PARLIAMENT OF VICTORIA

PARLIAMENTARY DEBATES (HANSARD)

LEGISLATIVE COUNCIL

FIFTY-SIXTH PARLIAMENT

FIRST SESSION

Tuesday, 7 October 2008

(Extract from book 13)

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By authority of the Victorian Government Printer

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Privileges Committee — Ms Darveniza, Mr D. Davis, Mr Drum, Mr Jennings, Ms Mikakos, Ms Pennicuik and Mr Rich-Phillips.

Select Committee on Public Land Development — Mr D. Davis, Mr Hall, Mr Kavanagh, Mr O'Donohue, Ms Pennicuik, Mr Tee and Mr Thornley.

Standing Committee on Finance and Public Administration — Mr Barber, Ms Broad, Mr Guy, Mr Hall, Mr Kavanagh, Mr Rich-Phillips and Mr Viney.

Standing Orders Committee — The President, Mr Dalla-Riva, Mr P. Davis, Mr Hall, Mr Lenders, Ms Pennicuik and Mr Viney.

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Electoral Matters Committee — (*Council*): Ms Broad, Mr P. Davis and Mr Somyurek. (*Assembly*): Ms Campbell, Mr O'Brien, Mr Scott and Mr Thompson.

Environment and Natural Resources Committee — (*Council*): Mrs Petrovich and Mr Viney. (*Assembly*): Ms Duncan, Mrs Fyffe, Mr Ingram, Ms Lobato, Mr Pandazopoulos and Mr Walsh.

Family and Community Development Committee — (*Council*): Mr Finn, Mr Scheffer and Mr Somyurek. (*Assembly*): Mr Noonan, Mr Perera, Mrs Powell and Ms Wooldridge.

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Rural and Regional Committee — (*Council*) Ms Darveniza, Mr Drum, Ms Lovell, Ms Tierney and Mr Vogels. (*Assembly*) Ms Marshall and Mr Northe.

Scrutiny of Acts and Regulations Committee — (*Council*): Mr Eideh, Mr O'Donohue, Mrs Peulich and Ms Pulford. (*Assembly*): Mr Brooks, Mr Carli, Mr Jasper, Mr Languiller and Mr R. Smith.

Heads of parliamentary departments

Assembly — Clerk of the Parliaments and Clerk of the Legislative Assembly: Mr R. W. Purdey

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FIFTY-SIXTH PARLIAMENT — FIRST SESSION

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Deputy Leader of The Nationals:
Mr DAMIAN DRUM

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Jennings, Mr Gavin Wayne	South Eastern Metropolitan	ALP	Theophanous, Hon. Theo Charles	Northern Metropolitan	ALP
Kavanagh, Mr Peter Damian	Western Victoria	DLP	Thornley, Mr Evan William	Southern Metropolitan	ALP
Koch, Mr David Frank	Western Victoria	LP	Tierney, Ms Gayle Anne	Western Victoria	ALP
Kronberg, Mrs Janice Susan	Eastern Metropolitan	LP	Viney, Mr Matthew Shaw	Eastern Victoria	ALP
Leane, Mr Shaun Leo	Eastern Metropolitan	ALP	Vogels, Mr John Adrian	Western Victoria	LP

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TUESDAY, 7 OCTOBER 2008

Tuesday, 7 October 2008

The PRESIDENT (Hon. R. F. Smith) took the chair at 2.05 p.m. and read the prayer.

ROYAL ASSENT

Message read advising royal assent to:

15 September

Evidence Act
Heritage Amendment Act
Summary Offences Amendment (Tattooing and Body Piercing) Act

23 September

Corrections Amendment Act
County Court Amendment (Koori Court) Act
Family Violence Protection Act
Legislation Reform (Repeals No. 3) Act
National Parks and Crown Land (Reserves) Acts Amendment Act
Public Holidays Amendment Act
Road Safety Amendment (Fatigue Management) Act
Whistleblowers Protection Amendment Act.

QUESTIONS WITHOUT NOTICE

Economy: global financial crisis

Mr D. DAVIS (Southern Metropolitan) — My question is for the Treasurer. In light of the international credit crisis and the rapidly escalating cost of capital for infrastructure projects, plus cost blow-outs in the region of hundreds of millions of dollars, the Barnett government in Western Australia and the Rees government in New South Wales are planning significant cuts to their infrastructure programs. What advice has the Treasurer received from Treasury regarding the effect of the global financial crisis on the Victorian economy and the consequent effect on Victorian families?

Mr LENDERS (Treasurer) — I thank the Leader of the Opposition for his question and comment on a couple of things. Firstly, Mr David Davis is asking what advice I have received about the crisis and its effect on Victorian families.

Mr D. Davis interjected.

Mr LENDERS — Mr David Davis is seeking to be helpful by interjecting across the chamber, but I will answer his question as I heard him ask it. Victorian families are clearly affected by the global economic crisis. It does not take a person with new-found interest like Mr Davis to work that out. Since the subprime crisis afflicted the United States and the contagion spread across global financial markets there has probably not been a person on this planet with some exposure to financial institutions who has not been affected in one way or another. We have seen the United States, where this crisis commenced and which has generated this, seek to deal with it in extraordinarily difficult circumstances. The package of measures that went through the United States Congress late last week after two attempts to get through the House of Representatives has gone through as a way of seeking to stabilise financial institutions in the United States.

We have seen that contagion roll out to the European Union, which at the moment is finding it extraordinarily difficult to have a collective approach. Whether it be the Euro zone central banks or whether it be the European Union as a whole, they are seeking to deal with that. It then obviously logically flows through to what that means to Australia and what it means to Victoria in particular, which Mr Davis is asking about. I can assure Mr Davis and the house that the Australian financial sector is in a stronger position than that of the European Union or the United States.

Mr Vogels interjected.

Mr LENDERS — Mr Vogels interjects, but I am giving a serious response to a serious question from David Davis — that is, whether or not the Australian financial institutions are in a stronger position than those of the United States or the European Union. I state a fact.

It is pertinent for us as leaders in the community. Do we wish to describe the economy as it is, and discuss what we can do as governments to assist and provide stability? Or do we wish to throw stones at glass houses, to try to rock and destabilise the economy, as the Leader of the Opposition has done by his irresponsible attack on the Members Equity Bank, which forced that bank to take out full-page advertisements in newspapers to reassure some of its investors and members as to the status of that financial institution?

We, as a planet, are affected by what has happened in the United States. Clearly the cost of credit has gone up; the cost of borrowing money has gone up; the availability of money to borrow has been reduced; and

central banks and national governments across the world have been seeking to inject liquidity into financial institutions to ease that burden. We will hear shortly what the Reserve Bank will do as part of that approach across the world.

So it will affect the world; but as far as capital works in Victoria go, this government is committed to the important injection of funds into capital works for two reasons: primarily because that is long-term investment in the state, which will both deal with productivity and assist us in the longer term with a range of issues; and secondly, in the short term it is a boost to assist with demands and job creation. These are important things, which make Victoria an even better place to live, work and raise a family.

Supplementary question

Mr D. DAVIS (Southern Metropolitan) — I thank the Treasurer for his answer, and I ask him: how much is state debt forecast to blow out from the present budget forward estimates for the government's planned infrastructure program?

Mr LENDERS (Treasurer) — I find this quite fascinating. As Mr David Davis well knows, this is the most open, transparent and accountable government in the 151-year history of this state, and as he well knows, the *Australian Financial Review* of 15 January 2003 actually said we were too transparent because we report more than anyone else. As he would know, we are the only jurisdiction in this country to have an A-plus rating for transparency.

David Davis asks, 'What will that be?'. I will leave aside the obvious thing in there, where he pretends to be all things to all people as he and his leader do — where to one part of the community he promises expenditure and to the other part of the community he promises reductions in taxation, but he cannot be all things to all people. If that is done, debt would certainly be blown out.

We are on track with our investment program — a capital works program which is four-fold what it was under the Kennett government and which is the basis of funding schools, roads, hospitals, transport, water infrastructure — the things that are important for Victoria. We are on track to do that.

Despite scaremongering from the opposition, what we have seen over the last several budgets and budget updates is that debt levels at the end of the forward estimates period are continually less than the government forecast. So we go forward and invest, and traditionally because we have larger surpluses than we forecast, those increased debts, which the government forecast two years ago, are further and further out.

David Davis asks the question but does not like the answer. This government will continue to invest in capital because it is what is important. Capital and skills are important for the long-term viability of the state. We will continue to invest, and make this state an even better place to live, work and raise a family.

Economy: performance

Ms MIKAKOS (Northern Metropolitan) — My question is also to the Treasurer. Can the Treasurer advise the house of any recent data releases affecting the Victorian economic outlook?

Mr LENDERS (Treasurer) — I thank Ms Mikakos for her question and her interest in an objective assessment of where the state of Victoria lies in these particularly turbulent international times. We know the world economy has slowed. We know the United States is not in recession, but it has the slowest growth in a long period of time. We know a number of jurisdictions in our neighbourhood — whether across the Tasman or north of the Murray River — have actually had negative quarters of economic growth. We know the growth rates for China, India, the European Union and most of the Organisation for Economic Cooperation and Development countries are constantly being revised at slower rates than they previously have been. In that environment we know the world economy is growing at a slower rate than it was previously, and we know that is where we are going.

We know the state of Victoria is under pressure because of the cost and availability of credit. We know we are under some pressure because of business and consumer confidence in the current global environment. But we have a series of economic data that we can reflect on. Most of this is lag data, but we have data that is showing that, as the economy slows down, Victoria has performed more strongly than other jurisdictions in Australia. Retail trade figures released on 30 September showed that despite a slowing in retail trade, Victoria experienced growth — unique in the current environment. The state accounts figures released in August showed that Victoria increased by 5.5 per cent while there was a national decline of 12.6 per cent. Both these figures came out before the Reserve Bank's recent reduction in interest rates.

We also know Victoria has population growth. On 24 September the Australian Bureau of Statistics figures showed population growth of 0.54 per cent for the March quarter and 1.69 per cent for this year. These

are the highest growth figures in Victoria since 1971. The opposition asks questions but does not like the answers, and that shows an extraordinary disinterest in the economic fate of our community But we are seeing population growth and stronger figures than those in other jurisdictions, and we also saw employment growth in the month of September. Victoria is the engine room of the country. There is a lot more to be done. These are turbulent economic times.

These are important ingredients for Victoria becoming an even better place to live, work and raise a family.

Skills training: reform

Mr DRUM (Northern Victoria) — My question without notice is to the Treasurer. In relation to his answer on 11 September to my question on the funding of the recently announced skills package of $314 million, the Treasurer said there was a provision for this $314 million skills package in this year's May budget. Can he tell me exactly where I can find that allocation in this year's budget?

Mr LENDERS (Treasurer) — I always welcome Mr Drum's questions, and I find it interesting that we cannot win on this side of the house. We have general business motions from the opposition on a daily basis criticising us for not — —

Honourable members interjecting.

Mr LENDERS — We cannot win in the eyes of the opposition.

Mr Drum — On a point of order, President, I quite clearly want the Treasurer to offer a page and a — —

The PRESIDENT — Order! Mr Drum knows full well there is no point of order. The minister has just started his answer, and I suggest the member give the minister enough time before deciding whether or not to raise a point of order.

Mr LENDERS — All I can say is that, on this side of the house, no matter what we do we get criticised by the opposition. We have had a barrage of motions and questions asking what we are doing to support Catholic schools. The fact that the Catholic or non-government school system gets the vast majority of its revenue from the commonwealth government — of the order of $1.4 billion per annum — and about $240 million from the state government does not stop the opposition saying that the state government needs to fix up an enterprise bargaining agreement under which the Catholic system followed the state system but did not work out how it was going to be funded. Suddenly we were responsible for filling that funding gap, as the opposition said to us. It is an interesting concept: you negotiate an EBA and ask someone else to fund it!

But leaving that aside, we have had a fruitful dialogue with the Catholic Education Commission of Victoria. An outcome of that dialogue was that we have provided a capital injection for this year and next year — not ongoing, as Mr Drum seems to be concerned about — to assist the Catholic education system with taking up some of the capital costs of their system — —

Mr Drum — I am talking about the skills package.

Mr LENDERS — Capital is different from recurrent, as Mr Drum presumably does not understand. We are then giving the Catholic system the option to reprioritise to deal with some smoothing in the first couple of years. We have delivered to Catholic schools in an affordable manner, and I say to Mr Drum: acknowledge what the government has done. We have delivered in a modest, prudent way — a one-off deliverance, not the reckless, endless, unfunded funding the opposition promised.

We actually delivered the goods, and it would be nice if just for once the opposition actually acknowledged the government has delivered for the people of Victoria, which makes this an even better place to live, work and raise a family.

Supplementary question

Mr DRUM (Northern Victoria) — The question was clearly about the skills package.

The PRESIDENT — Order! Is this a supplementary question?

Mr DRUM — In relation to the skills package that Jacinta Allan, the Minister for Skills and Workforce Participation, announced in September, the Treasurer made the clear statement in this Parliament that he had made an allocation and a provision for that $314 million skills package in the May budget papers. Can the minister tell me in what budget paper and on what page I can find the $314 million? It has nothing to do with Catholic schools.

The PRESIDENT — Order! I am going to give Mr Drum the opportunity to explain to me how that supplementary differs from his original question.

Mr DRUM — I firmly and truly believe the Treasurer did not answer — he misunderstood — —

The PRESIDENT — Order! I have given Mr Drum a chance to explain the difference, not to debate the answer. Mr Drum will explain; if he cannot, we will move on.

Mr DRUM — I am asking for a specific page of a document to back up the Treasurer's earlier answer.

Mr LENDERS (Treasurer) — I have answered Mr Drum's question in my substantive answer.

Plastic bags: supermarket trial

Mr ELASMAR (Northern Metropolitan) — My question is to the Minister for Environment and Climate Change. Will the minister inform the house of how the Brumby Labor government is working with major supermarkets and the community to help reduce plastic bag use?

Mr JENNINGS (Minister for Environment and Climate Change) — I thank Mr Elasmar for his question and for the opportunity to share with the house some extraordinary results of the trial that was undertaken in Victoria in the hope of driving a reduction in the number of plastic bags coming through the checkouts of our supermarkets.

If Victorians realised that over 1.1 billion plastic bags are used each year in Victoria, they would probably be pretty much staggered by the enormity of that issue, when we consider that it ends up in the waste stream, in landfill, in the litter stream and in our waterways — in a whole variety of environmental circumstances where the bags last for a very long time and are unwanted.

This issue has been particularly bedevilling environment ministers and communities around the country for decades. In the lead-up to the environment ministers meeting in April it seemed that environment ministers were going to go round the loop one more time without necessarily trying to resolve this matter.

The state of Victoria therefore entered into a collaborative arrangement with the major supermarket chains — Coles, Safeway and IGA — through the Australian National Retailers Association to implement a voluntary scheme to see what the result would be if we apportioned a user charge on plastic bags. Any revenue derived from that user charge would be put back into doing good environmental works in the local community. If there was no change in behaviour and every customer was putting 10 cents into the coffers of those local environmental programs, there would have been very large local environmental projects coming the way of those communities.

The interesting thing about the success of the pilot program is that while the amount of money raised over the course of the month between 18 August and 14 September was reasonable, ultimately modest amounts of money went back into those communities because the pilot was extremely successful in reducing the number of plastic bags that went out through the checkout. A quite extraordinary result in the three communities concerned — Wangaratta, Warrnambool and Fountain Gate in Narre Warren — was that there was a 79 per cent reduction in the number of bags used during the course of that month. That is quite extraordinary. If that translated into a permanent change in the shopping behaviour of Victorians, President — I can see from your expression that you are flabbergasted at this — it would mean 790 million plastic bags would be taken out of the waste stream. That is what this equates to, and it is quite an extraordinary result.

We thank the shoppers who participated in the pilot in those communities. We think they have demonstrated leadership in their willingness to change their behaviour, reduce their plastic bag use, increase their use of reusable bags and take opportunities to reduce their contribution to the litter stream. We thank the retailers for seeing the good sense in participating in this program. We thank the checkout assistants who have been patient in the face of what could have been some resistance to changing practices and the ways in which transactions occur at the checkout.

We think the pilot has been very successful. It has led to more than $8000 being returned to the Warrnambool community to do rehabilitation works at Russell Creek; $22 000 going back to the Fountain Gate community for Landcare work along Grasmere Creek flowing to Cardinia Creek and finishing at Akoonah Park in Berwick; and over $5000 to be used to improve the quality of the Ovens River near the Garth park reserve in Wangaratta. That work will be undertaken by Conservation Volunteers Australia. We are grateful for their work and their participation in this pilot. I thank the steering committee charged with the responsibility of monitoring the impact of this pilot and Caroline Bayliss from RMIT, who has led that group and provided me with advice about the success of the pilot that I will share at a meeting of environment ministers across the nation in November.

We hope that as a nation we can step up and do something about this, because the Victorian community, through the pilot program, has indicated its willingness to participate. We think consumers around Australia will want to do their bit to reduce the litter stream and make a significant contribution to

improving environmental values and standards through their consuming behaviour at the checkout.

Brookland Greens estate, Cranbourne: landfill gas

Mr GUY (Northern Metropolitan) — My question is to the Minister for Planning. Can the minister advise the house whether his department has identified any other urban housing estates across Victoria with potentially similar gas leakage issues to those in Brookland Greens, and if so, where are they and what has he done about it?

Hon. J. M. MADDEN (Minister for Planning) — I welcome Mr Guy's question in relation to this matter. I am conscious of the fact that these are very important and serious matters. The monitoring of any sites aligned to, close to, impacted by or affected in any way by landfill sites is within the jurisdiction of my colleague the Minister for Environment and Climate Change, Mr Gavin Jennings, through the Environment Protection Authority, and monitoring is undertaken by the EPA. If there are other locations where these instances may be of significance, then no doubt I will be informed by my ministerial colleague through the advice given to him by the EPA.

Supplementary question

Mr GUY (Northern Metropolitan) — I thank the minister for his answer. Noting the significant compensation that is highly likely to arise as a result of the Brookland Greens disaster, I ask: what policy changes does the minister plan for new developments built near former landfill sites to ensure that this kind of tragedy never happens again?

Hon. J. M. MADDEN (Minister for Planning) — I welcome Mr Guy's supplementary question in relation to this matter. I reinforce again that this is a very serious matter. Our concerns are expressly with the local residents and we will ensure that we support them through this difficult time. But we are also conscious of the fact that this is not the time to lay blame on anyone in particular. Let us make sure that the locals are supported; let us also make sure that these incidents do not occur again in the future.

We await the results of the Ombudsman's report to find out if there are any instances in which there is room for improvement regarding these matters. I do not want to go into the detail of this matter in any way other than to say that what is particularly critical is that the EPA has since adjusted the buffer, and at that point in time it was attempting to adjust the buffer around landfill sites like this.

I note the concern of the opposition, and I also notice that it has been eager to exacerbate the anxieties of many local residents over this matter. What I say to Mr Guy is that the EPA has changed its guidelines in regard to buffers around landfill sites, which is particularly critical in relation to planning matters. We look forward to the Ombudsman's report to make sure that if any improvements are required in these matters, they are followed through in any policy initiatives of this government.

Water: Victorian plan

Mr TEE (Eastern Metropolitan) — My question is to the Treasurer. Can the Treasurer outline to the house how the Brumby Labor government is progressing its plan to secure water supplies for all Victorians?

Mr LENDERS (Treasurer) — I thank Mr Tee for his question and his interest — at a time when the water reserves of Victoria's largest city are at 34.5 per cent, down from 40 per cent a year ago — in how the government's plan to address this major issue is going.

Regarding the government's proposed desalination plant at Wonthaggi, two companies have been listed — AquaSure and BassWater. They have put forward bids, which will now be assessed by the government, for this important drought-proof project that will deliver water to Melbourne and southern and western Gippsland. Taking salt water out of the ocean will address what we can see in front of us — that is, a diminishing water supply in that part of the state.

Honourable members interjecting.

Mr LENDERS — I take up Mrs Petrovich's interjection. Constituents in the southern part of her electorate do not want to have no water because of her party's policy that says, amongst other things, if you have built a pipe, you will not use it. The opposition cannot be all things to all people. Mrs Petrovich's party is awash on the project; it does not have any idea.

What we have at the moment is an ongoing process to drought-proof the state of Victoria in a time of climate change — which Mrs Petrovich probably still does not believe in.

Mrs Peulich — Use the word 'drought'.

Mr LENDERS — I find it interesting that Mrs Peulich says, 'Use the word "drought"'. The opposition, in seeking to be all things to all people, is

playing with words while the water supplies of this city, this state and this planet are going down. It is quite fascinating.

Honourable members interjecting.

Mr LENDERS — I take up the interjections from those opposite that it is 'wacky'. I quote a prominent Australian who, at a Queensland Rural Press Club event on 22 September 2006, said that the Victorian proposal to save water from irrigation upgrades to share between regional and urban areas is win-win. I wonder who that prominent Australian was. Was it a Labor politician in Victoria? We agree with it. It was none other than Malcolm Turnbull, the federal Leader of the Opposition, when he was a parliamentary secretary for water in the Howard — —

Mr Dalla-Riva — Who is he?

Mr LENDERS — Who is he? Good question! Mr Dalla-Riva says, 'Who is he?'. Clearly Mr Dalla-Riva is a Costello supporter if he says, 'Who is Mr Turnbull?'. Mr Turnbull may think that the Eels are a Victorian or Australian Football League football team, but even I know that Malcolm Turnbull is actually the federal leader of the Liberal Party, who thinks that the north–south pipeline proposal — the Food Bowl Alliance proposal — is a win-win scenario — —

Ms Darveniza — He is right.

Mr LENDERS — Correct, Ms Darveniza; he is right. It is a win-win scenario and not part of the voodoo economics of Mr Baillieu and Ms Asher, who one day decide the pipe is a good idea if they are talking to one group and the next day decide they are not going to use the $750 million asset because they have spoken to another group. Presumably in Baillieuland you have $750 million assets sitting there unused while 70 per cent of Victoria has no water, and projects that actually save water from another part of the state are taboo. I am with Malcolm Turnbull, who says this is win-win, and I am not with Mr Baillieu or Ms Asher, who do not know what they stand for.

In response to the question I have received from Mr Tee, I say we are working on these issues and we have milestones on the important project going forward. We know that we need to address this issue. You cannot put your head in the sand. You cannot live in la-la land — Baillieuland — so we will continue with the work to drought-proof the state of Victoria, to have a grid across the state of Victoria better using our water and to have big investments in the state. I am with Malcolm Turnbull; it is win-win, and this is an important part of making Victoria an even better place to live, work and raise a family.

Brookland Greens estate, Cranbourne: landfill gas

Mrs PEULICH (South Eastern Metropolitan) — My question without notice is directed to the Minister for Environment and Climate Change, Mr Gavin Jennings. My question relates to comments made by the EPA (Environment Protection Authority) chairman, Mr Mick Bourke, concerning the Brookland Greens fiasco and compliance with pollution notices and orders, and I ask the minister: when were he or his department first informed of problems associated with the Stevensons Road landfill, on what date did he or his department first take action and what action did he take?

Mr JENNINGS (Minister for Environment and Climate Change) — I thank Mrs Peulich for her question. If she goes back and reads my answer from the last question time of the last sitting week she will actually get the answer to her question. I will go back over it, because, from memory, my answer took 13 minutes. In that 13-minute answer I noted that the chamber seemed to be listening to the answer, but apparently that was not the case.

On becoming minister in August last year and in receiving my briefing about the range of issues that the EPA was responsible for, for the first time I became aware of the circumstances of the landfill in question. I had been made aware that as far back as a year prior to that — in June 2006 — traces of methane had been detected in the local community, and from that time up until today there has been a continuing program of monitoring and engaging with that issue. The EPA has been on a constant watch of this issue.

On a number of occasions the EPA has formally required the City of Casey to take action to improve the performance of the landfill and to make sure that mitigation works were undertaken to reduce the amount of methane travelling from the landfill into the local community. I have indicated to the house previously — on a number of occasions formally — that the EPA has issued improvement notices. There are various statutory requirements that require the City of Casey to engage in those works. The EPA has issued a number of notices to the council in relation to its inability to undertake those works successfully.

That situation continues to this very day, because there is a clean-up notice that is still outstanding on the site. The EPA has expectations that the City of Casey will

undertake those works, and it has established a time line by which they should be undertaken. Those works will establish a trench around the northern and western boundaries of the landfill to try to ensure that there is a physical barrier between the landfill site and the residents, and it will be constructed in a way that creates an air pocket that will attract the capture of methane as it migrates across the site.

Works have been required to improve the ability to capture leachate, which is a mixture of pollutants that are combined with groundwater within the subterranean context of the landfill, that needs to be captured and processed. Dealing with the cumulative effects of the leachate and gas capture and with groundwater matters are works that the EPA has required of the council. In fact it is the expectation of the EPA that those requirements will be satisfied in the near future. Certainly that is my expectation.

As I informed the house previously, I have very high expectations of the EPA to acquit its statutory obligations under my watch. I believe it has demonstrated on a number of occasions that it has formally discharged its responsibility and has not lost sight of the need to ensure that the City of Casey complies with its licensing arrangement to make sure that this landfill is maintained in a safe and secure fashion.

Supplementary question

Mrs PEULICH (South Eastern Metropolitan) — Given his answer, is the minister able to inform the house on whether the EPA approved of the council-prepared leachate and gas management plans?

Mr JENNINGS (Minister for Environment and Climate Change) — Given the circumstances I have just outlined to the chamber, there might be a difference from what might have been an initial approval process. When you take the combined answer of my ministerial colleague Minister Madden and my answer in sequence, you will recognise there are various approvals that were issued in the early stage of this landfill that were subject to the policy settings of the day and the various standards that were in play when this landfill was established that are not the prevailing standards that apply today.

The EPA, working in collaboration with the government, has ensured that we have improved the standards of operation both in terms of what will be required under a works approval and what will be required under a state environment protection plan, so the policy settings we have in place today are preferable to the ones that were in place when this landfill was established. The EPA has worked with the current government to ensure that that is the case.

In terms of the licensee acquitting themselves in relation to the licensing obligations, I have indicated to the chamber today and to the local community that there are a number of areas where the EPA is of the view, and I support that view, that the environmental performance and management of that landfill has been less than adequate.

Ringwood: transit city

Mr LEANE (Eastern Metropolitan) — My question is for the Minister for Planning. Can the minister advise the house how the Brumby government investment in the Ringwood transit city program will boost jobs and infrastructure in this important area of the state?

Hon. J. M. MADDEN (Minister for Planning) — I welcome Mr Leane's question. I know he is very eager to hear this answer, because he has been actively involved in the Ringwood community and this initiative. I congratulate Mr Leane for being so committed to seeing a result in investment in the Ringwood transit city.

In recent weeks I had the good fortune of being with the Premier as we announced a $39 million commitment by the Brumby Labor government to the Ringwood transit city development. This is a wonderful initiative. It has been wholeheartedly endorsed by the local community and the local council. It has been facilitated by this government through a transit city program, and I know even the opposition has called for this sort of funding, so there can be no criticism from the opposition that we have committed $39 million to this project. If anything, I know the opposition was seeking to have the money next year rather than this year.

More than anything I want to congratulate Mr Leane for being able to prompt the government and this minister so that I could prompt my colleagues to bring forward expenditure on this project to make it happen sooner rather than later. This $39 million is part of an overall $400-million Transit Cities program which is committed to revitalising key transport centres, making them even better places to live, work and raise a family and integrating them with the transport system so that we can attract businesses and jobs and offer an even more diverse range of housing in these locations — so that we can provide for the future.

This is a great announcement because a number of things will come out of this investment — not only the physical outcome but an integrated, high-quality

designed town square in the urban heart of Ringwood. We will see improved safety around Maroondah Highway, including a new pedestrian crossing. We will also see a new bus interchange linked to the rail station, and of the order of 7000 passengers will use this hub every day. We will see further work that the council has done to attract investment in the area, and that will complement investment that we know QIC will bring to the redevelopment of the major shopping centre of Eastland. We anticipate from QIC, given what it has committed to to date and what its plans are for the future, somewhere of the order of $500 million in a major expansion of the Eastland shopping centre, which is not only great for the locals but also great for jobs and for the economic prosperity of this state. Particularly when we know that the global economic outlook is going to get tougher, it is good that we are seeing this investment by those companies in these sorts of facilities.

But on top of that we also anticipate that that level of investment will generate of the order of 1400 construction jobs and that at the end of the day 1500 jobs in retail will also be located in this centre. It will complement the Maroondah City Council's ambition to attract, encourage and support businesses in the area. This is in addition to this government's investment in EastLink, making Ringwood closer in time to many of the other suburbs throughout the eastern and south-eastern corridors. In terms of attracting investment, work and housing, even in Melbourne, it is closer than it has ever been. This will become a vital hub not only for investment in the prosperity of this state but also in terms of the greater development of prosperity in the eastern suburbs. As I have said, this is a wonderful investment. It capitalises on a number of policy proposals by this government. It builds for the future, and it is emblematic not only of the sort of investment that the Brumby Labor government makes in communities to contribute to their prosperity but also of the great work that our local members are doing in the eastern suburbs to make Victoria the best place to live, work and raise a family.

