

History of Abortion Law Reform in Western Australia- Where to From Here?

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Can I acknowledge the Whadjuk people -of the Noongar Nation on whose land we are meeting here today and pay my respects to their Elders, past, present and emerging.

The History of trying to achieve abortion law reform here in WA didn't just begin with my efforts in 1998. It began by Dr Hislop, a conservative MP back during the 1950's who I believe experienced in his medical career the results of the backyard abortionists who mutilated women's bodies or even facilitated their deaths because abortion was illegal - but this never stopped women from seeking to have control over their bodies.

The Hon Ruby Hutchinson MLC, a Labor MP and the first woman elected to the Legislative Council advocated, and I quote, "the decriminalisation of indictable childbirth cases" some 66 years ago!

Then during the 1970's a private members bill was introduced into the Legislative Council by the Hon Roy Cloughton MLC, a Labor MP for North Metropolitan Province who served from 1968 to 1980. Roy was also the founding chair of the Family Planning Association in 1971, and from 1969 was the patron of ALRA (Association for the Legal Right to Abortion) - this was a 'courageous bloke' putting what he believed into the parliament. It was by this time Labor Party policy but like all political parties subject to a conscience vote. Although Roy died in 2012 he was a great supporter of mine in 1998 when we finally got reform, Roy was delighted!

I want to also pay tribute to one of the many special activists who worked with people like Roy, myself, many MP's and ALRA to make sure any new pro-choice information that became available was provided to us. Her name was Megan Sassi. She worked for many years at the Alexander Library – a quietly spoken woman, active in ALRA for decades and always there for us – sadly Megan passed away suddenly in 1991 prior to seeing the 1998 reforms achieved. The other person I want to acknowledge is my mentor and very dear friend, the late WA senator Patricia Giles. Pat was in the gallery of the parliament for many hours during the debate and was present when the bill was finally passed in May 1998.

When I was elected in 1989 I had by then been an activist for women's access to safe, appropriate legal health services. We all knew that the two abortion clinics were always at risk providing the amazing services that they had been doing for almost 20 years. No political party would take on the challenge in government - I suspect mainly because they were still mostly men who would never have to make that choice.

We were fighting Australia-wide against liberal MP Alistair Webster who was seeking to achieve a constitutional change that would shut down abortion services Australia-wide. In addition, we had the constant threat by then Tasmanian senator Brian Harradine which would have been a disaster for women and hospitals: public hospitals would not have been able to cope with the increase in the number of women seeking terminations, women first in the queue would be fine; wealthy women who could afford a medically safe termination would have been fine; all others e.g. lower

socio-economic women, first nations women, and women from non-English-speaking backgrounds - their only choice would have been 'backyarders'.

Access was to me of prime concern for all women. The uncertain legal situation here in Western Australia created a number of other disadvantages for women; first problems with access to services (still a problem today despite the 1989 changes), women back then relied on informal referral networks; then the uncertain legal situation also meant that the abortion referral system inevitably operated to a certain extent in a clandestine way; women had to know where to go to get access - quite a problem for women less well educated, migrant women, first nations women, and those disadvantaged by distance - i.e. women from rural, regional and remote areas.

The former abortion information service had by that time closed due to lack of funds so women were unaware and often subjected to the moral judgements and attitudes of some doctors: whether a woman was able to obtain a termination often depended on the attitude of the doctor with whom she consulted; if they denied her information she then had to 'shop around' for a sympathetic doctor often producing potentially dangerous delays.

Labor was in government in 1989 and the first speech that I got to make would be in the 'address in reply' debate which meant I could speak on any topic I wanted. I talked with some trusted colleagues, the women's organisations with whom I was working and despite people saying to me it would be a contentious topic I decided that I wanted to be in that parliament to 'make a difference'. In my view this was the type of legislation that needed to be introduced to protect women, doctors and anyone assisting so they were not risking a prison sentence were they to be arrested and prosecuted.

