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National
Infertility
Network

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Mr Elton Humphery
Secretary
Senate Community Affairs Committee
Suite S1 59
Parliament House
Canberra ACT 2600

Email: community.affairs.sen@aph.gov.au

Dear Mr Humphery

Legislative responses to recommendations of the Lockhart Review

ACCESS appreciates the opportunity to offer comment to the committee. This submission does not attempt to cover all the issues the Bill raises but instead focuses on a limited number of matters that are most relevant to more than fifty thousand couples who have undergone Assisted Reproductive Technology (ART) treatment in Australia to try to have a child. As an advocacy and support network ACCESS has an interest in any legislative developments in Australia that may affect the needs and rights of infertile people to establish families of their own and make very personal decisions about the use of embryos they have created in that process.

ACCESS is a consumer based, independent, not for profit organisation, committed to providing whole of life support for women, men and their families who have experienced difficulties conceiving. ACCESS strives to raise community awareness about infertility by being a national voice to bring the social, psychological and financial concerns of couples to governments and the medical and scientific communities. Our Patrons are Olympic gold medallist, Glynis Nunn-Cearns OAM and Candice Reed, Australia's first child born from ART. ACCESS serves as lifetime resource for support and information on reproductive health needs.

Schedule 1-Prohibition of Human Cloning Act 2002

Clause 13

In order to allow valuable research on the problem of egg aging we suggest a small change, which would continue to restrict reproductive cloning. Inserting the work "nuclear" before the word "genetic".

Clause 20

ACCESS welcomes the removal of previously burdensome requirements for people needing to import or export embryos to continue their ART treatment in another country.

Clause 20, Item 4 sub section c), Clause 23 and others referring to the same matter

As above in Clause 13

Schedule 2- Research Involving Human Embryos Act 2002

Clause 4 Subsection 7 (1), (b)

This clause raises concern in clinical IVF. If the NHMRC CEO deems an embryo not to be "unsuitable for implantation" this has implications for the woman who may have a different view about possible harm to her health or that of her potential child should the embryo be transferred.

Clause 7 Part 2 (heading)

The introduction of eggs into this section appears to be well beyond the scope of the Act. The regulation of a woman's eggs is a significant intrusion into the reproductive health of a woman especially when considering that in the normal course of a monthly cycle, unfertilised eggs are expelled from her body. Human eggs are not embryos, as they are not fertilised. The regulation of a woman's eggs has not been raised and it has never been suggested that they may have the same moral status as a human embryo. Even if a reasonable argument for regulating the use of a woman's eggs could be made, it seems inconsistent not to also regulate the use of a man's semen.

Clause 24 at the end of section 24

ACCESS welcomes easing the onerous consenting provisions, which have caused unnecessary distress to couples, especially as they relate to excess embryos unsuitable for implantation.

A decision about what the right decision is for each couple is taken after careful, thoughtful consideration of all the implications. Those who decide to donate them to research are then required to revisit that decision, and all the difficult history that this involves, seems cumbersome and suggests a lack of understanding and respect about the significance of their initial decision. While offering to provide specific information about the research seems reasonable, the initial decision should be regarded as adequate. This decision is not about research on the person giving consent, or any other person, so there are no risks to be made aware of.

The exception would be when consent is given for ES cell research as the couple should be made aware of the potential for family members of any stem cell lines that may have been created using their genetic material.

ACCESS also believes that the possibility of experimental fertilisation up to 14 days and not just the first cleavage division, allowed in NSW prior to the 2002 Act, should be permitted with the consent of the couple. This would greatly enhance the possibility of identifying difficulties with the quality of eggs in women in their later reproductive life. This has the potential to enhance success rates and improve health outcomes for children born.

ACCESS awaits the report of the committee with interest.

Sincerely



Sandra K Dill
Chief Executive Officer