Legislative Council

Tuesday, the 15th October, 1968

The PRESIDENT (The Hon. L. C. Diver) took the Chair at 4.30 p.m., and read prayers.

QUESTIONS (3): ON NOTICE

PRINCESS MAY SCHOOL

Allowances for Master-in-Charge

1. The Hon. J. DOLAN asked the Minister for Mines:

   Further to my question on Wednesday, the 9th October, 1968, I ask—

   (1) Has the Government school teachers' tribunal provided for a temporary allowance of $530 to the master-in-charge of the Princess May annexe at the John Curtin Senior High School, whilst he is engaged on his present duties?

   (2) If so, was this allowance paid to him during August, 1968?

   The Hon. A. F. GRIFFITH replied:

   (1) Yes.

   (2) No. The previous question referred to increased payments of salaries due to the appeal. These increases were paid during August. The reply was thus in respect of increases in existing salaries.
   In the present particular case a new temporary allowance was granted and payment was made on the 3rd October, 1968.

LICENSING ACT

Age Anomaly

2. The Hon. J. HEITMAN asked the Minister for Justice:

   In view of the control exercised by a club committee over its members as against the control of a publican dealing with the general public, will the Minister give consideration to removing the anomaly in the Licensing Act whereby a child as defined by section 146 (4) of the Act is not permitted in the bar of licensed premises if under the age of 18 years, and yet a member of a club is not permitted on the club premises if under the age of 21 years?

   The Hon. A. F. GRIFFITH replied:

   The question is one involving the legal age for drinking and will receive consideration with the general review now being undertaken.

EDUCATION

Leave for Teachers

3. The Hon. R. F. CLAUGHTON asked the Minister for Mines:

   Further to my question on the 9th October, 1968, regarding leave for teachers, how many were granted leave for each of the calendar years 1967 and 1968?

   The Hon. A. F. GRIFFITH replied:

   1967—14.

   1968—12.

BILLS (2): RETURNED

1. Nurses Bill.
2. Child Welfare Act Amendment Bill.

Bills returned from the Assembly without amendment.

ART GALLERY ACT AMENDMENT BILL

Third Reading

Bill read a third time, on motion by The Hon. L. A. Logan (Minister for Local Government), and passed.

FIREARMS AND GUNS ACT AMENDMENT BILL

Second Reading

THE HON. A. F. GRIFFITH (North Metropolitan—Minister for Mines) [4.41 p.m.]: I move—

That the Bill be now read a second time.

There are about 80,000 firearm licenses in this State and all of these expire on the last day of December in each year, irrespective of the date of issue. One of the purposes of this Bill is to permit the staggering of the expiry dates by amendment to section 6, which it is proposed to repeal and re-enact.

The re-enacted section will render a gun license valid for a period of 12 months from its date of issue. To facilitate this, it will be necessary to permit the Commissioner of Police, in respect of the 1969 issues, to issue a license to remain in force for any period of not less than six months, but not more than 18 months. This will cover the transitional period.

It is further proposed that an equitable pro rata provision will apply which will enable the fixing of a fee payable on the issue of the license to bear a relation to the number of months applicable to its currency. Thus, in respect of a license to remain in force for any period less than 12 months, the prescribed fee will be reduced by 10c for every month or portion thereof by which the period is less than 12 months. Appropriately, the fee will be increased by 10c for every month or portion thereof by which the period of the currency of the license exceeds 12 months.

A similar procedure, adopted in 1947, in respect of drivers' licenses evinced that a period of 12 months, over which to vary the renewal dates, was requisite, and members may recall that, under the provisions of the 1946 amending Act, the department was authorised to issue licenses during the following year for periods varying from six to 18 months. Similar action in respect of firearms and gun licenses will enable the department to commence varying the currency of licenses with effect from the 1st January next. These staggered renewal dates will then be in operation on the establishment of the computer system.

A further amendment in this Bill arises from a submission made by the Commissioner of Police that consideration be given once more to amending section 9 to remove the exemption from the necessity to hold a license now granted to members of rifle clubs. A similar proposal was considered some years ago as a result of several incidents where individuals had breached the law with weapons that had come into their possession through their membership of rifle clubs.

At this stage, the Government, rather than agreeing to the withdrawal of the exemption, suggested the calling of a conference between the W.A. Rifle Association and the Minister. At this conference, held on the 15th August, 1966, agreement was reached on certain conditions as to the control of firearms and issue thereof to members.

It was subsequently found necessary for an exchange of correspondence between the Police Department and the association, and some further discussion, before some of the more important points of agreement were implemented. Nevertheless, a number of serious breaches have occurred, to the concern of the police, with respect to the operations of some of the clubs and the method by which rifles have been made available to certain individuals.

It eventuated, in fact, that the W.A. Rifle Association was obliged to advise the police of the suspension of a rifle club member. As a result the police seized the member's rifles in accordance with the agreement reached with the association. The rifles were later returned to the member concerned, but it was the opinion of the Crown Law Department that, although suspended from the association, the individual concerned was still a member of his rifle club and thus entitled to the exemption from licensing.

This incident, I would suggest, clearly revealed a disability in the association's powers of enforcement of the assurances given to the department. The commissioner's contention, with which the Government is in agreement, is that members of pistol and gun clubs be required to hold licenses; and no justification can be seen for the exemption of rifle club members.

In order to implement this contention, it would be necessary to amend section 9 of the Act by deleting both the exemption now given to members of rifle clubs and also that purported to be given to members of the defence forces. This latter amendment becomes necessary because it is not within the power of the State to legislate on the subject at all, as the position is that a member of the forces in possession of a firearm, without authority under the relevant law of the Commonwealth, commits an offence against our Act and no provision need be made specifically for such situation in State legislation.

During the debate in Committee on this Bill in another place, the amendment contained in paragraph (b) of clause 3 was agreed to. This amendment was aimed simply to bring the members of a pistol club into line with the members of a rifle club. They would then both be on the same footing as the members of gun clubs referred to in paragraph (f) of the section amended by clause 3; namely, section 9 of the Act. However, I would foreshadow a further amendment which I hope will have the effect of tidying up the amendment made in the Committee stage in another place.

Debate adjourned, on motion by The Hon. W. F. Willesee (Leader of the Opposition).

DIVIDING FENCES ACT AMENDMENT BILL

Second Reading

Debate resumed from the 8th October.

THE HON. W. F. WILLESEE (North-East Metropolitan—Leader of the Opposition) [4.48 p.m.]: The parent Act came before us in its original form in 1961, was subsequently passed, and was written into our Statutes. The 1961 Bill basically took the pertinent sections of the Cattle Trespass, Fencing and Impounding Act and those of the New South Wales Act, which was already on the Statute book of that State, and wrote them into our legislation. In this manner we created the Dividing Fences Act.

At that time, whilst the Bill was supported in principle, some pertinent points were taken with regard to this very vexed question. I believe it was necessary to create a law whereby, when a stalemate occurs, there shall be provisions within the Statute for a decision at a legal level. In most cases when we deal with dividing fences an amicable relationship occurs and an amicable settlement is the result; but that is not always the case, of course. Basically, however, that was the supporting factor when the original legislation was introduced. Now we will go a step further and will include in the Act the right to realign or repair a fence.

I see a danger in the use of the word "repair," contained in this Bill. It is suggested that we amend section 5 of the Act and add after the interpretation of "owner" the following:—

> "repair" includes re-erect and re-align and inflexions of the word "repair" include corresponding meanings;

I am not quite clear what that means, but I can give a pretty general dictionary definition of the meaning of the word "repair." To repair something means to fix it; to restore it to a workable condition; to mind it; or to heal it. Nowhere have I been able to see that the definition can be extended to "re-erect" or "realign."

It can be said that where there is a difference of opinion on the realignment of a fence and a stalemate develops between the owners concerned, there should be an avenue available for a decision to be reached. I fear that basically we are getting away from making the law clear, and tending to make an appeal to the courts very easy.

In this State at the present time there must be many boundary fences slightly out of alignment. A fence—a perfectly good fence—might be only two or three inches out of alignment, and could have been erected in that position for a perfectly good reason; namely, that the two original owners did not agree on the fence, so one went it alone and built the fence a few inches inside the boundary of his property. I know of such cases.

With the passing of this Bill, if the neighbour had a change of mind he could cause the fence to be realigned. Furthermore, he could be eligible to receive compensation, and the person who built the fence originally would have no redress whatsoever.

The Minister mentioned, as an example, that a fence may be constructed in a water hole and be subject to washaways, I think it would be a matter of common sense to re-erect such a fence in another position. However, from what I can see in this Bill compensation will be payable to one of the property owners, and I think that would be quite unnecessary. If a fence which is washed away every so often, is moved to a higher portion of ground, it is reasonably obvious that some land has to be forsaken by one owner or the other. However, to say that it is necessary for that land to be the subject of compensation is wrong.

Most of the clauses contained in the Bill surround the amendment to section 15 of the principal Act. There has always been a problem associated with the siting of dividing fences. When this legislation was introduced it was for the purpose of overcoming this situation in suburban areas. However, it seems to me that we have gone beyond the realm of interpretation. We know what the interpretation of the word "repair" means, but suddenly, through this legislation, we give the word a completely different sense of value and interpretation.

With the passing of this legislation, a cantankerous person could force his neighbour to appear before the court. If the fence was the subject of realignment, and his appeal was agreed to, a new fence would have to be built. Even though the fence was built on the correct alignment, if it did not suit one of the parties he could demand to have the fence re-erected. This could occur even though the fence was erected in that position for a special reason in the first instance.

I feel that the interpretation of the word "repair" is completely out of context with the existing legislation, and I propose to vote against it. When the Minister made his speech, he gave us nothing to justify what he said. The Minister stated—

> There is provision in clause 5 for realigning a fence and for providing for compensation to cover the extra expenses of an owner who, through a court order, would have to provide additional fencing and includes provision for consideration of loss of occupation of any land.

When I think of the probabilities which could occur under this Act, and the very vague interpretation submitted in support of the Bill, I think it is premature to have this inclusion in the Act. We should have specific instances outlined to show why it is necessary to change completely the context of a word which has stood the test of time for centuries. I intend to oppose the Bill.

THE HON. I. G. MEDCALF (Metropolitan) [4.59 p.m.]: I do not wish to say very much on this Bill, but I would like to say something on the subject of repairs to fencing. The original legislation provided for the realignment, or the change in the alignment, of a fence away from the boundary where it should have been located.

As the Minister pointed out in his second reading speech, no provision was made for the situation where the fence was already erected and had fallen into disrepair. I think it is reasonable that where a fence is erected in a place which is unsuitable, there should be provision for it to be realigned.

At the present time, there is no provision for the realignment of a fence which already exists. The provisions of the Act apply only to the erection of a new fence.

It is a fact that sometimes fences are erected in places which were quite reasonable at the time of their erection but, with the passage of many years, they become unreasonable places in which to have fences. This applies particularly on farming properties where there is a brook or a stream which changes its course. An example of this is the Gingin Brook. I know

of cases where the Gingin Brook has wound around the countryside and changed its course over many years. It has certainly changed its position with relation to the boundaries of adjoining properties, so that the owners of some of the properties—and they are very old properties in that area—have discovered that by changing its course the brook has come into their properties, which was not the case previously when the brook formerly ran alongside the boundary fence. In some cases the brook has disappeared and has appeared on neighbours' properties, and so on.

There are many other cases where streams which are fast flowing for certain times of the year create a good deal of havoc with boundary fences because of changes in the course of those streams. The same thing, but to a lesser degree, applies where fences have been erected around rocky outcrops. In those cases the boundary lines would be altered. Other geographical features could affect the boundary fence, too. For instance, an earthquake could change the boundary fences of farmers' properties.

The Hon. W. F. Willesee: Wouldn't that be by mutual consent!

The Hon. I. G. MEDCALF: No, that would be an act of God. It may seem fanciful but it could well happen that where the earth contracts there could be a change in the boundary. Whether there will be any instances of that, remains to be seen.

Getting back to the common situation of the fence which was erected in some reasonable place, and a brook changes its course and the fence, after many years—or what is left of the fence—is in the middle of the brook, or the bed of the stream, this is a situation which demands some attention by Parliament.

If it is good enough to allow farmers who erect fences for the first time to agree to an alignment so that their fences will be built away from some natural obstacle, surely it is good enough to allow them, when they are repairing their fences, to remove them from a natural obstacle.

I quite agree with Mr. Willesee that there will be problems. I think he pointed out some of the problems that could arise and I am certain there will be others. For that reason I am pleased to see the court retains its jurisdiction to settle these problems—it can be called upon to settle some of the difficult ones.

As regards the subject of repairs, which Mr. Willesee mentioned, I think the term would be taken normally to mean repairing a fence by restoring it to its previously good condition. It would not mean the erection of a different type of fence, or the construction of some entirely new structure. It would simply be the restoration of that particular item—the fence—to its presumed previously good condition.

As far as compensation is concerned, this is a difficult situation, but I think it is one that must be accepted. For instance, if a farmer—and I am taking the case of a farmer because these cases will obviously arise in country areas—finds that the boundary fence between his property and his neighbour's property runs down the centre of a brook, and he wishes to realign it on his side—and his legal boundary also runs along the centre of the brook where his fence is—he gets the double advantage of having the fence on his side of the brook and his cattle will be prevented from falling into the bed of the creek.

The Hon. J. Dolan: What would happen when they wanted a drink?

The Hon. I. G. MEDCALF: I am assuming there is no water in the brook. Of course, there may be, in which case he could probably use a pump for pumping water for that purpose. In addition to what I said previously, he will obtain compensation for the deprivation of his land which is occasioned by erecting the fence on his side. However, I would not suggest that substantial compensation would the awarded in such a case; I think it would be purely nominal.

Although there will be problems associated with this matter I think they are problems we must accept once we accept the proposition that it is sensible to erect the fence away from some position where it will be useless and will not be able to perform its proper function.

THE HON. J. HEITMAN (Upper West) [5.7 p.m.]: I would like to say a few words on this Bill. I agree with Mr. Medcalf that on many occasions in farming areas the position does arise where neighbours will want to shift the alignment of fences for various reasons. I think in days gone by surveyors were not so particular about surveying boundary lines in places where fences could be erected, roads could be built, and so on. For this reason I have seen many fences erected in country areas in places which made the task a most difficult one. In many instances if the survey line had been shifted one or two chains to one side or the other a good alignment could have been arrived at.

I think the Bill will go a long way towards helping those who wish to erect their fences on a new alignment and those shires which wish to realign roads. Under the Local Government Act and the Dividing Fences Act, with these amendments included, the shires will be able to carry out this work.

The Hon. W. F. Willesee: Don't you think the word "realignment" is much better than the word "repair" in the instances you are quoting?

The Hon. J. HEITMAN: Probably it is. Perhaps the word "repair" would have effect in certain instances.

The Hon. W. F. Willesee: Where a fence is repaired.

The Hon. J. HEITMAN: But one can repair a fence on a new alignment.

The Hon. W. F. Willesee: Fair enough.

The Hon. J. HEITMAN: It is better to do that, in some instances, than to repair a fence on an existing alignment.

The Hon. W. F. Willesee: That is so in some instances.

The Hon. J. HEITMAN: For that reason I go along with the Bill. Perhaps the word "realignment" would be better; but, for various reasons, if part of an old fence were realigned it would still be called a repair job so far as the existing fence is concerned.

There are many other aspects, including the taxation angle. It would be referred to as a repair job, or a replacement, even if the fence is being realigned. It is still a replacement fence and would therefore be a deduction so far as taxation is concerned.

I think the Bill is a step in the right direction and it will overcome many problems. As a matter of fact, I think there are more arguments in the country over dividing fences than any other subject. If we can overcome those problems by a small amending Bill, such as this one, so much the better for all concerned. For that reason I support the measure.

