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Dear Sir/Madam,

Thank you for the opportunity to respond to this inquiry.

I do not support the passage of the Health Insurance Amendment (Medicare Funding for Certain Types of Abortion) Bill 2013.

I strongly oppose the terminations of pregnancies specifically for cultural reasons, including sex selection. Sex selection abortion reflects gender inequality. We need legislation, guidelines and policies that support women's right to choose if they want children, how many children they will have and where, with whom and how they will be born. We must not pass legislation that impinges on the human rights of women.

My view is supported by law and guidelines, including the National Health and Medical Research Council's Ethical Guidelines on the Use of Assisted Reproductive Technology in clinical practice and research advice against sex selection for non-medical purposes. I question the assumption that sex selective abortion using Medicare is prevalent. There is no comprehensive evidence to suggest that sex selective abortion is occurring or that sex selection as a motivation for abortion, family balancing or other reasons is occurring.

The MBS items do not appear to be specific to abortion, and certainly not sex selection, and include references to miscarriage and foetal death. My involvement as a health consumer advocate has reinforced that my view that the MBS may be a reasonable base for subsidising health care for consumers but it is blunt instrument for health policy.

There are circumstances where testing has indicated the presence of a potentially fatal sex-linked genetic abnormality affecting only foetuses of one gender. I consider the use of Medicare funding for such procedures to be appropriate.

Access to safe and legal abortion is an essential health service for Australian women and an important reproductive health right. A woman's ability to control her own fertility is vital to the maintenance of her health and well-being. I am concerned that support for this legislation could undermine this.

If the Australian Government is concerned about addressing gender equality and the status of women, legislation to limit Medicare funding for certain types of abortion is not an effective way to achieve this, in my view. Action to support community education programs directed towards greater gender equity in those communities considered to be in need may be more appropriate and more effective.

I support the submissions to you made by the Public Health Association of Australia, National Foundation for Australian Women, Women's Health Victoria, Australian Medical Association, Women's Health West, and Reproductive Choice Australia.

Yours sincerely,

Shane Marsh