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The Secretary  
Senate Finance and Public Administration Committee  
Parliament House, Canberra, ACT 2600

**Submission to Inquiry into item 16525 in Part 3 of Schedule 1 to the Health Insurance (General Medical Services Table) Regulations 2007**

As you inquire into whether this Item which covers second trimester abortions should be disallowed, we would refer you to the results of a recent national opinion poll which is relevant to your deliberations.

The 52 page report on this market research is entitled ***What Australians Really Think About Abortion*** and can be found at [www.righttolife.asn.au/media\\_releases/20060205.pdf](http://www.righttolife.asn.au/media_releases/20060205.pdf)

The research shows that **78% of Australians oppose Medicare funding of late-term abortions** (past 20 weeks of pregnancy) and **67% are against Medicare funding after the first trimester (13 weeks)**. Only 14% support the current arrangements under which Medicare funds abortion until the end of the second trimester, i.e. 26 weeks of pregnancy.

This telephone survey of 1200 people conducted in 2005 by independent research company Market Facts on behalf of the Australian Federation of Right to Life Associations also shows that **51% of Australians are opposed to abortion performed for financial or social reasons at any stage of pregnancy** and 53% are against Medicare funding abortion in these circumstances.

Yet Medicare has paid \$1.8 million for more than 10,000 second trimester and late-term abortions over the past 14 years.

Although Medicare currently funds abortions to 26 weeks, 20 weeks is the earliest point at which survival outside the womb is possible with present technology. Australian taxpayers should not be paying for the killing of unborn children of the same age as premature infants in the intensive care nurseries of our hospitals.

The withdrawal of Medicare benefits for second trimester and late-term abortions would not affect any "medically necessary" operations which would invariably be done in public hospitals.

Many of the late-term abortions in Australian private clinics are performed using the partial birth abortion technique which was found by the US Congress in 2003 to be "a gruesome and inhumane procedure that is never medically necessary." The ban by Congress on this procedure was upheld by the US Supreme Court in 2006, yet Australian taxpayers are still paying for healthy and viable unborn children to be killed in this way.

We urge the Committee to respect the wishes of the vast majority of Australians and recommend the disallowance of Medicare funding of second trimester and late-term abortions and the simultaneous introduction of a new Item to cover legitimate instances in which a procedure was performed to induce delivery of an unborn child who had died naturally in the womb.

**ALAN BAKER**  
**President, Family Council of Queensland Inc.**