THE HON. L. A. LOGAN (Upper West—Minister for Local Government) [5.10 p.m.]: I think Mr. Willesee has probably misinterpreted the amendments contained in this Bill. Actually, the measure is in two parts: One deals with a fence that is continually being washed away from its present alignment and therefore it is necessary to realign it but difficulties occur because one of the persons concerned is cantankerous and will not agree to the realignment. Whilst there is power to go to the court to ask for a new line to be fixed, there is no power in the Act to allow a person to approach the court to realign a fence which has to be repaired. That is all the Bill does—overcome that situation.

The repair and the alignment of a fence are two separate functions, and that is why there are two separate parts to this measure. Let us take the case of a fence that is a mile long, and a section of two chains has to be realigned because of washaways. Surely when it is realigned that is repairing the fence! That situation has already occurred and is the reason for the introduction of these amendments. In one instance a cantankerous property owner would not agree with his neighbour on the line of the boundary fence, and at present there is no power for the matter to be decided by the court. It is necessary to give the court power in these cases to decide where a new alignment shall be so that fences in such instances can be repaired, and also, if necessary—although this would not occur very often—to award compensation. That is all the Bill does.

I would say that in 999 cases out of 1,000 neighbours would reach an agreement; but it is the one-thousandth case that we have to provide for, where neighbours cannot reach an agreement.

The Hon. W. F. Willesee: Why don't you wait until you have specific cases?

The Hon. L. A. LOGAN: It is because we have a specific case that the Bill has been introduced.

The Hon. W. F. Willesee: But have you got 1,000 of them?

The Hon. L. A. LOGAN: There is one specific case where owners of adjoining land cannot agree. Surely we should correct such an anomaly. In other cases, where the repair of a fence is involved—and I could give two instances of this—one owner of land wants to repair the fence to a certain standard but the other owner claims that the fence should be repaired to a much lower standard.

Under the Act as it stands, whether in the metropolitan area or the country, if a new fence is to be erected owners have the right to go to the court and ask the court to decide what is a sufficient fence. However, in regard to a fence which has fallen into disrepair there is no provision to enable an owner to go to the court for a ruling as to what is a sufficient fence in relation to the repair work. All the Bill does is to overcome the two anomalies to which I have referred. Therefore it is necessary to have the word "repair" covering re-erections and realignments. That is all the Bill deals with and I commend it to members.

Question put and passed.

Bill read a second time.

In Committee

The Deputy Chairman of Committees, (The Hon. F. R. H. Lavery) in the Chair; The Hon. L. A. Logan (Minister for Local Government) in charge of the Bill.

Clause 1 put and passed.

Clause 2: Amendment to section 5—

The Hon. W. F. WILLESEE: I do not think the Minister gave a very clear answer to the questions asked. He did not indicate clearly what is meant by "renew" and what is meant by "repair" on a new alignment.

When the owner of a property which has a mile of fencing decides to realign a section of it, then it cannot be said that this is repairs to the fence on a new alignment. If the word "repair" is used in its

correct sense we would have a simple Bill before us. In his contribution Mr. Heitman kept on using the word "realignment," and that is what the clause deals with. Immediately a new alignment is set up then a new fence is constructed. We should not confuse repairs to a fence with realignment of a fence.

The Hon. J. Heitman: It would be the replacement of a fence.

The Hon. W. F. WILLESEE: I understand the honourable member is very keen on the taxation angle of this question, and he prefers to regard it as the replacement of a fence.

The Hon. A. F. Griffith: It does not matter.

The Hon. W. F. WILLESEE: How would the Minister know? He is a farmer in a very small way.

The Hon. A. F. Griffith: I still know the difference.

The Hon. W. F. WILLESEE: I reserve the right to disagree.

The Hon. A. F. Griffith: I am trying to help the honourable member.

The Hon. W. F. WILLESEE: This Bill is not being supported to any great extent by those who are in favour of it. Mr. Medcalf has reservations about the measure. In every instance when the question of payment arose, it was said that the cost would not be very much. If the cost will not be very much, why is there a need to write this provision into the Act when there is no need for it? We are not here to provoke litigation; our job is to make the laws as clear as possible; and to use the words of Dr. Hislop on one occasion when I was first elected to this Chamber, "Let us make the laws abundantly clear." We will not be making the legislation clear when we use the term "repair" and desecrate it. The provisions in this Bill will affect the ordinary person, and although he has to try to interpret the legislation it will have to be looked at by specialists and interpreted by lawyers.

Under this clause there is to be a special interpretation of the term "repair." We should do away with this definition and use the terms "repair," "re-erect," "realign," or "replace," where necessary. This is a poor piece of legislation, and I am sure most members know that is so.

The Hon. L. A. LOGAN: The language used in the Bill is abundantly clear. There could be a fence of a chain in length between two houses in the metropolitan area which was in need of repairs.

The Hon. W. F. Willesee: You mentioned a mile of fencing a while ago.

The Hon. L. A. LOGAN: I said there were two distinct parts to this Bill. The honourable member did not listen to what I had to say.

The Hon. W. F. Willesee: To be quite frank, I do not think you know.

The Hon. L. A. LOGAN: One part deals with the property on which part of a fence has been washed away, and the fence has to be realigned because it is not possible to reconstruct it on the survey line.

The Hon. W. F. Willesee: Do you say that is repairs to the fence?

The Hon. L. A. LOGAN: Of course it is. The fence is repaired by realigning it, and by joining it up with the other sections. This fence has to be built to exactly the same standards as the remaining sections. When a section of a fence is washed away, then the fence is repaired by replacing that portion. It is still a portion of the existing fence.

The Hon. R. Thompson: You are losing your argument.

The Hon. L. A. LOGAN: I am not. In that instance all that is being done is to repair the fence by re-erecting that portion to the same standard as the existing fence.

To turn to the other part of the Bill, it deals with instances where two adjoining property owners cannot agree on what constitutes a sufficient fence when it has to be repaired.

The Hon. W. F. Willesee: There is no mention of a sufficient fence in this legislation.

The Hon. L. A. LOGAN: There is in the Act.

The Hon. W. F. Willesee: There is no mention of it in the Bill.

The Hon. L. A. LOGAN: The definition of a "sufficient fence" is laid down in the Local Government Act. That part of the Bill governs cases where neighbours cannot agree.

The Hon. W. F. Willesee: I am not denying that, but I raise objection to the way in which the Bill has been put together.

The Hon. L. A. LOGAN: I still say the language is abundantly clear.

Clause put and passed.

Clauses 3 to 6 put and passed.

Title put and passed.

Report

Bill reported, without amendment, and the report adopted.

HEALTH ACT AMENDMENT BILL

Second Reading

Debate resumed from the 9th October.

THE HON. R. H. C. STUBBS (South-East) [5.24 p.m.]: As the Minister said in his second reading speech, the Bill is designed to amend various aspects of the Health Act. This is a very old Act, and

it was assented to on the 16th February, 1911—almost 58 years ago. Naturally the Act has to be kept up to date from time to time.

As circumstances arise, and as new technology in food handling and new materials are developed, we should take advantage of the situation. Much has been learnt in recent times in matters concerning the handling of food and various aspects of public health.

I have no objection to the Bill, and what I have to say I will say now. I will not speak to the clauses in the Committee stage. Clause 2 enables better use of the borrowing powers of local authorities to be made. It will enable more finance to be made available.

The Hon. G. C. MacKinnon: Will you speak up so that we can hear.

The Hon. R. H. C. STUBBS: This clause will enable more finance to be made available for essential sewerage works by using the borrowing powers of local authorities to the best advantage. It will be a great source of borrowing power, and this will enable essential sewerage works to be built in suburbs and centres where such works are necessary. The apparatus for the lytic treatment of sewage, or the septic tank system, has been very successful, and this method is certainly an improvement on the methods that were used previously. However, where such systems are built on lowlying land on which the water table is high during the winter they become ineffective, and they could pollute the ground waters and cause health hazards. There is ample evidence that this has happened in many places.

The Bill will allow local authorities to make better use of their borrowing powers for the construction of sewerage works where necessary. I know it will not be the means of solving completely the problem of finance for sewerage works, but it will assist to a considerable degree. It is just a matter of making use of the borrowing powers in a sensible way.

Clause 3 contains a very important and a completely essential provision. It proposes to amend section 112A of the Act by adding a new provision—subsection (4). This deals with the use of incinerators on private properties. Some people burn cuttings, leaves, and prunings when the sap is still in them. They might light their incinerators at inconvenient times; probably when the neighbour's washing is on the line, or when a strong breeze is blowing. Some incinerators are placed in positions which cause inconvenience to the neighbouring properties, and in some cases not far from a neighbour's kitchen window. Such inconsiderate people, either through ignorance or through perversity, make a pest of themselves. Under the provision in this clause local authorities will be given the power to deal with such cases. I presume the local authorities will give ample warning to offenders, and will not prosecute for a first offence. However, if offenders persist they deserve all they get.

The Hon. G. C. MacKinnon: Some people even pour sump oil on the rubbish to be burnt to create a fierce fire.

The Hon. R. H. C. STUBBS: Yes. When they do that the fire gives off thick, black smoke.

Clause 4 seeks to clean up a difficult situation in regard to houses that are under orders for demolition, because they are unfit for human habitation. This provision will apply when the necessary orders have been served and the time prescribed is exhausted. A local authority has the power to serve an order on an occupier or owner directing that certain repairs or renovations be carried out within a stipulated time. If the occupier or owner does not comply the local authority has the power to proceed with the demolition of the dwelling and, under this clause, to arrange for the disconnection of electricity and water.

At the present time a difficulty arises, because the occupier pays a deposit to have the electricity connected, and when he vacates the premises the deposit is refunded to him. This appears to be a contract between the occupier and the authority supplying the electricity. The provision in clause 4 will enable a local authority to arrange for the electricity to be disconnected, but this action will not be taken without a right of appeal by the occupier. There is ample opportunity under the Health Act for appeals to be lodged, and under section 36 appeals against orders and decisions of local authorities may be made to a magistrate, who will hear both sides of the case. The decision of the magistrate is final.

Section 37 allows for appeals to the commissioner by the aggrieved party, from orders and decisions of the local authority; and the commissioner may uphold, revoke, vary, or alter the decision or order. This disconnecting action will be taken after all avenues of appeals are exhausted.

Clause 5 deals with section 195 which is to be repealed and re-enacted. It concerns slaughterhouses, and the provision at present is that brick, stone, cement, and asphalt are allowed for the floors of slaughterhouses. This provision is now obsolete and under the new section it will be necessary for the floors to be impervious and properly constructed of approved materials, with correct drainage. Many materials are available today which are used in concrete to make it impervious. These new standards are now to be prescribed and must be adhered to. A committee is working on new and modern requirements for slaughterhouses and I

believe its work is almost finalised and these new standards will be required as a result.

A new section, which contains a very important amendment, is to be added after section 205. It will give the commissioner power to stop the production in a food factory which is suspected of manufacturing food believed to be contaminated. Production will cease until all work is done to bring the factory up to the required standard so that the food is no longer contaminated.

Of course the Public Health Department usually becomes aware of food contamination only because of an epidemic of food poisoning. When this occurs it can take immediate action. I think this new amendment will have the effect of ensuring that the owners of factories will lift the standard of hygiene and also make sure that their employees maintain a high standard of hygiene. A person who maintains a very good standard will have nothing to fear, I am sure.

Precooked foods are extremely perishable, as are brawns, pies, sausage rolls, sausages, and mincemeat. These are all suspects in food poisoning cases as is also the seasoning in poultry, and that sort of thing. Minced and chopped meat deteriorates quickly and hygiene in the manufacture of foods is necessary as is also the quick, safe, and hygienic delivery of food.

Epidemics do occur. I heard recently of a case where a proprietor of a cool drink shop was storing his cool drinks in the toilet. An inspector visited his premises and the proprietor was highly irate because the inspector made him remove them immediately.

Two important food poisoning agents are salmonella and staphylococci. Salmonella was identified by a Dr. Salmon, and there are 1,200 species of salmonella organisms. It is the typical food poisoning organism.

The Hon. R. Thompson: They are all in kangaroo meat.

The Hon. R. H. C. STUBBS: Yes, I know. Food can also be contaminated by mice excreta, and therefore all cupboards should be vermin-proof in order to eliminate the mice population which cause contamination. A number of old buildings are not vermin-proof and yet they house food which is sold.

Staphylococci bacteria multiplies very rapidly. A sore finger or hand could infect food. It is a heat-resistant toxin which is not destroyed by cooking, and when ingested, the poison rapidly takes effect. It has a two to six-hour incubation period while the salmonella group has an incubation period of 12 hours onwards. In both cases a person infected can become very sick. Therefore we must ensure that our food supply is safe and hygienic at all times, and that people handling food are conscious of their responsibility. Premises where food is processed must be hygienic and the worker's personal hygiene is paramount.

Anyone who does the right thing regarding the hygienic manufacture and handling of food has nothing to worry about; but those who do not comply with the regulations have plenty to worry about, and they deserve every bit of it.

Recently I asked the following question regarding the inspection of meat:—

> What is the maximum penalty that can be imposed on butchers who refuse to—
>
> (a) sell meat to a health inspector for analysis;
>
> (b) permit a sample of meat to be seized for analysis?

The answer was—

> (a) and (b) Section 361 of the Health Act sets out the maximum pecuniary penalty for these offences at $200.

I could not find the cutting concerning a recent fine imposed, but going by memory, I think the fine was about $40. This seemed very small to me. The health inspector must take a sample of the food, particularly mincemeat, because some unscrupulous butchers are including kangaroo meat and horse meat in their mince. The only way to ascertain whether this is being done is to obtain a sample for protein analysis.

If a butcher is getting rid of a huge amount of mincemeat, $40 as a fine is nothing. A number of butchers do get rid of a lot of this meat. However, the magistrate heard the evidence and arrived at his decision; but the fine seemed to me to be a bit small and this aspect might be worth looking at because kangaroos are not slaughtered under hygienic conditions. The animals are shot in the bush and it is evident that salmonella bacteria are rife in kangaroo meat.

On a different topic for a moment, I have noticed that some of the hotels, boarding-houses, and public dining rooms have perfectly clean floors which are highly polished, and yet many of them do not have fly screens on the doors or windows, and the butter, jam, and that type of food is not covered. The flies walk all over the food, particularly in country areas where there is a fly menace. This situation needs investigating.

The other day I was having a look around the Floreat Forum when I saw shop girls licking their fingers to pick up paper with which to wrap parcels. I think these girls should be compelled to use the type of moistening pads found in banks and post offices, instead of licking their fingers. I was amazed to see the shop girls

doing that sort of thing in the city. After that I think our standards in the country are fairly good.

Proposed new section 205B ensures certain work is done pursuant to proposed new section 205A. The proprietors of food premises are required to maintain their premises in good repair.

Section 344 is to be amended by the addition of a new subsection. As I see it, this is simply to take advantage of modern materials which are now available on the market and others which are being perfected and coming on to the market all the time, in order to make premises germ and vermin-proof. At present the Act does not allow the sensible use of these materials and the amendment will allow advantage to be taken of the new materials. It will enable an inspector to use his own judgment when he desires some of the new materials to be used. From my research into the Local Government Act I found that section 190, subsection (7) (b) is almost the same as the amendment which is being included in the Health Act.

In the interests of safe working procedure, high standards of premises and people, better public health, good food handling and hygiene, and the sensible interpretation of the Health Act, I support the Bill.

Debate adjourned, on motion by The Hon. F. R. H. Lavery.

HOUSING ADVANCES (CONTRACTS WITH INFANTS) BILL

Second Reading

Debate resumed from the 18th September.

