



**National Council of  
Women of New Zealand**

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Wahine O Aotearoa

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**Submission to the Ministry of Health on the Terms of Reference  
for Ministerial Committee and National Ethics Committee  
on Assisted Reproductive Technologies**

The National Council of Women of New Zealand (NCWNZ) is an umbrella organisation representing 42 nationally organised societies. It has 33 branches throughout the country attended by representatives of those societies and some 150 other societies. The Council's function is to serve women, the family and the community at local, national and international levels through research, study, discussion and action. NCWNZ has a longstanding history of encouraging the promotion of social and health issues, particularly as they affect women.

Historically NCWNZ has had input into a number of submissions dealing with the application of reproductive technologies. Our members have also contributed to submissions dealing with associated ethical issues and we are pleased to be invited to contribute as part of this discussion.

NCWNZ was pleased to note the passing of the Human Assisted Reproductive Technology (HART) Act in November 2004, as a result of which, these two committees are being established. NCWNZ is also pleased to see that this requirement is being addressed quickly, given the length of time it has taken for the legislation to be passed and the intervening advances made in reproductive technologies available to infertile couples.

Unfortunately, because of the time of year, and the time frame for this submission, branch members were unable to be consulted. Members of the Health Standing Committee, and other interested parties were asked for their input into this document. The following is a summary of their comments.

**General**

Members agreed that the circulation of these terms of reference is to be commended. It was generally agreed that the terms of reference for both committees were well covered. These important ethical issues need to be carefully considered by the general public as well as health professionals. An understanding of how the ethical committees function is important for the public, especially if they are to be consulted about various issues. The requirements for consultation and confidentiality are very necessary.

Members also agree that both committees should have at least two committee members who have expertise in ethical theory and at least one of these to have medical ethical expertise. The issues are very complex and conflicts of interest are bound to occur.

It was pleasing to see that on each committee at least half the membership shall be comprised of laypeople. It has been the experience of one member that while such people are chosen for their common sense, there is the risk that if they are outnumbered, often due consideration is not paid to their point of view.





**Terms of Reference for the Ministerial Advisory Committee on Assisted Reproductive Technologies (MCART)**

Members agree that having a separate committee (MCART) to set guidelines for the ethics surrounding reproductive technology is an important development. Members are concerned that although membership of this group is achieved by ministerial appointment, there is no mention of any orientation or training. The assumption is, therefore, that all members will be fully cognisant of the functioning of the committee and their own duties. It is also possible that the level of understanding on some issues may vary.

While MCART must publish details of public meetings and submission hearings, it is hoped that meetings will be brought to smaller centres as interest demands.

**Terms of Reference for the National Ethics Committee on Assisted Reproductive Technologies (NECART)**

Although there is an expectation that training will be provided for new members and chairpersons, no mention is made of expenses being paid to attend training sessions.

This needs to be clearly stated, as they may not automatically be the same as fees for attendance at meetings.

NCWNZ thanks you for this opportunity to make comment on these documents and looks forward to the outcome.

Christine Low  
National President

Catherine Gurnsey  
Convener, Health Standing Committee



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