services.

MENTAL HEALTH SERVICES

The Hon. TARA MORIARTY (12:25): My question is directed to the Minister for Mental Health, Regional Youth and Women. What steps has the Government taken to investigate reports that the man accused of the Clarence Street stabbing last week had spent hours waiting at an emergency room at Blacktown Hospital before absconding from the health system?

The Hon. BRONNIE TAYLOR (Minister for Mental Health, Regional Youth and Women) (12:26): I thank the honourable member for her question. Our thoughts and our prayers are with the deceased and the victims. As I have said, there is an ongoing police investigation and it is inappropriate for me to comment further. Whilst this is under police investigation there has to be extreme caution in making any assumptions or any comments. Let the police continue their investigation into the incident and the circumstances surrounding the incident. As with any critical incident, NSW Health will be reviewing all aspects of the care and treatment and will provide the outcomes of the review to both the Minister for Mental Health, Regional Youth and Women and the Minister for Health and Medical Research.

I commend the heroic actions of our fireys and our citizens who assisted in disarming the offender. All relevant agencies have been cooperating fully with that investigation and they will continue to do so. The Department of Communities and Justice, NSW Health agencies and the NSW Police Force communicate regularly and share information as appropriate under a range of circumstances. People in custody receive ongoing treatment and monitoring in custody according to their health needs. Due to patient confidentiality, which is very important, I am unable to divulge any further specifics about this matter.

REGIONAL YOUTH

The Hon. TREVOR KHAN (12:27): My question is addressed to the Minister for Mental Health, Regional Youth and Women. Will the Minister update the House on how the Government is approaching the Regional Youth portfolio and connecting with young people in regional New South Wales?

The Hon. Mick Veitch: Point of order: Mr President, you have previously ruled on people interjecting across the Chamber at question time when members ask questions. The Hon. Taylor Martin has just interjected on the Hon. Trevor Khan and I ask that you call him to order.

The PRESIDENT: I uphold the point of order. I indicate that I have also ruled on many occasions that members should not encourage interjections. The problem with calling the Hon. Taylor Martin to order was that there was a lot of encouragement for interjections from the member asking the question. The Minister has the call.

The Hon. BRONNIE TAYLOR (Minister for Mental Health, Regional Youth and Women) (12:30): I thank the Hon. Trevor Khan for his question and his interest in and dedication to regional and rural youth, which is tremendous to see. The Government wants young people to live, learn, work and thrive in regional New South Wales and has developed a comprehensive and coordinated approach to better support them. As all members know, the Government has talked to hundreds of young people, parents, employers, youth workers and Aboriginal young people from across regional New South Wales to develop the pillars for our framework that will underpin the Regional Youth Strategy—for the first time in New South Wales. The Government has a task force, which will provide a direct line of communication between the young people of regional New South Wales and this Government. As I stated previously, I am absolutely thrilled that close to 300 applications for the Regional Youth Taskforce were received from across New South Wales, which is so fantastic.

I also want to ensure that those are not the only voices I hear so I say to the young people of regional New South Wales: As your Minister, I want you to know that I have no intention of sitting behind a desk. I know how important it is for me to visit your regional centres, your country villages and your coastal towns to see where you live, what you are going through, meet with you and listen to you and connect with you. Over the winter recess I hit the road: I was lucky enough to visit the Newman Senior Technical College in Port Macquarie.

The Hon. Greg Donnelly: How was the road?

The Hon. Bronnie Taylor: Brilliant. Duncan Gay's roads are beautiful.

The Hon. Greg Donnelly: It was a joke: How was the road when you hit it?

The Hon. BRONNIE TAYLOR: I saw how students there are learning, upskilling and preparing for jobs of the future. Regional youth is certainly not a joke. This is a serious issue that the Government is very committed to. The Newman Senior Technical College is an incredible place where people are learning great things. I met some amazing young people from YP Space in Kempsey who had come across from the mid North Coast to talk to me about the struggles they face with homelessness and their mental health. I travelled to the Far West to see how the Just Reinvest model and Maranguka hub is changing the trajectory of young Aboriginals' lives in Bourke. And don't they give the Minister for Education and Early Childhood Learning shout-outs. They think the Minister for Education and Early Childhood Learning is absolutely fantastic because of the work she did in Bourke.

I spent an afternoon with the incredible Joh Leader and a group of young people from Apollo House in Dubbo. Apollo House is a safe space where kids can go. It runs a range of recreational activities, personal development and skill-building programs for kids that, without the house, they would not otherwise have access to. Joh Leader is truly an inspirational person. Earlier this year I met with young sports stars at the Orange PCYC to see how important it is to have easily accessible sporting and cultural facilities in our regional towns. I take my role as the regional youth Minister very seriously. The strategy continues to develop. Even long after it is published, I plan to meet with as many young people from regional New South Wales as possible to ensure their voices are heard.

LAND CLEARING

Mr JUSTIN FIELD (12:32): My question without notice is directed to the Minister for Mental Health, Regional Youth and Women representing the Minister for Energy and Environment. In regards to the recently announced amnesty for landholders who have been investigated for illegal land clearing, how many landholders will be or have been given amnesty and to how many hectares of illegal clearing do those amnesty provisions apply?

The Hon. BRONNIE TAYLOR (Minister for Mental Health, Regional Youth and Women) (12:33): I thank the honourable member for his question. As it relates to a portfolio of a Minister in another place, I will take it on notice and seek clarification for the honourable member.

MENTAL HEALTH SERVICES

The Hon. ANTHONY D'ADAM (12:33): My question is directed to the Minister for Mental Health, Regional Youth and Women. Given the Minister's answer yesterday about the State Government's expenditure on mental health, why are there only 12 beds in the entire State for the Involuntary Drug and Alcohol Treatment program, or IDAT?

The Hon. BRONNIE TAYLOR (Minister for Mental Health, Regional Youth and Women) (12:33): I thank the honourable member for his question. If I am correct, it referred to drug and alcohol beds?

The Hon. Anthony D'Adam: Involuntary drug and alcohol treatment.

The Hon. BRONNIE TAYLOR: As drug and alcohol matters are under the remit of the Minister for Health and Medical Research, who is a member of another place, I will take that question on notice and provide the honourable member with an answer.

SMALL BUSINESS

The Hon. MATTHEW MASON-COX (12:34): My question without notice is addressed to the Minister for Finance and Small Business. Will he update the House on how the Government is helping small business in New South Wales resolve disputes in a timely and cost-effective manner?

The Hon. DAMIEN TUDEHOPE (Minister for Finance and Small Business) (12:34): I thank the Hon. Matthew Mason-Cox for his question and for his interest in small business. There is no doubt that this Government is doing more for businesses in New South Wales than ever before. I am sure honourable members will recall that just yesterday I pointed out that unemployment has fallen again to 4.4 per cent and that more than 160,000 jobs have been created since the implementation of this Government's payroll tax cuts that Labor opposed.

This Government not only is supporting the creation of jobs but also is supporting small business owners to resolve disputes in a timely and cost-effective manner. The We Assist program is a mediation service provided by the Small Business Commissioner and can save parties thousands of dollars in legal and expert fees by helping them to focus on the key issues and, in most cases, find solutions before the issues get to a court hearing. When a business has a problem in New South Wales, the Government wants to know about it and wants to help.

We Assist provides mediation services to small businesses experiencing commercial disputes. Our mediation officers can assist at any stage of a dispute by helping those involved to address key issues and find solutions. Whether the dispute is between businesses or business and government, we can assist. If the dispute has not been resolved through early discussions, we can arrange a formal mediation where both parties can explore their concerns. The mediation process has been shown to minimise the costs of retail tenancy and business-related disputes.

Each year the We Assist program's services provide responses to around 18,000 phone and email inquiries; conduct 44,000 self-help web sessions and 948 mediations; have 4,300 new client entries; and 92 per cent of all mediations filed are resolved before a hearing or being determined in court. This Government is focused on creating the right environment for small businesses to succeed by having fewer taxes, less red tape and services that provide real outcomes for businesses so they can get on with doing what they do best—providing critical services for local communities and creating more jobs and new opportunities for individuals to get out there and get ahead. [*Time expired.*]

PLATYPUS CONSERVATION INITIATIVE

The Hon. EMMA HURST (12:37): In directing my question to the Minister for Mental Health, Regional Youth and Women representing the Minister for Energy and Environment, I point out that in 2016 the risk of extinction for platypus was raised to "near threatened" and that researchers from the University of New South Wales found platypus had disappeared from large areas, including the Murray-Darling Basin, with no official observations in the last 10 years in half of the catchments of the basin. What conservation strategies is the Government implementing to protect the platypus?

The Hon. BRONNIE TAYLOR (Minister for Mental Health, Regional Youth and Women) (12:38): I thank the Hon. Emma Hurst for her question. I just love platypus. The Hon. Ben Franklin and I often have conversations about platypus. The platypus is a unique native species, being one of only two egg-laying mammals in Australia—the other being the echidna. However, there are threats to platypus that include drought, predators, fishing and habitat loss. The Government is committed to ensuring that there are appropriate protections in place for our native species, including the platypus.

Like other native animals, the platypus is protected in New South Wales under the Biodiversity Conservation Act 2016. This means it is illegal to intentionally harm a platypus, and the Act has penalties in place for those that do. In addition, consents for development activities which may impact on protected native species such as the platypus are subject to comprehensive planning requirements, to ensure there are appropriate identification and mitigation measures in place. While the platypus is already protected in all waters along its range, like many native species it is likely facing challenges from depleting water sources due to current drought conditions. The Government will continue to manage this strategically to provide the best possible outcomes for the environment, for wildlife and for the communities.

An independent Threatened Species Scientific Committee also assesses the risk to native species and decides whether they should be considered threatened. This helps us determine what animals are most vulnerable and whether further actions might be needed. Anyone can make a nomination to the committee to have a species considered for listing, and certain criteria must be met and evidence provided to support a nomination. I am advised that there has been no nomination seeking a determination that the platypus be listed as vulnerable or endangered in New South Wales. However, the Government welcomes research undertaken by universities like the University of New South Wales, which will help to increase our knowledge of the platypus and help with their survival in the future. Should researchers believe they have information that could support a nomination to the independent threatened species committee, they can do so.

I also understand the concerns around the use of Opera House-style yabby traps. It is estimated that these traps account for 15 per cent of platypus mortality per annum. The use of Opera House traps is regulated in New South Wales by the Department of Planning, Industry and Environment with fisheries. It is illegal to use them in eastern parts of New South Wales and in platypus waters, as well as the Edward River upstream of Stevens Weir, the Murray River upstream of the Echuca-Moama Road Rail Bridge and the Murrumbidgee River upstream of the Darlington Point Bridge. Where they can be used, modifications are required to avoid bycatch.

Anyone caught using illegal traps or trapping in prohibited areas can face fines of up to \$22,000 and six months imprisonment, or both. Advice on how to modify traps and avoid platypus is available to the public. We love our platypus and we will continue to engage in actions to ensure they are being appropriately conserved.

The Hon. EMMA HURST (12:41): I ask a supplementary question. Will the Minister please elucidate what sort of modifications are being put in place to ensure that Opera House traps are not actually collecting non-targeted species?

The Hon. BRONNIE TAYLOR (Minister for Mental Health, Regional Youth and Women) (12:42): I will take the supplementary question on notice and get more detail for the member.

The Hon. WALT SECORD (12:42): I ask a second supplementary question. Will the Minister elucidate on her answer in which she outlined a number of measures to protect the platypus? Has she checked on the poisoning of grassland, its leaching into waterways and how it affects platypus habitat, especially in the Monaro?

The Hon. Wes Fang: Point of order: That is clearly not a second supplementary question. I ask that it be ruled out of order.

The PRESIDENT: I am inclined to say that it is a second supplementary question. I will allow the question. I am happy to listen to further debate.

The Hon. Catherine Cusack: Point of order: The honourable member's question specified the Monaro. The original question related to the Murray-Darling Basin. I believe it is different.

The PRESIDENT: The supplementary question is in order.

The Hon. BRONNIE TAYLOR (Minister for Mental Health, Regional Youth and Women) (12:43): I will take the question on notice.

DOMESTIC VIOLENCE

The Hon. COURTNEY HOUSSOS (12:43): I direct my question to Minister for Mental Health, Regional Youth and Women. What representations did she make to the Premier on the Government's decision to push back its deadline for a 25 per cent reduction in domestic violence reoffending rates from 2021 to 2023?

The Hon. BRONNIE TAYLOR (Minister for Mental Health, Regional Youth and Women) (12:44): I thank the honourable member for her question. As the portfolio for domestic violence sits under the remit of the Attorney General in the other place, I will take the question on notice.

The Hon. Trevor Khan: Point of order: The Minister went to the table, answered the question and received heckling from Opposition members. This went beyond the normal repartee that goes on in the Chamber to a point that is disorderly. I ask that members be called to order.

The Hon. Walt Secord: To the point of order: The Deputy President will be well aware that this is question time. That was a question. The Minister had notice 24 hours ago.

The PRESIDENT: I call the Hon. Walt Secord to order for the first time. If the member is going to respond to a point of order, the response must be relevant. The member cannot simply make a debating point and then indicate that the Minister had notice. That is not relevant. The question was asked. Heckling and interjections should not have occurred. With all due respect, these are questions "without notice" that are being asked, so

advising the Minister on whether or not she had notice is completely irrelevant. The Hon. Walt Secord's response to the point of order was inappropriate.

The Hon. COURTNEY HOUSSOS (12:46): I ask a supplementary question, which relates to the capacity in which the Minister took the question on notice. She noted that it was a question to be directed to another Minister. My supplementary question is, in her capacity as Minister for women, what representations did she make to the Premier?

The PRESIDENT: That is not a supplementary question. That is asking the same question and adding to it.

STATE HERITAGE REGISTER

The Hon. LOU AMATO (12:46): I address my question to the Special Minister of State. Will he update the House on State heritage listings in the Manly area?

The Hon. DON HARWIN (Special Minister of State, Minister for the Public Service and Employee Relations, Aboriginal Affairs, and the Arts, and Vice-President of the Executive Council) (12:47): I thank the Hon. Lou Amato for that question, and I know it will be of interest to a number of members in the House, including the Hon. Natalie Ward, who was speaking to me about this on Monday. I am pleased to announce that I have directed the listing of Ivanhoe Park, including Manly Oval, cultural landscape on the State Heritage Register. This site is unique within New South Wales as a place with a combined history of Aboriginal heritage and 150 years of recreation, sport and community use—from Aboriginal heritage, to Victorian pleasure ground, through to a place combining a recreation park and village green to support the community, sporting facilities and events. This cultural landscape will contribute to further understanding of the Kayimai people's cultural heritage. It holds important Aboriginal cultural heritage through the surviving landscape features and proximity to known burial, ritual and cultural sites.

The Ivanhoe Botanic Garden still demonstrates the principal characteristics of a Victorian-era park adapted to the Australian setting. The site has significant associations with many of the oldest sporting and community clubs in New South Wales, as well as Australian international sportspeople and many leaders of public life in New South Wales. These include Henry Gilbert Smith, referred to as the Father of Manly, whose vision it was to develop Manly as the premier tourist resort village for the people of Sydney and New South Wales; Manly local sporting greats, such as Keith Miller, the great Australian cricket all-rounder; Frank Row, the first Australian Rugby Union captain; and Michael Hooper, the current Wallabies captain. They also include Sir Arthur Roden Cutler, a Manly Scout, Victoria Cross recipient, Governor of New South Wales and Chief Scout of NSW; and Gladys Eastick, MBE, a Manly Girl Guide leader awarded for service in Australia, Papua New Guinea and Europe. Ivanhoe Park is also the location of events important in the history of Sydney and New South Wales, including Australia's—

The PRESIDENT: Order! Stop the clock. The Minister will resume his seat. It is unfair that the Minister has to keep raising his voice to speak over all the loud conversations in the Chamber. It was clear that the Minister was about to lose his voice. Members will allow a Minister to answer the question at an appropriate volume so we do not hurt the ears of the Assistant President or force the Minister to scream.

The Hon. DON HARWIN: As I was saying, Ivanhoe Park is also the location of events important in the history of Sydney and New South Wales, including Australia's first wildflowers shows between 1881 and 1899, a landmark speech by Sir Henry Parkes in November 1888 and World War I and World War II recruitment rallies and fundraising events. It is a unique and major park in New South Wales with a diverse cultural heritage. I acknowledge the hard work of local member James Griffin and community groups to achieve the heritage listing of the park.

COAL INDUSTRY

The Hon. MARK LATHAM (12:50): My question is directed to the Minister for Finance and Small Business, representing the Treasurer. Given that 60 per cent of the economic income of the Singleton and Muswellbrook local government areas comes from the coal industry, how many small businesses in the Hunter Valley will be lost if the coal industry is forced to close? Has the Minister seen the 28 February letter to the Government from the members representing the electorates of Sydney, Wagga Wagga and Lake Macquarie arguing for the closure of coal in the New South Wales post-carbon economy, supposedly to save the planet? And what action is the Minister taking to save the Hunter from economic decline and welfare dependency?

The Hon. DAMIEN TUDEHOPE (Minister for Finance and Small Business) (12:51): I thank the member for his question and his concern for the jobs in this great State. On this side of the House we understand the importance of opportunities for individuals, families and businesses. One of the best opportunities is the

prospect of a job. A stable, secure job brings not only the ability for someone to provide for themselves and their family, but also so much dignity for a human being. Since 2011 over 670,000 jobs have been added in New South Wales. The State contributes to the powerhouse of the nation and, as I will keep repeating, we have an unemployment rate of 4.4 per cent. Regional New South Wales is getting in on the action, and our four-year jobs target of 30,000 jobs for the regions was smashed, with 95,600 jobs added since 2015.

One of the great industries in New South Wales that supports jobs is the coal industry. The industry keeps many of our local economies and communities growing. It is an industry that NSW Labor, as we know, wants to shut down to appease the inner-city elites at the expense of working families, seniors and small business owners who rely on energy every single day. In the Hunter region especially this is a crucial industry that supports thousands of workers to provide for their families. According to a NSW Mining survey reported on this week, mining supports 61,707 direct and indirect jobs and injects \$4.3 billion a year into the Hunter economy. Coal royalties also play a role for the New South Wales budget, with around \$1.8 billion coming from royalties for the 2019-20 year. That helps us deliver more schools, more hospitals and more frontline workers for local communities.

There is also the flow-on effect for small businesses that rely on the mining industry to survive. For some in this place who live in the inner-metropolitan areas it may be easy to dismiss the coal industry as a thing of the past; something that should no longer be tolerated. Does Labor support these jobs in the Hunter? I know the Federal member Joel Fitzgibbon was very quick to join the Parliamentary Friends of Coal in Canberra. I wonder who on the other side in this House would be as quick. Would members opposite be prepared to join the Parliamentary Friends of Coal? Labor Senator the Hon. Penny Wong also backs coal. She said, "It remains an important industry for Australia", and she was absolutely right. To those who seek to oppose this industry and its jobs, I say that this Government stands by the workers of New South Wales. [*Time expired.*]

DIAMOND BAY RESERVE

The Hon. WALT SECORD (12:54): My question without notice is directed to the Minister for Finance and Small Business, representing the tourism Minister. Given the accidental weekend death of a 27-year-old Sydney woman who fell from the cliffs at Diamond Bay Reserve in Sydney's east, what assistance is the State Government providing to Waverley Council to protect the thousands of tourists taking selfies for social media; and has the Government considered protection barriers there?

The Hon. DAMIEN TUDEHOPE (Minister for Finance and Small Business) (12:55):
Mr President—

The PRESIDENT: Order! Stop the clock. The Minister has not even started his answer yet. It is incredibly unfair that before the Minister, who is asked a question and who gets up immediately to answer that question, has even had the opportunity to say one word members on both sides of the Chamber start to answer the question, debate the question or make some comment on the question. It is disorderly. The Minister has the call.

The Hon. DAMIEN TUDEHOPE: I thank the honourable member for that question. It is a serious issue and I do not trivialise in any manner, shape or form the problem that he has articulated in his question. It is a clear problem. I anticipate—and I assume that he would accept—that there will be a coronial inquest into the facts and circumstances surrounding the unfortunate death of that young lady. I anticipate that that coronial inquest will make recommendations on what should occur.

I imagine that Waverley Council will be on board to fulfil any obligations arising from the recommendations made in that report. But if there are facts and circumstances indicated by the coroner to the Government that the Government could respond to in order to deal with what in many respects the community would view as potentially reckless actions, then I am sure the Minister responsible—and it would probably be the Attorney General in that case—will take into account those recommendations to ensure the safety of people is best protected. There is some water to go under the bridge with the recommendations that will flow from a coronial inquiry. It is a serious question and we ought to wait for that response.

EASTERN SUBURBS SECONDARY SCHOOLS

The Hon. SHAYNE MALLARD (12:57): My question is addressed to the Minister for Education and Early Childhood Learning. Will the Minister provide the House with an update on secondary schools in Sydney's Eastern Suburbs?

The Hon. SARAH MITCHELL (Minister for Education and Early Childhood Learning) (12:57):
I thank the honourable member for his question and his interest in secondary schools in Sydney's Eastern Suburbs. As members may be aware, the Department of Education recently undertook consultation with the community of the Eastern Suburbs on a proposal to transition Randwick Boys High School into a co-educational facility. The

consultation involved over 2,200 responses to the department's survey, the engagement of 40 school communities across the region, 96 emails to the dedicated email account, information booths and meetings with stakeholders such as the New South Wales Secondary Principals' Council, the NSW Teachers Federation and school P&Cs. At a glance the results showed the proposal to transition was favoured. However, deeper analysis by the department indicated that those more directly impacted by the proposal were less supportive of the transition. As such the department has opted to maintain Randwick Boys High School as a single sex secondary school.

I thank the community for their involvement in this process and their patience as the department considered their feedback. It is important that communities engage in these conversations and the extent of the response is encouraging. I also acknowledge the local member, who met with me during the recent sitting week to discuss this matter. It is clear from the consultation that there is strong support for public secondary schools in the Eastern Suburbs that include a mix of co-educational and single sex schools. The department will now develop a strategy to support all the public secondary schools in the eastern suburbs and will retain all existing schooling options to give parents and students choice. This strategy will involve having conversations with teachers, students, parents and stakeholder groups about how we can provide greater support to secondary schools across the region. Excitingly, there are already a number of initiatives underway.

Our Government has previously announced upgrades to Randwick Boys High School and Randwick Girls High School. These projects are in the planning stage and I look forward to seeing how the upgrades take shape. The new Inner Sydney High School will open next year. The facility on Cleveland Street in Surry Hills will cater for approximately 1,200 students with 47 teaching spaces in the 14-storey facility. The new school is currently enrolling year 7 students to commence in 2020. The school will include flexible learning spaces that are technology-rich as well as five floors focused on science, technology, engineering, arts and maths, with specialised laboratories, workshops and classrooms. It will also include sporting and recreational spaces, including the shared use of Prince Alfred Park.

Work is also underway on the redevelopment of the nearby Alexandria Park Community School. This project, scheduled for completion in 2022, will provide greater opportunity for students from kindergarten to year 12 in permanent teaching spaces and new facilities including a hall, library, gym, sports courts and play spaces. I am pleased that our Government's record investment in school infrastructure is providing students across New South Wales with world-class learning spaces with more opportunity to achieve their best. [*Time expired.*]

The Hon. DON HARWIN: The time for questions has expired. If honourable members have further questions I suggest they place them on notice.

Visitors

VISITORS

The PRESIDENT: I welcome the students and staff from the Riverstone electorate, hosted by the member for Riverstone, Mr Kevin Conolly, MP. The students are from John Palmer Public School, Kellyville Ridge Public School, Mary Immaculate Primary School, Parklea Public School, Quakers Hill East Public School, St John's Primary School, St Joseph's Primary School, Vineyard Public School, Riverbank Public School, Norwest Christian College and John XXIII Catholic Learning Community. We are coming towards the end of question time.

Supplementary Questions for Written Answers

MENTAL HEALTH SERVICES

The Hon. TARA MORIARTY (13:01): My supplementary question for written answer is directed to the Minister for Mental Health, Regional Youth and Women. How many mental health patients waited up to two days, three days, four days and five days in an emergency department across New South Wales in 2018-19?

The PRESIDENT: I will now leave the chair. The House will resume at 2.30 p.m.

Bills

LAKE MACQUARIE SMELTER SITE (PERPETUAL CARE OF LAND) BILL 2019

First Reading

Bill received from the Legislative Assembly, and read a first time and ordered to be printed on motion by the Hon. Bronnie Taylor.

The Hon. BRONNIE TAYLOR: I move:

That standing orders be suspended to allow the passing of the bill through all its remaining stages during the present or any one sitting of the House.

Motion agreed to.

The Hon. BRONNIE TAYLOR: I move:

That the second reading of the bill stand an order of the day for a later hour.

Motion agreed to.

Documents

LANDCOM

Dispute of Claim of Privilege

The PRESIDENT: I inform the House that on 19 and 20 August 2019 the Clerk received from the Hon. Adam Searle written correspondence disputing the validity of the claim of privilege on certain documents lodged with the Clerk on Thursday 25 July 2019 relating to Landcom. According to standing order, the Hon. Keith Mason, AC, QC, was appointed as an Independent Legal Arbiter to evaluate and report as to the validity of the claim of privilege. The Clerk released the disputed documents to Mr Mason.

Bills

REPRODUCTIVE HEALTH CARE REFORM BILL 2019

Second Reading Debate

Debate resumed from an earlier hour.

The Hon. WES FANG (14:33): Before the debate on the Reproductive Health Care Reform Bill 2019 was interrupted, I was speaking about how I disagreed with the contribution of the Hon. Robert Borsak, which I felt was a shameful political attack on what is a very sensitive topic.

The Hon. Robert Borsak: Point of order: My point of order relates to the fact that the Hon. Wes Fang is not allowed to attack me personally in this House unless it is by way of substantive motion. I ask you to have him apologise and/or withdraw his comment.

The PRESIDENT: I have indicated on previous occasions to the Hon. Wes Fang that he should not make imputations against another member unless it is by way of substantive motion. I ask him to withdraw the word "shameful".

The Hon. WES FANG: To assist the House, I withdraw. In the contribution made yesterday by the Hon. Robert Borsak, which I disagree with, he mentioned that The Nationals members in the other place had voted as a majority in support of the bill. But he failed to mention that 100 per cent of the members of his own party, the Shooters—the party that he leads—in the other place voted to support the bill.

The PRESIDENT: I indicate to the Hon. Wes Fang that there is no party called Shooters. There is a party known as the Shooters, Fishers and Farmers Party. I ask the member to use the party's correct title, just as I would direct all members to use the correct titles of other parties.

The Hon. WES FANG: I refer to the party that is led in this place by the Hon. Robert Borsak; its members in the other place all voted in support of the bill. During some commentary yesterday, the Hon. Robert Borsak said that he will not vote with the Government anymore because of the way that this bill has been handled. I note that today his party's lower House members have refuted that; they have said, "No, we will work with the Government because sometimes that is in the best interests of our communities." I ask, is there a division in the Shooters on this? Where are we with this, when you indicated previously that you would support this bill—

The Hon. Mark Banasiak: Point of order: You have already explained to the Hon. Wes Fang about using the proper terminology for a party's name. He has just done it again after about 30 seconds.

The PRESIDENT: I remind the Hon. Wes Fang of my earlier ruling.

The Hon. WES FANG: I ask, what is happening in this place when we see members of that party in the other place throwing their support behind the bill, and yet their leader comes into this House and attacks The Nationals for having a majority support it in the other place? He fails to mention his own members voted 100 per cent in support of this bill. He indicated previously that he would support the bill, yet he walks into this place and criticises us. That is political opportunism.

Last Monday I was fortunate to spend some time with the Hon. Tim Fischer. As some members would be aware, Tim is currently unwell but I was able to spend the day with him in Boree Creek. In Tim the values of The Nationals were embodied: somebody who did something that was difficult at the time and possibly unpopular,

but that he knew was right. That is leadership. Tim Fischer is a leader. Tim Fischer would not have flip-flopped, like we saw last night in the contribution of the Hon. Robert Borsak. Tim Fischer would not have come into this place saying one thing and then doing another. Tim is a real leader.

The PRESIDENT: Order! The member is starting to deviate from the long title of the bill. Wide latitude is given, but I am struggling to see where the matters now being raised by the member are in any way relevant to the long title of the bill. I draw the member to the long title of the bill.

The Hon. Robert Borsak: Point of order: I take this to be a long, drawn-out personal attack on me. I ask the member, if he is going to do that, to please do so by way of substantive motion so we can have a proper debate on it, rather than going through this long charade of pretending that you somehow have some point to make. You do not.

The PRESIDENT: There is no point of order. I do not uphold the point of order because it started off correctly but then became a long debating point. I have indicated to the Hon. Wes Fang that his contribution must be in accordance with the long title of the bill. He needs to be relevant.

The Hon. WES FANG: There is no doubt that members of the community have some concerns about the bill. Any member of this House would be foolish to deny that. During Committee stages of debate on bills that come before this House we can consider amendments. This is the House of review and members can work through issues and make necessary changes to the bill. The fundamental question about this bill is whether our modern community expects abortion to be removed from the Crimes Act 1900. I believe that the answer is yes. I commend the bill to the House.

The Hon. SARAH MITCHELL (Minister for Education and Early Childhood Learning) (14:40): I wish to make a contribution to debate on the Reproductive Health Care Reform Bill. I have seriously considered whether to speak in this debate. As members of this House would be aware, this is a conscience vote for members of my party, The Nationals, and I am comfortable with my position in relation to this legislation and feel no need to justify my vote. However, there are a few things I wish put on the record.

Firstly, I congratulate the members of this House for the way that this debate has been conducted in our Chamber so far. It has been my experience, over eight years in this place, that sometimes when we are dealing with bills of this nature—bills that are sensitive, when the issues are emotional, and where a wide range of views exist—we often experience parliamentary debate at its best. Whilst I do not share the views of some of my colleagues across the parties in this Chamber in relation to this bill, I respect their right to have those views and express them, and in turn I am grateful that I will also be respected as I express my views.

I acknowledge the people who have contacted me and my office in relation to this bill, particularly those whom I know personally, who have taken the time to share their views with me. I have believed for a long time that when it comes to abortion, women should be able to make their own decisions about what is best for them in their personal circumstances and that it should not be a crime. That is why I will be supporting the bill.

I think that legislators need to be respectful of women and the decisions they are making, and their reasons for doing so. As many other speakers have said in this debate, the decision to have an abortion is not one that any woman makes lightly, nor is it a flippant, knee-jerk reaction to pregnancy. The reality is that women seek to terminate pregnancies for many, many reasons. There are greater levels of complexity behind some of these decisions than we may ever fully realise. Sometimes, harrowing decisions must be made by women and their partners and families, particularly in relation to terminations later in the pregnancy and which are due to serious genetic abnormalities. My heart breaks for every woman and family that has had to make that decision.

To echo the comments made by some of my Nationals colleagues in this place—the Hon. Niall Blair and the Hon. Bronnie Taylor—I trust the women of New South Wales to make the decisions that are right for them, and I trust the doctors in New South Wales to provide support and care for these women. As a female from a regional area I also want to put on the record some of the feedback that I have received from women in the regions in relation to this bill. The overwhelming majority of regional women I have spoken to support this bill. Many are dumbfounded that abortion remains in the Crimes Act in 2019. I have had women in regional areas tell me of their experiences accessing abortions. They talk about having to travel significant distances to access services and the shame, stigma and fear that go along with that. I do not think it is acceptable that this is still the case in 2019.

I do not think women should be made to feel guilty for their personal decisions based on an outdated law. Women should be cared for and supported by medical professionals if they seek a termination, with no confusion around the legalities of the procedure. That is why I support the bill. In closing, I note that some members have moved amendments to the bill, and others have indicated their intention to move amendments. Using my conscience I will consider amendments on their merits during the Committee stage.

The Hon. ROD ROBERTS (14:43): I am pro-choice. It is a woman's body and therefore it is her choice. It is not for me to question a woman who makes a decision about her body—only a woman knows what is best for her. There should be no shame or stigma attached to her decision. I believe the time has come to remove the stigma attached to a termination by decriminalising it. I also believe that in the twenty-first century termination has no place in the Crimes Act.

I bring to this debate no religious or ideological viewpoint. My personal opinion or beliefs do not, nor should not, count. As a legislator I take the same analytical, pragmatic approach to this bill as I would to any other piece of proposed legislation. However, because of that approach I cannot support this bill in its current form. First and foremost, there is no doubt that this bill has been rushed through Parliament. I believe there are some unsound components in the proposed legislation. It requires more time for consideration.

I wish to draw a couple of points to the attention of my fellow members. I support the proposal in the other place in relation to informed consent and the offer of counselling prior to a termination. How do we know that the patient presenting has not been forced to seek a termination against her will by a manipulative and violent partner? Proper counselling by a specialist medical practitioner in the field of psychology or psychiatry may uncover this fact. Counselling must be mandatory. The possibility of gender selection terminations is another area of concern. It would be naive to think that this does not happen. It is well known and documented that certain ethnic groups and races prefer sons over daughters.

Certain members of this Chamber often refer to the United Nations and use data collected by that organisation—they drink from its font. My assertion is supported by a 2018 report by the United Nations Population Fund. Its studies showed that in 2010, 126 million women and girls were missing due to gender-biased sex selection. It is projected that by 2020, 142 million women will be missing. Closer to home, La Trobe University just released a study into sex selection in Victoria—the first of its kind in Australia. Researchers have revealed that a cultural preference for sons among some ethnic groups has led to more boys than girls being born in Victoria in recent years. The figures show that gender bias has remained persistent in Victoria. Sex selection is clearly an issue, and one that requires robust legislation to prevent.