THE HON. J. M. THOMSON (South) [5.41 p.m.]: I shall not delay the House very long with my contribution to the debate on this Bill. The measure before us will enable an infant—more familiarly known to us as a minor—to enter into a mortgage if he has attained the age of 18 years. This, again, is a step in the right direction. Young men and women of 18 years will be able to accept the responsibility of a mortgage, whereas today, young people have to wait until they are 21 years old.

With the changing pattern of matrimony today, young people are marrying much earlier than hitherto has been the case, but still it is necessary to attain the age of 21 before entering into mortgage transactions. To meet the situation it has been necessary to appoint a trustee to enable infants to obtain the funds by way of mortgage; but this procedure will be dispensed with under this Bill.

I notice that the borrowers are required to state in the mortgage or instrument the reason the money is lent, which is for the the purchase or erection of a dwelling house. This again is a good provision and anything which encourages home ownership is something we can all heartily endorse.

I assume that this Bill will entitle the young people to the full benefit of the Housing Loan Guarantee Act Amendment Bill with which we dealt recently. I am concerned that the limit in that Bill—if I may be permitted to refer to it for a moment—is $10,000. I believe that amount might not be sufficient to meet the cost of the type of house these people should be encouraged to build. I would prefer to see a terra-cotta, cement, or brick-veneer house erected in preference to a timber framed house which is frequently constructed because of the cost factor.

I think, either a brick, terra-cotta, or brick-veneer house would be far more advantageous from the point of view of low maintenance costs; and we are all confronted with the cost of maintaining a house.

Bearing in mind the difference between the cost of building in the country and the metropolitan area, I consider that the amount for which these people are permitted to arrange a mortgage is not sufficient to meet their needs.

I think the Bill commands the support of many people from outside Parliament, as well as the support of members of Parliament. This legislation will encourage young people to assume the responsibility of home ownership, which is a most desirable social set-up as far as young people are concerned. I refer to the security of owning a house, which will be possible under the provisions of this Bill. There is not much more in the measure that we can discuss, and I give it my blessing and support.

THE HON. A. F. GRIFFITH (North Metropolitan—Minister for Justice) [5.48 p.m.] I want to reply very briefly, and to thank members for their support of the Bill. That support has been unqualified, but one or two minor points have been raised.

I think the main point was raised by Mr. Willesee in relation to what appears to be a limitation on what might be termed as approved lending institutions. I am having a look at the legislation involved, but I would like the House to pass the second reading of the Bill. I do not propose to go on with the Committee stage this evening because it might be necessary to put a small amendment on the notice paper. Therefore I commend the Bill to members and ask that it be read a second time.

Question put and passed.

Bill read a second time.

MEDICAL TERMINATION OF PREGNANCY BILL

Second Reading

Debate resumed from the 4th September.

THE HON. A. F. GRIFFITH (North Metropolitan—Minister for Mines) [5.50 p.m.]: I secured the adjournment of the debate on this Bill because the present law pertaining to abortion is contained in the Criminal Code, and this Bill seeks to amend and clarify that law.

It is now some weeks since Dr. Hislop moved the second reading of this interesting Bill to permit the medical termination of pregnancy in certain cases, and in support of his Bill he quoted from many sources. As the House is aware, Dr. Hislop introduced a Bill in 1966, which Bill had similar provisions to the one now before us.

Dr. Hislop explained in his second reading speech, in 1966, that it was in the manner of an experiment to help people think about the important subject contained therein. There is no doubt that a great deal of interest has been evinced and the matter has become highly controversial. It has brought forward letters to members of Parliament and the Press, and TV programmes—opinions expressed either in opposition to or in agreement with the proposed legislation.

We have received views from other interested bodies, such as the Western Australian Council of Churches, and those who signed petitions presented by Mr. Dolan. The petitions presented by Mr. Dolan are signed by those people who plead for the defeat of this Bill, and we as members of Parliament must deliberate upon the subject and decide whether the Bill now before us should become law. In the event of its becoming law, there is no compulsion within it for anyone to observe its provisions, and this includes the people who have signed the petitions protesting against the passage of the Bill.

I have, myself, made some research into the problem and have given the Bill as much thought as I have been able to spare the time to do, but I confess I have experienced great difficulty in reaching any firm and constant conclusion. Let me say that the views I express are my own—each member of the Government, and members of the Government parties will, if they wish to do so, express their individual opinions on the matter.

I cannot give a medical point of view for I am not a doctor; I can merely address you, Mr. President, as an individual with my own personal feelings and convictions. As a matter of fact, I do not think a wholly medical view is really the important point. This is a social problem which the law, if I may say so, already partially deals with.

Firstly, let me review what I regard as the main points mentioned by Dr. Hislop in his second reading speech. I have selected nine of these. They are as follows:—

> (1) Dr. Hislop told us that in recent years, there has been much research and some legislation in other countries in relation this matter.

I interpose to say that articles are constantly being published about it, and the most recent article which I have read is published in the issue of the *Australian Law Journal*, dated the 30th August last, at pages 120 to 127, from which I propose later to quote. I think Dr. Hislop quoted from this particular issue of the journal when he made his second reading speech. I do not know whether he read the article from a different point of view, but he certainly picked out different points from those I picked out and, conversely, I think that one or two references I will make were not mentioned in the remarks made by the honourable member. To continue—

> (2) His Bill is designed to authorise abortions in certain circumstances, provided that the abortions are performed by medical practitioners in approved hospitals. Those circumstances are, mainly, a genuine risk either to the health or life of the mother or of her existing children; or that the potential child, if born, will suffer very serious handicaps resulting from abnormalities. Protection is given to those whose conscientious beliefs will not allow them to take part in any abortion.
>
> (3) The pregnancy may be the result of an assault on the woman, such as rape or incest, and in such a case it is unfair to the mother as well as to the unwanted child if the pregnancy is not terminated.
>
> (4) In some cases it would operate as an extreme hardship to the woman if she is not allowed to have her pregnancy terminated. Her husband may have died during the first few weeks of her pregnancy, leaving her with other young children and no money or assets. She may not have the physical and mental strength to cope simultaneously with her pregnancy and her other children.
>
> (5) There is a growing feeling that the woman concerned should have a greater say in the matter. In fact, Dr. Hislop quoted from an article dealing with Professor Enid Campbell, one of the three professors of law at the Monash University. She said the laws of abortion in Western Australia needed to be re-thought. She saw no reason why every woman, married or single, should not be able to obtain an abortion by a qualified medical practitioner—certainly on the grounds

specified in the recent English legislation. She would even go further and advocate abortion by request. She stated, "Abortion is a matter of personal morals which it is not the function of the State to enforce." Law reform should leave the moral decision to the individual and the medical practitioner.

(6) Any operation for abortion should be performed only by qualified medical practitioners and then only after full examination of and discussions with the mother and knowledge of all the relevant circumstances of the case. Women who are determined to have an abortion should not be forced to go to the backyard abortionist and thus incur serious risk to life or health.

(7) We should be concerned, not only with the disability confronting the pregnant woman, but also with the effects the pregnancy has on the rest of the family. Some women reach a stage where they just cannot cope with another baby. A mongol child can disrupt the whole of family life.

(8) Dr. Hislop is convinced that a mother would not ask for relief unless she were absolutely forced to do so.

(9) He lists a number of medical reasons why a pregnancy should be terminated, in some cases, e.g., acute abdomen, liver disease, diseased cardiovascular conditions, and cases where radiological treatment is essential in the early weeks of pregnancy.

I think they are the main points mentioned by Dr. Hislop and, to my mind, they all have some substance, although I am not in agreement with all of them. However, as a matter of general principle in relation to any Bill for alleged social reform, we must be concerned not only with the rights and living conditions of the individual, but with the interests of the community as a whole.

I now propose to refer to certain passages in an article in the *Australian Law Journal*, dated the 30th August, 1968, which was written by a lecturer in law at the University of Sydney and a lecturer in government at the University of Queensland. I have extracted some comments, and I think it will be to better advantage if I quote them. It states—

> In preparing any new legislation on abortion . . . lawyers and politicians cannot operate, as they all too often do, in a vacuum divorced from the social realities of the problems they are seeking to control or prevent. They must attempt to take account of general public attitudes towards these problems and to balance these attitudes against those of bodies such as the medical profession, the churches, and other pressure groups.

I do not know whether I agree with the first expression of opinion. Dealing specifically with abortion, it is stated—

> The critical question which remains unanswered by the Queensland and Western Australian Criminal Codes and by case law is what meaning is to be given to the expression, "preservation of the mother's life". It is a question which does not arise directly in the other Code State, Tasmania, where an abortion will be lawful if it were an abortion which it was reasonable to perform under all the circumstances.

From time to time much emphasis one way or another has been placed in legal circles upon the use of the word "reasonable." The article goes on—

> From what has been said so far, it seems evident that some legislative revision of the abortion laws in all States of Australia is long overdue, even if this revision goes no further than stating the position in Bourne's case.

May I interpose and say that Dr. Hislop mentioned the Bourne case, and I think the circumstances surrounding that case are pretty well known to all of us. The article then discusses the conflicting public attitudes towards abortion. It says—

> although clothed very often in respectable medical and social jargon, the pro-abortion campaign is an open assault on human life and human dignity.

And it speaks of—

> Any attack on human life—and the foetus is the beginning of life.

to the use of the words—

> Essentially, the decision whether to bear a child or not must be that of the woman. The only modification to this, some would consider, would be her husband's objection to a termination of pregnancy. However, the final say must always rest with the woman.

I want to make it quite clear that these are quotations. I have given a copy of my notes to *Hansard* in order that they may be followed as quotations. They are taken from the journal from which Dr. Hislop himself quoted.

The authors of the article then review a nationwide survey undertaken in November, 1967, when 1,045 persons were interviewed, of which 550 were males and 495 females. It was found that a very substantial majority of those interviewed favoured permitting abortion in certain cases. Of Roman Catholic respondents, 49 per cent. favoured abortion in certain cases, compared with 69 per cent. of Anglicans and

68 per cent. of those who claimed to be members of other religious groups. Many of them took the view that—

> Although they themselves would never consider having an abortion, they felt that the rights of the person should be respected on this issue and that it should depend on the conscience of the individual rather than the law, whether or not one has an abortion.

In other words, as I have already said, those who object on religious or other conscientious grounds may themselves still refuse to undergo abortion, whether or not the law so allows, but no-one has the right, merely because of his own beliefs, to require others to conform to those beliefs which they do not possess.

The article concludes by pointing out that even though the survey reveals considerable public support for reform of some type, the critical question, which will be asked by legislators, is whether or not this reform is politically feasible. It points out that it is already obvious that intense pressure group activity will operate against any reform and it will therefore take a certain degree of political courage to sponsor liberal abortion law reform in Australia.

I have, myself, considered other circumstances where it might be for the benefit of the community at large for a pregnancy to be terminated on other than medical grounds. I notice in the memorandum from the Western Australian Council of Churches that—

> There would seem to be little doubt that a substantial majority of the members of the community would wish to see the law authorise the termination of a pregnancy in those circumstances where its continuance threatens the life of the mother or threatens grave impairment to her mental or physical wellbeing.

If each and every one of us looks at it from this point of view, to my mind one must come down on the affirmative side of a proposition of this nature; because if the mother's life is in imminent danger, then as I understand it from a medical point of view it is the duty of the doctor to save the mother's life.

Of course there are arguments from the community angle against legalising abortion, and these are summarised at page 4 of the paper from the Western Australian Council of Churches as well as in the petitions tabled by Mr. Dolan.

Sitting suspended from 6.10 to 7.30 p.m.

The Hon. A. F. GRIFFITH: With the likelihood that Dr. Hislop's present Bill would come before Parliament, I asked in the Crown Law Department that a paper be prepared setting out the existing law—with its present uncertainties—and such a statement of the medical aspects involved as would enable members of Parliament to have a proper appreciation of the relevant medical aspects which might assist in making a decision as to what amendments, if any, should be made to the existing law.

I am indebted to one of our younger Crown Law lawyers whose research into this subject, along the lines requested by me, will, I am sure, be of considerable value to members of this House. At this point of the proceedings I would like to circulate copies of this paper prepared by Mr. Jonathan P. Thompson of the Crown Law Department, if the Clerks will be good enough to assist. Unfortunately I have only about 20 copies of the document, and therefore I would be grateful if, say, two members would share one copy between them. Members will notice that on the first page of the document the two words, "Solicitor General," appear, and underneath those two words is the heading, "Abortion Law Reform."

The reason for the words, "Solicitor General," appearing at the top of the document is that Mr. Thompson is one of the Solicitor General's lawyers, and having been given the task of undertaking this research the name of the Solicitor General formally appears at the head of the document. On the last page of the copies of the document, unlike the one I am now holding, there is no signature. The one I have, and the one I propose to use, is signed, "Jonathan P. Thompson," and is dated the 20th August, 1968. This does not have a great deal of relevance; the only reason I mention it is that it is relevant to the point that as it was likely that Dr. Hislop's Bill would come before Parliament I desired to be informed in the manner I requested.

I would like to read the whole of this paper to the House, but I fear I may not be able to hold the attention of members for a sufficiently long enough period. Therefore I propose to refer to various matters in the paper, and I shall be pleased if members will follow me as I proceed. The paper that is now before members will be found easy to read. To my mind it is an extremely well prepared documentation both of the legal position and the medical position in relation to abortion. The paper commences with "Origin of the present law," and it reads—

> The law relating to what is popularly referred to as "abortion" received its original statutory formulation in 1802 (43 of Geo. III cp. 58).

Members will know that "cp." stands for common pleas. Continuing—

> This statute was repealed and replaced by the Offences against the Persons Act 1861 which reformulated the offences in sections 58 and 59. These

sections were adopted, essentially unaltered, by sections 199, 200 and 201 of the W.A. Criminal Code. The present law has thus remained unchanged for over a hundred and fifty years.

Under the heading "The Purpose of the Law" the following appears:—

> The law on abortion was originally formulated in an age of medical *laissez-faire*, when bacteria were unknown, and a policy of leave-well-alone was undoubtedly more likely to benefit the patient than any medical or surgical interference. The law dealt with a pregnancy not by prescribing or permitting treatment but by prohibiting it.

Under the heading "Medical Advances Have Reversed the Previous Conditions" the author states—

> Advances in both medicine and surgery have reversed these conditions to the extent that not only is an abortion a comparatively harmless operation if properly carried out, but it is come to be considered, in many cases, as a means of preventing the even greater harm that would result if the pregnancy was allowed to continue. Thus the therapeutic abortion has come to be recognised as an important factor in preventive medicine.

Members will note the next heading is "Present Position Under the Law" and the report states—

> However, it would seem that not only has the law remained unchanged throughout this period of medical advance but that it has been considered necessary to widen the scope of its prohibition to the extent that there is at present no certainty what particular result of gynaecological or obstetrical practice is to be considered lawful.

The next heading is "The Present Law" under which the following appears:—

> The law relating to "abortion" is set out in sections 199, 200 and 201 of the Code, with the possible, though uncertain, addition of section 259—as follows:—
>
> 199. Any person who with intent to procure the miscarriage of a woman, whether she is or is not with child, unlawfully administers to her or causes her to take any poison or other noxious thing, or uses any force of any kind, or uses any other means whatever, is guilty of a crime, and is liable to imprisonment with hard labour for fourteen years.
>
> 200. Any woman who, with intent to procure her own miscarriage, whether she is or is not with child unlawfully administers to herself any poison or other noxious thing, or uses any force of any kind, or uses any other means whatever, or permits any such thing or means to be administered or used to her, is guilty of a crime, and is liable to imprisonment with hard labour for seven years.
>
> 201. Any person who unlawfully supplies to or procures for any person any thing whatever, knowing that it is intended to be unlawfully used to procure the miscarriage of a woman, whether she is or is not with child, is guilty of a misdemeanour, and is liable to imprisonment with hard labour for three years.
>
> 259. A person is not criminally responsible for performing, in good faith and with reasonable care and skill, a surgical operation upon any person for her benefit or upon an unborn child for the preservation of the mother's life, if the performance of the operation is reasonable, having regard to the patient's state at the time and to all the circumstances of the case.