At that time the sections of the Criminal Code in question were sections 199, 200, 201 and section 259 of the Evidence Act. Section 199 carried a penalty of 14 years imprisonment for the doctor, 200 carried a sentence of 7 years imprisonment for the woman having the termination and 201 carried a penalty of 2 years for an anaesthetist, a nurse, a husband indeed anyone assisting the termination to happen – draconian I believe you will agree. These clauses originated from an 1897 British act which was included in the Queensland Criminal Code that WA government adopted back in 1913.

What I chose to do in my first (maiden) speech on 6 September 1989 was to carve out a case that could actually happen. I said "although abortion by skilled practitioners is available, none of those involved, either in referring for abortions or carrying out abortions has the protection of the law. Women and doctors in particular risk prosecution and severe penalties as long as the law remains as it is. A conservative government or police commissioner could change the situation, virtually overnight, if they decided that the law as it stands must be observed."

Despite my warning, in 1989 no change was enacted in the interim years. So what I had predicted is exactly what happened nine years later when on 10 February, 1998 Dr Victor Chan and Hoh Peng Li from the Nanyara abortion clinic at Rivervale were charged in the district court. It was a conservative government (not its doing) but the director of public prosecutions (not in existence in 1989) that performed the legal event.

What led to this occurring was that a New Zealand woman had a termination, requested to have the remains in order to have a ceremonial burial, took it home in a glass bottle, and stored it in the refrigerator. One of her children told the story at school, a teacher got involved, told the police, who sought direction from the DPP that then led to the charging of the Nanyara doctors.

At the time the courts had an 18 month back-log of cases so effectively this meant due to the uncertainty of the legal position all doctors in Western Australia were very reluctant to perform terminations!

Since 1969 the Menhennit ruling in Victoria and in 1971 the Levine ruling in New South Wales had been what doctors Australia-wide were relying upon to mount a legal argument were they to be charged for conducting terminations. The Menhennit ruling gave permission to 'preserve the physical and mental health of the woman concerned' and the Levine ruling made the position stronger by including the condition of the 'child' as a pregnancy progressed.

At this time Australia wide clinics began to open due to the courage of doctors like Dr Bertram Wainer in Victoria and the late Drs Bob Short at Nanyara and John Charters at Zera here in WA. Quite flimsy you would have to agree. These brave doctors were risking their professions every time they performed an abortion.

At this time Australia had no access to mifepristone or RU486 - the abortion pill. This was prevented from entering Australia by a deal done between Senator Brian Harradine from Tasmania and former Prime Minister Tony Abbott when he was Minister for Health, by an Act of Parliament - this bar was not lifted until the election of the Rudd/Gillard government after 2007.

The conservative Court government had a problem! They knew the services had to continue and they also knew that the legal position was untenable for all concerned but as a government they would/could not act largely because of the 'conscience vote' and the numbers within their own ranks who disagreed with women having access to abortion.

The clinics were still operating although their numbers were down due to the legal uncertainty. In addition, the doctors at KEMH, Drs Harry Cohen and Brian Robermann in particular, who did the second and third term trimester terminations were threatening to go on 'strike'. Remember these amazing doctors had operated for decades under these uncertain legal conditions – they'd had enough and were prepared to support the coalition that had formed with ALRA around the pro-choice MP's.

The pressure that came on myself and my colleague Diana Warnock, MLA, member for Perth, was pretty horrendous! The 'right to life' were being supported by their Melbourne and US colleagues - the big gun lawyers who were senior Catholics and lecturers from Notre Dame University who haunted the corridors of the state parliament working with the Catholic MP's.

I had to contend with my leader, Hon Tom Stephens, MLC and Deputy Leader Hon Nick Griffiths, MLC, both strong Catholics - Tom who earlier in his life was just a step away from becoming a priest - at times they were awful and quite disrespectful - which I never was, as I always acknowledged other colleagues' right to hold a different view to mine, and constantly reiterated that my bill 'did not force any woman to have a termination but it did provide a safe and legal choice for her to make should she wish to take that option'. In the Legislative Assembly some of my colleagues were even worse and sadly I have to say that some of those relationships never healed. However there were very few of the coalition MPs that were so disrespectful – a significant number did not agree with my position but because it was a conscience vote I had to find a number of conservative MP's to offset my Labor colleagues who opposed. I spent many long hours on the phone during February and March of 1998 determining where those votes actually were and was very grateful for the honesty that was on display. The support from ALRA and the pro-choice coalition was fantastic. We

allocated various people to contact and lobby many MP's, particularly those who were doctors and lawyers, in order to convince the waverers.

