



# The Right to Life Australia Inc

24 April 2013

Standing Committee on Finance and Public Administration  
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Dear Committee,

I enclose the submission of The Right to Life Australia, in favour of the Health Insurance Amendment (Medicare funding for certain types of abortion) bill 2013.

Yours faithfully,

Dr. Katrina Haller, B.Sc. (Hons), M.Sc., Ph.D., LLB.

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## Submission to Standing Committee of Finance and Public Administration

Health Insurance Amendment (Medicare funding for certain types of abortion) bill 2013

By Dr Katrina Haller, B.Sc.(Hons), M.Sc., Ph.D., LLB.  
On behalf of The Right to Life Australia

***“Bearing in mind that, as indicated in the Declaration of the Rights of the Child, the child, by reason of his physical and mental immaturity, needs special safeguards and care, including appropriate legal protection, before as well as after birth,”***

### **- Preamble of the International Covenant on The Rights of the Child.**

The Right to Life Australia supports the Health Insurance Amendment (Medicare funding for certain types of abortion) bill 2013. The bill will stop medicare funding of abortions for sex-selective reasons. This is a step in providing protection for some unborn children in Australia.

Currently, Australia fails to provide “appropriate legal protection, before as well as after birth” for many of her unborn children, as some States have abortion on demand up to 16 or 24 weeks gestation and after that, up until birth if two doctors agree with socio-economic reasons. The Right to Life Australia wants legal protection for all unborn babies, and the removal of medicare funding of all abortions. Abortion currently discriminates against unborn children based on their age, stage of development, wantedness by a parent, disability and gender.

The Australian culture is one of equal opportunity and non-discrimination. Refusing to fund gendercide promotes equal opportunity and prevents discrimination based on gender. In a first world country like Australia, we are not faced with scenarios of a threats to a woman’s life if she continues her pregnancy, as our medical expertise and technology can care for both mother and child. The outstanding work at the Mercy Hospital in Heidelberg, Melbourne, evidences our cutting edge treatment of both mother and baby in the cases of difficult circumstances.

Abortions in Australia are elective and medicare funds need to be used for medical purposes -- saving a person’s life, or health, that is, bringing them from a state of pathology back to a state of physiological excellence. Abortion in Australia takes a healthy pregnant woman, kills her baby and in many cases harms the mother. It is a complete misuse of the health dollar. Besides destroying a human life, it creates medical problems, such as incompetent cervix, infection, infertility, suicidal behaviour, substance abuse, depression, anxiety and sometimes the death of the mother. Australia is using medicare money to create medical problems, and to do the opposite of what it should be doing – saving lives. It is a misuse of medicare funds to promote gendercide by funding it. We need to discourage gendercide to discourage discrimination based on gender, and to promote equal opportunity based on equality of gender.

Sex-selection should have no part in a medical care system. Gender is not a medical disease. Canadian Dr Rajendra Kale has called for parents not being told of the gender of their child as it is generally medically irrelevant, and it leads to the death of the child if she is not of the desired gender. Sex-selection treats babies as commodities, not respecting them as people. Killing females because they are females is the worst form of discrimination against females. The same can be said of males. In some cultures, “It’s a girl” is a death sentence. Gender is not an appropriate reason to kill someone, or to fund their killing.

## References

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