Earlier, in the course of my remarks, I dealt briefly with the word "reasonable." Members will then see that the document goes on to deal with the key terms used in the relevant sections. The paper reads as follows:—

> The key terms used in these sections are "miscarriage," "unlawfully," "surgical operation," "benefit" and "reasonable" and it is the ambiguity of these terms and the uncertainties surrounding their scope and application that makes a definitive statement of the law so difficult. They are considered in turn below.

Members will note the next heading—"Meaning and Scope of 'Miscarriage.' The legal view." Under this heading the following appears:—

> The term "miscarriage" has successfully avoided judicial interpretation since its incorporation into a statutory offence in 43 of Geo. III Cp. 58 (1802). Its dictionary meaning was, and still is, the untimely delivery of a woman or the expulsion of a conceptus before the 28th week of pregnancy.

The paper then deals with some of the relevant points in the case of the Crown *versus* Trim. I do not propose to go over all the points raised in that case as members can read them for themselves. I will now continue to quote the document from page 4, dealing with "The Medical View" as follows:—

> The difficulties resulting from such an unrestricted interpretation of "miscarriage" can best be appreciated if considered from the point of view

of the medical practitioner, obstetrician and gynaecologist. For although the word "miscarriage" is not generally used in medical practice, given an unrestricted meaning, it is as wide and probably wider than the medical term "abortion".

Under the heading of "Abortion Defined," the following appears:—

> An abortion is defined as the separation or expulsion of the conceptus before the 28th week of pregnancy. After this time the foetus is regarded as viable and if expelled before the end of gestation is considered to be a premature birth.

On page 5 of the paper the types of abortion, the characteristics, and treatment are mentioned. It states—

> Obstetrics recognises two main types of abortion—(1) spontaneous, and (2) induced.

The author of the paper then deals with the various types of abortion, under the headings of "Threatened," "Inevitable," "Complete," "Incomplete and Septic," and "Missed Abortion."

Then on page 6 he deals with the clinical features and treatment. On page 7 he continues with his examination of that state of affairs; and at the bottom of that page, under the heading of "The Present Difficulty of Definition," he states—

> Thus the difficulties involved in defining miscarriage can be readily appreciated from both the legal and medical point of view. These are added to when it is considered that the offence in question is drafted in such a way as to require the Crown to establish that not only was something done—but that it was done "with intent to procure the miscarriage of a woman."

Under the heading of "The Possible Solution and Its Consequences" he had this to say—

> It is arguable that the most satisfactory way of dealing with these difficulties is to avoid the complexities of obstetrics and gynaecology and recognise Martin J.'s decision to consider "miscarriage" as "the emptying of the contents of the womb." However, this would then cover not only all abortions, but would also include the considerable body of gynaecological practice concerned with abnormalities of menstruation and post-natal care. Thus from the point of view of the present law it is quite immaterial who performs what on a woman as long as the intention to empty the uterus is there. The obstetrician who treats the unfortunate patient of the backstreet abortionist would seem to be in the same legal position as the abortionist himself.

He then goes on to give some illustration from the case of the Crown *versus* Trim, and to deal with the step taken by Martin J.

The next matter dealt with the meaning of the word "unlawfully." At the bottom of page 8 the author had this to say—

> The word "unlawfully" in the three sections of the Code has long been considered to imply that in certain circumstances, or perhaps if a particular method or procedure is adopted, it is not unlawful to act with intent to procure a miscarriage. The leading case on this point is R. v Bourne 1939 1 K.B. which is taken as the authority for the proposition that an operation carried out in good faith for the purpose only of preserving the life of the mother is a good defence to charge of unlawfully using an instrument with intent to procure a miscarriage. It is arguable that this does not exhaust the possible defences available to an accused especially if "miscarriage" is going to be given an expanded meaning; this point will be discussed in greater detail below.

Although I do not intend to deal with that point any further, members will be able to see from the paper that quite some time was spent in considering the direction given by Mr. Justice Macnaughten to the jury in the Bourne case.

The next point I wish to deal with appears on page 10 of the paper. Under the heading "Bourne's Case and the W.A. Code" the author said—

> It has been suggested that there is nothing in the law of W.A. which would prevent Bourne's Case applying here. Moreover, notwithstanding Bourne's case, it has been suggested that the local medical practitioner, concerned about his criminal liability, is in a considerably better position than his English counterpart in that the exculpation for acts done "for the preservation of the mother's life" (section 259 of the Criminal Code) is raised in a much more positive manner than in the corresponding English legislation. The relevant wording of section 259 on which this argument is based is that . . . "a person is not criminally responsible for performing in good faith . . . a surgical operation . . . upon an unborn child for the preservation of the mother's life . . . ." It is suggested here that this provision of section 259 should only be considered in relation to the offence of killing an unborn child under section 290 of the Code. The exculpatory proviso contained in the latter part of section 259 referred to above, refers only to an operation upon an unborn child and not to an operation upon the mother. The Code does not define

a "child" as such, and it does use the word child in section 199, but to construe "unborn child" in any other sense than "a child capable of being born alive" would be to misinterpret the section. This contention is supported by the fact that medically speaking, a "child" is a viable foetus of 28 weeks gestation, and as such can not be the subject of an "abortion," but if expelled before the end of gestation is considered a premature birth. Section 290 of the Code refers to a child "about to be delivered" and regulation 10 of the Registration of Births etc. Act 1965 requires the registration of the birth of any "child" (regarded as a foetus of 28 weeks gestation). The Births and Deaths Registration Act 1953 defines a still-born "child" as one delivered "after the 28th week of pregnancy." If this argument is correct the provision outlined above could not afford a defence to a charge of operating on the mother to procure the abortion of a foetus of less than 28 weeks gestation. Its only relevance therefore to the law of abortion would seem to be a persuasive authority analogous to the similar provision in the U.K. Infant Life (Preservation) Act which was resorted to in Bourne's Case.

The next important matter dealt with in this paper is under the heading "Human Foetus not Recognised at Law." The author had this to say—

> Thus it would seem that the human foetus is an entity unrecognised by the law, and does not become the subject of legal recognition until after 28 weeks gestation when it is regarded as an unborn child and as such clothed with statutory protection. The operation of abortion, legally speaking, is an operation on the mother and not an operation on the foetus. As far as the law is concerned it is an operation on, for, and on behalf of the mother—and any legal justification or prohibition on such an operation must consider the mother's interests, consent or refusal first and foremost. It is only when the foetus becomes a child that the best interests of the mother must be regulated to second place in the interests of that child except in the particular case where the continued presence of the child endangers the mother's life. This is clearly covered in the latter part of section 259 of the Code, which provides for such an operation on the child.

I must read the next part of the paper which deals with the application and effect of section 259—

> However the possibility that the former part of section 259 might also provide for an operation on the mother to procure an abortion has seemingly been overlooked. If there is no hesitation in applying the exculpatory provision contained in the latter half of section 259 to "to have unlawfully killed . . ." in section 290—it would seem to be unreasonable to hesitate in applying the exculpatory provision contained in the former half of section 259 to ". . . "unlawfully" uses force to procure the "miscarriage" of" . . . The offence would then read as follows . . . any person who with intent to procure the "miscarriage" of a woman . . ."unlawfully" uses any means whatsoever is guilty of a crime . . . (provided that) a person is not criminally responsible for performing in good faith and with "reasonable" care and skill a "surgical operation" upon any person for (her) "benefit" . . . if the performance of the operation is "reasonable," having regard to the patient's state at the time and to all the circumstances of the case."

I would point out again that the words quoted in this section are "miscarriage," "unlawfully," "surgical operation," "benefit," and "reasonable."

Under the heading of "The Consequences of Accepting Section 259," the author said—

> The application of section 259 as an exculpatory proviso to sections 199-201 would seem to be both a necessary and desirable measure to counterbalance the unrestricted interpretation given to "miscarriage". It would have the double effect of increasing the safeguarding of women from dangerous and often unwarranted interference, while at the same time permitting treatment for both spontaneous and induced abortions when justified on grounds other than solely for the preservation of the mother's life.

On page 13 the subject dealt with is "The Difficulties Its Acceptance Would Raise." It deals with surgical operation, benefit, reasonable, surgical treatment, and so on.

On page 14 the paper deals with the matter of abortion on demand. It states—

> Now that the risks are minimal it would seem unreasonable to prohibit otherwise legally competent persons from undergoing whatever operations they wish. Secondly, it raises the question, when, if ever, is the decision to continue a dangerous pregnancy to be taken out of the hands of the mother who will not consent to an abortion, or as is more likely—when parents or guardians refuse to allow their charges to have an abortion.

Then the paper deals with other matters which I shall not read out. I hope I have not missed any of the important matters contained in this paper.

On page 15 under the heading "Reasonable," the following appears:—

> The term "reasonable" in section 259 would seem sufficiently adequate to confine surgically induced abortions to the medical profession. This would be so even under an unrestricted interpretation of "miscarriage", as any surgical interference by an unqualified person, in the absence of extenuating circumstances, could be regarded as unreasonable.

Then finally, under the heading "Conclusion and Recommendation," the following appears:—

> It is submitted that section 259 provides not only a legally valid but also a necessary modification to the prohibition on surgical operations concerned with the evacuation of the uterus, contained in sections 199-201.

Under the heading of "Inclusion of 'Medical Treatment'," is the following:—

> However, in order that it should provide for the already widespread use of drugs in obstetrics and gynaecology it will be necessary to amend it to cover not only surgical but also medical treatment.

The other portion of this paper I wish to quote is halfway down the page and reads as follows:—

> As a consequence, it is arguable whether or not at this juncture Parliament should attempt a statutory interpretation of this concept of "benefit". The wide variety of circumstances in which the emptying of the contents of the womb might be regarded as for the benefit of the patient (it is certainly not confined to mothers) and the considerable difficulty encountered in giving such circumstances legislative formulation, would seem to indicate that it might be advisable to refrain from taking such a step until such time as the efficacy of an amended section 259 could be more accurately assessed. Nevertheless to leave the criteria of "benefit" (and thus of "legality") "open" could give rise to some difficulties. In the first place, assuming the unaltered intention of the legislature to safeguard women from unauthorised medical and surgical interference, an unreasonably narrow criteria of "benefit" would drive many pregnant women (especially the younger ones) to risk not only their future health, but also their lives, in the hands of the "back-street" abortionists. In the last ten years during which abortion has been ostensibly prohibited in fifteen of the seventeen prosecutions for illegal abortion studied, the average age of the patients was only 17¼, they were invariably unmarried and, except for two deaths, they all required hospitalization.
>
> In the second place, what the result of widening the criteria of "benefit" would be is a matter of conjecture—the evidence is lacking to suggest that it would lead to a substantial increase in the number of abortions as opposed to a disclosure of the already high rate thought to exist at present. And it is this fact that the present position in the State is virtually unknown that makes any legislative recommendation or criticism of rather academic interest.
>
> Finally, in the third place, it will be appreciated that in the absence of legislative interpretation, it will be necessary to rely on the Medical Board, as the disciplinary body of the medical profession, to prevent a more lenient interpretation of the law of abortion from being turned into a legalised racket similar to what is believed to have existed in the United Kingdom.

I think all members will agree that this paper is an excellent one, very well prepared, and obviously prepared with considerable thought. I am not submitting it to members in such a manner as to suggest they should follow and agree with all it says; but it points out for the benefit of members of the House when deliberating upon this Bill what the law is in relation to the legal side, and, in fact, to the medical side; and I feel that I must compliment Mr. Thompson on his work.

No doubt some of the arguments used are open to question; nevertheless, the study of Mr. Thompson's paper has given me a clearer understanding of the problems which confront us—both legal and medical.

There are matters contained within the Bill with which I do not agree. I do not propose to go into these at this point of time, as they can be left to the Committee stage in the event of the Bill receiving a second reading. I suppose members —some members anyway—are entitled to look to me, as Leader of this House, for an indication of what I think should be the outcome of this Bill; and I think I must sum up my remarks by saying that to my mind the present uncertain state of the law on abortion definitely requires attention; but I doubt the wisdom of legalising on-demand abortion, as I think Dr. Hislop's Bill would do. I think it is going too far and too fast to take such steps in a young country such as ours.

However, the matter should not be left at the rejection of Dr. Hislop's Bill, if this is to be the course, for such a course would not only be negative in approach, but would continue the present uncertain state of the law.

I am inclined to the thought that the amendments to the existing law contained in the relevant sections of the Criminal Code, particularly 259, might well provide a better solution to the problem than the Bill before us. I would certainly not like to see a more lenient interpretation of the law of abortion in this country result in abortion on demand, and, consequently, a legalised racket similar to what is believed to be the position elsewhere.

I do not know whether Dr. Hislop intended me to hear, but he just asked, "Where does he get that from?" It is my belief from reading the Bill that it would very considerably widen the scope. I take it that is the intention of the Bill.

The Hon. J. G. Hislop: It isn't.

The Hon. A. F. GRIFFITH: It is not?

The Hon. J. G. Hislop: No.

The Hon. A. F. GRIFFITH: I take it from the title of the Bill it is a Bill for an Act to amend and clarify the law relating to the termination of pregnancy by medical practitioners; and I think if members have read the contents of the Bill, as I am sure they have, this is one of the conclusions to which they have come.

I repeat that I do not think I should go through the Bill clause by clause. If the occasion arises that can be done in Committee. However, I do want to say that I think this Bill requires a full stage debate. I am of the opinion that a vote should not be taken until this has occurred. It is not sufficient just to listen to a number of members expressing a view which another member might follow; and in saying this, I do not wish to offer any offence to anyone, because I am aware, of course, that there are times when a Bill is so clearly defined that it is introduced by a Minister or a member of the Chamber, and replied to by one member, leaving the Chamber in no uncertainty as to what should be done.

However, I do not think this is one of those Bills and I would hope that this would not be the case in regard to it. I hope we will hear expressions from members as to what they feel about this terribly important Bill which brings about social reform.

THE HON. J. DOLAN (South-East Metropolitan) [8.9 p.m.]: I will not delay the House by going through this abortion law reform treatise by a legal authority, and I think if I skip that I could as my introduction say that I agree entirely with the conclusions the Minister has reached.

I propose to speak at fair length on the medical, moral, and social issues which are involved in a Bill of this nature, and because of its great importance. I offer no apology for so doing. If I quote any medical or other opinions, they will be of people who by any standards can be called authoratitive. They will be men of standing in the medical world, particularly in the United Kingdom—professors of obstetrics and gynaecology; men who control some of the largest hospitals in the world and who know the subject and therefore whose views are well worth hearing and forming a judgment upon.

This Bill has not been hurriedly conceived. It was not something which came out of the blue; and I venture the opinion that had it been raised as recently as 10 years ago, it would have been considered almost laughable. However, a change has come over the world during the past 10 years—a change in moral standards. We must look at this Bill in the light of those changed standards to see whether we, in this young country of ours, are prepared to accept those standards, or whether we want something better.

Dr. Hislop first raised the subject matter contained in this Bill on the 26th November, 1965. I would refer members to *Hansard* No. 3, pages 3049 to 3053. The next stage was reached on the 25th November, 1966, when he gave a second reading speech on his first Bill of this nature; and this speech is to be found in *Hansard* No. 3, at pages 2899 to 2900.