I have to pay tribute here to my upper house colleague Hon Peter Foss, MLC, the then Attorney General. He had been Health Minister prior to becoming AG and he knew what a difficult problem this was for his government and the state. Between he and I we managed to get the leaders - Premier Court, and Leader of the Opposition, Dr Geoff Gallop - to desist from political point scoring. There was one breakout in the very early stages of the debate, but between the AG and myself getting them to speak to each other, it didn't happen again over that four months, showing that it is possible to act in a bi-partisan way despite such a contentious issue!

I know that the AG also put up with quite a lot of internal crap and disrespect, but he too stayed the course and we achieved not a perfect outcome but one that the state could finally live with. In the main this was truly mostly a bi-partisan effort even though the coalition government should have been taking leadership to fix this problem not a mere back-bencher in opposition.

At this time in 1998 I had decided that I was going to retire at the next election and was in the throes of preparing an Amendment Bill that I intended to introduce into the parliament during 1998. I had discussed this with a number of supportive colleagues and we had already drafted a potential bill which I had shared with Dr Gallop and was prepared to take to caucus when suddenly the doctors were charged.

We had deliberately held this Amendment Bill back before the Christmas break so as not to let the RTLs gather a head of steam so I was very pleased that had been avoided. Dr Gallop then agreed that we should, rather than get caucus permission, and as it was a private members bill subject to a conscience vote, I could just report to caucus from time to time. And that is how we proceeded in the Labor caucus over the four months - there were only six MP's who were anti in the Labor caucus which was an absolute blessing!

Now I had a big decision to make - would I table a straight Repeal Bill or would I table the Amendment Bill in the parliament? This was when I began my discussions with the Attorney General and when he got government permission to offer me access to parliamentary drafting (normally only for government of the day use). Internally I was working closely with my colleague the Hon Jim McGinty, MLA Shadow AG in opposition - Jim, Diana Warnock and I did most of the negotiation on behalf of my bill. The press pushed me hard during February and early March to establish whether I would opt for amendment or repeal - I also had many negotiations with doctors, lawyers and service providers as to what was possible to legislate, always bearing in mind we were dealing with the conscience vote. There were only 20 women in the parliament (at least eight of whom were anti-choice) and mostly blokes who would never be faced with this choice!

By this time the government had come up with their own bill based on my original amendment bill (not owned by any MP) which I suspect was to prevent one of the only assembly government women MP's who was prepared to co-sponsor my bill.

After much deliberation I decided to go with a repeal bill that would see Sections 199, 200, and 201 of the Criminal Code and Section 259 of the Evidence Act repealed - a very simple bill you would think. I had by then established that I had the numbers in the Legislative Council to deliver a successful outcome (what I had asked of my coalition supporters was that if they had to pull their

support they would tell me so I could find another to replace them - nobody ever did) - but we were not so certain about the Legislative Assembly.

I introduced the first and second readings of the Acts Amendment (Abortion) Bill of 1998 on 10th March and did my second reading speech to a full gallery including RTLs and religious zealots with their rosary beads hanging over the gallery! The West Poll on the previous weekend showed that 82% of West Australians believed that abortion should be legal and a decision for a woman in conjunction with her doctor.

I received amazing public support from people such as Hazel Hawke, who came to Perth to address a rally and revealed that she herself had had a termination at age 18; Dr Jocelyn Scutt, a constitutional lawyer; Dr Scott Blackwell then AMA state president (the anti-choice doctors in the AMA subsequently defeated him at the May election); Dr Harry Cohen; Dr Judy Stratton who was a constant at my side and who was given permission by the Legislative Council to assist me during the committee stages on the floor of the council - a very rare event!

