

SUBMISSION TO THE SENATE Standing Committee on Finance and Public Administration

Inquiry into the Health Insurance Amendment (Medicare Funding for Certain Types of Abortion) Bill 2013

Background:

The National Foundation for Australian Women (NFAW) is a feminist organisation working in partnership with other women's organisations to advance and promote the interests of Australian women, record and make accessible their histories, and ensure their achievements are handed on to future generations. We are not affiliated to any political party and are independent of government funding. NFAW has Deductible Gift Recipient status in its own right.

NFAW has set out its policy positions in relation to policies impacting on the termination of pregnancies in submissions to previous Senate inquiries. In essence, we consider that the decision to terminate a pregnancy should be taken voluntarily by a woman in consultation with her doctor.

In undertaking the current inquiry the Committee has been asked to consider:

- 1. The unacceptability to Australians of the use of Medicare funding for the purpose of gender selection abortions;*
- 2. The prevalence of gender selection - with preference for a male child - amongst some ethnic groups present in Australia and the recourse to Medicare funded abortions to terminate female children;*
- 3. The use of Medicare funded gender-selection abortions for the purpose of 'family-balancing';*
- 4. Support for campaigns by United Nations agencies to end the discriminatory practice of gender-selection through implementing disincentives for gender-selection abortions';*
- 5. Concern from medical associations in first world countries about the practice of gender-selection abortion, viz. Canada, USA, UK.*

NFAW Submissions to the Inquiry on each Term of Reference:

1. NFAW draws to the attention of the Committee that “there are significant legal barriers to the use of sex selection technologies, anonymous egg donation with or without payment and commercial surrogacy. In Australia sex selection technology is only allowed for medical reasons to reduce the risk of transmission of disorders. It cannot be used for ‘family balancing’ which was outlawed in 2005¹”.

¹ Grey E. Kippen R. Evans A. Reimondos A. “Australian Travelling Abroad for Assisted Reproductive Procedures: The Role of the Internet”

NFAW is unable to accept at face value or agree entirely with the proposition inherent in the first Term of Reference, while deploring terminations of pregnancies solely for cultural reasons.

NFAW respects completely the right of parents to make difficult decisions about the continuation of a pregnancy. This may be for a number of reasons but may include circumstances where testing has indicated the presence of a potentially fatal sex linked genetic abnormality affecting only pregnancies of one gender. The use of Medicare funding for such procedures is appropriate.

2. NFAW is unaware of any current soundly based evidence of the existence in Australia of *'gender selection, with preference for a male child- amongst some ethnic groups present in Australia and the recourse to Medicare funded abortions to terminate female children.'*

NFAW is aware of the existence in some countries of such practices, and finds such practices abhorrent, as we find the cultural practice of female genital mutilation.

There is an extensive literature on the prevalence of gender preferences, beginning with the work of Nobel Prize winner Amartya Sen, and his 1990 essay in the New York Review of Books ². Some of this is summarised in Attachment A.

There is also evidence that with rapid economic development allied with policies that seek to promote gender equality there is a discernible reversal in trend toward a normal sex ratio in the relevant populations.³

Were cultural practices such as gender selection occurring in Australia we would expect to see them reflected in aberrant trends in the sex ratio. The Australian Bureau of Statistics reports that there are 124,700 more females than males residing in Australia, with 11.2 million females and 11.1 million males. The sex ratio (the number of males per hundred females) was 98.9⁴

Our attention has been drawn to a recent (2008) Melbourne study of 578 patients having pre-natal diagnosis which found that none had a pregnancy termination on the basis of gender.⁵

These facts do not affect the possibility that some Australians of particular cultural backgrounds may travel to overseas destinations for the purpose of a gender specific termination. Such actions suggest a reasonably high level of disposable income. However, modifications to the Medical Benefits Schedule will have no impact on this. Programs to change cultural values may.

