5 August 2019

Dear friends in Christ,

Reproductive Health Care Reform Bill 2019

Last week we have heard that proposed legislation will soon go before the Parliament to change the legal framework around the termination of pregnancy in NSW. There is always significant conversation in the community whenever legislation such as this is presented. I have been asked for my reaction and I am aware that other Diocesan Bishops are also sharing their views. As we think about any proposal by the Parliament to legislate in this area, we ought to consider our submissions and public engagement from many vantage points. It is helpful for our Parliamentarians to hear the considered views of NSW citizens.

I am conscious in writing that I am a male. My experience of pregnancy within our family was of two children we longed for and that our circumstances were such that we were confident in our ability to care for our children. I am conscious that my words will be incomplete for these and many other reasons.

One important approach is to “stand in the shoes” of the affected women as best as we can. We think of a woman who has news about a pregnancy or what is occurring with her pregnancy that fills her with concern, worry or dread. We can also “stand in the shoes” of the medical advisors who are working with or responding to this woman as a patient. The proposal going to the Parliament is that these conversations and engagements should not be fashioned under the criminal law of NSW but subject to a different form of regulatory framework. That change has merit.

Another vantage point is to consider what is contained in the proposed law. In keeping with laws in the United Kingdom (which were first introduced in 1967) and laws in Victoria and Queensland, the proposal is fashioned around two key principles – the first is that a pregnancy can be ended at any time before gestation might result in life beyond the womb (22 weeks). The second is that any time during the pregnancy there may be factors which lead medical practitioners to end the pregnancy. The proposed law, allows the Parliament to establish the environment in which those decisions can be made and to empower the medical professionals to make those decisions under guidelines from within their profession. The structure of the proposed law leads to questions about how the medical profession has established, and will establish in the future, its guidance to the profession. The proposed law invites the community to invest a high degree of trust in those guidelines and that profession’s ongoing ethical conduct.

Another vantage point is to consider whether there should be any law providing for the termination of pregnancy. There are people in the community who argue that no provision should be made. There are others who propose a law which allows for termination in exceptional circumstances. Any proposal for an alternative law will need to take account of many voices. These should include those who are most directly affected - women, the medical professionals at the centre of providing direct care and support, and those who experience such legislation as putting at risk their dignity and life – those living with disabilities from conception and birth.
Another vantage point is to draw on the depth of the teaching tradition of the church. People will contribute to this community discussion drawing with rich understandings of life in the womb. Christians hold dear the account of Mary visiting Elizabeth where John the Baptist leapt in the womb at hearing Mary's voice. They are shaped by God speaking to Jeremiah saying, "Before I formed you in the womb I knew you, before you were born I set you apart" and by the psalmist singing "For you created my inmost being; you knit me together in my mother's womb. I praise you because I am fearfully and wonderfully made". A factor in the response of many Christians is a theology of identity taking shape during gestation and consequential care for the one yet to be born. They are shaped by an understanding that human beings are created in the image of God and thus every stage of life, including its beginnings and endings, are treated with special dignity. We have an important role in articulating our values and in helping others establish their values.

Another vantage point is to consider the overall social situation; to find confidence in the availability and affordability of contraception, to be assured about the quality of sex education, and to continue prevent coercion and violence around sex. We can seek information about the quality of health care as well as assurances about the financial support to women during pregnancy and when a child is born. I think we have some successes in this area, but I have significant concerns about how people can be trapped in poverty and the impact poverty has on reproductive decisions.

In all of this I write as a bishop. This is not an easy area of law for many Anglicans. Drawing on a statement from the Episcopal Church in the USA, an Anglicans view can be expressed as "all human life is sacred. Hence, it is sacred from its inception until death. The Church takes seriously its obligation to help form the consciences of its members concerning this sacredness" ... That part of the Anglican Church, in which there has been significant discussion about abortion, has declared, "we emphatically oppose abortion as a means of birth control, family planning, sex selection, or any reason of mere convenience." It has also maintained "unequivocal opposition to any legislation on the part of the national or state governments which would abridge or deny the right of individuals to reach informed decisions [about the termination of pregnancy] and to act upon them."

For the Christian, the way we live is meant to reflect our life with God. We seek to glorify God in our ethical disposition and choices. I encourage you to pray about these matters, holding before God the people and the decisions I have written about. I encourage you, if moved, to take time to write to members of the NSW Parliament. I attach a copy of my letter. Our Parliamentarians will be assisted by hearing from you.

Grace and peace

Dr Peter Stuart
Anglican Bishop of Newcastle
5 August 2019

Dear Member of Parliament

Reproductive Health Care Reform Bill 2019

I write to you in my capacity as the Anglican Bishop of Newcastle leading Anglicans residing from the Hawkesbury to Lake Cathie and inland to Murrurundi.

I am writing because Anglicans view all human life as sacred from its inception until death and believe that citizens should be engaged in discussion around the Reproductive Health Care Reform Bill 2019. Anglicans take seriously our obligation to help form the consciences of those who associate with our church concerning this sacredness.

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

Anglicans recognise the confronting situation facing a woman who has news about a pregnancy or what is occurring with her pregnancy that fills her with concern, worry or dread. We recognise that the clinical and other expressions of care at that time are best managed through close personal encounters of advisors, practitioners and patients. Those engagements are governed by ethical frameworks and we note that the proposed legislation relies heavily on the ethical conduct of the medical profession in which the broader community has no say.

On the whole, Anglicans recognise that there are circumstances where medical termination of pregnancy may be seen as the best available option. Anglicans oppose abortion as a means of birth control, family planning, sex selection, or any reason of mere convenience. We remain concerned about ethical practices that deny the dignity and contribution of people born with a disability. We would encourage the Minister’s review of the Law in 5 years to be attentive to the way it has been implemented and to sustaining the appropriate balance between potentially competing community values.

Anglicans of this region know that reproductive health care decisions are affected by poverty and education. We urge the parliament, to the extent that it is its responsibility, to ensure the availability and affordability of contraception, to provide for high quality of sex education to all children, and to continue measures that prevent coercion and violence around sex. It is of deep concern that women are trapped in cycles of poverty which can lead to adverse reproductive health decisions.

Grace and peace

Dr Peter Stuart
Anglican Bishop of Newcastle