

This submission has been prepared in response to the following comments from Dr Grover as reported in The Age on January 2 2013.

‘The question really is: Is this a procedure you would do on a non-disabled person?’ ‘We should not be doing a sterilising procedure if we would not be doing it on somebody who did not have a disability’.

I believe that this opinion is based on faulty medical reasoning.

It is fundamental in all branches of medicine that decisions regarding treatment must take account of the whole patient. This includes other organ systems and the social circumstances of the patient. Focussing on just one system, in this case the reproductive system, is wrong and is the basis for much criticism of medical specialists who are alleged, often correctly, to be focussing on the system with which they are familiar instead of the whole patient.

In the case of a woman with a disability that reduces her capacity to care for a child, this must be taken into account in making decisions about treatment, in this case, sterilisation. To deny this wider context as Dr Grover’s comments appear to do is, in my opinion, a serious error.

I would argue that taking into consideration the whole context of the patient and her situation it should be possible for an independent authority such as a Guardianship Board, to conclude that it is the best interests of the patient that a sterilisation procedure be performed.

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