Another issue is with emergencies. After 22 weeks terminations should be performed by specialist medical practitioners, not medical practitioners. I am aware that this issue has been raised already and will be continued to be canvassed by other members. There should also be transparency and independence in the second specialist medical practitioner. Unfortunately, there are rogue and corrupt professionals in all walks of life, and doctors are not exempt from this. We have seen previous evidence of this. I believe that it is incumbent upon us to ensure that we protect women from unscrupulous doctors. For this reason I propose that a board be appointed by the Minister to ensure that independence.

It must be emphasised that members of Parliament have been afforded the right to vote according to their consciences in this debate. However, this can be directly contrasted with the proposed restriction on the freedom of conscience for doctors. Doctors will not have this right. The Reproductive Health Care Reform Bill imposes restrictions on conscientious objection that are in stark conflict with best practice guidelines from the Medical Board of Australia and the Australian Medical Association [AMA]. The Medical Board of Australia's *Good medical practice: a code of conduct for doctors in Australia*, states: Being aware of your right to not provide or directly participate in treatments to which you conscientiously object ... you are free to decline to personally provide or participate in that care. Section 4.2 of the Australian Medical Association Code of Ethics 2004, revised 2016, states:

Recognise your right to refuse to carry out services which you consider to be professionally unethical, against your moral convictions ... and advocate for the freedom to exercise professional judgement in the care and treatment of patients without undue influence by individuals, governments or third parties.

The Reproductive Health Care Reform Bill 2019 legislates that a registered health practitioner must give information to a person on how to locate or contact a medical practitioner who in the first practitioner's reasonable belief does not have a conscientious objection to the performance of the termination. Doctors must be afforded the right to say no. As members of this House may be aware, I sit on the Select Committee on the Use of Battery Cages for Hens in the Egg Production Industry. The community has been afforded ample opportunity to participate in this inquiry over a 13-week period; by comparison, the Reproductive Health Care Reform Bill inquiry granted the community less than two weeks. The people of New South Wales deserve time and consideration instead of an inquiry rushed through the Parliament without adequate stakeholder engagement or consultation.

We have a damned history of inadequate consultation—just look at the greyhounds, the lockout laws, forced council amalgamations et cetera. The Reproductive Health Care Reform Bill should be amended in response to community concerns. As I said in my maiden speech in this Chamber only a few months ago, members of this Parliament have been entrusted with the grave responsibility of providing effective and enlightened leadership of this State. This trust has come from the community at large.

There is a loud call from outside this Chamber—and particularly from outside this building—that politicians are too self-absorbed and self-centred, that they would rather speak about themselves and are not interested in the community. We are the elected voice of that community and they expect us to use our voice. There is obvious community outrage that the bill and its subsequent committee inquiry has been rushed through Parliament. The Reproductive Health Care Reform Bill requires greater clarity, clearer provisions and greater certainty. The bill also requires adequate consultation with the people of New South Wales. Therefore, I cannot support the bill in its current form.

The Hon. EMMA HURST (14:52): On behalf of the Animal Justice Party I speak in support of the Reproductive Health Care Reform Bill 2019. I am proud to be a co-sponsor of the bill, which will bring New South Wales back in step with community expectations. Right now in New South Wales we are falling behind. We remain stuck in the past: The only State in Australia where a woman is still criminalised without any statutory exemption for terminating a pregnancy. Just last year a study released by The Greens showed that over three-quarters of people here in New South Wales were unaware that abortion remains a criminal offence. The same study showed that nearly three-quarters of people in New South Wales believed that a woman should have this control and that abortion should be decriminalised and regulated as a healthcare service—that is exactly what the bill does.

Under our current 119-year-old law the procurement of an abortion is considered a criminal act, unless the woman and her doctor can meet the requirements of a dated court decision and prove that her physical or mental health would be in serious danger if the pregnancy continued. Although there are 500 safe, medical terminations performed in New South Wales on this basis the risk of prosecution understandably makes some doctors reluctant to offer this healthcare service. This makes women vulnerable—the woman who is a victim of rape, the woman who cannot afford to be pregnant, the woman whose physical and mental health is put at risk by pregnancy, the woman attempting to escape domestic violence and the woman who is too young. These women are not criminals. They are women who are stressed and without other options. It is time for change.

It is time that New South Wales acknowledges that women can and must be completely free to make their own choices about their reproductive health. Many of the people sitting in the Chamber today will know someone who has had to make the incredibly personal, complex and difficult decision to get an abortion. Some may have even had to go through the process themselves. Let us be clear: Women do not make this decision lightly. Abortions are and always have been a last resort. Yet right now here in New South Wales our laws add enormous stress and uncertainty to an already difficult situation. These laws are a real threat. As recently as 2017 a mother of five was prosecuted right here in Sydney for administering a drug to cause a miscarriage. This was a woman with nowhere else to turn—and our State made her a criminal.

Here in this Chamber we have the chance to make sure no other women are criminalised and traumatised like this woman and the many women who have come before her. By passing the bill we will recognise what we already know: That women should be making their own choices about their bodies. By passing the bill we will bring ourselves back in step with the rest of Australia. By passing the bill we will finally give women in New South Wales access to healthcare services that they have fought long and hard for. We cannot repair the hurt, the anguish, the pain and the trauma these laws have caused to many women across New South Wales. However, we can ensure that no other woman has to suffer what our friends, sisters, mothers, grandmothers and generations of women have suffered through. It is time to finally decriminalise abortion.

I want to briefly point out a few disappointing remarks made during this debate. I have been surprised to hear a number of members make critical comparisons between the attention on the bill and that given to other pressing inquiries in this place about the protection of animals—such as keeping hens in battery cages, the destruction of koala habitats and the enforcement of our animal cruelty laws—as if there is only room to care about social or animal issues. As if it is not possible for a person to genuinely care about the suffering of animals and the rights of women. As if this House should not be devoted to progress in all areas of legislation. We in the Animal Justice Party are proud to care about the rights of women and the rights of animals. That is why I am proud to support the bill today. In closing, I say this: If you believe that women should have the rights that are afforded them in the rest of Australia, vote for the bill. If you believe that women should have the right to make decisions about their health, vote for the bill. If you believe that women should have the right to full control over their own bodies, vote for the bill.

The Hon. TARA MORIARTY (14:57): I contribute to the debate on the Reproductive Health Care Reform Bill 2019. This is a very important debate about a very significant issue for women and the community broadly. I support the bill. I acknowledge that the issue of abortion is one that evokes deeply held views and beliefs and I acknowledge and respect that people feel strongly about it on both sides of the debate. However, I honestly believe that it is way beyond time that we remove abortion from criminal law and treat it as the personal health care matter that it is. I also honestly believe that the majority of the community in New South Wales are

mistakenly of the belief that the fundamental issue here—that abortion be removed from the criminal law—has long since been dealt with. Certainly many people who I have interacted with on this matter are shocked that it is still a criminal matter and support it being dealt with as a matter of health care, not as a crime.

I trust women to know what is right for themselves. I trust women to make the right decisions for their own lives. I believe that women should be able to make their own decision about an unwanted, unplanned pregnancy as a health matter and that it is a matter between each woman and her doctor. Things happen in life. None of us is perfect and we all make mistakes. No-one should have to live with the consequences of an unwanted pregnancy because of the wishes or pressures of someone else, be it someone in their own lives or because of the views and pressures of a minority of the wider community. Women are whole people with whole lives, plans, dreams, circumstances and choices. We are not here to solely be responsible for the lifelong commitment of having a child because of an accident, an unsuitable situation or relationship or, frankly, any reason that applies to each individual woman.

I am not here to judge anyone for their personal choices and nor is this Parliament. We are here to be legislators—to carefully consider laws that are in the interests of the community and the people of New South Wales. I am certain that no-one ever makes the decision to have a termination lightly. I am sure that every woman who makes this decision does so in a very carefully considered, well thought-out way based on their own circumstances. I trust women to do just that. Abortion is happening. It is a choice being made by people in desperate and heartbreaking situations every day. It will continue to happen, whether we pass the bill or not.

I support the bill because it should at least be regulated and safe and accessible for all women. Health care should be equal, regardless of where you live and your financial situation. For some women who live in cities and have money there are more available options to end an unwanted pregnancy safely and with minimal disruption to their lives. But for those women who live in regional or rural New South Wales it is not always so accessible or available. For many, the difficulty of making a decision to terminate and either not wanting to deal with it locally due to privacy or personal concerns, or, worse, because they cannot access the relevant care close to where they live, results in more difficulty at an already incredibly difficult time.

Many regionally based women have to travel great distances, including interstate, at their own expense, often having to stay overnight at further expense. Many have to take time off work to access treatment services. This is not equitable health care and it is just not good enough. We are knowingly leaving women in even more pressured and desperate situations, often alone, just because of where they live or due to their economic circumstance. We have to do better. I understand that at some point a number of amendments will be moved in this place relating to the bill. I will consider each one of those amendments as it is raised and debated but I fundamentally believe that abortion should no longer be a criminal matter and it should be dealt with as a matter of health care only.

I am very disappointed about the scaremongering and misinformation being spread in the community about the circumstances in which terminations occur and/or could occur as a result of what is proposed in the bill. It is wrong to mislead and scare people into believing untruths about what we are considering, and I will note that in relation to any proposed amendments. It is well beyond time that we changed this law. The women of New South Wales deserve better and the community deserves better. I will support the bill.

The Hon. SHAYNE MALLARD (15:01): In making a contribution to debate on the Reproductive Health Care Reform Bill 2019 I will attempt to put my reasoning for my position on the public record. I believe each of us owes the people who give us the great privilege and honour to represent them in this place the understanding of our reasoning and the decisions we make, particularly on such a touchstone issue as abortion. Each of us stands here as a product of a life journey to get here. That includes our early upbringing, our family values, our early role models who influence our development, our teachers and our education. For some it includes their religion—which is a foundation of their beliefs and values—and I respect that.

As the years unfold we are shaped by our peers and our search for knowledge and reasoning. That search never ends and it is never perfect. For some there is a gift of superior intelligence and for others—and I put myself in the latter category—there is a stronger empathy and a drive to understand and rationalise our shared existence. As I said in my inaugural speech, I come here as the eldest child of four, brought up in a working-class western Sydney suburb in a lapsed Anglican family. My upbringing was reinforced by strong matriarchs; grandmothers, great aunts, great grandmothers, my mother and, indeed, in later years, my sisters and my many strong close female friends. I was taught early in life the values of family, respect, non-discrimination and equality. I was taught very early, through deeds and actions, to respect women.

My role model women were Menzian liberals who believed fundamentally in empowering the individual to make decisions in their own lives without the heavy hand of government. That is why I am in the Liberal Party. I am not a religious man, but not through lack of thought. I sometimes envy those who are, and I respect those

who can be so absolutely certain about the questions that often keep me awake at night. I am more of a humanist, if not a small-l liberal pragmatist. Those values and life learnings that I outlined bring me to this place and this moment in time supporting the decriminalisation of abortion. My support for this bill is not a result of debates now or in the past. It is not a result of the comprehensive inquiry that I chaired and a report that I tabled yesterday. It is the result of an innate sense from my earliest political and social awakenings that women should be equal and that women are in the best position to make decisions about their own lives.

One of my earliest political awakenings was the perennial issue of *Roe v Wade*. I struggled then to understand why women's reproductive rights were being argued in the United States Supreme Court. I thought that Australia, and New South Wales in particular, was better than that. It was only in recent years that I became aware that abortion was still on the statute books as a crime under the Crimes Act 1900. For 119 years that has been the case and we are one of the last States in Australia to reform the law. For 119 years society has sent a message that a woman's body is not hers alone and that her future is not hers alone to determine. The message was that the heavy hand of the State denied women full autonomy and equality when it came to their pregnancy, that women could not be empowered to make decisions about their lives, and that in effect women could not be trusted fully. I note in 1971 Judge Levine in the District Court opened what has effectively been the loophole that has allowed abortions to occur legally in this State. In evidence to the Standing Committee on Social Issues inquiry it was put in these terms by a NSW Council for Civil Liberties witness:

To obtain a legal abortion in NSW women have to establish exceptional circumstances emerging from the Levine ruling of 1971: that the termination is necessary to preserve a woman from serious danger to her life or to her mental or physical health ...

The committee heard evidence that today up to one in three women have had an abortion and up to 30,000 terminations occur every year in New South Wales. A number of inquiry witnesses agreed that in effect in New South Wales we have abortion on demand—with a generally supportive medical profession, an ambivalent policing and legal system, and a sympathetic community. If that was not the case, why has the Parliament not since 1971 tightened the legislation around the Levine ruling? Why do authorities, the police and the prosecutors not apply resources to prosecute abortions and abortion clinics under the Crimes Act 1900?

That logically brings me to recognise that society has indeed changed and that community attitudes are saying quite clearly that this is a private decision of a woman and not a criminal activity. It is logical therefore in 2019 to take abortion out of the Crimes Act and put it into its own more detailed health-centric legislation. This principle of decriminalisation had many supporters at the inquiry, including the Anglican Archbishop of Sydney, Dr Glenn Davies, who said:

At the moment we are resting upon a judicial judgement. I do not think that is good government.

...

I think that your responsibilities as both Houses of Parliament are to make legislation. I have no problem about the decriminalisation aspect.

That is at page 20 of the report. The bill as it stands, whilst taking terminations out of the criminal code, in my view strengthens the regulations around terminations. For example, the limit of 22 weeks gestation after which two doctors must agree to a termination—often called late-term abortion—is a strengthening of the current law. Let us be very clear, there are no restrictions on late-term abortion under the current law, it is simply the Levine exceptions requiring one doctor to agree. The inquiry took emotional evidence that those terminations are extremely rare—around 1 per cent—and usually a result of a tragic medical catastrophe involving the unborn baby or the life of the mother.

The new bill adds requirements for informed consent: That is not in the Crimes Act 1900. The new bill adds requirements to consider counselling: That is not in the Crimes Act 1900. The new bill adds requirements to review the issue of so-called gender or sex selection abortions: That is not in the Crimes Act 1900. The inquiry heard testimony that there was no evidence of sex selection occurring in New South Wales. Let us be very clear, if gender selection could occur under the new bill then it is occurring today under the Levine loophole, but the evidence received is that it is not. I refer members to section 3.100 on page 46 of the report for a comprehensive commentary on the issue. I extract one argument at section 3.109:

From the perspective of medical practitioners, the Royal Australian and New Zealand College of Obstetricians and Gynaecologists argued that current medical practice and ethics frameworks would make it highly unlikely that doctors would agree to perform a termination solely on the basis of gender. That was reiterated in evidence by Dr Vijay Roach, President of the Royal Australian and New Zealand College of Obstetricians and Gynaecologists:

... one of my great concerns when I listened to the discussion and debate in the lower House around the issue of gender selection was that there was a huge reference to overseas populations in their own countries and in New South Wales. One of the things I found very concerning was that the discussion around the amendments effectively suggested we should concentrate on gender in a way that would end up with racial profiling. Frankly, that is offensive. To support this claim we need go no further than today's *Daily Telegraph* on page 7 as a headline screams at us "Sikh sex selection abortions common". If there is an issue, then let us get the evidence and devise a response. Let us not ignite a racially

charged vendetta. It is not hard to imagine that today every Sikh person in New South Wales feels vilified by that article and, by extension perhaps, the parliamentary debate that is underway. For those reasons I support the sensible amendment to the bill made in the lower House. If we are to legislate on gender selection, then let us do it on an evidentiary and factual basis and not through hearsay, racial stereotyping and sensationalism in the tabloid media. The bill goes further than the Crimes Act or the Levine ruling in regulating terminations. However, I acknowledge that there is another more central and fundamental dispute about this reform. On 18 August an article in *The Sydney Morning Herald* stated:

The bill has become a proxy for the ideological impasse between those who support a woman's right to pregnancy termination versus those who oppose abortion in all, or most, forms on moral religious grounds.

That is the nub of the issue. The inquiry heard considerable evidence from religious leaders on that point but I was moved to a deeper thinking by the evidence of Reverend Simon Hansford, Moderator of the Synod of NSW and ACT for the Uniting Church of Australia, when he outlined the position and thinking of the church. He said that the church's "respect for the sacredness of life means advocating for the needs of women as well as every unborn child". I am referring to page 60 of the 15 August transcript, which is available online for those who are interested. He then stated:

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 people's circumstances will always be unique. We believe that abortion should not be a criminal matter but that it is of vital moral, social and health significance. The Parliament resolving that this is not a criminal matter would open the health community and the wider community to better care, better support and better options for women and unborn children.

In conclusion on that point he said:

It is important that women have the space they need to make this difficult decision after careful consideration and that they should have access to high-quality counselling, pastoral care and medical services. Women must be free to discuss their situation before they make a decision.

We live in an imperfect world, a world where there are no absolutes. Socially, ethically and morally, if you will, there is a vast grey in-between area. Every person—and in this case mainly women, although some partners and families are involved in this decision—has to deeply weigh up the decision they are making in the various contexts that apply to their lives and values. The church has a role for those who seek it—I do not deny that—but I put it to members that the approach of Reverend Simon Hansford and the Uniting Church creates a non-judgemental environment where the church can engage with the woman at a deeper spiritual and moral level than the current law supports.

There is no doubt in my mind—and I am talking from experience with some close friends—that the decision to have an abortion is never taken lightly. It is deeply traumatic and is compounded by external circumstances. I suggest it is a decision that lives with the woman and perhaps with her partner for the rest of their lives. I strongly stand by any relevant support services that a woman may need to reach out to at this time in her life, whether that be counselling or medical, financial or spiritual services.

I will address two other matters in my contribution. The first is the criticism that the inquiry by the Standing Committee on Social Issues into the bill was too brief. Recognising that the reference and the timetable were agreed to by the House, it was not the first nor probably the last short inquiry into legislation. However, I will put on the record again the key points I made in tabling the report yesterday. The inquiry was able to canvass a broad representative sample of opinion and submissions on the bill. In particular, I note there were over 14,000 submissions via the website portal or email, 15 hours of hearings over three days, 15 panels of witnesses grouped into areas of interest, 44 witnesses including 10 senior religious representatives, approximately 300 questions asked by committee members and 174 pages of *Hansard*. There was also a comprehensive report, which was tabled yesterday.

The inquiry heard from religious leaders, ethicists, right to life and right to choose advocates, academics, women's organisations and the legal and medical professionals amongst the 44 witnesses. As at an hour ago I had received 11,848 emails to my office regarding the bill, and I am sure I am not alone in that. I thank those members who have spoken and commended the report. I strongly encourage members who have not yet read the report to do so over the next four weeks before we reconvene to consider any amendments. I assure members that they will find something relevant in it, no matter their view on this issue. Some have suggested that the inquiry could have been longer. However, it is my view that whether it was six days, six weeks or six months in duration we would have achieved no new enlightenment on this. We would not have changed any minds. No-one's position would have changed. The opinions are locked in and have been for decades.

The final point I address is that this bill is being rushed through the Parliament. People are latching on to that argument to oppose the bill in its entirety. That is an opportunistic political argument in my opinion. However, I note that the House has resolved to extend the period of consideration of the bill for at least four more weeks, giving members a chance to study the report of the committee, read the relevant *Hansard* of the evidence and

consult with their communities. But to argue that this law reform has come out of nowhere is to do a disservice to the advocates for law reform going back to the 1960s. I thought highly respected Wendy McCarthy, AO, the former women's adviser to Malcom Fraser and a founder of the Women's Electoral Lobby and Chair of the NSW Pro-Choice Alliance, gave us a good history lesson at the inquiry when in response to that very question she stated:

First of all I would say that in the early marches of second-wave feminism in Australia and New South Wales in the late 1960s abortion was an issue brought to public attention. ... I think in the 1970s ... education and reproductive rights were always seen as the two gateways to women's autonomy. That conversation has never changed ... This is a continuing story about women seeking autonomy and women being free from prosecution.

That brings me back to where I started—the strong women in my life among my family and my friends. I put it to the House that women must be empowered and trusted to make these difficult decisions about their bodies and about their own destiny. Women, if they seek to, can capably consider the significant moral questions that this decision entails for so many, including those who are religious, but that is their choice. Very importantly, the medical profession can then provide a person-centric medical service without fear of prosecution. I strongly support the bill on behalf of all the women I love and care about.

The Hon. ANTHONY D'ADAM (15:17): I thank the Hon. Shayne Mallard for his excellent contribution to debate on the Reproductive Health Care Reform Bill 2019. I acknowledge first that the right to access legal and safe abortions has been an issue that women have struggled to achieve over many decades. I pay tribute to that struggle. I acknowledge, in particular, the contributions to the debate from the Hon. Penny Sharpe and the Hon. Trevor Khan. They have forcefully put the case for change and I wholly endorse the arguments that they have made in support of the bill. I do not propose to speak at length in this debate. I do not want to delay the passage of this bill any further. Women have waited long enough. They are rightly impatient for change, but as this is a conscience vote I owe a duty to outline the reasons why I will vote for this bill.

I approach this question from the position of a commitment to freedom and choice. When I talk of freedom I am talking about liberation from the dictates and control of others. The purpose of this bill is to decriminalise abortion in this State. This is not a radical change to the status quo, as so many of the speakers in this debate seem to suggest. Abortion has, for all intents and purposes, been legally available since the 1970s.

The courts have applied the common law in such a way as to reflect the shift in social attitudes that have occurred since that time. That approach was appropriate for managing the change in social attitudes but it is no longer adequate or appropriate. Abortion is not a crime. It is not considered a crime by the overwhelming majority of the community. The law enforcement community has no intention of enforcing those provisions of the Crimes Act. The current arrangement is not consistent with the practical reality. It is also out of step with the approach in the rest of the Commonwealth. Abortion has no place remaining in the Crimes Act.

I am persuaded that the current arrangements impede access to equitable care and support for women seeking to have an abortion, particularly in rural areas, and that placing abortion on a certain legal footing will allow more women to be able to access abortion when they need to. The question about when life begins is obviously vexed. In this debate there are clearly diametrically opposed views. As legislators we are regularly called on to draw lines. Everyone can accept that where these lines are drawn reflects some degree of arbitrary assessment. As a society the only viable approach is to say that the right to life begins at birth. The bill recognises the complexity of this issue and has also drawn a second line at 22 weeks, when further oversight is required.

The starting point for me is that a woman must be able to control what happens to her own body. This principle is fundamental and is foundational to where any assessment of this issue must begin. The struggle for gender equality has at its core a rejection of the view that men should determine what women can or cannot do. A rejection of rigid gender roles starts with vesting in women, and only women, control over their own fertility, control over their own reproductive health. This notion is appropriately reflected in the title of the bill—the Reproductive Health Care Reform Bill—and I reject the criticisms made by some in this debate that the title is somehow Orwellian. The title is fit for purpose.

I turn to the issues around the conduct of this debate. If the contributions that have been made by members in this House and in the other place are to be taken at face value then it appears broadly common ground that abortion has no place in the criminal code. I recognise that for some there is an unwillingness to give any support to anything less than the rejection of abortion as morally and ethically unacceptable. But this group is clearly a minority. Some have complained that this process has been rushed, but this debate has been raging in the community for decades. The positions are well known and well canvassed. I see no merit in any further delay. There have been many attempts to attack this bill by those implacably opposed to its core purpose. They will not support this bill regardless of whether amendments are accepted or not. This is their right but that does not prevent me from calling this attack what it is—a tactic deployed to obstruct and delay.

In particular I will address one of the issues that has been advanced by opponents of the bill—that is, the issue of sex selection abortion. I think that is particularly—dare I say it—duplicious. There are issues grounded in fact and evidence and then there are those masquerading as issues that are without foundation in fact or evidence. This is one such issue. I have read the debate in the other place and I am concerned by the underlying implications behind some of the arguments in relation to this matter—namely, that this phenomenon is occurring in particular ethnic communities. It is a disturbing dog whistle. I am embarrassed for this Parliament that crude ethnic stereotyping is being deployed to try to obstruct this bill. I am unconvinced that there is a genuine issue requiring action. Correlation is not causation. I caution policymakers and legislators from rushing to judgement in this instance. Even in the event that this is indeed what is occurring, putting restraints on access to abortion is not the most effective means of addressing the problem.

If this is occurring we should be looking at all the policy tools available including education or, alternatively, placing restrictions on the access to information around the sex of the fetus. It seems pre-emptive to rush to a solution to a problem that may not be the case and without appropriate study, analysis and reflection. The problem with any amendment on sex selection abortion is that it returns the consideration of whether a woman can access a legal and safe abortion back to a criteria-based approach—that is, the woman must provide justification for why she wants to have an abortion. For me that violates the core principle that I outlined earlier that a woman must have full and complete control over what happens to her body. To require a reason violates that freedom and subjects that choice to external scrutiny. To say some reasons are legitimate and some reasons are illegitimate is to place limitations on the exercise of that freedom.

There are some pugnacious advocates for freedom on the other side of this Chamber. They might pause to reflect on the sincerity of their commitment if they are prepared to infringe on the rights of women to control what happens to their bodies. This is an insidious ruse to attack the philosophical core of abortion and of this bill. It is cynical in that it seeks to use the rhetoric of gender equality to justify constricting the rights of women to choose. If we were to start to designate the reasons for abortion, those who oppose abortion will be tempted to continue to narrow the criteria until the right to access abortions is so constrained as to make legal abortion inaccessible. I will finish with the words of Dr Vijay Roach in his evidence to the inquiry. His statement was eloquent and it captured succinctly the reasons I am comfortable supporting this bill. He said:

Abortion is part of health care. It is not a crime and it should not be part of the Crimes Act. The first principle is that women have the right to autonomy over their own bodies and that that right should be respected. A woman does not have to justify the choices that she makes about her own body. The second point is that the Australian public trust their doctors. They trust us to act ethically. They trust us to act with integrity and to the highest clinical standard. You trust us in every single aspect of medical care. The great risk of legislating the way that doctors should consult, should consent, should counsel risks undermining the doctor-patient relationship and the faith that the public has in the medical profession.

Doctors and nurses provide health care. We do so with compassion and kindness and respect. We do not judge and we do not impose our own moral position upon the patient. This bill should pass, albeit with the imperfect amendments, because we should not be the judges of the decisions that a woman makes about her own body. We should not stigmatise women. We should not control women. The role of the medical profession is to care and to nurture and to support women with respect, love, kindness and compassion. And we are not talking about a theoretical woman, we are talking about your, our, my daughter, partner, sister, friend, your fellow parliamentarians. They deserve access to the best health care. They deserve kindness and compassion and not judgment and you can be confident in us, your doctors, my members, my colleagues, in general practice and midwifery and in specialist practice, that we will deliver health care safely and ethically.

The doctor says they do not deserve judgement, and who are we to judge? We have had enough judgement, shame, stigma and moral opprobrium. I am not here to question a women's motives, to ensure they comply with someone else's moral standards. It is a matter for a woman to choose, based on her own conscience. I think this House should not entertain further obstruction and delay. The issues have been thoroughly canvassed in the other place. I am comfortable with the settlement arrived at. The bill should be supported as is, without further amendment.

The Hon. CATHERINE CUSACK (15:28): There are three core propositions in the case for the Reproductive Health Care Reform Bill 2019: first, that it achieves equality for women; secondly, that the fetus being aborted is not human life; and, thirdly, that abortion is criminalised in New South Wales, which is inappropriate and we need to remove it from the Crimes Act. On the first issue the proponents have told this Chamber over and over again that women cannot be considered equal under the current abortion law and that only by passing this bill can we finally achieve that equality. On the face of it that is actually a pretty exciting offer: "Vote yes to this bill and I will become the equal of my male colleagues and I will be treated with respect because that is what equality means." For me it means people will stop leaking my emails, Walt Secord will cease bullying the Hon. Bronnie Taylor and attacking the Hon. Natalie Ward—

The Hon. Penny Sharpe: Point of order—

The PRESIDENT: Order! I do not need to hear the point of order. I thank the Deputy Leader of the Opposition. I ask the Hon. Catherine Cusack to withdraw the word "bullying". Members are not to make imputations against another member unless it is by substantive motion.

The Hon. CATHERINE CUSACK: I will withdraw that word.

The PRESIDENT: Thank you. I remind all members that this is a sensitive bill and it has been a sensitive debate. I congratulate all members. Let us keep the debate respectful. Members will confine their remarks to the long title of the bill. There is no need for members to criticise other members. Members can agree or disagree with other members, but they do not need to criticise them.

The Hon. CATHERINE CUSACK: If equality is about respect then female members in this Chamber can look forward to not being attacked on the basis of their husbands and the parties that condone those attacks will no longer turn a blind eye to that appalling behaviour. It would be lovely to believe that the passage of this bill will accomplish all of these things because if we are to be equal it is all about respect. That is what respect means to me. It is not what you say; it is what you actually do. So what are members doing in the conduct of this debate? The opponents of this bill—and I am an opponent of the bill—are being characterised quite aggressively as Luddites who do not support equality for women and who are stranded in some eighteenth century British ideology.

I have just been told that, without even hearing a word of what I have to say about this bill, the assumption is that I am trying to derail it and use process to get rid of it. I have done none of those things. People have presumed upon my vote, they have not listened to a word that I have said and they have already ruled out every contribution that I have to make. The point is that that does not seem very respectful to me or to the views of those who oppose the bill. We cannot all be put in one cart and condemned in the way that we have been quite viciously attacked in this Chamber. It is actually factually incorrect and it is also very untrue. To be pushing this bill in the name of equality and respect and then treating people whose views are different in this way is the absolute antithesis of what you say you are trying to do—there is a gap between what you say and how you behave.

That includes the attacks on our female Premier. She is just one member with one vote. She played a key role in according Liberal members a conscience vote on this. That was her responsibility and that is what she did. She is being fitted up by extremes on both sides of the debate as though somehow it is her bill. I find that totally, absolutely incorrect and very disrespectful of our Premier. It is a red herring across what is a really important issue. I very much regret that behaviour in this debate. I do not see how creating a legal framework for late-term abortions in particular and terminating the lives of healthy babies born alive but unwanted by their mothers is going to result in equality for women.

In fact this bill is a devastating defeat for those of us who would like to support laws protecting unborn babies killed as a result of a crime, such as Zoe's law and those pregnant women who are stabbed in the stomach by their crazed partners. I do not understand why this happens but it seems to be an all-too-frequent event—for some reason these insane men wanting to stab their pregnant partners in the stomach. This legislation says an unwanted baby at any stage of gestation is not a life and that the wellbeing of that baby shall not be protected now or ever. This is a really fundamental change in our law. This is not just turning something in the Crimes Act into a new heading in the health Act. This is a fundamental change. This was not something that was discussed. This has not been an issue that has gone on for 100 years.

Over the last 100 years the landscape has changed considerably, particularly with contraceptives and the morning-after pill, which I have supported in this House. Characterising this as a simple technical movement of legislation is to be completely naive about all of the new provisions that are being introduced in this bill. It says that those babies shall not be protected now or ever. It rules out future legislation that I believe the community is very supportive of, particularly in relation to matters like Zoe's law. I am not ready to say that. I am not ready to agree that this dramatic change to our abortion laws makes women equal. It enhances the standing of some women who want to end their pregnancy but it is directly at the expense of women who do want their babies. I find it very unfair that as a result of this bill those women who would like those babies to be protected will not be able to be protected.

Many speakers pin their support on the location of the law in the Crimes Act. I am tired of being told over and over again that abortion is illegal in New South Wales when in fact it is perfectly lawful at present. The common law is very clear and the procedure is being paid for by Medicare. Do we really think the Federal Government and Medicare are paying for crimes to be committed under the Crimes Act? I do not think so. It is not logical and it is just not true. The only prosecution cited by the mover of this bill in the other place was that of a woman who attempted to self-administer a miscarriage. From what I can see, that will still be illegal under this bill, which requires the procedure to be undertaken by a qualified doctor. So there is no evidence of the prosecution or persecution cited by the proponents of the bill, just this bland and incorrect assertion that all abortions are illegal.

I am really disappointed in the Standing Committee on Social Issues report on this critical issue. It is claimed in the report that prosecutions by police are not undertaken as a matter of policy and that this policy could

change in future. I do not agree at all with that statement, which is made without evidence. It is a very significant thing to say and the committee really did not deal with it. In fact it verges on being a flippant treatment of one of the core issues concerning this legislation. Abortion in New South Wales is legal and it is publicly funded as of right now. In hospitals today we perversely simultaneously have female patients whereby one is in theatre undertaking emergency surgery, where doctors and paediatricians are working frantically to save the life of a 30-week premature baby; another is in a theatre undergoing an expensive IVF procedure, because there is zero hope of adoption in New South Wales; and a third is undertaking booked surgery in which a team of surgeons will abort a healthy baby—and all of these procedures are legal and they are all publicly funded.

We have been told repeatedly that the fetus is not life, it is just a bunch of disposable cells. At the same time we are being told that women who make the decision to have an abortion do not take that step lightly; that it is traumatic and life-changing for them. But if someone genuinely believes that the child inside is just a clump of cells and not alive, why are they finding this decision so traumatic? The best figures I can find are that half of pregnancies in Australia are unwanted and half of those result in abortions, so that is about 30,000 abortions a year. How do the proponents of this bill know that all of those abortions were agonised over and difficult decisions? It is just a claim and it is not actual evidence for this bill.

