



# I'm with both

## **ABORTION: Both a Legal Issue *and* a Health Issue**

**Health** of the mother. **Health** of the unborn child.  
**Legal** safety of the mother. **Legal** status of the unborn child.

**The Labour-led Government is reviewing the abortion laws. Prime Minister Jacinda Ardern says that abortion should not be covered in the Crimes Act and that she wants, “women who want access to be able to have it as a right.”**

But recent polling of New Zealanders found there was strong support for legal safeguards and for *greater* time limits on the provision of abortion, including from those who generally *support* abortion. The vast majority of the population accept the current legal framework. They actually want a *greater* presence of safeguards around issues such as coercion, standards for providers, and informed consent.

These results confirm that the Labour-led Government has no mandate at all to liberalise the abortion laws.

However, under instruction from the Government, the Law Commission is now inviting public input on “*How New Zealand’s abortion laws could be made consistent with treating abortion as a health issue.*”

**To help you make a submission to the Law Commission, we have prepared the following:**

- **Briefing Paper: “I’M WITH BOTH”** – This document contains the key reasons why the abortion laws should reflect both a legal focus and a health focus, in order to allow for both parties involved in an abortion. The information in this document can help form the basis of your own submission. It will give you a head start, and perhaps clarify any questions you may have.
- **How to make a submission** – Don’t know where to start? We’ve listed the key information you need to include, the ways you can send your submission in, and other relevant information. All you need to do is then tell the Law Commission your view. Simple!
- **The final date for submissions is 5pm 18 MAY 2018**. Why not do yours this week!

For further information, go to  
[ChooseLife.org.nz/Review](https://ChooseLife.org.nz/Review)

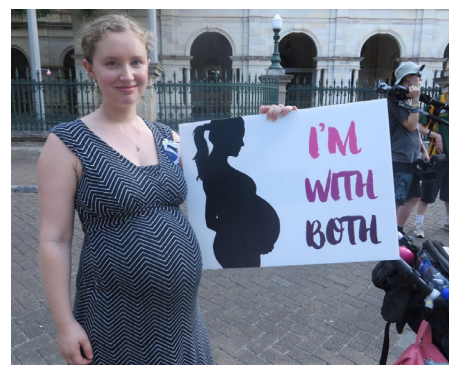


# "I'm with both"

## BRIEFING PAPER

**New Zealanders don't want an extreme abortion law - they want a law that works best for women's health and well-being, and which considers *all* human beings involved in a pregnancy.**

- ☑ A law that protects women from unlicensed premises and unregistered abortionists
- ☑ A law that promotes and facilitates informed consent
- ☑ A law that requires honest information about abortion-related risks be provided to pregnant women
- ☑ A law that provides women with independent pregnancy counselling
- ☑ A law that protects young pregnant girls by requiring parental involvement
- ☑ A law that limits the timeframe for having an abortion, except in exceptional circumstances
- ☑ A law that prevents abortions on the basis of gender
- ☑ A law that doesn't discriminate against disabled children e.g. those with Down syndrome

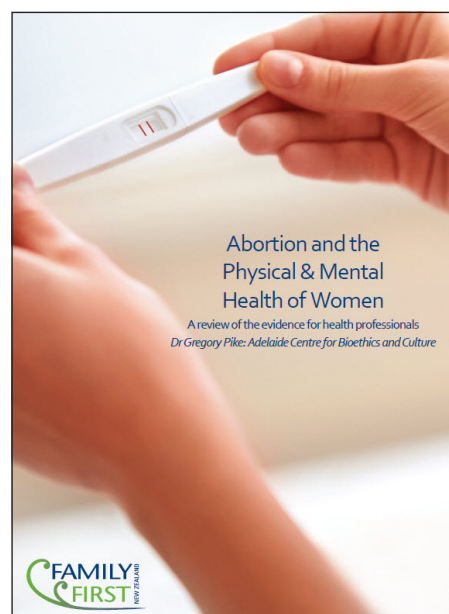


## ***Women have a right to be fully informed***

A just-published research review paper "*Abortion and the Physical and Mental Health of Women - A review of the evidence for health professionals*" reviews the international evidence to date about the relationship between abortion and the physical and mental health of women. It shows that abortion is associated with a wide range of adverse physical and psychological outcomes, and it is essential that women are made fully aware of all the risks. It concludes that while studies on abortion have sometimes yielded inconsistent results, there is a clear correlation between abortion and adverse psychological outcomes.

