

House of Representatives

Supplementary Order Paper

Thursday, 5 March 2020

Abortion Legislation Bill

Proposed amendments

Simeon Brown, in Committee, to move the following amendments:

Clause 7

In *clause 7, new section 20D(1)*, replace *paragraph (a)* (page 11, lines 27 to 31) with:

- (a) collect, collate, and analyse information, and publish a report annually, on the following:
 - (i) the provision of abortion services in New Zealand; and
 - (ii) the provision of counselling services in relation to, or in connection with, the provision of abortion services; and
 - (iii) any information received under **section 20E** of this Act; and

In *clause 7, new section 20E*, delete *subsection (5)* (page 12, lines 17 and 18).

Schedule 1

In *Schedule 1, new Schedule 2, item 2*, replace *paragraph (d)* (page 18, line 11) with:

- (da) the number of the woman's previous live births, if any; and
- (db) the number of the woman's previous abortions, if any; and

In *Schedule 1, new Schedule 2*, after *item 7*, (page 18, after line 22), insert:

- 8 Confirmation that the woman was informed, both orally and in writing, of the information outlined in **section 13(1)** of this Act.
- 9 Any relevant information pertaining to the woman's physical health, mental health, and wellbeing.

Explanatory note

This Supplementary Order Paper (SOP) amends *clause 7* of the Abortion Legislation Bill by amending *new sections 20D and 20E* and amending *new Schedule 2* in *Schedule 1* to require the Director-General of Health to report annually on abortion statistics and expand the information recorded about those who receive abortions. The Bill currently only requires the information in *new Schedule 2* to be collected for the first 18 months after coming into force; this SOP would require the information to be collected and reported on an ongoing basis. The Abortion Supervisory Committee is currently required to report annually, and this SOP seeks to transfer this same requirement to the Director-General of Health following the disestablishment of that committee.

Reliable, thorough, and regular data collection is essential in order to be able to assess whether the law is working appropriately. This is particularly important in the case of abortions, which involve the competing interests of the woman and the unborn child, and where a robust understanding of why women are accessing abortion services will assist the Government to better focus its resources. In light of important factors such as disparities between the demographics of women who acquire abortions, potential health consequences, complications (both physical and mental) that may accompany an abortion, and requirements on medical practitioners to comply with regulations concerning abortion, an informed perspective is necessary to ensure abortion services are being provided equitably and effectively. Without a reference to tangible data that provides insight into the state of abortion provision it will be impossible to assess and improve abortion services in New Zealand.

The Bill currently contains no guarantees about how the ministry will regulate or fund abortion services or what standards of practice it will put in place. Significant detail surrounding the provision of abortion services is open to interpretation, to be determined by the ministry and its subsidiary bodies without the rigour and legitimacy of the democratic process. Therefore, an explicit requirement of this kind will ensure that the Director-General of Health possesses a mandate to acquire and report on necessary data.