² [Sen, Amartya](#) (20 December 1990). "[More Than 100 Million Women Are Missing](#)". *New York Review of Books* **37**

³ Guilmo, Christophe Z. (2009). "[The Sex Ratio Transition in Asia](#)". *CEPED Working Paper* **5**. Retrieved 2009-11-19.

⁴ Australian Bureau of Statistics, *Population by Age and Sex, Regions of Australia*, 2011

⁵ Dahl, Edgar (2008) "From Sorting Sperm to Sorting Society" in Eds: Skene, L., Thompson, J. *The Sorting Society: the ethics of genetic screening and therapy*. Cambridge University Press.

We note in relation to another cultural practice considered unacceptable in this country, that numbers of Australian governments have introduced legislation⁶ relating to prohibition of Female Genital Mutilation; that professional medical bodies have developed policies on this basis⁷; and as well, Governments have conducted education campaigns in relevant cultural groups resident in Australia⁸. This is within an overall promotion of gender equality in the mainstream Australian population.

The Committee may be aware that the Commonwealth Health Minister, Tanya Plibersek MP is convening a national summit on the issue of Female Genital Mutilation a little later this year, and a number of additional measures have been announced by the Prime Minister with Minister Plibersek.

These strategies form part of the proven effective approach of promotion of gender equality.

3. NFAW is not aware of any data indicating that the *practice of gender-selective abortion for the purpose of family-balancing* is common in Australia, with or without Medicare funding. NFAW notes that the current Medical Benefits Schedule Item number covering pregnancy termination⁹ does not provide any information on the purposes for which the procedure was carried out: to complete a spontaneous abortion; or to terminate an unplanned or unwanted pregnancy- or one where genetic testing indicated such a procedure was indicated.

Moreover the National Health and Medical Research Council of Australia has published *Ethical Guidelines on the Use of Assisted Reproductive Technology in Clinical Practice and Research*.¹⁰ These guidelines state on Sex Selection: “Do Not Select Sex for Non-Medical Reasons..... sex selection (by whatever means) must not be undertaken except to reduce the risk of transmission of a serious genetic condition”. It is unlikely that an Australian medical practitioner (eligible to raise a charge on the Medical Benefits Schedule) would act in breach of this prohibition.

Australian demographers have found that couples who have two children of the same sex are about 25% more likely than others with two children to go on to have a third child.¹¹ This expresses a preference to have a boy and a girl, not gender specific selection as in China, for example.

This is quite the opposite of the suggestion implicit in the Term of Reference.

⁶ For example http://www.austlii.edu.au/au/legis/nsw/consol_act/ca190082/s45.html

⁷ <https://www.mja.com.au/journal/2011/194/3/female-genital-mutilation-australian-law-policy-and-practical-challenges-doctors>

⁸ <http://aifs.govspace.gov.au/2012/12/12/federal-government-to-act-on-female-genital-mutilation-fgm/>

⁹ <http://www9.health.gov.au/mbs/search.cfm?q=35640&sopt=S>

¹⁰ NHMRC 2007

¹¹ Gray E Kippen R Evans A “A Boy for You and Girl for Me”

We understand that in Australia pregnancy terminations most commonly take place very soon after impregnation, before gender can be easily determined.

Recent research¹² (2010) has found that ‘ most respondents to a representative survey of Australians did not approve of IVF or abortion for sex-selection purposes, and most did not think a hypothetical blue or pink pill to select sex of a child should be legal’.

4. NFAW is strongly supportive both of the role of the United Nations and its agencies in promoting changes in social values, and of the role of the Australian Overseas Aid Agency in promoting and financing sexual and reproductive health programs in developing nations.

We note that at the recent (March 2013) meeting in New York of the United Nations Commission on the Status of Women the following draft resolution¹³ was agreed:

14. The Commission urges States to strongly condemn all forms of violence against women and girls and to refrain from invoking any custom, tradition or religious consideration to avoid their obligations with respect to its elimination as set out in the Declaration on the Elimination of Violence against Women.

NFAW believes that every child, regardless of gender, should be a valued child.