Other conclusions based on the research analysis include:

- Intimate partner violence (IPV) is strongly correlated with abortion, with some research showing a 6-fold increase of IPV in women undergoing abortion compared to those in antenatal care. Abortion has also been linked to international trafficking and slavery of women. Presentation for abortion may be an opportunity to address the risk of coercion and intimate partner violence.
- Ambivalence to abortion is common and is linked to some adverse post-abortion outcomes.
- The prevalence of foetal abnormalities has increased in many countries. Women commonly report a lack of information provided to them about the child's condition and the options open to them (an example was covered recently in the NZ media).
- The physical effects of abortion include an increased risk of premature delivery in subsequent pregnancies. This appears to be related to surgical abortion but not medical abortion.
- Significant inconsistencies exist in research about a possible link between abortion and the risk of breast cancer, yet there is evidence showing that carrying a pregnancy to term is protective against breast cancer.



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In one significant finding, the research suggests that medical abortions (a medical abortion uses pills rather than surgery) outstrip surgical ones by a factor of at least four when it comes to the overall incidence of complications. This is concerning given that the Abortion Supervisory Committee has recently told politicians that it would be safer for women having a medical abortion to take the medicine at home. In fact, the Scottish government guidance says a woman must have another adult with her and the pill must only be taken up to ten weeks gestation, indicating that it's not a straightforward procedure.

The research paper includes NZ-based studies including the University of Otago study in 2008 which found that women who had an abortion faced a 30% increase in the risk of developing common mental health problems such as depression and anxiety. And a research paper entitled *"Does abortion reduce the mental health risks of unwanted or unintended pregnancy? A re-appraisal of the evidence"* by Professor David Fergusson, John Horwood, and Joseph Boden, published in the 2013 edition of the Australian and New Zealand Journal of Psychiatry, concluded that abortion was not associated with a *reduction* in rates of mental health problems, but was associated with *increases* in risks of anxiety, alcohol and drug misuse, and suicidal behavior. They state: *"There is no available evidence to suggest that abortion has therapeutic effects in reducing the mental health risks of unwanted or unintended pregnancy. There is suggestive evidence that abortion may be associated with small to moderate increases in risks of some mental health problems."*

**Women deserve to know this information so they can make a truly informed decision, as they should with any health decision.**

## ***Responding to arguments for changing the law***

- ***'Changing the law is simply ratifying what's already happening'***

What is being proposed is not simply a case of ratifying current practice. Instead it would attempt to introduce a new and extreme abortion law in NZ (as suggested by ALRANZ) - a law that could result in the removal of safeguards for women, the introduction of late-term abortion, the loss of freedom of conscience for healthcare providers, and gender-selective abortions, among other things.

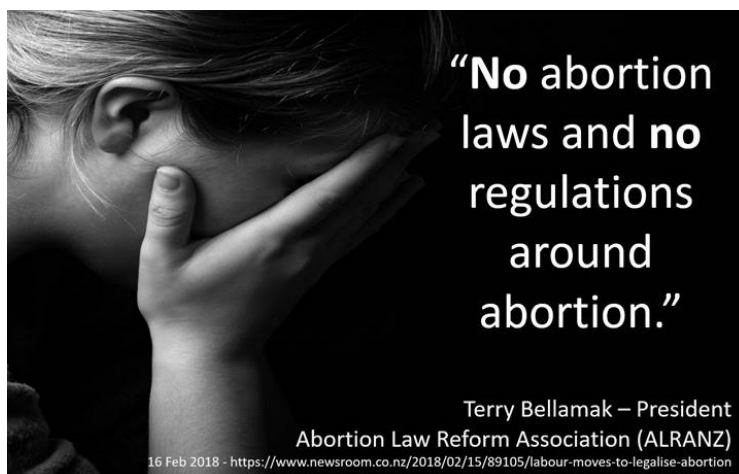
- ***'Women who have abortions shouldn't be criminals'***