Questions interrupted.

DISTINGUISHED VISITORS

The PRESIDENT — Order! I wish to draw to the attention of the house the presence in the gallery of the former member for Silvan, Ms Carolyn Hirsh; the former Premier of Victoria and member for Williamstown, the Honourable Joan Kirner, who has just arrived; and also a former minister and member for Ringwood, Ms Kay Setches.

Questions resumed.

Brookland Greens estate, Cranbourne: landfill gas

Ms HARTLAND (Western Metropolitan) — My question is to the Treasurer, Mr Lenders, and is also in regard to residents of Brookland Greens estate, Cranbourne. It is quite obvious that I do not need to repeat the story. I am particularly concerned about the residents who have been forced out of their homes because of methane levels. The package of $8000 that the government has offered them will go some way towards assisting them, but I know from the contact I have had with community groups and agencies that there is real concern it is not enough. The question I ask of the Treasurer is: has the government or the Treasurer considered an interim compensation package for residents to assist them until all the legal issues are resolved?

Mr LENDERS (Treasurer) — I thank Ms Hartland for her question about the assistance package this government has put in place for the residents of Brookland Greens. I think it is important to note that substantive answers to this question have already been given by my colleagues Mr Madden and Mr Jennings over a series of days. What the government has done is — —

Mr Guy — Avoided it!

Mr LENDERS — Mr Guy says the government has avoided it. Mr Guy was not here in the last sitting week, and I would say that in the last sitting week my colleague Mr Jennings gave one of the most comprehensive and impressive answers on a complex issue — without notes and to a still house — that I have heard in my time in this Parliament. For Mr Guy to say the government has not responded to this is churlish and unfortunate. This is not just an issue, as Ms Hartland has raised, that affects residents caught up in it in the immediate area — and I say in response to Ms Hartland's question that there are hardship grants that have gone forward through community services, and we have outlined those — but also, as Mr Jennings has previously outlined, there are the particular temporary remedial issues for the homes in Brookland Greens that Mr Jennings has outlined.

It is unfortunate that when information was given in what I think was the most comprehensive manner that I have heard in my time as a minister, the shadow minister simply belittles it and scores a political point out of the misery and the misfortune — —

Mr Guy interjected.

The PRESIDENT — Order! Mr Guy!

Mr LENDERS — Ms Hartland raised the issue of whether these things can be accelerated — I think that is the essence of her question — until a more comprehensive response is in place. Clearly the state government, under the leadership of my ministerial colleagues in this house and also particularly the Minister for Police and Emergency Services, Mr Cameron, and the CFA (Country Fire Authority), is putting in place a series of things while these issues are sorted out. There are issues for the local municipality as well as for the government, and there are a lot of lessons to be learnt. We also need to deal immediately with the issues of the people involved, and we will continue to work through those important issues. They are issues that Ms Hartland has raised in a measured fashion seeking information, and I congratulate her on that, but they are ones that this government will respond to in a measured fashion as it deals with the immediate issues of the residents involved and also the longer term issues that need to be addressed.

Supplementary question

Ms HARTLAND (Western Metropolitan) — Given that the residents of Brookland Greens are having to pay rent and mortgages, the $8000 package is not going to go very far. I really do need to know what the government's plans are so I can let the residents know how this issue is going to be dealt with financially for them.

Mr LENDERS (Treasurer) — There are two things there. I certainly take up Ms Hartland's point that this information needs to be passed on to residents, and this government is communicating on a regular basis with the residents of the area both case by case and as a group to assist them with where they are going. That is a far more preferable approach than some of the outrageous scaremongering rags that Mrs Peulich has put out in the area trying to score political points.

On the point that Ms Hartland raises about rental payments and mortgages, I can say that today, with the Reserve Bank having just cut the bank interest rate by 1 per cent, there is clearly some mortgage relief coming through to residents across the entire state, but the government will continue to work on the issues Ms Hartland has raised. They are issues that are appropriately raised, and they will be dealt with by this government. They were raised in an informed manner — unlike the shameless political scaremongering that Mrs Peulich is undertaking at taxpayers' expense.

Melbourne Convention Centre: benefits

Mr THORNLEY (Southern Metropolitan) — My question is to the Minister for Major Projects, Minister Theophanous. Can the minister update the house on how the new Melbourne Convention Centre will create jobs and benefit the Victorian economy?

Hon. T. C. THEOPHANOUS (Minister for Major Projects) — I thank the member for his question because — —

Honourable members interjecting.

The PRESIDENT — Order! I have been reasonably tolerant to date. I would ask the house to reflect on previous rulings. If members want to engage in cross-chamber banter, they should take it outside.

Hon. T. C. THEOPHANOUS — Again I thank the member for his question, because the new Melbourne Convention Centre will go down as part of the great legacy that the Bracks and Brumby governments leave to this state. The convention centre will be completed in the near future and will boost the Victorian economy by an enormous amount. It will boost the Victorian economy by an estimated $197 million each year — each and every year — through a series of conventions that will be held at the convention centre, which is capable of employing up to 2500 people throughout our economy. This will be a great new facility for Victorians.

I was very pleased to announce recently that the new Melbourne Convention Centre has been selected to host the 68th World Science Fiction Convention in September 2010. I can assure you this is a very large convention, President. It a convention which is rarely held outside the United States. It will generate about $18 million worth of economic benefit for Victoria, and it will bring about 3000 science fiction fans and perhaps science fiction — —

Hon. J. M. Madden — Fanatics!

Hon. T. C. THEOPHANOUS — Fanatics, perhaps. I am assured it is much more about science than it is about fiction, because there is a lot of new science that is used in producing science fiction these days. Thousands of science fiction fans from all over the world — and possibly from beyond the world! — will converge on Melbourne for this convention in 2010.

We have already attracted 34 international conventions to the convention centre. Just to put it in number terms, that is 66 000 people who would not otherwise have come to Victoria who will be doing so, and every one of those people will spend on average five times as much

as a normal tourist who comes into the state. Make no mistake: this is a great economic boon for Victoria.

The other international conventions we will be having include the International Council of Nurses in 2013 and the International Botanical Congress in 2011. Another very interesting and important one will be the Parliament of the World's Religions in 2009. I hope we are not still debating the abortion legislation at that time!

This is a very important initiative. It is a great new facility, and it will boost the Victorian economy for decades to come.

The PRESIDENT — Order! Time for questions without notice has expired.

QUESTIONS ON NOTICE

Answers

Mr LENDERS (Treasurer) — I have answers to the following questions on notice: 807, 1074, 1210, 1327, 1328, 1547, 1548, 1560–6, 1752, 1755, 1891, 1998, 2006, 2133, 2182, 2185, 2217, 2289, 2316, 2349, 2350, 2427, 2506, 2545, 2586, 2605, 2624, 2626, 2643, 2756, 2767, 2781, 2792, 2794, 2804, 2854, 2857, 2915, 2927, 2983, 2985, 2993–5, 2999, 3002, 3003, 3008, 3062, 3064, 3072–4, 3081, 3082, 3103, 3110, 3114, 3121–3, 3134, 3135, 3146–9, 3160, 3252, 3253, 3262, 3268, 3284, 3292, 3333, 3335–43, 3354–6, 3361, 3367, 3423, 3444, 3446, 3447, 3454, 3455, 3463, 3471–3504, 3519–22, 3525, 3536–48, 3580, 3583, 3591–96, 3604, 3611, 3677–83, 3698–704, 3733–39, 4380.

PETITIONS

Following petitions presented to house:

Abortion: legislation

To the Legislative Council of Victoria:

The petition of the undersigned residents of Victoria draws the attention of the Council to proposed amendments to the Crimes Act which will ensure that no abortion can be criminal when performed by a legally qualified medical practitioner at the request of the woman concerned.

The implementation of this legislation will allow abortions to be legal in Victoria right up to birth. This will only increase the thousands of children who die needlessly each year through abortion and will add to the existing social problems in Victoria resulting from such a high abortion rate.

The petitioners therefore request that the Legislative Council of Victoria vote against amendments to the Crimes Act that will decriminalise abortion in the state of Victoria.

By Mr KAVANAGH (Western Victoria) (1690 signatures)
Mr VOGELS (Western Victoria) (178 signatures)
Ms LOVELL (Northern Victoria) (117 signatures)

Laid on table.

Ordered to be considered next day on motion of Mr KAVANAGH (Western Victoria).

Abortion: legislation

To the Legislative Council of Victoria:

The petition of the undersigned residents of Victoria draws the attention of the Legislative Council to the Abortion Law Reform Bill 2008 which would decriminalise abortion.

The implementation of this legislation will allow abortions to be legal in Victoria right up to birth.

We are deeply concerned by this bill, which:

fails to acknowledge the sanctity of life

fails to protect the lives of unborn children

allows abortion on demand even for babies old enough to survive outside the womb

fails to provide any safeguards or support for women, or to offer access to alternatives other than abortion

places unreasonable requirements on health professionals with conscientious objections

does not reflect community concern about the frequency of abortion

does not reflect community concern about the practice of late-term abortion

is more liberal than current practice and may in fact increase the rate of abortion.

The petitioners therefore request that the Legislative Council of Victoria vote against the Abortion Law Reform Bill 2008.

By Mr HALL (Eastern Victoria) (433 signatures)

Laid on table.

Abortion: legislation

To the Legislative Council of Victoria:

The petition of certain citizens of the state of Victoria draws the attention of the Legislative Council to the Abortion Law Reform Bill 2008 which would allow abortion on demand in this state and oversee the deaths of thousands of Victorians before birth annually. Unborn babies are the most vulnerable and defenceless members of our society and, as such, need

the full protection of Victorian law. Abortion kills unborn children and often permanently damages their mothers.

The Abortion Law Reform bill 2008 will allow legalised abortion up to 40 weeks gestation and is a gross violation of the right to life of children before birth. The petitioners therefore request that the Legislative Council rejects the Abortion Law Reform Bill 2008.

By Mr FINN (Western Metropolitan) (2530 signatures)

Laid on table.

Ordered to be considered next day on motion of Mr FINN (Western Metropolitan).

Mountain Highway–Albert Avenue–Colchester Road, Boronia: upgrade

To the Legislative Council of Victoria:

The petition of certain citizens of the state of Victoria draws to the attention of the Legislative Council that the intersection of Mountain Highway, Albert Avenue and Colchester Road needs to be upgraded for pedestrian and traffic safety.

School students and local residents often cross the busy and dangerous intersection to access the Alchester Road shopping precinct, the Basin Primary School, Boronia Heights Primary School and other local services. It has long been recognised as an extremely busy roundabout that is difficult to cross and highly dangerous for pedestrians, many of whom are school-aged children, and traffic.

The petitioners therefore request that the state government of Victoria provide funding for pedestrian safety by way of pedestrian crossings, school crossing supervisors or traffic lights at the intersection to enable increased safety for pedestrians and to alleviate traffic pressures.

By Mr O'DONOHUE (Eastern Victoria) (22 signatures)

Laid on table.

Clearways: Melbourne

To the Legislative Council of Victoria:

The petition of certain citizens of the state of Victoria draws to the attention of the Legislative Council the Victorian government's proposal to create clearways from 1 July 2008 on 150 streets within a 10-kilometre radius of the city centre from 6.30 a.m. to 10.00 a.m. and 3.00 p.m. to 7.00 p.m. This proposal will destroy community shopping strips by turning them into traffic sewers discouraging pedestrians and cyclists. Clearways limit local shopping by restricting access to parking spaces resulting in local shoppers driving to large shopping malls, thereby increasing car use, congestion and greenhouse gas emissions. The petitioners therefore request that the Victorian government abandon its clearway proposal and instead direct all money saved into improving public transport which is the best option for combating traffic congestion and the perceived need for clearways.

By Mr BARBER (Northern Metropolitan) (1566 signatures)

Laid on table.

Water: north–south pipeline

To the Honourable the President and members of the Legislative Council assembled in Parliament:

The petition of certain citizens of the state of Victoria draws to the attention of the Legislative Council its opposition to the proposed building of the north–south pipeline by the Brumby Labor government which will steal water from country Victorian farmers and communities and pipe this water to Melbourne. We believe there are better alternatives to increase Melbourne's water supply such as recycled water and stormwater capture for industry, parks and gardens, and therefore call on the Legislative Council to oppose the construction of the proposed pipeline.

And your petitioners, as in duty bound, will ever pray.

By Ms LOVELL (Northern Victoria) (76 signatures)

Laid on table.

Ordered to be considered next day on motion of Ms LOVELL (Northern Victoria).

Driver Education Centre of Australia: Careful Cobber program

To the Honourable the President and members of the Legislative Council assembled in Parliament:

The petition of certain citizens of the state of Victoria draws to the attention of the Legislative Council its opposition to the Brumby Labor government's decision to cease funding for the Careful Cobber program which has been delivered at the Driver Education Centre of Australia (DECA) in Shepparton for 30 years.

We believe the government should immediately reinstate funding for this crucial road safety education program for Victorian primary school students, and therefore call on the Legislative Council to support the reinstatement of funding for the Careful Cobber program.

By Ms LOVELL (Northern Victoria) (1062 signatures)

Laid on table.

Ordered to be considered next day on motion of Ms LOVELL (Northern Victoria).

CLASSIFICATION GUIDELINES

Publications, films and computer games

Hon. J. M. MADDEN (Minister for Planning), by leave, presented amended guidelines for the classification of publications, films and computer games, March 2008.

Laid on table.

OUTER SUBURBAN/INTERFACE SERVICES AND DEVELOPMENT COMMITTEE

Local economic development in outer suburban Melbourne

Ms HARTLAND (Western Metropolitan) presented report, including appendices, together with transcripts of evidence.

Laid on table.

Ordered that report be printed.

Ordered that Council take note of report on motion of Ms HARTLAND (Western Metropolitan).

SCRUTINY OF ACTS AND REGULATIONS COMMITTEE

Alert Digest No. 12

Mr EIDEH (Western Metropolitan) presented *Alert Digest* No. 12 of 2008, including appendices.

Laid on table.

Ordered to be printed.

PAPERS

Laid on table by Clerk:

Agricultural Industry Development Act 1990 —

Murray Valley Citrus Industry Development Order 2008, pursuant to section 8(3) of the Act.

Northern Victorian Fresh Tomato Industry Development Order 2008, pursuant to section 8(3) of the Act.

Crown Land (Reserves) Act 1978 —

Minister's Order of 29 August 2008 giving approval to the granting of a licence at Lorne Foreshore Reserve.

Minister's Order of 5 September 2008 giving approval to the granting of a licence at Winchelsea Park Reserve.

Dairy Food Safety Victoria — Minister's report of receipt of 2007–08 report.

Essential Services Commission — Taxi Fare Review 2007–08 Final Report, August 2008.

Gambling Regulation Act 2003 — Amendment to Category 1 Public Lottery Licence, pursuant to section 5.3.19(4)(b)(ii) of the Act.

Land Acquisition and Compensation Act 1986 — Minister's certificate of 14 September 2008 pursuant to section 7(4) of the Act.

Major Events (Aerial Advertising) Act 2007 — Minister's Order of 15 September 2008 in relation to the 2008 AFL Finals Series.

Major Events (Crowd Management) Act 2003 —

Minister's Order of 15 September 2008 declaring a managed access area.

Minister's Order of 30 September 2008 in relation to Caulfield, Moonee Valley and Flemington Racecourses.

Melbourne City Link Act 1995 —

CityLink and Extension Projects Integration and Facilitation Agreement Eighteenth Amending Deed, 26 August 2008, pursuant to section 15B(5) of the Act.

Freeway Management System Coordination Agreement Amending Deed, 26 August 2008, pursuant to section 15(2) of the Act.

M1 Corridor Redevelopment Deed Second Amending Deed, 26 August 2008, pursuant to section 15(2) of the Act.

Melbourne City Link Twenty-seventh Amending Deed, 26 August 2008, pursuant to section 15(2) of the Act.

Occupational Heath and Safety Act 2004 — Minister's Orders of 11 September 2008 approving compliance codes (eight papers).

Planning and Environment Act 1987 — Notices of Approval of the following amendments to planning schemes:

Banyule Planning Scheme — Amendment C65.

Benalla Planning Scheme — Amendment C24.

Boroondara Planning Scheme — Amendment C73.

Campaspe Planning Scheme — Amendments C57, C61 and C62.

Casey Planning Scheme — Amendments C74, C100 and C111.

Glenelg Planning Scheme — Amendment C38.

Greater Dandenong Planning Scheme — Amendment C36.

Greater Shepparton Planning Scheme — Amendment C65, C99, C100, C102 and C113.

Hepburn Planning Scheme — Amendment C42.

Hobsons Bay Planning Scheme — Amendment C69.

Hume Planning Scheme — Amendment C75.

Latrobe Planning Scheme — Amendment C48.

Manningham Planning Scheme — Amendments C52 and C100.

Maribyrnong Planning Scheme — Amendment C75.

Maroondah Planning Scheme — Amendment C62.

Melbourne Planning Scheme — Amendment C123.

Moira Planning Scheme — Amendments C32, C45 and C46.

Moonee Valley Planning Scheme — Amendment C84.

Moyne Planning Scheme — Amendment C13.

Nillumbik Planning Scheme — Amendment C56.

Northern Grampians Planning Scheme — Amendment C2.

Pyrenees Planning Scheme — Amendment C22.

South Gippsland Planning Scheme — Amendment C43.

Strathbogie Planning Scheme — Amendment C38.

Victoria Planning Provisions — Amendment VC49.

West Wimmera Planning Scheme — Amendment C13.

Whitehorse Planning Scheme — Amendments C74 (Part 2) and C104.

Yarra Planning Scheme — Amendments C100 and C122.

Statutory Rules under the following Acts of Parliament:

Births, Deaths and Marriages Registration Act 1996 — No. 114.

Chattel Securities Act 1987 — Nos. 109 and 112.

Country Fire Authority Act 1958 — No. 106.

Health Act 1958 — No. 105.

Infringements Act 2006 — Nos. 107 and 108.

Marine Act 1988 — No. 113.

Mental Health Act 1986 — No. 111.

Road Safety Act 1986 — Nos. 115 and 116.

Transport Superannuation Act 1988 — No. 110.

Subordinate Legislation Act 1994 —

Minister's infringements offence consultation certificate under section 6A(3) in respect of Statutory Rule Nos. 113 and 115.

Minister's exception certificate under section 8(4) in respect of Statutory Rule No. 23.

Ministers' exemption certificates under section 9(6) in respect of Statutory Rule Nos. 5, 103, 105, 106, 107, 108, 109, 110, 111, 113, 115 and 116.

Surveyor-General — Report on the Administration of the Survey Co-ordination Act 1958, 2007–08.

Victorian Broiler Industry Negotiation Committee — Minister's report of receipt of 2007–08 report.

A proclamation of the Governor in Council fixing an operative date in respect of the following act:

Road Legislation Further Amendment Act 2007 — Sections 3, 4 and 18 to 29 — 29 September 2008 (*Gazette No. G39, 25 September 2008*).

BUSINESS OF THE HOUSE

Restoration of order of the day

Mr D. DAVIS (Southern Metropolitan) — I move:

That, pursuant to standing order 6.15, the resumption of debate on the motion moved by Mrs Kronberg relating to walking school bus programs be restored to the notice paper.

Motion agreed to.

General business

Mr D. DAVIS (Southern Metropolitan) — By leave, I move:

That precedence be given to the following general business on Wednesday, 8 October 2008:

(1) notice of motion given this day by Mrs Peulich relating to the Cranbourne landfill gas leak; and

(2) notice of motion given this day by Mr Kavanagh relating to the deterioration in the quality of services available to Victorians.

Motion agreed to.

MEMBERS STATEMENTS

Monash Freeway: noise barriers

Mr D. DAVIS (Southern Metropolitan) — My members statement today concerns the issue of freeway noise along the Monash Freeway. People in this chamber will have heard me talk about this matter on a

number of occasions and ask questions of ministers, seek clarification and so forth. But the issue is marching on, dare I say, and last Saturday 200 people gathered in protest on the Burke Road crossing of the freeway.

There was great anger at that meeting, as the government has persisted with its plan to widen the freeway — a plan that is supported by everyone — but persisted with that plan without an appropriate step to ensure modern and satisfactory sound barriers are erected along that freeway expansion.

The government is persisting with its plan to slide down the requirements. Sixty-eight decibels is what the government has decided it will build the new freeway expansion to, and previous changes along that section have been done to a 63-decibel standard.

A little bit to the west, on the other side of Toorak Road, 63 decibels is the standard on the CityLink project. My view is that this government is discriminating against the residents of Monash, Boroondara and Stonnington. It is doing so in a harsh way, and Bob Stensholt, the member for Burwood, has been shameless. He has been hopeless. He is nasty, he is vicious, he is determined — —

The PRESIDENT — Order! Mr Davis will control himself.

Mr D. DAVIS — He is not responsive to the concerns raised by his local constituents. People are very irritated by Mr Stensholt, and it is time he went.

Youth Parliament

Ms PENNICUIK (Southern Metropolitan) — On 2 October I had the pleasure of acting as President for the Victorian Youth Parliament, as I also did last year. I presided over debate on a bill that sought financial incentives for reducing domestic water consumption, and 31 adjournment matters.

I was very impressed with the quality of the adjournment matters raised by the youth parliamentarians, and it was especially noteworthy that, as 2 October was World Farm Animals Day, part of World Animal Week, two matters related to farm animals — one on battery hens and another on live animal exports. Another adjournment issue concerned the horrendous practice of farming caged bears for their bile, an issue I have been working on with Animals Asia Foundation. These Youth Parliament matters are directed to the relevant ministers and will be responded to.

Victorian Youth Parliament is an annual event that provides young Victorians aged between 16 and 25 with the opportunity to develop skills in building relationships, teamwork, public speaking and leadership as well as to have fun. Participants take part in a nine-day residential training program which culminates in them formally debating bills in the Victorian Parliament.

I would like to thank all the participants in this year's Youth Parliament for the excellent bills and adjournment matters raised and for the high standard of their contributions.

The PRESIDENT — Order! Before I call the next speaker, it has been brought to my attention that Mr David Davis may have referred to the member for Burwood as 'nasty' and 'hopeless'. If that is the case, they are unparliamentary terms, and I ask him to withdraw.

Mr D. Davis — I withdraw.

Baringa Special School: Friendship Games

Mr SCHEFFER (Eastern Victoria) — I would like to congratulate everyone at Baringa Special School in Moe on hosting the Friendship Games in Newborough last month. This fantastic soccer tournament was open to special schools across the state, and more than 160 kids from all over Victoria, as far as Wangaratta, attended.

I would also like to congratulate disability support worker Jos Adrichem, who played a big role in organising the event, and all the parents and staff at Baringa. Congratulations are also due to the Latrobe City, TRUenergy, International Power Hazelwood, Loy Yang, Able Onsite Services, Gippsland Water and a number of individual businesses that pledged money after hearing about the event on a Gippsland FM sports show.

The Friendship Games were a fantastic success, and I look forward to the event next year.

National Police Remembrance Day

Mr SCHEFFER — Last week I had great pleasure, along with Tammy Lobato, the member for Gembrook in the Assembly, and Edward O'Donohue, in joining members of Victoria Police and the community in Pakenham on National Police Remembrance Day. The dignified service conducted by Inspector Ron Moseley celebrated the work of Victoria Police on behalf of the community and paid respectful tribute to those who have lost their lives in the line of duty.

Inspector Moseley reminded those present of the great dedication to duty and professionalism that is a hallmark of Victoria Police right across the state.

Inspector Moseley paid his respects to the families of fallen police and honoured their memory. In her contribution Reverend Hilary Roach remembered the 151 men and women who over the past 153 years have made the supreme sacrifice in police service.

Princes Highway, Beaconsfield: noise barriers

Mr O'DONOHUE (Eastern Victoria) — On 9 August this year during the adjournment debate I asked the Minister for Roads and Ports to meet with the long-suffering residents of Beaconsfield whose properties abut the Princes Highway to hear firsthand the great impact that the lack of noise protection from traffic has had on their lives. I am glad that in response to my request the minister met with Mr Ray Fleming of the Beaconsfield and Casey residents action group and other local residents in late August. Mr Fleming is noted as having said that Minister Pallas indicated to the residents — without making any promises — that they definitely fit all the criteria to have the barriers installed.

Now that the minister has met with the long-suffering residents I call on him to provide the necessary funding to enable the immediate commencement of construction of adequate noise protection barriers at Beaconsfield.

Gaming: Cardinia

Mr O'DONOHUE — On another matter, I congratulate the Shire of Cardinia for conducting a survey of its residents with regard to their attitudes toward electronic gaming machines, or pokies. The result of that survey reaffirms the feedback I have received that additional pokies venues are not needed and not wanted in the growth corridor from Berwick to Pakenham.

Slog to Sale

Mr O'DONOHUE — I wish to congratulate the bike riders in the Slog to Sale ride on 4 October this year on riding from Pakenham to Sale in the very worthy endeavour of raising funds for the 4Cs — the Cardinia Combined Churches Caring. I wish all the riders the best of luck, and I hope the event will be a great success.

Labour Union Cooperative Retirement Fund: 30th anniversary

Mr PAKULA (Western Metropolitan) — In the year of its 30th anniversary I rise to pay tribute to Australia's first industry superannuation fund, the Labour Union Cooperative Retirement Fund, which is also my fund.

Back in the mid to late 1970s, access to accumulation superannuation was confined to executives and middle managers. Two storemen and packers union officials, state president Bill Landeryou and organiser Greg Sword, had a vision of retirement security being made available to blue-collar workers via a fund that those workers had a stake in — an industry fund. After Greg Sword had signed up most of the skin and hide industry, Bill Landeryou asked him to relinquish his role as a state organiser and run the fund full time. Significant industrial disputation ensued, particularly with the big retail warehouse employers, who could not fathom the idea of workers and unions managing their own retirement savings. But the battles were won and gains were consolidated with the election of the Hawke government in 1983.

Today millions of Australians can look forward to a more comfortable and dignified retirement than they would otherwise have had, thanks in part to the work of those super pioneers. As Bill Landeryou said at a recent event, not bad for a bunch of storemen and packers!

St Kilda: promenade

Mrs COOTE (Southern Metropolitan) — I wish to speak today about a most pleasant occasion that several members of Parliament and I attended recently at the St Kilda foreshore promenade in the city of Port Phillip. Together with Martin Foley, the member for Albert Park in the Assembly, and my colleague Johann Scheffer, I was present for a very interesting opening of the foreshore promenade at St Kilda. The new promenade will replace the infrastructure that was there, which was old and tired. The promenade is a boardwalk which is 14 to 18 metres wide, and it will assist cyclists, rollerbladers and disabled people to enjoy the foreshore of St Kilda, which is an excellent initiative.

I congratulate the City of Port Phillip on this wonderful initiative because it will open up this entire area. It had a feeling of Los Angeles about it; it was quite exciting. The project is very far-sighted; it is international in character, and it marries Jacka Boulevard with this foreshore area. I suggest that anyone wanting to have a pleasant experience could go down and enjoy this promenade in the city of Port Phillip. The project involved the creation of a new modular pre-cast concrete seawall, the installation of concrete and precast unit pavements, a timber boardwalk and contoured timber structures, custom-designed beach showers and drinking fountains, and over 90 new established trees to provide shade during summer. I encourage everyone to enjoy this boardwalk.

Victorian Women Lawyers: workplace protocols

Ms PULFORD (Western Victoria) — On 27 August this year I launched the Victorian Women Lawyers' (VWL) new flexible workplace protocols. The legal profession has not always enjoyed the most family-friendly reputation. The protocols are new tools that show employers and employees alike how to adapt work to make it more flexible. They provide information about how to change the span of working hours to create a four-day week, how to create hour banks and how to implement 48/52 schemes. The protocols detail how to introduce paid maternity leave and make work hours match school hours; they cover flexible carers leave and child-care support and explain how lawyers can use technology to catch up on work out of ordinary hours. At the launch, tips were shared about how to manage client expectations.

I would like to congratulate Christine Melis, convenor of Victorian Women Lawyers, Jennifer Kanis, the assistant convenor, members of the work practices committee and Victorian Women Lawyers as well as their sponsoring firms for developing these protocols. I also thank Joanne Cameron and Mallesons for hosting the event.

For governments, turning around a workforce culture that has evolved over a century is no easy feat, but the Brumby government's new flexible work protocols and recent changes to the Equal Opportunity Act will be greatly enhanced in the legal profession by the work of the VWL, and I congratulate its members on this important endeavour.

Taiwan: national day

Mrs KRONBERG (Eastern Metropolitan) — The story of Taiwan and its people is nothing short of a miracle. Their spirit, courage, will, drive and collective purpose have flourished during difficult times. On 10 October the Taiwanese people will celebrate their Double Tenth National Day. The Republic of China, the first republic of Asia, was officially founded in 1 January 1912. However, the date was changed to 10 October, or the double tenth, because the Taiwanese felt that the actual rising up of a group of followers of Dr Sun Yat-sen in 1911 was more auspicious. Dr Sun Yat-sen's people rose up in Wuchang in the county of Hubei as their protest against the corrupt Manchu government. This event not only united the Chinese people but led to the overthrow of the imperial regime.