I want to explain a little now about how those two bills progressed through each house. My repeal bill was the first completed during the early hours of 3 April and passed 23 votes to 11. By that time I had accepted some of the government amendments which removed it from the Criminal Code but put some provisions in the Health Act - one clause which meant that it was mandatory for one doctor to offer counselling who would not be the doctor performing the termination. If this was neglected there is still a penalty through the legal system for the doctor – a fine and a potential goal term! There is also a new clause that is mandatory for under 16 year olds, and some other clauses which I will touch on later.

The Assembly bill also passed but was ruled out of order when it reached the Council. The Assembly then had to deal with my bill which took an inordinate amount of time.

Prior to the conclusion of the debate I think it is pertinent to reveal that in late April I had contact from a woman who had been raped six weeks previously and thought she was pregnant. She was and also had an STI - she was trying to raise the money to get to Adelaide to get an abortion. The courageous Dr Chan agreed to do the procedure the following day.

I want to now quote from a key-note address which I gave following my retirement from parliament and three and a half years after the legislation came into force: it was at a conference in Adelaide entitled 'Abortion - Politics, Access and Challenges' held on 3 and 4 November, 2001 (see Appendix 1).

As Labor Shadow Spokesperson for women and ageing in mid-1998, not long after the conclusion of the abortion debate, I was able to visit the UK and was afforded access to its Family Planning Association, a number of abortion clinics that were already able to access RU486 (which meant no need for a surgical termination) and Marie Stopes International which, from its profitable clinics in developed countries, could utilise those funds to provide reproductive services in developing nations.

The greatest thrill of this trip to London was an invitation to address the pro-choice MPs in the House of Lords on the success of my legislation. They were still trying to achieve pro-choice laws in the United Kingdom - never did I ever imagine that the young girl who grew up in North Dandalup, country Western Australia, would ever be afforded such an opportunity!

The Gallop Labor government was elected in 2001 and a review of the Acts Amendment Abortion Act of 1998 was conducted and reported in mid-2004. Nowhere in the review was it suggested that any part of the Act should be amended.

Since 1998 when our law was the most progressive in Australia, all other Australian states and territories have amended and modernised access to abortion. Western Australia's legislation is now lagging behind and badly needs updating as access is again an issue, made more difficult for late-term abortions due to the COVID-19 pandemic.

Here we are in 2022 and we have all witnessed the results of the Trump presidency, where he appointed 3 conservative new judges who have already dismantled Roe v Wade - the mechanism which has provided safe, legal abortions for American women for decades! Other moral laws are in their sights. It has focused women's minds worldwide that 'access' cannot ever be taken for granted. This is why the West Australian government, with its substantial majority, now needs to update the 1998 laws.

I think it is ironic that back in 1995, just a year after it was elected, the Mandela government in South Africa enacted laws that legalised terminations for coloured and black women; funded health clinics and effectively eliminated the back yarders, and here we are in the developed world still allowing men like Trump to dictate to women how they will control their bodies! As my former colleague the Hon Peter Foss said during his contribution to the debate, 'a woman never escapes her decision to have a termination'.

I had the opportunity recently to explain on the media just why the WA laws were outdated and what we had dealt with to actually achieve what we currently have, which is basically safe access for women and doctors, but acknowledged that it was not perfect and needed to be updated. The media were seeking to bag the government so it was important to explain why this was.

The 1998 legislation was amended in 2021 to finally provide 'safe access zones' for people entering the abortion clinics - this has only taken 22 years - not before time as women have been enduring the heckling of the right to lifers as they arrived at the clinics for decades. I have been made aware of women then deciding not to enter due to this harassment.

The latest figures that I have for WA are for 2018 which indicate that only 7,816 induced abortions occurred - given the population increase this is less than the 1998 figures. This is despite the fact that the RTLs in 1998 tried to imply that all hell would break loose with the liberalising of the laws. Abortions are predominantly done as a result of 'failed contraception' and the highest age group accessing them are women aged 26 – 35, this has not changed for years. Did you know that an upset stomach can render the contraceptive pill inactive and you can become pregnant?