This claim is simply false scaremongering aimed at deceiving people into supporting the introduction of an extreme abortion law in New Zealand. Any New Zealand woman who has an abortion under the current legislative guidelines and protections is not committing an illegal act and is therefore not considered a criminal by our current laws. **Women are not made criminals by the current legislative guidelines and protections.** The existing safeguards are there to protect women from unlicensed premises and coercion, and it is these safeguards most New Zealanders support.

- ***'There is no point in keeping abortion in the Crimes Act, it's a health issue'***

The current law recognises the scientific fact that there are at least two human beings involved in every pregnancy, and that abortion results in the loss of one of those lives. The current legal framework attempts to strike a balance between the wellbeing of the mother, and the fact that the deliberate taking of any innocent human life is a crime that must be safeguarded against.

And yes, abortion is *also* a health issue - it's a surgical procedure that has some serious risk factors associated with it. A sound law needs to reflect that reality, and not leave women



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exposed to harms, such as those recently witnessed in the criminal trial of US abortionist Kermit Gosnell who was able to operate a dangerous but legal abortion facility which resulted in female client death and other atrocities thanks to extreme abortion laws. **Criminal consequences for abortion providers who break the law should remain, in order to better protect all the parties involved.**

- ***‘It’s a matter between a woman and her doctor’***

There are at least two human beings involved in every pregnancy, and that’s why we place such a strong emphasis on campaigns which discourage smoking or drinking during pregnancy in this country. It’s also why, if it is needed, doctors conduct life-saving surgery while a child is in utero.

Any responsible doctor knows that they are dealing with at least two patients that need care every time a pregnant woman comes under their supervision, and any responsible law should also do the same.

- ***‘Women currently have to jump through hoops to get an abortion’***

The system currently puts basic legal safeguards in place. Even the Abortion Supervisory Committee (ASC), in its latest report to Parliament, notes that, *“The ASC recognises the merit in having a robust pathway in place, which requires certifying consultants to assess and certify patients and to ensure counselling is offered.”* If there truly are issues with these current safeguards, then addressing those areas, and not introducing an extreme abortion law, is the correct way to fix any deficiencies.

- ***‘Women must have control over their own bodies’***

New Zealand women need to be informed of the effects that abortion can have on their bodies, and the current law needs to be strengthened to ensure that informed consent from an independent provider is a legal requirement.

There are at least two *bodies* in every pregnancy: the body of the mother and the body of the unborn human being. If we truly believe that women must have control over their bodies, then surely *unborn* women deserve the right to their bodies too?

- ***‘Women deserve the right to choose’***

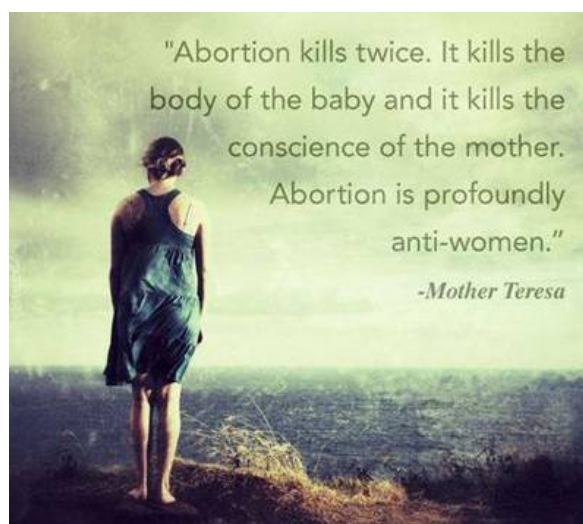
Yes, *all* women deserve the right to choose, *including* the unborn little girl’s right to grow up and make choices.