I would assume that in his consultations with the Parliamentary Draftsman, Dr. Hislop would have been able to express his wishes most concisely and exactly; and when he introduced his Bill he said he proposed to leave it for at least 12 months; or at least until the next session of Parliament so that it could be studied by people and bodies interested. He said that following any consultations he would be prepared, if possible, to accept amendments.

That Bill was not dealt with in 1967, and there may have been reasons for its being shelved until now. I would not express an opinion even on that.

With regard to his first Bill he expressed himself as being completely satisfied. I understand, of course, that he received quite a number of communications from various people who expressed the opinion that it was possible that the first Bill which was introduced would permit abortion on demand. In a letter to *The West Australian* on the 13th June, 1967, Dr. Hislop wrote as follows:—

> I have been asked by several people whether this Bill will permit abortion on demand. Let me stress that it will not and that clauses in the Bill, even at this stage, will not permit such action.

I will read clause 3 of the 1966 Bill to form a background for what I want to say about the present Bill and to leave members in no doubt whatever about what was meant. I quote—

> Subject to section 5 of this Act, where a woman has been pregnant of a child for a period of not more than 12 weeks, a person is not guilty of an

offence under the Code by reason of the termination of the pregnancy by a medical practitioner.

Section 5 was one which related to a child under 16 years of age. If that clause 3 did not mean abortion on demand in Dr. Hislop's opinion, I know many thousands of people who have an opinion like mine—that that is exactly what it really did mean. That clause is not in the present Bill, so I assume that when Dr. Hislop went through it, and because of information he has gleaned since then, he has seen fit to delete it.

When the Bill now before us was being introduced, Dr. Hislop changed his mind a little and said, "It will be found that there is a great similarity between the English legislation and the provisions in the Bill before us." What I intend to say is based on the English legislation, and as Dr. Hislop has compared the provisions of this Bill with those in the English measure I think it would be fair to talk of the English legislation in conjunction with the Bill now before us.

Let us see what Professor Ian Donald, who is head of the Department of Obstetrics and Gynaecology in the University of Glasgow, had to say about the English legislation. He was quite frank in his opinion because he expressed it at a public gathering in the Free Trade Hall in Manchester, on the 5th December, 1966. He said—

> Let us recognise this Bill—

That is, the English Bill—

> —for what it is worth and not be deceived by protestations without proof to the contrary. It is abortion on demand.

I heard those same words used tonight by the Minister. That was a definite statement by a man who was well qualified to express such an opinion.

While on the subject of the British law, it might be informative if I told the House what members of the House of Commons did when the Bill was put to the vote in that Chamber. I think it would be to the shame of any member on an issue of this nature not to say "aye" or "no" when the question is put. When the Bill was passed the actual voting was 167 to 83 and, as a result, that measure became the Abortion Act of 1968. Of the 630 members in the House of Commons over 60 per cent., or 380, either abstained from voting or absented themselves from the House. I do not think Britain has ever seen such an example of political cowardice since it has had responsible Government.

The Hon. H. C. Strickland: No pairs?

The Hon. J. DOLAN: I could not say. There may have been pairs, but that, too, could have been a matter of convenience. Some would be absent due to illness, or for a similar reason, but the majority of them were too cowardly to face up to their responsibilities in that instance. It reminds me a little of a gentleman who in early history washed his hands at a convenient time and would not accept any responsibility. I hope that will not be the case here; because, if so, it would mean a Bill of this nature would require only seven members in favour of it to have it passed.

I am not one bit worried over the fact that I am completely opposed to every part of the measure. I am even opposed to the title of the Bill and, in that respect, I am in very good company—I am in the company of Dr. Beech, the President of the Western Australian Branch of the Australian Medical Association who had this to say—

> The doctors are worried about the proposed legislation; different doctors for different reasons.

Further on he said—

> The title of the bill, the Medical Termination of Pregnancy Bill, might also give this impression.

Perhaps I should just pause there and go back to an earlier part of the letter which reads—

> The fact that the politician who is sponsoring the bill happens to be a highly respected doctor might suggest a general support from the medical profession.

Then follows the sentence I just read which was to the effect that the title of the Bill might also give this impression. Dr. Beech went on further to say—

> It would be better if we were more direct, as they were in Britain, and simply called the legislation the Abortion Bill.

In the first Bill which was introduced in 1966, the word "abortion" did not appear once. Whether that was done with the idea of soft-soaping a little I do not know. However, that is not the position in the Bill before us; because the word "abortion" is used in a number of places. I think by doing that the sponsor of the Bill is being completely honest and for that I would commend him. Dr. Beech went on to say—

> Some of the doctors have worries because this West Australian law will presumably override the traditional law of medicine which prohibits the taking of life and performing of abortions, a law which has been binding on the consciences of doctors for centuries.

I shall use his concluding paragraph to conclude my comment on this aspect. It reads as follows:—

> It should be clearly understood that it is the community and not the medical profession that is seeking to legalise abortion.

That letter appeared in *The West Australian* of the 14th September, 1968, which is of comparatively recent date.

To carry the matter further, and to make my point that the medical profession does not support this Bill—although some would of course, but there is not general support for it—or there is no majority support for it, I will refer to the fact that the British Medical Association set up a special committee to consider therapeutic abortion, and the report of that committee is to be found in the *British Medical Journal*, 1966, vol. 2, pages 40 to 44. That report indicates that the committee was completely opposed to it.

Therapeutic abortion has also been opposed by the council of the Royal College of Obstetricians and Gynaecologists in its report on legalised abortion. In that case it was opposed by 192 votes to 5. For confirmation of that I would refer members to the *British Medical Journal*, 1966, vol. 1, pages 850 to 854.

Before the passing of the Abortion Act in Britain, the law in that country was similar to the law that operates in Western Australia, and in this regard I shall quote Professor Donald again. I mentioned him earlier and I gave his qualifications. A common statement one hears is that the law is not very clear on this subject, and in this regard I would quote what Professor Donald had to say.

> It would be a mistake to think, for example, that doctors are refusing to terminate pregnancies because of the law—

And in this regard we must understand that the law in England was almost identical with the law that operates here now. To continue—

> —and that all that they are waiting for is a Bill such as this to let the brake off. In the words of the Council of the Royal College of Gynaecologists, "We are unaware of any case in which a gynaecologist has refused to terminate a pregnancy when he considered it to be indicated on medical grounds for fear of legal consequences.

I will refer to one case which has been mentioned a few times this evening, and I will mention the details of it so that members will be able to formulate their own opinions about the doctor's action in that case and, also, the details will show how the doctor concerned has completely reversed his ideas today. I will come back to the case later, but it involved a Doctor Aleck Bourne. Professor Donald went a little further and said—

> Provided we act in good faith and on sound medical evidence supported by competent second opinion we have nothing to fear of the law as it stands.

If the doctors in England were not afraid of the law as it stood, I cannot see how any doctor could be afraid of the law as it stands in this State, provided he is acting in the same way as the doctors in England did.

I have talked over this matter with ordinary people—ordinary men and women—to see whether I could get some idea of what they thought of abortion and whether they thought there was something harmful about it or difficult in connection with it. It is amazing that most of them seemed to think that having an abortion was a little like having one's tonsils removed, or having one's appendix out—that the operation was as simple as that. When I used the word "foetus," or similar words, they did not understand what I meant.

I will put a proposition to those members in this Chamber who are fathers—it is something that happened to me on a number of occasions. When my wife found she was pregnant she told me with joy—I suppose that is the way we were both brought up. I put it to those members here who are fathers: "When your wives told you they were pregnant did you visualise what a foetus was?" Probably members in that position had never heard the term before; I certainly had not. What thoughts ran through our minds when our wives told us that they were pregnant, and that in the space of time a son or a daughter would be born to us? It was something in which we all took great pride and joy. I would think every married member in this Chamber who has children has experienced the same feelings as I had when my wife told me that she was pregnant—it would be a feeling of pride and joy.

People try to kid us that there is nothing in an abortion—that it is nothing to worry about. I ask members to imagine what their feelings would be in similar circumstances. A peculiar thing about the English legislation—and I have a copy of it here—is that it does not apply to Northern Ireland. One reason for this is that the people in Northern Ireland would not have a bar of it, whether because of tradition, religion, or for some other reason I would not know and I would not hazard a guess. I would think Northern Ireland was left out deliberately.

I notice in the first Bill introduced in 1966 reference was made to the termination of pregnancies of a period of not more than 12 weeks. There is no similar provision in this Bill.

I want to draw members' attention to one other feature. I have never read anything in the newspapers, or through the ordinary sources from which we gather information, about a subject of this nature—I refer to the maternal instinct. It is amazing, and in this regard I would like to refer to three cuttings from the newspapers—two are from the *Daily*

News and one is from *The West Australian* of the 19th June, 1967. There is one from the *Daily News* of the 14th June, 1967, and it is the first intimation we had of this case. The extract reads—

> Janet Dalby, whose first baby is due tomorrow, will go into the delivery room knowing she has less than a 50-50 chance of survival.
>
> Mrs. Dalby, of Smethwick, Staffordshire, has a rare heart complaint which doctors told her about seven months ago.
>
> They told her that they knew of only one other similar case where the mother had survived. When they urged her to have an abortion, she refused.
>
> Her husband, 23-year old factory hand Graham Dalby, backed her up.
>
> Mrs. Dalby, who has been in hospital since November said yesterday that she had never even considered having an abortion. She longed for the baby.

That was a case of maternal instinct. She was prepared to risk her own life for the possible life of her baby. A hospital spokesman, after the birth of a 7 lb. 2 oz. baby, said that both mother and baby were doing well.

I give this example to show what is possible when a woman with the proper maternal instinct developed, not only refuses to have an abortion but finds that everything comes off successfully. I would like to quote an example from the *Daily News* of the 8th October, 1968. On the front page there is a picture of a lady in bed with a baby alongside her. When she was one month pregnant she was involved in an accident which confined her to her bed for life. She is paralysed from the neck down. She carried the baby for eight months in that condition, and finally a perfectly normal, healthy baby was born.

This would indicate that women in that condition seem to possess a certain quality which medical skill and knowledge cannot define. It is not quite known what sustains them. A little over a week ago the court granted her $91,397 by way of damages, and she said she would give away every cent of it to be able to hold her baby. This is the attitude of some women.

I notice also from *The Sunday Times* over the weekend that the case of Mrs. Kennedy was referred to. Her husband, Robert Kennedy, was assassinated some months ago and she is at present awaiting the birth of her eleventh child. She has carried the baby ever since the assassination of her husband and she is looking forward very much to having it. Yet there are some people who try to say that for minor psychiatric reasons, abortion should be available. I cannot go along with that line of thinking.

I could go through every provision in every clause and analyse my objections, but I will content myself with dealing with a few of the major provisions, so that members will have an idea as to my attitude to the Bill. For example, we find in clause 4(1)(b) that a person shall not be guilty of an offence when a pregnancy is terminated by a medical practitioner if—

> (b) there is a substantial risk that if the child were born it would suffer from such physical or mental abnormalities as to be seriously handicapped.

Let us examine what people in authority have to say about this aspect. There were many doctors opposed to the English Bill who indicated they were willing to perform an operation if they were certain there was a degree of foetal abnormality and the case was clinically suitable, but not one of them was prepared to sacrifice a large number of healthy babies in order to protect one that was deformed.

Another authority I could quote is Dr. J. S. Scott, Professor of Obstetrics and Gynaecology at Leeds University. I am sure that these authorities I quote will be accepted as authoritative. When Professor Scott was addressing the National Association of Theatre Nurses Congress at Brighton, on the 28th October, 1966, he said—and I quote from the *Nursing Times* of the 11th November, 1966—

> I find termination of pregnancy because of a chance that the baby is abnormal an unacceptable procedure. The argument against abortion because of the chance of an abnormality was put in a most telling fashion in correspondence which followed an article in the British Medical Journal (1959 Vol. 1 p. 686) by Dr. Julia Bell in which she stated that abortion was the appropriate treatment if rubella occurred in the early months of pregnancy.
>
> Dr. H. C. McLaren in the British Medical Journal (Vol. 1, page 921 of 1959) in his reply drew attention to the Herod-like slaughter of the majority of entirely normal children that such a policy would involve and concluded by mentioning that his wife had had a severe attack of rubella when his charming elder daughter, now at university, was about four weeks *in utero*. Had Dr. Bell been around in 1939, he concluded, who knows, my daughter might not be here to read the article and ask, "Daddy, whatever does Dr. Bell mean by treatment? Does she mean she would have removed me—just in case?"
>
> Professor Scott concluded by saying that this is the sort of argument that puts paid to all further discussion.

At this point I would like to refer to a case I know of personally, because the people concerned are very dear friends

of mine. When these people were awaiting the birth of their first baby, they were told by the doctors attending the wife that they—the doctors—did not expect the child would live. The doctor and his consultant said that it was expected that the baby would die shortly after birth, and that if it did live it would be grossly abnormal.

I wonder how any one of us would feel if we were faced with such an opinion from two doctors when our wives were expecting our first child. Preparations were made for the birth of the child, and a priest was kept standing by for purposes of baptism, and so on. It transpired that the birth was perfectly normal and the baby girl who was born has grown up into a beautiful young woman. She is very happy and is occupied in a most responsible profession. She is everything a father could wish for in his daughter.

I wonder what sort of a State Western Australia would have been if our early pioneer women had not braved the isolation and the lack of medical care when having their very large families. It is quite remarkable when we read of the experiences of some of our pioneer women; what they had to put up with; and when we consider the difference between them and some of the people today who want the easy way out.

In 1920 the mortality rate during pregnancy was 200 in every 10,000. Heaven knows what it was in 1900; I was unable to obtain the figures for the earlier 20-year period. But in 1960—only eight years ago—the mortality rate had been reduced to three in every 10,000. Those figures were given by Dr. Giles, reader in obstetrics and gynaecology at the University of Western Australia.

A little earlier I mentioned the maternal instinct. Some women have the maternal instinct greatly developed, while others, who do not appear to possess it at all, apparently develop it later in their pregnancy; after the first three months. As we all know, this is the worst time for a woman; I daresay that emesis, the dreadful feeling which accompanies vomiting, can be compared with a ghastly attack of seasickness—where one does not care whether one lives or dies.

The Hon. R. F. Hutchison: It is much worse than that.

The Hon. J. DOLAN: There we have the opinion of someone who has been through the experience. I was merely relying on my own powers of observation in my family. I could understand a woman feeling she would like to get rid of this awful nausea, either by abortion or by some other means. But that feeling changes in most women when quickening occurs, and when the child is eventually born they can think only of the wonderful day when they can hold their child in their arms. Anyone who has seen the look on a mother's face when she has given birth to a baby will know what real happiness is.

I would like to read an extract from a biography which is available in our library. I will first read it without including the names, and I will then mention the names to give members an idea of the tragedy that could be associated with abortion. When I read this I am sure not one member will not feel that the woman in question could have been excused for wanting an abortion performed. I quote—

> Business was poor and there was little money about. Clearly it was to be a struggle for existence. Within a couple of months of coming to ..... Mrs. ..... discovered she was to have another baby. The prospect was frightening. Things were so tough she could hardly endure life already and a fourth child at this difficult time was a crisis. It seemed as though the end of the world had come.
>
> But she struggled on trying to make the best of her life of drudgery and hardship. And inside the confined cabinet walls of a room at the rear of the store on the 20th December, 1894, the baby was born.

That seems to be a case which would have come under the provisions of the Bill. If any member wishes to read this paragraph again in the book he will find it on page 7, chapter 2, in a book by Kevin Perkins entitled *The Last of the Queen's Men*. The baby referred to was one of our greatest Australians—none other than Sir Robert Menzies.