The path since the republic was founded has been strewn with many great obstacles, and still the 23 million people of Taiwan face the daily tensions that result from China's rapid military build-up to quell Taiwan's desire for full independence. It is my fervent wish that a future Taiwan be assured of unfettered access to ongoing freedom, prosperity and the benefits of democracy.

My congratulations go to Mr Calvin Yen, director general of the Taipei Economic and Cultural Office, for his splendid celebratory reception.

Liberal Party and The Nationals: water policy

Mr VINEY (Eastern Victoria) — I am sure the house will recall that on a number of occasions I have identified that The Nationals have proposed that as part of their water strategies for Victoria the Mitchell River in Gippsland should be dammed and that that policy position of The Nationals was supported by the VFF (Victorian Farmers Federation) in its submission to the Environment and Natural Resources Committee investigation into water. However, it appears that that is not actually the policy of the Liberal Party, because on 19 September the Leader of the Opposition in the other place, Mr Baillieu, said on Gippsland ABC radio:

> In regard to the Mitchell, we've said in the past there — there may be some room for some — some offer of a storage there, but that's not a — a dam …

'That's not a … dam'. I am pondering this. I am not quite sure what Mr Baillieu means. The Nationals are saying 'dam it', the VFF is saying 'dam it' and Mr Baillieu is saying he does not support damming it but there is opportunity for storage. I am not sure what he wants us to do in Gippsland — perhaps to drive down, chuck in a bucket on the end of a rope and pull it up; that would be a bit of extra storage. Maybe he wants us to go back to the idea of taking the jerry can down, chucking in the hose, siphoning it out, filling a jerry can and taking it home. Clearly the opposition is all over the place in relation to water strategies for Victoria.

Preston Girls Secondary College: 80th anniversary

Ms MIKAKOS (Northern Metropolitan) — On 13 September I had the pleasure of attending the 80th anniversary of the Preston Girls Secondary College. The celebration was attended by students, staff, parents and friends who have been associated with the school over the years. Since its foundation in 1928 the school has provided quality education to girls in the northern suburbs and has grown with the dedication of its staff, parents and students. I would like to congratulate the school principal, Ms Cheryl Judd,

her staff and students for an excellent day of activities and celebrations.

Reservoir Leisure Centre

Ms MIKAKOS — On 28 September I had the pleasure of attending the official opening by the mayor of the City of Darebin, Cr Peter Stephenson, of the redeveloped Reservoir Leisure Centre, which was refurbished with council and state government support totalling $3.4 million. The council celebrated a healthy community and highlighted the wide range of activities that will be available at the centre for people of all ages to partake in to maintain good personal health and wellbeing. Congratulations to the City of Darebin.

Banyule Community Health: problem gambling and primary care partnership

Ms MIKAKOS — On 16 September I attended the launch at Banyule Community Health of the problem gambling and primary care partnership initiative by the health and gaming ministers. The Brumby government has allocated $2.1 million to 31 Victorian primary care partnerships to fight the causes of problem gambling holistically and to address the risk factors that lead to it by addressing problem gambling as a public health issue.

Abortion: legislation

Mr RICH-PHILLIPS (South Eastern Metropolitan) — I draw the house's attention to a petition I have been asked to present. The petition reads in part:

> The petition of certain residents of the south-eastern/eastern metropolitan region draws to the attention of the house:
>
> We believe that the Abortion Law Reform Bill 2008 is tabled for the upper house and will be debated from 9 September.
>
> We wish to remind the house that in all deliberations and decision making on this matter, that the sanctity of life be upheld and protected. Killing a human being — before or after birth — is always a serious offence. Allowing such killing in the womb for any and every reason up to 24 weeks is a travesty of justice. Abortion has serious consequences for the woman.
>
> We need to hold compassionately to the needs of parents, children and the medical profession, hold sacredly the value of each child's life — even of those whose life is tenuous and brief — the gift of naming, touching, honouring, shared pain, grief and remembering. Contrast this with the silent shame, guilt and grief for denied children who have been disposed of as unwanted material.
>
> Therefore we strongly oppose any decriminalisation of abortion or change to present legislation on abortion.
>
> The petitioners therefore request that parliamentarians vote 'no' to the proposed reform to legalise abortion.

The petition bears 110 signatures.

Bridges: Yarrawonga–Mulwala

Ms DARVENIZA (Northern Victoria) — I want to inform the house how delighted I am that the Brumby government has affirmed its commitment to build a new Lake Mulwala bridge crossing by 2020. The Moira shire has received notification from roads and ports minister Tim Pallas on the time frame for delivery of the bridge. Detailed study plans could start as early as next financial year. Once the preferred route has received the appropriate planning, environmental and funding approvals, construction can begin. It is possible the bridge could be completed during the 2018–19 financial year.

The new bridge will replace the two bridges that currently cross between Yarrawonga and Mulwala. The government has approved the purchase of the Yarrawonga police station, which may be required for the future bridge crossing. One of the crossing options traverses land currently occupied by Victoria Police. This announcement on the delivery time frame is vital infrastructure and clearly demonstrates the Brumby government's commitment to building the new bridge across Lake Mulwala by 2020.

Britt Lapthorne

Mrs PEULICH (South Eastern Metropolitan) — I would like to call on all members of this house to exercise their political influence to secure a stronger federal interest and action in securing the location and return of 21-year-old Victorian, Britt Lapthorne, who disappeared 17 days ago in the popular seaside tourist city of Dubrovnik in Croatia while on her overseas travel, an activity that many young Australians engage in.

Her family is so frustrated that one of her relatives, Angharad Lodwick, has embarked on a solo protest at Parliament House in Canberra to draw attention to the lack of federal government response. I ask for the indulgence of the house to issue a plea to the Croatian community here in Victoria as well as abroad by saying a few words in Croatian: ovo je molba Hrvatrima u Vikorije i u Hrvatskoj. Pomozite nam da nadjemo mladu Britt Lapthorne čija familija, i svi Australijanci žele da nam se vrati živa i zdrava sto prije.

Ringwood: transit city

Mr LEANE (Eastern Metropolitan) — I would like to commend the Premier on his recent announcement of $32 million funding for the Ringwood transit city. It will go towards much-needed improvement to the bus exchange and important public works on the south side of Maroondah Highway. These works will marry into the $500 million of works that the Queensland Investment Corporation has committed to Eastland and also for open space on the north side of the highway.

I thank the Treasurer and the Minister for Planning for their hands-on involvement in making sure that this project continues to be delivered. They have joined me and a number of stakeholders at a number of meetings to make sure the machinations are possible so that the project can go ahead. I congratulate the Maroondah council and in particular the mayor, Tony Dib, and chief executive officer, Mike Marasco, for their tireless work in enabling this project to go ahead. The Transit City Advisory Committee has done a power of work in its own time to make sure the project will be a good one on completion.

I look forward to working with that committee and other stakeholders to push the maximising of affordable housing in this project. With this amount of money being spent it is important we make sure a large provision is made for affordable and social housing in this project.

ABORTION LAW REFORM BILL

Second reading

Debate resumed from 12 September; motion of Mr JENNINGS (Minister for Environment and Climate Change).

Mr Kavanagh — On a point of order, President, the bill mentioned is out of order. The bill was not introduced in this house or in the other house with a statement of compliance with the Charter of Human Rights and Responsibilities. A statement of compliance is required under the Charter of Human Rights and Responsibilities Act before any bill with implications for rights in the charter can be considered by either house of this Parliament.

The minister in the other house and the responsible minister in this house have sought to rely on section 48 of the charter to avoid the need to produce a statement of compatibility. Legal opinion from legal firm Phillips Fox, which opinion is in the public domain, concludes that the minister was mistaken in so relying on that exclusion. Section 48 states in part:

> Nothing in this charter affects any law applicable to abortion or child destruction …

But the bill affects much more than simply abortion and child destruction. The bill also affects a range of other rights that are detailed in the act, including guarantees of equality and non-discrimination under section 8(3) of the charter and issues of rights against unlawful or arbitrary interference with privacy under section 13(a) of the charter.

The bill affects freedom of thought, conscience, religion and belief guaranteed under section 14 of the charter. There are also issues about whether the bill raises new criminal offences. In short, this bill affects many more sections of the charter than section 48 alone, and under section 28 of the charter these must be addressed in a statement of compatibility with the charter before a bill can be properly considered by either house and be in order.

A required statement was not put before either house and therefore consideration of this bill by this house is out of order. I have several copies of the legal opinion from Phillips Fox for the benefit of members of the house if they so desire; that opinion completely supports my contention.

Hon. T. C. Theophanous — On the point of order, President, may I refer you to the fact that this will be a highly emotional debate for many people. It is important that we conduct the debate in the context that the substantive part of the bill — —

The PRESIDENT — Order! Mr Theophanous is correct in what he has said so far, but I remind him that he does not have the opportunity to debate the point of order. I ask him to address the point of order.

Hon. T. C. Theophanous — As the member has said, under section 48 of the Charter of Human Rights and Responsibilities Act it states:

> Nothing in this Charter affects any law applicable to abortion or child destruction whether before or after the commencement of part 2.

The government has indicated that it has had its own legal opinions in relation to this and it believes the charter does not apply. President, I put to you that this is not a matter for the President to rule on, rather this is a matter for the house. The government has put forward its legislation, and it is open to anyone in the community to challenge legislation in legal forums, but this is not a point on which you, as President, are

empowered to make a decision. I therefore put it to you, President, that given your powers you should rule this point of order out of order. I say that as someone who does not support the legislation.

Mr Kavanagh — Further to Mr Theophanous's point on the point of order, what I have argued is that it is out of order to consider this bill. That is a decision for you as President of the Legislative Council. According to legislation this bill is out of order because it does not comply with legal requirements.

The PRESIDENT — Order! In response both to the point of order and Mr Theophanous's rebuttal and to Mr Kavanagh's further point, I need to remind the house that I adjudicate on matters contained within the standing orders. The issue as to whether or not Mr Kavanagh is correct is a matter for the house. I must say it is a complicated and interesting point of order that Mr Kavanagh has raised, but I am confident in the advice I have been given that I have no authority to rule on that matter; it is simply a matter for the house. Any questions relating to the validity of the act are simply matters for the courts.

I note that Mr Kavanagh has indicated he wants to raise another point of order. As long as it is not related to his previous point of order, he may do so.

Mr Kavanagh — On a point of order, President, I submit that something that is not compliant with the law is by definition out of order in this house. I have several copies of opinions provided by DLA Phillips Fox that support everything I have said.

The PRESIDENT — Order! I remind Mr Kavanagh and the house that one cannot debate one's point of order. The point of order Mr Kavanagh has raised is directly related and very similar to the point of order he previously raised, so I rule it out of order.

Ms LOVELL (Northern Victoria) — I rise to speak on the Abortion Law Reform Bill. In doing so I acknowledge the many constituents — both for and against this bill — who have contacted my office. Over the past few months I have met with and received letters and emails from many constituents and groups both for and against this bill. I thank each and every one of them for taking the time to contact me; so often important bills pass through these chambers with little or no community interest, and it is not until they become law that the community realises the impact they may have on them. As MPs we often lament the level of disinterest the community has in the political process, so it has been refreshing to see active interest in this bill from both sides of the debate. However, in saying that, the reality is that much of the interest in the legislation has come from outside my electorate and even from interstate or overseas.

This morning I had my office staff do an analysis of the contact we have had from people within the electorate. We can do this because our computer programs allow us to tag where a letter comes from and whether it comes from a constituent within the electorate. There are 419 004 constituents on the voting roll in my electorate, and 564 of them contacted my office to lobby for or against the bill — this equates to only 0.13 per cent of constituents. A lot of them were high school students and not enrolled voters, but we have still included them in the numbers. In speaking with many of these people I found that unfortunately there was a lot of misleading information about this bill in the electorate. When they found out what the bill did, many of them were more than willing to listen to an alternative point of view.

Very early on in the consultation process for this bill I distanced myself from my personal views and religious beliefs in making a decision as to whether I supported the bill. I felt there was a need to look at the legislation on a more practical level. We are not here today to debate whether abortion will continue to be legal or whether it will be illegal in this state. The reality is that abortion is legal in Victoria today. It was made legal almost 40 years ago in 1969 by a Supreme Court ruling by Justice Menhennitt in the case of *R v. Davidson*. Not only is abortion recognised as a legal procedure in Victoria, it is also recognised by the commonwealth government, because abortion procedures are funded by Medicare. Regardless of how we vote on this legislation, abortions will continue to be legal, funded by Medicare and performed in Victoria. Because these procedures will continue to be performed in Victoria it is my responsibility as a legislator to ensure that they are provided in the safest possible medical environment and regulated under the most appropriate legislation.

In coming to my decision as to whether to support the bill I have read the current legislation, the report of the Victorian Law Reform Commission and various other publications, as well as meeting with many constituents and groups. My decision to support this legislation is based on my belief that it is a better and more appropriate legislative framework for these procedures to be regulated under.

If we look at the history of abortion, we will find that the practice dates back to before the fifth century. In the past laws prohibiting abortions meant that these procedures were performed in backyard clinics, and

desperate women risked their lives to access abortion. In 1969 in the Supreme Court case *R v. Davidson* Justice Menhennitt made a historic ruling that has guided the provision of abortion in Victoria for the past 39 years. Despite this ruling, abortion has remained in the Crimes Act, and this has meant that there has been a level of uncertainty for women accessing these procedures and for the doctors performing them. This legislation will provide greater safeguards for and clarity to women accessing the procedures and also to the doctors performing them.

The bill draws on the recommendations of the Victorian Law Reform Commission which were presented to the Parliament in March. The VLRC put forward three models for consideration. The first, model A, would codify the Menhennitt ruling. Under model A an abortion would be lawful on condition that the woman's consent has been given, a medical practitioner has determined that the abortion is necessary because of the risk of harm to the woman if the pregnancy is not terminated, and a medical practitioner performs or supervises the performance of the abortion. As I said, this would have codified the ruling that has governed the provision of these services over the past 39 years in this state. Whilst this ruling has served Victoria well, there is probably no doubt that the boundaries of the common-law ruling have been pushed.

Model B presented by the VLRC is the model upon which the Victorian government has largely based this bill. Model B offers a two-tiered approach to the regulation of abortion that separates early and late-stage abortions. Late abortions are defined as those where the pregnancy has exceeded 24 weeks gestation. Abortions before that gestation period are regulated in the same way as any other medical procedure and would be the subject of a private decision for a woman made in consultation with her doctor, the only requirements being the woman's consent and that the procedure be performed or supervised by a medical practitioner. Once a pregnancy has passed 24 weeks gestation the abortion would be lawful if one or more doctors determined that it was necessary to prevent risk or harm to the woman if the pregnancy continued. As I said, model B is the model upon which the Victorian government has modelled this legislation.

Model C proposes that abortion be governed by the same legal rules which regulate all other medical procedures and allows for abortion to be lawful at any stage of a pregnancy if the woman gives her consent and if the medical practitioner considers it ethically appropriate to perform that procedure. There was a great deal of lobbying from many people for model C to be adopted, but the government has chosen to base its legislation largely on model B.

The purpose of this legislation is threefold: firstly, it will reform the law relating to abortion; secondly, it will regulate health professionals who perform abortions; and, thirdly, it will amend the Crimes Act 1958.

I turn to some of the main provisions of the legislation. Clause 4 of the bill provides that a pregnancy that has not proceeded past 24 weeks gestation can be terminated by a health professional and will be regulated in the same way as any other medical procedure. The clause provides that a woman, in consultation with her doctor, has the right to access an abortion procedure. As with any other medical procedure, a doctor will be required to act in line with professional medical conduct. This requires a doctor to talk to a patient about the risk of the procedure and any alternative options. It is not necessarily abortion on demand, but a consultation between a woman and her doctor about what the best result for her health would be.

Clause 5 of the bill provides that terminations that occur post 24 weeks gestation will be regulated differently. The clause provides:

> (1) A registered medical practitioner may perform an abortion on a woman who is more than 24 weeks pregnant only if the medical practitioner —
>
> (a) reasonably believes that the abortion is appropriate in all the circumstances; and
>
> (b) has consulted at least one other registered medical practitioner who also reasonably believes that the abortion is appropriate in all the circumstances.
>
> (2) In considering whether the abortion is appropriate in all the circumstances, a registered medical practitioner must have regard to —
>
> (a) all relevant medical circumstances; and
>
> (b) the woman's current and future physical, psychological and social circumstances.

Again, this is not abortion on demand, but there are requirements that two doctors must be satisfied with before they proceed with a post-24-week pregnancy termination.

There have been some concerns surrounding the gestational limit of 24 weeks that is set out in this bill. I acknowledge people's concern about that limit, but in reality this bill reflects not only the recommendation of the Victorian Law Reform Commission's report but also the current gestational limit whereby late-term abortions require a review by a termination review panel at the Royal Women's Hospital and Monash

Medical Centre of 23 and 24 weeks respectively. This 24-week gestational limit mirrors current practice at the Royal Women's Hospital and the Monash Medical Centre, and it is also the gestational limit that was recently adopted by a committee of the Westminster Parliament in the United Kingdom.

Clause 6 deals with the supply or administration of drugs by a registered pharmacist or registered nurse for a woman who is not more than 24 weeks pregnant, and clause 7 provides that a registered medical practitioner may direct a registered pharmacist or registered nurse who is employed or engaged by a hospital to administer or supply a drug or drugs to cause an abortion in a woman who is more than 24 weeks pregnant, but that would only be done at the direct written instruction of the medical practitioner.

Clause 8 of the bill deals with obligations of registered health practitioners who have a conscientious objection to abortion. The clause provides that such people will not be compelled to perform abortions; however, they will be required to refer the woman to another registered health practitioner who the practitioner knows does not have a conscientious objection to abortion. This clause has also attracted some concerns. The AMA (Australian Medical Association) has expressed particular concerns that the bill infringes the rights of doctors who have a conscientious objection to abortion by requiring them to refer women to another doctor who does not have a conscientious objection. The need to refer was a recommendation of the Victorian Law Reform Commission and ensures that those women who need timely access to these procedures will be referred to a doctor who can assist them in a timely and safe manner.

I have spoken to some doctors who are vehemently opposed to this clause. I also took the opportunity to speak to my doctor, not about this clause in particular but about the bill in general. I was visiting my doctor and he asked me about another piece of legislation which provides for nurses to administer flu vaccines during a flu pandemic. I thought that, as he had asked me about a piece of legislation, I probably had the right to ask him about a piece of legislation that interested me. We had a very frank and open discussion about the legislation and about access to these services in Victoria. I was very pleased to know that, if I found myself in the dreadful situation of having to consider accessing this type of service, I have a doctor who would sit down and discuss it with me rationally, advise me of my options and provide the most appropriate medical care for me.

Part 3 of the bill deals with the amendments to the Crimes Act, and clause 9 repeals section 10 of that act. Clause 10 also amends the definition of 'serious injury' to include:

> the destruction, other than in the course of a medical procedure, of the foetus of a pregnant woman …

Clause 11 of the bill introduces a new offence for an abortion performed by an unqualified professional, so backyard abortions will remain a crime in this state and be punishable by a level 5 imprisonment, which is a maximum of 10 years imprisonment. Clause 11 also inserts a new section that removes any rule of common law that creates an offence in relation to procuring a woman's miscarriage, and it ensures that is abolished from the Crimes Act.

One of the concerns raised by those opposed to this bill is they believe it will increase the number of abortions, particularly late-term abortions, performed in Victoria. The library prepared a briefing on this bill; that briefing shows that in 2004 there were 20 474 abortions performed in Victoria. The Victorian Law Reform Commission report also reveals some statistics on abortions performed not only in this state but throughout Australia. The Australian Institute of Health and Welfare study found that throughout Australia, 94.6 per cent of abortions occurred before 13 weeks gestation, 4.7 per cent occurred after 13 weeks but before 20 weeks, and only 0.7 per cent of abortions occurred after 20 weeks.

The library report also provides statistics on the women who access these services and where they come from. It reveals that a third of all late-term abortions, or those past 20 weeks as outlined in this report, were performed on women from interstate or overseas. Obviously women from interstate and overseas are coming to access those later term procedures within Victoria.

In formulating its report, the Victorian Law Reform Commission also drew largely on the Australian Survey of Social Attitudes that showed 81 per cent of Australians supported a woman's right to choose. The results of that survey have been replicated in a number of other surveys. Quite a few surveys have been conducted by newspapers, but a recent one in the *Geelong Advertiser* of 3 June showed that 71 per cent of respondents thought that abortion should be decriminalised.

On 15 September 2007 the *Australian* reported on studies conducted between 2004 and 2006 and published in *Common Ground: Seeking an Australian Consensus on Abortion and Sex Education.* One of these surveys conducted across a sample of

1200 people found that although 83 per cent supported a woman's right to choose an abortion, 88 per cent agreed it would be good to reduce the current rate, permitting the editor to argue that Australians were both pro-choice and anti-abortion.

In the *Herald Sun* of 3 May 2005 a Southern Cross Bioethics Institute study revealed that 62 per cent of people surveyed supported legal access to abortion on demand; 90 per cent actually wanted to reduce the abortion rate; 95 per cent think women should seriously consider all the alternatives before choosing an abortion; 74 per cent feel more positively about women who choose alternatives such as adoption; 85 per cent support the abortion of a highly disabled foetus; and more than half support the abortion of a mildly disabled foetus.

Another article in the *Herald Sun* of 26 September, one that I was a little surprised to read, reports Family First senator Steve Fielding as saying he supports a woman's right to abortion on demand, and quotes him as saying:

> 'Some of these issues are never yes and no', he said. 'I've always said it is informed consent.
>
> It's a very difficult decision. In the end it's their decision'.

I think he is right, it is a very difficult decision for any woman who chooses to access these procedures. In considering the results of these surveys and the current practice that exists in delivering these procedures at the Royal Women's Hospital and Monash Medical Centre, I believe this legislation is largely reflective of current practice and attitudes, and therefore I do not accept the argument that we will see a marked increase in the number of abortions performed under this legislation.

In fact to suggest that will happen is insulting to Victorian women. I believe the decision to terminate a pregnancy is one that women do not make lightly; indeed it is a decision that women agonise over. The women who make that heart-wrenching decision deserve to be supported by legislation that provides them with the safeguards they deserve.

The aim of this legislation is not to encourage more abortions, it is to provide women with those safeguards and Victoria with legislation that is reflective of current clinical practice and community expectations.

A common desire that has been expressed by those supporting and those opposing the legislation has been to seek better education and support for women so that we are able to reduce the number of unwanted pregnancies, and therefore, the number of abortions performed. I encourage the government to now turn to ensuring programs that assist women are put in place so this objective can be achieved.

Unfortunately we do not live in a perfect world, and there are no easy answers to some of life's most difficult decisions. If we lived in a perfect world every pregnancy would be conceived out of love; every child born would be wanted and loved; and every child born would be perfectly healthy and perfectly formed. Unfortunately we live in a world where some pregnancies are the result of acts of gross violence and indecency, where the saddest thing in the world is to see an unwanted child treated inhumanely, which so often results in the torture and death of the child.

We have laws that are supposed to prevent these horrific events from happening, but they still occur. We do not live in a perfect world, and we cannot legislate to make it right. In matters such as the legislation before the house today, where people hold such strong opinions on either side of the debate, we cannot possibly hope to please everyone.

As I said earlier in my contribution, regardless of how we vote on this legislation, abortions will continue to be legal and to be performed in this state; therefore, as a legislator it is my responsibility to ensure they are performed in the safest possible medical environment and regulated under the most appropriate legislative framework. I believe this bill offers support and assurance both for women who may be in the difficult position of needing to access these procedures and also the health professionals involved. I also feel it is a better legislative framework than what is currently in place in this state. Therefore I will be supporting this bill.

Mr HALL (Eastern Victoria) — I want to start my contribution to this important debate with a thankyou. It is a big thankyou to all the people who have contacted me to express an opinion about this bill. I know we often complain in our offices about our workload but equally we complain that people in our society are apathetic towards controversial issues such as abortion.

Like probably many other members of this house, I have received literally thousands of views and opinions about this matter. Certainly I know that even today my electorate officers have fielded something like 70 letters, and there has probably been an equivalent number of emails that have come through about this issue. In receipt of all these, I responded to as many submissions as I could, but it became physically impossible to respond personally to the further representations that were presented to my office. I apologise to those people to whom I have not responded personally, but it was simply the sheer

volume of work that has prevented me from responding to each of them.

I invite those who have contacted me about the issue to look at *Hansard* tomorrow and read the reasons why I have made the decision which I will come to on this bill. I think it has been a healthy thing that many thousands of people have contacted us by way of postal mail, email, telephone conversations and also in person. As I said, it has been encouraging and well worthwhile. I have repeatedly told people that I am undecided on this issue and indeed until the last day or two I remained undecided. However, I have a duty to make a decision this afternoon, and I will do that.

Secondly, I want to make some comment about the nature of what has been described as a conscience vote on this issue. To clarify that terminology for myself, it means that I should have regard to all the views being expressed in my electorate and make some judgement about those who have not contacted me when I am making a response about this bill. A conscience vote is not simply what Peter Hall thinks; a conscience vote is partly what I think but also partly what the people whom I represent think. So it is that in considering this bill I have taken into consideration the views of others, and not just assumed that the personal view I might hold is the right one by any means.

I also want to emphasise that I fully appreciate the gravity of the decision that I am making here today. Abortion is a very serious issue, and I have spent countless hours — probably like many other members — rehearsing what could turn out to be my speech in the Parliament this afternoon. Whether at night when I should be sleeping, whether while in a motor vehicle driving around a country electorate — you have a lot of time to think about these sorts of things and you make some great speeches on the road — or even while doing the ironing on the weekend, I was absorbed with what I might say on this particular subject.

Despite what people say about MPs, I think most of us will treat the decision we make on this bill as one of the most serious we have ever had to make. I want to assure people that I have not treated the seriousness of the decision that I will make this afternoon lightly whatsoever.

As well as people understanding this, they need to know that I do not have a faith of such strength that it guides my views on this subject. Nor do I have the personal experiences that would give others who may have had those personal experiences a better insight in coming to a decision on this matter. The decision that I make today is one that I have reached after much listening to and consideration of the views expressed by many people both for and against the legislation. I know and have no doubt that parts of my electorate — and probably parts of my party as well — will find my decision this afternoon disappointing. All I say is that this decision has not been taken lightly, and I hope that by reading my comments in *Hansard*, people will at least understand the decision I have come to even if they do not agree with it.

I also wish to comment on some of the background material that has guided me to the decisions I am about to make. The first point is in relation to the number of abortions that occur in Victoria each year. I was surprised to learn we are unable to obtain accurate information about the number of abortions occurring and at what stage of a pregnancy they occur. As I understand it, having read the literature from the Victorian Law Reform Commission and also material put forward as a collation of many views by the parliamentary library, the statistics upon which I make my judgement show that there are about 20 000 abortions per year in Victoria.

To use the figures quoted by the law reform commission and repeated in the minister's second-reading speech, 94.6 per cent of abortions occur before 13 weeks gestation, 4.7 per cent between 13 and 20 weeks, and less than 1 per cent after 20 weeks. Although we are only talking about the 1 per cent figure, that should not in itself be treated as a small figure without real concern, as 1 per cent of 20 000 is 200, which is certainly still a significant number of abortions — what some people would call late-term abortions — after that 20-week period.

I understand some of the reasons why we cannot get an accurate figure on this medical procedure. I understand for Medicare purposes some of the different medical treatment services are bundled together under the same Medicare number and consequently it is difficult to rely on the Medicare feedback to try to accurately determine how many abortions occur in any one year. That is also complicated by the fact that the Victorian and Tasmanian figures in respect of some of these medical procedures are also treated as one and are not differentiated as between the two states.

I also understand there is an inability to require the statistics that may arise from private hospital services or there might be many such medical treatment procedures which people do not pursue some recourse for through Medicare. I understand the reasons why we are best-guessing these figures on the abortion rate, but I have always held the view that good legislation needs

to be supported by accurate information. In that regard I think there are some deficiencies in terms of the statistics which have led us to the point we are at today. That is unfortunate, and we need to do something about it in the future.

I need to make the point that many views expressed to me have had an implied, if not actual, suggestion that it is necessary to vote against this bill in order to reduce the number of abortions occurring each year. That is an interpretation I gained from many of the submissions made to me. I agree with that view to the extent that we should be trying to do everything possible to reduce the number of abortions in this state. That means that we need to talk about the whole issue more openly in public. It has been a discussion somewhat veiled in secrecy because of what I believe is the criminality aspect of the procedure. We need to be more open about it, and we need to be talking to women, partners and families across the state and trying to support them in the very traumatic and complex decisions they have to make in respect of abortion.

I disagree to an extent with the view I just espoused, which has been put to me by many, that this legislation is necessary to reduce the number of abortions we have in Victoria each year. The fact is that if this bill is defeated in the Parliament, the current situation remains. The regulation of abortion will be dealt with under the Crimes Act and it will therefore be regarded as criminal activity. I do not think that is going to help in understanding the issue, getting a better handle on how we might help people and acting in a responsible way. To those who have implored me to vote against the bill, all I say is that I want them to understand that if I vote against the bill or if the majority of people in this Parliament vote against the bill, we are no better or worse off; the current situation applies. I want to do something about the abortion rate in Victoria, and for those reasons I believe we have to think creatively and see if there are not better ways in which to provide the legal framework for this medical procedure. I argue that if this bill is supported by the Parliament, it will in some sense help address the abortion rate if we as a society become more open about the topic and are prepared to discuss it with reason and rational thought.