Women should have the right to choose – their maternity care provider, their midwife, their doctor, the type of birth they want, etc – but abortion is something completely different altogether. Abortion is the choice to end the life of another human being.

The question of choice is far more complex than the way it is often portrayed in the abortion debate. The law, in general, doesn’t recognise personal choice as an absolute without limits; it always restricts choice when it conflicts with the wellbeing of others. In the case of abortion, those ‘others’ are the unborn human beings who will be robbed of ALL their choices if they are aborted.

*“A woman who seeks or receives an unlawful abortion is not liable under section 183 of the Crimes Act 1961.”*

*NZ Law Commission website –  
Abortion Law Reform (April 2018)*



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[ChooseLife.org.nz/Review](https://ChooseLife.org.nz/Review)

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A real choice is one that is fully informed; about all the risks, about all the options, about foetal development, and about what the abortion procedure actually entails.

- ***‘Private decisions like abortion shouldn’t be the government’s business’***

All of us have a stake in what happens to the most vulnerable members of our community and to their mothers, so we should all care about what shape our laws take when it comes to abortion.

- ***‘Every child needs to be loved and wanted’***

Children need to be accepted and loved because they are valuable, regardless of whether or not they were ‘planned’. A so-called ‘wanted child’ is no more special or valuable than a child that has parents who are too afraid or unsure to ‘want’ that child right now. The ultimate act of love is to give life to a child. There is also no shortage of loving Kiwi couples who would jump at the chance to adopt and love any so-called ‘unwanted children’ in this country.

- ***‘What about cases of pregnancy resulting from rape or incest, or where there are foetal abnormalities?’***

Extreme violence has been committed against any woman pregnant from rape or incest. They deserve to be treated with the deepest compassion and given enormous support and care.

However, the circumstances of the baby’s conception change nothing about the baby herself, or the violent nature of abortion. So often when this issue is raised, people refer to the unborn child as if she is an extension of the rapist, or his vile act, completely forgetting that in actual fact the child is her own unique person quite independently of the tragic circumstances of her conception. The child is just as much an extension of the mother. Adding abortion after rape simply adds violence to violence, creating a second victim of the rapist – the unborn child.

Many women who have kept a child conceived in rape tell a common story of finding a silver lining of love in an otherwise very dark situation. Women who keep their babies also avoid the serious psychological risks associated with abortion, which, according to some experts, could be amplified even further when added to the already horrific trauma of sexual assault.

- ***‘What about cases of foetal abnormalities?’***

Aborting a child because of possible abnormality is nothing less than blatant discrimination against people with disabilities. When reflecting on this argument we need to tear aside the veil of prejudice that drives the notion that it is somehow kinder to kill a person with a disability or a disease before she is born than to let her ‘live in that condition.’ Shockingly, the types of disabilities included by pro-abortionists in the list of purportedly ‘good reasons’ for an abortion range from the truly severe to relatively minor; the latter part of the list grows lengthier every year. Abortion is becoming a search-and-destroy method for eliminating less-than-perfect people.

In jurisdictions that have decriminalised abortion – China, Vietnam, Canada and two states in Australia – gestational time limits for disability-selective abortions have been removed and abortion for babies with disabilities is available right up to birth. The report on Iceland and their near 100% abortion rate from Down syndrome has led to global controversy regarding equality and non-discrimination for people with disabilities.