The dangers associated with mass abortion can be allied to Hitler's policy of extermination of the Jews. I would like to refer to the case of a child whose father escaped from an internment camp. I refer to Edith Stern who today at the age of 15 has been appointed mathematics lecturer at the Michigan University. How many more brilliant people would there have been in the world today had Hitler not carried out his policy of extermination with such vigour? What amazes me is the fact that this policy was accepted almost completely by the German people. It is not difficult for people to accept this sort of thing without question, and that is the position which we have reached in the past 10 or 15 years.

Very often we find in the big hospitals of the world—and I recall the experience in Britain—that it depends entirely on the man at the head of things, as to whether abortions are carried out or not. In this connection I would like to quote the opinion of Ian Donald, Professor of Gynaecology and Obstetrics at the Glasgow University, and also one of the greatest teachers in the world. Professor Donald is also superintendent of the new Queen Mother's

Maternity Hospital in Glasgow. I shall quote from an address he gave at the new Free Trade Hall, Manchester, on the 5th December, 1966. It is worth listening to, and it reads as follows—

> Any difference between the number of terminations of pregnancy between one hospital or city and another depends upon how readily either accepts psychiatric indications.
>
> In one Scottish city one in every 50 pregnancies has been terminated mainly on psychiatric or social grounds, whereas at the new Queen Mother's Hospital in Glasgow the doctors have seen fit to terminate by abortion only two out of 7,500 pregnancies supervised so far.

Professor Donald adds that none of their patients, as a result of refusal to abort has died, none has gone mad, and none has committed suicide.

Of course, we find countries where abortion has become the accepted thing. I quote Hungary, which is a country that has a population very similar to our own. It was only in 1956—12 years ago—that abortion was liberalised, and by 1961—which is the last figure available—in that country, which has a population of approximately 10,000,000, abortions amounted to a greater total than did live births. I think the proportion was 123 abortions to every 100 live births. Do we want something like that to occur in this country of ours?—a country which is crying out for population—and there is no better population than the children of our own people. Every time any one of them is, as I would say, the victim of an abortion, that is one less citizen for this State, yet it is citizens we want.

What justification have we for telling migrants that we want them to come here to populate this country of ours and then say to them that we are going to abort our children while still in the womb!

The Hon. A. F. Griffith: We are not saying that. Even Dr. Hislop's Bill would not have us say that.

The Hon. J. DOLAN: I did not wish to convey the impression that that would be said to them. I quote Sir John Peel, Queen's surgeon and gynaecologist, who must be accepted as an authority as saying—

> You must remember that each time you terminate pregnancy—

He quotes that as being the euphemistic name for abortion—

> —you are killing foetus, a potentially normal human being. Life begins when a baby starts.

Dr. John Billings of Melbourne, M.D. (Mlb.), F.R.A.C.P., F.R.C.P. (Lond.), says—

> From the time of conception the embryo exhibits characteristics that are quite unmistakably human. With appropriate methods of examination there is no question of confusion with the embryo of any other animal species.

The Hon. J. G. Hislop: Does he do any gynaecology?

The Hon. J. DOLAN: Yes.

The Hon. J. G. Hislop: Does he?

The Hon. J. DOLAN: I have been informed he has all the qualifications, and I would say he is well qualified as an authority. Continuing to quote—

> A denial that human life exists from the moment of conception is untenable scientifically and can only reflect confusion caused by the size of the immaturity of the embryo the failure to recognise its completeness from the beginning.

Some people have been trying to say that a foetus might not be a human being. For the last three years I have been in communication with an organisation in Britain known as the Society for the Protection of Unborn Children. Might I say that one of the conditions of membership is that not one of them can be a Catholic. Therefore they are completely apart altogether from any religious prejudices; and when that organisation gives an opinion, it is entirely on the facts.

I have a picture here which shows the hands of a baby only 12 weeks after conception. I am sure members could not confuse these hands with anything other than human hands. There cannot be any doubt in the mind of anybody as to what a foetus is after 12 weeks.

The Hon. A. F. Griffith: I am a bit confused. I do not think anybody has thought there is any doubt.

The Hon. J. DOLAN: There are people who think that.

The Hon. G. C. MacKinnon: Not in this House.

The Hon. J. DOLAN: I refer to members of the House as being of a superior type in all respects.

On the executive committee of the Society for the Protection of Unborn Children one condition of membership is that they must not be Roman Catholics. Its membership consists of nine professors of universities in England and some of them are directors of the biggest maternity hospitals in the country. I mentioned Sir John Peel and his opinion; and Dr. Hector McLennan, President of the Royal College of Obstetricians and Gynaecologists had this to say—

> Even if the operation is to be limited to hospital practice by recognised specialists, it should be stated most emphatically that therapeutic abortion, even in skilled hands, is more dangerous than the public and many

> doctors appreciate. This is especially so for women pregnant for the first time.

On the 4th April, this year, in the House of Representatives, two questions were asked of the Attorney-General (Mr. Bowen, Q.C.). I would imagine he is a man very skilled and learned in the law. The first question was as follows:—

> I refer the honourable gentleman to the present controversy taking place in the various States regarding the need to clarify or otherwise amend the law relating to abortion. I ask the Attorney-General whether in view of the differing opinions which are being expressed, he will seek to have the matter listed for discussion or examination at the next meeting of the Standing Committee of the Attorneys-General.

Mr. Turner followed that question up with a further one, and this is the answer indicated—

> As I said before, if we get out of step with the rest of Australia, particularly New South Wales, the risk we run is that the Australian Capital Territory may become a place of legal resort.

That is what is happening in England today. There are more abortions there today than ever before, and the number is increasing because abortion has been legalised.

The Hon. A. F. Griffith: Mr. Bowen has one other excellent quality—he is a Liberal.

The Hon. J. DOLAN: I am always prepared to pay tribute to anybody of ability. I referred to Sir Robert Menzies before. I did not care for a lot of the things he did, but I will always regard him as a great Australian. In Britain there is some concern that London might become the abortion capital of Europe. Lord Brock—former president of the Royal College of Surgeons of England—in a letter to the *London Times* on the 3rd February, 1967, expressed the opinion that so many doctors would wish to dissociate themselves from this unsavoury work—notice the adjectives he uses—that the Government would be obliged to appoint official abortionists, in much the same way as it appoints an official hangman.

The preservation of human life—whether of the aged, the strong, the weak, the infant, or the unborn babe—has always been mankind's most sacred trust. Medical science has always been directed towards the saving of life. I would suggest we always keep it that way.

With the exception of a couple of comments on the legal document the Minister has presented, in conclusion I would indicate a few of the practical problems that will have to be faced up to should we have legislation similar to the Abortion Act of Great Britain—and that is the Act with which this Bill has been compared.

Co-operation, for conscience reasons, cannot be expected; or, if expected, will not be obtained from a big percentage of doctors; and many nurses will not participate in any way with abortion operations. They would sooner leave the profession than participate in certain of them. Some of our finest hospitals will not be available for patients seeking their skilled aid in circumstances associated with abortions, although after the damage is done they would be prepared to save the lives of those suffering from the consequences.

The shortage of hospital accommodation will be accentuated. Even doctors willing to co-operate will have to neglect other facets of their duty. The recent decision to increase doctors' fees to patients when they have to visit their homes was done in the main because doctors do not have the time to visit these homes. I fear they will have many difficulties to face up to if they have this extra work to do.

I feel our efforts, as legislators, should be applied to establishing social and economic conditions that will remove many of the reasons given for abortions. Better housing, increased maternity allowances, more community kindergartens, extension of the children's creche system, which permits married women to work in the professions and in industry, are fields for our study.

Australia is a young country; and I repeat, it needs population and particularly the increase which comes from the birth of our own children. I hope we never become a country like Hungary which, today, has one of the lowest birthrates in the world. Let us be guided by those who have to do this work—the doctors, the nurses, and the medical profession who do not want this legislation. Let us be guided by men like Dr. Hector McLennan, President of the Royal College of Obstetricians and Gynaecologists of Britain; by Sir John Peel, the Queen's surgeon and gynaecologist; by Professor J. C. McClure-Browne of the London University School of Medicine; by Professor Sir Andrew Claye; by Professor H. C. McLaren, who was in charge of one of Britain's largest and greatest hospitals—the Queen Elizabeth Hospital for Women—by Professor Scott, Professor of Obstetrics and Gynaecology at the University of Leeds; and by Professor Ian Donald of the Glasgow University, and Superintendent of the Queen Mother's Hospital for Women.

All of these professors are executive members of the Society for the Protection of Unborn Children. Let us also be guided by the members of the Royal College of Obstetricians and Gynaecologists of Britain who voted 192 to five against acceptance of the British Bill.

Let us be guided by our own consciences. It is the duty of every one of us to think of what is implied by this legislation. Do not let us try to put it in the background; let us face up to it. If legislation like this does go on to our Statute book then I feel it is going to be a terrible thing indeed for our country.

I would go back to the first man in the history of the world of medicine who set the standards for doctors. I refer to Hippocrates, a Greek physician in 377 B.C. That is going back a long way. He was called the father of medicine; and if we go through all the details in regard to his code we find he also had a code in relation to abortion. He said—

> . . . and in like manner I will not give to a woman a pessary to produce abortion. With purity and with holiness I will pass my life and practise my art . . . While I continue to keep this Oath unviolated, may it be granted to me to enjoy life and the practice of the art, respected by all men, in all times! But should I trespass and violate this Oath may the reverse be my lot!

I conclude on this note: that I intend to oppose the Bill at the second reading. Like the Minister, I feel that it should be thoroughly debated by all members; that they should be true to themselves; and if they are true to themselves then they will never be false to any man. I oppose the Bill.

THE HON. I. G. MEDCALF (Metropolitan) [9.1 p.m.]: I was somewhat disappointed, recently, to read two letters written to the Press by eminent members of the medical profession. One related to the subject we are now dealing with, and the other related to drunken driving, and both letters referred to members of Parliament and, indeed, to the member who introduced this Bill, as politicians. I know the word "politician" is capable of different interpretations. I realise there could be different definitions of what is meant by the word "politician." However, in certain contexts it has a slightly ugly meaning and implies that such a person engages in party politics in the narrow sense of the word, and does not engage in anything else.

I was also pleased to hear the comments of the Minister, and of Mr. Dolan, exhorting members to give their honest opinions on this subject, and not to be afraid to come forward and honestly state their views. I think this would be the proper task of a member of Parliament, as distinct from a politician. I hope that, perhaps, when eminent medical men write to the paper in the future, and exhort members of Parliament to deliberate carefully and honestly on matters of public moment, they might choose their words a little more carefully.

The Hon. A. F. Griffith: I agree.

The Hon. I. G. MEDCALF: In order to state my views on this subject, honestly and truthfully, it is necessary for me to reiterate a little of the ground touched on by the Minister for Mines. However, bearing in mind that he has made an excellent speech, and quoted from an excellent text by one of his junior legal officers, I do not want to weary the House by quoting *ad nauseam* some of the legal points which he has already discussed. However, I do find it necessary to reiterate a little of the Criminal Code, and also the case of R. *versus* Bourne. If I do weary members I shall endeavour to recollect myself and shorten what I am saying as I proceed.

Firstly, I would like to refer briefly to three sections of the Criminal Code which have already been touched on, or quoted by the Minister, and which have been quoted in full in the paper to which the Minister adverted. The three sections are sections 199, 200, and 259. These are the most important sections in the Code dealing with the subject of abortion. There are one or two other sections which also deal with this matter—sections 201 and 290—which I do not propose to quote.

I will summarise the sections, and quote them as follows:—Section 199 states that any person who, with intent to procure the miscarriage of a woman, administers any poison or other noxious thing, or uses force of any kind, is guilty of a crime. Section 200 states that any woman who, with intent to procure her own miscarriage, unlawfully administers to herself any poison or noxious thing, is guilty of a crime. Section 259—which is the let-out section—states that a person is not criminally responsible for performing in good faith, and with reasonable care and skill, a surgical operation upon any person for his benefit, or upon any unborn child for the preservation of the mother's life, if the performance of the operation is reasonable, having regard to the patient's state at the time and to all the circumstances of the case.

As the Minister pointed out, that section is really a recast of the Offences Against the Person Act, 1861, of England, in slightly different language. So, in general, the only case in which the law permits—according to the Code—the performance of the act of abortion, is where it is for the preservation of the mother's life.

The Hon. L. A. Logan: And then only by surgery.

The Hon. I. G. MEDCALF: That is true; and then only by surgical operation. As has already been said, the section itself has some complicating features. I will not refer to the term "miscarriage," which is contained in the two earlier sections, because that was dealt with sufficiently by previous speakers.

Section 259 refers to an operation on an unborn child. That, of course, is difficult, because I suppose such an operation

is on the mother. The clue to the saving effect of section 259 is the word "unlawfully" where it is used in sections 199 and 200. In other words, we must determine what is meant by the word "unlawfully."

In order to shorten this discussion, I will say it was held, in a Queensland case —R. *versus* Ross McCarthey and McCarthey —Queensland State Reports, page 48—that section 259 has a direct bearing upon the word "unlawfully" as it appears in section 199 of the Act; that upon prosecution under section 199 the onus is upon the Crown to show beyond reasonable doubt that the abortion—that is, the operation of therapeutic abortion—was not performed "for the preservation of a mother's life."

Therefore, the situation here would appear to be that the operation of abortion by the doctor is lawful if it is carried out in good faith, using reasonable care and skill, for the preservation of the mother's life. These are the only circumstances in which abortion is lawful in Western Australia, and they are the only criteria for which we should look in determining culpability under the Code.

This situation, as has been mentioned by the Minister, has been extended in England, and the authority for this is R. *versus* Bourne, reported in *The All England Law Reports* of 1938, at page 615. If I might be pardoned, I will briefly refer to the facts of this case as appearing under the headnote. They are as follows:—

> A young girl, not quite 15 years of age, was pregnant as the result of rape. A surgeon, of the highest skill, openly, in one of the London hospitals, without fee performed the operation of abortion. He was charged under the Offences against the Person Act, 1861, s. 58, with unlawfully procuring the abortion of the girl.
>
> The jury were directed that it was for the prosecution to prove beyond reasonable doubt that the operation was not performed in good faith for the purpose only of preserving the life of the girl. The surgeon had not got to wait until the patient was in peril of immediate death, but it was his duty to perform the operation if, on reasonable grounds and with adequate knowledge, he was of opinion that the probable consequence of the continuance of the pregnancy would be to make the patient a physical and mental wreck.

The Hon. L. A. Logan: This was a case of rape.

The Hon. I. G. MEDCALF: This operation followed a rape, and the girl was pregnant. Those facts, which were perhaps rather unusual, to say the least, resulted in this case in the judge directing the jury, in unmistakable terms, that if the likely effect was that the woman would become a mental and physical wreck, the jury might draw the conclusion that the abortion was for the preservation of the mother's life.

So, the original section has been extended in this case. That is the authority on which medical textbooks now rely. On page 616, the judge, Mr. Justice Macnaughten directed the jury as follows:—

> The question that you have got to determine is whether the Crown has proved to your satisfaction beyond reasonable doubt that the act which Mr. Bourne admittedly did was not done in good faith for the purpose only of preserving the life of the girl. If the Crown has failed to satisfy you of that, Mr. Bourne is entitled, by the law of this land, to a verdict of acquittal. On the other hand, if you are satisfied beyond all real doubt that Mr. Bourne did not do it in good faith for the purpose only of preserving the life of the girl, your verdict should be a verdict of guilty.