In 1972, the year of the Levine ruling, there were 4,564 adoptions in New South Wales. As the product of an unwanted pregnancy, I want to say that from my perspective adoption was an awesome and good outcome for me and for the 40,000 other people adopted in New South Wales during the two decades preceding the Levine ruling. Last year there were 177 adoptions in New South Wales and the vast majority of those were inter-country. Because we have thousands of loving couples who are desperate for children that are unwanted or unable to be cared for by their birth mothers, there is a clear inverse relationship between the increase in legal abortions in this State and the steep decline in children available for adoption to loving families.

This is a huge issue but it is barely referred to in the Standing Committee on Social Issues report and is omitted completely by those pushing the legislation before the House. I do not think that is respectful either. I am a mother. I had two awesome pregnancies and I have watched with joy as those two little miracles have grown into confident, humorous and successful young men. They fully respect women and they fully respect my life's work to advance the status of women. Please do not condemn me and the other women who are voting against this bill as not caring about equality for women. Do not disrespect me and my record, because no-one cares more deeply about those issues, and do not characterise us in that way. If proponents of the bill genuinely believe what they are saying—that this bill will achieve equality for women—the way they are going about it tells me the exact opposite.

Ms CATE FAEHRMANN (15:40): It will not be a surprise to anyone that I support the bill as it stands before us. It makes me proud to be able to stand here today as an elected representative of The Greens and proudly say that The Greens have an unwavering record of supporting women's right to choose. This has been our party's policy—agreed to and supported by our members—since our party's inception. I stand here too as a proud feminist who worked and campaigned alongside other women in my university days for every woman's right to choose.

Twenty-five years ago when I was a university student in Brisbane my friends and I organised what was my first political protest, calling for that State's archaic abortion laws to be changed. It was not the first protest to be organised for abortion law reform by any means and of course it was not the last. In fact it was pretty modest and I am confident it would barely have caused a ripple in the wave of protests and campaigns organised by countless brave women before and since then. But I can tell you one thing: My wonderful crew of feminist friends from the early 1990s would not have fathomed the idea that abortion law reform would take another 25 years to be won.

With Queensland's historic vote to decriminalise abortion taking place just last year, who would have thought back then that New South Wales would be the last State to grant women this fundamental right of power over their own bodies and lives? Abortion was made illegal in this State when it was written into the criminal code in 1900 by men who are all well and truly dead today. It was written into the criminal code at a time when women did not have the right to vote and were still very much considered the property of men. Since then, thankfully, we have come a long way but not all the way by any means.

The reporting of sexual assault and domestic violence against women continues to rise, yet we also know it is still frighteningly under-reported. The gender pay gap still exists and sexism and misogyny are rife in our society. We have our most well-known radio announcer—but not most well respected by any means—giving advice on air to our male Prime Minister to give the female Prime Minister of New Zealand "a couple of backhanders", and he still has his job. It is 2019 but this is what we as women are still experiencing every day. So here we are in this place debating whether women should have autonomy over their own bodies. Those in opposition to this bill want abortion to remain in the Crimes Act despite abortion being made available by the interpretation provided for by Levine in 1971. Regardless of the existence of a legal framework, women have

been having abortions throughout the entire history of humanity. The bill before us provides a legal framework for women and their doctors to access abortion safely, easily and without judgement.

The committee that inquired into this bill, the Legislative Council Standing Committee on Social Issues, stated in its report that approximately 30,000 abortions occur in New South Wales every year. That is hardly a surprising figure. Women do not fall pregnant just because they have suddenly decided to start a family or have a child. Whether or not some of the members opposite can stomach hearing it, people have sex. Millions of people in this country have sex. Some people have a lot of sex. Hopefully most have sex for enjoyment. Apparently, too, a man's desire to have sex is often greater than a woman's desire to have sex. If we want to stop abortions in this country the only way to do that is to stop men having sex with women. I doubt that is going to fly.

Sexually transmitted infections are on the rise amongst 18 to 30 year olds because condom use is on the decrease—I am not sure sex is. Opponents of this bill are living in a parallel universe where sex is all about procreation and women's bodies are nothing more than vessels to bring life into this world. How simple the world was in the Stone Age! Anyway, back to reality. Women can be in controlling and abusive relationships. Women are raped. Girls are raped by their fathers, by their brothers and by complete strangers. Some cultures and religions only allow sex in marriage—I am not sure how that is going for them, by the way. The majority of adults in this country have sex for enjoyment. Some of that sex will result in pregnancies that are not wanted. This is the world we live in right now. This is our world, where half of us are women and where we demand full equality.

In Australia between a quarter and a third of women will make the decision to have an abortion at some point in our lives. In 2011 I gave a speech in this place about the barriers facing regional women seeking abortion, particularly the cost of travel, accommodation and time off work. Those barriers still exist today. I note the contributions of the Hon. John Graham and the Hon. Mick Veitch on this issue. We need to make abortion safe, accessible and affordable for all women who cannot afford it or who cannot access it easily and safely. I note the comment of my Greens colleague Abigail Boyd that rich women have always been able to access abortion relatively safely. Making abortion legal will tear down barriers to safe abortion, whether they be cultural, socio-economic or geographic. It will enable women to talk with their doctors more easily and without fear of judgement or reprisal.

Like many other women—millions of women—I too have my own personal story. When I was 21, living in a share house in Brisbane, working two part-time jobs and studying at university, I fell pregnant. I immediately made an appointment to see Children by Choice, a wonderful organisation in Brisbane—the only one I knew of at the time—which provided women seeking abortion information and support in an environment free of judgement. Ironically the option I was given was to head over the border to Tweed Heads in New South Wales to a clinic that provided the service. It was all very clandestine, it was all very secret and it was all very criminal. I note the Hon. Bronnie Taylor's comments about women and how for some of them the fact that abortion is viewed as shameful is very distressing. My heart goes out to those women.

I personally was not ashamed back then and I am not ashamed now. It was not a traumatic experience for me back then. In fact it is we as lawmakers who should be ashamed. We should be ashamed that we have not made abortion legal and as a result socially acceptable for a woman to make her own decision about when and if to have a child. We should be ashamed that we have allowed women and their doctors to navigate a murky legal environment for years, putting them at risk of prosecution and making the whole process less safe. The Bureau of Crime Statistics and Research figures state that over the past 25 years 12 people have been prosecuted under the New South Wales Crimes Act for abortion offences. Four of those people were found guilty and sentenced. The most recent case was in 2017 when a Sydney woman was found guilty of self-administering a drug with the intention to bring on her own miscarriage. She was 28 years old and the mother of five children between the ages of four and nine years old.

I note the comment by some of the men on the other side of this debate and in quite a few of the anti-choice emails we have received—almost always from men—that many women have abortions because they are in desperate circumstances or have been pressured by male partners. Unfortunately that is the case for some women. But we have our own minds and we make up our own minds on this—that is the point of this bill. For many, they have an abortion because they have had sex with a man, have fallen pregnant as a consequence and are not ready to bring a child into this world, full stop.

Opponents of this bill are trying to muddy the waters by throwing around misinformation about very difficult and often traumatic circumstances that a woman might find herself in later in her pregnancy. They have been canvassed enough so I will not dwell on them further except to say that I have full confidence in this legislation, in women, in their doctors and in the medical profession as a whole to ensure we are not going to see a 30-week-old fetus aborted because a woman has gotten sick of carrying it. In fact late-term abortions by desperate women are more likely under the existing murky arrangements than they are under this bill.

How disgraceful the misinformation and scare tactics coming from the religious Right have been in this debate. They are straight from the playbook of their United States counterparts. This year in the US, nearly 30 States have moved to further restrict abortion rights and 15 have begun working on "heartbeat bills" which would ban abortion after six weeks. Alabama passed a bill in May which banned abortion outright, except if the life of the mother or fetus is at risk. Even rape and incest are not reason enough to grant a pregnant woman an abortion if she requests one in Alabama and any doctor charged with performing an abortion in that State risks up to 99 years in jail. The Alabama law also gives the fetus legal personhood, something which Reverend the Hon. Fred Nile's bill, the so-called Zoe's law bill, intends to do.

Make no mistake, some of the arguments from those on the opposite side of this debate make it clear they would prefer women had no right to choose. They would prefer we made all abortion illegal. Some of them would probably be happy with 99-year jail terms for doctors—why not have 99-year jail terms for women while we are at it? Last night the Hon. Mark Latham in his contribution to this bill said the Premier wanted to send our State back to the Dark Ages. Well, that is the Dark Ages right there: backyard abortions, women dying in alleyways after botched abortions or days later from infection.

Last night there was a protest in Martin Place. It was big, it was loud. It encouraged people to use a hashtag: #StandforLife. This hashtag is being used by anti-choice campaigners in the US right now, two of whom have seen a victory in recent days. Stand for Life among other organisations—including Family Life International, which Reverend the Hon. Fred Nile praised the other day in a notice of motion he gave to this House—has been behind a campaign to remove funding from Planned Parenthood. Planned Parenthood started in 1916 as a birth control clinic in the US. It has over 600 clinics in that country. It is an extremely well-respected and established NGO in the US.

Planned Parenthood said on Monday it was withdrawing from the federal family planning program rather than abide by a new rule imposed by the Trump administration prohibiting clinics from referring women for abortions. The rule also requires financial separation from facilities that provide abortion, designating abortion counselling as optional instead of standard practice and limiting which staff members can discuss abortion with patients. Clinics would have until next March to separate their office space and examination rooms from the physical facilities of providers that offer abortions. This is part of a series of efforts to wind back reproductive health to please far-Right religious conservatives who are a key part of Trump's political base. Welcome to *The Handmaid's Tale*. I actually think some of the men who are opposing this bill dream of living in Gilead.

Unfortunately the tentacles of the extreme religious far Right are also influencing decisions about aid in developing countries in order to stop family planning services in some of the poorest countries in the world. This is even happening in Australia. In 2012 the Australian Government pledged to double funding for family planning services in its aid budget to \$53 million a year yet that has been slashed in half since 2012 from \$46 million to \$23 million. Now that is something to be ashamed about. According to the World Health Organization more than 40 per cent of women of child-bearing age live in countries that have highly restrictive abortion laws or, if abortion is legal, it is not accessible to many women due to multiple barriers. Despite this, women will still seek ways to terminate a pregnancy, often because the circumstances of their life are not compatible with giving a child the best start in life.

The World Health Organization estimates that every year across the world five million women are hospitalised for treatment of abortion-related complications and around 47,000 of them die. One example in our region is the Philippines, where abortion is illegal. Almost 1,000 women die in that country every year due to unsafe abortions—that is 1,000 women. Another estimated 100,000 are hospitalised due to complications. When abortion is not safely and easily accessible, women have unsafe abortions and die, yet we still have members in this place today arguing for abortion to be made illegal.

I stress that when I am talking about the religious Right throughout my contribution I am not referring to all Christian people. In fact in a sign of the increasing distance between the Catholic Church hierarchy and people of the Catholic faith, you only need look as far as Ireland where in a referendum last year that country voted to overturn a ban on abortion—a country where 75 per cent of the population identifies as Catholic. Access to abortion is fundamentally linked to protecting the human rights of women. Every woman deserves the right to make their own choice about their own body—to decide when and if they want to have children. It is essential that our laws reflect this or else women will never truly be equal.

I thank everyone who has played a part in making this bill happen: Alex Greenwich, the cross-party working group, the co-sponsors including my colleagues Jenny Leong and Abigail Boyd. Thanks to the Pro-Choice Alliance, Our Bodies Our Choice, the Women's Electoral Lobby and all of the women in those organisations who have fought so tirelessly for this reform. Should this bill pass it will be the culmination of more than 100 years of lobbying, organising and protesting by thousands and thousands of women. Health Minister

Brad Hazzard stated in his contribution to this bill that since abortion was criminalised 119 years ago no-one has had the courage to change the law. That is not quite the case.

New South Wales is the most religiously conservative State in this country. Thankfully those forces do not play any part in The Greens. However, they are extremely powerful in other parties and we have seen this play out in recent weeks. When I first entered this Parliament in 2010 I had a handover from former member Lee Rhiannon, whom I replaced. We discussed the abortion law reform campaign. I was told that many pro-choice groups, individuals and MPs had been advising against trying to remove abortion from the criminal code in New South Wales for a long time. This seems counterintuitive, I know, but it was because there was a real risk we would go backwards as a result of the religious far Right using the opportunity to further restrict access to abortion. My consultation with feminist groups on this issue over the succeeding years confirmed this.

The fact that it was not until just a few years ago that an abortion law reform bill was brought before this Parliament by my colleague Senator Mehreen Faruqi is not because there was not courage to do so before then. There was, from all sides of politics. It is because those from parties who have members elected in preselections won on the back of support from the religious Right were adamant it would not pass. Worse, they feared we risked going backwards and that while women could by and large obtain a safe abortion if they needed one in New South Wales we should leave it alone. And now here we are and I am so glad we are here debating this today. But we are seeing some of these fears play out. We are seeing attempts by opponents of the rights of all women to have power over their own bodies to stymie this reform and to send us backward.

So I say to Premier Gladys Berejiklian and to anyone who might be wavering on this bill: Do not be bullied by these people. The threats coming from the religious Right, including from some sitting on the crossbench in this House, have no place in our democracy. This bill puts a legal framework around an essential medical practice for women that is already occurring and will always occur. That is all. If this House makes it harder for women to seek abortions than the current framework allows for then this House is sending a very strong signal to the women of New South Wales that we are less equal than men. I urge everyone in New South Wales who wants to see this bill pass to please make your voice heard over the next few weeks. Please email and phone MPs to urge them to support this bill. The passing of this bill will be a big step forward in the fight for women's rights. It will be a big step forward in the fight to finally make women equal. Surely we owe the women of New South Wales nothing less.

The Hon. NATASHA MACLAREN-JONES (15:59): I speak on the Reproductive Health Care Reform Bill 2019 and note the Premier has authorised a free vote for Liberal Party members of Parliament. For this reason, I believe it is important I outline to the House, but most importantly to my party and the people of New South Wales, my views on this matter and how I will vote. It is incumbent that we all explain our position. We are leaders and we write the laws of our State. I know that some will not agree with my position, but that is not a reason to avoid speaking or expressing my opinion. It is fair to say this is a challenging issue and the bill has exposed deep division in our community. As I have said before, abortion is a matter of great importance; a very personal and sensitive matter. For some it is deeply personal. For others it is a matter of women's rights. For others still, it is about human rights more broadly.

But the fact remains that lawful terminations are allowed currently in New South Wales. This was established in 1971 following a decision by Judge Levine. In New South Wales a 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 believes the procedure is necessary to preserve the woman from serious danger to life, or physical or mental health. The NSW Ministry of Health policy stipulates this and it has developed a framework for terminations. Strict protections have been implemented by the Ministry of Health outlining the need for the termination, the consent of the woman and the responsibility of the health organisation conducting the procedure. Furthermore, the policy outlines the process for a termination under 13 weeks, between 13 and 20 weeks and greater than 20 weeks, including the need to offer counselling and consultation with relevant specialists and, in some cases, multidisciplinary teams of experts in areas of fetal medicine, psychiatry or neonatology.

What is being proposed? The bill is not about decriminalising abortion. If that was the case, we would have before us a bill that codified the existing law in line with community expectations. I cannot support the Reproductive Health Care Reform Bill in its current form. I will outline in my speech the concerns I have and the amendments I intend to move in Committee. Before I do that, I place on the record my frustration around the process for examining the bill. I am concerned the social issues committee was not afforded enough time to consider the complexity of the bill. It was given a week to receive submissions, conduct an inquiry and prepare a report. Despite the short time frame, it received over 14,000 submissions. However, due to the short time frame, the vast majority could not be read. I apologise to those who took the time to write and to those who hoped to appear before the committee as a witness. I say to them, I will endeavour to ensure this does not happen again. As

a member of the community, they have every right to express their view and to ensure we as legislators are not only considering their views but are passing legislation in line with their expectations.

In addition to the submissions, I have been inundated with emails, phone calls and messages, over 90 per cent of which have asked me to oppose the bill. Abortion is a very serious matter and any legislation must be considered in a measured and respectful way. No matter where we stand, that is something we should all agree on. When we look at other States and the length of time they had to review their legislation, consult the public and consider amendments, we can see our process has been manifestly inadequate. Tasmania, Victoria and Queensland all held parliamentary inquiries and released consultation papers for up to six to 12 months before reporting the bill to the House for debate. In fact Victoria examined several models before a final bill was introduced. What is evident is that every jurisdiction has taken the time to consider abortion reform before passing legislation. The termination of pregnancy is very serious and personal. We owe it to the people of New South Wales to have extensive consultation and consideration, regardless of one's stance on the bill, to ensure we are providing good legislation for our State with appropriate safeguards.

When I was working as a theatre nurse, I recall a lady in her late forties who was having a dilation and curette. At the time I did not think much of the procedure; maybe I chose to ignore the procedure and focus on the medicine. Maybe I knew above all my job was to provide a duty of care to my patient and not judge. Either way, I could not help but feel for this lady, a mother of eight, who would not survive another pregnancy. Less than a month later I was called over to the maternity wing of the hospital to assist with a caesarean, which was expected to be standard surgery. Devastatingly, we delivered a stillborn baby. We all felt for the mother and family—staff and patients alike. Over the years, I have not thought again about these two cases, nor asked why one medical procedure emotionally affects so many and another is just that—a procedure.

I do not seek to raise the ethical question of when life begins, except to say that having seen the remains of a 10-week-old fetus and a dead 29-week-old baby, it is hard to not do so. From a personal perspective, I have been unfortunate to have had a number of miscarriages. The last was medically difficult and did not come without risk. I understand the loss of a child and feel for a woman who has lost a child, whether it is by choice or by nature. It is difficult for the mother and those around—the father and family. Having seen the ultrasounds of a baby's development, I find it difficult to accept the threshold for "abortion on demand" to be 22 weeks, as determined by the bill. I believe many in the community share this view and it is worth noting that other jurisdictions have lower thresholds.

A survey conducted by Galaxy Research revealed 74 per cent oppose late-term abortions past 23 weeks, with only 6 per cent supporting terminations of up to 23 weeks and only 5 per cent supporting terminations up to birth. A stillborn delivered at 20 weeks or more is registered as a birth and yet, under the bill, an aborted baby at the same gestation will not be acknowledged. Some argue that late-term abortions are rare and will occur only where there is a pressing medical need. If this is the case, then it should be clearly enshrined in the legislation. I accept the vast majority of medical professionals do the right thing and will continue to do so. However, we must protect the community from the ones who may choose to do the wrong thing; that is our responsibility as legislators.

The bill stipulates that after 22 weeks the medical practitioner must consult with another practitioner and both must believe the abortion should be performed. There is no threshold or clearly articulated assessment or checklist for late-term abortions. The bill leaves the power with the second medical practitioner, who is not required to assess the individually personally. Furthermore, evidence shows that an unborn baby can feel pain and yet there is no provision in the bill that a child being terminated is to be anaesthetised.

For abortions performed after 22 weeks that are unlawful, doctors face no criminal sanctions, even if they break the proposed law. If a doctor believes, for whatever reason, that the abortion should be performed, but fails to consult a second doctor, they will not face any criminal sanction, with professional reprimand being the only possible penalty. I believe this needs to be explored in the committee debate. There are several cases of premature babies being born at 22 weeks and surviving. The youngest recorded was 20 weeks and five days. In the Legislative Assembly, an amendment was voted down that would have provided a baby born alive after an abortion with the same neonatal care that would be given to any other infant of the same gestation and in the same medical condition. Since Victoria reformed its abortion laws in 2008, more than 300 babies have been born alive after abortions. Denying life-saving treatment for a baby born alive after a termination is, to say the least, inhumane. Secondly, if a child born alive after an abortion survives, who is responsible for the child—the mother or the biological father, or is it a ward of the State or up for adoption?

I also believe we need to clarify in the bill the prohibition of trading in human tissue, which is currently prohibited in New South Wales by the Human Tissue Act 1983. However, section 32 of that Act provides that a person must not sell or supply tissue from any such person's body or from the body of any other person. Because this provision refers to tissue "from the body of any other person" there is a question or doubt as to whether that

reference includes the body of a fetus. This doubt arises unfortunately because an unborn child in New South Wales is not recognised as a person.

Under the bill as it stands, there is no protection against prenatal sex discrimination. Sex selective abortion is a well-documented issue worldwide and has resulted in as many as 23 million missing females. The inquiry received evidence that girls are being aborted in New South Wales and Victoria because some communities value boys over girls.

Furthermore, the bill fails to ensure that appropriate support or counselling from specialists will be provided to a woman contemplating having an abortion. Proposed section 7 of the bill merely notes that before performing an abortion, a medical practitioner must determine whether it would be beneficial to discuss counselling with the woman seeking the abortion and, if so, to then provide her with information about counselling. This hardly provides a safeguard for the informed consent of a woman seeking a termination. It is subjective and based entirely on the medical practitioner's judgement. Whether it is in the abortion provider's financial interests to encourage an abortion—or whether there is any conflict of interest, for that matter—they as medical practitioners hold the power to determine whether it is beneficial to provide counselling to that woman.

It is argued that a woman has a right to choose to terminate a pregnancy, but she is not given the right to choose to see a counsellor. That decision is made for her. A mandatory offer of counselling should be provided to the woman, with that counselling being conducted by an independent body to eradicate any conflict of interest. A termination of pregnancy is a significant decision with the potential to physically and psychologically impact the woman. Overwhelmingly, but not surprisingly, a report conducted by Galaxy Research revealed that 90 per cent of people surveyed believe that women should have the right to independent counselling.

Under clause 9, Registered health practitioner with conscientious objection, the bill requires the medical professional to refer the client to another health practitioner or health service provider who does not have a similar objection. Does that mean that a public list will be made available of medical practitioners who will or will not perform an abortion? If so, will they and their practice be protected from potential violence? The bill will compel doctors and health professionals, regardless of their beliefs, to facilitate an abortion. It neglects our doctors and health professionals who may hold religious or ethical values that run contrary to pregnancy terminations and will force them to facilitate an abortion through the process of referral.

As if that is not difficult enough for our doctors, the bill also indicates that the failure to refer following a conscientious objection is grounds for complaints and disciplinary procedures under the Health Practitioner Regulation National Law and the Health Care Complaints Act. Respect for conscientious objection is a fundamental principle in Australia. Medical practitioners should expect that their rights will be respected, as would any other citizen in our democratic country. We are giving ourselves a conscience vote but refuse to allow our doctors and health professionals to have the same right.

I find it extraordinary that there is no mention of a woman in this bill, despite all of us referring in this debate to women who are pregnant. As the law stands, only those who are legally female can be pregnant. This should be about them. The use of "person" rather than "woman" in the bill is based on a radical gender ideology that is out of touch with biological realities. Under the Births, Deaths and Marriages Registration Act 1995, a person born female could only apply to change the sex on her birth certificate to male if she first underwent a sex affirmation procedure, defined as "a surgical procedure involving the alteration of a person's reproductive organs". While some members may wish this requirement to be abolished and any person to be entitled to change their registered sex at will, that is not currently the law in New South Wales. It is not appropriate to anticipate any such change. Those who attempt to do so by stealth are attempting to smuggle this terminology into the bill, which purports to be about women's reproductive health care.

Finally, I refer to concerns raised about access to reproductive health services in rural and remote areas. More needs to be done to support women and families, but it is not right to say that because there are challenges with accessing services, we should allow late-term abortions. That is a simplistic view of a complex issue. Members in this House and in the other place have raised serious concerns about the bill and I welcome the opportunity for our Chamber to reflect over the coming weeks on the amendments being proposed. If this bill is to pass this House, it is imperative that it is in line with community expectations and protects women and unborn children.

The Hon. MATTHEW MASON-COX (16:13): I strongly oppose the Reproductive Health Care Reform Bill 2019 as it stands, whilst supporting its core principle of moving the regulation of abortion from the Crimes Act into a health framework. In doing so, I acknowledge at the outset that for me the issue of abortion is a profoundly complex and controversial life-and-death issue that seeks to balance competing rights and strongly held principles with unavoidable realities. In trying to resolve this conundrum, I believe it is my duty as a legislator

to seek the truth, however difficult it may be to discern in the swirling clouds of emotionally charged opinion. In Pope John Paul II's 1998 encyclical *Fides et ratio*, his Holiness stated that:

Faith and reason are like two wings on which the human spirit rises to the contemplation of truth ...

I share Winston Churchill's view that truth is incontrovertible. Malice may attack it, ignorance may deride it, but in the end, there it is. In considering the truth of this issue, I stand in judgement of no-one. The pain, anguish and loss that women—often with partners and others—must endure in deciding to abort their baby is self-evident. In seeking truth in this place, I believe that the inviolable foundation must be proper process. Sadly, that has been denied to the members of this Parliament and the communities that we represent. I will reflect more on this egregious betrayal later in my contribution. I believe that, ideally, abortion should be safe, legal and rare with appropriate restrictions recognising that the woman's right to choose—particularly in the first trimester—increasingly conflicts with the rights of the unborn baby as the pregnancy progresses. This tension between the competing right of the woman to choose and the right to life of the baby in utero recognises the incontrovertible truth that life begins at conception. This is not only my personal belief but also a self-evident biological fact.

However, it is also my duty as a member of Parliament to reflect upon widely held community views and practices. The fact that abortion is widely accessed by women across this State is undeniable. Up to 30,000 lawful abortions are performed in New South Wales each year. That translates into 16 abortions every hour or an abortion every four minutes, if one assumes abortions are performed during normal business hours—a staggering reality in a world where contraception and sex education is readily available. Accordingly, in my view, the question before this House is how, in light of these circumstances, we should as legislators seek to regulate abortion as predominantly a health matter. It is not a question of whether abortion should be permissible. As encapsulated by the judgement of His Honour Judge Levine in *R v Wald* (1971) at page 29, under the current framework abortion in New South Wales is already safe and legal where it is:

necessary to preserve the women involved from serious danger to their life, or physical or mental health, which the continuance of the pregnancy would entail.

However, the truth is that the bill radically alters that threshold test for aborting a baby, despite some proponents of the bill consistently asserting that the bill simply transfers abortion into a health framework. Under the bill, abortion is automatically permitted at not more than 22 weeks gestation with the woman's informed consent. If over 22 weeks, it requires two specialist medical practitioners to agree that in all the circumstances the abortion should be performed. I believe the bill should reflect the current, fairer threshold under *Wald*, which better balances the acknowledged competing rights between a woman and her unborn baby. Accordingly, I will propose amendments to this effect.

The arbitrary line drawn at 22 weeks gestation also fails to reflect the existing clinical reality in New South Wales that babies of 20 weeks or more gestation must be aborted through giving birth at a hospital or an accredited health facility. In my view, the threshold in the bill should drop to 20 weeks or below to improve the welfare and support of the mother in those complex late-term abortions. Tasmania has legislated a 16-week threshold and Western Australia a 20-week threshold, and I will propose a series of amendments to this end. The bill contains a range of other problematic provisions, including a failure to prohibit sex-selection abortions, the fettering of the right of a medical practitioner to conscientiously object and a grotesque failure to humanely treat late-term aborted babies that are tragically born alive. I will deal with these and other defective provisions of the bill in the Committee of the Whole and will propose a range of amendments to improve the bill.

Now I reflect on the process that has steered the bill to this place. Never in the history of this great Parliament has there been such a perversion of the democratic process. Apparently, so the story goes, it all began in the last term of Parliament, when a so-called cross-party working group embarked upon a secret mission to reform this State's abortion laws, no doubt emboldened by the passing of the bill establishing 150-metre exclusion zones around abortion clinics in New South Wales.

The Hon. Trevor Khan, the Hon. Penny Sharpe, the member for Summer Hill, Ms Jo Haylen, and the member for Sydney, Alex Greenwich, seconded the services of the health Minister, Mr Brad Hazzard, to assist with the drafting process. At no time was the Liberal party room informed of progress in the last term of Parliament or in this term prior to the surprise announcement of the Reproductive Health Care Reform Bill 2019 by the member for Sydney and the health Minister at a media conference outside Parliament House on Sunday 28 July 2019. The strategy settled upon by the working group was to launch the bill into this Parliament like an Exocet missile in the coming weeks, while the Legislative Council was not sitting, and force it through the Legislative Assembly without further public consultation and debate, all in the name of dealing expeditiously with a controversial issue which could only serve as an unwanted distraction from the core business of government.

The problem with this strategy was that only supportive stakeholders, including peak media and women's health and legal organisations were consulted in the drafting of this controversial and complex bill. All likely

opponents of the whole of this bill or parts of it—including peak right-to-life bodies, family and religious stakeholders, and the communities they represent—were airbrushed from the consultation process. That was a very cunning plan indeed. This missile predictably exploded in the Liberal party room on 30 July 2019, and the contemplated time line was quickly revised in light of the strong response. The bill would now be introduced and read a second time on Thursday 1 August 2019 by the member for Sydney, and laid upon the table for the minimum time of five days required by the Legislative Assembly standing orders. It would then be dealt with on an urgent basis as a de facto Government bill until passed in the following week, with a view to pushing it through this House as Government business in the next sitting week so the bill could be proclaimed as law before the end of August.

After further pushback from colleagues and a hostile public reaction, the advocates of the bill panicked and decided to establish a parliamentary committee process in the Legislative Council as a device to point to when anyone dared to mention that there had been no meaningful consultation. This device also served to deny the push for an inquiry in the Legislative Assembly, as advocated by no less than the respected Attorney General, the first law officer of this State, and many of his colleagues.

However, this diversion also proved to be a monumental failure of political judgement and process, which compounded the existing problems as the bill's proponents forced a five-day inquiry through the Legislative Council. In the same week, this House agreed to a five-month inquiry into animal cruelty in New South Wales. Five months for animal cruelty but only five days for abortion. Five days of inquiry then morphed into 2½ days of hearings, which looked more like a perverse game of speed dating than a considered parliamentary inquiry, as stakeholders moved in and out of the inquiry room like contestants in a game of musical chairs.

The Hon. Penny Sharpe: Point of order: I have been very reluctant to interrupt the member but he is traversing the procedures of this House and the way in which we conduct committees that are endorsed by this House.

The PRESIDENT: The member has started to attack the committee, its report and its timing. I ask him not to do it again.

The Hon. MATTHEW MASON-COX: I have moved on. When the music stopped over 13,000 submissions had been received in just a few days, far too many for the committee to even consider. So a sample was taken to guess why so many were so upset about so much, but in so little time. You could not deliberately plan a more appalling betrayal of our parliamentary processes and the communities we are meant to represent. Here is how some of the inquiry participants viewed this abuse of our democratic processes. The Women's Forum Australia submitted:

The entire process around the Bill has been shambolic, non-consultative and clearly designed to suppress, rather than promote, discussion, debate and input from the community and key stakeholder groups, including women... The insufficient time given to seeking input from stakeholders further demonstrates Parliament and the government's lack of interest in truly consulting on a piece of legislation that significantly impacts all women in NSW.

Women and Babies Support, similarly commented:

It has been a gross negligence on the part of the New South Wales government, particularly the Premier, to permit and facilitate debate on an abortion bill with only two working days since its introduction to Parliament. The Premier has gravely neglected her responsibilities to the people of New South Wales to ensure they have adequate time to have their say on a new proposed law on abortion.

Bishop Daniel, Bishop for the Coptic Orthodox Church Diocese of Sydney, Queensland and Northern Territory said in evidence:

I am disappointed that such a significant public-interest matter is potentially going to pass through Parliament in just a couple of weeks without adequate time afforded to this highly important issue, which has caused so much public division and anger. As Bishop of the Coptic Orthodox Church dioceses ... I represent a congregation of more than 70,000 people who have not been offered enough time to digest and understand how this bill will affect them ...

Anthony Fisher, Catholic Archbishop of Sydney, said in evidence:

The way the bill was introduced and rushed through the Legislative Assembly, and this Legislative Council inquiry curtailed, with almost no opportunity for community engagement, will only add to cynicism about Government today. It has made it very difficult for this State's 1.8 million Catholics to make their views known to their elected representatives.

How sad; how very sad. This has been a forced abdication of our privileged role as legislators for, and representatives of, diverse communities across this great State. The former New South Wales Attorney General Greg Smith, SC, and current urban vice-president of the Liberal Party expressed his sentiments in the following way in a letter widely distributed to Liberal Party members:

Why?

"Why?" is the question people are asking about the rush for abortion law reform in NSW.

Why now? Why the urgency? Why meet the demands of Alex Greenwich MP? Why not listen to people first? Why oppose reasonable amendments? Why is Health Minister Brad Hazzard so involved (and even celebrated) with those leading this rushed reform?

It's not too late to answer these questions and fix the problem this has become.

There are a number of issues at stake here.

Firstly, some important recent history. Just two years ago, every Coalition member in the NSW Upper House opposed an abortion law reform Bill. Every Liberal & National voted down the Bill brought by the Greens (it was lost 25 votes to 14). This was just a few months after Gladys Berejiklian became Premier and it is understood the vote reflected her position.

Nationals MLC Trevor Khan, now a co-sponsor of the current Bill, told the Parliament he had no evidence that *"abortions are performed in a dangerous or unsafe manner, or that they failed to take into account the health and welfare of the mother. Put another way, there are 500 lawful abortions performed in New South Wales every week"*. What has changed to warrant the now rushed Bill?

He looked at abortion statistics in Australia and elsewhere and concluded: *"This data makes it difficult for me to conclude that currently there is a systemic failure"*. Again, what has changed in two years time?

Mr Khan finished his address to Parliament by quoting from an article which asserted: *"the myth that abortion is illegal in New South Wales, that doctors are routinely prosecuted and that the common law is restrictive and illiberal . . ."*. Why was it a myth only two years ago but not today? What has changed in 24 months?