To bring this about, and to achieve greater respect for women and for girl children, public policies such as improved access to education, promotion of gender equality, abolition of discriminatory practices and prevention of domestic violence are the most appropriate measures, both domestically and in Australian Government funded Overseas Aid programs.

Accordingly, we urge the Committee to reject the Bill on the grounds that there is no evidence to support the proposition that the practice of cultural termination of pregnancy is current in Australia, there are clear NHMRC Guidelines restricting the practice, and that in any case the strong international evidence is that the proposed withdrawal of a Government payment is not the effective manner of changing cultural practices.

In the event that the Committee were to conclude that there is anecdotal evidence of an emerging need in Australia to address cultural terminations of pregnancies, we urge the Committee to recommend the development by the Commonwealth (and in other jurisdictions) of community education programs directed towards greater gender equity in the particular communities. NHMRC Guidelines already place strictures around research and clinical practice.

¹² Grey E. Kippen r. Evans A. “Australian Attitudes Towards Sex Selection Technology”

¹³ Note this requires consideration by ECOSOC

This would be more effective in changing unacceptable societal values than would be modifications to the Medical Benefits Schedule¹⁴.

5. NFAW respects the opinions or views of medical associations in any nation deploring the practice of gender-selective terminations of pregnancies for cultural reasons. We see a need in those countries for continuing work to achieve gender equity, including through both public education campaigns as well as medical professional ethical guidelines, which ought to be complemented by programs and policies to raise the status of women. We are aware of the work of the World Bank in documenting data on gender equality, and of the work of the UNFPA in documenting standards of midwifery and sexual and reproductive health.

This submission has been authorised by the Board of NFAW.

Marie Coleman AO PSM
Chair, NFAW Social Policy Committee

¹⁴ See Zilberberg in Attachment A “If abortion is restricted, the burden is placed on women seeking abortions to show that they have a legally acceptable or legitimate reason for a desired abortion, and this seriously limits women's autonomy. Instead of restricting abortion, banning sex selection, and sex determination, it is better to address the practice of sex selection by elevating the status of women and empowering women so that giving birth to a girl is a real and positive option, instead of a detriment to the parents and family as it is currently. But, if a ban on sex selective abortion or a ban on sex determination is indeed instituted, then wider social change promoting women's status in society should be instituted simultaneously.”

ATTACHMENT A

Some Research Papers – Sex Selection-Status of Women

<http://onlinelibrary.wiley.com/doi/10.1111/j.1467-8519.2007.00598.x/abstract?deniedAccessCustomisedMessage=&userIsAuthenticated=false>

SEX SELECTION AND RESTRICTING ABORTION AND SEX DETERMINATION

1. JULIE ZILBERBERG

Article first published online: 9 OCT 2007

DOI: 10.1111/j.1467-8519.2007.00598.x

Bioethics

[Volume 21, Issue 9](#), pages 517–519, November 2007

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ABSTRACT

Sex selection in India and China is fostered by a limiting social structure that disallows women from performing the roles that men perform, and relegates women to a lower status level. Individual parents and individual families benefit concretely from having a son born into the family, while society, and girls and women as a group, are harmed by the widespread practice of sex selection. Sex selection reinforces oppression of women and girls. Sex selection is best addressed by ameliorating the situations of women and girls, increasing their autonomy, and elevating their status in society. One might argue that restricting or prohibiting abortion, prohibiting sex selection, and prohibiting sex determination would eliminate sex selective abortion. But this decreases women's autonomy rather than increases it. Such practices will turn underground. Sex selective infanticide, and slower death by long term neglect, could increase. If abortion is restricted, the burden is placed on women seeking abortions to show that they have a legally acceptable or legitimate reason for a desired abortion, and this seriously limits women's autonomy. Instead of restricting abortion, banning sex selection, and sex determination, it is better to address the practice of sex selection by elevating the status of women and empowering women so that giving birth to a girl is a real and positive option, instead of a detriment to the parents and family as it is currently. But, if a ban on sex selective abortion or a ban on sex determination is indeed instituted, then wider social change promoting women's status in society should be instituted simultaneously.

