



## **Mandatory waiting or “cooling off” periods prior to terminations**

*Briefing paper*

**Reproductive Choice Australia**  
**October 2005**

### **Facts and issues**

Mandating a “cooling off” period is offensive and patronizing to women. There is no evidence that women take decisions about unplanned/unwanted pregnancies – whether those decisions are to mother, adopt or abort – lightly or make them in a rushed, unconsidered or “hot-headed” way. The decision to terminate is one most often made over several weeks, not hours.

What other medical procedure requires patients to delay the procedure after they have given informed consent to its performance? What procedures are next?

“Cooling off” periods impose unnecessary delays on women who have made their decision and now want to carry it out. There is no evidence that mandating “cooling off” periods improves women’s health outcomes, the quality of, or satisfaction women experience with their decision. Nor does it change women’s minds. To the contrary, forcing women to “cool off” has been shown to increase the gestation at which a woman terminates, thereby putting her access and health at risk.

Delays pose particular hardships for women in the regions who travel to metropolitan areas for services. Delays force them to make excuses at work, arrange childcare, pay the costs of travel and overnight stay – not once, but twice.

“Cooling off” periods drive up the emotional, social and financial cost of terminating.

Medical evidence shows that each day of delay increases the health risks associated with terminating. The anti-choice movement is putting their political agenda ahead of women’s health.

In some states and regions, forcing women to “cool off” will push them beyond the time where they can obtain a safe and legal abortion. This may force them to spend more money to travel to obtain the termination, pursue an unsafe abortion that they can afford, or to become mothers against their will.

According to the American Public Health Association (as stated in *Planned Parenthood of Southeastern Pennsylvania v. Casey* 1992), waiting periods “interfere with constructive consultation between physicians and their patients...undermine patients’ health...and are in fact antithetical to informed consent.”

The American Medical Association has concluded that mandatory waiting periods “increase the gestational age at which the induced pregnancy termination occurs, thereby also increasing the risk associated with the procedure.”