

**Submission to the**  
**Senate Finance and Public Administration Committees**  
**Inquiry into the**  
**"Health Insurance Amendment (Medicare Funding for Certain**  
**Types of Abortion) Bill 2013."**

**From Salt Shakers**  
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**About Salt Shakers**

Salt Shakers is a national Christian ethics organization – we have thousands of readers, in all states of Australia, and our submission represents their views of our readers

**Overview and Recommendation**

Salt Shakers values human life from conception to natural death as part of our Christian faith. We are concerned about the huge number of abortions in Australia and want to see those reduced.

The use of abortion for the purpose of gender selection is of grave concern. In particular, gender selection abortion for social or cultural reasons or for ‘family balancing’ is unacceptable and shows scant regard for the preciousness of human life.

We would like to see governments ban gender selection abortion for such reasons – as is the case in the UK. We recognise that the question of whether such abortions are legal or not rests with the state, not the Commonwealth government.

Medicare funds are scarce and there are a huge number of people competing for them – taxpayers should not have to pay for abortions that are done for social and cultural reasons that result in the killing of a child simply because they are of a particular sex (or gender).

With regard to this Inquiry, we support the Bill proposed by Senator John Madigan. We support the removal of Medicare funding for abortions where “the termination is carried out solely because of the gender of the foetus”. **Our Recommendation is that the Committee support the "Health Insurance Amendment (Medicare Funding for Certain Types of Abortion) Bill 2013."**

## Addressing the Terms of Reference

The following submission addresses the Terms of Reference. We state each of these below and respond to them.

### Terms of Reference

**In undertaking the inquiry, the Committee should consider:**

#### **1. The unacceptability to Australians of the use of Medicare funding for the purpose of gender selection abortions;**

Our organisation is totally opposed to “the termination is carried out solely because of the gender of the foetus”. In other words, to abortions to kill a male or a female child based solely on whether the child is of the sex desired by the parents.

Our opposition to abortion is much wider than this, but we are totally supportive of the stated aim of the Bill which is to deal with abortions done for ‘gender selection’ purposes.

We recognise that some Medical Associations totally oppose sex selection abortions done for social or cultural reasons, or for ‘family balancing’, whilst at the same time supporting abortions done on the basis of genetic hereditary diseases.

This is the position, for instance, of the **National Association of Specialist Obstetricians and Gynaecologists** (Australia). In their submission to this Inquiry – Number 1 - they state, that in a survey of their councillors, "no-one was in favour of social gender selection". They proposed not revealing the sex of a child until 20 weeks as a way of preventing some ‘sex selection’ abortions that may be done for social reasons. However, they state that abortions done for medical genetic reasons are in separate category.

The proposed Bill uses the word ‘solely’. In effect, this refers to abortions that are done for the ‘sole’ or ‘only’ reason of the gender of the baby.

Abortions that are done for medical hereditary reasons, such as those specified by the *National Association of Specialist Obstetricians and Gynaecologists*, have **additional reasons** of health, hereditary disease and so on – and are not being done for the ‘sole reason’ of the gender of the child.

In fact, the **Explanatory Memorandum** for this Bill explicitly states, “The policy intent of this Bill is to provide that a termination of a pregnancy on the grounds of a gender specific disorder, and not solely for reasons of sex selection, would not fall within the ambit of this Bill.”

Sex selection or gender selection is **banned in Australia in IVF programs** for all reasons except the transmission of genetic or hereditary diseases. It is not allowed for social or cultural reasons.

The *National Health and Medical Research Council* (NHMRC) ART GUIDELINES state: "Sex selection (by whatever means) should not be undertaken except to reduce the risk of transmission of a serious genetic condition".

#### **Home page for Guidelines:**

<http://www.nhmrc.gov.au/health-ethics/australian-health-ethics-committee-ahec/assisted-reproductive-technology-art/assisted->

#### **Actual Guidelines:**

[http://www.nhmrc.gov.au/files\\_nhmrc/publications/attachments/e78.pdf](http://www.nhmrc.gov.au/files_nhmrc/publications/attachments/e78.pdf)

In the same way, abortions done for the purpose of gender selection of a boy or a girl should be banned in Australia.