*In my 36 years in  
pediatric surgery, I’ve  
never known of one  
instance where the  
child had to aborted to  
save the mother’s life*

*– C. Everett Koop*

*U.S. SURGEON GENERAL, 1982-89*

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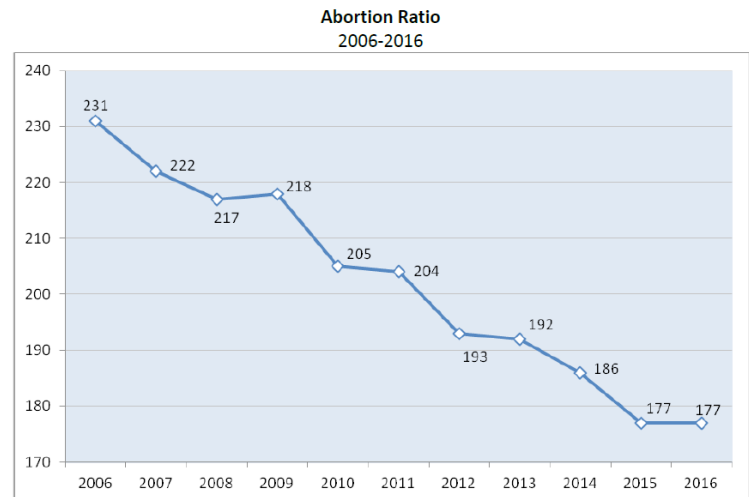
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## Abortion numbers are dropping – that's a good thing!

Everyone is welcoming the drop in the number of abortions – the lowest rate in over 25 years.

The rate will continue to drop as knowledge of the prenatal development of the unborn child increases, and as an increasingly pro-life younger generation become parents themselves.

The 'bunch of cells' argument which has driven the right-to-abortion argument is simply flat-earth science. 3-D ultrasounds and smartphone apps allowing parents to listen to the heartbeat of their unborn child and keep track of their baby's progress in the womb, including heartbeats per minute, the number of times the baby kicks and the weight of the growing foetus, have contributed to an increasing awareness of the life of the child in the womb.



The abortion ratio is the number of abortions per 1,000 known pregnancies. Known pregnancies include live births, stillbirths and induced abortions combined, but does not include miscarriages.

Source: Report of the Abortion Supervisory Committee, 2017

## What do New Zealanders really think?

According to an independent poll of 1013 New Zealanders in December 2017, just 9% support the current legal limit for an abortion of up to 20 weeks. Only 4% believe it should be *later* than 20 weeks (including up to birth), as proposed by pro-abortion group ALRANZ. 50% think the time limit should be *shorter* than the current 20 weeks, and a further 36% are unsure. Of those who do pick a time limit, 15 weeks is the median choice.

Significantly, 56% of women think the time limit should be *less* than the current 20 weeks. And incredibly, 53% of those who generally *support* abortion think the time limit should be less than the current 20 weeks - 29% of abortion supporters say *10 weeks or less*.

**See the next page for the full results** – including polling on informed consent, parental notification for teenage abortions, sex-selective abortions, safeguards against abortion, and the risks of mental harm from an abortion.



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[ChooseLife.org.nz/Review](http://ChooseLife.org.nz/Review)

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# ABORTION

## What does New Zealand *really* think?

Last month, Curia Market Research polled 1,013 New Zealanders on the issue of abortion. In the most significant finding, the polling showed that only 9% believe it should be the current legal limit of 20 weeks, and just 4% believe it should be later than 20 weeks (including up to birth)

as proposed by pro-abortion group ALRANZ. The vast majority of the population also shows strong support for the current legal framework. They want the presence of safeguards around issues such as coercion, standards for providers, and informed consent.

**90%** oppose sex-selective abortions

**90% oppose sex-selective abortions** (only 4% support). Women are 94% opposed.

**56%** of women want shorter time limits under the Crimes Act

**Only 9% believe it should be the current legal limit of 20 weeks, and just 4% believe it should be later than 20 weeks (including up to birth).** Significantly, **56% of women think the time limit should be shorter** than the current 20 weeks. And incredibly, a majority (53%) of those who generally *support* abortion think the time limit should be shorter than the current 20 weeks - 29% of that group think 10 weeks or less. (36% of respondents said they were unsure or refused to say)

**86%** support the current legal standards for providers & premises

**86% support the current legal requirements for providers and premises having to be licensed** (only 8% disagree). Of those who generally *support* abortion, 92% support these legal requirements. 95% of women agree (78% of men).