Even though I do not have the personal experience of having been involved in making a decision of that nature, I am convinced it is one of the toughest decisions a woman and her partner will ever make. As I said before, it is a very complex and no doubt traumatic decision. Having experienced being a father and grandfather, I can understand the joy and beauty new life is all about and what sheer delight it brings to parents and, as in my case, grandparents. I therefore find it difficult to support an argument which suggests that if we decriminalise abortion, it will make it easier for people to make that decision. I reject that. I do not think that is possible. Whether abortion is regulated under the Crimes Act or under the Health Act, as proposed by this legislation, I do not think the making of that decision will be any more or less traumatic or more or less grave for the people involved and I do not think this bill being passed by the Parliament will lead to a change in the attitudes of people who have had to make that decision in the past.

I make the point that as a society we need to be prepared to discuss these matters more fully and openly and to provide support and knowledge to women who are considering this procedure and give them all the options. To many abortion should be a last option, but unfortunately for some it is probably the only option.

With respect to the culture of discussion in our society, from the many thousands of representations I have received I want to choose one comment that illustrates my thinking on the subject. Louise Keogh commented on the ABC News online Opinion page of Friday, 12 September that:

> Leaving it in the Crimes Act does not stop abortion happening, what it does do is reduce our ability to measure, understand and tackle the underlying causes of our abortion rate in a mature and sensible way.

I agree with the comment that we need to tackle this issue in a mature and sensible way, and I have come to the conclusion that I will support this legislation in the hope that an open and frank discussion of such a decision-making process, unburdened by the veil that the aspect of criminality might impose upon it, will lead to better decisions and better ways to assist women and their partners in dealing with this complex issue of abortion.

Having said that, I want to talk about two technical aspects of the bill. The first is the 24 weeks issue, which certainly brings about a change regarding having an abortion. The differences pre 24 weeks and post 24 weeks are outlined in the second-reading speech and have been referred to by others in this debate. There are many people in my electorate who support the general framework and direction of this legislation but have concerns about the 24-week cut-off point. I have read the material that argues why it should be as it is, but I must say I am not convinced that we cannot do better than that. I certainly support the people who have suggested to me that there should be a lower cut-off point of 20 or even 18 weeks. I think that would be more appropriate and acceptable to the people I represent. I indicate that I am more than happy to look

at, consider and support amendments which we will deal with during the course of this week that reduce that 24 weeks to a figure more like 20 or even 18 weeks.

The other significant issue which has been raised more recently is conscientious objections by medical staff. Again I agree that a very valid point has been raised, and it is something that needs to be dealt with by the government. I hope during the course of this week we have comments from government members that might suggest there has been some discussion about ways in which we can accommodate the conscientious objections of not just doctors but also of people such as nurses, pharmacists et cetera who may be impacted upon by this piece of legislation. Clause 8 of the bill talks about referrals and requires a doctor who has a conscientious objection to refer the patient to somebody who does not have that sort of objection. The word 'refer' can have different meanings, and I hope government members will clarify what they mean by requiring medical practitioners to refer a patient to somebody who does not have a conscientious objection. In the medical sense a referral is something we obtain from a GP if we want to see a specialist. I am not sure if the word 'refer' in this piece of legislation means that sort of referral or whether it means to advise patients of people in the medical profession who might be better able to accommodate their needs. It would be helpful to the debate to know whether the term 'refer' in clause 8 relates to a formal referral from a doctor to specialist or whether it is simply advice that is required to be given.

The fact of the matter is that in respect of all these issues since forever and a day there have been people in the medical profession with conscientious objections to procedures — it may be giving blood or it may be other types of procedures — and in those cases we have always worked around the problem. People will come to understand that if they want a particular service, they can go to somebody who will provide them with that service, and they will probably do some groundwork before they go. In practice hopefully the conscientious objection issue will be addressed by amendments to be moved by the government, but if not, I imagine that in practice people will soon learn who can provide them with the service they are seeking, and the issue of conscientious objection might well be resolved by practice rather than by legislation.

I have concerns about those two matters. I would find amendments to the conscientious objection proposals interesting, and I will give them my full consideration, because if the bill is going to pass, then we should be able to try to make it the best bill possible and the bill most acceptable to all Victorians.

One could go on and raise issues for and against every aspect of this legislation; I do not intend to do so. I have found this a very tough decision to make, as I explained in my opening comments to the debate. As I said before, the decision has not been easy for me because I do not have faith of such strength that gives me some guidance and I do not have those personal experiences. What I have had to do is decide whether to support the bill by listening to and garnering information from a whole range of people, mostly those within my electorate and those with experience in this area.

After much agonising over this decision I have come to the conclusion that decriminalising abortion will assist us in our efforts to reduce the number of abortions occurring each year in Victoria. People might say that is a bit of a pipedream and that this legislation may not do that, but I say, 'Why not give it a go?', because if we do not make any changes, we will have the status quo, which I and many others in my constituency find unacceptable. The regard that I have given to this issue has consisted of many, many hours of consideration, but I am led at the end to support this legislation.

Ms HARTLAND (Western Metropolitan) — An estimated one in three women in Australia has had an abortion. I am one of those women, and I have no regrets about my decision to do that 27 years ago. The three Greens MPs are united in their support of the Greens policy to decriminalise abortion. We were absolutely clear about our policy position during the state election campaign, and therefore we believe we have a mandate to bring this position to Parliament.

I want to dedicate my speech today to women who have died or have been maimed by illegal backyard abortions. Because of my advocacy over the last few weeks on this issue, a number of women have contacted me and given me their stories, especially stories about when abortion was illegal before the Menhennitt ruling.

One story in particular really struck at my heart, and it was told by a woman I had formerly worked with. She wrote to me about her grandmother who, at 25 years of age, had died following a backyard abortion, leaving behind the writer's mother and aunty. Her mother and aunty were then placed in long-term foster care in a Catholic institution where they then also had to suffer the stigma of how their mother had died.

I would also like to thank the men and women who campaigned for many years to make sure that my generation of women had access to safe abortion. Janet McCalman, in her book *Sex and Suffering*, which is an amazing history of the Royal Women's Hospital,

described some of the terrible consequences of illegal backyard abortions. At any one time up until 1971 the Royal Women's Hospital had two wards that dealt just with women with septus from botched backyard abortions. Some of the methods used by the women in their desperation were:

> … syringing the womb with Rinso, Persil, Dettol, copper sulphate solution, even flammable liquids; and one who died had a notice attached to her bed that she was 'flammable'. They douched themselves with hoses at high pressure. They inserted sticks, twigs, knitting needles, umbrella ribs into their cervixes.

On average 30 incomplete abortions were dealt with in the emergency ward at the Royal Women's Hospital on any one day. If anyone thinks I have just pulled out the most horrific quotes, I suggest they read this book. By 1971, two years after the Menhennitt ruling in 1969, septic abortions had started to fall significantly. By 1972 septic abortions became a rare cause of admission at the Royal Women's Hospital.

The law regarding abortion needs clarifying, so the government was right to refer the issue to the Victorian Law Reform Commission. At the moment we have a Crimes Act that says you cannot perform an unlawful abortion. Since 1969 we have had the Menhennitt ruling which interprets the word 'unlawful'. Under common law, abortion is not unlawful if the doctor honestly believes on reasonable grounds that the abortion is necessary to preserve the woman from a serious danger to her life or to her physical or mental health.

In this situation legislators like you and me are deciding whether a woman should have an abortion, a single male Supreme Court judge is deciding whether a woman can have an abortion, and a doctor is deciding whether a woman can have an abortion. What all these people have in common is that none of them is the actual woman who wants or needs the abortion. It is my view that the woman having the abortion should be the one to make the choice, because it is quite obvious she is capable of making such a decision.

Women are capable of making incredibly difficult decisions. In researching this bill I spoke to doctors and counsellors who deal with the abortion issue on a daily basis. They say women agonise over the decision and that even if the decision is clear, a woman does not make it lightly. This bill gives a woman the ability and the responsibility to make that decision for herself up to 24 weeks of pregnancy. I do not think a woman is less capable of making that decision after 24 weeks, and that is why I supported model C in the Victorian Law Reform Commission report, which gives full agency to the woman.

Like Mr Hall, I have received a number of emails on this matter. One of the things I found quite distressing was that some people were suggesting a woman would wake up at 24 or 25 weeks of pregnancy and decide to have an abortion. I do not believe that happens. Late abortions are being done for the most heart-wrenching and heartbreaking reasons. They usually involve women who have started their pregnancies with great joy and excitement but who have ended them with heartbreak and grief.

It is my understanding that there were between 20 and 30 abortions done last year post 24 weeks. It is truly the exception, and it is done in exceptional circumstances. The bill reflects the reasons why a woman has an abortion after 24 weeks, but it assumes that the woman cannot actually make that decision for herself. I say: who else but that woman knows what she can cope with? I do not doubt her reason, and I do not envy her decision, but I do not believe I have any right to judge her either.

While I do not personally agree with this part of the bill, I will not make any attempt to amend it. One of the good things about this bill is that it reflects current clinical practice. Quite clearly I would oppose any attempt to amend the bill, because that, I believe, will set back current clinical practice.

As Mr Hall has said, decriminalising abortion will not lead to more abortions. I fail to see how protecting doctors and their staff from prosecution will make their patients more inclined to have abortions. The only thing that will prevent abortion is the prevention of unwanted pregnancies. If we want to decrease the number of abortions in Victoria, let us increase the kind of work we are doing around contraception and safe-sex advice, especially for young people. Why do we not have condom vending machines? Why are we not open about the fact that young people are having sex? There are contraceptive failures; why do we not deal with that issue?

One of the things I have found quite shocking in this debate has come from a number of the religious groups and right-to-life groups who say, 'We have to stop abortions, and we have to lower these limits', yet they are not prepared to have this discussion to make sure that we can actually decrease the number of abortions.

I do not feel I have the right to expect a teenage girl to quit school to bring up a child because she and her boyfriend have had a contraception failure. Anti-abortion groups and members of Parliament who believe a woman should have a child no matter what her circumstances also need to reconsider their position. It

would be good to make a list of all of the things that would help a woman to be able to have a child — such as child care so that she can finish her education or return to work, affordable housing, affordable dental and health care, being safe from a violent, controlling partner, real ongoing support if her child has a disability, and financial support if she wants to stay at home.

Unfortunately I have not noticed any of the pro-choice MPs urging their parties to increase the benefits for single mothers.

Mr Pakula — Pro-life.

Ms HARTLAND — Sorry, I thank Mr Pakula very much — pro-life.

I have previously discussed the fact that even though I was raised as a Catholic I am no longer a practising Catholic, but I absolutely understand the politics and the pressure the church has brought to bear over this issue. I would also like to make it clear that I have a lot of admiration for a number of Catholic organisations I have worked with as a welfare worker and as a member of Parliament, such as Jesuit Social Services and the missions that work in the inner suburbs, but I have to say that I have found the attitude of the hierarchy over the last few weeks to be quite deplorable. Its members do not seem to have an understanding of what happens on the ground anymore. These organisations do not direct my moral compass.

Earlier I referred to the irony of anybody in Parliament being given a conscience vote when the issue we are discussing is whether a woman may exercise her own conscience in a decision that affects her. In this debate we are discussing women's rights in the centenary year of non-indigenous women's suffrage. Women still have a different place in our society to men; we are viewed differently and there are different expectations placed upon us. In fact if you sit in this chamber and look up you can see what the founders of Parliament thought of women. There are statues of half-naked women representing different virtues and no doubt having an incredibly important symbolic meaning. They are decorative, but are they really the way we want women to be viewed now? This is a setting in which we will discuss abortion law reform, but fortunately society has moved on since this place was fitted up and decorated. It is appropriate that our laws should reflect the place of women in modern society — our education, our intelligence, the responsibilities we shoulder each day and the fact that we are obviously equal with men.

I have found the debate in the public domain quite fascinating. People who believe abortion should be decriminalised come from all walks of life, from different ethnic backgrounds and from different religions. When I went public with the fact that I have had an abortion I was overwhelmed by the number and variety of people who emailed me, rang me and wrote to me in support. They included people who did not like the idea of abortion and would never have one themselves but did not believe they had the right to judge me on what I had done. I also have to comment on the people who wrote to condemn me to hell — apparently there is a special section in hell for the Greens.

I also found — and other members may have experienced this in the last week — that the language in a number of the emails was quite overwhelming. It was misogynist, it was bullying and it condemned women. One of the classic examples of this was a leaflet about me which was circulated. It condemned me in quasi-judicial language. The leaflet also says that women of reproductive age should not be in the workforce, so I think there are a number of us in this room who should not be here on the basis of the thoughts of that particular man.

I have spoken about what is contained in the bill, and now I want to say a few words about what is not in it. The bill does not contain provision for any compulsory counselling or compulsory referral for counselling. Compulsory counselling, to my mind, is where judges send violent offenders — people guilty of assault, rape, domestic violence or a drug offence; people who need to change their ways. I anticipate that there will be some amendments to the bill that deal with compulsory counselling, and I intend to oppose them. I do not think the views I have expressed today could be a surprise to anybody; I brought up abortion in my inaugural speech last December, and many members know I have campaigned on this issue. We also know an overwhelming majority of people in Australia, roughly 80 per cent, are pro-choice. This includes people who have religious beliefs. I have encountered a number of people who, even if they believe life begins at conception, still do not believe they have the right to judge what women do. Even though they may disagree with abortion, they believe a woman making that choice, and her doctor, should not be punished.

I conclude my contribution to the debate by saying that, even though I am a campaigner for abortion, like many other people who have campaigned to make sure that women are safe, that we do not have to resort to backyard abortions and that women are not going to be maimed, nobody likes abortion. I do not believe pro-choice advocates like abortion; women who have had abortions do not like abortion. Abortion is never an easy choice for a woman, but we want it to be safe and

we want it to be legal so that women no longer feel they are some kind of criminal. We want a woman's doctor and the doctor's staff to be safe from the fear of prosecution and the reality of harassment and murder in the workplace. We recall that there was a terrible murder at the fertility control clinic in East Melbourne, and we do not want that to ever occur again. I have yet to hear any of the anti-choice groups denouncing this kind of violence.

It is truly time we set women free by saying that women are not criminals for wanting to have an abortion, and this legislation goes a long way towards making sure that women are no longer considered to be criminals.

Ms BROAD (Northern Victoria) — I rise to speak in support of the Abortion Law Reform Bill before the house. Approximately 12 months ago I moved a motion in this house requesting permission to withdraw a private members bill to decriminalise abortion. At that time I advised the house that I was moving the motion to withdraw because I believed the actions of the Premier, John Brumby, to commit the government to bringing forward a bill to decriminalise abortion — —

Interjection from gallery.

The PRESIDENT — Order! I am sorry to interrupt, but someone has just left the gallery with a parting gesture and a comment aimed at Ms Broad.

I remind those in the gallery, whom I note have been quite respectfully listening to this very emotive debate, that the standards expected in this chamber are that no member will be intimidated or influenced in any way by a member of the gallery. I ask for continued adherence to that standard, and if that is not possible, I will remove any individual from the gallery.

Ms BROAD — In that vein, can I commend all the speakers on the bill to date for their contributions, and can I particularly endorse the objective, referred to by Mr Hall, of action to reduce the number of unplanned and unwanted pregnancies, and as a consequence of that, the objective of reducing the number of abortions. I think we would all like to see that; I certainly would. I see this bill, if it is passed by this house, as a first step towards achieving that objective and as one of many steps required to be taken in order to ensure that we reduce the number of unplanned and unwanted pregnancies.

As I was saying, I sought the approval of this house to withdraw the private members bill which I had put before the house because I believed the actions of the Premier, John Brumby, to commit the government to bringing forward a bill to decriminalise abortion and provide access to abortion services in line with current practice and consistent with community attitudes, and to seek advice from the Victorian Law Reform Commission (VLRC) about how to go about implementing that commitment in the best possible way, would provide a more comprehensive approach to reforming the law on abortion and better opportunities for the community and experts to have their input.

I believe the fine judgement the house showed on that occasion in agreeing to my motion has been vindicated by the response from the community and the many experts involved, by the information and advice provided by the VLRC, and by the bill before the house, which indeed delivers a more comprehensive approach to reforming the complex laws around abortion than was possible through a private members bill. In saying that, can I again acknowledge and thank the many people who contributed to developing that private members bill and who have continued to make very substantial contributions in the development of the advice from the law reform commission and the bill which is before the house today.

Experts panels were convened by the VLRC to ensure that the commission had access to the best possible advice from professionals of high standing about current clinical practice as well as the complex medical issues, and there are some very complex medical issues involved. The commission delivered what I believe to be a comprehensive report that contains many findings and a great deal of information about the history of abortion laws, about current state, national and international abortion laws, about access to abortion services and current medical practice and about prevailing community attitudes as well as presenting recommendations and models for reforming abortion laws. It is an invaluable report, and I hope members have benefited from studying it as I have, whatever their personal views and experience may be. Professor Neil Rees, the chairperson of the Victorian Law Reform Commission, makes the observation in the preface to the report that it reflects well on the governance of our community that a topic such as abortion has been referred to an independent body for information and advice about reform options before it is debated in Parliament. I wholeheartedly concur with his statement.

The bill before the house draws closely on the recommendations contained in the VLRC's report. The report makes 16 recommendations to improve the clarity of the law, regardless of the preferred model for decriminalising abortion when performed by a medical practitioner, and the bill implements all 16 recommendations. The report further recommends

that no changes or additions to legislation be made in certain areas because it advises that current laws are adequate. The government has accepted all these recommendations, and accordingly the bill does not change or add to the law in relation to the provision of mandatory information to patients before an abortion, mandatory abortion counselling, specific regulation of abortion providers, mandatory reporting of abortions and adverse events, and specific requirements for consent by an adult when a young person seeks an abortion.

In relation to decriminalising abortion when performed by a registered medical practitioner, the bill implements the commission's model B. The commission presented three models for the reform of abortion laws, taking into account the government's commitment to decriminalise abortion and to provide for access to abortion services in line with current practice and consistent with community attitudes. All three of these models sit within health legislation rather than within the Crimes Act. The commission's model B, the model implemented by this bill, provides for a two-stage approach to the regulation of abortion. Up to and including 24 weeks of a pregnancy abortions are regulated in the same way as all other medical procedures. That means that a woman's decision about abortion is a private decision for a woman in consultation with her medical practitioner and whomever else she chooses to consult. After 24 weeks of pregnancy a medical practitioner may only perform an abortion if she or he reasonably believes it is appropriate in all the circumstances, and they must consult at least one other medical practitioner who supports their belief. In forming a reasonable belief that an abortion after 24 weeks of pregnancy is appropriate in all of the circumstances, a medical practitioner must have regard to all the relevant medical circumstances and the woman's current and future physical, psychological and social circumstances.

Common law currently takes into account the woman's current and future physical, psychological and social circumstances in the provision of a lawful abortion. Relevant medical circumstances have been included to ensure that the medical condition of the woman and the foetus are taken into account. These provisions are contained in clause 5 of the bill, and they clarify the circumstances in which a very difficult decision to perform a termination in the later stages of pregnancy can be made.

It is hard to imagine a more difficult decision for anyone to make, and providing legal clarity for the few women, partners and medical practitioners who are confronted by these extremely difficult decisions is the very least that legislators can do. Legal clarity is also important for the professional registration boards which may be required to make judgements in any case alleging professional misconduct under the Health Professions Registration Act as provided for in this bill. Despite the fact that less than 1 per cent of abortions are conducted in the later stages of pregnancy — and at page 36 of its report the commission indicated that in 2005, in Australia the proportion was 0.7 per cent — there is no doubt that these abortions generate the most concern, including for legislators.

The commission took great care in considering these matters in its report, as has the government in bringing forward the bill before the house, and the result is the inclusion of a 24-week gestational limit as provided for in the commission's model B and in clause 5 of the bill. As documented in the commission's report, a 24-week threshold is common for complex cases, and it is reflected in current clinical practice in Victoria, in Australia and internationally. I commend that section of the report to members who need to clarify the comparative situation. This threshold was recently affirmed by the Westminster Parliament.

Members will have received a great deal of material in relation to these matters, because it is a very difficult issue for anyone to have to confront. Amongst the material which I would commend to members who have struggled with these matters — and I understand that members have been receiving a great deal of material, and therefore amongst everything that is being sent and received, material can be lost — I would particularly commend material circulated by Pro-Choice Victoria on 3 September under the signature of Dr Leslie Cannold, the spokesperson for Pro-Choice Victoria. It attached the stories of contemporary Victorian women who have had to confront, not through any choice on their part, the extremely difficult circumstances around the termination of an advanced pregnancy.

While I do not intend to recount these stories, I commend the women involved for their courage in coming forward to tell their stories and the stories of everyone involved in their particular circumstances — every one of them is different. The very first one, Fiona's story, recounts how she had to make a decision to have a termination at a private clinic at 24 weeks after finding herself in the position of having a much-wanted pregnancy, but one which had not turned out the way she had hoped and wished for. Together with her partner, and on advice, she made a very difficult decision which took her some time to make. It is perfectly understandable that women require time to make such an awful decision. Having made that decision, she then, with support, endeavoured to have

that termination at the earliest possible opportunity, but despite her best efforts and the support she received, it did not occur until 24 weeks.

Like Mr Hall, I also spend a lot of time as a country member driving around country Victoria. I happened to be undertaking a very long drive to north-east Victoria a couple of weeks ago when there was a lengthy discussion on ABC radio; it went on for some hours. A whole range of callers told their stories which were publicly aired, which I and anyone else who was listening were able to take in. If I had not had appointments with people who were waiting for those appointed meetings, I would have pulled over to listen properly to those stories, because they were incredibly difficult to listen to, incredibly moving, and, understandably, the women telling them became emotionally affected as they were telling their stories. Those stories are available — the library has recordings of those stories and if anyone is in a position where they are still trying to make up their minds about the issue of a 24-week threshold, then I would recommend that they listen to these stories.

They also canvassed the very difficult circumstances that women face when they find themselves confronted by someone who should be giving them the best possible advice but is not doing so, and they have to go elsewhere because of the objections of the medical adviser. I listened to the stories very intently, and I think they are compelling listening in terms of the issues involved in clause 5 in the bill.

I now turn to another clause in the bill that has generated a great deal of discussion. Clause 8 implements the commission's recommendations in the inclusion of a conscience clause. As part of the context for this, it is important to indicate that current legislation does not allow for conscientious objection by health practitioners to medical procedures, including abortion. Consequently, nor does current legislation require that health practitioners be responsible in how they exercise their conscientious objection.

Notwithstanding the absence of legislation addressing these issues, there is considerable experience and information available about current practice, including the commission's report. I will refer to some of that current practice and experience. I start with the International Federation of Gynaecology and Obstetrics, otherwise known as FIGO. The federation acknowledges that practitioners have a right to respect for their conscience convictions, both not to undertake and to undertake the delivery of lawful services; however, in order to act ethically they must provide public notice of professional services they decline to undertake on grounds of conscience, and they must refer patients who request such services or for whose care such services are medical options to other practitioners who do not object to the provision of such services. They must provide timely care to their patients when referral to other practitioners is not possible and where delay would jeopardise patients' health and wellbeing and, in emergency situations, provide care regardless of practitioners' personal objections.

I think members who have studied this clause in the bill will recognise a high degree of correlation between those provisions and clause 8 of the bill. As well as that, the code of practical ethics of RANZCOG, the Royal Australian and New Zealand College of Obstetricians and Gynaecologists, states that no doctor or patient shall be compelled to act contrary to moral conviction or religious belief, except as required by law. However, when the therapy required is in conflict with the doctor's personal belief or value system, they must make appropriate referral and, with the patient's consent, communicate relevant information to the new practitioner.

Those are two very eminent bodies which have set out an approach to conscience matters which correlates very closely with the approach included in clause 8 of the bill and as recommended by the Victorian Law Reform Commission. I will also mention that RANZCOG in its statement also goes to the matter of a cornerstone of the provision of good health care being the availability of well-trained health professionals. RANZCOG indicates that issues relating to the termination of pregnancy should be included in the education of all health professionals, particularly those who are primarily involved in women's health care.

I would also commend to members a letter circulated by the executive director of Women's Health Victoria, Marilyn Beaumont, which outlines her experience in her former roles with the Australian Nursing Federation — she held the elected positions of secretary of the South Australian branch and federal secretary for eight years. For members who have not read that letter, I point out that it outlines some very clear approaches to dealing with conscientious objection and highlights the circumstances that can arise if proper provision is not made for balancing rights and responsibilities in relation to conscientious objection. Just to refer to one section of the letter, there is reference to representing a nurse who had a conscientious objection to the giving of blood products based on her religious belief as a Seventh Day Adventist. This nurse had taken it upon herself to turn a patient's blood transfusion off. Luckily for the patient, another nurse intervened. There was then a very clear and straightforward response to this

situation, where the advice to the nurse concerned — which I think everyone would have been pleased that she followed — was to find a job in nursing where she would not be in a position of imposing her religious views on patients in the exercise of her conscientious objection. The ANF has a very clear policy in relation to nurses. That has also been circulated to members, and I think it very clearly sets out how conscientious objection should be dealt with in the workplace.

The chair of Family Planning Victoria, Sally Cockburn, has circulated and had published in the *Herald Sun* what is, I think, a very clear letter about these issues of conscientious objection. She indicates in part that doctors who might not know where to refer cases in situations where they have a personal moral position can feel very confident in referring their patients to Family Planning Victoria, safe in the knowledge that it is a government-funded sexual and reproductive health service that does not provide abortion services, and that its highly trained staff offer women non-directional counselling and referral. She asks the rhetorical question, 'Sounds reasonable, so why the fuss?'. There is a lot more contained in her letter, but I will leave members who have concerns about these issues to perhaps take the time to read it.

I have received a great many representations on this matter from some very eminent people. I am sad to say many of them have indicated it is not possible for me to identify them because they are concerned about the repercussions. It is a very sad state of affairs, despite professional codes of conduct and ethics which require doctors — and I am including very senior clinicians — to act in the best interests of their patients, that they should be in positions in publicly funded hospitals where they fear retribution if they speak out on this matter.

One specialist obstetrician and gynaecologist who is prepared to be named and has circulated material to members of Parliament is Dr Desiree Yap. I commend her for taking the time to circulate some quite detailed material to MPs in which she sets out ways to address the issue of conscience, which is, as she puts it, for doctors and not the patients, who seem to be forgotten in some approaches to this question.

She also outlines the situation in country Victoria. This has been a continuing concern of mine as an MP representing almost half of Victoria, knowing that there are indeed very limited services available to women in country and regional areas; that there are some 25 centres where there is only a single practitioner and where women have therefore extremely limited options in terms of the advice they can receive.

For these reasons clause 8 of the bill implements the commission's recommendations in relation to the inclusion of a conscience clause. The Victorian Law Reform Commission recognised that practitioners may have a conscientious objection to abortion and that they should not be compelled to provide abortions. The commission also took the view that practitioners who have a conscientious objection should have certain obligations. Clause 8 is carefully constructed to provide a balance between the right of health practitioners to conduct themselves in accordance with their religion or belief and the right of a woman to receive the medical care of her choice.

I refer to clause 8 and in particular the matter that Mr Hall raised, at clause 8(1)(b), which states:

> refer the woman to another registered health practitioner …

I am advised and I fully expect the minister who has carriage of the bill in this house, Minister Jennings, will confirm that 'refer' is to be taken to have its plain English meaning; therefore it means 'advice' and does not have a more technical meaning in this context.

In conclusion, on this matter of conscientious objection, I indicate that there are some very dire consequences in legislating for conscientious objection without also at the same time legislating for responsibilities and obligations. We certainly see in the United States extreme examples which have caused a whole host of state legislatures to move in this direction of legislating for rights and responsibilities where health practitioners are taking it upon themselves to exercise their moral stance at the cost of care to women.

We are hearing stories from pharmacists of women who are being denied having their prescriptions filled and even stories of pharmacists refusing to fill prescriptions and then tearing them up. These sound like extreme stories; nonetheless, these things are happening.

A senior clinician in a public hospital in Victoria recounted to me his experience of providing advice to a woman in a very advanced stage of pregnancy, which showed very clearly on the information he had available that the pregnancy was incompatible with life and that the pregnancy had no earthly hope of proceeding to term. He had to commence the process of working through those issues with the woman and her partner and of arranging the necessary counselling for that couple to make a very difficult decision. When that very senior clinician went back and reviewed all the information available about that case he realised the information he had available to him at that point had been available to another clinician much earlier in the

woman's pregnancy. That clinician, because of his moral position, had not informed the woman of the situation at that earlier stage. These things do happen, and if we contemplate the situation where we legislate for practitioners' conscience without responsibilities and obligations to balance that, then we enter into very difficult territory indeed. There are many other provisions in the bill, but I am confident that my colleagues and other speakers will address the ones I have not.

