



Steve Fielding **Family First** Senator for Victoria



## **MEDIA RELEASE**

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### **ABORTION COUNSELLING BY GPs**

Women considering an abortion should have independent counselling from a GP before making their decision.

It is vital that women have all the facts so they can make an informed decision. They need to be fully informed about the medical and psychological risks associated with a termination.

As part of the counselling, women should receive details of agencies that offer practical support – such as financial assistance, legal advice and parenting classes - to those who continue with their pregnancy. Women could contact those agencies if they wish.

The Federal Government should fund this independent counselling by GPs by allowing women to recover the cost from a new Medicare item.

The GP who provides the counselling must not perform abortions to avoid any conflict of interest.

This proposal responds to community concerns about the number of abortions in Australia.

It is tragic that, in a country of only 20 million people, about 90,000 abortions are performed each year.

Research by the Southern Cross Bioethics Institute reveals that at least 64 per cent of Australians think the abortion rate is too high and 87 per cent believe it should be reduced.

But respondents did not want restricted access to abortion.

The survey of 1200 people showed there was almost unanimous support for counselling. In fact, 72 per cent of people who strongly supported abortion said counselling should be mandatory.

A total of 64 per cent suggested that GPs and health professionals not involved in abortion were the best people to provide counselling.

It is a concern that 58 per cent of Australians said they would not know where to refer women for support during or after their pregnancy.

The counselling should be followed by a 72-hour cooling off period before women decide whether or not to have an abortion.

Women need time, free from daily pressures or perhaps the pressures of a partner or family, to absorb the information they have received and consider the many issues involved in what everyone agrees is a very difficult decision.

If women decide to have an abortion, there is nothing lost from counselling and a cooling off period. It is sensible and wise.

It is essential that all women – whether they decide to have an abortion or not - are offered practical support.

There is a strong view in the community that if women were fully informed about the health and psychological risks of having an abortion – and knew practical help was available - some would decide not to have an abortion. I share that view.

As a community we have an obligation to offer women alternatives to abortion. For example, governments should fund agencies that provide practical support to pregnant women.

I would be extremely concerned if any woman, in difficult circumstances, felt she had no choice but to have an abortion she did not want, because our community was not providing adequate support for her to continue with her pregnancy.

The Caroline Chisholm Society in Melbourne has been providing practical support to pregnant women for more than 35 years, but receives no Federal Government money for this important work. In fact, its service in Shepparton in country Victoria will close next month due to a lack of funds.

The Society's services include:

- Financial assistance;
- Food vouchers;
- Baby clothes and furniture;
- Maternity wear;
- Legal advice;
- Relationship skills and counselling;
- Parenting classes;
- Hospital visits;
- Emotional support both before and after the birth of their child.

Supporting organisations such as the Caroline Chisholm Society is one way of fulfilling our obligation as a society to women faced with the difficult decision of whether or not to have an abortion.

**For media enquiries phone Chief of Staff Felicity Dargan on 0409 550 446**