I was very pleased to hear Health Minister Amber-Jade Sanderson, MLA agree that it needed updating and that she was moving towards a number of amendments to the Health Act, and abortion would be one of them.

In addition, I noted that it was on the agenda for the recent Federal/State Ministers Council, which dealt with domestic violence and women's interests in Adelaide. It was at its conclusion that Minister for Women, Simone McGurk, MLA indicated that she too was working towards updating the West Australian legislation.

That Ministerial meeting of Ministers nationally dealing with reproductive issues also needs to look at the Medicare schedule to ensure that the refunds for terminations are adequate; in addition, the medical termination (the abortion pill) doesn't have a Medicare schedule, I am informed, so needs to be fixed. Unbeknown to most MP's when we did my legislation in 1998, the Attorney General and I made sure that medical termination was included - we had no debate because no member picked it up, as RU486 wasn't commonly known about here in Australia.

There is also a committed group of backbench women who also want to see the legislation updated and are working quietly to ensure the supporters are there.

Section 334 (1-7) of the Health Act 1911 need to be either amended or removed – particularly the one which means 'a woman's consent will only be informed when a second practitioner has advised her of any risks associated with abortion and has offered to refer her to counselling for other matters related to abortion and carrying a pregnancy to term'. This basically treats a woman as though she is incapable of deciding for herself – it's patronising and allows doctors to judge, moralise and in some cases bully women. Section (7) is the 20-week clause where the panel of six, of which two doctors make the decision, comes into play- This is a problem and has been an issue for women during the COVID-19 pandemic. If they were denied then they were unable to go east to get access due to border closures. Also, difficult access for lower socio-economic women, First Nations women, non-English Speaking Background women and women from rural, regional and remote areas in terms of access.

Section 259 (1) and (2) need reviewing as the protection of doctors needs to be updated.

All other states have now updated Acts as it relates to abortion so this should not be difficult – the current WA government has majorities in both houses of the parliament and despite the conscience vote this, I believe, can be achieved. It now needs the political will and leadership to do it!

In conclusion I would like to sincerely thank John and Leza from the John Curtin institute of Public Policy for providing this opportunity for me to keep this issue on the current political agenda. I hope that we will see progress in the not too distant future. The opportunity is now. Even though I left the parliament 21 years ago I still am invested in helping to make this reform more successful for West Australian women.

Appendix I

Proceedings of the Abortion Providers Federation of Australasia 2001 Biennial Conference
Abortion – Politics, Access and Challenges
held in Adelaide, South Australia, 3-4 November 2001

“Abortion and the Australian Political System”

Hon Cheryl Davenport
Co-convenor of EMILY’S List Australia
(Former Member, Parliament of Western Australia)

The title of this paper provides wide-ranging parameters for describing why governments and politicians (particularly in the major Australian political parties) avoid Abortion as a policy initiative in election campaigns and in parliament.

Abortion, like Euthanasia, Prostitution, Gay and Lesbian rights, to name but a few, are controversial topics which fall into the category of moral law reform, and generally have the power to cause Governments and politicians across the political spectrum to “run a mile” rather than address the need to reform often antiquated laws.

Why is this?

As a former politician I have pondered this question constantly during my three decades working in the political system.

Politicians are members of a local community and are elected by that same community. So why is it that many from the major Australian political parties once elected become incredibly CONSERVATIVE in their thinking?

Do they fear that by tackling issues like Abortion they will not be re-elected?

Are issues of this nature considered by Politicians to be ‘single’ issues and therefore not worthy of law reform?

Is it due to the influence of religion on them once elected?

Is it that these issues are just not “big ticket” policy and can therefore be ignored? Certainly this appears on the face of it to be the case for most State and Territory Governments in general terms.

Will this occur again to the
2 bills introduced into H of REPS LAST
week?

But there are exceptions – for example Euthanasia Laws in the Northern Territory introduced by former Chief Minister, Marshall Perron in his last political act before retirement.

Yet the Commonwealth Parliament via a private members bill found the time in its heavy legislative program to debate and defeat the Territory legislation less than a year after its proclamation.

Why was this?

