Submission to Senate Committee inquiry Health Legislation Amendment Bill 2005

11th October 2005

I am writing to voice my concerns regarding changes to the legislation that will enable the Health Minister to put conditions on Medicare funding.

If such legislation is passed it will give power to the Health Minister to say who gets funding for Medicare and funding for what.

Although I am concerned with <u>all</u> areas of health being subject to such unfair scrutiny and the notion of the Health Minister being able to choose who and who is not deserving of access to medicare funding. I wish to mainly voice concern over any changes that can and will adversely effects a woman's right to choose and have access to safe abortion and other reproductive services.

The main concern I have is that the current Heath Minister has made it very loud and clear that he is anti abortion and this is a topic that is high on his agenda as well as many other federal politicians, eg Ron Boswell, Steven Fielding, Barnaby Joyce, Santo Santoro.

Restricting access to abortion services for women through cutting medicare rebates forces women to continue unwanted pregnancies. Much has been researched and written about the impact of abortion denied and subsequent adverse consequence of women and children born under such circumstances. (Dr P.K. Dagg; "The Psychological Sequelae of Therapeutic Abortion- Denied and Completed" 1991).

By restricting access to abortion services as well as reproductive services such as IVF, certain consequences are very likely. It will allow a class system to dictate a vital part of women's health (choosing to parent or not). The rich and those who can afford services without medicare funding will be able to access abortion and/or IVF and those who are often more at risk and vulnerable, (those who live in poverty etc) will not.

It is also acknowledged worldwide and by the World Health Organisation that women will still attempt to access abortion services through any means including in unsafe ways and therefore place their health and lives at risk if access to legal and affordable services is not available. The decision to have an abortion is never made lightly or in a rushed or unconsidered way. It is indeed offensive and patronising to all women and supportive partners to think such a decision is ever easy and one that is given little or no thought. Restricting the funding will not reduce the need.

In respect to IVF, why should the Government or Health Minister dictate to women 'how many times' or 'only those who can afford it' should have access to assistance in trying to start a family or extend their families.

If such legislation is passed allowing this power over medicare funding, the whole notion of a woman's right to choose is most certainly at risk.

Brooke Calo