Perhaps most notably, the Coalition's position then pointed to the lack of discussion and debate and called for *"a discussion based upon an accurate understanding of history, the law and present-day practices, not on myths and anecdotes."*

Regrettably, such a discussion is the very opposite of what has taken place with the 2019 Bill. If there has been a discussion on the current Bill, it was behind closed doors among only those who knew of the Bill before it was foisted upon Members of Parliament at 11pm on a Saturday night. MPs who were told they must vote on it that very week.

Secondly, as Liberals we believe in listening to people and communities, and reflecting individual rights to speak, think, act, believe and associate. We believe in contesting ideas and uphold that debate, deliberation and due consideration are warranted before a firm decision. These essentials are far from being met with this rushed Bill. Thirdly, there was no prior notice of what would now be perceived as the highest policy priority. Leading in to the 2019 election, the Coalition was reported as *"showing no intention of changing the law"* in relation to abortion and a spokesman for the Premier stated *"the Coalition had no plans to amend the relevant sections of the Crimes Act"*. Labor committed to referring the matter to the Law Reform Commission, which would have been a far more comprehensive consideration than the current rush. Interestingly, the Premier did commit pre-election to supporting laws to protect the life of an unborn child. Thank you, Greg. I could not have put it any better myself. This is where we find ourselves today. I submit that it is constructive to contrast the unseemly haste in ramming the bill through the Parliament to approaches taken in other States in the area of abortion law reform. The most recent States to decriminalise abortion were Queensland in 2018, Tasmania in 2013 and Victoria in 2008. All these States established comprehensive and extensive public consultation processes involving parliamentary and/or law reform commission inquiries in order to develop their unique response to this complex and significant matter of public interest.

In Queensland this involved two bills with two parliamentary inquiries before a referral to the Queensland Law Reform Commission, another report, then the formulation of a Labor Government bill that was again referred to another committee inquiry before the subject bill was debated and passed over a number of days. This whole process took 2½ years. In Tasmania the Labor Government introduced a draft bill, issued an information paper and invited public submissions before introducing a revised bill to Parliament. This bill was amended in the lower House and then referred to a five-month upper House inquiry before being passed with further amendments. This whole process took over eight months. In Victoria the Labor Government referred the issue of abortion reform to the Victorian Law Reform Commission for an eight-month inquiry. The commission's final report was tabled in Parliament with three different legislative options. Three months later the Labor Government introduced a bill to decriminalise abortion which was passed a further three months later. This whole process took over 13 months.

In contrast, consideration of the bill before the House has taken just 20 days to date. Given the timetable for its passage imposed by the proponents of the bill as at the start of this week, the whole process was scheduled to take just 22 days in total. Yesterday, after further public pressure, the consideration of the bill was extended by three weeks. The complete process is now scheduled to take less than 1½ months in New South Wales—compared to eight months in Tasmania, 13 months in Victoria and 30 months in Queensland—yet proponents of the bill keep stating that it has been subjected to a comprehensive consultation process. How utterly disingenuous. They consistently assert that these inquiries and processes in other States somehow substitute for a proper consideration of the bill by this Parliament.

This assertion is both fatuous and self-serving to the extreme. It misappropriates the sovereignty of this State and cynically excludes the people subject to its laws from a proper consultation process. Of course the bill is significantly different to bills passed in other States; it must be considered anew, as there is much devil to be found in the fine detail of this complex and controversial bill. Moreover, the people of this great State should be meaningfully included in a proper consultative process under the auspices of a joint select parliamentary committee. To facilitate this I respectfully submit that the bill should be immediately set aside as it has been spawned by a rushed and compromised process. Accordingly, I move:

That the question be amended by omitting "now" and inserting at the end instead "this day six months".

I believe that it is imperative to start this process again by establishing a joint select parliamentary committee inquiry so that we can restore the integrity of the Parliament and restore trust with the people we are meant to represent.

The PRESIDENT: Before I call the next member, I indicate that during the break I will give consideration to the amendment moved by the Hon. Matthew Mason-Cox and come back to advise the House. I need to firstly confer with the Clerk.

The Hon. ROSE JACKSON (16:33): I am not enthusiastic to speak in this debate. I do not like the fanfare, the theatrics, the politics and the game playing. I thought that in this country we had avoided the United States path, where the cultural war is fought on the battleground of my body. However, so much of the rhetoric and behaviour surrounding this discussion has made me think we are perhaps not so far from that place. I find it exceedingly uncomfortable to talk about intensely private medical decisions. I resent the expectation that women should have to beg lawmakers, disclosing super-heavy personal stuff, to try to knit together enough sympathy to have the law finally reflect the reality of their lived experience: that they are not criminals.

To be honest, I find this whole circus so gross and unpleasant that I was tempted to not even give a speech. Everything has already been said; I think we should just get on with it. However, I have to speak. I have to take up the space I have been given as a gesture of solidarity and support of those whose experiences and voices should rightly be central to this debate, but wrongly are not. With all of the absolute rubbish that has been said about women, I want to speak our truth. The flushed cheeks and the prick of sweat under your armpits when your period is late and your mind races to the question, "Am I pregnant?" The tears welling in your eyes and the choking lump in your throat at prenatal scans when the technician has been silent for a really long time and then quietly says, "I think I'll just get the doctor" and you just know: Something is wrong with my baby. This is not something extreme. Women are not asking for anything extraordinary. We are just asking you to trust us. We are asking you to reject the assumption that women do not know what we are doing and that we are unaware of how our bodies work and the realities of our lives.

The courage of women who are sharing their stories is commendable. However, I say this to them: You do not need to share your reason for having an abortion—you just have it. You do not need a reason. Your abortion does not need a justification that you should feel compelled to explain to me or anyone else—it just is. You do not need to prove yourself to me and I am not interested in proving myself to anyone. This whole debate strikes me as a massive and sustained invasion of women's privacy. These decisions are intimate and personal. They are private—for the women involved, for their partners and families. No-one is obligated to share these experiences. This can be very depleting and some women are simply not willing to put themselves in this situation.

Stories do not remain in the hands of the storytellers. Once something very private is shared it is no longer yours. Some of us are not prepared to give that away. If members extend this debate with more committees and more talk on something that everyone knows is not going to change a single mind—because we know the issues and we have considered them—then just be clear about the exhausting impact this is having on women. Also be aware of the fact that so many people in New South Wales think this debate is a waste of time. They are paying us to do our job. It is clear to them, as it is clear to us, that a vast majority of people support this proposition. They want us to get on with it. They want us to talk about things like why their wages have not moved, or why their trains are late, or why their kids cannot get jobs or why they are drinking dirty water in regional New South Wales.

If you think women make decisions about having an abortion flippantly or lightly or carelessly—"for any reason", "abortion on demand", "floods of abortion"—then you do not know women. I have found motherhood the most profound of experiences. It is deeply affecting and fundamentally life-changing. The capacity to control that experience and when it happens, how it happens, how you form your family and what form it takes—motherhood is central to womanhood and must be in the control of women. Women do not take their role as mothers lightly, flippantly or thoughtlessly.

If you think women would make decisions about terminating a pregnancy in this way you insult every woman, every mother. This is the extreme position. The extreme position is to suggest that this is how women would approach motherhood. It is an outrageous affront to women and mothers. The radical proposition is that women cannot be allowed to make decisions about their own bodies and their own families. The current legal arrangements in New South Wales are unfair to women in regional areas and disadvantaged women who might not have a car or childcare arrangements. They are particularly difficult for poor women. I will not stand for this. Continuing the current arrangements continues this inequity.

The current arrangements in New South Wales are unfair on doctors, nurses and healthcare workers. Women have to rely on the uneasy and not regularly tested common law provisions when trying to access medical

services. These arrangements are clearly unacceptable. The bill is not an extreme or radical response to these unacceptable arrangements. In fact, it is a perfectly sensible and mainstream way of transitioning abortion from the Crimes Act to a health Act where it will be regulated in a way entirely consistent with national best practice and expert medical opinion. Everything else is a fabrication. The people of New South Wales are onto this and they will not be misled. Do not tell me that you accept that abortion should be decriminalised but you do not accept this bill. We will debate amendments fully in the Committee stage but the bill is the decriminalisation of abortion and nothing more than a codification of current arrangements, removing legal uncertainty and increasing medical oversight for late-term abortions. It is nothing more than that.

Women should be able to live unapologetically without stigma or shame. Every abortion is conducted on a case-by-case basis but the decision regarding each case is for the woman, her family and her doctor, not for the courts and not for the lawyers. It is particularly insulting and baseless to suggest late-term abortions happen because of a last-minute change of mind. There is absolutely no evidence that this is the case. Late-term abortions are a tiny percentage of terminations and are always because of serious and complex medical complications. The medical arrangements requiring two doctors, including a specialist, to participate in multi-disciplinary decisions reflect this reality. They are never because a heavily pregnant woman wakes up one morning and simply changes her mind about being a mummy. The extreme position is to suggest that women would behave in such a way. The radical proposition is that you believe women would act like this. How absolutely and deeply insulting to all women.

To women I say this: If you do not think abortion is right, if you are uncomfortable about it and it is not right for you, do not have one. This is not a throwaway line; it is a genuine, heartfelt view. Do not feel pressured and judged about your decisions. Choice is the choice to have a baby when it feels right for you, even if others challenge that wisdom. Sister, you are wise and powerful. If it is your time to be a mother and you know in your heart that is what you want and that abortion is wrong for you, then do not have one and you deserve all the support you need. But pause and think whether that choice, your choice, should be denied to someone who has come to a different conclusion.

Almost everyone in New South Wales knows that it should not, which is why they support the bill. If you do not support this legislation because you think that people should not be allowed to terminate a pregnancy, if you think a doctor who assists in this should face criminal sanction for that action, then just say that and vote against it. I respect and understand those who have those views, although I do not share them. But do not dissemble or distract, do not insult my intelligence by pretending that your objection is entirely about process. Do not tell me that you want another bill, a better bill, a gold standard bill, when the reality is you would never support such a bill. Do not pretend you want more time to consider this legislation when such time would make no difference to what you think. You do not actually want to slow this down, you want to stop it, and you would do that right now if you could, but you cannot. So instead of talking about substance we are playing politics with process. Show the community the respect of being honest about that.

Cherish Life circulated material to members of Parliament highlighting misleading and hurtful campaigning they had conducted in previous elections against those who had supported women's reproductive freedoms. They threatened members, who in good conscience supported this legislation, that they would be targeted in future elections. Well, we will not be threatened and we will not be cowed. If you think we will be intimidated by misinformation and poorly designed leaflets replete with grammatical errors, you have forgotten that we are the descendants of women who starved themselves for their rights. If these women endured tubes shoved down their throats in force-feeding just to win the right to vote in elections, we can endure the lies, hysterics and spectacle you are making of this debate for a few more weeks. Women are smart, we are considered, we are thoughtful and we are resilient. We might be frustrated with further delays but our determination to proceed will not be frustrated. We will not go away, we will not give up.

You can change the rules; we will learn the new rules. You can change the process; we will adapt to the new process. We know women and men in New South Wales support this legislation. They know abortion should be a health matter not a criminal one. Whilst they are getting on with their normal lives, book week costumes, the double drop off, time for families, friends and their jobs, we should be getting on with our job of voting on this piece of legislation that has come before us. That is how democracy works. Propositions are put forward and legislators vote on them. This process is not new. This issue is not new. If you have not been paying attention to women for weeks, months and years, as we have been raising this issue in our communities, then that is not my problem and it is not the community's problem. Do your job and make decisions about something we have been talking about for a very long time.

It has been argued that the bill seeks to make abortion more common. This is absolute garbage. Commonality and criminality are not linked. Removing abortion from the Crimes Act will not make it more prevalent. If we want to address prevalence, let us talk about contraception, not criminality. I am enthusiastic

about a meaningful conversation on how we can reduce abortions by reducing the number of unwanted pregnancies. Unwanted pregnancies are not a good thing for anyone involved. Let us do sex education better, have condoms in schools and make the contraceptive pill available over the counter in consultation with pharmacists. This is what we can do to reduce the number of abortions. The links between commonality and criminality are so tenuous that even in countries like Northern Ireland, where criminal laws are used with regularity to target women and doctors, abortions still regularly occur. Women take drugs they have bought on the internet and bleed alone in their bathrooms.

Women—people—do not want to get pregnant when they do not want to be, but they do. People do not want their unborn babies to have massive fetal abnormalities, but they do. Unwanted pregnancies are not okay. We live in a broken world and women are exposed to poverty, violence and discrimination. Current legal arrangements only make experiences more difficult. Massive fetal abnormalities are also not okay. They are horrible and cause immense grief, but they happen and when we lie about the reality of what late-term abortion looks like, when we seek to insert ourselves between a grieving woman and her two doctors, hovering over them in a hospital room, we cause extreme offence to these grieving women and deny the reality of their lives and what happened to their babies.

The pathway through our broken, difficult world is not always easy. Through the noise, the activity and the conflict, there are conflicting rights. How do we resolve these challenges? The path is trust. We must trust women. We must trust their doctors. In the 1970s my mother had an abortion. It was right for her, and she never regretted it. In 1911 a group of Australian suffragettes held a women's suffrage coronation procession in London championing the cause of women's political equality. Mrs Emily McGowen—wife of the Premier of New South Wales at the time—was one of its leaders. Once, New South Wales proudly led the world. Now, we follow in the footsteps of others.

The message of these pioneering suffragettes reflects back to me with eyes wide open my own mother's experience. Their message is one that women, their families and the doctors of New South Wales send us in this debate. Their message is a silver thread throughout history connecting those suffragettes to contemporary campaigners for women's equality like Our Bodies Our Choices, NSW Pro-Choice Alliance, the Hon. Penny Sharpe, MLC, Jo Haylen, MP, Labor for Choice and Wendy McCarthy, who reminded me of this story. Their message is one for us in this Chamber right now in this vote. Their message emblazoned on their banner is "Trust the woman mother, as I have done."

The Hon. MARK PEARSON (16:48): I speak in support of the Reproductive Health Care Reform Bill 2019 and commend my Animal Justice Party colleague, the Hon. Emma Hurst, for co-sponsoring this much-needed bill. The Animal Justice Party stands for kindness, empathy, rationality and non-violence and I believe the bill delivers on all these values for the women of New South Wales and their treating doctors. It is just over two years ago since I stood here in this Chamber speaking in support of the Abortion Law Reform (Miscellaneous Acts Amendment) Bill 2016. Since the failure of that bill to secure a majority vote New South Wales has become the only State in Australia where women and doctors can be jailed for terminating pregnancies.

The only reason this has not caused public outrage is that the New South Wales public is generally unaware that abortion is illegal. It is only by virtue of the 1971 landmark judgement in *Regina v Wald* that women who have undergone abortions and doctors who have performed them have not occupied all the jail cells available in New South Wales. The Levine ruling, named after the judge, defined an unlawful abortion as one where there was no "economic, social or medical ground or reason" upon which a doctor could have an honest and reasonable belief that an abortion was required to avoid a serious danger to the pregnant woman's life or to her physical or mental health. That is a humane and rational defence for abortion whilst it remains a crime, but it is not the basis on which to operate a modern twenty-first century reproductive healthcare program.

Many in this Chamber are undoubtedly keen to leave the law as it stands, believing that abortion should remain a punishable crime but they lack the courage of their convictions to say so. They know that any broadscale attempt to enforce these laws in 2019 would lead to a significant electoral backlash. With an Australian Bureau of Statistics estimated 20,000-plus abortions in New South Wales each year, it would also lead to our jails overflowing with women and fertility control clinics being emptied of medical staff. And so we muddle along with an unacceptable compromise of women and doctors arranging terminations in the twilight zone of legality.

At this point I acknowledge the #Arrest Us campaign on Facebook and Twitter, started by Emily Mayo, where dozens of women have confessed to having committed the crime of abortion and are prepared to be arrested. To my knowledge no police officer is knocking down any door. That is not to say that there have not been prosecutions in the modern era. Data from the NSW Bureau of Crime Statistics and Research reveals that 12 people have been prosecuted under the New South Wales Crimes Act for abortion offences in the past 25 years. A 2018 survey by researchers at the University of Sydney and James Cook University found that 76 per cent of respondents did not know that abortion was a criminal offence in New South Wales. Once this information was

provided, 73 per cent of those who were surveyed thought abortion should be decriminalised and regulated as a healthcare service, which is exactly what this bill proposes. With three-quarters of the population saying abortion should not be a crime and should be dealt with by healthcare professionals, legislators should feel very confident in having the support of the vast majority of New South Wales residents when voting to pass this bill.

So how did New South Wales women come to be so ill-served by their elected representatives that they could be imprisoned for exercising agency over their own bodies? The Crimes Act containing the abortion provisions was proclaimed nearly 120 years ago, at a time when women, and in particular married women, were not afforded the same rights and privileges as men. I know it will upset the Hon. Mark Latham but I should clarify that statement as "white, heterosexual men" because Indigenous people, non-white migrants and gay men were not afforded the same range of rights and privileges as the straight man. In 1900, women's lives were controlled by their guardians, either young women by their parents or older women by their husbands, and indeed even seen as being in service to the State to ensure the production of the next generation of citizens. Politicians such as Billy Hughes demanded that Australians "populate or perish" and by that he meant white Australians.

The shameful White Australia Policy, which restricted the immigration of non-Europeans, put pressure on white Australian women to populate the country with large families. Contraception was neither reliable nor easily available. Girls were married off in their teens and wives could not refuse to have sex with their husbands. The idea of women having control over their fertility was seen as an existential threat to the British Empire and Australia's place within it. The bodily autonomy of individual women was not a consideration. In the early 1900s, the New South Wales Government established the Royal Commission on the Decline of the Birth-Rate and on the Mortality of Infants in New South Wales. It was the first inquiry of its kind in the world. The findings linked the use of contraception and abortion to the deterioration of the nation.

In particular, the all-male commissioners condemned women as selfish in attempting to reduce the number of pregnancies that they would have to endure—a remarkable statement given that this was at a time when infant and maternal mortality rates during birth were still common. To understand the misogyny of the times, one cannot go past the quote from the then President of the Victorian Branch of the British Medical Association, Dr Michael O'Sullivan. He believed that the main cause of ill health amongst Australian women was:

... because, living in luxurious indolence, they cannot allow the duties of maternity to disturb their social pleasures; or perhaps, weighed down by shiftless poverty, they dread the devastating crowd of unwanted children.

It was from these racist and sexist beginnings that we inherited the restrictive abortion laws that are still with us today, at least in New South Wales anyhow. As I have acknowledged previously in this House, as a gay man I may not have directly experienced the risks and challenges of unplanned pregnancies, but I do know what it is like for the State to have an unwarranted intrusion into my private life. Feminism has long stated that the personal is political. There is nothing more deeply personal and political than the State legislating what you can and cannot do with your own body. Humans are sexual beings. We crave intimacy and the expression of our sexuality has profoundly informed our music, painting, dance, literature, and indeed our entire culture. It is the puritans and the inquisitors, those obsessed with the control of sex, sexuality and gender, who will fight hardest against women gaining control over their own bodies and what they do with them.

The criminalisation of abortion is about ultimately punishing women for exercising the expression of their sexuality and their agency; that women should not be allowed to "get away with sex without consequences". We know that no contraception is 100 per cent effective. The World Health Organisation estimates that if contraception were used perfectly in every instance, there would still be six million unplanned pregnancies each year worldwide. So realistically, a woman who is heterosexually active over the decades of her fertile years will always have a small risk of pregnancy, even when contraception is used. I cannot comprehend how anyone can seriously consider that it is ethical or humane to force a woman to continue with an unwanted pregnancy.

I absolutely understand those who, for religious, cultural or personal reasons, decide to continue with a pregnancy even when there may be something to fear or it be inconvenient, life-threatening or terminal for either the mother or child. Unlike some so-called "right to lifers", my support does not end at the birth of the child. I support also government assistance for infant, post-natal care, income support for carers of children, affordable housing for families, family-friendly employment laws, subsidised health care and free universal education. To me that is a humane society that cares for its most vulnerable members. To those who ask, "What about the humane treatment of fetuses?", I state that a fetus cannot take precedence over a person who is already born and fully realised as a human being. A fetus is incapable of an independent existence outside of the woman's uterus and no woman should be treated as an incubator, gestating against her will.

I repeat my comments from 2017. As a representative of the Animal Justice Party I am most definitely concerned about the potential for sentience and therefore the risk of conscious suffering of the fetus. But, according to the Australian Institute of Health and Welfare, 94.6 per cent of abortions occur under 13 weeks and

only 0.7 per cent of abortions occur at more than 20 weeks. There is absolutely no scientific evidence that a fetus has sentience before 20 weeks gestation, which is actually five months and equal to 22 weeks. Of those 0.7 per cent of abortions performed after 20 weeks, the vast majority were as a result of severe fetal abnormality or continuation of a pregnancy that would cause serious life-threatening consequences for the mother, according to figures from a Women's Health Victoria report in 2007.

I strongly consider that this bill strikes the right balance by removing abortion from the Crimes Act and placing it into health care legislation. I trust women to know what is best for themselves and for doctors to properly assess the circumstances under which they would give approval for abortions over 22 weeks—a discussion that the woman and her doctor have together and they decide together. No-one is suggesting that abortions over 20 weeks are not fraught with ethical dilemmas as fetuses get closer to term, but I have seen no evidence that any woman aborts at such a late stage in pregnancy without there being compelling reasons for such a termination. Any suggestion that women capriciously change their minds about their impending motherhood is both offensive to women in general and is without a shred of evidence. I am sure that other matters such as sex selection, informed consent and disability discrimination may be raised in amendments to this bill, which I will address if and when they are debated.

I apologise to the women of New South Wales for 119 years of state control over their right to choose whether to continue their pregnancies and to all the doctors and medical staff that have provided abortion health care services in a legally ambiguous environment whereby they could be imprisoned or lose their right to practise their profession. I commend this bill to the House.

The Hon. COURTNEY HOUSSOS (17:02): I indicate from the outset of my contribution to debate on the Reproductive Health Care Reform Bill 2019 that I will be voting against the bill. This is not a decision that I have come to lightly. I do not believe that abortion should remain in the Crimes Act. However, I have considered carefully the provisions of this bill and I do not believe that an abortion should be allowed up to 22 weeks of gestation, five and a half months, without question. I also do not believe that there are appropriate protections for abortions conducted after 22 weeks. As are all members on issues when we are granted a conscience vote, I am influenced by my personal experiences. As I have said in this place before, I am a person of faith but on this issue my views undoubtedly have been shaped more by my own two pregnancies.

I reflected in my inaugural speech that becoming a mother had been a life-changing event for me, as it is for many women. I will never forget the tears I shed when George and I heard our babies' heartbeats for the first time when I was only seven weeks pregnant or the amazement to see the rapid pace of their development at our 12 weeks scan when we could see not only 10 fingers and toes but scans of their brains, hearts and kidneys, and even see the blood pumping through them. The question of when life begins has been considered and debated by many who are far more credentialed than I to debate these issues. Ultimately this is a deeply personal decision and for me it remains the true mystery of life. But I cannot vote for a bill to allow abortions until 22 weeks without question when I so clearly recall for the first time that I felt my daughter kicking—just after we had completed booth set-up on Federal election day in 2013, no less—when I was 20 weeks into my pregnancy.

I am deeply cognisant that not all pregnancies and their developments are greeted with the same joy and excitement as ours were. I can only imagine the angst and heartbreak that women seeking an abortion can feel. But I cannot support the current provisions in this bill that will allow an abortion of a healthy baby up to 22 weeks for no reason including that parents did not like that they were having a girl or a boy. Moreover, with all that I know I cannot agree to that being the threshold enshrined in our laws setting the framework for the people of New South Wales. Equally, my position has been deeply influenced as I have mourned with close friends who have suffered miscarriages, usually only weeks after discovering they were pregnant. They struggled to reconcile their profound sense of loss with the purely scientific explanation that it was only a small cluster of cells.

This was reinforced for me when handing out at pre-poll in the lead-up to the March election. I got chatting to a young woman who was waiting in line to cast her vote. She had her young son with her and she explained to me she was pre-polling because she was booked in to hospital for a procedure. We kept chatting and she later told me that her procedure was an embryo transfer. She told me she "had lost three babies" all between nine and 10 weeks. I believe her terminology was important: To her, these losses were her babies. I note that there has been much discussion about how we can better support women suffering a miscarriage and recognise the grief that they feel. I also acknowledge that this grief can be experienced by women who choose to end their pregnancy. But I believe therefore that it is counterintuitive for this bill to take a blunt and simplistic approach in enshrining one cut-off of 22 weeks for an abortion to be granted without question.

This is a deeply complex issue and it deserves a more careful consideration by this Parliament than the complete distortion of parliamentary process that has allowed this bill to be debated so quickly. Less than a month ago, late on a Saturday night, members of the Legislative Assembly received by email a copy of this bill, drafted by the member for Sydney. I note it was not sent to members of the Legislative Council. With the exception of

the small number of MPs on the working party, the bill came as a surprise. It was revealed later that the group had been meeting in secret, consulting exclusively with organisations that supported their cause.

Let me be very clear. I do not oppose the work of cross-party working groups; nor do I oppose them working with their relevant stakeholders. But what I find offensive is that they took the time to consult for months but did not afford the same opportunity for consultation to other members of the Parliament or the community more broadly. It is one standard for their supporters and another for the rest of us.

I have been amazed at the level of disbelief and anger from the community about this bill. Last night I stood with my family in Martin Place with thousands of others. I have been to a lot of rallies in my time but this crowd was different. I could not help but notice that they looked like us—plenty of young people, lots of families and more kids than I could count. I believe that many of those families, many of those people, do not usually attend rallies. But this legislation—particularly the failure to appropriately restrict late-term abortions, the arbitrary date of 22 weeks gestation and the way it has been rushed without careful deliberation—has caused them to act.

I have spoken already in this place about my opposition to the truncated timeline for the Legislative Council's inquiry into this bill. I will speak more about this later. But of a sample of 100 of the over 10,000 submissions received through the website portal, 96 were opposed to the bill, three were blank, so expressed no view, and one suggested amendments. A similar exercise was undertaken with a sample of 40 submissions received by email. Of this sample, 36 were opposed to the bill and four supported it. My personal experience has matched this. Friends who never want to talk politics have stopped me in the street, raised it at weekend barbecues or at branch meetings to express their opposition to this bill, not believing what they had heard about it. Some have been religious, but many have not.

Indeed, women and men who regard themselves as pro-choice have urged me to vote against this bill as it is too extreme—it goes too far. This was not an election issue that the Government can claim a mandate for, yet it has been prepared to manipulate parliamentary process to rush it through. That is why I find the efforts of the Liberal-Nationals Government to cast aside parliamentary process, to allow this private member's bill to be raced through both Chambers without scrutiny, so shameful. The Government is now seeking to address the public backlash against this by delaying the discussion of amendments in this Chamber for several weeks. I believe this is a bandaid solution.

Members of the Legislative Assembly have already been compelled to vote, without being able to consult properly with their communities, or engage in a meaningful way with every aspect and implication of the bill. Indeed, in opposing amendments in the lower House, proponents of the bill argued the amendments were poorly drafted—this should hardly come as a surprise, when so little time for consideration was given to them. Members on both sides of this debate have strongly held views. Abortion is a deeply complex issue. But that is why consultation with MPs but, more importantly, with the community as a whole is so important.

The proponents of this bill have argued that it should be supported as it is based on Queensland's legislation, which was the result of a long and considered process. Indeed, it was. After an Independent MP initiated a private member's bill in Queensland, a long and detailed process of scrutiny was undertaken, including several drafts of such a bill, parliamentary inquiries on those drafts, a Queensland Law Reform Commission inquiry and report followed by a long parliamentary debate. But by simply supporting the Queensland bill with a few amendments from the Legislative Assembly, we are, in effect, placing a higher value on the view of Queensland residents that were consulted with and listened to than we do on our citizens in New South Wales.

Similar consultative processes were also undertaken in Western Australia and Tasmania when abortion was decriminalised in those States. Many of the supporters of this bill wax lyrical about the need for transparency and community consultation; however, on this issue they are prepared to put that aside. This place takes much pride in its committee process. Members from all sides frequently speak about the important work that we do; it is careful, considered and evidence based. We have not shied away from tackling tough issues; indeed, that is what it is best at addressing.

That is why I was deeply disappointed with the decision of this Chamber to vote for a drastically shortened time frame for an inquiry into this bill—a matter of 10 days from the opening for submissions until the report was presented. As I said at the time, it was not in the best traditions of this place, nor of the reforms passed earlier this year, to strengthen our role as a true House of review. It was almost farcical: an inquiry was announced, but the bill was yet to pass the Legislative Assembly. As a result, submissions could not be taken until the final bill was reported, which left just two business days for people to draft, research, finalise and lodge their submissions. Juggling work, life, family and not to mention religious commitments—it should be noted that the inquiry occurred during significant religious celebrations for both the Islamic and the Orthodox communities—this time frame was impossibly short.

On that issue I think it is important to note that the most recent Australian Bureau of Statistics figures state that 66 per cent of the New South Wales community report a religious affiliation. Therefore, it is appropriate that religious leaders are consulted about their views on this issue—as should the rest of the community more broadly. In spite of a limited time frame for the inquiry, the community showed that they wanted to have their say. An almost-unbelievable 14,000 submissions were received. Unsurprisingly, the website receiving them crashed. During public hearings, witnesses were given a matter of minutes to answer questions—questioning that should be detailed, careful and considered. While I commend the efforts of the committee members, I repeat: this inquiry is not in the best traditions of this place.

It is not a solid foundation on which to base our debate on such a complex and difficult issue. We are not simply debating removing abortion from the Crimes Act. As I noted earlier, I am not opposed to this. But the substantive debate that we should be having is what replaces the existing practice—a practice set out in a courtroom, not in legislation. This is a practice that has evolved over time, placing a woman's health at the centre of it, but in a grey area of law. I do not believe that we should abrogate our lawmaking responsibilities to the courts. This has been in place for far too long. But we must carefully contrast the system that currently operates with what members are seeking to replace it with.

In defence of the rushed process, I have frequently heard proponents of this bill say, "Each side has their beliefs, so we just need to bring on the vote on this issue. You are either pro-choice or you are pro-life—there is no in-between." That simplistic view is just not accurate in a debate as complex as this. Indeed, in outlining why it was opposed to the previous attempt at decriminalising abortion in 2017, the Government justified its opposition during the debate by quoting one of aforementioned parliamentary inquiries. It said:

The committee does not consider the introduction of a Bill to be an appropriate catalyst for policy development and consultation which should appropriately be done before the introduction of a Bill.

The Government then went on to explain how many abortions were occurring safely in New South Wales, that they were "legal and easily accessible". It went on to say, "This data makes it difficult for me to conclude that currently there is a systemic failure." So, why the rush? For this particular bill, why is there not careful consultation and consideration? This bill does not simply decriminalise abortion, remove it from the Crimes Act and codify the existing practice for abortion in New South Wales. As I said, the existing practice places the health of the woman at the centre of it. It has a range of different provisions depending on gestation: for 13 weeks or fewer, for 13 to 20 weeks and then for periods greater than 20 weeks. This matches other laws, including the provision to register stillborn babies from 20 weeks' gestation.

Women are provided with counselling, and adequate and appropriate information must be provided to them to ensure they can make an informed choice about treatment. In defending the provisions of this bill, proponents have referred to current practice; saying, for example, that abortions based solely on gender do not occur. That is debatable, but it is not relevant to this debate. The present bill will replace all of the current practice in New South Wales. In fact, we are replacing the existing laws with new ones that are actually less prescriptive. I am deeply concerned about many other aspects of this bill, including the failure to outlaw self-induced abortions, the care that should be provided to babies born after a failed abortion and the failure to protect women who are being coerced by a partner to have an abortion; this is a result of the drafting of the bill referring to a "person" seeking an abortion, instead of referring to a "woman".

I hope that amendments will be moved to address these deficiencies, and I will consider moving them myself. I do not believe that the bill provides doctors with appropriate protections if they have a conscientious objection to an abortion. In effect, members of Parliament are using their conscience vote to remove the right of doctors to exercise their own conscience. Other speakers have said that we need to trust our doctors, and I agree. But as legislators we need to give them the tools to utilise that trust. The bill does not give them any space to use their judgement; they must deliver an abortion if a person requests one. I am a firm believer that debate allows ideas to be tested and strengthened; our whole parliamentary system is prefaced on it. We give notice of a bill, we lay it on the table, we consider it carefully with feedback from stakeholders and then we legislate.

The idea that someone who is philosophically opposed to abortion, has religious views or wants to question the content of this bill has no role to play in this debate, or worse, that any amendment posed by them should be disregarded, is deeply offensive. This Chamber frequently shows that members with different ideological views can work together to refine their ideas. Our whole committee system is built on that premise. Yet the proponents of this bill say that any effort to amend it should be disregarded and any effort to improve it should not be considered because the motivations of the mover of an amendment should overshadow any merit in any proposal.

I find the bill flawed, which has been exacerbated by an emasculation of the parliamentary process. I will be voting against it on the second reading. But if it does pass its second reading as expected I will consider each

proposed amendment carefully to try to improve the bill. I appeal to all members to do the same, irrespective of the member moving the amendment and their perceived motivations. That is how we can try to finally bring back some of the best traditions of this place to the debate.

The Hon. MARK BUTTIGIEG (17:20): I make a contribution to this debate to support the Reproductive Health Care Reform Bill and a woman's right to choose. I note that this is ultimately an issue that will never directly affect me, but will affect the women of New South Wales who I have been elected to represent. As a man I can never hope to replicate the perspective of a woman who grows up with the constant knowledge and psychological disposition that her biology is intrinsically bound up with the potential for child birth. On that basis it is important that men listen carefully to what women have to say on the matter because the fact is that they know better because they are their bodies.