The answer to this question is because the political will existed to achieve it. ~~but the ^{government} was reluctant even to~~

In matters of so-called moral law reform another barrier employed by the major contemporary political parties is the use of a conscience vote as a tool to ensure MP's "behave". ^{great points}

As such conscience votes provide major challenges to parliaments when invoked for the smooth and rapid passage of bills.

An example of such a challenge was the duration of Abortion Law Reform in 1998 when both Houses of the Western Australian Parliament took from early March until almost the end of May to complete one bill. ^{was} ~~this poor~~ ^{MANAGEMENT} ~~by~~ ^{Richard COURT} ~~GOVT~~

The need for reform was created following the arrest of two doctors who provided abortion services at one of Perth's two private abortion clinics. In February of 1998 the Western Australian legal system had an 18-month backlog of cases in the district court.

In posing the afore-mentioned questions I've tried to set the scene for WHY and HOW the 1998 Abortion Law Reform evolved from the Repeal Bill into the *Acts Amendment (Abortion) Act* in the Legislative Council of the Western Australian Parliament.

As well I will attempt to explain some reasons why I believe politicians find it more comfortable to avoid issues like abortion.

WHY THE 1998 WEST AUSTRALIAN ABORTION LAW REFORMS OCCURRED

As referred to earlier law reform became a social, economic and political imperative in February 1998 following the arrest and charging of Doctors Victor Chan and Ho Peng Lee of the Nanyara Clinic in suburban Perth.

It is politic to mention at this point that of the 91 members in the West Australian Parliament in 1998 only 20 were women. 12 of them were pro-choice.

Could gender be another factor in relation to reforming abortion laws?

This is a decision men will never have to make for themselves.

Had there not been a political imperative to ensure certainty for women I don't believe the debate would have made it on to the parliamentary agenda.

ACCESS to abortion services for West Australian women was WHY the majority of WA politicians finally realised that urgent action was required to reform the State's antiquated abortion laws.

The local community had reacted loudly via the print and electronic media voicing its opinion that the time had come for Government/Politicians to LEGISLATE change rather than relying on the Court to interpret existing law.

Ironically it had been almost thirty years since enforcement had occurred and most people actually thought the procedure was legal.

Politicians were blitzed with correspondence, emails and telephone calls from both pro and anti choice activists.

No politician was left in any doubt that the anti choice cause was and continues to be far more organised and vocal. Its Campaign was well-funded and its activists single-minded and committed.

Politicians had a tough decision to make.

To ensure access continued as it had despite the law for the past three decades it was obvious either the Government or a private member had to introduce legislation.

Following the February arrest debate raged continuously in both the media and within the political parties on how reform could be achieved.

By the beginning of the autumn session of State Parliament the Government had decided to introduce its own criminal code amendment bill upon which it allowed its members (including the responsible Minister) a conscience vote.

I then announced my intention to introduce a repeal bill. The Attorney General (approved by Cabinet) offered parliamentary drafting expertise as well as a bi-partisan approach to ensure the legislation was adequate and correct.

And so began a remarkable and at times unique strategy to achieve legislative reform.

Both the government bill and my bill completed passage through the house to which it had been introduced. However in April the government bill was ruled out of order in the Legislative Council. My bill having already been amended in the Council then began its passage through the Assembly where it was again amended before returning to the Council for final adoption.

PARLIAMENTARY PROCEDURES

Parliamentary procedures are complex.

My bill following its Assembly passage could have again been amended in the Council to restore it to its previous format. Had this occurred a procedure called a "Conference of Managers" would have resulted. This course would almost certainly have resulted in the lapsing of my bill if agreement couldn't be reached. No member elected to a Conference is

compelled to agree. Had an anti-choice MP been elected by either house the bill would have lapsed because the tactic would have been no agreement.

Parliamentary procedure in Western Australia dictates that while a Conference of Managers takes place neither house of Parliament can resume other business. The Conference has no time limits and could have gone on for days – another tactic embraced by anti-choice MP's throughout the debate.

A major dilemma! Did I amend again and risk the bill lapsing after four months of parliamentary work? Or, did I accept that on this occasion this was the best reform we could achieve?

