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Thursday, 8 June 2006

Committee Secretary  
Community Affairs Committee  
Department of the Senate  
PO Box 6100  
Parliament House  
Canberra ACT 2600  
Australia

Dear Senators,

**Re: Transparent Advertising and Notification of Pregnancy  
Counselling Services Bill 2005**

I support the notion that there should be truth in advertising in relation to all counselling services, including pregnancy counselling. I would normally have supported legislation that sought to achieve truth in advertising.

However, the definition of *non-directive pregnancy* counselling in the *Transparent Advertising and Notification of Pregnancy Counselling Services Bill 2005*, and Part 2 of the Bill which contains prohibitions with respect to counselling services that do not refer for termination of pregnancy, would seem to be based on a mistake concerning counselling services in general, and not just pregnancy counselling.

Referral for medical services is a function of medical practitioners and of other health professionals. Referral for *specialist* medical services is a function of medical practitioners. Counselling services do not normally have a referral function unless medical practitioners undertake them. The effect of the Bill, therefore, would be to limit Government funding of non-directive counselling services to medical practitioners and to prohibit the advertising of all other non-directive pregnancy counselling.

Pregnancy counselling services assist women to discuss the problems confronting them and the options available to them. They also provide women with access to support services to assist them to continue with pregnancy. As I understand it, it is normal practice for pregnancy counsellors to recommend to clients, who have not yet seen a doctor about their pregnancies, that they see their own or another doctor. It is in the latter context that any decision about further *medical* management would be discussed and referrals made.

Pregnancy counselling services should not be seen as exclusively medical services. There is a need for women to be able to explore non-medical options. There is also a need for women who may want to continue a pregnancy to have access to support services. To medicalise pregnancy counselling would suggest that medical interventions are the only services available.

Yours sincerely,

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