I acknowledge that as a man and as a legislator I am not qualified to make a judgement on such matters. That is why we should listen to women and allow them to have their say. I thank my female colleagues in both Houses who have led the way on this bill, particularly the Hon. Penny Sharpe. I am thankful also for the conversations I have been fortunate enough to have with my wife, Anna, on the matter. In saying that, if I am to take a position and vote on such a controversial and emotional matter, the people who voted for me deserve to know why.

This has been a very emotional debate on both sides, as it should be. These issues are difficult. They matter to people legitimately and deeply. We should have real respect for the variety of opinions on display, which, by and large, we have. However, both sides of this debate are closer than some of the arguments we have heard would have us believe. Neither extreme of the spectrum believes we should prohibit contraceptives and no-one is countenancing the termination of live babies. We are debating a matter of degree between those two extremes. There is a grey area and the law requires us to draw a line. I do not say that this is an easy choice—it is not—but I believe that this bill draws the right line and strikes the right balance.

Before 22 weeks there will be very little practical change for many women seeking abortions. Currently a woman goes to a specialist doctor and receives medical treatment. However, the bill will introduce two fundamental differences to improve the situation for many women. First, a woman will not need to shop around for the right doctor and jump through hoops to receive professional aid and help. Second, during what must be such an incredibly difficult decision, women will not be burdened with the added psychological stress that they are breaking the law. Importantly the bill does not make the law any weaker than the current reality for abortions after 22 weeks, when a fetus is viable outside the womb. In fact, it actually becomes stricter.

A woman must find two doctors to approve of the real need for the procedure to occur, rather than the current reality of there being no minimum doctor requirement. Also, the procedure must occur in a safe environment. Abortions after 22 weeks are rare and unfortunate and happen for important and justifiable reasons. This law simply recognises that reality and legalises abortions after 22 weeks only if the procedure meets the stricter test of two-doctor approval. Let us look at what it would mean for New South Wales if this bill was voted down. No-one would claim that abortion would go away. It would still be available for those who want it. Currently under common law if a doctor believes a continued pregnancy would be a serious danger to a woman's physical or mental health—taking into account economic, social or medical reasons—there are no grounds to prosecute a doctor or their patient. Moreover, no-one argues that we should increase penalties or the rates of prosecution for terminating pregnancies.

Currently pregnancies are terminated safely by qualified registered doctors in licensed healthcare facilities in New South Wales. The problem with the current legislation is that this medical procedure is currently inappropriately placed in the Crimes Act. Our laws are simply out of step with what happens in the day-to-day lives of our citizens and the reality in practice in the community: The current laws facilitate the criminal prosecution of a woman for exercising her will over what is intrinsically still part of her own body. Currently, tens of thousands of abortions are performed across New South Wales every year. A recent Australian survey found that one in five women who had been pregnant in the last decade had had an abortion, and one in three unintended pregnancies resulted in an abortion.

As the Hon. Mark Pearson said, research suggests that between 25 per cent and 50 per cent of Australian women have an unplanned pregnancy every year. Almost half of the women who have an unplanned pregnancy are using contraception at the time. The World Health Organization estimates that even if every couple used contraception perfectly there would still be six million unplanned pregnancies per year. I believe in the right of women to control their bodies in those difficult times. It is worthwhile comparing the laws before us to laws in different jurisdictions around Australia to show how out of step we are. In Victoria abortion is legal and accessible until 24 weeks, and legal after that point if two doctors agree. In Queensland, abortion is legal and accessible up to 22 weeks and with the approval of two doctors thereafter.

In Western Australia it is legal up to 20 weeks. After 20 weeks of pregnancy two doctors from a panel of six appointed by the Minister have to agree that the mother or unborn baby has a severe medical condition. In Tasmania abortion is legal and accessible up to 16 weeks. After that it is legal with two doctors' approval. In the Australian Capital Territory abortion is simply legal and accessible. In South Australia it is legal up to 28 weeks if two doctors agree that a woman's physical and/or mental health is endangered by pregnancy. I acknowledge that it is still currently in the criminal code in South Australia but it has been amended. New South Wales is the only State where abortion remains unamended and in the criminal code. The laws we are considering today largely reflect the consensus of other States and the alternative—which is to fail to pass this bill—would place New South Wales well outside the standard set by other States in this country.

Elsewhere in the world the consensus is similar. The United Kingdom, for instance, has had legal abortion up to 24 weeks since 1967. The United States, while having a patchwork of local restrictions, legally speaking allows universal access to abortion. Overall, 58 countries allow abortions on demand, at least up to a given number of weeks of pregnancy. Internationally, according to the World Health Organization, legal abortion does not increase the number of abortions that occur. On average, countries that have reproductive rights report fewer abortions per capita than countries where abortions are illegal and penalised.

A dozen people have been prosecuted under the New South Wales Crimes Act for abortion offences in the past 25 years. Data from the NSW Bureau of Crimes Statistics and Research shows that four of those people were found guilty and sentenced as recently as 2017. Notably, however, no-one has gone to jail for procuring an abortion in decades. What the bill does is prevent prosecutions for abortions on demand prior to 22 weeks, which is a nationally and internationally accepted standard.

I have heard many arguments in this debate that advocate for a more drawn-out process of consultation and consideration. My view is that it would not matter whether we had another 50 committees of inquiry or another six months of parliamentary debate—there would still be disagreement and controversy and it would probably not shift a single vote. The reality is that the law is totally out of step with community practice and reality. Most people realise this, as was reflected in the vote in the lower House last week. In my view, it should and will also be reflected in this House shortly. The truth is that spurious arguments and amendments have been and will be raised in a bid to delay the bill and pressure members to change their vote. I think most sensible members have seen that for what it is and they will stay resolute.

I make a final point on my views about morality or religion impinging on the operations of the State. We in this Chamber represent a wide range of constituencies and a wide range of social, political and ethical viewpoints. We are all animated by those beliefs. The laws of our society should allow for disagreement in matters of ethics too. It is absolutely legitimate for religious people to be proud practitioners of their faith. If any member of our society has a religious or moral conviction against abortion, then that is a deeply held belief that we should respect. But in no way should religious conviction underpin the basis of our laws. Those deeply held religious beliefs should not be forced onto other people.

In Australia, as in many other liberal democracies, we have an effective separation of church and state otherwise known as state neutrality towards religion. The neutrality principle is considered to be an essential ingredient of well-functioning liberal democracies because it gives effect to the principle that facts and logic, as opposed to individual belief systems, should drive governance and policy for the welfare of all peoples, regardless of religion. Each time we allow religion or religious beliefs to impinge on the making of laws, we undermine our democracy. Each time it happens, we make laws on unascertainable propositions which are the remit of belief and doctrine, not fact and logic—and they are beliefs and doctrines that are not held by a majority of people.

We do not have a state-sanctioned religion. We are all free to have our beliefs and so we should be. But we should never have those beliefs impinge on our democracy. I commend the bill to the House on the basis that it will improve the current arrangements for women in our society, who should have access to terminations. It is not based on the opinion and control of others but is based on the opinion of the woman in question and her right to retain sovereignty over her own body.

Mr JUSTIN FIELD (17:34): I will be supporting the Reproductive Health Care Reform Bill 2019 without amendment. I will vote to remove abortion from the New South Wales Crimes Act and in doing so reflect the overwhelming majority view in New South Wales. I recognise the many people who have been involved in campaigns to achieve this outcome for many years, especially the women and those members of Parliament who have worked to bring the bill forward in a genuinely bipartisan way. Regardless of the effort that went into building consensus, there was always going to be strong opposition from some segments of the community and some segments of the Parliament. However, a vote of two to one in the lower House is a strong expression of the work that has been done. In many ways it is an example of how Parliament can work well to reflect a broad view within our society.

In reflecting on the options that the Parliament could have taken on this, I probably would have been prepared for a bill that simply removed references to abortion from the Crimes Act and did not prescribe many of the limits in health legislation. That is not because I do not think there should be limits, but I think those limits are based on individual circumstances. The circumstances can be so complex that legislation can never fully address them and I am not sure that it should seek to. Women and those who support them can arrive at the appropriate decision for themselves and their families and we should trust that. Doctors have ample guidelines to enable them to support women in a way that reflects their trusted role in society to deliver health care. We should support that too. However, I recognise that a simple repeal bill would have been unlikely to pass this place. I also acknowledge the overwhelming support for the limits and lines drawn in the bill by advocates, women's groups, health professionals and even some religious organisations.

I will talk a little about the opposition to the bill. Much of it has primarily come from those motivated by religious conviction. I do not take issue with those concerns being raised in the context of this debate; however, there is something perverse about exercising your conscience in this place based on religious conviction to prevent someone who does not share your religious conviction from exercising their own conscience outside this place. We live in a secular society. Our laws, institutions and ideally the decisions we all make in this place should be blind to our personal religious convictions and reflective of our pluralistic society.

I come to this debate as someone who has had some experience in these matters—as much as a man can, other than a health professional. I have supported a partner who has made this decision. I have supported a woman who has experienced the loss of babies at early stages. I have also supported a woman to carry and nurture our son to full term and have had the joy of being there to help him into the world. Every one of those experiences and processes is raw and emotional. It is a sacred experience in many ways. Women require support and love, not judgement—and certainly not judgement dressed up in legislation.

Some people in this debate talk about abortion on demand. There has been more nuance in this House, but certainly some of the debate in the public space and a lot of the emails that I have received have talked about abortion on demand as if the decision is made in an unthinking way by uncaring or unknowing individuals. That is not my experience of the complexity of life. That view shows many who are opposed to the bill as being less interested in supporting women and more interested in controlling them. I trust women in these matters. In my opinion the idea that women would make other decisions if only they had support or counselling is arrogant and presumptuous about people's circumstances and their capacity to understand what is going on in their lives. We should be removing barriers that make these decisions harder, and the bill does that. I particularly note the advocacy for these changes from regional communities where access is a genuine challenge given the current status of abortion in the Crimes Act.

Whilst the bill and much of the debate is framed in terms of reproductive health, in my view it is much more about choice—and rightly so. We know abortions are already carried out in New South Wales. In media reporting associated with this debate, I have seen it reported that 30,000 abortions are carried out each year in this State. That compares with about 90,000 births here each year. The vast majority of those abortions are conducted before 12 weeks. I think we can acknowledge that, in practice, the majority of abortions are not conducted on health grounds; they reflect the personal decisions of women.

The bill is seeking to reflect current practice and ensure that no woman seeking an abortion or practitioner performing an abortion will face criminal sanction. Most abortions are already primarily a matter of choice. I am not going to discuss those choices. That is fundamentally why this bill is necessary: The State should not pass judgement on people for those choices. They are not always, or even mostly, health decisions; they are personal choices. That is really at the heart of the argument and of the public debate. I acknowledge that that is at the core of it, despite the effort that has gone into drawing health provisions around how legal abortions will be conducted in New South Wales in the future.

Despite the fact that there will likely be little change in the number of abortions carried out in New South Wales as a result of the bill, there is a very strong campaign of opposition from some religiously motivated groups. It is clear that in their minds, Parliament removing abortion from the Crimes Act is a hugely symbolic loss. The passage of the bill will be a clear signal that as a society we do not see this decision as one that is morally wrong or that deserves any consideration for legal sanction. That has been the view of the majority of society for a long time. Dressing up opposition in science-based argument or narrowing the opposition down to the functional operation of the healthcare provisions in the bill seems quite disingenuous to me. Removing legal sanction from abortion is an acknowledgement that society does not consider it to be morally wrong in any way, shape or form. I think that informs much of the very loud and angry opposition to the bill, despite the fact that functionally it will not greatly change the number of abortions.

While I recognise the principle question is one of choice, once the decision is made there is a health question. The bill sets out the process of procuring a legal abortion and prioritises the health needs of the woman.

I recognise the strong support of health bodies for the provisions in the bill and, given that support, I am satisfied with the provisions. As I said previously, I would have been happier with having fewer provisions and leaving much more to the decision-making of women, families and health professionals.

I now expand on the framing of this bill and of discussions on reproductive decisions generally as a health debate, and I link that to the broader issue of the medicalisation generally of pregnancy and birth in our society. In most instances the state of pregnancy is not a health concern at all. It is not a medical condition or disease, although once the decision for abortion has been made it involves a medical procedure. The birthing process is also not necessarily something that requires medical intervention, although it may need that support. I asked my wife to help me prepare for this debate. She supports women through pregnancy, birth and the postpartum period as a prenatal and postnatal yoga and Pilates teacher and a birth and postpartum doula.

I have learnt a lot from observing and talking to her about her work, from our own pregnancy and birth experience and particularly from the birth education research we did. It has been eye-opening to me to learn about the options available to women. Courses such as Calmbirth, Hypnobirthing and She Births are seen by many women as incredibly empowering. They provide a different perspective on pregnancy and birth that many women do not get from the media, their friends and family, or even from hospital antenatal courses. The latter can unfortunately sometimes leave a sense of fear of and trepidation about the process, which can be disempowering and can leave women thinking the process is best left in the hands of obstetricians in a hospital. There is a growing movement of women seeking to spread knowledge about physiological birth options and postpartum care, which is fantastic.

I raise those issues in the context of the bill because it is about empowering women to make choices about their own bodies. Women should not be disempowered by the law from making choices when it comes to their bodies, whether in pre-pregnancy, during pregnancy, in their birthing decisions or in postpartum support. The Parliament should facilitate that empowerment, not put up or maintain barriers to it. I wholeheartedly support the bill to remove abortion from the Crimes Act and to firmly place those decisions in the hands of women. I commend the bill to the House.

The Hon. NATALIE WARD (17:44): I had no intention of speaking in debate on the Reproductive Health Care Reform Bill 2019, and yet here I am. I had wanted simply to vote and go on with my life, secure in the knowledge that I had listened, diligently considered and carefully weighed the issues—knowing the decision I had made was based on ethical consideration and for the right reasons and that I was quietly comfortable with where I had landed. I know the reasons for the position I hold, and that should be enough. For many, that is exactly as it should be. As we all should, I respect and admire their decision not to speak. Some sage advice given to me recently was, "There is an art and strength in knowing when to speak but, more importantly, knowing when not to." But as the debate has progressed in this place I feel that I cannot now go silently on. It is not my role to stand by when words, opinions and arguments are put with which I disagree or on which I wish to respectfully and in good faith bring a different perspective to bear.

I thought about the young women watching this debate. I also thought about the staff members; the parliamentary staff; the quiet observers, men and women; the people who have their own experience, perspective and opinion—no less valid than any of ours, just quietly so; those who will not voice them but have just as much right to their own perspective. I feel the weight of their gaze. I feel the heavy burden of responsibility in this place, and I came to the view that it is exactly my job to speak. So I stand before you now to speak in support of the bill.

Like my colleagues, I have listened to the arguments and received thousands of emails and letters. The phone has rung continuously. I thank all those who took the time to let me know how they feel. I thank colleagues for their respectful, thoughtful and reflective arguments for and against. Those whom I have observed and from whom I learn have, for the most part, conducted this debate with temperance, dignity and respect. I thank them for the way in which they have been thoughtful towards colleagues with different views.

However, I do not thank and I feel shame for those who have not conducted themselves in this Chamber or outside with courtesy, respect and calm consideration. To those who have cajoled, threatened, intimidated, scared, shocked or manipulated in order to try to persuade people one way or the other, I say shame on you. To those who have seen this debate and this bill as an opportunity, as a means to an end unrelated to the task at hand, or as a way to flex or intimidate, I say shame on you. You know who you are. To those outside this place who have not been respectful, I ask you to consider your actions. I thank you for your passion and vigilance. But I urge you to consider and embrace some oft-quoted words mistakenly attributed to François-Marie Arouet—otherwise known by his pen name Voltaire—but actually more likely penned by a woman, Evelyn Beatrice Hall. She said, "I disapprove of what you say, but I will defend to the death your right to say it."

And so here it is. We may well disagree, but we need to walk together through this debate and this journey respectfully—on both sides. To those who have dragged children to Parliament to shout and yell, I do not even

know which side you are on but I do not agree with your practice. Children should be in school or playing. Let them have a childhood. There will be plenty of time later for protesting. To those who have intimidated members by anonymous threat or physically on their way to and from Parliament, I say stop it. Just stop it. To colleagues, friends and strangers in the parliamentary sense, I ask you to debate the subject matter, not the person. Speaking of respect, I place on record my respect for opponents of this bill—in particular Reverend the Hon. Fred Nile. While my position differs from his, he is always respectful. He is diligent in the prosecution of his case, and he does not attack the person. He has seen many bills come and go in this place, and we owe him the courtesy of acknowledging his experience with the manner in which we go about our business.

I place on record my respect for those who diligently worked on the initial bill—the working group—and those members who have worked thoughtfully and constructively on amendments. I undertake to consider other amendments on their merits, and I will work with those putting them forward. I know that I will be judged on my words and my deeds. I am grateful for the privilege of being a member of this place, and for the privilege of being judged on my work while I am here. I welcome it. To those who oppose me, I welcome your judgement. I hope you might respect me for at least having a view and for being true to it.

I will elucidate some of my reasons for supporting this bill. Many of the issues have been covered and I will not repeat them here. They have been well elucidated by colleagues on both sides. Like so many others, my perspective is informed by my experiences and my compass. This is a deeply complex issue. It is grey. It is difficult. My journey is personal, and does not require elucidation here. My personal challenges are not for the titillation of members and others. There is a place for privacy and quiet reflection, and for respecting the anonymity of my friends.

I have reached this decision by turning to the four parts of my compass. I will outline them very briefly. The first is from my perspective as a woman. I have the privilege and great blessing of being a mother, a daughter, a sister, a wife and a friend. I respect people in those roles to make their own decisions about what is best for them. As the Hon. Niall Blair said, it is grey. All people have different lives and different challenges. Should I condemn them and their healthcare providers to criminal liability? I do not believe that is the right or appropriate approach. I love all of the people in my life and I respect them to do what is right for them. I see it as Parliament's role to assist them in whatever way necessary—from a health perspective, not a criminal one—including if they wish to obtain counselling to help them decide not to terminate, or the alternative.

I welcome the opportunity to help to evolve the legislation that my colleagues from over 100 years ago first crafted. It will bring us forward from the legislative age of the spinning jenny and the draught horse into the next phase of our evolution—the legislative age of MRIs, X-rays, and all the great leaps forward we have made in health care, not criminal condemnation. There was a time when women could not vote, could not keep a job after they got married, and certainly could not have kept their children if they were not married, unless they were very brave. We have evolved and I believe we can evolve in this as well—carefully and in a considered, respectful way with safeguards such as counselling, support networks and boundaries.

As a woman, I bring the perspective that it is for me to decide about my body and for my sisters to decide about theirs. I do not know what it is like to be a bloke. I cannot imagine what it is like to have a penis, testicles and a prostate. But I respect men's decisions to do the best they can with what they have in their lives. I was told to take the line out, but I didn't. Similarly, women have their journeys and their lives. It is for them to decide what they wish to do. It is not for me to judge, to impose my decision or to deny the decision of each unique individual for whom a question about abortion presents itself. What I do know for an absolute fact is that no person makes the decision easily or without some challenge. Our job is to provide them with a healthcare support system—for or against termination—in a medical setting, not a criminal one. I am persuaded by the plight of regional and rural women. I am persuaded by the inequity for women who cannot easily access care, whether it is due to distance, means or age. I support them. As a woman, a daughter, a sister, a mother and a friend, I support this bill.

The second perspective of my compass is as a Liberal member. There are a few of us. I love this party and its values. I love that my members and I can stand side by side and have different views. For the most part we can argue strongly but respect each other at the end, and find a way forward. My liberal values are clear. I believe in the freedom of the individual. My liberal philosophy starts with the belief that the individual should be given every opportunity to succeed—to get ahead—and to do so on their own merit, by their own means and with their own responsibility and that government should, where possible, get out of the way. As a liberal I must extend that freedom to women to decide what healthcare options they need, and allow them to access those options without unnecessary burden, delay or interference. I must ensure safety and equality—the responsibilities that go with freedom. As a liberal I must allow healthcare professionals to carry out their roles, knowing that they do the best they can every day to ensure their patients have the professional medical and surrounding support they need without criminal impositions. As a liberal, I support this bill.

The third perspective is that for my sins—and there are many—I am a lawyer. The objectivity that legal training equips us with has been my guide, my beacon and my light. It has saved me on many occasions. It is my strongest propellant in this decision. I look to the legal framework, the common law and the status of other Australian jurisdictions to guide me. Abortion in New South Wales is currently a criminal offence under part 3, division 12, sections 82, 83 and 84 of the Crimes Act 1900 that deal with attempts to procure abortion. The division has been part of the Crimes Act since it was enacted. An offence under section 82 or 83 presently carries a maximum penalty of 10 years imprisonment. This law has not been changed in 119 years, despite significant reforms being made in every other Australian State and Territory in recent years. I say simply, respectfully and without passion that the law is out of step with the community it is supposed to serve.

The application of the provisions of the Crimes Act is modified by the common law decision of Justice Levine of the District Court. The current common law position is that, in true legalese, termination of a pregnancy is a criminal act subject to criminal penalty but, under certain circumstances, it is not unlawful. In the case of *R v Wald* the circumstances in which a lawful abortion could be performed in New South Wales were identified by His Honour Judge Levine. Three requirements were identified: There must be consent of the patient; the termination must be skilfully performed by a qualified medical practitioner; and the medical practitioner must have an honest belief on reasonable grounds that the operation is necessary to preserve the patient from serious danger to life or physical or mental health.

His Honour Judge Levine's decision was made in 1971—before I was born. Judge Levine's decision—interpreting the words of the Crimes Act to allow legal abortions—has been confirmed by higher courts in our court system. In 1982 the Chief Judge in Equity of the New South Wales Supreme Court, Justice Helsham, followed and upheld Judge Levine's decision in *K v Minister for Youth and Community Services*. 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 where she 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 Court of Appeal, in *CES v Superclinics Australia Pty Ltd*. 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. Those dangers did not need to arise only during the course of the pregnancy. The common law has confirmed the position. Other States have confirmed the position, with slightly differing safeguards. I agree that there needs to be safeguards; I do not want to see them removed. But our legislation in New South Wales would do well to catch up. This bill will help us do that, in a measured way with safeguards—perhaps even more safeguards. I place on record that I support the bill in its present form.

Fourthly, as a Christian, and the last element of my compass, I bring a perspective that is not always in alignment with the institution of the church. Indeed, my husband and I did not hesitate to bring the church to account when it was needed. I am a Christian first, a congregant second, and I mean no disrespect in saying that. I am guided by my faith and its principles—the rest I know is between him and me. I have to face that on my own. I respect those of all faiths and the values they bring to this debate. I respect the right and conviction of other women who for their own reasons do not support this bill. I thank fellow Liberals who based on the same philosophy feel that they must reach a different position on the bill. I know we can work together; we have done it before. But I ask them to resist the temptation to attack the person or the process. Hyperbole has no place in this debate; nor do piousness, moral high ground or angry politics. Members will be judged not only by the words they say but the way in which they conduct themselves in this place.

I thank the medical professionals who have made contributions to this debate. An evidence-based approach is always preferable to generalisation. In particular I thank Dr Vijay Roach. He saved my life—not once but twice. He taught me, much to my frustration, that a decision about my body is mine. I was frustrated with him at the time because he would not make a decision for me. I thank him from the bottom of my heart now. I thank the members of the Standing Committee on Social Issues and particularly its chair, the Hon. Shayne Mallard, as well as all contributors and committee staff. They have dealt with a difficult and challenging matter. As a colleague I appreciate their hard work and diligence.

I thank the respectful men in this place. They have been brave. I thank my adviser David Tsor for guiding me through this roller-coaster and for navigating the tsunami of emails, letters and phone calls and my constant decisions whether to speak or not speak: You have remained polite, respectful and considered. I thank my husband, who is, as always, my rock. To those of you from whom I have sought private counsel: I thank you and I respect our privacy. Finally, there should be not winners and losers in this debate. This is a conscience vote and an opportunity to find a good outcome. There should be care and concern for women who in the past, at present or at some time in the future have to face this very difficult decision which they will carry with them their entire lives.

It is for members to enquire, debate and come up with the best possible solution to a very difficult dilemma—that is our job. The bill proposes to do just that: to put women and their reproductive health care at the centre of the debate; to consider their wellbeing in a health context; to surround her with counselling and qualified specialists in a proper setting; to ensure she faces a health decision, not a criminal one; and to ensure that those caring for her are supported to do their best in what must also be for them difficult and challenging work on a daily basis. This is not a criminal issue; it is a healthcare issue, no matter which side of this debate you are on. I am grateful to colleagues who have recognised the sensibility in that—it is our common ground. I will be supporting the bill but I give an undertaking that I will always respect and work with those who oppose it.

Mr DAVID SHOEBRIDGE (18:03): I speak in unambiguous support of the Reproductive Health Care Reform Bill 2019. The bill proposes to remove, finally, abortion from the Crimes Act and regulates the conduct of registered health practitioners in relation to terminations. The bill provides that medical practitioners may perform terminations up to 22 weeks with the informed consent of the patient. After 22 weeks a termination can only be performed if a specialist medical practitioner considers the termination should be performed and has consulted with another specialist who agrees with this medical opinion, as well as the pregnant person giving their informed consent.

If the medical practitioner thinks it would be helpful and the pregnant person is interested, they can be provided with information about access to counselling. If a medical practitioner is asked about a termination and has a conscientious objection the bill requires them to refer the patient to another appropriate care provider. The bill also clarifies that a person who consents to, assists in or performs a termination on themselves does not commit an offence. Amendments to the bill now specify that a review will be conducted after 12 months into whether terminations are being performed for the purposes of gender selection. This is in addition to the statutory review of the operation of the Act after five years.

This is not a complicated bill. This is a bill that is indeed far simpler than other bills that have been rammed through this House still warm from the photocopier. I have heard many members talk about the improper process, the speed and the haste. But it is a straightforward bill regarding an issue of law reform that has been contested for over a century and we are well and truly capable of dealing with it in this session. The bill comes before Parliament after many decades of activism by feminists and pro-choice activists. As Margaret Sanger, the founder of Planned Parenthood, said:

No woman can call herself free until she can choose consciously whether she will or will not be a mother.

I pay particular tribute today to those Greens who have led the way on this issue. This includes former Greens MP and senator Lee Rhiannon, who raised this issue in the New South Wales Parliament many times, making sure that decriminalisation was firmly on the agenda. I credit current Greens senator and former member of this place, Dr Mehreen Faruqi, who introduced the first abortion decriminalisation bill in New South Wales history in March 2017. This work has paved the way for where we are right now and I give that credit. I also pay tribute to my colleagues Jenny Leong from the other place and Ms Abigail Boyd, who are co-sponsors of the bill, and to all those Greens members who have worked for so long to turn our policy into law in this State.

I am proud to be a member of a party that is pro-choice. It is Greens NSW policy to repeal all laws that restrict the rights of pregnant people to access medical treatments appropriate to them, including access to legal, safe and affordable abortion. We have had a decades-long, strong commitment to this law reform. I am in fact proud to be a member of a party where this is not a conscience vote, because the right of pregnant people to make choices about their bodies is not a matter of another person's conscience; it is a matter of principle and one to be decided between a person and their doctor. Our laws should reflect the right to bodily autonomy, the right for a person to make a decision about what is right for them, rather than allowing the historical dictates of what is, quite frankly, a patriarchy and the church to control people's lives today. As the submission from the NSW Teachers Federation states:

The person who is pregnant is best placed to make the decision that is best for them and their family and the law should allow them to do so. The person who is pregnant, no matter what their age, should be supported not judged and have access to health care services that provide accurate, unbiased advice or referrals as they are needed.

Abortion is not just a women's issue but overwhelmingly women are affected by the laws surrounding abortion—as a matter of personal choice and personal autonomy and as a matter of being part of a gender that is still subject to control through targeted and unjust laws. As Sarah Weddington put it to the Supreme Court of the United States in *Roe v Wade*:

A pregnancy to a woman is perhaps one of the most determinative aspects of her life. It disrupts her body. It disrupts her education. It disrupts her employment. And it often disrupts her entire family life.

There has been much debate about things that are not in the bill and are not in the current law—a series of paper tigers that have been brought forward by the opponents of this bill looking for any reason to not support the

decriminalisation of abortion. At the top of that list would be the mock debate around sex-selective abortions. Regarding the supposed issue of sex-selective abortions, I have been appalled—and I know I am not alone—at the racist and divisive accusations targeted at certain groups—in particular, South-East Asian women. There is little to no evidence to support the claims of sex-selective practices in Australia.

It is telling that the people advancing these arguments are also those who oppose the bill more generally. It is hard to believe that these claims are raised in good faith. It is especially hard to believe these claims are raised in good faith when at no point prior to the introduction of the bill were any of those members agitating this issue for law reform in New South Wales, or were any of them asking for additional checks and balances in the law as it currently applies—only now at the death knell in the debate on the bill. We affirm the submission from Reproductive Choice Australia and the National Foundation for Australian Women that you cannot claim to advance gender equity by putting further restrictions on what one gender can do with their bodies. The proposed amendments are dangerous, they are discriminatory, they have no evidence base and they would materially restrict access to abortions.

Much of the opposition debate has also focused on late-term abortions. As identified by the NSW Pro-Choice Alliance the claim that the bill would require doctors to perform terminations until birth is categorically false. We note the material provided by NSW Pro-Choice Alliance which shows that there is no evidence of an increase in access to abortion after 22 weeks in other jurisdictions with similar legislation. The approach contained in the bill is supported by the Royal Australian College of Obstetricians and Gynaecologists and the Australian Medical Association. Late-term terminations comprise less than 3 per cent of all terminations in Australia. The most common reason is the fetus is unviable, and that information is rarely available before the time of the termination.

Another basis on which opponents of the bill are raising to seek to derail this essential law reform is the question of conscientious objection. There were amendments in the other place proposed to limit the requirement for doctors who oppose abortions to provide referral to an appropriate healthcare provider. As the NSW Pro-Choice Alliance identified when women seek medical advice regarding their pregnancies they have a right to receive unbiased and professional information from a medical practitioner. On the matter of conscience I echo the words of one of the many supportive letters received recently. This one is from Elizabeth McLaren and Philip Jobson, who say:

No citizen who objects to an abortion will be required to have one. No medical practitioner who has a conscientious objection to performing an abortion will be required to perform one.

The arguments against the bill based on conscientious objections are specious. It was 1971 when the District Court in this State established that doctors can administer abortions if the pregnancy is a risk to a woman's physical or mental health. At the time that Judge Levine made that ruling there was an abortion squad in the NSW Police Force with 23 police directed by the then Askin Government to aggressively identify and prosecute any medical practitioner who was undertaking abortions. Indeed, if one looks at the history of the case where Judge Levine made the ruling there was a suggestion that the reason the police brought the prosecution was because there was an allegation that there was corruption in the police who were not prosecuting sufficiently and were being paid off to avoid prosecutions.

In turn they brought a series of targeted political prosecutions to avoid the arguments about police corruption. If looked into deeply, the history of abortion law reform shows that when abortion is made illegal and is driven underground a series of distortions in the law is created, from the police through to the courts. Despite that ruling the abortion offences in the Crimes Act were used as recently as August 2017. The law needs certainty and while abortion remains in the Crimes Act this cannot be guaranteed. This alone is reason enough to pass the bill today. As the NSW Council of Social Services said:

While abortion remains in the Crimes Act, women not only face the threat of criminal charges and continued stigmatisation; there are also increased barriers to access such as increased costs and limited accessibility of services. These barriers are particularly pronounced and can become insurmountable, for women living in regional areas, women at risk of or experiencing poverty, and women experiencing domestic and family violence. Currently in many regional areas women have to travel unacceptable distances, incur travel costs (which could include overnight accommodation) or even to travel across the border to obtain the services they require.

I have spoken to medical practitioners in the region, one of whom is Albury City Council Deputy Mayor Dr Amanda Cohen. The courageous, unsung hard work of women practitioners in the region to provide these essential services to women should be acknowledged. The law should do everything it can to allow those services to be more readily provided so that women, in the regions especially, have access to safe medical assistance at all stages of their lives. The right to choose and have access to free, safe and legal abortion is essential. Requiring a person to carry an unwanted pregnancy to term is an extremely serious imposition on her bodily autonomy and her political, social and economic life, and nobody but the person who is pregnant should be making that decision.

There are many people that we could name who have been extraordinary champions for this reform. I give a partial list here: from the NSW Pro-Choice Alliance, Wendy McCarthy; from the Women's Electoral Lobby, Dr Mary O'Sullivan and Josepha Sobski; from Family Planning NSW, Adjunct Professor Ann Brassil and Dr Deborah Bateson; from Women's Health NSW, Denele Crozier; from Rape & Domestic Violence Services Australia, Karen Willis; from the Human Rights Law Centre, Adrienne Walters and Edwina MacDonald; from Fair Agenda, Renee Carr; from the Women's Abortion Action Campaign, Margaret Kirkby; and from the NSW Council for Civil Liberties, Dr Lesley Lynch and Amanda Keeling; plus those women we have seen in the halls and corridors of the Parliament in the last few days speaking with members, pointing out the myths, giving us the facts and hopefully maintaining this bill on a course so it can finally be passed.