In opting for the latter decision I have subsequently been criticised by several pro-choice advocates as they believed I was "giving in".

Leslie Cannold and Cait Calcutt (2000) in a recent paper in which they analyse the 1998 West Australian and Australian Capital Territory bills, say that I "seemed to be making compromises". The inference is that the bill was really in trouble and had I not compromised, the Parliament would have been forced to agree with me. This seems to be based on the fact that my Bill was now the only one still in existence.

Along with other pro-choice MPs I knew that our window of opportunity was closing. MPs who weren't as committed as we, particularly in the Assembly, were experiencing intense lobbying from both sides which was working. They were tired, frustrated and wanted the debate to end – and after so many months that was understandable.

The paper also appears critical of both Dr. Judy Straton (my trusted medical/technical adviser for the duration of the debate) and I because to Cannold and Calcutt (2000) it "appeared [that we] had not agreed on bottom lines".

At times the Parliamentary process forces decisions to be made instantly.

When the debate was in the committee stage in the Assembly (i.e. debating bills clause by clause) I could only be a spectator rendering it impossible for me to be active debating on the floor. In this stage of the process it is possible to be dealing with a substantial number of amendments to each clause – some are placed on an amendment notice paper in advance (providing the opportunity for negotiation prior to debate), but other amendments can and were moved from the floor of the parliament – in that circumstance it is virtually impossible to influence. Some amendments just come from left field and control of the debate is lost because there is no opportunity to refute the consequences an amendment can have in reality.

In a number of instances in the Assembly debate as described above is what Straton and I were up against. Often it was late at night or in the early hours of the morning – MPs were tired, irritable, uncooperative and did not fully comprehend what effect an amendment might deliver in practice.

For those activists and providers who may doubt my commitment to liberal law reform I hope this attempt at explaining parliamentary procedures might provide some insight into the difficulty faced.

Voting was extraordinarily close on many critical amendments.

During debate in the Assembly at times it was almost impossible to anticipate which nervous MP would vote unpredictably making it impossible to know just which one to lobby, and that's if time permitted.

The West Australian legislative experience also demonstrates the enormous problems facing MPs in achieving just outcomes.

Such was my experience just two days after the conclusion of the legislative reform. I was shattered to be told over the telephone by a pro-choice activist from New South Wales that in her view I had put the rights of West Australian women back 25 years!

But on the other hand, two leading West Australian political science academics concluded in September 1998 that "from the point of view of the outside observer the process had been a remarkable exercise in the capacity of government and parliament to improvise solutions in a situation where the usual parliamentary processes were inappropriate." (Black and Phillips 1998)

HOW LAW REFORM IN WA WAS ACHIEVED

When a conscience vote is invoked how is it possible to 'gather the numbers' to effect change?

And herein lies the real challenge for individual politicians pursuing meaningful reform.

From my own experience it is imperative to have an active organisation/s doing the grass roots work to ensure that politicians from election to election are informed initially and kept up to date with community thinking on these controversial moral law reform issues.

I was extremely grateful for the existence of the Association for the Legal Right to Abortion (ALRA) which grew out of adversity in Western Australia over 25 years ago. The knowledge and expertise of this organisation was crucial to our success.

These organisations can establish what each individual politician's position is on the particular issue in question. Some politicians will be honest enough to give a straight YES or NO to support. Other politicians will give excuses like they are not prepared to commit one way or the other "until they see the legislation."

This latter category is the group of politicians that I was able to direct my personal negotiation and lobbying skill towards once we knew legislation was inevitable. The task was initially directed to obtaining 'in principle' support for repeal and later in lobbying for individual amendments.

I also found it necessary to be in continual contact with a significant number of MPs to ensure they didn't "lose their nerve" when the going got tough. This involved enormous amounts of time inside and outside the parliament. Members of ALRA, the Coalition for Choice and the Health Industry Group were a life-line for me to ensure that individual MPs were able to access appropriate medical, technical and legal advice over the duration of the campaign.

My experience on this issue has also taught me that if a politician takes on a law reform task of this nature it is imperative that one can demonstrate knowledge and expertise when the