



**PSA Submission on:
Contraception,
Sterilisation and
Abortion (Safe Areas)
Amendment Bill**

April 2021

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28 April 2021

About the PSA

The New Zealand Public Service Association Te Pūkenga Here Tikanga Mahi (the PSA) is the largest trade union in New Zealand with over 78,000 members. We are a democratic and bicultural organisation representing people working in: the Public Service including for departments, crown agents and other crown entities, and state owned enterprises; local government; tertiary education institutions; and non-governmental organisations working in the health, social services and community sectors. Te Rūnanga o Ngā Toa Āwhina is the Māori arm of the PSA membership.

The PSA has 21,000 members in the DHB sector and 9000 members in the Community Public Service sector. These sectors include people providing or assisting with abortion services; or providing or assisting with giving advice or information about abortion services.

The PSA is affiliated to Te Kauae Kaimahi, the New Zealand Council of Trade Unions, Public Services International and UniGlobal.

Our values

Solidarity - Kotahitanga

We champion members' interests with a strong effective voice. We stand together, supporting and empowering members, individually and collectively.

Social justice - Pāpori Ture Tika

We take a stand for decent treatment and justice. We embrace diversity and challenge inequality.

Integrity and respect - Te Pono me te Whakaute

Our actions are characterised by professionalism, integrity and respect.

Solution focused - Otinga Arotahi

We are a progressive and constructive union, constantly seeking solutions that improve members' working lives.

Democratic - Tā te Nuinga e Whakatau ai

We encourage participation from members. We aim to be transparent, accessible and inclusive in the way we work.

PSA Recommendations

- Provide safe areas to ensure people providing, assisting or accessing abortion services are not subject to intimidation, harassment or behaviour intended to cause distress. Nor should they be communicated with or visually recorded in a manner that would cause emotional distress
- Designate safe areas at all abortion services
- Simplify the process of designating a safe area.

Submission

The PSA supports the intent of the Bill

- The PSA's view is that people providing, assisting or accessing abortion (TOP¹ - see below) services should not be subject to intimidation, harassment or behaviour that is intended to distress them.
- Nor should they be communicated with or visually recorded in a manner that would cause emotional distress

"The anxiety, the stress and embarrassment carried by women having or choosing to use TOP services should not be further fuelled by permitting anti-abortionist individuals and groups to have close proximity to these places.

In year 2021 ~ chanting, name calling, visible presentation of signage/placards condemning any user or service provider/worker of TOP services is unwarranted, intimidating and harassment.

¹ DHBs providing abortion services refer to their services as Termination of Pregnancy (TOP) Services and this is our preferred language.

Staff of these services are also exposed to the anti-abortionist protestors and ‘prayer leaders’. They also must be protected for their role is important in ensuring safe procedures are adhered to in preparing their clients psychologically as well as physically.

To abstain from providing safe zones will further harm, not only directly on all who attend TOP services or similar, it will further delay the attendance of pregnant women who avoid attending for fear of these repercussions, the exposure and a breach of their privacy. This could also potentially lead to seeking alternative options, eg. using un-licensed services, unconventional methods and/or abandoning altogether and going full term with the ‘unwanted’ pregnancy”.

Member PSA women’s network committee, DHB employee

Experience of PSA members

- Members providing or assisting with providing TOP services support the implementation of safe areas as a preventative measure to ensure the health and safety of workers providing these and other services that the public may object to.
- **Members providing or assisting the provision of TOP services say they currently they manage the intimidation of people protesting at or around TOP services by not drawing attention to themselves and the service they are delivering as the abuse has subsided over the last 20 years and they do not want to reignite it.**

“I’ve only ever known a member works in this area by accident. They simply do not discuss it. It is not just the harassment aspect but also privacy in working is a field that is filled with controversy and complexities of faith etc. I asked a young woman who I happen to know, about this subject and was advised that the DHB does a good job keeping the protestors off campus but every Friday they picket the corner site closest to the service.”

Member PSA DHB sector committee

- Experiences vary between DHBs, depending on the physical location of services, when services are provided and the response of the DHB in directing security guards to protect staff, patients and their support people accessing services.

Experience of members who have accessed TOP services

- The decision to terminate a pregnancy is distressing enough without women and their support people being further traumatised by intimidating, obstructive behaviour intended to cause distress.
- PSA members have shared their stories about how distressing it is to experience the abusive behaviour this Bill is intending to protect them from. Speaking about their experience even in a safe supportive environment was clearly profoundly painful and we have chosen to not include these stories, to respect privacy and to not cause further distress.

Process of prescribing a safe area

The PSA has concerns that the process of designating safe areas is unnecessarily cumbersome, as it relies on DHBs or other TOP service providers applying to the Minister of Health, who consults with the Minister of Justice who then goes to the Governor General to make an order in council to prescribe a safe area. This decision is then reviewed every five years. This process is further complicated by recent announcements about the future structure of the health system.

In order for safe areas to be effective they need to dissuade people from behaving in a way that intimidates and causes emotional distress to public servants providing public services or to members of the public accessing health services. The process of creating a safe area should not require the potentially lengthy process proposed in the Bill.

In addition, safe zones should enable staff and people accessing a service to use an alternative entrance and therefore avoid intimidatory behaviour likely to cause distress.

A DHB sector member advised that “each hospital has differing access to in house security so this is also a risk management issue across the DHBs nationally.”

The PSA recommends that the legislation enables safe areas or access zones to be established for all clinics or facilities providing TOP services. It would be helpful for safe areas to be defined on the direction of the **CE of Health NZ**.

- Free speech

We do not accept that making the prohibited behaviour as described in the Bill illegal, constitutes an unreasonable limit on free speech. People can and do express their opinion in a safe and appropriate manner. They should not have the “freedom” to cause harm or to prevent people from providing or accessing a health service.

The PSA wishes to appear before the committee

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