

Abortion Law Reform:

smashing the “final frontier” of legal dehumanisation of women

Access to abortion is a human right - and we need to make sure our politicians know it: that was the urgent message of the Auckland Women’s Centre’s successful recent public forum “Abortion, a Reproductive Right”. As student activist **Ella Shepherd** put it: “trust women, support women.”



Terry, Noelle, Mira (AWC Chairperson), Lizzie, Golriz, and Ella. Photo credit: Rochelle Carr

Ably chaired by broadcaster **Noelle McCarthy**, the illuminating discussion was timely and useful, given the upcoming parliamentary conscience vote on the issue. Media producer and musician **Lizzy Marvelly** acknowledged the many “change-makers” in the room, and a wide range of expertise was offered from the floor as well as from the four knowledgeable panellists.

Greens MP and human rights lawyer **Golriz Ghahraman** emphasised the inaccessibility of abortion, particularly for rural and poor women, as termination involves multiple healthcare visits, sometimes hundreds of kilometres away. “For some women, you may as well still have to go to Australia. For some women, there is no access,” she said.

Golriz called the current abortion law in the Crimes Act a “final frontier” as it is “one of the last pieces of law that places us below men” and joked that “if men could get pregnant we could get abortions at an ATM machine.”

As ALRANZ Abortion Rights Aotearoa President **Terry Bellamak** explained, unlike women seeking abortion, men don’t need to get multiple consultant approvals to access health care.

“The certifying consultant doesn’t know you from a bar of soap, but this person apparently knows better than you that it is a good time for you to be a parent.”

Ella agreed: “Women are human beings, and they should have control over their bodies. We should trust women to make the right decisions for themselves and their families.”

In contrast, **Ella revealed that when she went undercover to an anti-abortion youth training day**, “It was quite clear that the goal was to dehumanise women.

Forum advice on lobbying

As this is a contested issue, every letter and speech makes a difference. It is vital that we ensure politicians are aware of the experiences of women who find it nearly impossible to access abortion, and who may also find it difficult to access the political process.

What we should say

- Copy-and-paste doesn’t work; communicate from the heart. Personal stories are useful (but note that select committee submissions become public).
- The government is considering three options; make it clear you support **Model A**: that is, women and pregnant people should be able to make their own decisions without being compelled to get a doctor’s permission.

Reasons for Model A

- * **Human rights:** Taking abortion out of the Crimes Act is not enough; the law should treat all genders equally. Model A is the only option that gives women equality with men in choosing healthcare.
- * **For accessibility:** Abortion and other forms of birth control are difficult to access, particularly for people who live rurally, who are poor, who have to arrange childcare for medical appointments, who have low levels of healthcare education, whose jobs don’t allow them to easily take time off; who are victims of domestic violence, who are migrants, and/or who live within communities who do not support abortion. Model A is the most accessible option.
- * **Trauma reduction:** Nobody wants a late-term abortion; they happen because of catastrophes in wanted pregnancies. Being compelled to take a statutory test (as per Options B and C) would prolong and increase trauma for women who are grieving in tragic circumstances.
- * **The experts agree:** ALRANZ and almost all the medical professionals in this field – and all our panellists – prefer Option A.

Pregnant women were referred to as the ‘environment’ or ‘host body’ for the foetus.” She mentioned that anti-abortionists prey on the vulnerable, lobbying for parental-notification laws for terminations of teenage pregnancies and using crisis pregnancy counselling to “run out the clock”.

“I don’t believe you can be a feminist and anti-choice,” she said. “I don’t believe you can be for gender equality, and yet support a movement predicated on the control and mistrust of women.”

Lizzie also spoke about her dealings with anti-abortionists, including being subject to a (dismissed) press council complaint that stated that “Pregnancy can be prevented simply by avoiding sexual intercourse.” She advised that the anti-choice lobby was likely to run “quite a gross campaign” against law reform, and “We will need our sense of humour, our sisterhoods and our allies throughout the process of changing our laws”

In answer to a question from the floor, Terry said that she saw the supposed conflict between pro-choice and disability rights as a “manufactured conflict”, pointing out that disabled people also have



difficulties accessing abortion, and that some people may choose not to go forward with a pregnancy because they don’t have the resources to care for a disabled child; she said the fact that the financial burden isn’t carried by society collectively is an indictment of all of us.

All attendees adhered to the forum guidelines of not discussing the morality of abortion, and the forum was a safe space for women and men supporting abortion rights to discuss how to campaign for the best possible reform.

- **Consider also recommending other ways to increase accessibility:**

- * People should be able to self-refer to an abortion service without having to go through a doctor.
- * All properly trained health practitioners should be able to provide abortions, not just doctors.
- * The restrictions on where abortions can be performed should be loosened, including allowing medical abortions to be completed at home.
- * Abortion should remain free of charge for all.
- * All DHBs should offer medical abortion.
- * Health practitioners should be required to disclose what services they refuse to provide when a person signs up with them.
- * People should **not** be charged for a medical consultation in which they were refused service.

- **For those politicians who may be under pressure to vote no:**

- * It is possible to be pro-choice without being pro-abortion. Many people, whose religious beliefs proscribe abortion, also believe that church and state should be separated, and that they do not have the right to impose their beliefs on others via the law.

When we should say it

- Write to cabinet ministers **now** as they are currently considering draft legislation.
- Watch for the AWC email letting you know when the bill goes to select committee. Send in a written submission, and ask to make an oral submission (ideally with friends, for mutual support).
- This is a conscience vote, so write to MPs on both sides of the house.

Forum abortion facts

- Approximately 200 women a year are denied an abortion in NZ
- It takes 25 days on average to get from first referral to termination in NZ. This delay can mean medical abortion is no longer an option.
- Not all NZ District Health Boards offer both medical and surgical abortion. Some DHBs – including some rural DHBs – offer no abortion at all, and women have to travel long distances to access appropriate care.
- Victims of domestic violence, and those without healthcare awareness are more likely to request an abortion – but also face more barriers to accessing one.
- Planned Parenthood has estimated that one third of the wage gains made by women worldwide is linked to access to birth control.