I conclude my remarks in support of the bill by thanking everyone who has made representations to me and my office. As other members have indicated, there are too many to respond to individually, but I appreciate all the representations, whatever the views contained within them.

I also acknowledge and thank a number of other people, as other members have. Whilst I have advocated the modernisation of abortion law for some 30 years I am aware that many others have been doing this for much longer. I include in that a host of women members of the Liberal Party who, years before the Menhennitt ruling, tried to convince former Premier Sir Henry Bolte that he should embark on reforming Victoria's abortion laws. They were not successful; some other matters to do with the Democratic Labor Party intervened at that time in history, then the Menhennitt ruling was brought down, so Sir Henry Bolte deemed that there was no need at that time to go any further in reforming the statutes.

Those women were very far sighted. I also acknowledge Labor Party women, and some men, who have been very active in working and advocating for abortion law reform through the party and through many conferences. Many people here have been delegates to conferences where time and again over the years Labor Party members and delegates have debated these matters and adopted a policy in support of abortion law reform, but they have magnanimously left it to MPs to have a conscience vote on the issue.

I also thank organisations like Emily's List and Women's Health Victoria and women like Joan Kirner, Kay Setches and Jo Wainer, along with many others who have been at this for a very long time.

I finish by also commending the Victorian Law Reform Commission and the government on delivering on the Premier's commitment, as well as the ministers who have worked to implement that commitment. I commend the bill to the house.

Mr VOGELS (Western Victoria) — I rise to speak on the Abortion Law Reform Bill 2008. Like all other members of the chamber, I have been inundated with thousands of emails, faxes, phone calls, petitions and personal visits regarding this bill. I must say that in the area I represent, Western Victoria Region, 95 per cent of contacts have asked me not to support the bill.

Let me say at the outset that I will not support the bill. We have been told that it merely decriminalises what is already happening, but I believe it goes much further. The bill provides for abortion on demand up to 24 weeks, while for abortion between six months and birth all that is required is consultation with two medical practitioners — the baby has no say. The central question here is: are we destroying a life? If the answer is yes, as I believe it clearly is — even for the doubting Thomases — if the baby is 24 weeks or older, in my opinion a human life is being destroyed. For that reason, I cannot and will not support the bill.

We heard Ms Broad say there are hundreds of stories about how difficult it is for women to have abortions. I have no doubt about that; it must be one of the most difficult decisions anyone could make. However, those women have a voice; the innocents have no voice — they will never be heard. Under this bill an abortionist considering killing the baby after 24 weeks gestation only has to be satisfied that the pregnancy might — and I stress the word 'might' — affect the woman's current or future psychological or social circumstances.

I think the other house is about to debate a bill allowing same-sex couples and single men or women to have children through surrogacy. If this legislation passes, they will have the opportunity to change their minds about whether their social circumstances mean they still want the child after 24 weeks right up to birth.

In the last 12 months or so I think we all watched with anger the case of a lesbian couple fighting in the courts because twins, rather than a single baby, were conceived. They did not want two children, and they were suing the medical fraternity because they then had two children rather than the single one they had tried to conceive.

Clause 5 of the bill sets out the legitimate reasons for performing an abortion after 24 weeks. Under the legislation this could include: 'The timing is now not right', 'I have lost my job', 'My partner has changed his mind', 'My partner has left', 'I already have two boys, and I do not want another one; I really wanted a girl' and 'Tests show my baby has defects'. Such defects could include eyesight problems and deafness in later life, a genetic predisposition to which can be shown by

family history. All these problems have occurred in my extended family, and each and every person affected has turned out to be a wonderful, wanted and needed member of the family.

If this legislation had existed a century or so ago, we would not have seen the likes of Beethoven, who was genetically predisposed to go deaf, which he did at about the age of 18 or 19. Nor would Andrea Bocelli be here, the magnificent tenor who went blind, nor Stevie Wonder — the list goes on. In this selfish society we only seem to want perfection, and in many cases the perfection we thought we could attain through birth is not possible anyway. We currently have a law which provides that a death certificate must be issued if a baby dies after 20 weeks gestation to make sure and check that there were no unusual circumstances surrounding the death, yet now we are saying abortion up to 24 weeks is perfectly okay.

Let us look at the scenario of a mother who seeks advice on her pregnancy after 24 weeks because of her psychological and social circumstances. If after receiving counselling and advice — under clause 5, weighing up all the options — she is still unsure and delivers the baby prematurely and in a panic disposes of her own child, she would be charged with infanticide, and many consequences would follow. Because she sat down and thought about it she could be charged with murder, yet if she had had an abortion a day earlier, everything would have been fine and there would not have been any problems. How can that be right? After 20 weeks a delivery is considered the birth of a human being; that is defined by our current laws.

I am lucky enough to be a father and old enough to be a grandfather. In my experience you refer to an unborn child as a little brother, sister, niece or nephew. I will be called Pa again when my next family member arrives in a couple of weeks time. I clearly remember my children kicking when they were in my wife's womb. Lynne gave up smoking and alcohol and changed her diet to nurture her babies in the first stages of their lives. Such nurturing is needed, even inside the womb, and it continues after a child is born. Human beings are probably the most useless mammals in the world in the sense that we need nurturing for quite a few years after we are born. Given that the death of a child after a gestation period of 20 weeks requires a death certificate, to me an abortion after this period of time is the killing of a human being.

In conclusion, I believe it is the height of hypocrisy to allow members of Parliament to have a conscience vote on this legislation while not allowing medical practitioners the same right. Clause 8 imposes obligations on registered health practitioners who have a conscientious objection to abortion. Even after informing the woman that they do not wish to advise on, perform, direct or supervise an abortion, the health professional will be legally bound to refer that patient to one of their peers who will perform the abortion. I am not clear on what sanctions or penalties will apply to midwives, nurses or other staff if they refuse to take part in the procedure.

About a month ago many of us saw Gianna Jessen when she visited Parliament. I had a meal with her. She is 31-year-old woman from the United States who defied the odds and survived her mother's attempt to have her aborted at 7½ months. Gianna suffers from cerebral palsy, but she is thankful to be alive. She told me that the doctor who performed the abortion left the room and, luckily for her, there was a nurse or midwife present who heard the baby breathing, realised she was alive and took her to the emergency department — so Gianna is with us today. Under this bill I am not sure whether a nurse or midwife would have legal action taken against them if the same thing happened. If an abortion is performed at seven or eight months — right up to birth — and the doctor happens to leave or something goes amiss and the baby is not killed outright and is still breathing, and the nurse decides the baby is a breathing human being, what happens to that person if they take the baby to the emergency department of the hospital and the baby is revived and survives? I am not sure.

In all conscience I cannot support this bill.

Mr PAKULA (Western Metropolitan) — I rise to speak on the Abortion Law Reform Bill. Firstly I commend all the speakers who have spoken thus far for the manner in which they have conducted this debate. It is certainly my fervent hope that the debate in this chamber continues to be conducted in the same spirit.

This is an enormously difficult issue for members of Parliament to grapple with. Like other members, I have been inundated with correspondence about this issue from my constituents and from other constituents in the state of Victoria. The literally thousands of pieces of correspondence have represented both sides of the argument. Like Mr Hall, I endeavoured to respond to all those pieces of correspondence until it became almost physically impossible to do so. In the correspondence a whole range of arguments were raised both for and against the bill. The debate has taken on a lot of nuance and has seen discussion of many issues which I would say are other than the core issue of the debate. There has been discussion about the future role of emergency departments in Catholic hospitals, the conscientious

objection of doctors, the potential instances of depression in women who choose to have an abortion, counselling and a whole range of well-argued and well-reasoned but also very emotive arguments in relation to the bill.

However, in considering my decision on how to vote on the bill I came to the conclusion that the core argument is the same as it has always been. The core argument is very simple in some respects: does one believe it is the role of the state to prohibit all women from having abortions in all circumstances, or does one believe it is a matter to be decided by the woman undergoing the pregnancy? When you unravel all of the arguments, the core argument remains unaffected. I have always believed that the termination of a pregnancy is a matter for a woman to decide. When one talks about bringing one's conscience into this debate, that is my core principle and it is the reason I am going to support the bill.

Having said that, I could probably sit down, but I want to comment briefly on some of those non-core issues and non-core elements of the debate that have acted to reinforce the fundamental decision I have made. Firstly, I have indicated in debates previously, and I maintain now, that I accept abortion is unlike any other medical procedure. I agree that some framework does need to be put in place around the question of late-term abortions and in response to the removal of abortion from the Crimes Act. I agree with part of what Ms Hartland said, which is that in almost all circumstances of late-term abortion the pregnancy began with great joy and hope, and the woman in question did not simply wake up at 24 or 25 weeks and decide that she had changed her mind.

That said, it is also reasonable to say that in regard to late-term abortions there are other considerations involved. Simply removing abortion from the Crimes Act without any other framework being instituted in its place would have been a decision that I would have had some difficulty with. I am pleased that the government chose to bring forward a bill which was based on option B of the Victorian Law Reform Commission report rather than option C, and it certainly made my decision to support the bill much easier.

Secondly, I have a view about the appropriate nature of the criminal law. I have always believed the criminal law should be reflective of the society in which we live, that it should have empathy and that, almost above all, it should be enforceable. Apart from the criminal law being just, it should also be rational. I do not believe there is anything just, rational, empathetic or reflective about pretending to deal with the question of abortion under the criminal code.

Refusal or failure of the Legislative Council to pass this bill will not, as Mr Hall said, prevent the occurrence of abortion; it will simply lead to the perpetuation of a legal fiction, which is that somehow the practice of abortion is regulated by the criminal code. I do not believe that is an appropriate place for the question of abortion to be dealt with now, nor, frankly, for it to have been dealt with over the last 39 years, so I do not believe perpetuating that by refusing to pass this bill is good public policy.

Thirdly, I have had many arguments put to me, both in writing and in person at my electorate office, about the instance of post-abortion trauma and depression in women who choose to have an abortion. I have to say that I found all of those arguments profoundly unconvincing. I have no doubt that depression occurs in some instances of women who have abortions. I am also well aware that there are many instances of postnatal depression in women who choose to have children. My objection is not so much that but that the argument presumes that no woman is capable of assessing the risk for herself and that no woman is capable, having so assessed that risk, of making appropriate judgements for herself.

The argument also forced me to wonder about both the societal and mental health impacts of the Parliament forcing thousands, perhaps tens of thousands, of women to bear and raise children that they do not believe they are capable of bearing and raising. If we are going to get into a debate about the mental health impacts of abortion on women, let it be an honest debate. Let it at least consider the mental health impacts both of abortion and of the state legislating to refuse to allow abortion.

Lastly — this is not an area that I touch on with any great joy but I need to say it — all of us, whether we are members of Parliament or members of the general public, to a greater or lesser extent self-identify. All of us in our younger lives probably had occasion to identify ourselves as Labor or Liberal or in any number of ways: it is part of the human condition. The views we bring to matters such as these, the views that we bring to our public life, are in many respects not only an amalgam of an intellectual dissection of the issue but also a representation of our sense of how we identify ourselves and who we identify with.

The question of who we identify with is driven largely in all of our cases, not only as members of Parliament but as members of the general public, by the actions and behaviours of the protagonists in any issue. As I say, I have received thousands of pieces of

correspondence, most of which have been incredibly respectful and heartfelt, but some have not been.

As members of the public and as parliamentarians we make judgements based on what we see and on how people conduct themselves. I have to say, and I do not want to tar everybody with the same brush because, as I say, the vast majority of the approaches made to all of us as members of Parliament have been entirely appropriate and respectful, but some of them have, frankly, made it very difficult for me, and I suspect for other members of this house, to identify myself with that viewpoint.

I talk of the actions of the Coalition for the Prosecution of Prenatal Child Killers, represented by Mr Powell; some of the behaviour of the Tell the Truth Coalition in having images of purportedly aborted foetuses sent to my office in envelopes that contain no warning, and having sent to my office correspondence that accuses me of being a murderer and a Nazi and someone who is going to hell.

I am not someone who is easily offended and I am not particularly precious about these things, but as a member of a family profoundly affected by the Nazi Holocaust I cannot even begin to describe to this chamber the effect on me of being described in those terms by people who, frankly, have no idea about my beliefs or my circumstances.

Beyond any of that, I have to say none of it does the cause that they support any favours whatsoever. I do not say any of that in the expectation that the tactics might be changed, because I am sure the advocates who use these tactics have heard all of this before. I do it simply to note that how we identify ourselves and who we identify with is invariably a factor in how all of us make decisions about things every day of our lives.

I want to wrap up my contribution by saying I consider abortion to be a topic which morally is very problematic. It is something that I find entirely unappealing on a personal level. I am a father of two and an uncle of five, and I have never been in a position where abortion has been an option, a reality or a consideration in my life. If I were to be honest, I would say that if I had been in that position, I do not know how I would have reacted, but I suspect I would have opposed my wife having an abortion.

Having said that, I also recognise that it would not have been up to me. It would have been a matter on which my wife would have made a decision on the basis of what she believed she could endure and cope with. Even though in this debate I am exercising my conscience, that is the nub of the argument. Do I as a legislator, as a member of Parliament, believe I have the right to tell every woman in Victoria whether she has the right to make this decision for herself? I do not believe I do, and I do not believe we as a Parliament do. For that reason I will support the bill.

Mrs COOTE (Southern Metropolitan) — The purpose of the Abortion Law Reform Bill 2008 is to reform the law relating to abortion, regulate health practitioners performing abortions, amend the Crimes Act 1958 to repeal the provisions relating to abortion, abolish the common-law offences relating to abortion and to create new offences relating to abortion.

We have been given a conscience vote on this bill, but what does that actually mean? The *Macquarie Dictionary* defines it as a 'free vote', which it then defines as follows:

> … a vote on a motion in which members are free to vote according to their own judgement without being bound by any party policy or decision; conscience vote.

The Parliament of Australia's *Current Issues Brief No. 1 2002–03*, prepared by the Parliament of Australia's library, states:

> Free vote (or conscience vote) — 'a rare vote in Parliament, in which members are not obliged by the parties to follow a party line, but vote according to their own moral, political, religious or social beliefs'.

The Parliament of Victoria's library has prepared an excellent briefing paper, *Current Issues Brief — Abortion Law Reform Bill 2008*, which states:

> Given that the bill is to be subject to a conscience vote by members, Victorian legislators thus face a unique challenge. On the one hand, members will be guided by their own individual beliefs, principles and experiences. On the other hand, members will be cognisant of their role as representatives, and the various representations that have been made to them.

How do we as members of Parliament decide on this complex and sensitive issue — through our political values; through social influences reflected by current opinion, future expectations and by constituents; through our religious values; or through our moral values? It is essential when considering all these issues around our conscience vote to remember that this bill is not about whether or not abortion will be available in Victoria; it is about whether or not it should be a criminal issue or a health issue.

How is our conscience influenced through our political values? I am a very proud member of the Liberal Party. I wish to quote from the Liberal Party state platform adopted by a resolution of the Liberal Party state

council in 2002. The platform is the statement of essential principles based upon Liberal philosophy. The Liberal Party website states:

> We believe in the fundamental freedoms of individuals and groups within society to think, to worship, to choose and to associate.

I am a member of the Liberal Party because I passionately believe it is the right of an individual to choose the direction of their own life.

How is our conscience influenced through social impact? The Victorian Law Reform Commission's report devotes the entirety of chapter 4 to the social responses from wide-ranging polling on this issue. Five polls are detailed, and we must acknowledge that three of the five are from special interest groups. The questions were all about whether or not women should have abortions readily and whether they should have a choice.

Again I remind the chamber that the bill we are debating today is not about whether abortions will be available in Victoria but about whether it should be a criminal issue or a health issue. Given that, these five surveys give us as members of Parliament a global idea of what are contemporary Australia's attitudes to abortion. I will go through them in detail.

The Australian Survey of Social Attitudes was conducted in 2005. There were 3902 participants Australia-wide, and 79 per cent agreed with freedom of choice while 10 per cent said women should not be free to choose an abortion. The Australian Election Study, conducted in 2004, had 1769 participants Australia-wide, and 54 per cent said women should be able to obtain an abortion when they want one. The Southern Cross Bioethics Institute survey, which had a strong anti-abortion influence, had 1200 participants Australia-wide and was conducted in 2004. The question was: should women have unrestricted access to abortion? A staggering 62 per cent somewhat or strongly agreed and only 34 per cent somewhat or strongly disagreed.

The Australian Federation of Right to Life Associations, definitely an anti-abortion group, conducted a survey of 1200 participants Australia-wide in 2005; 60 per cent supported abortion on demand, with only 32 per cent saying they did not. The Marie Stopes International survey, which has a pro-choice influence, conducted a survey in 2006 of 2003 participants Australia-wide on the question, 'Should women be able to obtain an abortion readily when they wanted one?'. Sixty per cent said yes, and only 3 per cent agreed that abortion should not be allowed in any circumstances. These surveys in every case support individual choice and abortion on demand. We have been told that 81 per cent of Australians believe in a woman's right to choose whether she has an abortion. We have had a lot of information, but there is a comment I would like to refer to which was made on Sally Cockburn's *Talking Health* program of 22 September on 3AW. Heather Gridley, from the Australian Psychological Society, gave another very pertinent view on what we are considering here. She said:

> One of the reasons I believe there is such widespread support for this bill is that most people do know somebody personally who has had a termination, if they haven't had one themselves, and they just don't think of that person as a criminal!

That is what this bill is about — the decriminalisation of abortion. As I said before, it is not about whether or not abortions should be available in Victoria. If this bill does not go through this house, abortions will still be available in Victoria and the women who have terminations in the future and the medical practitioners who perform them will still come under the criminal code.

I have looked at aspects of social conscience, as I said I would at the start of my contribution, and I now turn to other social considerations about how we come to the decisions we make in this chamber. As other members who have spoken before me have said, we have been lobbied on this bill more than we have been lobbied on just about any other bill in this place. I have been heavily targeted by the anti-abortion extremists and I have been the recipient of some very unpleasant material, comments and threats. There was only one member in the other place — the Independent, Craig Ingram — who took the time to physically survey his entire electorate on this issue, and he found that 80 per cent of recipients were in favour of individual choice and only 9 per cent were entirely opposed to abortion.

Members of the other place said they had received material, letters, representations, faxes, emails and phone calls from as many as 550 constituents. Although this is a huge number, it is not reflective of anyone's entire electorate. It is reasonably safe to say that the lower house members, with smaller electorates than we have in this chamber, have a better and more immediate view of how their constituents feel. I remind the house that in the Assembly seats there are around 38 000 constituents and in the upper house regions we have in the vicinity of 420 000 constituents. How can we judge the opinion of the 420 000 constituents we have in these regions without extensive and expensive professional polling?

When I look at the contributions made by the members in the 11 lower house seats that come within the Southern Metropolitan Region, I see that of those

11 members of Parliament, 8 voted for this bill and only 3 did not. You can use those numbers to support the argument that we are representing our constituents in the Southern Metropolitan Region, because when you look at how our Legislative Assembly colleagues voted on this bill you see that there was a large majority in support of it. I, too, will be supporting the bill.

There is another issue that should be looked at in relation to current social practices and how we come to the decisions that we make in this chamber. If we look at the current law as it stands and at page 16 of the Victorian Law Reform Commission report, we see that it talks about the existing situation under the Crimes Act. In the Crimes Act there are three sections that refer to abortion: sections 65 and 66 are concerned solely with abortion, and section 10 governs late-term abortions and assaults on pregnant women.

It is timely to talk about the Menhennitt ruling and to look at what we are guided by at the moment. In 1969 the Menhennitt ruling was made in a case against a Dr Davidson, who was accused of unlawfully using an instrument to procure a miscarriage. The word 'unlawfully' has not been defined in the sections I spoke about — sections 10, 65 and 66 of the Crimes Act of 1958. Justice Menhennitt based his judgement on the basis of the term 'therapeutic abortion', and he said that this was possible and permissible if it was necessary to preserve the woman from a serious danger to her life or to her physical or mental health and, in the circumstances, not out of proportion to the danger to be averted. This is mentioned in detail on page 19 of the Victorian Law Reform Commission report. According to Justice Menhennitt an abortion would be unlawful under section 65 of the Crimes Act of 1958 if it did not fall within his description of the circumstances in which a therapeutic abortion was lawful.

Members of Parliament on both sides of this debate have spoken on the Menhennitt ruling. The anti-abortion members of Parliament have said the system is working, so why change it, and that in 40 years no medical practitioner or woman has been prosecuted. The pro-choice members of Parliament have said this bill reflects current attitudes and practice and that therefore it should be taken out of the criminal code and placed in the health code.

A Melbourne University School of Population Health letter to me of 28 August carries 13 signatures from doctors, lecturers and research fellows. This is what they said:

> Voting for the bill in its current form provides the greatest opportunity to create law that reflects current practice and community standards. Additionally, such a law paves the way for a mature and responsible approach to the provision of abortion services as an essential component of comprehensive health care for women in Victoria.

I wholeheartedly agree with this statement. But closer to home, I received a letter from a reverend from a large Anglican church in my electorate. The letter is dated September 2008 and states:

> Many of the young people opposed to a change in law have no knowledge of the risks women once faced and the corruption that accompanied clandestine abortions until the Menhennitt ruling in 1969. Older people recall a situation they do not want to see return.

These are some examples of reflections within our society and our community on this issue.

The essence of the Menhennitt ruling came very close to being overturned. In February 2000 the health professionals at the Royal Women's Hospital were faced with an exceedingly difficult decision. A woman with severe psychological issues was diagnosed as carrying a baby with dwarfism. The woman was distressed to the point of being suicidal. After many consultations between the health professionals concerned — psychologists, psychiatrists, doctors, gynaecologists and the head of obstetrics — the doctors were in no doubt that they had to help this woman, and they reasoned that an abortion would be life saving, lawful and ethical under the Menhennitt ruling. It was decided that if the pregnancy were to proceed, the woman would commit suicide.

The senior medical practitioner in charge of this case was Associate Professor Lachlan de Crespigny. An *Age* article of 13 December 2007 reported him as saying:

> It was life saving … If we didn't do it and the woman died, we would have potentially been charged with manslaughter and gone to jail. So in a legal sense, you could argue that we were compelled to offer it.

This incident shows the grey area in the Menhennitt ruling and highlights the need for clarification of this current situation. The pregnancy was terminated at 32 weeks. A fundamental of the Menhennitt ruling is that a therapeutic abortion is lawful if the practitioner honestly believes it is necessary to preserve the woman from a serious danger to her life or her physical or mental health. The Menhennitt ruling does not specify at what stage therapeutic abortions should stop.

There was no doubt that the continuing of this particular pregnancy would have been injurious to the mother's physical and mental health. Associate Professor Lachlan de Crespigny was sacked and then reinstated, only to be suspended, along with five other doctors, by the Royal Women's Hospital

administration. We then saw political interference when a federal member of Parliament referred the issue to the medical records board and it became widely reported in the media.

The doctors concerned were eventually exonerated, but the entire stressful process took eight years. This has left the highly successful and totally professional Royal Women's Hospital staff and staff at other highly regarded hospitals and clinics uncertain, stigmatised and very concerned about proffering such advice in the future. The issue of abortion being pseudo-legal is discouraging many young doctors from following a career in this vital area. Carol Nader said in her article of December 2007 in the *Age*:

> Professor de Crespigny … is passionate about the need for abortion law changes to erase the uncertainty that is driving some doctors, including himself, to steer clear of abortions.

In Victoria, there is no doubt that abortions will continue even if this bill fails. The essential question is: should we be adhering to an unclear practice developed over 40 years ago, or do we support this bill, recognising current community attitudes towards abortion and increased medical advances? It should be a bill that resides in the health code, and abortion should not be a criminal offence.

We cannot talk about abortion in this state without looking at current statistics. While some of these statistics could be more up to date, they were the ones referred to in the Victorian Law Reform Commission's final report, and I refer to them again. It is very tempting for us in this chamber to succumb to the lobbyists and to launch into the abortion debate, but this is not what we have been asked to do. Having said that, it is important to look at current statistics. Page 32 of the Victorian Law Reform Commission's final report says that in 2004 there were 20 772 abortions in Victoria. The highest rate of abortions was among 20 to 24-year-old women, and the majority of abortions were conducted on women between 20 and 34 years old. In Australia, 94.6 per cent of abortions occurred before 13 weeks, 4.75 per cent occurred after 13 weeks but before 20 weeks, and only 0.7 per cent occurred after 20 weeks.

When this bill was debated in the other place we saw a number of amendments presented, and I expect there will be a great many amendments introduced in this place as well. Many of the amendments put up in the other place related to definitions of language; others related to technical details. Many related to issues that are not matters for members of Parliament, who are unqualified to be making rulings on specific health details, to decide upon. These are matters for expert health professionals, and it is imperative that we understand they are the experts, not members in this place.

Other amendments dealt with issues that were already adequately covered by other existing legislation — for example, the Children, Youth and Families Act 2005, the Drugs, Poisons and Controlled Substances Act 1981, the Health Professions Registration Act 2005 and the Health Services Act 1988. But several amendments were brought up that I have reason to believe will also be presented to this house, and I would like to comment on them. One of these relates to the 24 weeks gestation. I know this issue will be debated in committee, but I would like to point out that we are politicians, and as such we should take the advice of the professions that make medical decisions. These include those represented by the Royal Australian and New Zealand College of Obstetricians and Gynaecologists (RANZCOG), the Australian Medical Association (AMA), the Royal Women's Hospital (RWH) and the Monash Medical Centre. Most recently we saw this issue debated in the Westminster Parliament. All these organisations and institutions agree that 24 weeks is the threshold. We in this place must take note of the professionals who deal with this issue.

Pro Choice Vic has put out an excellent document, and many elements in it are worth reading. I will quote directly from the section headed 'Why do women have abortions at 24+ weeks?', which commences by noting that one of the reasons is a diagnosis of foetal abnormality. The article says:

> When abortion is being considered beyond 24 weeks, the pregnancy is often much wanted but has been diagnosed with a severe problem. Although some screening and diagnostic tests are available early in pregnancy, most abnormalities are still diagnosed later in pregnancy. Many foetal abnormalities are not recognisable or remain undetected until scans at 20 or, for difficult scans such as some overweight women, 22 weeks or later.

And this is the tragic part:

> In some cases, women and their partners will want time to have further tests, pursue further information about the diagnosis, to come to terms with their grief, to investigate options for support if the pregnancy is continued, and to discuss options with friends, relatives and advisers. This process, while essential for good and ethical decision-making, may delay presentation for termination.

I remind the chamber again that according to current statistics, 0.7 per cent of women have terminations at 24 weeks plus.

Under the heading 'Failure to recognise or diagnose pregnancy', the Pro Choice Vic article goes on to say:

> Failure to recognise the pregnancy earlier can occur because of irregular/infrequent menstruation, failed contraception, denial … or medical professionals not diagnosing the woman as pregnant.

Another reason given in the article falls under the heading 'Difficulty in accessing abortion services'. To me this is very concerning, particularly for women in country and rural Victoria. Pro Choice Vic says:

> Women may experience delay in accessing abortion services because pro-life medicos may be unwilling to openly disclose their opposition to abortion and to provide a timely and effective referral. Some women may also get caught in a vicious cycle of being delayed by an inability to afford a termination, and then further delayed when, having raised the money, their increased gestational age means the procedure has become even more costly.

We must take these points into consideration when thinking about this issue.

Another amendment I expect to see in this house and to be heavily debated is the issue of conscientious objection, and I note the comments made by Candy Broad in her contribution. I do not have a great deal more to say at this point, aside from noting that there has been vehement objection to this bill by the Catholic Church and by Archbishop Hart in particular. Ms Broad outlined concisely what clause 8 does and does not do. The Victorian Law Reform Commission recognised that some health practitioners have a conscientious objection to abortion and that they should not be compelled to provide abortions contrary to their beliefs, but the medical practitioner must refer the woman to another registered medical practitioner who does not have a conscientious objection.

It is very important that we get the facts right and that we are arguing and debating facts, not fiction or misinformation. Another issue that will no doubt come up is the issue of girls aged 17 years and below having access to abortion without parental approval. Again this is an issue that should quite definitely be looked into, and I would have to suggest we must concern ourselves and remember that the age of 16 is the age of consent.

In another place when this amendment was brought up it was explained that the age of 17 years and below came from the Children, Youth and Families Act 2005, which designates children who are in need of protective care. I remind members that when that amendment was moved and debated in the Assembly — and I expect it will be the same in this place, too — it was designed to actually protect children from child abuse. There are many other areas of legislation that deal with this, and indeed this will be reported by the medical people involved; and I believe there are a number of other pieces of legislation that adequately cover this area.

In discussing this point we have to remember that in this place we are talking about people who are having terminations not only for some vague social reason. Some of the social reasons are very complex and concerning, and one that has come to mind, particularly in the 24-week circumstance and indeed with some girls who are 17 and below, has been the issue of incest. It is not a pleasant thing to have to discuss or for us to be concerned with, but imagine the 16-year-old who cannot go to her parents or to other people because in fact the very perpetrators of the pregnancy are the people who are closest to her.

We deal in this place time and again with very difficult circumstances of child abuse, in violent situations and with incest, and I have to say we must be cognisant in our debate on this issue of those people who are going to be put into that position. We have to consider making laws for the people concerned. I cannot pre-empt all of the amendments that will be introduced in this place, but I think it is important for all of us to be mindful of all the people we are talking about.