Further Reading:

[Britt L. Crow](#). (2010) Bare-sticks and rebellion: The drivers and implications of China's reemerging sex imbalance. *Technology in Society* 32:2, 72-80

[Therese Hesketh](#), [Jiang Min Min](#). (2012) The effects of artificial gender imbalance. *EMBO reports*

[Arindam Nandi](#), [Anil B. Deolalikar](#). (2013) Does a legal ban on sex-selective abortions improve child sex ratios? Evidence from a policy change in India. *Journal of Development Economics* **103**, 216-228
Online publication date: 1-Jul-2013.

[Scott J. South](#), [Katherine Trent](#), [Sunita Bose](#). (2012) India's 'Missing Women' and Men's Sexual Risk Behavior. *Population Research and Policy Review* **31**:6, 777-795
Online publication date: 1-Dec-2012.

[Xu Dong Zhou](#), [Xiao Lei Wang](#), [Lu Li](#), [Therese Hesketh](#). (2011) The very high sex ratio in rural China: Impact on the psychosocial wellbeing of unmarried men. *Social Science & Medicine*

[John Archer](#). (2009) Does sexual selection explain human sex differences in aggression?. *Behavioral and Brain Sciences* **32**:3-4, 249

[Sabu M. George](#). (2006) Millions of missing girls: from fetal sexing to high technology sex selection in India. *Prenatal Diagnosis* **26**:7, 604-609

[Therese Hesketh](#), [Li Lu](#), [Zhu Wei Xing](#). (2005) The Effect of China's One-Child Family Policy after 25 Years. *New England Journal of Medicine* **353**:11, 1171-1176 Online publication date: 15-Sep-2005.

[Dudley L. Poston](#), [Eugenia Conde](#), [Bethany DeSalvo](#). (2011) China's unbalanced sex ratio at birth, millions of excess bachelors and societal implications. *Vulnerable Children and Youth Studies* **6**:4, 314-320
Online publication date: 1-Dec-2011.

[C. ZHOU](#), [X. L. WANG](#), [W. J. ZHENG](#), [X. D. ZHOU](#), [L. LI](#), [T. HESKETH](#). (2011) THE HIGH SEX RATIO IN CHINA: WHAT DO THE CHINESE THINK?. *Journal of Biosocial Science* 1-5
Online publication date: 28-Jul-2011.

[Christopher D. Watkins](#), [Benedict C. Jones](#), [Anthony C. Little](#), [Lisa M. DeBruine](#), [David R. Feinberg](#). (2011) Cues to the sex ratio of the local population influence women's preferences for facial symmetry. *Animal Behaviour*
Online publication date: 1-Dec-2011.

[Alexandra Tragaki](#). (2011) Demography and security, a complex nexus: the case of the Balkans. *Southeast European and Black Sea Studies* **11**:4, 435-450
Online publication date: 1-Dec-2011.

[Hongbin Li](#), [Junjian Yi](#), [Junsen Zhang](#). (2011) Estimating the Effect of the One-Child Policy on the Sex Ratio Imbalance in China: Identification Based on the Difference-in-Differences. *Demography*
Online publication date: 19-Aug-2011.

http://scholar.google.com/scholar?q=%22sex+selection%22+%22status+of+women%22&hl=en&as_sdt=0%2C38

[CITATION] The social context of sex selection and the politics of abortion in India

R Balakrishnan - Power and Decision: The Social Control of ..., 1994

[Cited by 34](#) [Related articles](#) [All 2 versions](#) [Cite \[PDF\] from humanright-ias.com](#)

Women's rights as human rights: Toward a re-vision of human rights

C Bunch - Human Rights Quarterly, 1990 - JSTOR

... The following are a few examples: -Before birth: Amniocentesis is used for **sex selection** leading to the abortion of more female fetuses at ... the Human Rights Commission has more power to hear and investigate cases than the Commission on the **Status of Women**, more staff and ...