On page 617, the judge said—

> As I say, you have heard a great deal of discussion as to the difference between danger to life and danger to health. It may be that you are more fortunate than I am, but I confess that I have felt great difficulty in understanding what the discussion really meant. Life depends upon health, and it may be that health is so gravely impaired that death results. There was one question that was asked by the Attorney-General in the course of his cross-examination of Mr. Bourne, where the matter was put thus:
>
> > I suggest to you, Mr. Bourne, that there is a perfectly clear line—there may be border-line cases—there is a clear line of distinction between danger to health and danger to life?
>
> That is the question that the Attorney-General put, and he assumes that it is so. Is it? Of course there are maladies that are a danger to health without being a danger to life. Rheumatism, I suppose, is not a danger to life, but a danger to health. Cancer is plainly a danger to life. But is there a perfectly clear line of distinction between danger to life and danger to health? I should have thought not. I should have thought that impairment of health might reach a stage where it was a danger to life. The answer of Mr. Bourne was:
>
> > I cannot agree without qualifying it. I cannot say just yes or no. I can say there is a large group whose health may be damaged, but whose life almost certainly will not be sacrificed. There is another group at the other end whose life will be definitely in very great danger.

Then he added:

> There is a large body of material between those two extremes in which it is not really possible to say how far life will be in danger, but we find, of course, that the health is depressed to such an extent that their life is shortened, such as in cardiac cases, so that you may say that their life is in danger, because death might occur within measurable distance of the time of their labour.

He is speaking of a case such as this. If that is a view which commends itself to you, so that you cannot say that there is this division into two separate classes with a dividing line between them, then it may be that you will accept the view that Mr. Oliver put forward when he invited you to give to the words "for the purpose of preserving the life of the mother" a wide and liberal view of their meaning. I would prefer the word "reasonable" to the words "wide and liberal." Take a reasonable view of the words "for the preservation of the life of the mother."

And so it goes on.

As a result of the judge's direction in that case, the jury came to the conclusion that a woman whose health would be wrecked was in the same situation as a person whose life was in danger. This excused the doctor for performing what would otherwise be an illegal operation; that is, criminal abortion. That has been the position in England ever since that case and, as the Minister pointed out, it has since been confirmed in at least one other case. It is the generally accepted position today.

Strange to say it is the situation which seems to obtain in Western Australia. I have said "strange to say" but perhaps I should not have said that since, naturally, we accept English precedents particularly in a case where our law is so analogous. However, as I am informed, there is really no certainty that a court in Western Australia would take the same view as a court in England in this situation. I have been informed that there is no certainty a judge in Western Australia would give the same direction as was given by Mr. Justice Macnaughten in that case, and it could well be that R. *versus* Bourne would not be held to apply in Western Australia.

The medical profession in Western Australia is apparently aware of this situation, but seems to feel there is an amnesty in official quarters which allows members to proceed as if R. *versus* Bourne were the law here. This is my own deduction from the facts which have been communicated to me. To my mind, however, they may be on very shaky ground if they were to rely upon R. *versus* Bourne applying in Western Australia for the reasons which I have stated.

Many members of the medical profession in Western Australia have, of course, been trained in overseas schools of medicine and universities. They have imbibed the medical texts on this subject and consequently it is not surprising that they may feel they are on fairly safe ground in assuming that R. *versus* Bourne would apply here. Of course, some medical practitioners may never have heard of the case, but I am fairly sure that most of them would have heard of it, because of the wording of some of the standard textbooks on the subject in England.

I am indebted for certain quotations to Mr. F. T. P. Burt, Q.C., who made them available to me and I would like, very briefly, to quote some of these medical texts. I refer firstly to *Mayes On Obstetrics* at page 952 which says—

> Whatever is the law a practitioner may not be afraid of legally performing a justifiable abortion so long as the following provisions are satisfied: He must be firmly convinced that the action is necessary to save the life of the mother or to preserve her from serious illness.

Members will see how the extra ground has been included in the textbook. Camps and Purchase on *Practical Forensic Medicine* state—

> In general it can be said that the law will certainly not interfere if a pregnancy is terminated for a substantial medical reason if it can be supported by the opinions of more than one practitioner who has examined the patient if it is agreed that the health . . . of the patient is in danger if the pregnancy is allowed to go on.

Lord Horder, in the *British Encyclopaedia of Medical Practice* states at page 42—

> It would appear that a pregnancy can be terminated if it is a menace either to the life, or the health (mental or physical), of the woman.

There are other authorities which it is not necessary for me to quote. I have made certain quotations in order to illustrate that the medical profession may quite honestly and innocently feel that such operations performed in Western Australia to protect the health of the mother are legal, or completely justified on some sort of common law grounds. In fact, some members of the medical profession perform these operations and, indeed, they are performed in Western Australian hospitals.

This is a statement for which I have irrefutable authority, but which I do not propose to quote for the reason I have just stated; namely, if my thesis is right their actions are illegal. Consequently it would

be wrong for me to quote my authority. I am aware—as, I am sure, other members are aware—that *bona fide* therapeutic abortions are performed in Western Australian hospitals on the grounds of the mother's health. They have been so performed on grounds analogous to R. *versus* Bourne; namely, that the health of the mother would be very seriously impaired or endangered.

In addition, these operations are performed on the ground that the mother has suffered from rubella or other similar diseases or afflictions whilst in a state of pregnancy which, in the opinion of the particular medical practitioner, would occasion a deformed or seriously handicapped child. I understand, because I have been informed to this effect, that such operations have also been performed in Western Australian hospitals. Granted they have not been performed very frequently, according to my information, but nonetheless, these are facts.

The Bill before us gives four main grounds on which the operation of therapeutic abortion can be performed. The first ground is that the continuation of the pregnancy will involve a risk to life greater than if it is terminated. Here we have the case of the risk to life. If one weighs that ground with the existing provisions of section 259 of the Criminal Code, one will see it is a very considerable advance on that section. Section 259 refers to the case of an operation performed in good faith, using reasonable care and skill, for the preservation of the mother's life. The first ground of the Bill before us refers to an operation—and clearly we must presume good faith and the use of reasonable care and skill—where the continuation of the pregnancy would involve a risk to life greater than if it were terminated. That, of course, is a considerable advance, and I think it is not inappropriate to consider that medical men say that the continuance of any pregnancy involves a degree of risk to life. No doubt there would be many people who woud take me up on that, and I am not in a position to argue. Nevertheless I have been informed by some quite eminent men that almost any pregnancy may result in a risk to life greater than if the pregnancy were terminated.

If that is so, then it appears that this ground is extremely wide. If we were merely reforming the law in order to bring it more into line, one might say, with an up-to-date version of section 259 we would be making a considerable advance on that section if we were to accept the ground in the Bill as it stands. I would suggest that at this stage we would be unwise to leave that ground unamended, and we would be wise to think about what quallfications we should insert in the phrase, "risk to life"—whether it should be, perhaps, a substantial risk to life, or a serious risk, or words of that import.

The second ground in the Bill is that the continuance of the pregnancy will result in an injury to the physical or mental health of the mother greater than if it is terminated. Of course, the same argument applies here as applied to the first ground; namely, if there is a risk to life—and I have already indicated that some eminent medical men have informed me that there is this risk in a pregnancy —then there must be a risk to health. Hence, exactly the same argument applies and this also would be a very considerable advance on Bourne's case. Are we to accept that the law here should be brought into line with conventional medical practice and with, say, an acceptance of the principle of the Bourne case? If on humanitarian grounds we were to accept that this would be the proper thing to do, then we must appreciate that the second ground of the Bill would also be a considerable advance on the Bourne case.

To my mind, we should also qualify the second ground by implying that the risk should be substantial or serious—or words to that effect. At this stage I am only speaking in general terms, because I believe that is all one is called upon to do at the second reading stage of the Bill.

The third ground is that the health of the existing children will suffer, or words to that effect. This involves a very searching investigation of the circumstances of the existing members of the family of the patient whom the doctor is examining at the time. The doctor is consulted by the patient who is the woman having the child and, yet, he has to make a determination and a decision on a situation affecting other people; that is, other children of the family. I submit this would be a very difficult decision indeed for a doctor to have to make; because I honestly do not believe that the average busy doctor is in a position to examine sufficiently all the circumstances of the family background.

I know that in the old days the general practitioner, who was the family doctor, knew all about the family, but I am afraid this situation has left us now. I quote from no other authority than Professor Saint for the statement that the old family doctor is fast disappearing, or has virtually disappeared.

It will become increasingly difficult for any doctor to be in a position of being thoroughly familiar with the circumstances of all the other children. Therefore I think this is an extraordinarily difficult ground for the medical profession to assume. I am aware that it is one of the grounds in the English Act, but I understand from a recent discussion with a visiting lawyer who is an English professor of law that the medical profession in England is not happy about this ground. In fact the B.M.A. has raised many objections to it.

The Hon. A. F. Griffith: It is hardly likely that the doctor would offer the decision. He would make it after the woman had requested him to abort her.

The Hon. I. G. MEDCALF: Yes, he would only make it after he had been consulted by the woman, and then he would have to examine the family circumstances. It is true the Bill provides for a physician to come in at this stage to investigate the surrounding circumstances of the family, but I feel this is going too far.

There is also another quite substantial reason why we should not adopt this ground. This reason is, perhaps, one which will not commend itself to everybody, but it is one of which I have been made aware in numerous letters that I have received and from discussions which I have had with various people. The reason is that in Australia we are desperately short of population. We are endeavouring to attract migrants and it costs the Commonwealth Government many thousands of dollars for each migrant who is brought to these shores. Of course as we know, some of them stay only a fortnight and then go home and write a book about Australia.

Where we have a probable healthy child, and there is no suggestion that there is anything wrong, or likely to be wrong, with the health of the child or the mother, I do not think we should invoke this ground in our present condition of society here.

I feel there must be other remedies for that situation, and I have also heard stories such as those mentioned by Mr. Dolan. I have heard of people who were born in dire poverty, or with considerable disadvantages of birth, one might say, in terms of their social surroundings but who, nevertheless, have battled their way to the top. In fact, in having to struggle during their early youth and in their childhood, they may even have an advantage. This background often produces the best in them and brings out their character. I feel that this is another aspect we should bear in mind.

Therefore, as I presently feel about this Bill, I would not be prepared to support the third ground.

The fourth ground is that there is a substantial risk of the child being born with abnormalities. Of course, the classic example of this is the rubella child who might be born with very severe handicaps, such as blindness, deafness, etc. As I understand that at least some members of the medical profession in Western Australia are already using this ground, in performing the operation, for humanitarian reasons I have a feeling that, subject to whatever safeguards we write into the Bill, we should not lightly throw this ground away.

In general, I want to mention two other points. I want to refer to the need for a psychiatrist. If we reach the stage where we consider that the woman's health should be examined, the services of a psychiatrist would be, perhaps, of great benefit. I appreciate there may be some difficulty in defining a psychiatrist, although I understand this can be attended to in the terms of the previous Bill introduced by Dr. Hislop, because it contains such a definition.

The other matter on which I wish to speak is the clause in the Bill relating to conscientious objection. I can appreciate that there may be different interpretations of what I am about to say. I am referring to clause 6 of the Bill which provides—

> Subject to subsection (3) of this section, no person shall be under any duty, whether by contract or by any statutory or other legal requirement, to participate in any treatment authorised by this Act to which he has a conscientious objection.

It has been mentioned, I think by the Minister, and it was certainly mentioned in the writings I have read concerning the English Abortion Act, that this Bill and the English Abortion Act are permissive only. The Minister referred to the fact that there was no compulsion on any person under this Bill. He was, of course, referring to persons who submitted to treatment. But as I view clause 6 there is compulsion on members of the medical profession, on nurses, and on others who participate in these operations to take part in them.

I say this because, if it is necessary for them to plead a conscientious objection, there must be some compulsion in order to force them to claim a right of conscience. Of course, there is always some compulsion in the sense that medical people cannot refuse to perform an operation in order to save the life of the patient. So I believe there is a compulsion, and there will be a compulsion, but the clause purports to let out members of the medical profession, nurses, and others by saying that if they have a conscientious objection they can avoid having to participate in the treatment under the provisions of this clause.

However, what if they have performed one abortion? What if they have, on sound justifiable medical grounds, and on good social or legal grounds, performed one abortion? How can they then plead conscientious objection? This is very difficult. Under the National Service Act we have seen people attempting to plead conscientious objection. However, they may have served three months or six months up to that time and they cannot then plead conscientious objection. The same applies in this case.

The Hon. A. F. Griffith: They could plead post-operative abortion.

The Hon. I. G. MEDCALF: Clause 6, therefore, introduces an element of compulsion on members of the medical and nursing profession. If it is not compulsory for any person to submit to treatment, why should it be compulsory for any member of the medical profession, or a member of the nursing profession, to participate in an operation for an abortion? So I think that provision needs some tidying up to ensure that no person will be required to participate in any treatment, and that such person should not be required to plead conscientious objection, but should have the right himself to choose.

I do not wish to suggest there should be any change in the present law which requires a doctor to attend to the needs of a patient whose life or health is in serious danger. I understand this is the present common law position stated rather loosely. I would not like to change the common law position which exists.

So, in general, I feel much akin to the Minister in my conclusion.

I am not happy with the present social situation. I am not referring to the number of abortions; I know nothing about that. I believe it is grossly exaggerated. I am not happy with the present situation whereby we have a rather obscure law which, as the Minister says, is already 150 years old, and with the medical profession in this State relying, in general, on an English case of very doubtful and limited application, and medical men of some eminence carrying out therapeutic abortions for what they believe to be very good reasons, but without proper legal sanction.

I am not satisfied that this situation should continue unless we face up to it properly and provide the legal sanction on humanitarian grounds, which I believe these activities require. On the other hand, I would not wish to go too far in this matter. I am very conscious of the arguments that have been raised by Mr. Dolan and by the very many good people who share his views, and therefore I believe that any further advances on this subject should await mature consideration of the position as it works out in practice in other countries, and on the basis of a more uniform approach in the other States of Australia.

THE HON. H. C. STRICKLAND (North) [9.39 p.m.]: I have been impressed with the speeches we have heard up to date on this matter. The Minister explained the provisions of the law very thoroughly, and Mr. Medcalf has added his comments, supplementing the Minister's views in more detail, and they are relatively understandable when one hears more of them for a second time.

I think the Bill should be given a second reading and an attempt made to clear up the provisions in the Bill which appear to be, perhaps, far too wide. I say this because of the very unsatisfactory position which exists with regard to the law today and with regard to the illegal abortion practices which apparently are carried on. So I feel there is justification for legalising the operation of abortion in certain cases, and because such cases in the past have been looked upon as being more or less legal. I think the law is very cloudy in regard to the performance of such an operation when it means the saving of the mother's life or maintaining her mental stability in the future.

That provision in the law should be clarified, and the Bill, in its long title, aims at doing just that. The long title of the Bill reads—

> An Act to amend and clarify the law relating to Termination of Pregnancy by Medical Practitioners.

That title is quite plain and there is nothing objectionable about it; in fact, it is the correct aim. It is of no use members closing their eyes and shunning the existing illegal practices when we can make legal provision for the performance of a great number of operations.

I agree with the analysis made by Mr. Medcalf of clause 4 (1) (a). That certainly needs some tidying up, but 4 (1) (b) reads—

> There is a substantial risk that if the child were born it would suffer from such physical or mental abnormalities as to be seriously handicapped.

A case was reported in the Press quite recently—reports of many others, of course, have been reported in the Press in the past—and although I did not obtain the cutting of the report, from my recollection it occurred in the Eastern States. The mother was advised that her child would be born with abnormalities because of the drugs that had been prescribed for her. However, on conscientious grounds she refused to have the baby taken from her, and as a result the baby was born blind and deaf and with some other abnormalities.