I also acknowledge that for myself as a Greens MP this issue is easy. It is black and white. I am bound by policy, I was elected on this platform, it is my personal conscientious view but it is also an unambiguous political position of my party that we will support these laws and we will always vote for a woman's right to choose. I acknowledge those MPs who come from different parties. In particular I acknowledge the regional MPs from other parties whom I believe have spoken to women and doctors in their electorates and understood the need for this kind of law reform. Sometimes in the face of opposition from areas of their parties they have come forward and supported the bill. I acknowledge it is more difficult for them and I believe it is appropriate to appreciate the effort they will make, I hope, to ensure that the bill can find its way through Parliament.

I note the work of my staff, particularly Kym and Lauren from my office. But they are not the only women staffers in the Parliament who have fielded a series of often quite hateful calls, abusive calls, calls largely from men who feel entitled to impose their views and their politics on women's bodies and continue to seek to impose that view. It has been tough for them. I acknowledge the work they have done professionally, courteously and capably. Politics should not put that kind of pressure on women staffers. We should be better than that and politics in New South Wales should be better than that. I finish with a contribution from the Australian Lawyers for Human Rights. They say:

The United Nations Human Rights Committee...has stated that the denial of access to safe and legal abortion is a breach of the fundamental human rights of women and girls.

And of course it is a fundamental breach. It is important to note that the struggle for reproductive justice will not end with the passage of the bill. True reproductive justice means the right not to have a child and the right to have a child. It means the right to parent children in safe and healthy environments. Reproductive justice means universal child care, health care, paid parental leave and livable wages and working hours, but for now I commend the bill to the House.

The Hon. DAMIEN TUDEHOPE (Minister for Finance and Small Business) (18:18): Mr President, I acknowledge your contribution to this debate. You have been in the chair for the whole period of this debate and have contributed in a way which has ensured that the debate is conducted in a very civil manner. I place that on record because your involvement is essential to the way this debate has been conducted. I now suggest that you leave the chair.

The PRESIDENT: Thank you. I will now leave the chair. The House will resume at 8.00 p.m.

The Hon. ADAM SEARLE (20:01): I make a contribution to debate on the Reproductive Health Care Reform Bill 2019. I will vote for this bill as I voted for an earlier bill to decriminalise the termination of pregnancy in 2017. The failure of that earlier effort is a shame to this Parliament. There is enough blame to go around, from the proponent of the bill, who did not work across parties—

The Hon. Catherine Cusack: Point of order: The Hon. Adam Searle is reflecting on a decision of this Parliament, which is against the—

The Hon. Greg Donnelly: To the point of order—

The PRESIDENT: I will ask the Clerk to restart the clock. I apologise. I was making some notes and did not hear what the honourable member said. I ask the Hon. Adam Searle to restart and then I will make a decision.

The Hon. ADAM SEARLE: Thank you. I will start from the top. I rise to make a contribution to debate on the Reproductive Health Care Reform Bill. I will vote for this bill as I voted for an earlier bill to decriminalise the termination of pregnancy in 2017. The failure of that earlier effort is unfortunate but there is more than enough blame to go around, whether it was on the proponent of the bill, who did not work across parties or listen to the constructive feedback of others, leaving the bill legally fatally flawed; on the leaders of the Government, who let it be known that they did not want to see a bill in the other place before the State election; or on those of us in this place who also failed to work a way through the difficulties to achieve a result. The people of this State want their

elected representatives to work together to achieve outcomes on difficult issues. Let us hope we do better this time.

The bill before us decriminalises the termination of pregnancy; provides that such procedures are properly regarded as medical procedures and are regulated as such; significantly liberalises the law of access to terminations in pregnancies of up to 22 weeks without the need for patients and doctors to resort to any legal fiction of necessity, as is currently the case; and subjects proposed terminations after 22 weeks to a significantly more stringent legal regime, requiring the approval of two doctors—two medical specialists—which is not currently the case. In that regard the bill constitutes a significant tightening of the law.

I thank the working group of members of Parliament from across the political landscape for their work on this issue, particularly my deputy in this place, the Hon. Penny Sharpe, and the Deputy President of this House, the Hon. Trevor Khan. Without their efforts and determination, which built on the decades of struggle of so many women and some men striving for social justice and reform in this area—which was referred to by many earlier speakers—we would not be at the threshold of these important changes. I have always been pro-choice. However, being pro-choice does not mean being pro-abortion. I do not believe any women want to find themselves in a situation where the termination of pregnancy is seen as necessary.

Being pro-choice means you understand that the multiple complex personal, family and other social situations in which women find themselves are too varied to be codified in law. That is true whether we are considering a teenager or young woman who is frightened and unready for parenthood, emotionally, psychologically or financially; a woman in an unloving and unsupportive relationship with a person she realises she does not wish to co-parent with; a woman who does not wish to embark upon the rigors of parenthood alone for whatever reason; or a woman facing the tragedy of significant health issues of her own or of the fetus she carries inside her. The pressures and difficulties on affected individuals are so numerous. Who are we to judge the choices that women make? Instead, without judgement, we should support them and the choices they make.

Being pro-choice means that you accept women as equal and that their reproductive systems and bodies are their own and are not subject to the control or coercion of others—frankly, usually men. For too long women have not been afforded full personal bodily autonomy and have remained subject to unacceptable levels of gender-based discrimination and violence in our society. The part of criminal law we are discussing today is one aspect of that violence and control. It must go. Being pro-choice means that you trust women to make considered and informed decisions about their own health with the benefit of proper medical advice, support and treatment. Having thought about this issue over many years as an individual, a legal practitioner and a member of Parliament, I am of the view that the termination of pregnancy should be safe, legal and, hopefully, rare. It is or should be a matter entirely and only for a woman and her medical practitioner. The choice is not whether to allow abortions; the choice is whether abortions are legal or illegal, with very different consequences flowing from each.

Do the opponents of this bill think if it is defeated that the terminations now occurring in New South Wales will stop? They will not. But the harm being done to our friends, partners, sisters and daughters from the stigma, obstacles and poor health outcomes caused by criminalisation will continue. We are well aware of the consequences of the criminalisation of abortion for many individuals: the stigma and shame attached to it; the legal dangers they and medical professionals are exposed to; and the physical harms they have suffered, sometimes with fatal consequences—and always with lasting consequences. There are so many examples I could refer to, including one recently shared on social media of Myra Falvey, already a mother, who died from complications arising from "an incomplete miscarriage"—clearly a backyard abortion gone wrong. This week the ABC reported on the story of Ms Cecilia Anthony, who faced the tragedy of significant fetal abnormalities in late pregnancy. She said:

There aren't women running around NSW who have gotten halfway through their pregnancy and then suddenly decided they made a mistake.

I invite those who have cited their own parenthood as a reason to vote against the legislation to reflect on the fact that a 2017 Australian study of 2,100 patients who had terminations found that 58 per cent of the women had at least one child and 21 per cent had three or more children. Along with the Hon. Rose Jackson and the Hon. Scott Farlow, becoming a parent has fundamentally changed my outlook on life. But I do not presume to judge others or seek to restrict the choices available to them in the light of their own circumstances. To do anything other than leave this issue to a woman and her doctor will only result in more grief, danger and harm, as we have heard so eloquently during the course of this debate. I have in mind the example of Ally in the contribution of the Hon. Bronnie Taylor. In this most sensitive and intimate area there are perhaps no good outcomes for those facing the choice of whether to seek a termination, only outcomes that are worse than others.

As we heard in the evidence of the former Director of Public Prosecutions, Nick Cowdery, QC, the law as it stands today does not prevent harm; it causes harm. This House should act to reduce those harms by enacting

this bill into law. My view has been informed by discussing the issues surrounding pregnancy termination with those who have been directly impacted, including those who have made the decision to have a termination and those who have decided not to, lawyers, medical practitioners, ethicists, religious persons, friends, relatives and the wider community. Whilst their views have not been unanimous and are deeply and passionately held, the balance is clearly in favour of ensuring that women can access this medical service lawfully, safely and without interference from any other person.

I will vote for this bill because I believe it is the right thing to do and I do so for all the women in my life. I trust the women I know. I trust the women of New South Wales to make considered and informed decisions on matters concerning their health and wellbeing. Taking the point raised by the Hon. Catherine Cusack and addressed also by the Hon. Rose Jackson, no-one I know has entered upon the termination of pregnancy lightly or recklessly, casually or for reasons of convenience only. It is a matter that is seriously undertaken. To think otherwise reveals a lack of real world understanding of people facing these terrible decisions.

There are diverse views of principle involved, as well as on the detail of the legislation before the House. I know there are deeply held convictions on all sides of this conversation and I respect that. I ask that my views also be respected. I note that the Archbishop of Sydney, Glenn Davies, has suggested that in this debate the views of religious people, or people of faith, have not been heard. In this and other like submissions we can hear the echoes of the debate on religious freedom, which of course will be continuing for some time. People of faith are entitled to their views and to have those views respected. They are not entitled, however, in this or any other area, to tell those who do not share their faith how to live their lives, or what life choices to make.

We should also remember that some religious bodies have supported the changes in this bill. Persons of faith, even in this Parliament, have also voted in favour of this legislation. A number of contributions have referred to the need to save unborn children, drawing unfavourable contrasts with laws protecting animals in this State. This is a difficult issue and a matter that is hotly contested but in my view a fetus is not a person. Human life does not, in my view, start at conception. In my view, in any legal framework, we must always favour the interests of the pregnant woman because every other outcome only creates more pain and suffering.

We may not be able to properly and completely address this difficult area of life. We can make it worse, or we can make it better. I think this bill will make it better. Following the English decision of *R v Bourne* [1938], it was understood that abortion was permissible in some circumstances when necessary to save the woman's life, broadly interpreted to include psychological health. This was advanced in Australia in the Victorian case of *R v Davidson* [1969] when Justice Menhennitt determined that:

Necessity is the appropriate principle to apply to determine whether a therapeutic abortion is lawful or unlawful.

Here in New South Wales, Judge Levine—a learned and humane jurist—in the District Court, in *R v Wald* [1971], held that the lawfulness of procuring an abortion rests on the medical practitioner holding an honest and reasonable belief about the risk to a woman of continuing with the pregnancy.

The assessment of risk included factors such as health, wellbeing and economic circumstances. This ruling has been upheld by successive judges, including the Court of Appeal in *CES v Superclinics* [1995], which extended the rule to include the woman's immediate and foreseeable circumstances. However, each of the three judges in *CES v Superclinics* [1995] applied the test in *R v Wald* [1971] to the same set of facts but came to three quite different conclusions. As my colleague the Hon. John Graham put it so well, if three judges at the apex of our judicial system can reach three different outcomes on the same facts, what hope does a young woman living in rural New South Wales, for example, have in navigating the uncertain law in this space?

This shows the dangers of leaving this important area to judges only and the need for legislative change. Access to terminations rests in this State only upon these rulings by judges. Future court rulings could take these rights away. Although not ideal, however, this legal framework has provided many women, over the course of several decades, with the opportunity to access abortions in a safe, secure and medically-supervised manner. But the current situation creates unequal access. If you live in rural and regional New South Wales, are relatively poorer or do not have English as a first language, access to abortion in New South Wales is uneven, concentrated to the city and expensive. Fewer doctors prescribe medical abortion in regional areas. Often the only medical advice and treatment in small towns cannot deliver the service needed, or because those medical practitioners are known to their families, some women are reluctant to seek treatment from them.

These present significant barriers to women seeking medical treatment. It also requires doctors to form certain judgements about the situation faced by a pregnant woman. While many will make those judgements, and do, some will not—being concerned at having to defend that judgement either professionally or criminally down the track. The Hon. Mark Buttigieg referred to it as "doctor shopping". Access to medical treatment should not rely upon doctors having to engage in some kind of artificial double-think. The views of society as a whole have

clearly changed regarding this issue over time, from acceptance—grudging or otherwise—of a necessity, to a widespread support for change. It is time for the formal law in this area also to change.

The Hon. Courtney Houssos mentioned that she was impressed by the depth of passion in this area in the community. I have been also, in representations I have received from both sides of the argument, including those passionately in favour of reform, driven of course by an outrage at the antiquated nature of the law. Recently one of my teenage daughters confronted me in the kitchen one morning, demanding to know exactly when abortion had become illegal in New South Wales. When had it become a crime? I had to say to her, "Only 119 years ago." She was astounded. She said, "But that was a different world, these laws are barbaric." I can only agree. While this legislation will not solve all of those issues overnight, it does remove the worst of them. With the spectre of the criminal law removed, women can seek access to the medical treatment they need, for a variety of reasons—so many different personal reasons that we cannot codify all of them adequately—without judgement being passed on them. In this area there are so many issues, so many ambiguities, so many complexities. Only those living them should be empowered to make judgements. People from the outside should not be able to judge or restrict those choices, in my view.

There are a couple of other issues that have been raised in the debate. We have heard in evidence to the social issues committee inquiry and also in the contribution of the Hon. Trevor Khan, that the bill provides a more rigorous and stringent oversight for terminations occurring later than 22 weeks than currently exists in the law. That is dealt with in clause 6 of the bill. It is estimated that no more than 3 per cent of terminations take place after 20 weeks and the figure may be as low as 0.7 per cent. Where second and third trimester abortions take place, as they currently do sometimes in New South Wales, they usually involve a multi-disciplinary team in a hospital setting, involving doctors, nurses, fetal medical specialists, social workers and the hospital's ethics staff.

I refer to the evidence of the Royal Australian and New Zealand College of Obstetricians and Gynaecologists [RANZCOG], Dr Deb Bateson and the Australian Medical Association [AMA] on this issue. The bill is more restrictive of late second trimester and third trimester abortions than current practice, as it requires the involvement and consent of two medical specialists. This is not currently the case. It is actually a restriction on the current situation. For those who do not generally support law reform in this area, or do but have concerns with aspects of the bill, this should provide some comfort.

In relation to the issue of gender selection, no-one in this House or the other place supports such a practice. But I share the concern expressed by earlier speakers such as the Hon. Anthony D'Adam, regarding the smokescreen, as I see it, raised by opponents of the legislation around gender selection. How would any legislated ban be effective? The evidence I have seen does not establish that some migrant groups prefer boys, as some have suggested. The practical effect of any legislated ban would be to require doctors to become mind readers about their patients' intentions. This may alienate women and vulnerable communities from health care and cause doctors to become reluctant to provide medical services lest they get dragged into legal and criminal controversy about why they did not act to prevent an allegation of gender selection.

There is no evidence that this takes place in New South Wales although there is some evidence of gender-selective IVF. This bill was already amended in the other place to include a 12-month review on this issue. Any further amendments could create a further barrier to access to terminations, which may be some people's intended outcome. We should await the outcome of the review before considering any further action. Concern about the issue of conscientious objection, in clause 9, has been raised by opponents of the bill, but interestingly does not appear to be shared by the representative bodies of the medical profession. This should surprise no-one, as the bill simply places into law the current professional practice. Many have cited process as a reason to not vote for this bill. With respect, this is a thin excuse.

In Parliament, we are often called upon to have to form a judgement on legislation with little or no notice and to have to pass it through both Houses with little real scrutiny. For instance, the litany of anti-terrorism legislation comes to mind. Tonight we are dealing with the Lake Macquarie smelter issue. Only today was it introduced into the other place. Tonight I believe it will be debated and even passed through this place. Sometimes legislation is dealt with quickly. I am not saying that is a desirable outcome, but it is done. When this matter was last debated here, I made clear in my contribution—

The PRESIDENT: Order! Members will cease interjecting.

The Hon. ADAM SEARLE: —that if the bill failed, I would seek to join with others to bring forward a bill which did not have the legal defects which were all too apparent in the Abortion Law Reform (Miscellaneous Acts Amendment) Bill 2016. I was not part of the working group, but I know many members gave similar indications. The fact that the bill has come forward early in this Parliament should have surprised no-one. The level of parliamentary scrutiny it has already had has eclipsed that received by most other legislation. A further four weeks consideration has now been afforded to members.

I note in Victoria and Queensland there were extensive inquiries and I note that the inquiry in relation to this bill has not been so extensive; which has been well canvassed in this debate. However, the law here in New South Wales is not so fundamentally different from those in other States that it needs a reinvention of the wheel in relation to addressing the legal issues around the termination of pregnancy. I believe the time has come for the real-lived experience of women to be legislated and the useful fiction that we have relied upon since the 1971 ruling in *R v Wald* to be replaced with a clearer, simpler and more honest approach which recognises this difficult area as a health area and not as a legal or criminal issue. I believe this should have been the case for many years. With these words, I indicate that I wholeheartedly support the bill as it currently stands.

The Hon. BEN FRANKLIN (20:21): I speak this evening very briefly on the Reproductive Health Care Reform Bill 2019. I do not intend to revisit all of the arguments that have been prosecuted on both sides of the debate over the past two days and over the previous 119 years. But I do want to say this. I acknowledge and I respect the deeply held and passionate views of so many in this place. Colleagues across the political spectrum have seen this issue as a fundamental foundation of their core belief structure. They have spoken, written and advocated on this issue for years and sometimes decades. Some see the protection of a vulnerable emerging life as paramount to their view of what is to be most cherished in humanity, something that must be protected and defended above all.

The PRESIDENT: Order! I ask members to lower the tone of their conversations.

The Hon. BEN FRANKLIN: Others look through the prism of individual liberty and place their trust in the considered judgement of every impacted woman and their medical professionals to make a decision that is responsible and appropriate for their individual circumstances. I believe there is intellectual validity in both of these passionately held views. But this is a conscience vote. It behoves all of us to come to our own decision based on our research and our convictions. I have done that and I will be voting in favour of the bill. I do not believe that abortion is ever an easy way out. I do not believe that a woman would ever make that excruciating choice to have an abortion months into her pregnancy, unless there were extreme circumstances involved. I do not believe that abortion should be considered a crime. I have heard the array of concerns expressed both inside and outside this place and I am aware of a range of amendments foreshadowed for debate at the Committee stage. I shall consider every amendment closely and will vote for any that I believe strengthens the bill.

I conclude with this thought: A couple of weeks ago I rang my father—a thoughtful man in his eighties—to let him and my mother know that a debate would be occurring to consider taking abortion out of the New South Wales Crimes Act. He asked me what I was talking about. He said he assumed that this had happened 30 years ago and that of course I must support it. I believe that his views are in line with the majority of the citizens in this State and they are certainly in line with my own. I support the bill.

The Hon. GREG DONNELLY (20:24): I speak in this debate regarding the Reproductive Health Care Reform Bill 2019. Instead of going through a series of points one at a time articulating reasons why I oppose the bill, I will associate myself with the submissions and oral evidence provided by a number of people who participated in the recently completed inquiry into the bill by the Standing Committee on Social Issues. I associate with the individuals who in some cases were speaking on their own behalf and in others on behalf of the organisations or religions they represented. I endorse the overall content of their submissions and oral evidence regarding the principal arguments they forwarded opposing the bill and calling for it to be opposed.

Those I wish to identify with include Ms Bronwyn Melville, Honorary Secretary, Newcastle Pregnancy Help; Ms Tiana Legge, CEO, Women and Babies Support [WOMBS]; Mr Rocky Mimmo, Chairman, Ambrose Centre for Religious Liberty; Ms Anna Walsh, School of Law, University of Notre Dame, Sydney; Professor Margaret Somerville, School of Medicine, University of Notre Dame, Sydney; Mr Michael McAuley, President, St Thomas More Society; Dr Rachel Carling, CEO, Right to Life NSW; Professor Bernadette Tobin, Director, Plunket Centre for Ethics; Ms Rachel Wong, Managing Director, Women's Forum Australia; Dr Simon McCaffrey, obstetrician and gynaecologist; Dr John Whitehall, President, Christian Medical and Dental Fellowship; and some religious leaders who gave evidence to the inquiry, being Archbishop Anthony Fisher, Catholic Archdiocese of Sydney; Bishop Daniel, Bishop for the Coptic Orthodox Church, Diocese of Sydney; Reverend Joseph Azize, Maronite Eparchy of Australia; and the Metropolitan Basilios Kodseie, Antiochian Orthodox Archdiocese of Australia.

Regarding the debate on the bill in the other place and now in the Legislative Council, there is a matter, in addition to what is, in my view, a callous, heartless, indifferent, dare I say brutal, disregard by so many for unborn human life—that is, human life in utero from conception up to birth—that I find perplexing and particularly troubling. It is this: Even if one believed that the fundamental non-negotiable premise was that all women have an absolute unqualified right over their reproductive autonomy, that is they and they alone determine whether or not to carry a pregnancy to full term and birth, why is there this wholesale blanket opposition to amending the bill? I would have thought that being frank between ourselves when debating and considering a bill

like this should be taken as a given. We all know that what will eventually come out of this legislative process is not just a bill that once proclaimed will remove the reference to abortion from the Crimes Act 1900; it will, at least as significantly, perhaps more significantly, create a standalone statute that is going to regulate the practice of abortion in this State into the future as far as the eye can see and beyond.

The truth of the matter is the indisputable fact that the deliberate termination of a pregnancy can never be healthy for the unborn. Deliberate pregnancy termination extinguishes the life of the unborn. Abortion by whatever means kills the unborn. That is the intention and that is the outcome. In my view we should be frank enough to say this, acknowledge it and accept the consequences of what a law arising from our debate and final vote actually does when fully implemented and enforced. I believe that the debate in this Parliament prosecuted by those who want the bill passed has deliberately avoided staring this reality of this potential law in the eyes and acknowledging its consequences, both intended and unintended, for both the unborn human being and women.

In my view, the bill—notwithstanding the amendments passed in the other place—is still grotesque and unsupportable. It should be withdrawn by those who have sponsored it up to this point. I expect, though, that that is not likely, so I will be voting against it. I understand from speaking to members that a number of proposed amendments will be considered in the Committee of the Whole if the bill passes the second reading stage. I intend to participate fully in the Committee stage of the debate and speak on some of the proposed amendments. I look forward to engaging with many members from all parties over the next three weeks as those amendments are formulated, drafted, refined and finalised.

Having outlined my intentions, I now turn to the chronology of how the bill came to be debated in the Legislative Council this evening. On the afternoon or evening of Saturday 27 July 2019 Mr Alex Greenwich, MP, circulated to a select number of MPs a copy of the draft bill. Those who received an advance copy of the bill included the Premier of New South Wales, the Hon. Gladys Berejiklian. On Sunday 28 July copies of that draft bill began to be emailed to various MPs and MLCs. A senior Government Minister in the Legislative Assembly commenced ringing MPs, particularly in his party, to sound them out about securing support to get the bill into the Parliament and passed by both Houses as soon as possible.

On Monday 29 July the draft copy of the bill had been forwarded to many or most MPs and MLCs. There emerged talk amongst MPs and MLCs of the bill being introduced into the Legislative Assembly the following day, fully debated—including any amendments—and put to a final vote. On Tuesday 30 July a number of MPs and MLCs pushed back against the proposal to introduce the bill that day, debate it and put it to a final vote. Around noon the Government announced that Mr Alex Greenwich, MP, would not introduce the bill that day; instead he would introduce it on Thursday 1 August, give his second reading speech and then have the debate adjourned.

On Thursday 1 August—20 days ago—Mr Alex Greenwich introduced the bill, gave the second reading speech and then had the debate adjourned. The following Tuesday was 6 August; I will deal with the proceedings in this place first because they are relevant and to the point. That morning, as members will remember, before the second reading debate had even been completed in the Legislative Assembly, the Government moved a motion in the Legislative Council to initiate an inquiry into the bill if it passed the Legislative Assembly. The inquiry would be held by the Legislative Council Standing Committee on Social Issues and the motion required it to report back to the House before Tuesday 20 August. The motion was passed on the afternoon of 6 August. Between 6 August and 8 August in the other place, as we all know, the second reading debate was completed and the bill went through the Committee stage and to a final vote. There were amendments and debates on those amendments; some were voted up and some were voted down. The bill passed the Legislative Assembly.

On Friday 9 August at around 5.00 p.m., a copy of the bill passed by the Legislative Assembly went live on the inquiry's website. This was the inquiry that was effectively set up by motion on the Tuesday. Those wishing to make submissions were informed that they would be due at close of business Tuesday 13 August. In effect, excluding weekend days, that gave stakeholders and the citizens of this State just 48 hours to consult, research, draft, proof, finalise and submit their submissions. On Tuesday 13 August at around 4.15 p.m. the inquiries portal that was receiving submissions crashed, unsurprisingly. It had been receiving submissions at the rate of between three and four per minute. Stakeholders and citizens panicked at not being able to lodge their submissions via the portal, and many tried to email their submissions. Many were angry and emotionally distraught, thinking that they had missed the deadline. As a result of the portal crashing, the committee agreed to extend the cut-off time for submissions to midnight, Wednesday 14 August.

On Wednesday 14 August, Thursday 15 August and the morning of Friday 16 August—last week—the committee conducted its public hearings. Committee members were significantly restricted in the time they had available to ask questions of the witnesses. In some instances individual committee members—and I fell into this category because I was on the committee—barely had five minutes to question panels of four or five people. The New South Wales Government did not provide one witness from a department, an agency or any other body to

appear at the hearings and give testimony. Nor did we receive any submission from any Government Minister, department, agency or body. The chief obstetrician/gynaecologist—the chief health officer in the State of New South Wales responsible for mothers and babies—did not front the hearings or even put a phone call through to show any interest in participating in the inquiry. Is it any wonder that people inside and outside Parliament feel a little aggrieved?

From Saturday 17 August through to Sunday 18 August, Legislative Council staff and the committee secretariat put in an absolute marathon effort to prepare the draft report. I think some of them were here with their sleeping bags and bedsocks, working almost 24 hours a day. Those outstanding efforts of employees of this Parliament, some of them officers of this House, are to be highly commended and appreciated. On Sunday 18 August at 5.50 p.m.—the Sunday just passed—members, including me, were forwarded a copy of the chair's draft report for consideration. On Monday 19 August at 5.00 p.m.—basically 24 hours later—the committee met to finalise the draft. We needed to bring along amendments to the draft report and prosecute the arguments for those amendments. They were voted on; some were voted up and some were not. Yesterday morning, Tuesday 20 August, a copy of the report was tabled with the Clerk of the Parliaments.

I put on record that the Hon. Shayne Mallard did an extraordinarily diligent, sensitive and most considered job in chairing this difficult inquiry. I particularly thank him for his absolute fairness and the straight-down-the-line way he worked with diverse members of the committee to put together the witness panels. If we thought that was not easy, dealing with the hearings over 2½ days was pretty difficult. But with a most respectful approach, a deft hand and a nudge here and a nudge there, we got through it in a very respectable way and did this House proud. That afternoon—yesterday—the Government sponsored a motion, which was passed, that set out how the debate on the bill would be undertaken in the Legislative Council. That has resulted in the second reading debate continuing today, Wednesday 21 August.

There is much more that could be said but my speaking time is about to expire. However, I would like to talk about the inquiry into the bill undertaken by the Standing Committee on Social Issues. I submit that the inquiry was extremely short and completely inadequate when it came to the consideration of submissions and the calling of witnesses. As I said just a moment ago, that reflects in no way on the chair of the inquiry or my fellow committee members. Nor is it a reflection on those who made submissions—or at least the ones we have been able to read. There were a significant number of submissions; I have lost the number.

The Hon. Shayne Mallard: There were 14,000.

The Hon. GREG DONNELLY: There were almost 14,000 submissions. The committee was able to pick out only some of them, some of them by people who gave testimony at the hearing. Goodness knows what is in the body of all the other submissions by people who made an endeavour to contribute to this inquiry in a timely way and in accordance with what the committee had determined. I particularly want to express my appreciation to Steven Reynolds and Stephen Frappell.

I submit that it was an obscene timetable for this important inquiry. It was imposed on this House—we should clearly understand this—by the Government through the motion that it sponsored on Tuesday 6 August. That motion can be found at page 6 of *Hansard* for that day. It cast the die for the very limited deliberations of the inquiry, forcing the committee to report back to the House yesterday, 20 August. As honourable members know, this House has not even had the opportunity to look at the report and hear from those honourable members who participated in the inquiry.

Yesterday morning members were handed a copy of the report, and it has been left up to them to read and digest it. I think this is absolutely disgraceful. The report contains a balanced representation of the evidence provided by the witnesses to the inquiry and the content of the submissions. However, as I have said, the timetable of the inquiry significantly limited the number of witnesses—a situation that members had foisted upon them. I am disgusted with how this Parliament is dealing with such a significant proposed piece of legislation. If the number of submissions and the number of people who attended the rally in Martin Place last night are any indication, I can say without a shadow of a doubt that the majority of citizens of this State are also disgusted. If there is any doubt about what I have asserted—particularly with respect to the submissions—I direct honourable members to paragraph 1.10 on page 10 of the inquiry report. In my dissenting statement I said in regard to the committee's report:

A person who is fortunate enough to be given the honour and privilege to serve in the Parliament of New South Wales takes an oath of office at the time of being sworn in. That oath says:

"Under God, I pledge my loyalty to Australia and to the people of New South Wales."

With respect to the power to make laws the first paragraph of section 5 of the NSW Constitution Act 1902 says:

"The Legislature shall, subject to the provisions of the Commonwealth of Australia Constitution Act, have power to make laws for the peace, welfare, and good government of New South Wales in all cases whatsoever."

I have commenced my Dissenting Statement to this report of the Standing Committee on Social Issues on the Reproductive Health Care Reform Bill 2019 as I have above for these reasons. I believe that both those behind sponsoring the bill, in particular the five principal sponsors and the Government have created circumstances such that MLAs and MLCs, despite their sincerity and best endeavours can not uphold their oath of office or act in a way, individually or collectively to create this new law that is for the "peace, welfare, and good government of New South Wales".

I strongly encourage all honourable members to oppose the bill.

The Hon. DON HARWIN (Special Minister of State, Minister for the Public Service and Employee Relations, Aboriginal Affairs, and the Arts, and Vice-President of the Executive Council) (20:44): The Reproductive Health Care Reform Bill 2019 will decriminalise abortion—an offence which has remained in the Crimes Act for the last 119 years. Attempts to soften the law concerning abortion have a long and protracted history in this country—for example, stretching back 50 years in Victoria. In Victoria, in the 1969 Supreme Court case of *R v Davidson* the landmark Menhennitt ruling was established. That ruling found that an abortion is lawful if the accused held an honest belief on reasonable grounds that the abortion was both "necessary" and "proportionate". The element of necessity referred to what was required to preserve the pregnant woman from a serious danger to her life or to her physical or mental wellbeing. Meanwhile, the element of proportionality referred to circumstances where a termination was not out of proportion to the danger to be averted. The Menhennitt ruling established the first precedent in Australian jurisprudence that recognised the legality at common law of terminations in certain circumstances.

Just two years later the Menhennitt ruling was incorporated and extended in New South Wales law in the District Court case of *R v Wald*. In that matter, Judge Levine remarked that social or economic circumstances could also be taken into account when considering whether or not termination was lawful. This decision was later affirmed in the 1995 matter of *CES v Superclinics Pty Ltd*, where Justice Kirby held that a medical practitioner may take into account any danger to the woman's health, both during and after pregnancy when considering whether or not to terminate.

With these combined rulings the matter has largely been settled at common law in this State for the last 25 years. In the years since the Levine ruling the matter has been revisited by this place on a number of occasions. In 1988 a motion to condemn the "widespread practice of abortion" and prohibit its practice in private clinics was approved by this House 21 votes to 20. However, some three years later a bill to give effect to that motion by limiting abortions to public hospitals was introduced and defeated in the House by 29 votes to seven.

The issue of the statutory law concerning abortion remained largely untouched for the intervening 25 years, until the introduction of the Abortion Law Reform (Miscellaneous Acts Amendments) Bill 2016—Dr Mehreen Faruqi's bill. That bill proposed far-reaching changes. It included repealing offences under the Crimes Act with respect to abortion, and abolishing any offences established at common law with respect to abortion. The bill did not provide any accompanying health law to provide a regulated framework for terminations, leaving the issue of abortion completely unregulated—a totally unsatisfactory piece of legislation. Members will remember that debate well, and the reasons this House did not support it.

Finally, last year the Parliament considered the Public Health Amendment (Safe Access to Reproductive Health Clinics) Bill. The object of that bill was to provide a safe access zone around reproductive health clinics in which terminations were provided. The legislation was prompted by concerns that a number of individuals were protesting around reproductive health clinics, affecting the wellbeing of women accessing those services. The bill provided a 150 metre exclusion zone around these clinics, which prohibited protesting around the clinics or obstructing access to them.

Sections 82 to 84 of the Crimes Act currently provide that whoever unlawfully administers any drug or noxious thing, or uses any instrument to procure a miscarriage can be liable for an offence. This law means that an unlawful abortion is illegal, without any statutory guidance as to what constitutes an unlawful abortion. Through principles established via a patchwork of cases it has thus fallen to the courts to distinguish between a lawful and unlawful abortion. The offence of unlawful abortion provides that a woman may be liable for up to 10 years' imprisonment for having one. It further provides that any medical practitioner who performs a procedure or administers a drug with the intention of procuring a miscarriage is also liable for a term of imprisonment of up to 10 years. As I have canvassed, the de facto status of abortion is that it is for all intents and purposes legal under New South Wales law. However, the de jure status is such that it remains an offence under the Crimes Act.

I will speak briefly on the key provisions of the bill. The bill allows a medical practitioner to perform a termination on a person who is not more than 22 weeks pregnant. Currently there are no gestation limits prescribed at common law. After 22 weeks the bill requires two specialist medical practitioners to agree to the termination of pregnancy. I note that the 22-week time limit is the position of the Australian Medical Association because it represents the stage before the threshold of viability for the fetus. Terminations later than this are also more complex and pose a greater risk to the woman—that is with current medical expertise.