[Cited by 522](#) [Related articles](#) [All 11 versions](#) [Cite](#)

Sex selection: The systematic elimination of girls

N Oomman, BR Ganatra - Reproductive health matters, 2002 - Elsevier

... Some justify their decision to provide **sex selection** services by saying they are helping people to balance the sex distribution of their families [9] or that by contributing to the decline in the female population, they are ultimately raising the **status of women** [20]. ...

[Cited by 33](#) [Related articles](#) [BL Direct](#) [All 9 versions](#) [Cite](#)

Ethical and social issues in prenatal sex selection: a survey of geneticists in 37 nations

DC Wertz, JC Fletcher - Social Science & Medicine, 1998 - Elsevier

... United Kingdom). Others thought that pro- hibiting **sex selection** had important symbolic value for the **status of women**. "Equality between the sexes will never be real if abortion because of sex is possible" (Denmark). Many Chinese ...

[Cited by 66](#) [Related articles](#) [BL Direct](#) [All 9 versions](#) [Cite](#)

Measuring the effect of sex preference on fertility: the case of Korea

F Arnold - Demography, 1985 - Springer

... there may have been a slight decrease in son preference in recent years, accompany- ing a rise in the **status of women**, the continuing ... change the distribution of respondents by the sex composition of their children to re- flect the introduction of effective **sex selection** techniques. ...

[Cited by 126](#) [Related articles](#) [All 9 versions](#) [Cite](#)
[More](#)

Role models, mentors, and sponsors: The elusive concepts

JJ Speizer - Signs, 1981 - JSTOR

... is attained by research and publishing. If status in a university goes to those who do research and who publish—and women spend most of their time in teaching—then the actual **status of women**, unrelated to ... Author/Year Source Number **Sex Selection** Criteria Research Design ...

[Cited by 166](#) [Related articles](#) [All 2 versions](#) [Cite](#)

[Fatal knowledge? Prenatal diagnosis and sex selection](#)

DC Wertz, JC Fletcher - Hastings Center Report, 1989 - Wiley Online Library

... Societal arguments against using prenatal diagnosis for **sex selection** include the possibility of unbalancing the sex ratio, diminishing the **status of women** (assuming that sex preference would be for males), and unbalancing the birth order if, for example, most families acted ...

[Cited by 83](#) [Related articles](#) [All 9 versions](#) [Cite](#)

[Sex preferences, sex control, and the status of women](#)

NE Williamson - Signs, 1976 - JSTOR

Page 1. Sex Preferences, Sex Control, and the **Status of Women** Nancy E. Williamson
The ... necessary. 16. Otfried Hatzold, "X or Y? **Sex Selection** prior to Conception between Utopia and Reality," Sexualmedizin 2 (1973): 430-31. 17. ...

[Cited by 27](#) [Related articles](#) [Cite](#)

[More](#)

[Sex preference, fertility, and family planning in China](#)

F Arnold, L Zhaoxiang - Population and Development Review, 1986 - JSTOR

... traditions. It is also a reflection of the current **status of women** in China. Although ... wife. Worldwide patterns of sex preference for children are described in the next section, followed by an overview of the **status of women** in China. We ...

[Cited by 256](#) [Related articles](#) [All 2 versions](#) [Cite](#)

[More](#)

[\[PDF\] from kent.ac.uk](#)

[A surplus of men, a deficit of peace: Security and sex ratios in Asia's largest states](#)

VM Hudson, AD Boer - International Security, 2002 - MIT Press

... There can be no greater evidence of the extremely unequal and subordinate **status of women** in a society than the presence of prevalent ... to see that relationship at work in societies where violence against women is exaggerated—that is, where offspring **sex selection** is prevalent ...

[Cited by 130](#) [Related articles](#) [BL Direct](#) [All 7 versions](#) [Cite](#)