We assume that the pregnancies members in this place speak about are pregnancies that are wanted, expected and will be anticipated with joy. But there are hundreds of women in this state who do not face that reality, and as legislators we have to keep them in mind as well.

In conclusion, throughout this debate we as members of Parliament have witnessed democracy at work. We have been challenged and provoked by our constituents, by religious groups, by community groups, by family, neighbours, colleagues and friends into making individual decisions about our approach to this very difficult bill. It has been said that in a democracy you cannot keep all of the people happy all of the time — and so too it is with this bill. But I firmly believe all of us have endeavoured to do our very best.

At the outset of my contribution I grappled with the official meaning a 'conscience vote'. I checked the dictionary definition and the definition as developed by both the state and the federal parliaments. The four issues that are in common with all of the definitions are political, social, religious and moral.

In my contribution I have outlined how I as a member of the Liberal Party have approached this debate. I have looked at it from a social position, from the position of my electorate and the broader Victorian and Australian community, whose views I have taken into consideration on the fundamentals of this debate, but to this point I have not explained how my religious upbringing has influenced my approach to this debate; suffice to say that as a Protestant I was brought up to

accept differing opinions but to allow the ultimate decision to be made by the individual concerned.

This brings me to my moral decision. I believe in the rights of the individual. I think it is imperative that individuals make a decision on the very best, most up-to-date information. I believe they have the right to consult their own creed or religion to assist them in formulating that decision, and they therefore have the right to make a decision for themselves about themselves.

But it is the future that we are considering with this bill. It is imperative that we have unambiguous law that enables future women of Victoria to choose for themselves, based on their own unique situation, the ability to decide whether or not to have an abortion and in what time frame. It must be their choice.

Should they choose termination, they should be supported by our health system with the very best possible advice and medical treatment, and they are entitled to accept a first-rate, First World procedure that is based on a clear and unambiguous law. I believe this bill achieves that. I support the bill.

Mr VINEY (Eastern Victoria) — In speaking on this important legislation before the house can I firstly thank the more than 1000 constituents who have contacted me to let me know their views and issues about the bill that concerned them. I have attempted to reply to everyone in the electorate of Eastern Victoria Region who contacted me, although sometimes with some of the emails it was not possible to identify where the persons were from.

I have not declared my position on this legislation publicly because I felt it was important to allow my constituents to contact me and to express their views without any particular understanding of the view I held. In my replies to constituents I have thanked them for their views and indicated that I would take their views into account. I cannot promise that I have read every single letter and email that has been sent to me because of the sheer number that have come to my office; however, I have made an attempt to read as many as possible. They canvass a range of views across a range of positions and various elements of detail on the legislation.

I have not been subjected to some of the comments that, for example, Mr Pakula mentioned, and perhaps that is because I have not declared my position publicly, but I did think it was important to allow people to contact me and present their views to me.

I believe this legislation has been through what I would regard as a very good process. In terms of the last conscience vote we had, on the physician-assisted dying legislation, my essential criticism was that it had not been through what I regarded as a good policy development process. I think this legislation, in terms of the way the government has dealt with it, has gone through that process. There has been the opportunity for people to make submissions and comments before we got to the legislation and then a subsequent opportunity for people to make their views known to members of Parliament.

In considering this legislation I have thought of it in its historical context. The original campaigns, if you like, around improvements to abortion legislation and opportunities for women to access pregnancy terminations were initially really about women's health. Initially the campaigns were about trying to ensure that backyard abortions — which all members of this house, whether they were for or against this legislation, would agree are the worst case scenario facing women — did not occur.

As a child I was struck by a picture of my grandmother as a young woman in her twenties on a horse with her sister and with a kangaroo slung over the horse — a dead roo. They were living in the Western Australian wheat belt, a pretty tough area, at a tough time during the turn of the last century and through the Depression years. I remember as a child asking my mother: where was the gun? And as a description of the sort of life they led, my mother explained to me that they did not have enough money to own a gun. My grandmother used to ride a horse alongside the roos, remove the stirrup iron and whack the roo over the head with the stirrup iron: that is how they got their roos. What I learnt later as an adult about that poverty was that my grandmother and her sister used to perform abortions on one another.

It strikes me that our society has moved a long way from that. What we are dealing with today is another step in the historical process of how we deal with the issue of terminating pregnancies for a range of reasons — health, social and psychological reasons. The step we are facing today is essentially about a simple question: do we think it is appropriate that abortion sits within the Crimes Act or not? It is not about whether any member of this house or this community thinks abortions are a good or a bad thing. It is not about whether or not we support abortions — I think most members of this house would agree that abortions have to be a last resort for all women. But women face the problem of ending pregnancies for a range of reasons. It is not about whether or not we

support or oppose abortion; it is not ultimately about whether the majority of the community supports women's rights to abortion or whether the majority of the community is opposed to abortion.

As a former pollster I have to say that this debate is not about the total view of the community — whether people support abortions or not. It is about how we manage the issue of abortion, because as many members have pointed out, however we vote on this, abortions will continue. So the question is: do we say that abortions ought to be left in the Crimes Act or not? Or should they be dealt with appropriately as a health issue? I have come to the conclusion that I do not want abortion in the Crimes Act and therefore will be supporting this legislation.

I am speaking on this legislation because in writing to the constituents who wrote to me and in saying sincerely that I was taking their views into account, I did. It is important to me that in response I explained to people why I came to the view that I have in relation to this legislation.

I think it is important to move this issue to the next level from the fundamental issue of preventing backyard abortions, which was essentially the outcome of the Menhennitt ruling, towards the way we manage this health issue. It is a health issue, not a criminal issue. Having said that, it seems to me that there are three key issues surrounding this debate about some of the detail of how the legislation is framed: the 24-week issue, some procedural issues around how the practice of terminations might take place and the issue of conscientious objection. I intend to make a few brief comments on each, and when we get to the committee stage I may wish to participate further.

In relation to the 24-week issue I have come to the view that, logically, the fundamental and original concern here was to make sure that we do not go back to the days of backyard abortions — fundamentally, that is not going to stop at 18 weeks, 12 weeks, 16 weeks or 20 weeks. People act according to their immediate or urgent need, so making it illegal at any particular stage of pregnancy is not going to assist in preventing things — it is just going to make it illegal and potentially push people to alternative, backyard arrangements.

I find sometimes when these debates start that you identify issues you did not know about and did not necessarily want to know about. Whilst I might personally find the issue of late-term abortions very difficult, ultimately I am driven by the fundamental principle that I have outlined. The question for me in this place is: do I think these procedures should be in the Crimes Act? Therefore I have determined that I will be able to support the legislation as it is outlined in relation to the procedures up to 24 weeks as described in the legislation.

The range of procedural issues that relate to a whole raft of things like pain relief for the foetuses are very worthy issues to have been raised in the other house. However, ultimately I think these are issues for medical practice and it is not for me as a legislator to involve myself at that level of law. Legitimate issues have been raised by members in the debates, but I think this is fundamentally something that ought to be dealt with by medical practitioners in the way they deal with all medical procedures in terms of how the practice of those procedures ought to be conducted.

The third area I turn to is conscientious objection. In relation to the euthanasia bill — the physician assisted dying bill, to use the correct terminology — I said that what I found difficult was that in legislation proposing that it not be a criminal offence for a physician to assist someone to die there was a proposition that it be a criminal offence for a physician to refuse to assist someone to die. I found that very difficult and was not able to support that.

In this instance there is a different procedure, a procedure that involves a requirement that a medical practitioner or health practitioner declare a conscientious objection. I am very comfortable with that; I think that is absolutely appropriate. The next step, if a medical or health practitioner does not comply with the legislation, would essentially be a reference to one of the various health boards. I guess I have an open mind in relation to this, in terms of the consideration of this legislation in the committee stage. However, I would be seeking reassurance on this issue — some clarification as to the sorts of guidelines that might be offered to health boards in relation to how they would manage an instance where a doctor or another health professional did not follow the procedures as prescribed in the legislation. I will seek some clarification from the minister at the table in relation to those matters during the committee stage.

Just to conclude, as I have said during debates preceding previous conscience votes, when I make a conscience vote it is important that my constituents know the reasons that I am going to vote in a particular way. Therefore I have outlined those to the house today. They go to the heart of what this legislation is about. It is not about what we personally think of abortions. It is about how we think the issue of the termination of pregnancies ought to be managed in our

society — whether we think it ought to be managed in a health model or whether it ought to be managed in the Crimes Act. I am firmly of the view that it should not be in the Crimes Act.

Sitting suspended 6:27 p.m. until 8.05 p.m.

Mr ATKINSON (Eastern Metropolitan) — This bill is one that causes each of us to search very deeply into our own values, beliefs and politics, as Mrs Coote indicated in her address to the house, and experiences we may have had as individuals of people we know who have been faced with decisions on abortion.

This bill is very significant and is a landmark in Victoria's legislative history. I think it is important that the legislation comes to this place and is debated thoroughly and genuinely by members, because it is my view that we as legislators have relied unfairly and improperly on one single legal interpretation of a person's right to have an abortion as a way of wimping out from addressing this issue.

The Menhennitt ruling has stood for a good many years as the benchmark by which the medical profession determines whether an abortion is legal — that is, whether criminal charges might be brought against somebody who procures or carries out an abortion. It is totally inadequate to rely on a legal ruling on abortion without the Parliament giving some definition to the issue, without the Parliament addressing this issue in the context of contemporary attitudes, our criminal code, medical practice and society today and coming up with a better definition at law of our expectation of the behaviour of people — those facing the decision whether to have an abortion and those who are to provide assistance to them.

It is appropriate that we address this issue. I have concerns that abortion has been so starkly part of the criminal code, with so little definition of what the medical procedure of abortion means to a woman, her partner, perhaps other people in the family and certainly the medical professionals who would assist her in procuring the abortion.

From my point of view some aspects of the bill have merit. Whether to support the bill has therefore been a very difficult decision for me. I was particularly impressed with the speech of Peter Hall, because he addressed much of the journey I have gone through with this legislation. I had thought I was the only person who was mad enough to rehearse what I was going to say in the debate; it was interesting to hear that he also did so, running through in his mind some of the tests he might apply to the legislation and might address in his speech to the house.

Like him, I am also sure that some of the rehearsed speeches are much better than the ones we make, because in moments of reflection you have a particular clarity on some of these issues. The reality is that the issue of abortion is not an easy one to address. There are times when it is an imperative medical procedure. I think there are also times when the motives of some individuals involved — it is impossible to quantify how many, but I do not believe it is a lot — amount to child destruction. In such cases it is not a necessary medical procedure but a matter of some convenience to an individual — it is a matter of somebody exercising their so-called rights but failing to understand their responsibilities.

One of the central issues regarding the bill, and which will certainly form the basis of my vote on this matter, is the 24-week question. I think that is far too late in pregnancy. Public opinion and debate on when a life starts has swung back and forth over many years. It is a very difficult question — it is a matter of people's respective ethical and moral positions — but there is no doubt in my mind that at 24 weeks there is a baby that has all the characteristics and faculties of a child who can be sustained outside the womb, albeit with significant support in the early weeks and perhaps months. It is a child.

It is far too late at 24 weeks to look at carrying out an abortion where it is not absolutely necessary as part of a medical intervention. Were this legislation to provide for a test some weeks earlier, it would still allow medical intervention where necessary right up until a much later stage of the pregnancy, but at least it would put it in a context where it was not simply an election and not simply performed at the insistence of the mother.

I am interested in a number of aspects of the debate, and I see many contradictions in it. One of the contradictions is the insistence that this is a debate about women's rights. I do not get that. I see myself as a strong supporter of the rights of individuals. Like Andrea Coote, I come from a liberal philosophy that supports people making choices in their lives, but I do not believe this philosophy is completely against interventions in the interests of the broader society.

When it comes to this issue, whilst I accept that a woman's rights are perhaps paramount compared to those of a male partner, the reality is that too much of the debate ignores that male partner completely, as if he were not involved in the process at all. Ironically, were

the pregnancy to continue, that male partner would be required to support the baby. So the mother has an election that is all her own in deciding whether to continue with or end the pregnancy. If she continues the pregnancy, then the father is brought to account; if she ends it, then this debate would suggest she does it of her own accord and free will and unilaterally with absolutely no reference to and taking no account of the male partner.

In many cases that might well be appropriate. The male partner might not wish to be part of that baby's life or that woman's life, and that might be central to the very decision that has been made on an abortion. Nonetheless the crucial thing there for me is that this is not just about rights. Far too often in too many debates we talk about our rights, and we very seldom talk about our responsibilities. As I have said, if we are talking about a 24-week-old child in the womb, frankly, ethics should also provide some rights to that child, and they should include the child's right to be considered very carefully in the decision that might lead to the end of the pregnancy and the death of that child in the womb.

I would want to know that as part of that process, a very careful and considered decision had been made; that the motives behind the decision have much to do with the welfare of the mother and even perhaps with the competence of the mother going forward to provide for that child in the future. I would want it to be a carefully considered position.

What concerns me about the legislation as it is framed at the moment is that I am not sure that that cast iron guarantee is provided by the legislation. I have consulted very widely on this legislation. Like other members, I have had a great many emails and letters on this bill. I am surprised when some say they have had only about 1000 letters or emails because I have had considerably more. Perhaps that is my own fault, because I went out of my way to obtain opinions on this legislation from the community at large, the general membership of the Liberal Party, churches and community organisations as well as from those people who have written to me, who I have tested with questions, and who have come back with further responses.

One of the interesting things about a lot of that consultation is that an overwhelming number of the women who spoke to me believe that a woman ought to make the choice about an abortion and that it ought to be a right available to a woman, but that 24 weeks is too late. So the view that I put to the house is not simply my own view but indeed the view of the overwhelming majority of the people who I consulted — that 24 weeks at the election or insistence of the woman rather than as part of a medical intervention is simply too late.

It is interesting because I understand the statistics conveyed in the debate so far show that there is overwhelming public support for a woman's right to choose. I do not want to trivialise the debate the house is having today, but it is interesting to consider the republican debate. More than 76 per cent of people believe that Australia should be a republic. The question was put to the test at a referendum, and the republic concept foundered, because the devil was in the detail.

There is an element of that in this bill as well. Whilst it might well be that an overwhelming majority of the public holds the view that women ought to have the right to choose on the issue of abortion — and that is certainly consistent with the advice that was put to me by a great many of the people whom I sought out for comment as distinct from those who prevailed upon me as part of a passionate plea to not proceed with this legislation — there is a consistent position among those women that there ought to be a right for women to choose but that 24 weeks is too late.

In much of this debate there have been some interesting comments. I have been informed by people on both sides of the debate and for whom I have a very high regard. However, my staff were concerned about some aspects of the lobbying on this issue. There are some people who perhaps ought to consider very carefully the way in which they approach members of Parliament and their staff in the future if they really want to get a positive result, because some aspects of the lobbying by so-called pro-choice representatives and by people who are against this legislation were repugnant. Nevertheless, from my point of view I understand the passion in this debate. I understand where people come from to this debate, why it is so difficult for them and why some of them are demonstrating such a range of emotions as they try to address MPs.

But, as I said, I also had input from a great many people whom I respect as very wise and measured contributors to this debate. One of them is a gynaecologist who has worked with many women who have been confronted with the decision of whether or not to proceed with an abortion. This particular person had quite a bit to do with the Anglican Church's position statement that was finally adopted on this issue. I had a most instructive conversation with her, and I have to say there were some elements of that which have not been addressed as part of this debate in the other place overall, in this place to this point or in the public debate — but they do need to be addressed.

Ms Hartland was absolutely right when she said in her contribution to the debate today that if we expect women to exercise a vote of their own in terms of the decision not to proceed with an abortion, then we need to consider all of the circumstances that are going to support them in that decision. That includes financial support, protection from violence and, in many cases, from perpetrators of sexual violence against them. It also includes a range of options in terms of what they might do to support their child and continue with education.

One of the fascinating things that the gynaecologist I spoke to brought to my attention was the overrepresentation of foreign students amongst the patients presenting to gynaecologists for abortions. The information that is provided to many people about contraception and a range of issues that they might confront in Australia is clearly inadequate, and we need to do a lot more. We clearly need to do a lot more in terms of educating a good many people across our community, not just those who come to us as foreign exchange students. But certainly it was fascinating to learn that they are very heavily represented among the women who present to doctors for abortions in Melbourne; so too obviously are people from interstate, as has been mentioned in the context of this debate.

Like Mr Hall and other members, I am alarmed at the accuracy of some of the statistics and their impact on our ability to understand the dimensions of the abortion issue so that we might be able to bring to bear better public policy and better support for people, no matter what decision they make in the context of this debate.

For instance, one of the things not covered in this legislation that concerns me greatly is the issue of coercion. To some extent this might well seem to members to be something of a contradiction. I make the point that a woman's right to choose sometimes excludes the male partner, and I think that in some instances the man certainly ought to have some rights to participate in the decision or at least to inform the decision. The contradiction is that I think this debate is also very much premised on the fact that the woman makes the choice: she has a right to choose and she exercises that right. I think there are incidents in a number of communities, including ethnic communities, where women are coerced into having abortions for the sake of family honour, convenience, perhaps the economics of the family, or a range of things relating to the family's attitude towards having a daughter who might present publicly as being pregnant.

I think coercion is a very serious issue, and I think there ought to be a legal sanction against people who coerce women to have an abortion when it is against their will. I asked questions about whether or not statistics are kept on this sort of matter, and the answer was no. To me, the answer is that it is very difficult to determine. We do not think it happens a lot. It probably does happen sometimes, but we do not really know because there are no statistics. This is such a grave and serious matter that if we premise this type of legislation on the assumption that women are making that decision of their own free will, we ought to have a counterbalance at law in terms of these matters.

I am also concerned about things in this legislation that raise consistency issues in relation to other pieces of legislation and current practice in our society. For instance, I am advised by the police force that in the case of the death of a foetus under 21 weeks as a result of a woman bringing about the death of the foetus — and this is for an offence in the context of police charges — the foetus is not deemed to be a child at that age. However, there is a degree of uncertainty in the law as far as the police are concerned and the laws that they prosecute — in part, the Crimes Act — for the period from 21 to 27 weeks in relation to those offences. There is uncertainty as to whether they are dealing with a foetus that does not have the characteristics of a child in the context of the legislation or with a baby, particularly at the 22 to 24-week mark, that has all the characteristics of a child and with some medical intervention could survive outside the womb.

As I think the former federal Treasurer, Peter Costello, remarked, and as other people have remarked to me in the course of this debate, it is rather ironic that in some situations you could well have a medical team fighting to save the life of a 22-week-old child in one part of a hospital while in another part an abortion is being performed. I guess there is another irony in the Parliament this week in that the other house is dealing with reproductive technology while we are dealing with abortion. They are dealing with trying to extend the opportunity to have children to a wider range of people using medical interventions while we are seeking to use medical interventions to terminate pregnancies.

The situation of the police is interesting in the context of when somebody assaults a woman and she loses the baby, and then manslaughter, murder or child destruction charges possibly apply. I am not sure about the consistency of some aspects of that approach in terms of how we would see a baby in the womb treated in the context of third-party participation in the death of a child as distinct from what is proposed here in abortion legislation whereby the woman makes the decision. As I tried to convey earlier, in many cases that decision might be entirely appropriate and based on the

need for clear medical intervention which is necessary or appropriate, but in some cases it may well not be.

When I talked to some people from the medical profession about this they said, 'Well, you don't really have to worry about a lot of these things, Bruce, because the medical profession is very well behaved. The medical profession has a fairly limited number of people who deal with abortions. We know them all, and they are all wonderful people doing things professionally and in accordance with strict medical ethics'. I will just mention two individuals: a fellow called Edelsten and a fellow called McGoldrick. I was told, 'You don't have to worry about those two, Bruce. They're in their 60s. They're not really practising any more'. That is true, but what is to stop another Geoffrey Edelsten or Ian McGoldrick coming along and seeing an opportunity in this legislation to pursue a business practice without the ethical anchors that many of the people currently providing these services might have? I do not disparage the work that many of these people do at this stage.

Can I suggest that this legislation has some merit in terms of addressing a lot of these issues? There are circumstances, particularly in respect of violence, incest and rape, where we ought to be looking at giving women the opportunity to access abortion probably until fairly late in a pregnancy. What needs to be understood about this whole process is that not everybody is going to act the same or be affected in the same way by the sorts of traumas that are associated with acts of violence or indeed a range of other things that occur in people's lives that make the decision to have an abortion an imperative for some people. We need to make sure that such people have support and come to that decision in an appropriate way. I do not want to see backyarders, but I also do not want to see women simply proceeding with an abortion as a matter of a process that seems not just to be supportive at this point but to me almost borders on trying to be encouraging.

I understand some of the arguments about counselling. I also think that some of the arguments about cooling off are relevant in terms of saying that women delaying the decision actually adds to the trauma and makes the decision a lot more difficult for the woman involved and perhaps for those loved ones around her who are supporting her through that process. I can accept that maybe we do not need to have those services available on a mandatory basis, but we certainly need to do a hell of a lot more in making sure that women have adequate support and counselling where they need it and where they would want to access it, and it ought to be counselling that explores all the options and does not simply direct them in a particular way.

I say that because this legislation says that people in the medical profession who have a conscientious objection do not have to perform abortions, which is good because it recognises their rights, but it says that they must refer the woman to somebody who they know will do so. There is no obligation on the part of somebody who is supportive of providing abortion services as a matter of fairly general or usual practice to suggest that a woman might go and get an alternative opinion about not having an abortion. We are actually shifting this debate in quite a way in that very legislation.

I certainly support the conscientious objection views that have been made, particularly by the Catholic Church and many of the people associated with it. However, I must say that, at the end of the day, that is not a sticking point for me on this legislation, because as at least one of the other speakers — I think it was Mr Hall — said in his contribution, surely we could find a way to address those sorts of issues without needing to resort to the legislation itself. In terms of this legislation I certainly believe it is very difficult to be prescriptive on the issue of abortion because it involves so many different factors in regard to the social and mental welfare and the physical health of a woman as well as a great many circumstances in which a woman might be affected or impacted in the future by the sort of decision she needs to make.

I understand some of the arguments about current clinical practices. At the outset I said that I feel very sorry for those people in the medical profession who have been forced for so long to rely on a single judge's ruling in order to pursue abortions and to provide those services to women who need them. It has been totally inadequate, and I think parliaments have squibbed this whole issue for far too long.

I understand some of the current clinical practice, particularly in the context of the debate about terminating pregnancies up to 24 weeks, because that has exercised my mind very vigorously and I have explored that matter with the minister, with whom I have had a brief discussion. I have also discussed the matter with many of my Liberal Party colleagues, with people in the medical profession and with a broad number of people out in the community. I understand some of the issues about later testing and more effective and indicative testing that is carried out, particularly in the period between, say, 18 and 22 weeks, but I do not see a position that would bring the medical requirements back to 20 weeks, for example, as being inconsistent with many of the issues that were raised with me in regard to testing regimes. I certainly do not see that as an issue.

In terms of this legislation I was probably most persuaded by — or found perhaps the greatest fit, if you like, with some of my own feelings about this legislation — the position adopted by the Uniting Church in Australia and to some extent by the Anglican Church. Again, that is not to disparage other submissions that were made or to reduce the import of many of the passionate pleas that were made by a great many people, but I certainly saw that the position of members of the Uniting Church was a very measured one and was probably a better fit with mine than many of the others. They certainly were concerned about late-term abortion. At this point let me express my own real concern about partial-birth abortion, which I find to be an extraordinary procedure. Again, it is one that might be necessary at times in terms of medical intervention, but it is certainly something that we should be hoping is not to become the norm as part of this process.

In late September the Uniting Church in Australia indicated in correspondence to me:

> While we are opposed to late-term abortion, we urge that the proposed 24 weeks be amended to 20 weeks on the grounds of the viability of the foetus, and the implications for the foetus experiencing pain.

Members of the church also urged the inclusion of a conscientious objection clause for health professionals and indicated that they felt it was in the best interests of both the woman and the child that a woman should not be permitted under the law to proceed to abortion without due process of referral from her general practitioner. They said this would guard against abortions being performed by doctors who had no qualification or training in obstetrics, and — whilst the Uniting Church does not say this — who have little understanding of the woman's medical history and matters that might be pertinent to the decision that she is making at a particular point in time. They also indicate that in order for the decision for an abortion to be taken with utmost seriousness a mandatory information provision be included, mandatory referral for independent counselling and a mandatory cooling-off period.

As I have indicated, I cannot be persuaded and I am not prepared to accept the comment to the contrary, that perhaps a mandatory process is not going to be effective and in fact might well have some negative consequences for women in this context. I do not necessarily pursue mandatory counselling, but I certainly think we have to do a lot better with the support and counselling that we give to women. As I said, I refer to what Ms Hartland said: support is not simply about approaching the decision as a medical intervention, but rather looking at what other support the community might offer in terms of education, finance, protection from violent environments and so forth that might make carrying that child to full term and bringing up the baby a more realistic option for a woman.

It certainly occurs to me, as it has to other members, that there are far too many abortions in this state, and I accept that nobody wants those abortions to continue. The proponents of this bill do not bring it to this house on the basis that there should be more abortions; they bring it to this house in a genuine belief that abortion ought to be defined for the sake of legislation and ought not rely on a single judgement of a court, as it has done for so many years, and that indeed abortion ought not be a criminal offence where it is a necessary, important or appropriate medical intervention.

As I said, from my point of view the conscientious objection, the coercion, some of the inconsistencies with other legislation — I will not go into some of the other areas perhaps that have concerned me in my research being in the interests of allowing other members to speak on this bill tonight — the sticking point for me above all of those comes down to the 24-week threshold, and I cannot support the bill while it includes a 24-week proposition.

Ms MIKAKOS (Northern Metropolitan) — I want to begin by thanking the many thousands of individuals and organisations who have contacted me or corresponded with me about this bill. It is the most correspondence I have received as a member of Parliament about any issue. I also thank the many groups and individuals from various perspectives who gave their time and expertise to me prior to this debate.

Abortion is an emotive issue, it attracts strong points of view from both sides, and I respect those divergent perspectives. I know that my vote on this bill will not please everyone, but I want to assure them that this is an issue that I have given a great deal of thought to. I actually suspect that my contribution tonight will not please the purists on either side.

As a practising Christian I could not choose abortion — that is my choice. I believe the potential for life begins at conception. The miracle of human development is something that amazes me, and the births of each baby by family members and friends have been the most joyous moments of my life. However, I am attracted to a quote by the German philosopher Arthur Schopenhauer, who said:

> Compassion is the basis of all morality.

I have enormous compassion for those women who find themselves in circumstances where they feel they must make the decision to have an abortion. I cannot deny that choice to other women. An abortion is something that every woman hopes never to have. I am convinced that any woman terminating a pregnancy for whatever reason makes an extremely difficult decision, but does not do so lightly. Women should be given every support possible in considering their options. Women need to be able to arrive at their decision in consultation with their doctors and the people they trust. They need to be supported to make an informed decision freely without pressure from others, the threat of criminality or the moral judgement of others.

I am no theologian, but I say to those members who share my faith that it is my understanding of Christianity that God gives us free will to exercise wisely, and that each of us will face God's judgement for the choices, good or bad, that we make. It is not for us to judge each other but for God to judge each of us for our thoughts and our actions. So I can reconcile as a Christian being both pro-choice and anti-abortion.

A woman I admire greatly, Senator Hillary Clinton, herself a Methodist, said during this year's primary campaign in the United States of America that abortion should be legal, safe and rare. It is a view that I agree with.

For me this is a vote free of party discipline, not a 'conscience vote' as such. The expression 'conscience vote' implies that members of Parliament put their personal conscience or views above the 600 000 constituents represented by upper house members of Parliament.

My responsibility as a legislator is not to focus on my personal religious views to the exclusion of all else. My faith sets my personal choices and my political priorities. It sets my focus on issues of social justice, for example. Rather, I take the view that we need a more objective test, not a subjective test for these free votes. My responsibility to my constituents is to participate in the making of laws that respond to society's problems, laws that reflect broad community standards and opinions, and laws that are workable in practice. Each time we have had such a free vote I have voted on the basis of whether those proposed laws satisfied such tests.

Before I consider the bill in this context, I want to make a few more comments about the relationship between religion and politics as its interplay seems to have figured prominently in this debate. Firstly, I do not accept the characterisation that has crept into this debate that views people of faith as dogmatic and against reason. For example, I have spoken to various people of faith who have expressed great compassion not only for the fate of the unborn but also for the plight of women seeking abortions. I have spoken to many people of faith who accept that making abortion illegal will not prevent abortions.

I can only speak about my own faith, which is what I know best, having been raised in the Greek Orthodox Church, which means a great deal to me personally. What my church and family have ingrained in me is that Christianity preaches love for one's neighbour, compassion and looking after the marginalised. It is a radical, not conservative religion that has inspired the abolition of slavery, scientific progress, democratic rule and free commerce. I encourage people to read Rodney Stark's book *The Victory of Reason — How Christianity Led to Freedom, Capitalism, and Western Success*. I ask that each of us be respectful of each other's views and that we be motivated by compassion, whether it is inspired by faith or not, to support women and to respect their choices.

