

# YWCA Australia submission Standing Committee on Finance and Public Administration Legislation Committee April 2013

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

Thank you for the opportunity to provide comment on the Health Insurance Amendment (Medicare Funding for Certain Types of Abortion) Bill 2013 (**Bill**).

#### **About YWCA Australia**

YWCA Australia is the national association of YWCAs in Australia and is part of the World YWCA movement. We are a women-led organisation that achieves positive change by providing advocacy, programs and services for women, families and communities.

YWCAs undertake advocacy and deliver services and programs that develop the leadership and collective power of women and girls, support individuals, their families and communities at critical times, and promote gender equality and community strengthening.

### Introduction

Gender-based sex selection abortion reflects deeply entrenched gender discrimination against women and girls, where greater value is placed on sons than daughters. A 2010 United Nations Development Programme report<sup>1</sup> estimated sex-selective abortion and infanticide have resulted in 96 million 'missing' women in some Asian countries.

However, there is no clear evidence that gender-based sex selection abortion is occurring in Australia, or that Medicare is being used to fund such procedures. In our view, the Bill lacks an evidence-base and represents an ad-hoc approach to the issue of gender-based sex selection abortion.

We commend to the Committee the 2011 interagency statement by the Office of the High Commissioner for Refugees (OHCHR), the United Nations Population Fund (UNFPA), the United Nations Children's Fund (UNICEF), UN Women and the World Health Organization (WHO) called *Preventing gender-biased sex selection* (**interagency statement**). In our view, the interagency statement represents a best-practice human rights-based approach to this complex issue as it is based on obligations in international human rights treaties.

We draw your attention to the following points in the interagency statement:

"Governments in affected countries have undertaken a number of measures in an
attempt to halt increasing sex-ratio imbalances. Some have passed laws to restrict the
use of technology for sex-selection purposes and in some cases for sex-selective
abortion. These laws have largely had little effect in isolation from broader measures to

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<sup>&</sup>lt;sup>1</sup> United Nations Development Programme Asia-Pacific Human Development Report, *Power, Voice and Rights: A Turning Point for Gender Equality in Asia and the Pacific*, 2010, p.2, available athttp://hdr.undp.org/en/reports/regional/asiathepacific/RHDR-2010-AsiaPacific.pdf

address underlying social and gender inequalities" (p.V).

• In affected countries, these measures include "laws for more equitable patterns of inheritance, and measures such as direct subsidies at the time of a girl's birth, scholarship programmes, gender-based school quotas or financial incentives, or pension programmes for families with girls only" and advocacy and awareness-raising activities to raise awareness and to change people's mindsets and attitudes towards girls.

We are concerned that the Bill may threaten the sexual and reproductive health and rights of women as it may restrict access to a full range of sexual and reproductive health services, including safe abortion. In particular, the Bill may encourage discrimination against women from some South Asian, East Asian and Central Asian communities when seeking access to sexual and reproductive health services.

We recommend that the Health Insurance Amendment (Medicare Funding for Certain Types of Abortion) Bill should not be passed into law. Instead, we recommend further commitment to and investment in broader measures to address social and gender inequality, as well as advocacy and awareness raising activities in communities that may have a structural preference for sons.

#### More information

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