In a case such as that, where the mother has been informed of the condition of the child and that the birth should not take place, she should, if she so desires, be attended, legally, by a qualified medical practitioner and be treated with safety in a first-class maternity hospital. So that, instead of having a new abnormal addition to our population, we would be doing the country a greater service by not bringing such a baby into the world.

I am sure that most of us read the Press reports two or three years ago on the thalidomide babies who were born without arms, legs, or with other abnormalities. In one of these Press reports a mother in Canada, I think, was informed that her

baby would be born with such abnormalities and she applied to have an abortion; but the court refused, so she went to Sweden where she was able to undergo the operation. Of course, the baby did not live.

It is time our laws were brought up to date so that cases such as that can be treated without fear of prosecution. Under the existing laws this type of treatment cannot be given. For that reason alone I think the Bill is aimed in the right direction, and it should be given a second reading so that members would have the opportunity to tidy it up in the Committee stage. If the Bill is not satisfactory after it has passed through the Committee stage, then there is the third reading stage which it must pass.

I was interested in what Mr. Medcalf had to say in connection with the provision in clause 6 which deals with conscientious objection. My understanding is that any person or patient can conscientiously object to participation in treatment, but there is compulsion under certain circumstances, and the circumstances are mentioned in clause 6 (3), which states—

> (3) Nothing in subsection (1) of this section shall affect any duty to participate in treatment which is necessary to save the life or to prevent grave permanent injury to the physical or mental health of a pregnant woman.

In the first part of that clause people can conscientiously object to participating in the treatment, but in the latter part where the treatment is necessary to save life they cannot contract out. I do not see anything wrong with this clause.

The Hon. I. G. Medcalf: I agree with that.

The Hon. H. C. STRICKLAND: The latter portion of that clause might need curtailing. While we have heard a good deal on the moral side of the subject from Mr. Dolan, as to what is right and what is wrong, and as to why members should express their views, I think it is right that all members should express their views on a matter such as this; but I am more concerned with the principle in the Bill which some people might regard as the moral side of the question. It is time that some of us grew up and realised that in many respects our laws are out of date, and that it is our duty to modernise them. In this Bill we have the opportunity to do just that. This House is provided with the opportunity to bring up to date our laws in relation to abortion.

The Minister referred to the Bill as making available abortion on demand. I cannot see any reference to that in the Bill, and I wish he had given the clause which contained such a provision. I have looked through the Bill, but I cannot find that provision. The only instance of compulsion is contained in clause 6. As far as the general medical profession and the gynaecologists are concerned, they have to abide by the existing law; that is, they must be of firm opinion, and they must have formed such opinion in good faith. If one reads the Bill one will find that the provisions are quite fair, but it is capable of being knocked into good shape.

There is provision for the Governor to make regulations to prescribe for almost everything; and in certain instances the Health Act has been brought in. If the Bill, or any part of it, becomes an Act it will be administered by the Medical Department and governed by regulations which the Government of the day cares to promulgate. I cannot see anything wrong with that. I hope members will give the Bill a second reading. As I said, should it appear to be unsatisfactory after it has been dealt with in Committee there is always the third reading stage which it has to pass. If the Bill is not satisfactory when it reaches the third reading stage, I certainly will not support it then.

THE HON. C. R. ABBEY (West) [9.53 p.m.]: We have already been presented with a very exhaustive study of this Bill, and I find it extremely useful in helping me to make up my mind on this question. It seems to me that a majority of the public feel that we should make the legal situation abundantly clear in regard to this matter. In his speech the Minister for Mines quoted opinion polls which indicated quite clearly that a majority of the people who had been questioned thought that something should be done about this matter.

In my view it is rather a pity that this very personal problem has been governed by the Criminal Code. It should be covered by the Health Act. I sincerely hope that the Minister for Health, whether it be at the second reading stage or the Committee stage, will give the House the benefit of his opinion. In saying that I realise that the provisions of the Bill may be changed, but if that is for the good then it is an advisable step to take.

In his very clear examination of the question the Minister for Mines gave us some very useful information, and I am personally very grateful to him for placing such information at our disposal. As has already been pointed out, the medical profession should not be placed in any doubt. In some cases it must be a terrible decision for some people to make, when they act according to their consciences; they might place themselves in the position of having to defend their action in a court of law. This makes the decision very difficult.

We all recognise the high ethics of the medical profession, and we can all rely on the advice given by it. We do not seem to recognise that members of the medical

profession are very conscious of the legal situation in this matter. However, it is not difficult for me to make up my mind, and like Mr. Strickland I feel certain that that this Bill should be given a second reading. With the legal opinion that is available to us, from both inside and outside the House, we should be able to make this Bill a very good vehicle for clarifying the situation.

In his exhaustive study of the question, Mr. Dolan made the point that the maternal instinct of the mother is very strong. I am sure we all recognise this, but I do not think it has any real application to the measure before us, because without doubt that maternal instinct would not allow a potential mother to seek an abortion unless medical and mental reasons forced her to do so.

That is a very important personal point, and that is why I think this subject should be covered by the Health Act. It requires very sympathetic consideration by the authorities which have to deal with cases concerning girls in their teens, or with the cases which were mentioned by Dr. Hislop. I know it is very difficult for us to make up our minds, but I have no hesitation in saying that I am most definitely prepared to support this reform. If we can arrive at a workable decision over the next few days I hope the Bill will prove to be of great benefit to our State.

Any member who does not speak on this Bill but is prepared to cast a vote will indicate how he feels about the matter. The fact that he is prepared to vote indicates quite clearly to the people of the State his viewpoint. I was not aware —as indicated by Mr. Dolan—that the British Parliament took the attitude it did, and very few members decided to express their opinions. I do not think we will see a similar situation in this Parliament, because all of us are responsible people and are prepared to stand up to our responsibilities.

In the last few sitting days a good deal has been said about the rights of the individual. I suppose in this case the rights of the individual are the most important thing we can discuss, and too little has been said and legislated on with regard to the individual rights of the woman in connection with the legal aspects of abortion. I, personally, support the right of the woman to make up her own mind. I do not believe she should be bound by very restrictive legislation under the Criminal Code which, in a very large proportion of cases, drives the woman concerned to a backstreet abortionist. This is the most dangerous thing which could happen in our community; and so if we make it possible for a woman who desires this relief of the tensions which must be hers, whether it be for physical or mental reasons, to make this decision herself, with the assistance of her medical advisers, I think that is fair enough and is an opportunity which we, as members, should be prepared to make available to her.

I support the second reading and sincerely hope that when we come to the Committee stage we can give the Bill further exhaustive consideration in order that we might amend it to a point where it will meet the wishes of a majority of the people of Western Australia.

Debate adjourned, on motion by The Hon. J. Heitman.

KEWDALE LANDS DEVELOPMENT ACT AMENDMENT BILL

Receipt and First Reading

Bill received from the Assembly; and, on motion by The Hon. L. A. Logan (Minister for Local Government), read a first time.

WESTERN AUSTRALIAN MARINE ACT AMENDMENT BILL

Second Reading

Debate resumed from the 10th October.

THE HON R. THOMPSON (South Metropolitan) [10.3 p.m.]: This Bill amends 12 sections of the Act. Several sections have been repealed and re-enacted and three added, these being sections 91A, 92A, and 105.

In the main I am in complete agreement with the provisions in the Bill. I cannot find anything which requires me to go over the Minister's speech or to criticise, in any shape or form, the provisions he has outlined and which are to be found in the Bill.

There is possibly one point which I would like the Minister to clarify for me and this deals with clause 4 which amends section 19. The Minister has said that a person shall not be admitted for examination for a certificate unless he speaks and writes the English language intelligibly. He said that the Commonwealth Act contains a proviso that a person would have to be in Australia for 12 months before he was eligible and that he could not see any reason for this. However, this is not my query. The Minister went on to say that the reason this amendment is not being included is because it would be unreasonable to try to recruit people for a particular purpose and then expect them to reside in the State for 12 months before they became eligible for examination.

The Minister did not mention the purpose of the recruitment, and that is my query. I have no knowledge of any shortage of qualified men at present. I realise that the provisions of the Act are extending beyond the 27th parallel and all people will be required to have the necessary certificates. However, I do not know what the word, "recruitment" means. If it means we are going to recruit labour and bring people here to work in undeclared

ports which are not subject to this Act, then possibly I will take a different line from giving it my full support.

I get back to my argument of the other night that it is silly for us to enact legislation and then, with the stroke of a pen, state that it will not apply in zone A, B, or C, whichever the case may be.

If I am deducing correctly, and this recruitment is going to place people in these undeclared ports, I will oppose the clause because I believe our coastline is one which needs to be studied. If we bring people in from outside and put them on the most dangerous part of our coastline, we will be asking for trouble. Except for that clause, however, I give the Bill my full support.

THE HON. L. A. LOGAN (Upper West—Minister for Local Government) [10.8 p.m.]: Mr. Griffith introduced this Bill on my behalf. I think I can give the answer to the honourable member. If I read the note given to me on this matter by the Minister for Works, I think the problem will be solved. The Minister said—

> The notes which have been passed on to you describing amendments to the W.A. Marine Act did not include a description of a further amendment which was agreed to by the Legislative Assembly following a re-committal of the Bill to the Committee Stages. The following information will be useful in describing this new amendment.
>
> Section 19 (2) states that "no person shall be eligible for candidature for examination unless he is a British subject."
>
> It is desired to remove this provision from the Act and merely place in its stead the qualification that the candidate need only be able to speak and write English intelligibly to be able to sit for an examination.
>
> The trend these days is to delete such qualifications as exist in the Act at present, that is, where a person must be a British subject. In 1960 at the Safety of Life at Sea Convention in Geneva a resolution was carried that nations be asked to repeal such provisions from legislation in the various countries of the world. Since that time the Commonwealth Government and all the States except South Australia have implemented the terms of the resolution, and I understand that South Australia is now considering similar action.
>
> The only other point that will be of interest to members is that the States of Queensland and Tasmania have added an additional qualification to that of speaking and writing English intelligibly. This is that candidates must be resident in Australia for a period of twelve months. It has been decided to reject this second qualification in favour of the amendment before you at the present time.

I think the word "recruitment," about which Mr. Ron Thompson is concerned, refers to recruitment of people from this State. There is no intention of recruiting people from outside for the purpose. The recruitment refers to those people who are already here and, under these qualifications, would be entitled to sit for the examination. I think that is the explanation.

Question put and passed.

Bill read a second time.

In Committee

The Deputy Chairman of Committees (The Hon. F. R. H. Lavery) in the Chair; The Hon. L. A. Logan (Minister for Local Government) in charge of the Bill.

Clauses 1 to 3 put and passed.

Clause 4: Section 19 amended—

The Hon. R. THOMPSON: I think I should read from the Minister's notes because I did not get the answer I desired. The last paragraph on page 12 of the Minister's notes reads—

> There is no necessity to include this provision in the Western Australian Act—

That is, the 12-month provision. To continue—

> —because it would be unrealistic to try to recruit people for a particular purpose and then expect them to reside in the State for 12 months before they became eligible to be admitted for examination.

The Minister's notes are quite definite when they state that it would be unrealistic to try to recruit people for a particular purpose. That is the reference I desire to be clarified.

The Hon. L. A. LOGAN: I am not certain, but I think perhaps the word "recruitment" is the wrong one to use. The only way the principal Act is affected is that a person shall not be admitted to examination for a certificate unless he speaks and writes the English language intelligibly.

Unless there is a shortage of personnel for some of the fishing vessels and those concerned want to recruit someone capable of doing the job—but I do not think this is the case—the word "recruitment" might possibly be the wrong word.

Clause put and passed.

Clauses 5 to 12 put and passed.

Clause 13: Section 205 amended—

The Hon. R. THOMPSON: This clause will bring rowing boats under the provisions of the Act in that they will have to be fitted with safety equipment and carry flares when the boat is taken out into the open sea. I can appreciate the necessity for the carrying of this equipment, especially when a foolhardy person

insists on going out to sea in a rowing boat, but for the life of me I cannot see how the provision will be policed. This is the aspect we have to consider.

It is all very well to insert such a provision in the Act and merely leave it there, and in view of the fact that our coastline extends for thousands of miles, the provision seems superfluous. The only places where it could be adequately policed at present would be the Fremantle Harbour, the entrance to the Murray River, and possibly around Bunbury and Albany. Further, no matter how desirable the department may consider the provision to be, I cannot see how this safety equipment can be carried in a rowing boat. I can understand the occupants of such a boat carrying life jackets, but if anything happens when one is in a rowing boat the first piece of equipment that would be lost would be the flares, unless one happens to be nursing them. On our extreme northern coastline flares would be of no use to anybody, even if one were able to fire them. People who know something of our north-west coastline would agree with me on this.

The Hon. G. W. Berry: No-one would ever see them.

The Hon. R. THOMPSON: That is quite true. I do not know how this provision will be policed in areas where they would be of no value whatsoever.

The Hon. L. A. LOGAN: Whilst I agree with Mr. Ron Thompson that there would be some difficulty in policing the provision, the very fact of its being in the Act would encourage those people who are acquainted with the Act, and other responsible people, to carry safety equipment. Also, if the provision is in the Act, water police, fisheries inspectors, and others, will be able to ensure a breach of the law is not committed. At the present time many people are going out to sea in dinghies 10 ft., 12 ft., and 14 ft. long, fitted only with oars and without any safety equipment whatsoever.

Our coastal waters, even in the vicinity of Fremantle, can become very dangerous quickly. My son-in-law was out in his boat one Sunday morning and had he been foolhardy he could have been caught in a dangerous situation, because by the time he turned his boat around and headed for the shore the swell had become very heavy. Had he delayed his return for a quarter of an hour he could well have been caught. This provision is only a safety precaution for the benefit of people who venture out to sea in rowing boats. I think that is the main reason it is necessary to have it in the Act.

The Hon. R. THOMPSON: I can visualise many difficulties associated with this provision. Should an inspector care to be difficult he could religiously patrol Leighton Beach where there are dozens of dinghies which are used in the open sea extending along to Cottesloe Beach, but they are never more than 200 yards or 300 yards from the shore.

The Hon. L. A. Logan: They will not be affected by this provision.

The Hon. R. THOMPSON: Under the provision the owner of the boat could be prosecuted.

The Hon. L. A. Logan: He would have to be a certain distance out from the shore, would he not?

The Hon. R. THOMPSON: No, so long as he is in the open sea.

The Hon. L. A. Logan: Would not regulations be formulated under this provision?

The Hon. R. THOMPSON: Yes, but I am sure the average dinghy owner will not go to the trouble to study the regulations. On one occasion I had 55 sheets of paper when trying to sort out the regulations, and unless they have been amended in the last two years and consolidated in some way anyone else trying to study the regulations would probably be placed in the same position. We have to consider the rights and privileges of a man who goes out in a dinghy on a Sunday morning to fish. He should not be subjected to a penalty for not carrying safety equipment when we know full well, and he knows full well, that men have been going out fishing in open waters for years. Such fishermen would not be caught. It is the person who ventures outside the heads who would subject himself to danger. It is dangerous to go outside the heads, even with a slight swell running.

To enjoy a little sea fishing in a dinghy a man would need the assistance of a camel in order to carry his safety equipment, to say nothing of his other requirements such as bait, rods, and the food and refreshments he requires for a day's fishing. I do not like the clause and we should have some clarification of it.

The Hon. L. A. LOGAN: I am quite happy to report progress to obtain any further information the honourable member may require. I repeat, however, that I think this clause would apply only to people who get too venturesome by getting further away from the coastline than they should.

The Hon. R. Thompson: If you can check on this, I will be quite happy.

The Hon. L. A. LOGAN: I will get some information for the honourable member.

Progress

Progress reported and leave given to sit again, on motion by The Hon. L. A. Logan (Minister for Local Government).

House adjourned at 10.25 p.m.