I want to make one further point about the interplay between religion and politics. With few exceptions many of the faith groups that have written to or contacted me about this bill have not contacted me before about proposed legislation or government policies. I do not mean to sound critical, as I think they have a legitimate role in the political process to express certain points of view. The point I make is that they should lobby MPs not only on so-called moral issues. I hope that Australian politics does not go down the path of American politics and that faith-based groups do not become fixated on issues like abortion and gay rights to the exclusion of all else.

I am a big fan of Jim Wallis, the author of *God's Politics — Why the American Right Gets It Wrong and the Left Doesn't Get It*. To do justice to Jim Wallis, I acknowledge that he is very opposed to abortion, but the point he makes is that Christians should broaden their agenda and pursue social change on issues inherent to our faith, such as achieving social justice, protecting the environment and promoting peace. He also makes the point that no side of politics should be allowed to make faith partisan, something that I would argue has been well recognised by our current Prime Minister. I want to quote from page 7 of Jim Wallis's book, where he says:

> We contend today with both religious and secular fundamentalists, neither of whom must have their way. One group would impose the doctrines of a political theocracy on their fellow citizens, while the other would deprive the public square of needed moral and spiritual values often shaped by faith. In a political and media culture that squeezes everything

> into only two options of left and right, religious people must refuse the ideological categorisation and actually build bridges between people of goodwill in both liberal and conservative camps. We must insist on the deep connections … between church and state that protect religious and non-religious minorities and keep us all safe from state-controlled religion. We can demonstrate our commitment to pluralistic democracy and support the rightful separation of church and state without segregating moral and spiritual values from our political life.

That statement is a good summation of my own views on the role of faith in a secular and pluralist society.

This bill seeks to reflect majority community standards regarding abortion. The 2005 *Australian Survey of Social Attitudes*, a major national social survey conducted by the Australian Demographic and Social Research Institute at the Australian National University, found that 79 per cent of respondents agreed or strongly agreed with the statement, 'A woman should have the right to choose whether or not she has an abortion'. Even people of faith have expressed a majority pro-choice view.

A 2003 study entitled *Attitudes to Abortion in Australia — 1972–2003*, by Katharine Betts, found that whilst 93 per cent of people who have no religion were pro-choice, 77 per cent of those who did have a religion were also pro-choice. The level of support varied amongst people of different religions and Christian denominations, although all groups had a majority pro-choice view. The study found that 86 per cent of Anglicans, Uniting Church members and Presbyterians, and 81 per cent of Buddhists, Hindus, Muslims and Jews supported a woman's right to choose. A strong level of support was also shown by members of the Orthodox faith, with 78 per cent of members believing a woman should maintain a choice in the matter, with 72 per cent of Catholics also supporting a pro-choice perspective. Baptists, Lutherans and Pentecostalists were most likely to favour restrictions, though even here 53 per cent were pro-choice.

As a parliamentarian representing one of the most diverse electorates in Victoria, both in terms of religious diversity and people professing no faith, I accept that my constituents have diametrically opposed views on the issue of abortion. In many parts of my electorate socioeconomic disadvantage is higher than the average for Victoria, putting women and families in a position where an unplanned pregnancy is a cause for concern rather than for celebration.

Although the available Medicare figures are not precise, it is widely acknowledged that under the current law there are 20 000 abortions every year in Victoria. It is a figure that I and many other Victorians believe we should work to reduce. According to the United Nations, from the mid-1990s some 92 000 abortions have been performed in Australia annually — a ratio of approximately one abortion per live birth. That is an extremely high number but similar to many other English-speaking nations, despite their having different laws. The United Nations Department of Economic and Social Affairs 2002 report *Abortion Policies — a Global Review* has collated the most recent data available for each country. The rate per 1000 women aged 15 to 44 in Australia in 2003 was 19.7. In New Zealand in 2005 it was 19.7; in the United States in 2003, 20.8; the United Kingdom in 2005, 17; and in Canada in 2003, 15.2.

Interestingly there are some European nations with much lower abortion rates per 1000 women. In Norway in 2005 it was 15.2; in Denmark in 2005 it was 14.3; and in the Netherlands in 2004 it was 10.4. According to the United Nations, legal abortion is available in the Netherlands on the grounds of saving the life of the woman, to preserve physical health, to preserve mental health, in cases of rape or incest, for foetal abnormality, for economic or social reasons; and it is available on request. That means abortion is very widely accessible in the Netherlands, yet the abortion rate is approximately half that applying in Australia.

It is important that we recognise countries with liberal abortion legislation have lower rates of abortion than Australia. I can only surmise that better sex education and family planning services in these countries help prevent unplanned pregnancies. That is why we should be looking at society-wide solutions that cannot be achieved through legislation alone. A 2007 study by the Guttmacher Institute in New York and the World Health Organisation, quoted on page 33 of the Victorian Law Reform Commission report, found that:

> … unrestrictive abortion laws do not predict a high incidence of abortion, and by the same token, highly restrictive abortion laws are not associated with low abortion incidence.

Rather, the rate of abortion was found to be related to the availability and use of contraception. One argument put to me is that decriminalising abortion will open the floodgates and see more abortions occurring. I cannot accept the argument that women are somehow waiting for this bill to pass before they make what is a traumatic decision: to terminate their pregnancy.

International experience shows that legal abortion does not necessarily lead to high abortion rates. The defeat of this bill is not the solution its opponents are holding out. The defeat of this bill will not prevent a single — not even one — abortion from occurring in Victoria tomorrow. In my view the solution lies in providing

better contraceptive advice and better sex education, especially in schools, to prevent unplanned pregnancies in the first place. It lies in providing more financial support to women and families having children. The solution also lies in ending the sexualisation of our society, especially of children in the media and in advertising that promotes sex without responsibility. It involves strengthening society's values so that people take responsibility for their actions.

We know that the overwhelming number of abortions occur for what are described as psychosocial reasons, which can include financial reasons. The absence of a stable partner relationship can exacerbate financial concerns and anxiety for the future. The Victorian Law Reform Commission report found that women aged 20 to 24 have the highest rate of abortions, and that the majority of abortions occur in women aged 20 to 34. The data, however, does not indicate the personal circumstances these women are in — whether they are single or in a stable relationship or marriage — and I am sure they fall into all of those categories.

We all know and acknowledge the difficulties that two-income families face today with the cost of living, especially the cost of housing. I can understand the anxiety that any young single woman would face when confronted with an unplanned pregnancy and the prospect of bringing up a child on her own not only because of the absence of financial support but also because of the lack of shared parenting support. If society wants to reduce abortion rates, it needs not to judge single mothers but to offer them adequate financial and social support so as to provide them with real options.

I do not want to generalise about the reasons women have abortions; they are many and complex. But financial concerns that may lead to a pregnancy being seen as unwanted are something that governments and all of us as taxpayers can do something about. That is why I am extremely supportive of what the federal government is doing in relation to paid maternity leave, and I personally hope it will go further than the proposed 18 weeks. Motherhood should be valued more by our society and mothers should be given every opportunity to bond with a newborn, which is widely acknowledged as essential to its development, without the mothers experiencing undue financial pressures.

Sex education needs to be more than the perfunctory biological explanation. I look back with horror at my own sex education in year 8 of secondary school where we were shown one video — there was not much else available. We know that girls and boys are engaged in sexual activity from as early as 12 or 13 these days. Whilst abstinence should be encouraged and young people told that sex comes with responsibilities, we have to realistically accept that this will not prevent all teenage sex. More advice is needed about contraception and sexual diseases, and young girls need help in better understanding their bodies so that they can identify the tell-tale signs of pregnancy as early as possible.

I have spoken to many mothers who have commented that it was only after their first pregnancy that they learnt a great deal more about their own bodies. The transient nature of modern relationships is also a cause of high abortion rates. Sexual promiscuity has given men lots of sex with no responsibility. We need to strengthen and support relationships more.

There are things that legislators and all of society can commit to doing to reduce the rate of abortion in this country, but I do not believe that keeping abortion in the criminal statute books is the way to do it. It certainly has not worked for 40 years, as attested by the 20 000 abortions per year in our state alone.

It has been put to me that this bill is designed to give state sanction to the practice of abortion and that it will encourage the view that abortion is okay. As a lawyer I do not accept the premise that the role of legislation, especially the existence of criminal offences, should be to express society's approval or disapproval of behaviour. Unless you are prepared to police and to enforce that legislation, as we do with other criminal offences, then it is a pointless exercise that merely serves to make some people feel good. The issue then becomes out of sight, out of mind.

I do not for a moment suggest that the current Crimes Act provisions should be enforced. Restricting legal abortion or enforcing the Crimes Act would only serve to re-establish the backyard abortion industry that was rife more than 40 years ago. I have read a great deal about the horrific things that happened to women in those clinics in the past — the number of women who died or suffered serious injury — and I know that this is something we should definitely not bring back. That is why I support decriminalising abortion that is associated with proper regulation under our health legislation.

The bill seeks to codify current clinical practice and this has been done taking into account the advice of many respected medical professionals who participated in the development of the Victorian Law Reform Commission report that has formed the basis of this bill.

Looking first at the issue of how the law is to be decriminalised, part 3 of the bill seeks to abolish a number of Crimes Act offences and common-law

offences relating to abortion. It also creates a new offence, punishable by up to 10 years imprisonment, for an unqualified person performing an abortion. However, the bill does not leave a legal vacuum: in part 2 it seeks to regulate both surgical and drug-induced abortions.

In the 99 per cent of abortions that occur under 24 weeks gestation, a woman will need to consult a registered medical practitioner. In the 1 per cent of abortions performed after more than 24 weeks gestation the bill requires two medical practitioners to agree that the abortion is appropriate in all the circumstances, having regard to all of the relevant medical circumstances of the woman and the foetus — this would have regard to issues of serious foetal abnormality, for example — and the woman's current and future physical, psychological and social circumstances.

This is the legal position that has been established through the 1969 Menhennitt ruling and subsequent legal decisions in other jurisdictions. This two-tiered approach is reflective of the additional consultative process that currently occurs by means of a panel at the Royal Women's Hospital and the Monash Medical Centre that currently perform abortions beyond 24 weeks gestation in cases of serious foetal abnormality or where the woman's life is in danger. The bill makes no reference to the panels currently in use at these two hospitals, although I understand they will be able to retain their panels if they choose, as they already exist with no legislative basis. Whilst the bill is not prescriptive as to the specialisation of the two doctors, it would be reasonable to expect that a geneticist would be consulted in cases of foetal abnormality, and a psychiatrist in cases of patient mental illness.

In an article published in the *Age* of 3 September 2008 Dr Chris Bayly and colleagues stated, in relation to the 24-week requirement:

> The reality is that this will not alter current clinical practice. It is already routine for at least two medical opinions to be obtained after 24 weeks gestation and sometimes earlier if merited by individual circumstances.

These post-24-week cases are complex and, thankfully, rare.

Over the last 15 years testing for foetal abnormalities has become commonplace and is performed for most pregnant women with their consent. I understand that Catholic hospitals also offer such diagnostic testing, even if they are then unwilling to perform an abortion resulting from test results.

I know some couples who have decided not to have genetic screening, having decided that they would continue with the pregnancy regardless. Then there are others who are confronted with such a decision and persevere with the pregnancy. That takes great courage, and I admire those parents greatly.

In the course of being a parliamentarian I have met many families with children who have a disability, and so I recognise and applaud their love and dedication to their children. They are truly society's heroes. However, everyone is not cut from the same cloth. In discussing this bill with many people, especially with women, many who are themselves mothers, there was universal compassion and understanding for women faced with making such an onerous decision and a feeling that it took a special person to continue with a pregnancy in those circumstances.

The Consultative Council on Obstetric and Paediatric Mortality and Morbidity reports on all abortions that occur after 20 weeks gestation. According to the council, in 2006 there were 298 abortions in Victoria post 20 weeks gestation, comprising of 148 terminations due to congenital abnormalities and 150 terminations due to maternal psychosocial reasons.

Because the data was collated from 20 weeks gestation, we know that 122 out of the 148 terminations for congenital abnormalities occurred between 20 and 22 weeks; of these, 113 were performed in a public hospital. Most women have their second trimester ultrasound at approximately 18 to 20 weeks gestation and their second trimester maternal serum screen at approximately 15 to 20 weeks gestation. One can imagine that faced with the devastating news of an adverse test result many parents would want to seek other expert opinions or seek further testing.

I noted that the VLRC report found at page 42 that women using the public system obtain access to an inferior level of abnormality testing at a much later stage of pregnancy, at between 18 and 22 weeks, compared to about 12 weeks if they are prepared to go private and pay for the tests themselves. It found that this delay was a particular issue for women in rural Victoria. The VLRC commented:

> For women who choose to have an abortion because of major chromosomal abnormality, later diagnosis will mean a more traumatic experience.

These inequities are causes of concern for me, and I will be raising this issue with the minister during the committee stage, to seek some assurances that services will be improved in these areas in the future.

The issues relating to late abortions, however people choose to define them, are difficult and complex. I admit that they are the ones which trouble me the most. However, imposing an arbitrary cut-off point does not enable women, their partners and their doctors to respond to the complexity of each person's circumstances.

I know that in the course of this debate a great deal of misinformation has been circulated publicly and to members of Parliament. I can assure members and the Victorian public that I would not be supporting a bill that would result in abortions at up to nine months gestation.

Undergoing an abortion is a traumatic experience for many women. The earlier in the pregnancy that it is performed, the better the psychological and physical health outcomes for the woman. I cannot imagine how a young girl would ever get over an abortion that occurred at six months gestation. But defeat of this bill is not going to help these young women if it drives them to suicide or other acts of desperation.

The other important thing to note about the Consultative Council on Obstetric and Paediatric Mortality and Morbidity data is that of the 150 cases of post-20-week terminations in 2006 conducted for what is known as psychosocial reasons, 90 were from interstate or overseas; they were not Victorian women. It made me wonder if restrictive legislation in other jurisdictions, such as the 20-week limit that has been imposed in Western Australia, had forced those women to come to Victoria.

History has shown that when women are in desperate circumstances and are desperate to end a pregnancy, they will resort to desperate measures. We have to be careful not to transplant the problem elsewhere in this way.

My research for this debate has shown that we need better data. The data collected by Medicare is not accurate as the item numbers used for abortions are also used for other gynaecological procedures; so the rate of abortion in Australia may actually be over-inflated. I would encourage the Australian Institute of Health and Welfare, if it does not already do so, to conduct a qualitative analysis of the reasons why women have abortions so that a proper evaluation can be made of the effectiveness in this country of family planning services, contraception advice and sex education. I recognise that such issues can be very invasive of a person's privacy, and participation should only be on a voluntary basis.

I said earlier that I favour abortion sitting within a properly regulated framework. This bill cannot be seen in isolation of the wider health regulatory framework in which it sits. The Health Services Act and Health Services (Private Hospitals and Day Procedure Centres) Regulations regulate public hospitals and private hospitals, and day procedure clinics respectively. In addition, the Department of Human Services (DHS) imposes additional licence conditions on some private clinics.

Denominational hospitals also have reporting requirements as part of their DHS funding to provide public hospital services. The reporting requirements on all of these health service providers extends to mandatory reporting of abortions and outcomes.

Medical practitioners, nurses, pharmacists and psychologists are also required to be registered under the Health Professions Registration Act 2005, and claims of professional misconduct, whether they relate to how they have conducted themselves under the terms of this legislation or other medical procedures, are heard before a board. Professional misconduct can result in deregistration. I heard in the media only yesterday that an obstetrician in New South Wales has been deregistered for performing botched gynaecological operations.

As a lawyer, I know the risk of being sued for medical negligence results in doctors acting cautiously. A doctor would therefore be prudent to heed the advice of risk managers in the insurance industry on issues such as informed consent, as well as in following accepted medical standards and practices set by their professional bodies.

In relation to public hospitals, the government's insurer is the Victorian Managed Insurance Authority. A VMIA paper on the question of informed consent states:

> … a medical practitioner must not undertake medical procedures on patients without their informed consent. Informed consent is the voluntary agreement by a patient to a proposed health-care management approach given after proper and adequate information is conveyed to the patient about the proposed management including potential risks and benefits and alternative management options. Failure to obtain a patient's consent may expose a medical practitioner to a claim of negligence or on occasions for assault.

I want to be confident that women will have access to the safest possible services and have all the information they need to assist them in making their decision. I was very impressed with a document prepared by Family Planning Australia, which has been sourced from the internet and which provides an extensive list of potential risks that may arise from an abortion

procedure. I raise this as only one example of a consent form that has been used in the past. This document relates to the procedure of a first-trimester termination. It lists a range of possible complications, including: post-abortion syndrome — blood clots accumulating in the uterus, bleeding or pain requiring another suctioning; excessive bleeding that may require a blood transfusion; residual products of conception possibly being left in the uterus and requiring a repeat procedure; infections; cervical tearing; perforation of the uterus wall; failure of termination of the pregnancy; and so on. This very extensive list also refers to the risks associated with anaesthesia. It is only one example of the type of documentation used in some clinics. I understand and expect that women would be provided with similar advice in relation to their own circumstances. Of course the advice provided to any patient has to be tailored to her own individual medical circumstances, as there might be additional risks relevant to her.

Women should also be offered counselling if they want it. I do not support mandatory counselling or mandatory cooling-off periods. Women are not buying a car, they are making profound decisions relating to their life and health, and they deserve to be treated with appropriate respect. In relation to the issue of counselling, the article I referred to earlier by Dr Chris Bayly says:

> Access to expert counselling is also essential. Many women actively seek such support and referrals for counselling are frequently made during the decision-making process. But forcing an unwilling woman to visit a counsellor will not help her talk or listen, nor is it likely to result in a changed decision.
>
> Some proponents of compulsory counselling argue that it 'cannot cause any harm'. But that is not the case. Making counselling compulsory will inevitably impose barriers to service provision and will result in delays in appropriate care.

A letter dated 28 August 2008 to Minister Morand from the Melbourne School of Population Health at the University of Melbourne said:

> … provisions for mandatory counselling or cooling-off periods should not be included in the new law. Research has demonstrated that any such provisions cause delays making abortions later in gestation and affect women's access to services, particularly among the most vulnerable groups of women such as adolescents.

The final issue I will comment on is the conscientious objection clause for health practitioners. I have spoken about this issue to a range of doctors, who have given me different views. The bill makes it clear that a doctor or a nurse cannot be compelled to participate in an abortion against their wishes except in the case of an emergency. Whilst the bill does not contain a definition of an emergency, common sense suggests to us that it is intended to be used in rare cases involving a life-threatening risk to the pregnant woman — for example, this could include a road trauma case where a woman who is haemorrhaging requires a radical hysterectomy which will also terminate her pregnancy. In those circumstances, I have no hesitation in saying that a doctor's or nurse's duty of care to their patient, their duty to keep the patient alive in those circumstances, should override their conscientious objection.

In relation to a health practitioner's obligation to refer a patient to another health practitioner practising in the same profession, I have thought long and hard about this. I have been advised that the referral could be from one GP to another GP, not directly to an abortion clinic. I must admit I was greatly attracted to the solution offered by the member for Burwood in the other place, who suggested that the Department of Human Services develop a list of clinics to be made available on request by women to avoid the need for a referral. I noted that this proposed amendment was not supported by either side of what has become a very polarised debate.

I can see weaknesses with clause 8 that have not been mentioned in the course of the debate in either house — for example, I cannot see how the clause prevents a doctor in Mildura from referring a patient to a doctor in Gippsland if they wish to subvert the conscientious objection provisions. In the absence of a sensible alternative, I feel compelled to support clause 8. I have been influenced in this by my reading of cases where doctors who object to abortion have failed to inform women about the outcome of a diagnostic test for fear that it would result in an abortion. That seems to me to be an abrogation of a practitioner's duty of care to their patient.

I am also concerned about the situation of young women or migrant or refugee women who are particularly vulnerable when they genuinely do not know where to turn for help once their family doctor has expressed their conscientious objection to them. Delays in accessing alternative sources of advice may lead to more late-term abortions being performed. I cannot understand how a health practitioner with a conscientious objection could see this as a desirable outcome.

In concluding, I urge members not to vote on this bill on the basis of whether they consider abortion to be morally right or wrong. Abortions have occurred for millennia and will always occur irrespective of what the law says. The question we need to consider is whether this medical decision should be in the criminal code or not. The law cannot influence whether or not abortions

happen; no law has been able to do that. But it does influence the conditions under which women can access them. The bill seeks to bring the law up to date with current clinical practice. It provides an environment in which abortions are properly regulated and provided safely.

We need to look to other means to tackle abortion rates. I ask members and our community to put aside our polarised views on this issue and commit to working together to reduce the rate of abortion in our state over time. For these reasons I support this bill.

Mr O'DONOHUE (Eastern Victoria) — This is a difficult debate, but it is also a privilege to be part of a debate that has up until now been conducted in a deep and respectful fashion and in a way that respects the broad diversity of views that exist in this place. Like other speakers I would like to acknowledge and thank the constituents who have made representations to me. Some 5000 or 6000 representations have been made to my office or to me personally by phone, email and other forms of communication.

I would also like to thank those who have taken the trouble to visit my electorate office to put their position to me. A couple of health-care professionals in particular have gone out of their way to provide me with all the information possible to enable me to come to a conclusion.

We have heard from members of the other place and in the debate today details of personal experiences that relate to the issue before us. However, in my opinion, we as legislators should not be dictated to in our decision making on matters of conscience by our personal experiences only. It is our role as law-makers to examine the material presented to us, to seek out answers to questions we may have and to try as much as possible to come to a position that is objective and that both reflects our personal values and is in the interests of society as we see it.

I think there is a trap sometimes with these issues — drawing too much on our own experiences and not looking beyond to the wider ramifications for society and the law. This is not to diminish the importance of personal experiences, but we should remember that no matter how full a life we have led, we cannot have experienced everything; therefore we must draw on reason, logic and argument to reach our conclusions.

I am glad to be able to make a contribution to this debate. It is incumbent on us to explain our position to those constituents who have advocated to us and to those who look to us as law-makers in this state. I respect the fact that there is no obligation to do so, but I have to say I was disappointed, and it concerned me, that the person who referred the issue of abortion law reform to the Victorian Law Reform Commission, the Deputy Premier and first law officer of Victoria, the Attorney-General, did not take the opportunity he had when this bill was debated in the other place to take the Victorian people into his confidence on this issue.

In my maiden speech in this place I spoke about the great advances Western societies, including Australia, have made in bringing about equality between the sexes. Arguably there is further to go but it is undeniable that great progress has been made. Treating women with respect and equality has benefited everyone. Our economy and society are stronger when the skills and capacity of the whole population are fully utilised.

The equality of women in our society has been greatly aided by equal access to education and opportunities and the ability to manage fertility. If I understand the argument correctly, those who support this bill and the right to choose contend that the ability to choose should be unfettered. To have restrictions on the right to choose underestimates the seriousness of the choice that women make and the complicated circumstances that may lead to a termination.

I have sympathy with this argument. Leaving decision making to the individual should be one of the guiding principles of law making. It is a guiding principle for me and a guiding principle of the party I represent. It was this principle that led me to vote in favour of the dying with dignity legislation debated during the last sitting week. The difference between this bill and the dying with dignity legislation is the existence of another party. Some believe life commences at conception. I do not necessarily subscribe to this view, but by the same token, if it is possible for a foetus to be viable at 22, 23 or 24 weeks gestation, I believe there is an obligation to consider the interests and wellbeing of that foetus. The bill that is before us does not do that.

I turn to the existing law. Legislators have a natural tendency to believe solutions to all problems lie with a new law or a new regulation. However, new legislation can create new, sometimes unforeseen, consequences. In two short years in this place I have seen a number of amendment bills that were required to amend failings in a previously passed bill. With a topic as contentious as this one, we need to be absolutely clear and certain that new legislation does not create unforeseen problems. This is particularly the case where the current arrangements have worked, as they have, in my opinion, in a settled and reasonably clear fashion.

Australians instinctively understand this. The reason the 1999 referendum on a republic failed was not because of any overriding loyalty to Britain or the royal family but rather an understanding that our wonderful democracy, whilst not perfect, works effectively and has served Australia well.

What is the law here in Victoria today, and what will it be tomorrow or next week if this bill fails? Sections 65 and 66 of the Crimes Act make abortion unlawful. The meaning of 'unlawful' was considered in 1969 in the case of *R. v Davidson*, which resulted in what has become known as the Menhennitt ruling. His Honour stated that the word 'unlawful' implies that in certain circumstances performing an abortion may be lawful. In trying to identify when an abortion would be lawful, His Honour introduced the test of 'necessity and proportion'. His Honour stated:

> As to this element of danger, it appears to me in principle that it should not be confined to danger to life but should apply equally to danger to physical or mental health …

His Honour's decision has been applied and cited favourably in other jurisdictions such as in New South Wales in the 1971 case of *R. v Wald*. Later, in 1995, the acting Chief Justice of the New South Wales Court of Appeal, His Honour Justice Kirby, also applied the Menhennitt ruling but expanded the range of factors to be considered to include threats to a women's health that might arise after the child's birth.

Therefore, although the Menhennitt ruling has not recently been tested in Victoria, it could be said that with the expansion and citing of the doctrine elsewhere in Australia, the common law is reasonably settled. Perhaps my opinion with regard to the common law is different from that of some of the previous speakers.

As the law currently sits in Victoria, I think we have a fair balance between respect for the individual and consideration for a potential other person. I do not accept the argument that there is a high degree of uncertainty at the moment with the law in Victoria. I do not accept that if this bill fails we will return to a pre-Menhennitt arrangement of backyard abortions as previous speakers have mentioned. I do not believe abortion law in Victoria, as it stands, is unnecessarily restrictive. It would appear from my investigations that abortions are relatively accessible, particularly in the early stages of a pregnancy, but there is no compulsion on doctors or hospitals to perform such a procedure — to me a reasonable position.

Given the current law as it applies to abortion in Victoria, I have been surprised at the tone of some of the correspondence I have received, which appears to be from the pre-Menhennitt period since which the battle has been fought and won, but in the minds of many it still goes on. I think that is unfortunate.

What then does this bill propose to do? In referring the issue to the Victorian Law Reform Commission the Attorney-General stated in the terms of reference that the government's aim was that the reforms should neither expand the extent to which terminations occur nor restrict current access to services. If you accept the proposition I have just put, that the law is reasonably settled, the question to me becomes: if the government wishes to maintain the status quo, why attempt to legislate in an area that is currently settled at law?

It is my belief, however, that the bill goes beyond the status quo. In particular, clause 4 causes me concern. It allows terminations to occur up to 24 weeks gestation. As I said previously, while I believe in the right of a woman to choose, that right, in my opinion, should not be unfettered at 23 or 24 weeks. With modern technology some babies are now viable at 23 or 24 weeks gestation. The right to choose should not come without some consideration for what may be a viable baby.

The argument made against this is that foetal abnormalities may not be detected until a scan at approximately 20 weeks. I accept the terrible heartache and difficult decisions that women and their partners have to make when confronted with such a position. This should not mean that an abortion for a healthy foetus can take place without question at 23 weeks and six days. While the panel model in Western Australia and other models in other jurisdictions have attracted criticism and are by no means perfect, there must be a way to differentiate between late-term terminations for legitimate medical reasons and early terminations.

In my opinion the law in Victoria is reasonably settled. The common-law doctrine as defined by His Honour Justice Menhennitt has provided the basis for lawful terminations for nearly 40 years. The doctrine has been developed further in other jurisdictions, giving it greater legitimacy if it were ever tested here in Victoria. The government states that this bill merely codifies current practice. If it merely codifies what already exists, then given the way the law has operated it is unnecessary. To me the bill goes beyond Menhennitt, and in my opinion it goes too far. I oppose the bill.

Mr DRUM (Northern Victoria) — I want to talk about my views on this bill. I know everyone has treated the bill seriously and taken a very sombre approach to the various aspects surrounding the bill.

The proponents of the legislation would have us believe that this bill will simply legalise current practices and make it no longer a crime for women and doctors to do what they are currently doing. They say we should get this issue out of the criminal jurisdiction and into the open. That is not the case. We cannot have members here saying that this proposed legislation will not broaden and expand the way abortions can take place, because it will. It will put extra pressure on medical practitioners throughout the state, whether or not they have anything to do with abortions. It will put an extra onus on medical practitioners. It will broaden the availability of abortion to 24 weeks on the opinion of one clinician, and in effect there will be no limit on the gestation period for having an abortion provided the person gets a second opinion. That second opinion need not be from an independent person such as an obstetrician or a gynaecologist.

A termination can be performed at any stage of the pregnancy provided a second opinion is obtained. That is not the case currently. It will put a legal obligation on medical practitioners to refer women seeking an abortion to another clinician who will perform an abortion. That provision does not exist at the moment. We must make sure that we do not rely on statements in this chamber that are not accurate or truthful. If we are to have a free debate and a conscience vote, we need to make sure we talk about the facts.

During the previous sitting of this place we debated the Medical Treatment (Physician Assisted Dying) Bill. I said then what I think our jobs are as politicians, and I was talking mainly about myself, my job as a politician and what I stand for and what it is all about. I said then that my job as a politician was to protect the vulnerable. I need to help those who cannot help themselves and then in effect get out of the road to let people get on with their lives — a minimalist government approach. The very core of the job is to protect the vulnerable and help those who cannot help themselves.