### **Opposition by Australians to abortions done for ‘gender selection’**

A Poll conducted by *Galaxy* in Tasmania in February 2013, for Emily's Voice, found that 92% of respondents opposed abortion based on the sex of the child. For young people aged 16-24, 97% were opposed.

This figure is remarkable, given that 61% of respondents supported abortion. Interestingly, younger people are not as supportive – with around 50% of those aged 16-24 supportive of access to abortion.

**See the results of the Poll at Emily’s Voice:** <http://www.emilysvoice.com/news-events/news/tasmanians-opposed-to-abortion/>

A Poll conducted by **Southern Cross Bioethics Institute** (2005) found that, of the respondents who were 'strongly in favour of abortion' 82% believe that sex selection abortion should not be legal. Of that 82%, 85% said that gender selection abortion is not morally acceptable.

The results were published in the book:

#### **Common Ground? Seeking an Australian Consensus on Abortion and Sex Education**

Link: <http://www.bioethics.org.au/Resources/Books%20and%20Booklets.html>

This overview of the study explains the main results (but not those quoted here)

<http://www.bioethics.org.au/Resources/Online%20Articles/Other%20Articles/1702%20Australians%20on%20abortion.pdf>

The majority of the Australian population do not support abortions carried out for the sole reason of selection of the gender of the child. Thus Australian taxpayers should not have to pay, through scarce Medicare funds, for these 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;**

There is a huge amount of data available – with articles in prestigious medical Journals and major reports from the UN (see sections below) documenting the huge problems caused by gender selection abortion.

This is particularly prevalent in China and India. In China the problem has been largely caused by the ‘one child’ policy. In a situation where only one child is allowed (with forced abortions and sterilisations) and people want a son to look after them in their old age, female children are aborted, killed or abandoned.

One United Nations report has stated that there are ‘200 million missing girls’ as a result of these policies and practices. The documentary film ‘It’s a Girl’ explores the issue further.

See <http://www.itsagirlmovie.com/>

The *Lancet*, the Journal of the *British Medical Association*, had an article stating that in China, in the 2010 census, there were **118 boys for every 100 girls**.

Source - *The Lancet* - [http://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(11\)61357-3/fulltext?rss=yes](http://www.thelancet.com/journals/lancet/article/PIIS0140-6736(11)61357-3/fulltext?rss=yes)

In 2012, this was reduced very slightly - 117.7 boys to each 100 girls.

[http://www.chinadaily.com.cn/china/2013-01/22/content\\_16156659.htm](http://www.chinadaily.com.cn/china/2013-01/22/content_16156659.htm)

In India, in 2011 the figure was the worst it had ever been - 914 girls for each 1000 boys. This equates to 109.4 boys to every 100 girls).

Source - <http://www.lifesitenews.com/news/indias-gender-imbalance-worst-in-recorded-history/>

## USA

In 2008, the US **National Academy of Sciences** published a report which found 'male-biased sex ratios' in some ethnic communities' which they attributed to sex selection.

Source: <http://www.pnas.org/content/105/15/5681.full>

**Abstract:** "We document male-biased sex ratios among U.S.-born children of Chinese, Korean, and Asian Indian parents in the 2000 U.S. Census. This male bias is particularly evident for third children: If there was no previous son, sons outnumbered daughters by 50%.... By contrast, the sex ratios of eldest and younger children with an older brother were both within the range of the biologically normal, as were White offspring sex ratios (irrespective of the elder siblings' sex). We interpret the found deviation in favor of sons to be evidence of sex selection, most likely at the prenatal stage. The ratio of male to female births exceeds the biological norm of 1.05 (1) in a number of Asian countries, notably India (2, 3), China (4, 5), and South Korea (6, 7). Availability of prenatal sex determination and induced abortion have been identified as important factors (3, 8), to the point of the former being (ineffectively) banned in India and China. Sex selection is no less controversial outside Asian countries, but so far there has been little evidence of prenatal diagnostics being used to that end (an exception being ref. 9).

