24th April 2013.

To the Secretary, Senate Finance and Public Administration Committee. Email <u>fpa.sen@aph.gov.au</u>

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

Dear Sir / Madam,

We wish to make a submission in **full support** of Senator John Madigan's proposed amendment to the Medicare Funding for Certain Types of Abortion Bill 2013.

In summary, we consider the idea of gender selection of children by killing the unborn of the other sex to be abhorrent. Not only does this practice place the creation and nurturing of children into the category of a "commodity" for prospective parents (like choosing the make and model of car), it is discriminating against one child on the grounds of its sex (usually the female), it pampers to the social and cultural demands by some sections of the community and it also adds unnecessarily to the medical costs of the nation.

In accordance with the terms of reference for this enquiry we offer the following comments for consideration by your Committee :-

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

We understand that "sex selection" is banned in Australia in IVF programs, except for the rare instances of possible genetic diseases. As it is not allowed for social and cultural reasons with IVF, then equally, it should not be allowed for an abortion.

Taxpayers should not have to fund "sex selection" abortions, any more than a citizen should expect the taxpayer to fund re-painting his house if it is the wrong colour.

Further, recent polls conducted in Australia (e.g. Galaxy in Tasmania in February 2013 and Southern Cross Bioethics in 2005) both overwhelming indicated that sex selection abortions are not morally acceptable. (Full details available if required.)

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.

Statistics from overseas indicate an alarming and growing imbalance in the ratios where sex selection abortions are practised. For example, in China, there is a huge gender imbalance. In 2012, this was 117.7 boys to each 100 girls. www.chinadaily.com.cn/china/2013-01/22/content_16156659.htm

In India in 2011, it was down to 914 girls for each 1000 boys. www.lifesitenews.com/news/indias-gender-imbalance-worst-in-recorded-history/

In Australia, there are no statistics kept of the reasons for abortions, so there is no requirement to state it is for the purpose of 'sex selection'. However, there is some evidence from doctors that sex selection abortions are occurring, and many individual cases are being reported.

In 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: www.pnas.org/content/105/15/5681.full

As there are no statistics available that Medicare Funding is being used in Australia funded abortions to terminate children of the unwanted sex, we would encourage the Committee to investigate this matter further. However, it is not un-reasonable to expect Australia to follow other countries in this area.

3. The use of Medicare funded gender-selection abortions for the purpose of familybalancing.

As stated previously, there are no records on the reasons for Medicare payments for abortions. However, there is a growing number of isolated instances being reported in Australia where gender selection abortions are being undertaken for 'family balancing' reasons.

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 '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. www.news.com.au/national-news/desperate-couple-abort-twin-boys-in-desperate-bid-for-ivf-girl/story-e6frfkvr-1225983907853UK

In Sydney, an obstetrician called for sex selection for 'family balancing' in 2011. www.smh.com.au/national/when-parents-select-babys-sex-20111015-11q8b.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 already expressed grave concerns about sex selection or sex selection abortions. These include :-

The UN condemned sex selection abortion in a 2011 Report: <u>http://whqlibdoc.who.int/publications/2011/9789241501460_eng.pdf</u>.

The UN estimates up to 200 million females are demographically missing worldwide: www.un.org/events/women/iwd/2007/factsfigures.shtml.

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. See

www.unfpa.org/webdav/site/global/shared/documents/publications/2012/Sex%20Imbalan ces%20at%20Birth.%20PDF%20UNFPA%20APRO%20publication%202012.pdf

The Council of Europe in a November, 2011 resolution voiced its concern over the rising trend of prenatal gender selection:

www.telegraph.co.uk/health/9794577/The-abortion-of-unwanted-girls-taking-place-in-the-UK.html.

Further, in a recent speech by Senator Madigan, he said: "The enormity of this concern had been the subject of many discussions at the United Nations where 5 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)."

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

There are 2 aspects to this issue :-

- 1. First world medical associations have indicated concern about sex selection abortions in India, China, etc. Two examples include:
 - a) British Medical Journal article about sex selection abortions in India. 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: "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. The positions of first world medical associations OPPOSING gender selection or sex selection abortion.

The following medical associations have made statements opposing sex selection abortions, at least for gender selection of a child for social or cultural reasons or 'family balancing'.

The Royal Australian and New Zealand College of Obstetricians have

- Expressed concern that use of 'gender test' kit could lead to sex selection abortions. See 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'. See <u>www.smh.com.au/national/when-parents-select-babys-sex-20111015-11q8b.html</u>

There are many other references available from Medical and Professional Associations representing Obstetricians and Gynecologists in other countries including Australia, USA, UK and Canada that describe their opposition to sex selection (or gender selection) abortions. (Further details can be provided if required.)

(End of submission.)

Thank you for the opportunity to make this submission. Yours faithfully,

Leighton and Diana Thew