The President, the Honourable Bob Smith, in the same debate expressed similar views about what he believes the core job of a parliamentarian is — to help the vulnerable and to protect those who need protecting. He went on to say he holds the labour movement very dear. I think all of us do, irrespective of whether we are from The Nationals, the Liberal Party or the Labor Party — we all believe in protecting the vulnerable. If we believe that, how do we reconcile it with the fact that the unborn child has to be acknowledged as the most vulnerable of all beings?

In a sense this debate is somewhat easier for me, because I believe life starts at conception. I had an outstanding meeting with a pro-choice lady in Bendigo, Linda Bielharz, who came and spoke to me. She was very respectful. She put her views to me, and we had an amicable meeting. As I thought about how one could support this bill, it started to affect me more than if I had said, 'I do not want to even contemplate that view'.

Going through the process of opening my mind to think about how one could support the bill had a more profound effect on me than closing my mind and saying, 'I will never ever think about this; I will never ever support abortion'. Going through that process of imagining my name, my conscience and myself as part of this legislation actually reaffirmed my views on what I have to do in relation to this bill.

I can understand people who do not share that view, who do not believe life begins at conception. I do not agree with that, but I acknowledge that people can have a different view. In this chamber we have debated embryonic research, and people have stood up and said, 'Embryos are not life, because there is no brain activity. They do not have organs. They are not actually life; they are just little things the size of a thumbnail or even smaller. We are allowed to produce them, and if scientists have their way, they will produce them and destroy them. Medical research is a big flag bearer and embryos are not really alive'.

I do not agree with that opinion, but I can respect it. However, those who do not believe life begins at conception surely must believe that by 24 weeks we have a life; surely they must believe that the being we are talking about here is very much a person — it just has not been born yet. It is as much a person at 20 weeks as it is at 24 weeks, 34 weeks and 38 weeks. It is exactly the same person when it pops out, with a bit of help — it is just a little bit older. We have to include the child in the debate and stop talking as if it does not exist. As I listened to other speakers, the child did not seem to exist, just as the fathers did not seem to exist. We need to have a fulsome debate about this.

I do not want to take our current practices back into the 1960s. People would have us believe that if we knock this bill over in this chamber, dirty alleys and backyards will start to serve as abortion clinics again. That is not the case. Even to go down this path is somewhat deceitful, because it has never been proposed that that is where we want to take this industry. We need to be up-front with the way we approach this debate.

You may argue that life does not begin at conception — and everyone is entitled to their beliefs and opinions — but nobody in their right mind can claim that at 24 or 25 weeks we do not have a life in that womb. If we

accept that the baby is a life and that it is our job as parliamentarians to protect the vulnerable, it puts us in a very serious position. It also means those in the chamber who wish to expand the length of time in which abortions can take place past 20 weeks, and now past 24 weeks, are putting one life over another.

That is how I see the very confusing argument that is coming from the proponents of the bill. They are in effect arguing for the choice to be made by one life — an adult who is able to say what they want, choose what they want, make lucid decisions and talk to doctors and other practitioners about what they want to do with their life — but with the other, silent life having no choice. It is not like the baby is going to be able to talk when it is 5 minutes old either, but it is still a baby; it will not be able to fend for itself when it is 8 months old, but it is still a baby; it will not be able to make any decisions or look after itself when it is 18 months old, but it is still a baby. I tend to think we are just not having a fulsome debate about this.

I go back to the debate we had last year when Evan Thornley spoke about embryonic research. It was a very clear argument. It was Mr Thornley who likened the life of an embryo to someone at the end of their life, on their deathbed, maybe having been in a car accident. Effectively he said at that time that when we have a person who is at the end of their life and has no brain activity we tend to make the decision to switch off the machine because we acknowledge that they have no life. We acknowledge that once the brain activity has finished, the life has effectively gone and therefore we can let that life go. He made the analogy of a body without life being like an embryo at the start of its life, again without brain activity. That was the argument put forward, and that was the argument accepted by the proponents of that bill — a bill put up by the government. That is the argument I need to now keep pushing back at the proponents of this bill. If they have that opinion, that is fine, but they cannot bring that opinion forward and argue that somehow one life is less valuable or less worthy than, or has a secondary status to, another life simply because that other life is the life of an adult.

I want to bring forward some of the arguments that have been used in previous speeches to push home the point that what we are really dealing with here is the ending of a life. We need to acknowledge that and be up-front about it. We have laws in Victoria that relate to babies at 20 weeks. We have gone through various scenarios. There is the situation where a lady whose pregnancy is at 21 weeks is sitting at home and her boyfriend, de facto or husband comes home drunk and physically attacks her. If he kills that baby, he is up for child destruction. In the state of Victoria he will be charged and will probably end up in jail. Effectively we have a situation where we afford that baby the status of life because it is wanted, and anyone who takes that life away commits a crime. How can we have this inconsistency? How can we have this confusion within the legal system where we have one 21-week, 22-week or 23-week pregnancy being afforded the status of life and another 23-week baby not being afforded it? That is the inconsistency with this bill. That is the confusion we have with legal status under this bill. It just does not make sense.

We take into account the mother's wishes. If the mother decides that she wants to have an abortion, that is fine; she is able to make the decision in conjunction with her doctor. The baby has no status; the baby has no choice. If she changes her mind when she goes home, all of a sudden the baby has a choice again; the baby has worth and value again, and the baby has the status of life again. If mum changes her mind again three or four days later, the baby will have no rights. How does this work? Does it work on the fact that mum chooses the baby's status? Does she alone decide whether or not that baby has the status of life? That is what we are expected to vote for here. We are now talking about making abortions acceptable beyond a gestation period where there is absolutely no doubt about life existing. This has nothing to do with my views now; I am simply trying to flesh out how the proponents of this legislation can get their own heads around the confusion and complications surrounding the law and this bill and the conflicting statuses of an embryo, a foetus and a baby.

It has been a staggering process to have so many people contact our offices. I am no different to everybody else. There has been an amazing number of people. The pro-choice group was very active in the early stages of the process. The anti-abortion group has been very constant in getting to, talking to and emailing parliamentarians. There has been an absolutely phenomenal reaction against this legislation. Peter Kavanagh in this chamber has lodged somewhere between 11 000 and 14 000 signatures on petitions opposing the bill. One member of Parliament alone — —

Mr Finn — I have done nearly that many.

Mr DRUM — Bernie Finn has had a similar amount. There has been a phenomenal amount of genuine outpouring of anger from everyday Victorians who do not want to see this bill passed. We need to occasionally stop and take stock. It is a bit like the Brumby government with the north–south pipeline. Is it

ever going to listen to the people? Probably not. Anyway I will get off that.

The ACTING PRESIDENT (Mr Vogels) — Order! On the bill.

Mr DRUM — Thank you, Acting President. I was waiting to be dragged back!

It has not just been from the everyday Victorians — the everyday Mr and Mrs Citizen. We have also been inundated with calls from medical practitioners who have said to us that the bill is flawed and that it will dramatically impact on the job they do, even though they do not have anything to do with abortions. I was talking to an obstetrician the other day and went through some of the decisions we were going to have to make this week. He said, 'If they ever told me that I have to refer, I simply wouldn't do it. If someone told me to do something I didn't want to do, I wouldn't do it. If they made me do it, I would walk away from my profession, because I don't need to work'. He is obviously rich enough.

The government has really messed up in the way this bill, particularly clause 8, has been put forward. I think Candy Broad said earlier in her contribution — I am not sure whether it was her or another proponent of the bill who was speaking earlier — that the government has taken practitioners into account and made sure they will not be made to do abortions. They are all down on their knees thanking the government for taking them into account with such a generous gesture! For the government to say that because it is not going to force them to do abortions they should somehow be grateful that they will only have to refer people reeks of it not having sat down and talked to the people who are going to be affected by the legislation. It is just not good enough for the government not to have done that before coming out with this legislation, given that it deals with such a sensitive issue, matters of conscience and what medical practitioners believe to be morally and ethically right or morally and ethically repugnant, which is the language we keep hearing from the medical fraternity.

It has not just been the medical fraternity that has stepped up in this case, it has also been the legal fraternity. We do not normally hear from lawyers, but they have been unbelievably active in letting us know their opinions on this bill. They have been very vocal and out there in strong numbers. We need to sit back and ask ourselves what it is about this bill that has so riled medical practitioners, nurses and pharmacists and so upset the legal practitioners in this state. We need to at least read their concerns.

The lawyers who wrote to my office effectively said that any legal system is put in place to protect human life, and this bill does not do that. It does it partly, but it does not do so in its pure sense. Instead it creates a situation where babies in one ward of a hospital will have heaven and earth turned upside down in order to save them, while others, at the same stage of development but in a different ward, will be aborted and killed. That is what this bill provides and what will be put into legislation.

We know what goes on at the moment. We are not stupid and we understand that it happens, but it is about us being mature enough to ask about decriminalising the act of abortion: who was the last woman to have any threat hanging over her about going through this procedure? There is no threat; it is non-existent. Abortion being on the statute books as a crime is not a threat to anybody. We live in a world where, if they want or need on abortion, women are able to obtain that abortion.

They may happen to go to a doctor who says, 'I am really sorry about your situation, but I have an objection to abortion. Can you please go somewhere else? If you go to a public hospital, I am sure they will be able to help you'. That doctor, in saying something like that, would under the proposed legislation be acting outside the law. I do not know whether we have thought this through.

I do not think we are putting in place a system which, as the proponents of the bill will say, reflects current practices. Unfortunately the little scenario I have just played out does not reflect current practices, or, if it does, we have now turned some doctors into criminals. I do not think anybody wants to do that, but that is where we are at. The legal fraternity has again pushed very hard the fact that providing for late-term abortions — post 24 weeks and requiring the agreement of only two doctors — takes away any rights of an unborn child, unless the mother of the unborn child — —

The DEPUTY PRESIDENT — Order! In accordance with standing orders I will now interrupt business.

Business interrupted pursuant to standing orders.

ADJOURNMENT

The DEPUTY PRESIDENT — Order! The question is:

That the house do now adjourn.

Drought: government assistance

Ms LOVELL (Northern Victoria) — I raise a matter for the attention of the Premier regarding the need for urgent drought assistance. I request that the Premier, in his capacity as the chair of the drought recovery task force, provide urgent funding for the municipal rate subsidy, fixed-rate water charge rebate, drought counsellors and a range of other critical services and programs for drought-affected communities.

Northern Victoria's farmers are in dire need of assistance, with winter crops already showing signs of failure and irrigation allocations still at 0 per cent in some areas. September was close to the driest on record in many parts of the state, including Bendigo, where the region recorded its driest September in 70 years — just 7 millimetres of rainfall — making the historically wettest month the driest so far in 2008. Shepparton recorded just 8.4 millimetres of rainfall in September, while Echuca had 5 millimetres and Mildura only 2.2 millimetres.

In the past few weeks my electorate office has received a number of calls from farmers worried about the current situation and asking for drought assistance measures to be reinstated or extended.

The Brumby government ceased the municipal rate subsidy in June, but there is still urgent need for the subsidy in exceptional circumstances-declared districts. Rates notices for 2008–09 have already been distributed in many areas. Water bills will be sent out by the end of the year, and irrigators need some assurance that they will not be lumped with an onerous bill and forced to pay for water they will not receive this season.

The Victorian Liberal-Nationals coalition has requested the Brumby government waive fixed fees on infrastructure and storage for all undelivered irrigation water entitlements in the 2008–09 season. Last year the state government announced that it would pay up to the first $1000 of water bills for all irrigators and stock and domestic farmers who received less than 40 per cent of their water entitlements by 1 December 2007, and an additional 50 per cent rebate on the balance of bills over $1000. At least this level of assistance should be provided to irrigators this season.

Funding also needs to be provided for drought counsellors, whose positions ceased to exist at the end of September when their funding ran out. The need for these counsellors will only increase as the season progresses, and more funding for their positions must be announced.

I request that the Premier urgently reinstate the municipal rate subsidy and provide funding for fixed water charge rebates, for drought counsellors, and for other services and programs for drought-affected communities.

Police: Ballarat

Mr VOGELS (Western Victoria) — I raise an issue for the attention of the Minister for Police and Emergency Services regarding the police communications centre in Ballarat. Over the past week I have had the distinct pleasure of meeting with a number of Ballarat-based Victoria Police officers and inspecting both the Ballarat police station in Dana Street and the communications centre, otherwise known as D24.

Ballarat police station is a relatively new building which was opened in 2000, therefore it was a surprise to find that the building is too small to cater for the needs of the community. Police are crammed into small office spaces which are not up to the required standard. The Police Association claims that the Ballarat region suffers amongst the worst police shortages in rural Victoria, being 98 police short of what is required to provide an adequate level of policing for the community. The Police Association has lodged an improvement notice with WorkSafe over the conditions in Ballarat D24. The D24 office is small and was intended as a temporary office only.

The Brumby government had promised to relocate regional police communications to the purpose-built Emergency Services Telecommunications Authority complex at Mount Helen. The ESTA complex currently provides telecommunications services for the State Emergency Service and the Country Fire Authority, but there is lots of capacity to incorporate police as well. The transfer of police telecommunications to ESTA was originally meant to have occurred by now, but obviously it has not happened.

Moving Ballarat D24 west to Mount Helen would free up approximately 10 police officers to walk the beat in Ballarat: to combat crime and provide extra protection on Saturday nights and so forth. Transferring the police telecommunications role of all regional D24s to ESTA, as was proposed, would free up about 54 police across country Victoria. It is common sense to transfer the D24 telecommunications role to ESTA; that is what Ballarat police officers want.

I ask the minister to take action by moving regional D24 police telecommunications roles to the ESTA facility at Mount Helen, Ballarat, which would free up

54 police officers across rural Victoria, including 10 police at Ballarat.

Moreland: North Coburg parkland

Ms HARTLAND (Western Metropolitan) — I raise a matter for the attention of the Minister for Roads and Ports. I attended an on-site information session hosted by the Merri and Edgars Creek Parkland Group a few weeks ago, as did a number of other Western Metropolitan Region MPs. It was a great opportunity to experience and appreciate the 6.5 hectares of parkland, and it helped me to understand exactly what is at stake for communities in the northern suburbs of Melbourne.

At the junction of the Merri Creek and Edgars Creek in North Coburg is a 6.5-hectare tract of parkland which is owned by VicRoads. Unless the Moreland City Council can find approximately $10 million to buy the land, it will be sold to developers. If the worst-case scenario happens, the loss of the largest passive open space parkland in the city of Moreland to residential development will be a nasty legacy of this government. Moreland council has invested time and money over decades in improving and maintaining this green belt. The local residents have paid for this green belt and do not want it destroyed.

Public open space needs to be protected and preserved for future generations. Yes, there is obviously a population boom going on in Melbourne, which is all the more reason to ensure that these concrete-free spaces exist. It is also a wildlife corridor that contains hundreds of trees which provide a habitat for over 50 different species. An article headed 'Green or greed? The battle for our suburban parklands', printed in the *Age* last month, states:

> The Melbourne 2030 plan clearly supports the position of the Merri and Edgars Creek parkland group … It recommends improving open space for visions in line with population increases.

The action I ask of the minister is to enter into meaningful conversation with council on this issue.

The DEPUTY PRESIDENT — Order! Can I request that the member consider seeking action to the effect that the minister initiate discussions with the council in regard to this matter? I am concerned about the generality of the action.

Ms HARTLAND — The action I seek from the minister is that he initiate talks with the council over this matter.

Stonnington: street violence

Mrs COOTE (Southern Metropolitan) — My adjournment matter this evening is for the Attorney-General and is in regard to the issue of people roaming the streets of the Prahran electorate, particularly over the weekend and at night.

I have spoken in this chamber on many occasions about alcohol-fuelled violence and the problems associated with this, and I have much pleasure in saying that recently I attended a Stonnington liquor accord meeting that was held at the Chasers nightclub. It involved a number of traders, nightclub owners, the Stonnington City Council and other interested members.

I put on the record my praise for this group because it is searching for proper results to address the issue of violence in and around Commercial Road and Chapel Street, particularly on a weekend. Accord members are taking responsibility for patron care and community amenity, but feel the government must do more to protect people from those who roam the streets and do not enter the venues. One of the issues I did not know about is that a lot of the people wandering up and down Chapel Street who are quite inebriated are not going into these licensed venues, but the licensed venue operators have been criticised for serving drinks to people who have already appeared to have had too much.

From what I gather some research has been done and initiated by the accord members to identify the patrons in these establishments, for which I highly commend them. One of the issues that came out of the meeting I attended was what happens in and around fast food venues. For example, the KFC in Commercial Road, Prahran has bars that come down over the counter on a Saturday night so that people cannot attack the people who are serving the chicken and chips.

This is not acceptable, and a lot of the scuffles that break out are over who was in the queue first. We have seen some of these incidents in McDonald's in and around the CBD hotspots as well. There is obviously another level to this concern, and it is something that needs to be properly looked into.

I praise the initiatives by the accord, including the safety audits of the licensed venues to identify any safety hazards for patrons. The accord members are being very responsible in this area and are hoping to come up with a resolution.

I call on the government to conduct research into the people roaming the streets of Prahran who are not entering licensed venues but are committing criminal

and antisocial acts. We can call these people the drunken nomads of Chapel Street.

Plastic bags: supermarket trial

Ms DARVENIZA (Northern Victoria) — I wish to raise a matter for the attention of the Minister for Environment and Climate Change, Gavin Jennings, concerning the recent successful trial on cutting the use of plastic bags from supermarkets. I want to use this opportunity to say 'Well done' to all of those who participated in the recent trial in Victoria.

I am pleased to say that Wangaratta was one of the participating towns in this trial, and that Wangaratta shoppers have dramatically cut plastic bag use during this trial. From 18 August to 14 September a 10-cent government and industry charge was placed on plastic checkout bags from Coles, Woolworths-Safeway and IGA stores in three trial areas, one of which included Wangaratta. Consumers in Wangaratta reduced their plastic bag use by 77 per cent, which contributed to a reduction of 79 per cent across all of the three trial areas, which is a fantastic result.

Conservation Volunteers Australia managed the funds that were raised during the trial to ensure that investment in environmental projects directly benefited the participating communities, and in Wangaratta the money was used to assist rehabilitation near the Ovens River and Garth Park Reserve.

Analysis of the trial has not been finalised yet. The impact of the trial, including occupational health and safety issues, on customers and supermarket staff is yet to be finalised. I am seeking specific action from the minister. I request of the minister that, given the outstanding results in keeping plastic bags out of our environment, he make this charge on the plastic bags that was applied during the trial an ongoing initiative in Victoria and continue to work with other state governments, the federal government and industry towards a national approach on plastic bags.

Melbourne Wholesale Fish Market: closure

Mr P. DAVIS (Eastern Victoria) — I raise a matter concerning the Melbourne Wholesale Fish Market for the attention of the Minister for Agriculture. From the end of March next year the fish market will close, and there is nothing planned to replace it. The state government is taking over the fish market site as the Melbourne wholesale market site is to be redeveloped as part of the port precinct.

The City of Melbourne, which operates the fish market through a wholly owned company, and the government have renounced the responsibility for providing an alternative wholesale market for fresh fish. The minister has made no statement in the past two years on the question of a fish market, and there has been no evidence of the government seeking an alternative solution.

In the early days of Melbourne, fish were sold on the Yarra River banks adjacent to the city. The first fish market opened over Christmas 1865 at the corner of Flinders and Swanston streets — the site of Flinders Street station. It moved to Spencer Street in 1892, and the present market at Footscray opened in 1959. An important component of the Victorian economy, it is an essential supply chain link for the state's commercial fishing industry centred at Lakes Entrance and Portland. More than 200 000 kilograms of fish are sold through the market each week — a sizeable volume. Its value is at least $200 million a year and possibly a lot more.

In December 2001 a report of the Parliament's Environment and Natural Resources Committee on fisheries management noted:

> The Melbourne Wholesale Fish Market is an integral part of the fishing industry in Victoria …

The Lakes Entrance Fishermen's Co-operative (LEFCOL), a mainstay of the East Gippsland economy, is the Melbourne market's largest supplier. About three-quarters of the Lakes Entrance catch of some 4.5 million kilograms of fish a year goes to the wholesale market. The view of LEFCOL and the operators of the 80 to 100 fishing boats it services is that a central city market is important to the industry. It provides a major centralised outlet and creates competition in the market.

The city council and the government will benefit from the takeover of the market site, but in the process they are hanging the fishing industry out to dry. The possibility that the major traders at the fish market may go out and operate separately would create a less than ideal situation.

The hands-off approach of the government contrasts with its direct involvement in the relocation of the Melbourne markets to Epping. The City of Melbourne decided in December 2006 to close the fish market. With three years to plan and develop something new, there has been only inaction. I ask the minister to act to ensure in consultation with the industry that a central wholesale fish market for Victoria is established at a convenient location by the time the present market closes next March.

Mitchell: councillor

Mrs PETROVICH (Northern Victoria) — My adjournment matter is for the Minister for Local Government.

Mr Finn interjected.

Mrs PETROVICH — I would like to make sure he is aware of recent comments by a Mitchell shire councillor who called for Pyalong, one of the towns in the Mitchell shire, to be 'nuked'.

As many members know, in my former life I spent many years involved in local government, and in all that time I never heard of a councillor being so derogatory towards a township in his shire. He may have been attempting to have a swipe at the councillor representing his ward, but his comments were highly offensive to all residents in Pyalong, particularly given that so many of these people have given many hours of community service.

It is unfortunate that the shire meetings in Mitchell have now become known for all the wrong reasons — they have disintegrated into an all-in rabble. I note that in one of the local newspapers the mayor has been trying to hose down the comments made by Cr Gordon, but quite frankly that is a case of far too little, too late. The issue arose after some serious questions were asked about the billycart championships and the way they are being conducted. The questions asked had merit and deserved answers, but instead Cr Gordon derailed this by his comments that included calling the people of Pyalong hillbillies, saying, 'They are more trouble than they're worth'.

Last month the minister announced a series of measures that would make local government councillors more accountable to the public. I ask why it has taken so long for this government to look at the Local Government Act.

It is unfortunate that despite being in government for the best part of a decade, up until now this government has done little to lift the conduct of local councils. Of course some are worse than others. This is why particularly in some regions many good and qualified people are reluctant to put up their hands to serve their local community as councillors. It is a great loss to the local community.

The action I seek is that the minister investigate and report on the entirely inappropriate comments of Cr Robert Gordon and advise what actions can be taken to protect the people and reputation of Pyalong.

Wannon Water: fire services charge

Mr KOCH (Western Victoria) — I raise a matter for the Minister for Water concerning massive increases by Wannon Water for its fire services charge that contribute to the cost of new water infrastructure. Water authorities impose a compulsory charge for fire services based on the size of the connection to the mains supply. Non-residential premises such as supermarkets, schools and public buildings are usually required by law to install fire hydrants and other water-based fire services. In its recent restructuring of water charges, Wannon Water created five separate water supply groups of customers who are now charged significantly different tariffs for the same service.

Previously the annual fire services charge, which was consistent for the entire Wannon Water region, was $175.59 for a mid-sized fire hydrant connection generally used by small businesses, and for a larger fire hydrant as used in schools the charge was $449.54. For mid-sized connections the new fire services charge approved by the Essential Services Commission for Wannon Water ranges from $1102.68 for group 2 customers in the Warrnambool region to $2442.80 for group 5 customers in the smaller Coleraine region. The new approved charge for slightly larger connections ranges from $1603.96 for group 2 customers to $3553.28 for group 5 customers.

After customers expressed shock at such steep increases for this compulsory charge, last week the Wannon Water board approved a 44.48 per cent reduction in the increase for 35 affected customers. While the massive increase will be reduced to about seven times what was originally approved, it shows that Wannon Water completely missed the impact that these increases have on customers. Along with extreme increases for its fire services charge and the introduction of three-tier water usage charges, Wannon Water customers are also complaining about excessive water bills from unread meters.

After a failure at the Hamilton water treatment plant local customers were issued a notice to boil drinking water, but calls for a discount of at least 10 per cent off their next water bill in the form of compensation for this inconvenience were shrugged off by the chair of the water authority, Harry Peeters. His response demonstrates Wannon Water's lack of accountability and confirms that this is an untouchable agency with no duty of care for its customers, insisting they must pay when water maintenance fails. With the Brumby government reaping millions of dollars from water customers through dividends, fees and charges, it

should be contributing a fairer share in the cost of new water infrastructure.

My request is for the minister to review the manner in which water authorities impose such massive increases on small businesses and local schools; I request he establish a fairer, more equitable approach to funding water infrastructure.

The DEPUTY PRESIDENT — Order! I am a little concerned about that matter in the sense that it is quite general rather than specific. It is borderline. I will let it run, but members should try to tighten up rather than look for broad-brush policy change to the adjournment debate, as just suggested. I will let it stand because the member covered quite a bit of information on a specific example.

Frankston bypass: funding

Mr RICH-PHILLIPS (South Eastern Metropolitan) — I wish to raise a matter for the attention of the Minister for Roads and Ports. It relates to the Frankston bypass, which is an important piece of infrastructure to link the existing Frankston Freeway with the Mornington Peninsula Freeway, running through the southern end of the South Eastern Metropolitan Region.

The construction of this bypass has been gazetted for some 40 years, and traffic volumes in the area have now reached a stage where it is essential that that bypass be constructed. Particularly since the opening of EastLink earlier this year, an enormous amount of traffic now feeds into Frankston to the intersection of Frankston–Cranbourne Road and the existing Frankston Freeway. This has put enormous pressure on local roads in that area, and the bypass is essential to alleviate that pressure on Frankston roads.

The government previously committed to building a link off the Frankston–Cranbourne Road onto the existing Frankston Freeway, to be opened at the same time as EastLink. That link has not been opened; it has not even been commenced. So it is even more important that the Frankston bypass be constructed.

Prior to the 2006 election, the government committed to undertaking an EES (environment effects statement) for the Frankston Freeway, and that is presently under way. The Premier at the time, Mr Bracks, also said that if the government undertook to construct the Frankston bypass, it would be without tolls. He indicated that the Frankston bypass was thought to be too small a project to be considered for tolls. Subsequently ConnectEast, the company responsible for the construction of the EastLink project, offered to construct the Frankston bypass as part of an extension of EastLink with a minor toll added, and at the time the government rejected that proposal. More recently the government has been silent on the funding model that would apply to the Frankston bypass.

I now call on the Minister for Roads and Ports, in completing the EES on this project, to confirm to the people of Frankston and the greater south-eastern region that the government will deliver on its commitment to build the Frankston bypass without tolls and not backflip on that 2006 election commitment by introducing a tolling regime. The commitment was quite clearly made by the former Premier that it would be a toll-free bypass, and I call on the Minister for Roads and Ports to confirm that the government will deliver that road as promised.

Responses

Hon. J. M. MADDEN (Minister for Planning) — I have 26 written responses to adjournment debate matters raised between 5 February and 11 September by: Mr Vogels on 5 February, Mrs Peulich on 28 February, Mrs Petrovich on 15 April, Mr Guy on 16 April, Mr Drum on 16 April, Ms Lovell on 8 May, Mrs Petrovich on 10 June, Mr Drum on 10 June, Mrs Coote on 11 June, Mr O'Donohue on 12 June, Ms Lovell on 24 June, Mr O'Donohue on 25 June, Mr P. Davis on 25 June, Mr Koch on 30 July, Mr Rich-Phillips on 30 July, Ms Lovell on 19 August, Mr Hall on 19 August, Mr O'Donohue on 19 August, Mr Finn on 19 August, Mrs Petrovich on 19 August, Ms Tierney on 20 August, Mrs Coote on 21 August, Mr Finn on 21 August, Mr Guy on 21 August, Mrs Petrovich on 9 September and Mrs Coote on 11 September.

In relation to matters raised by members tonight, Wendy Lovell raised the issue of drought assistance, rates, charges and subsidies, and I will refer that matter to the Premier for a response.

John Vogels raised the matter of the police communications centre in Ballarat. I will refer this to the Minister for Police and Emergency Services.

Colleen Hartland raised the matter of the Merri and Edgars creeks reserve, which is, I understand, a VicRoads site, and I will refer that matter to the Minister for Roads and Ports.

Andrea Coote raised a matter concerning the Prahran activity centre, members of the community on the street, people who are venue-hopping and various

issues associated with those matters. I will refer that matter to the Attorney-General.

Kaye Darveniza raised the matter of a plastic bag usage trial, particularly in Wangaratta, and made various requests to the Minister for Environment and Climate Change. I am happy to refer that matter to the minister.

Philip Davis raised the matter of the Melbourne Wholesale Fish Market, and I will refer that to the Minister for Agriculture.

Donna Petrovich raised the matter of a specific Shire of Mitchell councillor, and I will refer that matter to the Minister for Local Government.

David Koch raised the matter of fire services charges levied by Wannon Water and various rate increases. I will refer that matter to the Minister for Water.

Gordon Rich-Phillips raised the matter of the Frankston bypass. I will refer that matter to the Minister for Roads and Ports.

House adjourned 10.28 p.m.