We document male-biased sex ratios among U.S.-born children to Chinese, Koreans, and Asian Indians in the U.S. The male bias is particularly evident for higher parities, echoing patterns in the corresponding Asian countries (4, 6, 10). At third parity, sons outnumbered daughters 1.51:1 if there was no previous son. As a comparison, for India, the corresponding figure was found to be 1.39:1 in a recent large-scale survey (2) and 2.25:1 for China in the 1990 Census (3).

## Australia

There are no statistics kept in Australia of the reasons for abortions - perhaps with the exception of South Australia. Even there, there is no requirement to state it is for the purpose of 'sex selection'.

There is some evidence from doctors that sex selection abortions are occurring. One doctor in Melbourne was asked by a couple from a particular ethnic group for a referral for an abortion when the 19 week ultrasound showed that the baby was a girl. The couple already had a girl and didn't want another. The woman had the abortion at about 20 weeks. When the woman became pregnant again, the couple returned to the doctor, asking how soon they could find out the sex of the baby – with the intent of seeking an abortion if the child was the 'wrong' gender. The couple has now proceeded with this pregnancy. This case of 'sex selection abortion' has been referred by the doctor to the *Medical Board of Australia*.

## Medicare Funding

No statistics are available on the 'recourse to *Medicare* funded abortions to terminate female children' – just as there are no statistics available on the actual incidence of these abortions.

We encourage the Committee to investigate this further.

### **3. The use of Medicare funded gender-selection abortions for the purpose of 'family-balancing';**

There are no records on the reasons for *Medicare* payments for gender selection abortion. Thus there is no data on the use of *Medicare* funding for *Medicare* payments for gender selection abortions for family balancing.

#### **Occurrence of gender selection abortions for 'family balancing'**

There is one high profile case in Melbourne of a couple who aborted twin boys because they already had three sons and wanted a daughter.

They then sought permission for 'to select a female embryo' in IVF. Their application was rejected, because sex selection abortions are prohibited (except for genetic diseases). They then appealed to a Tribunal.

<http://www.news.com.au/national-news/desperate-couple-abort-twin-boys-in-desperate-bid-for-ivf-girl/story-e6frfkvr-1225983907853>

**Sydney** - a Sydney obstetrician called for sex selection for 'family balancing' in 2011.

<http://www.smh.com.au/national/when-parents-select-babys-sex-20111015-11q8b.html>

**UK** - British MPs are currently calling for monitoring of sex selection abortions and 'family balancing':

<http://prolife.org.nz/monitor-abortion-by-gender-to-protect-unborn-girls-say-uk-mps/>

Last year it was revealed that some doctors were carrying out abortions for 'gender selection'.

In addition, in the UK, "Earl Howe, the health minister, disclosed recently that Government analysis of birth figures showed that illegal "sex-selection abortion" could be taking place within some immigrant communities in the UK."

In January 2013, the *Telegraph* reported on the gender selection abortions, noting that there were significant differences in some ethnic communities in the UK.

They report, "officials found signs that birth rates for girls and boys vary noticeably according to where their mothers were born. A health minister said that these differences in rates of male and female births among mothers of certain nationalities may "fall outside the range considered possible without intervention". It forms the first official statistical evidence potentially backing up concerns that sex-selection abortions are being carried out in Britain. ..."

At <http://www.telegraph.co.uk/news/uknews/crime/9794577/The-abortion-of-unwanted-girls-taking-place-in-the-UK.html>

#### **Canada**

##### **Concern about immigrants using sex selection abortion**

A recent study has expressed concern about gender selection abortions in Canada being done in some ethnic immigrant communities.

See article at <http://www.torontosun.com/2012/04/17/immigrants-using-sex-selective-abortion>

## **Advertising sex determination ultrasounds**

An article in the Canadian *National Review of Medicine* in 2007 reported that sex selection abortion was done in Canada – citing an advertisement in newspapers targeting the Indian community in British Columbia by an ultrasound owner offering sex determination ultrasounds.

See [http://www.nationalreviewofmedicine.com/issue/2007/09\\_15/4\\_policy\\_politics02\\_15.html](http://www.nationalreviewofmedicine.com/issue/2007/09_15/4_policy_politics02_15.html)

## **Parliament Bill**

Last year, Canadian MP Mark Warawa put forward a Bill to oppose gender selection abortions.