Of course, a future debate in this State may consider the gestational limit to be better placed at 20 weeks in line with advancements in medical understanding. However, that is not where we are today. The bill before us can only deal with current medical capacity. In considering whether a termination is appropriate after 22 weeks a registered medical practitioner must take into account all the circumstances. "All of the circumstances", as defined, includes all relevant medical circumstances, the person's current and future physical, psychological and social circumstances and the professional standards and guidelines applicable to the performance of the termination. While this definition in effect codifies the common law as it currently stands, this would be the first time such a standard is expressly legislated.

The bill also contains an explicit legislative protection for medical practitioners who conscientiously object to performing a termination. Once again, this is a new legal protection which is not currently afforded at common law. On this issue, the first print of the bill provided a requirement that a medical practitioner exercising conscientious objection refer a person to another medical practitioner who will perform a termination. However, subsequent amendments in the other place now provide an alternative requirement: That the medical practitioner need only provide information about locating appropriate medical services. I think this is a measured and sensible compromise, ensuring medical practitioners provide appropriate care without unduly burdening those with a conscientious objection. I think that is particularly important in rural and regional areas.

Further amendments passed on the floor of the lower House include mandating that medical practitioners obtain "informed consent" from a person consenting to a termination. "Informed consent" is defined as being given freely and voluntarily. This is an important statement of expectation from the Parliament about how these procedures should be handled. On the issue of gender selection I was pleased to note that House passed—without opposition—an amendment that the Secretary of the Ministry of Health conduct a review on whether or not terminations are being performed on the basis of gender selection. The House also unanimously expressed its opposition to terminations for the sole purpose of gender selection; this is a sentiment with which I strongly agree. This House may also choose to visit that issue.

I grew up in a faith community which strongly upholds the sanctity of life and I have profound misgivings about abortion. My own views were for many years influenced by this. However, my personal journey has moved me beyond this. I believe that life begins at the point of conception and that at some point after that an individual life achieves an agency independent of the woman who carries it to term in utero. Personally I am quite uncomfortable with the termination of any pregnancy at that point and believe the law should uphold the sanctity of each individual's life. My views on voluntary assisted dying should also be understood in that context.

That does not mean that I oppose the bill. I do not oppose it for two reasons. Firstly, I think it is true that this matter should now be dealt with outside the framework of the Crimes Act. Secondly, I accept that most Australians take quite a different view to mine and believe that greater weight should be given to the preferences of the woman with a child in utero. Frankly, the principles of the Menhennitt judgement are probably closer to my own personal views. However, I have decided to support the second reading of the bill and will carefully consider any amendments presented in the Committee stage.

I note that in the 20 years since I was first elected the House has seen conscience votes on any number of matters—the age of consent, human embryo research, safe injecting rooms, adoption, equal entitlements for same-sex couples, surrogacy, voluntary assisted dying and, of course, issues concerning abortion. In terms of these sorts of debates and the difficulty that this House faces dealing with these sorts of complex issues, for me there is nothing new under the sun. We have been there before and we will go there again. I applaud the civility that has characterised much of the debate—although sadly not all. I am pleased that the House will have the next four weeks to consider whether the bill should be amended. This is far more time than the House has had for such consideration on virtually any bill—even the most controversial—in the 20 years I have served in this place. I am pleased to have facilitated that outcome.

I briefly digress to note some of the comments made by the Hon. Greg Donnelly, where he sought to put the Government in the frame in a way that I thought was quite wrong and unfair. Unlike the way the matter was presented to the Chamber, the truth is that on 6 August 2019 the Selection of Bills Committee chair—on behalf of members of all parties represented in the Chamber—sponsored the motion to initiate the inquiry. That is the truth of the matter. That committee included the Hon. Shaoquett Moselmane and the Government Whip. It is a matter of record that when that motion was put to the House all members of the Opposition supported it. I felt it important that I correct the record. However, as stated, I do applaud the civility that has characterised the debate.

I am saddened by some of the personal attacks that have been made on members of the working group who have advanced the bill. Those members did so believing sincerely that they were discharging their duty to the people of New South Wales. They have not deserved the abuse they have been given. The fact that I might not agree with them on all the issues does not change my view. However, I say to them that I only ask you to

respect the members who profoundly—and, importantly, sincerely—disagree with them. I look forward to the coming Committee stage and, I hope, the resolution of this issue.

The Hon. PENNY SHARPE (20:58): In reply: I thank all members who contributed to this important debate. I also thank the President for his work during this lengthy debate. It has been a big effort to be in the House for the entire debate. Mr President, I know that you are not able to speak, but you have done us all a great service over the many hours that we have been in the Chamber this week and I want to thank you for that.

I also thank honourable members for their respectful approach to this debate. A number of issues have been raised in the debate that I wish to address. The bill before us is a more conservative position than the existing laws. The current arrangements for managing terminations in New South Wales are guided by the mandated NSW Health policy, Pregnancy - Framework for Terminations in New South Wales Public Health Organisations. They only require one doctor to give the go ahead for late-term abortions. This bill requires that two doctors must agree that an abortion after 22 weeks must go ahead based on the tests of the person's relevant medical circumstances, the person's current and future physical, psychological and social circumstances, and the relevant medical practitioner standards and guidelines.

The bill also requires that any such procedure must occur within a public hospital and be performed by a specialist. If the bill is defeated tonight, late-term abortions will not stop, they will not become illegal, they will continue to be performed in the rare circumstances that they are under the current guidelines. Where the bill is different to current arrangements is that up to 22 weeks a woman or other pregnant person will be able to attend a medical appointment and request an abortion. It will be the woman's decision, not the doctor's. It will be a decision that no woman takes lightly.

The bill respects that women are capable of making decisions, including difficult decisions, based on what is right for them. It is a matter for her doctor, and nobody else. Several members have raised concerns about women's access to counselling. It is important to note in the current case in all circumstances, as is required under NSW Health guidelines, women will be counselled by their chosen medical practitioners. I again refer members to the provisions in the bill that ensure that if a doctor believes that a woman would benefit from additional counselling they will be referred for this counselling.

The evidence in the inquiry was very strong on this matter and I reflect on what some of the experts said about mandatory counselling. According to NSW Health guidelines all women seeking a termination of pregnancy are already offered counselling. It is important to remember that invariably women have already considered at length their decision to seek an abortion, utilising support networks, the internet and weighing their options. Further, counselling by its very nature must be a process that is engaged with. Mandated counselling achieves no positive outcome for anyone involved and runs the risk of delaying termination into later gestational periods. I quote Australian Medical Association Vice President Dr Danielle McMullen:

But if they are aware of all that, forcing them into long and painful discussions about what is already a difficult issue that they have spent many hours and days and weeks considering would be unfair to women, and also to the rest of their family and their healthcare team.

Family Planning NSW CEO Adjunct Professor Ann Brassil said:

Women, by the time they come to the decision that they want an abortion, have by and large been through that process. You cannot add anything to that process except fear and concern by having mandatory counselling.

I refer to what NSW Pro-choice Alliance Campaign Chair Wendy McCarthy said in relation to this:

I cannot think of any other health procedure that requires mandated counselling or counselling. I would also comment that in my long experience, that people offered counselling at the institutional base mostly do not want it. They have taken counsel from their most intimate friends. It is a deeply intimate matter to women.

I also quote Anglican Bishop of Newcastle Reverend Doctor Peter Stuart:

Parliament needs to be alert to some of the United States experience where informed consent and counselling have been implemented in ways which have caused manifest distress to the woman.

Members have also raised concerns that when seeking an abortion women should be subject to mandatory cooling off periods of up to 72 hours. Cooling off periods do nothing except delay access to abortion, forcing women into later gestational terminations. These types of requirements also disadvantage women in rural and regional areas and those for whom the cost of this procedure is already very difficult. I again make the point that women have already considered in great detail what the implications for them are if they have an unplanned or unwanted pregnancy or if they have already had the devastating news of a much-wanted pregnancy that has tragically gone wrong. A cooling off period just prolongs their distress and again suggests that women have not considered all the issues that are relevant to them.

All members are concerned that women should have their own agency and should not under any circumstances be victims of reproductive coercion. Whether that is from those trying to force women to have abortions against their will or trying to prevent women from having abortions that they desperately seek. This is a form of abuse. On this issue I say medical practitioners are very versed in managing and supporting women who they believe are being coerced into an unwanted abortion. They take this role very seriously. It forms part of the informed consent process when treating women.

There was also very important evidence provided to the inquiry by organisations such as Rape and Domestic Violence Services Australia. Again I place this on the record. Domestic violence of a physical nature will most often not begin until the first pregnancy, usually at around six or seven months gestation. Pregnancies in these circumstances further restrict women from leaving the relationship. Abortion remaining in the Crimes Act makes coercion to continue pregnancies more likely and makes pregnant people experiencing domestic violence more likely to remain in an abusive relationship. Rape and Domestic Violence Services Australia Executive Officer Karen Willis said:

I think that is the other end of coercion ... Removing abortion from the law and making it a health care issue, where the individual who is attempting to access that health care support is the decision maker, will reduce the coercion rather than increase it.

I think that is something that we can all hope and agree should happen. Two further areas of discussion have featured in this debate; gender selection abortions and the conscientious objection of medical practitioners. On the issue of gender selection abortions there have been some who have looked overseas to try to draw conclusions on gender selection. There is no doubt that it occurs overseas. No-one in this Parliament thinks it is reasonable or right. There is also no doubt that no-one in this Parliament considers it to be something that should be allowed to occur in New South Wales, but the situation in New South Wales is different. There is no evidence that terminations solely for gender selection are occurring in this State. The bill states clearly that the New South Wales Parliament does not support gender selection abortion and has established a legislative review to report back to the Parliament.

I refer members to the very strong evidence from the Australian Medical Association and doctors about the possible impact of placing a ban on gender selection abortions without understanding the evidence and unintended and serious impact of access to abortion and the impact on doctors providing reproductive health care. We must also remember that there are some cases of gender selection abortion that may be required for serious genetic and medical reasons. I place on record two reflections in relation to this. Australian Medical Association Vice President Danielle McMullen said:

If such amendments were to pass it would potentially make any doctor providing abortion services after nine weeks party to a crime. That is because we can now, with technological advances, find out fetal sex from about nine weeks ... any laws prohibiting gender selection as a reason would require doctors to be mind-readers to ensure no crime was being committed. This would have the effect of delaying or preventing the delivery of care.

Doctor Philip Goldstone, who represented Marie Stopes Australia, which provides this vital and important health care to women throughout New South Wales, said:

As a doctor with more than 20 years of experience in providing abortions, I can tell you that gender is rarely an issue that is raised. ... I believe that if we are to talk about sex selection, it must be grounded in evidence and some of the discussion I have heard on this issue this week unfairly discriminates and targets women from certain multicultural communities who may already be facing barriers to access abortion care.

On the issue of conscientious objection, the bill provides statutory protection for medical practitioners or other registered health practitioners who conscientiously object to performing or assisting in the performance of a termination. The bill requires the medical practitioner to disclose their objection to the person seeking a termination as soon as practicable as well as referring that person to a health practitioner who the first health practitioner believes does not have a conscientious objection to the performance of the termination.

That was clarified in the debate in the other House and I think we came up with a good arrangement for this. No-one wants any medical practitioner to have to perform something that they do not support for their own reasons. But similarly, we should not be delaying women getting the health care that they need. The reality when women are seeking terminations is the clock is on. There are difficult decisions to be made, and if someone cannot help them because of their beliefs, that is fine, but they should not stand in the way of referring that woman to someone who can.

I have heard the stories of women in rural and regional New South Wales who have been sent to the wrong place at the wrong time and have ended up having to have later term abortions that are more complex, more expensive and are not right. The current practice in relation to conscientious objection is also under the current framework. The bill reflects the current framework that already exists. Again I say to people that if this bill is defeated tonight, conscientious objection as it currently operates will continue to operate in the same way that is being reflected in this bill.

Before I close this debate I will reflect on a couple of stories of women we have known. I am not going to identify them. I thought a lot about what the Hon. Natalie Ward said in her contribution about stories, but these women have given me permission to tell them. I know of a young woman who had a very difficult life. She was in out-of-home care from age 12. At age 14 she was raped. At age 14 she had nowhere to go. She did not have any family that she could turn to. She relied on the help, support and love of a social worker who took her to have a termination. I do not believe under any circumstances she should have been forced to carry that pregnancy to term.

One of my friends discovered at 19½ weeks that her much-wanted pregnancy was no longer viable. She had to make the choice of whether she would terminate then and there or whether she would try to carry that baby to term knowing that it was going to die. No-one can understand the grief that she lives with and I think no-one should stand in the way of the decision that she and her then husband had to make. It is no-one else's business. It was one of the worst things that has happened to her and she lives with it every day. I reflect also on some people I know who are currently undergoing cancer treatment. There are some very difficult stories of women who are having late-term abortions because they have been diagnosed with stage four cancer and will literally die if they do not terminate the pregnancy and start treatment straightaway. Again I do not think any of us should be standing in the way of the very difficult decision that those women and their doctors have to make.

The final stories I want to relate are around reproductive coercion. Unfortunately, it is not unusual for women to have the men in their lives, their intimate partners, sabotage their contraception. It is not unusual for women to be isolated in their homes, fearful for their lives, and to be told that they have to have sex without contraception, essentially often without their consent, or that they have to stay pregnant to show their faithfulness to an abusive partner. Some women have to stay and carry a pregnancy to term in abusive relationships. Similarly, there are cases where women want to keep a baby but they are pressured, sometimes forced, to have an abortion that they do not want. I have reflected already in this debate that the good news is that the clinics they attend are very alive to the issue and are often able to put in place the protections those women need to make the choice that is best for them.

I place on record my thanks for the co-sponsors of the bill and the representatives from many organisations that have provided advice, walked the halls, made submissions and presented to the inquiry—the Pro-Choice Alliance, especially Wendy McCarthy and Sinead Canning, Mary O'Sullivan and Amanda Keeling from the Women's Electoral Lobby, Dr Danielle McMullen and Dr Kean-Seng Lim from the Australian Medical Association, Dr Vijay Roach from the Royal Australian and New Zealand College of Obstetricians and Gynaecologists, Claire Pullen and Christine Donyare of Our Bodies Our Choices, Denelle Crozier from Women's Health NSW, Professor Ann Brassil and Dr Deborah Bateson from Family Planning NSW and Adrian Walters and Edwina McDonald from the Human Rights Law Centre. There are many more but I will get into trouble if I name too many.

I have really valued their input and thoughtful explanation of the issues as we have gone through this process. I thank the Labor women of the past who desperately wanted to see this reform but for a range of reasons that I will not go into now—we can talk about it later—we were not able to progress it. I say to Meredith Burgmann, Ann Symonds, Helen Westwood, Carmel Tebbutt, Jan Burnswoods and Sandra Nori that I owe them. I do not stand here without standing on their shoulders. I say thank you to my current Labor colleagues and co-sponsors of this bill—Jo Haylen, Jenny Aitchison, Trish Doyle and Ryan Park. The women from EMILY's List and Labor for Choice are inspiring, determined, tenacious feminists. I am lucky to have them in my life. I say to the co-sponsors in this place—the Hon. Trevor Khan, Ms Abigail Boyd and the Hon. Emma Hurst—that we have shown that we can reach across the Parliament and work for a common purpose. It is a rare thing and although this is controversial I think it is a good thing for us to do. I think people in the community would like to see us do this more often.

Finally, I thank the working group with whom I have spent a lot of time—Alex Greenwich, the Hon. Trevor Khan, Jo Haylen and particularly all their staff. They have all been incredible. An enormous amount of work goes into these things. People never get the credit they deserve. Our staff make us look good every single day. I have only a couple of minutes left and we have to deal with a couple of things. I indicate that there are two amendments to deal with before the question is put on the second reading. One is an amendment from the Hon. Matthew Mason-Cox. We need to understand that if that amendment is passed it will basically stop the bill from progressing for the rest of the session. It is a dilatory amendment; it seeks to kill the bill. I recommend that members vote against it.

The other amendment is from the Hon. Robert Borsak seeking to set up a joint select committee to look more into the detail of the bill. I will not traverse backwards and forwards around the process of this bill. I simply make the point that it has been a long time coming. There have been a lot of hours spent on it. People will have four weeks to take advice and to think about the amendments. I will look at all the amendments with the same

seriousness with which they are presented and will consider them as we go through. We do not need another committee on this matter. What we need is to get on with it. The women of New South Wales need us to.

The opponents of this bill believe it to be unconscionable to take a human life, and they believe that to be the case when a woman is pregnant. I respect that but I also ask them to respect that there are women who have to make that decision and it is not right nor is it conscionable for them to stand in the way of them doing that. We cannot force women to have pregnancies and give birth against their will. That is what we are asking people to do and I think we need to think about that.

My final comments go to the nub of the entire bill. We have to trust women to make the right decisions. It is an extraordinary thing to be a woman standing in this place and in some ways begging people to take us seriously and to believe that we can make these decisions. We make decisions every day. We are humans and that is what we do. We live complex lives. We live whole lives. Some of us are perfect, many of us are nowhere near it, but we are all doing our best. We are all perfectly capable of making the decisions that we need to make in our best interests—decisions that are best for us, that are best for our families and that are best for our good health. We need to trust women and we need to respect that the choices they make are as valid as anyone else's. I commend the bill to the House.

The PRESIDENT: I congratulate all members on the respectful manner in which they have conducted this debate and the respect shown to the Chair. The question is that this bill be now read a second time, to which the Hon. Robert Borsak and the Hon. Matthew Mason-Cox have moved amendments. The question is that the amendment of the Hon. Robert Borsak be agreed to.

The House divided.

Ayes 14
Noes 27
Majority 13

AYES

Amato, Mr L	Banasiak, Mr M	Borsak, Mr R
Donnelly, Mr G	Farlow, Mr S	Houssos, Mrs C
Latham, Mr M	Maclaren-Jones, Mrs	Martin, Mr T
	(teller)	
Mason-Cox, Mr M	Moselmane, Mr S	Nile, Revd Mr
	(teller)	
Roberts, Mr R	Tudehope, Mr D	

NOES

Blair, Mr	Boyd, Ms A	Buttigieg, Mr M (teller)
Cusack, Ms C	D'Adam, Mr A (teller)	Faehrmann, Ms C
Fang, Mr W	Field, Mr J	Franklin, Mr B
Graham, Mr J	Harwin, Mr D	Hurst, Ms E
Jackson, Ms R	Khan, Mr T	Mallard, Mr S
Mitchell, Mrs	Mookhey, Mr D	Moriarty, Ms T
Pearson, Mr M	Primrose, Mr P	Searle, Mr A
Secord, Mr W	Sharpe, Ms P	Shoebridge, Mr D
Taylor, Mrs	Veitch, Mr M	Ward, Mrs N

Amendment of the Hon. Robert Borsak negatived.

The PRESIDENT: As the amendment moved by the Hon. Robert Borsak was not agreed to, I will put the question on the amendment moved by the Hon. Matthew Mason-Cox. Before I put the question I need to explain the meaning of the amendment, which is permitted under Standing Order 140 (2) (a). As explained on page 367 of *New South Wales Legislative Council Practice* by Lovelock and Evans:

When it is desired to defeat a bill and prevent its reintroduction in the same session, amendment may be moved to the motion for the second or third reading to omit the word 'now' and insert instead 'this day six months'. The 'this day six months' amendment, if carried, finally disposes of a bill ... and it may not be considered again in the same form in that session (SO 148 (2)).

Therefore if members vote to support the amendment moved by the Hon. Matthew Mason-Cox, members will not be voting to delay the bill. Rather, members will be voting to dispose of the bill in this session. The question is

that the amendment moved by the Hon. Matthew Mason-Cox be agreed to. Is leave granted to ring the bells for one minute?

Leave granted.

The House divided.

Ayes15
Noes26
Majority.....11

AYES

Amato, Mr L
Cusack, Ms C
Houssos, Mrs C

Banasiak, Mr M
Donnelly, Mr G
Latham, Mr M

Borsak, Mr R
Farlow, Mr S
Maclaren-Jones, Mrs
(teller)
Moselmane, Mr S
(teller)
Tudehope, Mr D

Martin, Mr T

Mason-Cox, Mr M

Nile, Revd Mr

Roberts, Mr R

NOES

Blair, Mr
D'Adam, Mr A (teller)
Field, Mr J
Harwin, Mr D
Khan, Mr T
Mookhey, Mr D
Primrose, Mr P
Sharpe, Ms P
Veitch, Mr M

Boyd, Ms A
Faehrmann, Ms C
Franklin, Mr B
Hurst, Ms E
Mallard, Mr S
Moriarty, Ms T
Searle, Mr A
Shoebridge, Mr D
Ward, Mrs N

Buttigieg, Mr M (teller)
Fang, Mr W
Graham, Mr J
Jackson, Ms R
Mitchell, Mrs
Pearson, Mr M
Secord, Mr W
Taylor, Mrs

Amendment of the Hon. Matthew Mason-Cox negatived.

The PRESIDENT: The question is that this bill be now read a second time. Is leave granted to ring the bells for one minute?

Leave granted.

The House divided.

Ayes26
Noes15
Majority.....11

AYES

Blair, Mr
D'Adam, Mr A (teller)
Field, Mr J
Harwin, Mr D
Khan, Mr T
Mookhey, Mr D
Primrose, Mr P
Sharpe, Ms P
Veitch, Mr M

Boyd, Ms A
Faehrmann, Ms C
Franklin, Mr B
Hurst, Ms E
Mallard, Mr S
Moriarty, Ms T
Searle, Mr A
Shoebridge, Mr D
Ward, Mrs N

Buttigieg, Mr M (teller)
Fang, Mr W
Graham, Mr J
Jackson, Ms R
Mitchell, Mrs
Pearson, Mr M
Secord, Mr W
Taylor, Mrs

NOES

Amato, Mr L
Cusack, Ms C
Houssos, Mrs C

Banasiak, Mr M
Donnelly, Mr G
Latham, Mr M

Borsak, Mr R
Farlow, Mr S
Maclaren-Jones, Mrs
(teller)

NOES

Martin, Mr T

Mason-Cox, Mr M

Moselmane, Mr S
(teller)

Nile, Revd Mr

Roberts, Mr R

Tudehope, Mr D

Motion agreed to.

The PRESIDENT: According to the resolution of the House of Tuesday 20 August 2019, consideration of the bill in Committee of the Whole now stands an order of the day for Tuesday 17 September 2019.

TRANSPORT ADMINISTRATION AMENDMENT (RMS DISSOLUTION) BILL 2019**First Reading**

Bill received from the Legislative Assembly, and read a first time and ordered to be printed on motion by the Hon. Don Harwin.

The Hon. DON HARWIN: I move:

That standing orders be suspended to allow the passing of the bill through all its remaining stages during the present or any one sitting of the House.

Motion agreed to.

The Hon. DON HARWIN: I move:

That the second reading of the bill stand an order of the day for a later hour.

Motion agreed to.*Business of the House***WITHDRAWAL OF BUSINESS**

The Hon. MARK LATHAM: Yesterday this was a matter of supreme public importance but given that a day is a long time in this place, I now withdraw the matter of public importance standing in my name on the *Notice Paper* for today relating to highly contentious bills. I draw the attention of the honourable members and the general public to the same points that I made in my second reading speech on the previous bill that was considered by the House. I will not delay the Chamber any longer.

*Bills***LAKE MACQUARIE SMELTER SITE (PERPETUAL CARE OF LAND) BILL 2019****Second Reading Speech**

The Hon. DON HARWIN (Special Minister of State, Minister for the Public Service and Employee Relations, Aboriginal Affairs, and the Arts, and Vice-President of the Executive Council) (21:40): I move:

That this bill be now read a second time.

I seek leave to have the second reading speech incorporated in *Hansard*.

Leave granted.

The Lake Macquarie Smelter Site (Perpetual Care of Land) Bill 2019 will ensure that land at the site of the former lead and zinc smelter at Boolaroo at Lake Macquarie is properly managed in perpetuity. This will reduce any risk to the environment and the community from residual contamination produced over the 100 years or more of the smelter's operation.

The smelter ceased operation in 2003, and extensive remediation works have since been carried out on the former smelter site. These works involved the construction of a containment cell on the site to encapsulate the contaminated material excavated from it. The physical construction of the cell was completed about two to three years ago. It now spans over 20 hectares and contains about 1.9 million cubic metres of material. Associated infrastructure includes a water or leachate treatment plant, which treats water collected from the site of the cell.

The cell and associated water treatment plant will require on-going maintenance, and repair or replacement of components in the longer-term, including potentially the capping of the cell. There are other areas of the former smelter site, such as Munibung Hill, that are now zoned for environmental conservation and also require on-going environmental management. These were unable to be fully remediated because of the hilly nature of their terrain and existing vegetation cover.

To understand the Government's reasons for introducing this bill, it is necessary that I briefly outline what has occurred on the former smelter site since the early 2000s. The site is owned by Pasminco Cockle Creek Smelter Pty Ltd, a company that has been subject to a deed of company arrangement since 2002. Before that, the company, with other companies in the Pasminco group, had been placed in voluntary administration. I will refer to Pasminco Cockle Creek Smelter Pty Ltd simply as Pasminco.

In 2003, the Environment Protection Authority issued Pasminco with a remediation order under the Contaminated Land Management Act 1997—now known as a management order—for the whole of the site then owned by Pasminco. In February 2007, the Minister for Planning granted a project approval under the now repealed Part 3A of the Environmental Planning and Assessment Act 1979 for the remediation of the site, including the construction of the cell. Successive stages of the remediation works have been subject to site audits by an expert site auditor accredited by the EPA under the Contaminated Land Management Act.

Following site audits, areas of the former smelter site were "excised" from the remediation order and able to be rezoned for light industrial, business or residential purposes. Indeed, on what was once part of the smelter site, Cardiff Central industrial estate has been created, and to the south-west of the containment cell there is now a Bunnings store and residential development.

The 2007 project approval requires Pasminco to put in place a funding framework for the long-term environmental management of the containment cell and other land that has been zoned for environmental conservation. More specifically, the project approval requires Pasminco to ensure that a public positive covenant applied to the site of the containment cell before the construction of the cell was completed. That covenant, among other things, should have addressed the long-term management, operation, maintenance and monitoring of the containment cell, as well as funding to sustain that long-term management. No covenant has been put in place, or even prepared by Pasminco, despite discussions and negotiations with the external administrators of the company over a protracted period of time.

In 2018, because of the unwillingness of Pasminco to engage in further negotiations with the former Department of Planning and Environment and the EPA, over a proposal to secure long-term funding of the costs of managing the cell and other land, the Government amended State Environmental Planning Policy No 55 — Remediation of Land. This ensured that no further subdivision of the former smelter site could occur until adequate arrangements for the perpetual care of the cell, its associated infrastructure and the land zoned for environmental conservation were in place, reflecting the conditions of the 2007 project approval.

In mid-2017 the external administrators estimated that \$21.5 million would be sufficient to support the long-term management of the cell and other land zoned for environmental conservation. The former Department of Planning and Environment engaged an environmental consultant to identify future liabilities in relation to the long-term management of the containment cell and water treatment plant, and review the costs provided by the external administrators that were largely unsupported by evidence or analysis. Following the provision of a number of reports by the consultants, financial modelling was obtained externally in relation to the net present value of the future costs of long-term management.

In 2019, the Waste Assets Management Corporation [WAMC], a Government agency with particular expertise in managing contaminated landfills, refined the estimate of average annual costs, working with the external administrators. On those refined costs estimates, the net present value of future costs has been assessed as approximately \$67 million.

Despite the sale of significant portions of the former smelter site, the only remaining potential "asset" of Pasminco appears to be the land surrounding the containment cell zoned for residential, business or industrial purposes. The value of that land, even when subdivided from the containment cell, is unlikely to exceed the net present value of the cost in perpetuity of maintaining the containment cell, its associated infrastructure and other land.

The external administrators have already advised those creditors who are bound by the deed of company arrangement that they are unlikely to receive any further dividend, having received eight interim distributions since 2004, totalling, on estimates of Government advisers, about \$550 million.

Government advisers understand that Pasminco will be placed in liquidation in the near future.

These circumstances mean that it is inevitable that responsibility for the long-term management of the containment cell and other land will devolve to the Government, as the Government of course will not allow any risks posed by residual contamination to be left unmanaged. The bill before the House recognises that inevitability, prevents further diminution of the value of the remaining land through the accruing of further debt by the external administrators and allows the activation of significant areas of the site for housing and jobs.

The bill will transfer the ownership of that part of the former smelter site, remaining in Pasminco's ownership, to the Hunter and Central Coast Development Corporation, a NSW Government agency established under the Growth Centres (Development Corporations) Act 1974.

The Development Corporation will take on the liabilities of Pasminco in relation to the long-term management of the containment cell and other land that Pasminco has failed to address. The Waste Assets Management Corporation will assume the day-to-day management of the containment cell.

The Development Corporation is uniquely positioned, based as it is in the Hunter region and with its sound record of promoting the development of nearby Newcastle and revitalising its CBD, to ensure that the development potential of the land surrounding the cell can be realised. It will release that land for housing and industrial and business development, thereby generating jobs and boosting the local economy.

An assessment prepared for Lake Macquarie City Council estimated that the proposed development for the site would generate 1,600 long term jobs, with a further 1,300 multiplier induced jobs across the broader economic area. Approximately 1,000 construction jobs would likely to be generated and at least 600 homes can potentially be built.

The bill will ensure that there is no further delay in the development of this important site.

I turn now to the provisions of the bill.

Key concepts used in the bill are set out in clause 3. First, the term "former smelter site" is defined by reference to the four lots of land that, on the introduction of the bill, remain in Pasminco's ownership. As already mentioned, some of the land on which smelter operations took place have already been sold off. For the information of honourable members, I will also table an illustration of the site, showing these four lots. The location of the containment cell on the site can be readily identified by looking at the land zoning maps adopted by Lake Macquarie Local Environmental Plan 2014, which shows the containment cell zoned for special activities - hazardous storage establishment.

Another key concept in the bill is that of "contaminated land". This reflects the descriptions in clause 22 of State Environmental Planning Policy No 55 of the land for which adequate arrangements for its perpetual care need to be made before the site to which that clause applies can be subdivided or otherwise developed. In particular, the reference in the bill's definition of "contaminated land" to land within the environmental conservation zone E2 under Lake Macquarie Local Environmental Plan 2014 immediately before 31 August 2018 reflects the commencement of clause 22 on that date.

Clause 5 transfers the former smelter site, defined as outlined, to Hunter and Central Coast Development Corporation on the vesting day, which is the day on which clause 5 commences. While the clause transfers the interest of the registered proprietor of the site—that is, Pasminco—other interests are preserved, such as easements, rights of access and even leasehold interests held by utilities, such as telecommunications corporations, with respect to infrastructure and equipment on Munibung Hill.

However, any interest that is merely protected by a caveat and not recorded on the title of the land will be extinguished. For example, any interest in the land asserted by Fiddletown Investments Limited—a company incorporated in the British Virgin Islands—on the basis of a recent loan facility provided to Pasminco will be extinguished.

Clause 6 converts the interests in land transferred to the development corporation or extinguished to rights to compensation under the Land Acquisition (Just Terms Compensation) Act 1991. Because of the unique characteristics of the site, particularly of course the containment cell and its associated infrastructure, the bill modifies or clarifies aspects of determining compensation under the Just Terms Act.

Most importantly, the bill makes it clear that net present value of the future costs, in perpetuity, of managing—including repairing and replacing if necessary—the containment cell and its associated infrastructure, and maintaining and managing the site of the cell and the land zoned for environmental conservation, is to be taken into account in determining the compensation to which any person is entitled under the Just Terms Act.

Any positive value that some of the land or lots may have—if considered separately from the land on which containment cell is located, for example, and just having regard to its zoning for residential, industrial or business purposes—must be offset by the liability attached to the containment cell and its associated infrastructure, such as the water treatment plant, and other land that requires long-term environmental management.

Clause 6 (10) requires a person, such as the Valuer-General, to have regard to estimates of the future costs in relation to the contaminated land, and their net present value, provided by a government agency or obtained by it.

Current estimates by the Waste Assets Management Corporation, the NSW Government agency with expertise in this area, has put the annual average cost at slightly more than \$1 million. On that basis, the net present value of the cost of managing the contaminated land in perpetuity has been estimated as being in the order of \$67 million. This is likely to exceed the value of the land zoned for residential, industrial or business purposes surrounding the containment cell, once subdivided from the containment cell site.

Under clause 6 (8), the value of the land must be determined taking into account the restrictions on the use of the former smelter site, as they applied immediately before notice of the introduction of the bill was given, imposed by or under another Act. These include, not just clause 22 of State Environmental Planning Policy No 55—Remediation of Land, but also the restrictions on carrying out complying development on the site under State Environmental Planning Policy (Exempt and Complying Development Codes) 2008 introduced at the same time as clause 22. They also include the conditions of the 2007 project approval requiring a funding framework to be put in place.

Clause 7 sets out the responsibilities of the owner of the containment cell site, which on the vesting day will, of course, be Hunter and Central Coast Development Corporation. The provisions of clause 7 reflect the conditions of the 2007 project approval, which require the proponent to prepare and implement a long-term environmental management plan for the containment cell. That plan—both under the bill and under the conditions of the project approval—requires the approval of the Planning Secretary and the EPA before its implementation.

Clause 8 contains similar provisions for the remainder of the land that requires long-term environmental management, such as Munibung Hill, zoned for environmental conservation. The owner of that land has the general responsibility for managing the land to protect the environment and the public from any risk from residual contamination on the land.