**65%** want less abortions

**65% agree that society should work together to reduce the number of abortions** (only 17% disagree). Of those who generally *support* abortion, 63% agree with reducing the number of abortions. 74% of women agree (56% of men).

**76%** want safeguards against coercion

**76% support a proposal that doctors be required to verify a woman seeking an abortion is not under pressure from a 3rd party** (8% opposed). Women are 83% in support (men 69%). Of those who generally *support* abortion, 84% support this legal requirement.

**64%** want women to be fully informed\*

In an earlier poll, **64% said that women considering an abortion have the right to be fully informed of the medical risks of abortion – and the alternatives.**

(\*Polling by Curia Market Research in 2011)

**79%** want parents to be notified\*

In an earlier poll, **79% think parents should be notified if their daughter aged under 16 is seeking an abortion.** And a poll of 600 teenagers (15-21) nationwide found **59% of teenagers thought the parents should be told.** 34% were opposed.

(\*Polling by Curia Market Research in 2010/2011)

**46%** believe abortions risk harm to mental health\*

In an earlier poll, **46% agree with the statement "Women who have abortions risk harming their mental health as a result of the abortion"** (21% are unsure, and 33% disagree). Significantly, strongest agreement with the statement came from the younger 18-40 age bracket (50%).

(\*Polling by Curia Market Research in 2016)

**52%** support abortion **48%** oppose / unsure

**52% say they generally support abortion and 29% oppose (19% unsure or refused to say).** However, opposition to abortion exceeds support in areas of high deprivation (39% to 35%).

**49%** support lifestyle abortions

**49% support being able to have an abortion just because a woman doesn't want to be a mother** (38% oppose, 13% unsure). However, respondents in high areas of deprivation are evenly split on the issue.

The full polling results can be viewed at [familyfirst.org.nz/abortion](http://familyfirst.org.nz/abortion)

## MAKE A SUBMISSION TO THE LAW COMMISSION

Details of the review: [abortionlaw.lawcom.govt.nz](http://abortionlaw.lawcom.govt.nz)

### When preparing your submission, there are some things to remember

- Highlight what you are FOR – **the abortion law should be both a legal issue and a health issue in order to protect all parties involved.**
- **At all times, be positive, respectful and constructive.** Avoid personal attacks, negative labels or angry words.
- If appropriate, **include a personal story** of how abortion has affected you, your family or someone you know. Perhaps you know an example of a woman who was pressured to have an abortion, or who was not told of all the options available when she got pregnant.
- When you send your submission in, please consider also **emailing or posting a copy to your local MP.** You can find out who your local MP is (and all their contact details) at our website [www.haveyoursay.nz](http://www.haveyoursay.nz)
- **Share your submission** with friends and family. It may inspire them to make a submission also
- **Privacy** – You can tell the Law Commission your views without providing your name or contact details, if the information you are providing is sensitive to you.



Please note: **SUBMISSIONS ARE DUE BY 5pm 18 MAY 2018** (They will not accept late submissions).

However, we would encourage you to make your submission as soon as possible. Please also note that submissions are not made public.

### Suggested layout (for email or post)

#### POST

Abortion Law Review  
New Zealand Law Commission  
PO Box 2590  
Wellington 6140

#### ONLINE

[abortionlaw.lawcom.govt.nz/views/](http://abortionlaw.lawcom.govt.nz/views/)

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#### For further info

Phone: 04 473 3453

New Zealand Law Commission  
PO Box 2590  
Wellington 6140

Date

SUBMISSION – Law Commission Abortion Law Review

Name of Individual / Family / Organisation:

Address:

Phone:

Signature:

Reasons:

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