<http://www.cbc.ca/news/politics/story/2012/12/05/pol-sex-selective-abortion-motion.html>

## **4. Support for campaigns by United Nations agencies to end the discriminatory practice of gender-selection through implementing disincentives for gender-selection abortions';**

A number of United Nations agencies have expressed grave concerns about sex selection or gender selection abortions:

a) The UN condemned sex selection abortion in a 2011 Report:

[http://whqlibdoc.who.int/publications/2011/9789241501460\\_eng.pdf](http://whqlibdoc.who.int/publications/2011/9789241501460_eng.pdf).

b) The UN estimates up to 200 million females are demographically missing worldwide:

<http://www.un.org/events/women/iwd/2007/factsfigures.shtml>.

c) A recent study by the **United Nations Population Fund** (UNFPA) revealed that in Albania 112 boys are born for every 100 girls, while in Kosovo and Montenegro the figures are 110 and 109 boys for every 100 girls respectively:

<http://www.unfpa.org/webdav/site/global/shared/documents/publications/2012/Sex%20Imbalances%20at%20Birth.%20PDF%20UNFPA%20APRO%20publication%202012.pdf>.

d) The **Council of Europe** in a November, 2011 resolution voiced its concern over the rising trend of prenatal gender selection: <http://www.telegraph.co.uk/health/9794577/The-abortion-of-unwanted-girls-taking-place-in-the-UK.html>.

In his speech, Senator Madigan said, "The enormity of this concern had been the subject of many discussions at the United Nations where five key agencies have joined in condemning the practice: Office of the High Commissioner for Human Rights (UNHCR), the UN Population Fund (UNFPA), the UN Children's Fund (UNICEF), the UN Entity for Gender Equality and the Empowerment of Women (UN Women) and the World Health Organization (WHO)."

These are affirmed in the Explanatory Memorandum.

## **5. Concern from medical associations in first world countries about the practice of gender-selection abortion, viz. Canada, USA, UK.**

We have divided this into two sections.

### **1. First world medical associations concern about sex selection abortion in India, China, etc.**

Two examples:

**British Medical Journal article about sex selection abortions in India**

<http://www.ncbi.nlm.nih.gov/pmc/articles/PMC1127035/>

### **Titled: Indian medical authorities act on antenatal sex selection**

*"The Indian Medical Association and the Medical Council of India have asked doctors to stop providing sex determination services and participating in selective abortion of female fetuses..."*

**b) Sex imbalance in China - The Lancet, Volume 378, Issue 9793, Page 742, 27 August 2011 - [http://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(11\)61357-3/fulltext?rss=yes](http://www.thelancet.com/journals/lancet/article/PIIS0140-6736(11)61357-3/fulltext?rss=yes)**

"The beginning of this **disturbing trend** coincided with the introduction of the one-child policy in the early 1980s, and ultrasound technology, which made reliable sex-selective abortion possible."

### **2. Positions of first world medical associations OPPOSING gender selection or sex selection abortion.**

These medical associations have made some statement opposing sex selection abortion, at least for gender selection of a child for social or cultural reasons or 'family balancing'.  
Links provide policy detail.

### **Australia**

#### **The Royal Australian and New Zealand College of Obstetricians**

- Expressed concern that use of 'gender test' kit could lead to sex selection abortions.

[http://www.nzherald.co.nz/nz/news/article.cfm?c\\_id=1&objectid=10577091](http://www.nzherald.co.nz/nz/news/article.cfm?c_id=1&objectid=10577091)

- Opposed the statements by a Sydney obstetrician calling for sex selection abortions for 'family balancing'.

<http://www.smh.com.au/national/when-parents-select-babys-sex-20111015-1lq8b.html>

#### **NHMRC**

- Guidelines for IVF prohibit gender selection for any reason other than genetic disease.

NHMRC ART GUIDELINES: "Sex selection (by whatever means) should not be undertaken except to reduce the risk of transmission of a serious genetic condition".