Clause 9 applies to that part of the former smelter site that can be developed, that is, the land surrounding the cell that is zoned for residential, industrial or business uses. The owner—Hunter and Central Coast Development Corporation on the vesting day—is to facilitate the development of that land and for that purpose has available to it the powers under the Growth Centres (Development Corporations) Act. It can subdivide and sell that land.

Indeed, part of the site is subject to a contract of purchase and sale with Greencapital Australia Pty Ltd, which already owns a lot next to Munibung Hill that was once part of the site of the smelter operations, and is currently carrying out subdivision works for the purpose of housing. While that contract will not be preserved, clause 9 (3) will allow the Development Corporation to negotiate a new contract with Greencapital without first having to put the land on the market, in recognition of the significant presence Greencapital has already established in the area and investment it has made. I am advised that it is the intention of the development corporation to do so.

Further, the development corporation can directly deal with other third parties who have expressed an interest in purchasing land, such as IKEA who still has a caveat on the title of part of the land.

Clause 10 ensures that the proceeds of the sale of the land around the containment cell received by the development corporation are quarantined for the purpose of managing the contaminated land in perpetuity. The clause establishes the Containment Cell Perpetual Care Fund into which proceeds of sale are to be paid—after the development corporation deducts its costs—and any other money appropriated for the purposes of the fund. The purposes for which money can be paid out of the Fund are limited to those related to the responsibilities given to the owner or owners of land transferred by the bill. The money in the fund can be invested by the development corporation or other government agency that becomes an owner of the land.

Clauses 12 and 13 provide the flexibility required for the management of the contaminated land over the very long term.

As I have mentioned already, it is envisaged that the Waste Assets Management Corporation will manage the containment cell and its associated infrastructure under an arrangement with the development corporation from the day on which the land is transferred to the development corporation, as it has the necessary expertise in this area. Clause 13 will clearly empower WAMC to exercise the functions under clause 7 of the bill—and indeed clause 8—of the owner of the containment cell site under such an arrangement. In addition, functions of an owner may be formally delegated to the employee of another government agency such as WAMC.

This brings me to Schedule 1 to the bill, which provides a mechanism for the land that is to be vested in the development corporation to be transferred to another government agency, including the local council with the council's consent. It is proposed that, after the development corporation has subdivided the land, and created a separate lot for the containment cell and the water treatment plant, that lot will be formally transferred to WAMC.

Of course, given that the contaminants such as lead and cadmium in the containment cell will not decay and will remain on the site indefinitely, it is inevitable that management for the cell will pass eventually to new government bodies. Schedule 1 recognises that, by allowing land to be readily transferred by order of the Governor that amends Part 2 of the Schedule to include a description of the land and the government agency to whom the land is transferred.

Finally, Schedule 2 contains savings and transitional provisions and allows regulations to be made of a savings or transitional nature consequent on the enactment of the proposed Act or the making of an order transferring land.

The Government is committed to regional New South Wales. Hunter and Central Coast Development Corporation is well placed to stimulate the activation of the site of the former smelter operations, which of course played a central role in the economy of the region throughout the twentieth century. Boolaroo will be revitalised by the new housing that will be built on this site, and the construction jobs and long-term employment opportunities that light industries and businesses on the site will generate. At the same time, the environment and the health of the community will be protected.

I commend the bill to the House.

I seek leave to table a site plan of the Lake Macquarie smelter site.

Leave granted.

Document tabled.

Second Reading Debate

The Hon. ADAM SEARLE (21:41): I lead for the Opposition on the Lake Macquarie Smelter Site (Perpetual Care of Land) Bill 2019. The Opposition supports the bill, which will secure the long-term environmental management of the site on Cockle Creek. The Opposition understands the complexities of this parcel of land and is acquainted with the unusual and, indeed, unique circumstances of the site and its importance to the Hunter region. The Pasminco Cockle Creek Smelter was a lead and zinc smelter that operated continuously in the northern part of Lake Macquarie from 1897 to 2003. Mining and manufacturing have always played a strong role in the Hunter. In fact, the Cockle Creek Smelter was one of the Hunter region's first major industrial sites and its operation has contributed strongly to the New South Wales economy over the past 120 years since its opening.

The smelter has played an important role in the history of the lake and Hunter region, producing materials for munitions during World War I and World War II. However, in 2001 the smelter ceased to operate when the company that owned it entered a voluntary scheme of company administration. That led to the Environmental Protection Authority issuing a remediation order to Pasminco to remediate the site in 2003. In 2007 the then Minister for Planning approved remediation works, including the construction of a containment cell for the contaminated material excavated from the site. The site contains a capped containment cell spanning about 20 hectares with about 1.9 million tonnes of contaminated material. It is an important site and one of the largest brownfield parcels in the Hunter region with potential for 80 hectares of residential land and 40 hectares of commercial land.

The site is located less than two kilometres from the emerging regional area of Cardiff-Glendale in the lower Hunter and the site also forms part of Lake Macquarie's North West Catalyst Area, identified in the State Government's Greater Newcastle Metropolitan Plan. The catalyst areas are places of metropolitan significance that warrant a collaborative approach to the delivery of new jobs and homes—something the Labor Party understands the Hunter sorely needs. The areas offer a pipeline of transformation across Greater Newcastle in the short to medium term. Therefore, it is important to consider the kinds of economic and social benefits the remediation of the site can bring to the community. We have already seen the redevelopment of more than 20 hectares of land as light industrial development, and a new Bunnings Warehouse. Bunnings is a good example of how freeing up this land can benefit the Hunter community. It invested more than \$34 million in the development, fit-out and stock of the new store. Most importantly, the store generates 200 jobs in the local community.

The Lake Macquarie City Council is also investing in this area, including by jointly funding a road project with the Federal Government. The final stage of the Munibung Road extension will open up access to the land, and construction is expected to be completed in the next one to two years. The Opposition acknowledges the work of Lake Macquarie City Council, including Mayor Kay Fraser, the General Manager and his team for working with the site's administrator and the State Government to find a long-term solution for the environmental

management of the containment cell. This has been many years coming and is a last-resort option to ensure a long-term solution for environmental management.

The land will be taken under compulsory acquisition under the Land Acquisition (Just Terms Compensation) Act 1991. It is a one-off acquisition, which the Opposition understands sets a precedent. However, the Opposition has been assured by the Government that this is an extraordinary circumstance that will not set off a broader acquisition program. I also acknowledge that it is a one-off that is necessary to ensure the ongoing protection of the environment, as well the economic growth of the Hunter region. The bill will ensure a long-term solution by transferring the land remaining in Pasminco's ownership at the former smelter site to the Hunter and Central Coast Development Corporation. The net proceeds from the sale of the land zoned for urban purposes will be paid into the Containment Cell Perpetual Care Fund that is established by this bill.

That money will be used for the perpetual care of the containment cell site and the surrounding land zoned for environmental conservation at the old smelter site. Last week over 200 local residents met to discuss the area and raise concerns about the health and environmental impacts of the site. This bill does address the concerns within the site; however, the Opposition urges the Minister to consider what further assurances can be given to the surrounding community to ensure their land is also protected and remediated in this process. These residents are living on the doorstep of this site and their concerns must be taken seriously and respectfully in this process. If there is one thing the Labor Party thinks is in the best interest of our communities, it is creating good, stable local jobs. The one-off acquisition of this land is an opportunity to create new jobs for people in the Hunter region. With the closure of mines and manufacturing facilities in local communities across the Hunter, the prospect of new jobs in construction, retail and manufacturing will be of much relief to people in the Lake Macquarie and Hunter regions.

This is just one part of a larger pipeline of work to create new industries, new jobs and new communities in the Hunter and Central Coast regions. The possibility for the rejuvenation of manufacturing and construction in those local communities is a prospect that gives the Opposition much hope. We were delighted to hear from Lake Macquarie City Council that an independent industry demographer has reviewed the plans for the Pasminco site and considers it to be a major driver for regional economic growth. In fact, this could be a once-in-a-generation opportunity for economic growth in the region. This is evident in Lake Macquarie City Council's projections on estimated jobs created in retail, construction and associated industries. It estimates that the acquisition will create 1,650 permanent ongoing jobs, with 1,320 additional multiplier-induced employment opportunities. In addition, approximately 1,125 direct construction jobs will be created, with 2,093 additional multiplier-induced employment opportunities. This bill will deliver \$1.8 billion in economic benefits to the region and the State.

It is no surprise to members that the Opposition is a fervent supporter of manufacturing in this State and we hope that some of the \$1.8 billion will be generated in this sector. The Hunter region has always been proud of its heritage and the Opposition hopes that we can continue to be proud into the future. More manufacturing and skilled jobs in those communities will be a real win for them. This has been a long time coming and it has taken a significant amount of work to get to this point—the work of Lake Macquarie City councillors, the general manager of the council team, local members of Parliament in the Hunter region, residents and the New South Wales Government. Being able to deliver this long-term, one-off solution will deliver significant economic benefits for the community and the State. I commend the bill to the House.

Ms CATE FAEHRMANN (21:50): On behalf of The Greens I speak to the Lake Macquarie Smelter Site (Perpetual Care of Land) Bill 2019. I put on the record our objections to the rushed nature of the bill: It was introduced in the lower House yesterday, yet here we are voting on it tonight. We had a crossbench briefing yesterday and there was no mention of the bill. Therefore consultation with stakeholders has not been what one would expect for legislation before this House. The bill will transfer the land remaining in Pasminco's ownership at the former Lake Macquarie lead and zinc smelter to the Hunter & Central Coast Development Corporation. The sale of rezoned land will be used to set up the Containment Cell Perpetual Care Fund to pay for remediation work at the site. We are told this will secure the long-term environmental management of the contaminated land at the former site, including a 45-metre high containment cell, which contains 1.9 million tonnes of contaminated material over 19 hectares. The lead and zinc smelter at Boolaroo has been closed since 2003, but the toxic pollution caused by the site has impacted the community over many decades. It has caused widespread contamination of water and soil well beyond the boundaries of the smelter site.

In 2007 Pasminco was required to put in place a funding framework for the long-term environmental management of the containment cell and other land that has been zoned for environmental conservation. This included a public positive covenant, which should have addressed the long-term management, operation, maintenance and monitoring of the containment cell, as well as funding to sustain that long-term management. In her second reading speech, the Minister for Water, Property and Housing stated that no covenant has been put in place by Pasminco, despite discussions and negotiations with the external administrators of the company over a

protracted period. Further, we were told that government advisors understand that Pasminco will be placed in liquidation in the near future. In other words—surprise, surprise—another company goes bust, or more likely moves all of its assets offshore so that the long-term management of the contaminated land will fall to the Government, in other words, the taxpayer. In her second reading speech Minister Pavey also suggested that the bill provides for the activation of significant areas of the site for housing and jobs.

However, during the second reading speech we did not hear about the failure by successive governments—both Liberal and Labor—to protect residents from exposure to potentially deadly contamination from the Pasminco Cockle Creek Smelter. University Professor of Environmental Science Mark Patrick Taylor said that the New South Wales Government's handling of the Pasminco pollution legacy was "a failure to regulate and enforce world's best practice". We are told that it was not until 2007 that the then Minister for Planning implemented the lead abatement scheme, which involved the construction of a containment cell for the contaminated materials. For decades before that, black slag from the melting site was widely distributed as film material across the Lake Macquarie City Council area—that is not good. A joint investigation in 2014 by *The Newcastle Herald* and Macquarie University found that, despite the community having been told by the State Government that the area was safe, high levels of lead and heavy metals were present at homes and public spaces. An analysis was undertaken of more than 130 soil and household dust samples taken from homes, sport fields, parks and schools in the immediate surrounding suburbs of Boolaroo, Speers Point, Argenton and Teralba.

The results found the level of lead present in soil was more than 14 times greater than the Australian residential standard of 300 parts per million. The level of arsenic inside homes was almost 300 per cent above the safe level. It is not good enough that it took an investigation by journalists to uncover this. It is another failure of government, and now the Government wants to build houses on this contaminated land. The Greens are in a bind in some ways in terms of supporting this legislation, because the land does need to be managed and not left in the hands of a company that has no regard for the community. Yet once again taxpayers are left footing the bill for the toxic legacy of a corporation whose directors no doubt have made a mighty fine profit over the years. Australia has only four industrial sites where lead from industrial operations has contaminated and continues to contaminate the blood of children: Mount Isa in Queensland, Port Pirie in South Australia, Broken Hill in western New South Wales and the former Pasminco Cockle Creek Smelter at Lake Macquarie.

Lead exposure impairs the mental development of children, causing brain damage, developmental problems and a general decrease in IQ. Unfortunately lead is still an issue in public spaces where short-term intermittent exposure to black slag, soil and dust during sporting activities and play could result in sporadic blood lead fluxes. It has taken too long for the State Government to do the right thing by the community of Lake Macquarie. No doubt the potential for commercial development is also behind the Government's sudden desire to take over this poorly managed site after nearly two decades or more of failure. If that is the case, the Government will be put on notice by the community to apply the precautionary principle to the commercial development of this site. It must ensure that every measure is taken to make sure the residents of Lake Macquarie do not continue to suffer from exposure to lead and heavy metals. The Greens have no option but to support the bill, despite ongoing Government failure to protect the community.

The Hon. TAYLOR MARTIN (21:56): I speak in debate on the Lake Macquarie Smelter Site (Perpetual Care of Land) Bill 2019. For 106 years the Cockle Creek Smelter operated in Lake Macquarie. It provided thousands of jobs and huge economic value to the Lake Macquarie and Hunter regions, and to New South Wales as a whole. During construction of the plant in 1896, when 600 men were working on construction, *The Sydney Morning Herald* said that "notwithstanding its unpretentious appearance, Cockle Creek is now the scene of a large undertaking". The Cockle Creek Smelter was a significant contributor to the World War I and World War II efforts. During this time the plant produced, among many other things, materials to manufacture explosives. By 1974 the smelter had produced more than one million tonnes of zinc and lead. The owner of the smelter, Pasminco, went into administration in 2001 and a year later 320 people were working at the plant—significantly reduced from its peak workforce of 800 in the 1980s. The plant was slated for closure by 2008, although external conditions resulted in this being brought forward and the plant ceased operation in September 2003.

Of course, given the nature of the activities at the smelter, significant remediation of the site was required. In 2003 the Environment Protection Agency [EPA] issued a remediation order to Pasminco to remediate the site. The remediation works, including the construction of a containment cell for excavated contaminated material, were approved in 2007. The containment cell has been completed and some land at the site has been sold and developed already, including an industrial park, a large Bunnings Warehouse and some residential development. The 2007 project approval required Pasminco to make provisions for the long-term environmental management of the containment cell. Pasminco has failed to make those provisions and with no security over future funding, the long-term environmental management of the containment cell is at risk.

In 2018 it was announced that Pasminco's administrators were considering further land sales at the site, including possibly to IKEA, despite the stated intention being that the sale of land would fund long-term environmental management. However, because of the unwillingness of Pasminco to engage in further negotiations with the former Department of Planning and Environment and the EPA over long-term funding for environmental management, the Government amended State Environmental Planning Policy No 55—Remediation of Land. This ensured that no further subdivision of the former smelter site could occur until adequate arrangements for the perpetual care of the cell, its associated infrastructure and the land zoned for environmental conservation were in place, reflecting the conditions of the 2007 approval.

Thus we were at an impasse. Pasminco would not fund long-term environmental management without further land sales and the Government would not put at risk the long-term environmental management of the containment cell and other land by allowing any further land sales without provisions by Pasminco. Here we are in 2019 and the value of the land surrounding the containment cell—likely Pasminco's only remaining asset—is unlikely to exceed the cost into perpetuity of maintaining the containment cell and other associated infrastructure. It is expected that Pasminco will be placed into liquidation in the near future.

The DEPUTY PRESIDENT (The Hon. Shayne Mallard): According to sessional orders, proceedings are interrupted to permit the Minister to move the adjournment motion if desired.

The House continued to sit.

The Hon. TAYLOR MARTIN: In the absence of long-term funding from Pasminco, long-term management will likely fall to the New South Wales Government in any case. Soon after becoming a member of the Legislative Council I was contacted by the general manager at the council, Morven Cameron, who wanted to show me the site and the potential that existed there. I stood on the side of the road as she showed me how this historical Lake Macquarie site could get a new lease of life. The Lake Macquarie Smelter Site (Perpetual Care of Land) Bill 2019 will mean that the potential of this site will once again be a site of significant employment and economic activity in the region. This is a truly excellent outcome for Lake Macquarie itself. The Lake Macquarie Smelter Site (Perpetual Care of Land) Bill 2019 ensures land at the site is properly managed in perpetuity. It protects the environment and the community but also economically benefits Lake Macquarie and the lower Hunter region as a whole. I commend the bill to the House.

The Hon. DON HARWIN (Special Minister of State, Minister for the Public Service and Employee Relations, Aboriginal Affairs, and the Arts, and Vice-President of the Executive Council) (22:01): In reply: I thank the House for recognising the importance of the Lake Macquarie Smelter Site (Perpetual Care of Land) Bill 2019, a bill which presents an excellent opportunity for both environmental and economic outcomes. In fact it was noted in the other place earlier today as well as in contributions made in this House that this is one of those rare occasions when we can come together and achieve both economic and environmental solutions to a problem. I believe that has had a lot to do with the way the issue has been handled.

A key theme throughout members' contributions has been the certainty that the bill is providing. For many years, with the absence of this funding, the community has been left uncertain as to their future, with companies such as Costco, which once expressed interest in this site for its economic potential, walking away. The bill brings certainty and jobs and it delivers housing. The bill supports the environment and regional New South Wales and the communities within it. This certainty will be assured by vesting the site with the Hunter and Central Coast Development Corporation and by providing strict guidance as to how the perpetual fund is to be appropriated. The bill has given the community confidence that the long-term environmental needs will be managed and that the site will be able to be developed to its full potential. I thank the Leader of the Opposition, Ms Cate Faehrmann and the Hon. Taylor Martin for their comments and I commend the bill to the House.

The DEPUTY PRESIDENT (The Hon. Shayne Mallard): The question is that this bill be now read a second time.

Motion agreed to.

Third Reading

The Hon. DON HARWIN: I move:

That this bill be now read a third time.

Motion agreed to.

*Personal Explanation***THE HON. WALT SECORD**

The Hon. WALT SECORD (22:04): By leave: I wish to make a personal explanation. During the debate on the Reproductive Health Care Reform Bill, out of respect for the supporters and the opponents of the bill in the gallery or watching the proceedings I did not respond, confront, retaliate or make any complaints or objections. I completely reject the claims made about me involving the Hon. Bronnie Taylor and the Hon. Natalie Ward. I suggest that the Government shows some leadership and prevent such comments reappearing.

The Hon. Don Harwin: Point of order: Only about two sentences of that personal explanation was in order. Personal explanations are to be to the point and should show how the honourable member was misrepresented. Then the honourable member should sit down. The honourable member just gave a personal explanation that was full of argument, and at the end of it proceeded to heap abuse on the Government. It is typical of the honourable member and he should be called to order.

The DEPUTY PRESIDENT (The Hon. Shayne Mallard): I uphold the point of order. The second half went beyond a personal explanation.

*Adjournment Debate***ADJOURNMENT**

The Hon. DON HARWIN: I move:

That this House do now adjourn.

MENTAL HEALTH SERVICES

The Hon. TARA MORIARTY (22:06): On 3 July I had the honour of being appointed shadow Minister for Mental Health in Jodi McKay's new Labor team. Since taking on the role I have had the opportunity to meet with some fantastic organisations and individuals whose tireless efforts in mental health cannot go unrecognised. I have heard from many people who suffer from various sorts of mental illnesses and I have heard from many families who are desperately trying to care for their loved ones, about their experiences living with illness and their experiences in the mental health system. Every one of these stories drives me to fight for better outcomes and to use my position to be a voice for these people to push the Government and work with the Government to achieve better outcomes.

I am in the process of meeting with stakeholders across the sector, and so far I have met with a number of fantastic organisations who are doing great and important work across the mental health sector. All of them are passionate about providing support, training, advocacy and research for those suffering from illnesses across the mental health spectrum. I want to acknowledge some of them now. I acknowledge the great team at WayAhead, a passionate organisation whose efforts go towards educating people across New South Wales on mental health and wellbeing and linking individuals to the services they need to get the help that they require.

I recently met with staff and toured the facility of the Black Dog Institute in Randwick. The Black Dog Institute is in fact the only independent medical research institute which focuses on mental health across all ages in Australia. They do great research work and take an evidence-based approach to developing and delivering workplace, health professional, school and community education programs. They are also doing great work and research in preventative programs for young people, which should be supported. Their research helps shape the way governments across Australia and the world deal with the issue of mental health.

I want to acknowledge the work of Chronic Illness Alliance, an organisation that works tirelessly to advocate for individuals who too often do not get the acknowledgement or help they need due to stigma or, sadly, just not being believed about their chronic pain issues. I have had good discussions with Youth Action, an incredible group advocating for young people who often feel left out or that they do not have a seat at the decision-making table. I acknowledge Suicide Prevention Australia, a great organisation, which advocates to governments with the aim of decreasing the number of suicides across Australia. We can all agree that our suicide rate is too high, and I support a much-needed whole-of-government approach to assisting people in this area.

I was delighted to meet with the Gidget Foundation, a fantastic group which works closely with mothers to prevent the effects of perinatal depression. I will be very happy to support their work and advocacy into the future. There are many more who I will acknowledge in the future but for the moment I can say that in hearing from these organisations there have been two common themes. The first is real and sincere passion for improving the lives of people suffering from mental illness through real action. The second is that much more needs to be done.

Important work has been done in recent years to open discussion and acknowledgment of the issues around mental health, working to remove stigma and to make mental health an issue that people can talk about and get help for. It is essential that we continue this work. We need to ensure that people feel they can, and should, seek help when needed. We certainly need to do much more to ensure that help is there when it is needed. It has been heartbreaking to hear from people who have not received help when it was needed—sometimes to devastating effect. I have heard of people waiting weeks and months to get the treatment they need due to a system at capacity. It is just not good enough. People rely on the Government and government services to help when they are in trouble. They rely on the Government to provide basic services. We must acknowledge the frame of mind that these individuals may be in, often feeling alone and thinking no-one cares. I know the whole Parliament is united in the saying that everybody is cared about and anyone in a crisis situation deserves our full support. There is help.

To be turned away or even to feel that they are being told they have to wait is just not good enough. We can do better for our most vulnerable fellow community members. I will certainly be active in ensuring that we do, working with the Government to ensure that happens. As I have said, it is an honour to be appointed Labor spokesperson for mental health. I will use this time and this position to be a voice for those who need it in this space, and to advocate for more and effective services.

DEPARTMENT OF EDUCATION SOFTWARE PROGRAMS

The Hon. MARK BANASIAK (22:10): The education department is incompetent. The now-defunct Learning Management and Business Reform that cost \$1 billion is not worth the paper it was printed on. Twelve years ago the New South Wales Government announced an ambitious IT project, which was sold to schools as an all-encompassing software package that would be custom built to create a better information transfer between public schools. We were told that schools would ditch their third-party software licences because this would do everything. The fact is that it was not all encompassing. It was actually a series of independent applications lifted from other industries or education sectors and mashed together in the hope that it would work. Spoiler alert: It does not.

After three rounds of staggered implementation, someone pointed out that this all-encompassing system had no timetabling program, no reporting function and no calendar. A school's operation is based around its timetable; all other systems are dependent on it. This is something a first year graduate could have told the Government and the department. Systems, Applications and Products [SAP] was the first element. SAP is probably the most pimped-out IT system in history. Everyone in Government seems to be using it, yet no-one seems happy about the fact. They then introduced the Student Administration and Learning Management [SALM], which was supposed to manage student administration and enrolments. SALM made it to about 229 pilot schools before it ground to a halt. During its introduction, all records regarding student permission to publish were wiped. We had schools flying blind in terms of protecting students' privacy, and all this data had to be recollected from parents and guardians.

The other issue with SALM was that it was lifted from the United Kingdom system, where enrolments happen at a district office and the office determines which school a child goes to. That is the opposite of what occurs in New South Wales schools, so once again we had compatibility issues. After this came EBS4, which was used to manage student behaviour and wellbeing records. Its aim was to improve the transfer of students behavioural and wellbeing issues between schools. The reality was that it took deputy principals, like me, and principals up to 40 minutes to record and process a suspension due to constant system errors and restarts. If that was not enough, it would then print blank letters—an issue that I escalated and am still waiting to be resolved, 18 months down the track.

This application has proven so unreliable that most schools have not adopted it for teachers and only reserve it for executive staff. Even then, executive staff do not trust it fully so they double handle the data and record it in a third-party system. They are doing this instead of engaging in educational leadership, which is meant to be their primary role. The first version of the finance and budgeting tool was next. Every morning during the implementation it was the principal and the finance team's favourite game to guess what amount of money would have disappeared or reappeared in the total budget. This made preparing a budget and allocating millions of dollars to projects a very exciting prospect. It really got your heart racing—it was just like being a participant on the television show *The Price is Right*.

After this came the HR application, which had no provisions for casual employment. So, once again, we were working on two systems. Finally, the second version of the finance and budgeting tool was implemented. Although it seemed to be working, it was full of cumbersome and convoluted processes. Despite claims by the department that the implementation is complete we are still waiting for timetable and reporting applications that actually work. Following the election the Government decided to do what it does best: It reshuffled the deck chairs

of departments into clusters. We were told that we were moving away from this "centrally provided product" to one that provided functionality and usability.

The Learning Management and Business Reform is a cluster, but cluster "F" of a different kind. It has placed unnecessary stress on administration staff. They were paid a pittance for their work before this; now a senior administration manager is performing duties equivalent to the highest paid public service grades, but paid the equivalent of one of the lowest. Is it any wonder schools are struggling to find people who actually want this job? It has also impacted on local businesses. Because of the new process a business may have to wait up to 45 days to receive payment. What small business—particularly sole traders—could actually cope with such poor cash flow? What happens is that those sole traders withdraw from the government procurement process, and the big end of town comes in and price gouges local schools.

Principals and deputy principals have been so bogged down with administrative duties. It has taken away the quality teachers from doing what they do best: teaching our kids. It has taken 12 years and close to a billion dollars to implement a system that is not fit for purpose and is already out of date. I cannot wait to see how much time and money the Government blows on the inevitable upgrade. I leave members with a reflective question: What could that billion dollars have been spent on for regional and rural schools and local kids?

BOREE CREEK PUBLIC SCHOOL

The Hon. WES FANG (22:15): Since 1912 a small yet passionate school in the small village of Boree Creek, around 84 kilometres south-west of Wagga Wagga, has been educating young minds. Boree Creek Public School is an isolated rural school with a student population of only 27. However, much like The Nationals, the proud multigenerational farming community believes that no matter where they go to school each child should be given every opportunity to reach their full potential. This mantra is encapsulated in the school's motto, "Each to their own ability". The school, students, parents and staff work tirelessly on behalf of the community to fulfil this aim.

I met the principal of Boree Creek Public School, Liss Routley, at the opening of the Tim Fischer Gallery at Lockhart's Greens Gunyah Museum. She told me that her school had been fighting since 2010 to secure the funds to construct a covered outdoor learning area [COLA] for its students. The Building the Education Revolution funding had fallen short of the mark for the small rural school so it instead had to settle for covered walkways. Since then the P&C has fundraised and rallied the community behind the project. Along with the school funding it was able to contribute \$64,000 towards the construction. Unfortunately, this still left the school \$12,500 away from its target.

The need for a COLA was clear to me. Extreme weather days—both in summer and winter—meant either inadequate shade to shield students from harsh sun or a lack of dry space for play and outdoor learning activities on wet days. During my time in this place I have visited a number of schools for presentation days and awards. Even before I entered Parliament, as a dad I have seen the benefits of COLAs for schools. Students can enjoy physical activity in all weather conditions and have access to outdoor educational opportunities to which all kids should be entitled. More so, Boree Creek Public School has seen a rapid increase in students over the past five years with numbers near quadrupling. For a small school this is a huge jump.

Liss Routley also told me about the wider community's need for a COLA, especially when times are tough during drought. Boree Creek currently does not have a large undercover area other than the town hall, which needs to be booked and hired at a cost. Liss and the school have the vision to establish an outdoor area as a wellness space to be shared by all. Whether it be access for community groups, visiting sporting coaches, yoga, or just a place where people can meet for a chat—I understood just how important it was to get this project over the line. Our incredibly hardworking and dedicated education Minister, the Hon. Sarah Mitchell, also saw how vital a COLA was for the school.

Last week I was thrilled to accompany Boree Creek's most famous son, Tim Fischer, to present a cheque to Liss, her staff and students for the remaining funds needed to start construction of the COLA. Tim and I were given a tour of the site where the COLA will be constructed and also had the chance to listen in on the school music ensemble as they performed a special piece for our visit. I was particularly touched to be presented with a certificate of thanks signed by all the teachers and students which read, "Thank you for making our COLA a reality".

It was a truly remarkable day and I know Tim enjoyed it just as much as I did. I congratulate the school and the community on achieving this result and commend them for their outstanding work. I am delighted the Government is supporting their efforts. I acknowledge Liss Routley for her role in this project. When Liss first approached me she apologised for coming across as too bold but hoped that fortune would favour the brave. I am pleased to say that boldness has always been a trait I admire and it is my absolute delight that her advocacy on

behalf of her school has been rewarded. We all want students to have the resources they need to succeed and thrive in the twenty-first century and the highlight of my job is being able to directly help rural and regional communities. I thank the school and staff for making us feel welcome during our visit and I look forward to joining them again at the grand opening of the new COLA for Boree Creek. I speak on behalf of all members when I offer my best wishes to Tim Fischer during this tough time.

UNICEF DROUGHT REPORT

The Hon. MICK VEITCH (22:20): In February this year UNICEF Australia released a report entitled *In their own words: the hidden impact of prolonged drought on children and young people*. The findings were humbling to say the least. More than 97 per cent of New South Wales is in drought or intense drought and conditions show no sign of abating. Unfortunately, all indications suggest these difficult conditions will continue into the foreseeable future. The horrific and widespread effects of this drought are often covered in the media—and even mentioned in this Parliament—but it is the impact of drought on children and young people living in rural New South Wales to which I draw to the attention of the House.

This is one voice which needs to be listened to and heard. UNICEF visited Gunnedah, Narrabri, Walgett and Tamworth to conduct consultations with children from rural and farming families in primary school and high school. The children either volunteered to participate or were selected by their teachers because of their unique experience. Teachers and other community members were also interviewed. The report is aptly titled *In their own words* because it mostly contains direct quotes from the children which have been anonymised.

The underlying theme of many of the quotes is stress. The children are struggling under significant pressures and they are not receiving the support they need to alleviate some of the worst effects of the drought. Stress comes from many areas and the workload for children on and off farms has increased substantially. There is almost no time for play, sport or other recreational activities. The participants described their days as long and stressful. A girl from year 10 said:

The workload is full-on because you have to feed stock but you also have to do whatever else you normally used to do. So not only do you have to go into the paddock to fix that fence, you've got to go and feed the stock twice a day ...

Many of the children have responsibilities that might be considered unreasonable for someone their age and some children feel like they have had to grow up prematurely. Older children in high school also reported having to undertake dangerous work such as climbing trees with a chainsaw to cut down branches for feed because there was nothing else to use and no-one else to do the work. Many high school students spoke about witnessing animals suffering and having to shoot those animals. Some of the participants were visibly upset when retelling how they had to be involved in this. One boy from year 10 said:

And, like, before the start of the year I'd probably never shot a lamb in my life and I've probably done about 50 or so this year. This is probably one of the [biggest] things I've noticed. Like, I'd never had to do that before but it's normal now... [initially] I didn't want to do it. Like, I cried sort of thing. Like, I didn't want to do it. But now it's just easy. You just do it.

Children were also reluctant to discuss their own deprivation and would generally only discuss hardship or distress in the context of their family's situation. There was a widespread understanding that you do not ask for anything extra so as not to put any more pressure on your family. A girl in year 11 said:

It's that unspoken thing where you just ask for less. You just know. You don't have to be told.

Children spoke about not wanting to burden their families by talking about their feelings and struggles, and teachers spoke of the ongoing stigma associated with recognising and seeking specialised help. Sorrow was also frequently expressed at not seeing family members as much. In some cases this was weeks because work situations had changed and their parents either had to travel for work or worked such long days that the children did not get to see them. A local sports coordinator who was interviewed reported a 50 per cent drop in local sports participation.

It is important for any kid to be involved in sport but especially a kid who is under stress. In areas where time pressures were not as severe, sports participation had also dropped due to a generalised feeling that they did not deserve to participate in normal activities. The physical health impacts of the drought were not under consideration in this report, but it was suggested that this is an area where more research is needed. UNICEF also conducted some exercises relating to resilience. Children were asked to rate on a scale of one to five—one not coping and five coping fine—how they were coping in different situations. The average for high school students was three and primary school students 2.8. They were then asked how they would cope if nothing had changed in a year from now and the average dropped dramatically.

While the findings of the report are very sad, the report also highlights the courage of these children and how they want to be involved in any future decisions about drought support. When they were consulted, informed and involved in decision-making they said they felt better able to handle the situation. The report concludes with

nine recommendations to Federal, State and Territory governments about strengthening the coping skills and resilience of children and young people, supporting parents and families, and about improving the focus on children and youth in the design and delivery of government drought responses and services. I suggest every member in the House take the time to read this important UNICEF report.

The DEPUTY PRESIDENT (The Hon. Shayne Mallard): The question is that this House do now adjourn.

Motion agreed to.

The House adjourned at 22:25 until Thursday 22 August 2019 at 10:00