<http://www.nhmrc.gov.au/health-ethics/australian-health-ethics-committee-ahec/assisted-reproductive-technology-art/assisted->

#### **National Association of Specialist Obstetricians and Gynaecologists**

In their submission to this Inquiry, they state, in a survey of their councillors, "no-one was in favour of social gender selection". They proposed not revealing the sex of a child until 20 weeks as a way of preventing 'gender selection' abortions done for social reasons.

See submission 1.

### **USA**

#### **American College of Obstetricians and Gynecologists**

- Statement - Opposes sex selection for family planning [balancing or choice] purposes.

[http://www.acog.org/About\\_ACOG/News\\_Room/News\\_Releases/2007/ACOG\\_Opposes\\_Sex\\_Selection\\_for\\_Family\\_Planning\\_Purposes](http://www.acog.org/About_ACOG/News_Room/News_Releases/2007/ACOG_Opposes_Sex_Selection_for_Family_Planning_Purposes)

- Statement from Committee of Ethics
- *"...However, the committee opposes meeting requests for sex selection for personal and family reasons, including family balancing, because of the concern that such requests may ultimately support sexist practices."*

At

[http://www.acog.org/Resources\\_And\\_Publications/Committee\\_Opinions/Committee\\_on\\_Ethics/Sex\\_Selection](http://www.acog.org/Resources_And_Publications/Committee_Opinions/Committee_on_Ethics/Sex_Selection) .

### **American Association of Pro-life Obstetricians and Gynecologists**

Website - <http://www.aaplog.org/>

- oppose gender selection abortion. Expressed in the text relating to a Congress Bill.

<http://beta.congress.gov/bill/113th-congress/house-bill/447/text>

### **American Society of Reproductive Medicine (`ASRM')**

- oppose gender selection abortion, noting "central to the controversy of sex selection in the use of assisted reproductive technology (`ART") is the potential for `inherent gender discrimination", . . . the `risk of psychological harm to sex-selected offspring (i.e., by placing on them expectations that are too high)," . . . and `reinforcement of gender bias in society as a whole."

See <http://beta.congress.gov/bill/113th-congress/house-bill/447/text>

## **UK**

### **General Medical Council**

Gender selection abortion is illegal in the UK. Following three media reports of doctors performing gender selection abortion, the GMC warned doctors to '**Keep within the law**'.

"Abortions provided solely on grounds of the sex of the foetus are not legal in the UK. We have launched investigations into the fitness to practise of the doctors involved. We also want to remind all doctors that they must work within the law. . ."

See <http://www.gmc-uk.org/publications/12225.asp>

### **British Medical Association**

After noting it is illegal, and covering genetic diseases, the Ethics statement says, "The Association believes that it is normally unethical to terminate a pregnancy on the grounds of fetal sex alone except in cases of severe x-linked disorders."

See <http://bma.org.uk/practical-support-at-work/ethics/ethics-a-to-z> <http://bma.org.uk/practical-support-at-work/ethics/ethics-a-to-z>

## **Canada**

### **Canadian Medical Association**

The CMA Journal printed an editorial expressing concern about this issue, and concern that immigrant communities were actually doing gender selection abortions, and proposed that fetal sex not be disclosed until 30 weeks to reduce gender selection abortion.

See <http://news.nationalpost.com/2012/01/16/canada-is-haven-for-parents-seeking-sex-selective-abortion-medical-journal/>

## **Society of Obstetricians and Gynecologists of Canada**

Statement on gender selection abortion

<http://sogc.org/guidelines/statement-on-gender-selection-policy-statement-replaces-32-dec-1994/>

From a media article: "Dr. Michiel Van den Hof, who is a spokesman for the society and who is also a professor of fetal and maternal medicine in Halifax, says, "I would suggest a complete ban on 'entertainment ultrasounds'. That's going to take a government initiative and certainly that's one I would endorse." Van den Hof says his society's policy is clear, "**we do not at all condone sex selection by pregnancy termination. And we oppose it vehemently.**"

See <http://www.cbc.ca/news/canada/story/2012/06/13/ultrasounds-entertainment-ban.html>