



LEGISLATIVE COUNCIL

The Honourable Greg Donnelly MLC

16th January 2020

Committee Secretary
Health, Communities, Disability Services and Domestic and Family Violence Prevention
Committee
Parliament House
George Street
BRISBANE QLD 4000

Dear Committee Secretary,

RE: Inquiry into the Health Legislation Amendment Bill 2019

Thank you for the opportunity to make a submission to the inquiry into the *Health Legislation Amendment Bill 2019*. Before proceeding with my submission, can I make the following point. It is my view that the timetable set down for making submissions to this important inquiry is completely unreasonable. The *Health Legislation Amendment Bill 2019* was only introduced into the Queensland Parliament on 28th November 2019. The Public Briefing to the Health, Communities, Disability Services and Domestic and Family Violence Prevention Committee took place on 9th December. Answers to Questions on Notice from the Public Briefing were returned on 16th December. Christmas Day fell nine days later and the truth of the matter is that many people are still on their Christmas/New Year's break. The citizens of Queensland have every reason to be suspicious of the very short return date for submissions to such an important inquiry. I wish to confirm with the Committee that a number of people have contacted me and informed me that they have only just become aware of the closing date and time of the inquiry. They have indicated to me that they would have wanted to have made a submission to the inquiry, but can not do so because of the unreasonable short deadline. In my view the Committee should give consideration to granting extensions to those who wish to make a submission.

Regarding my submission I wish to deal specifically with the issue of conversion therapy that is dealt with in Part 5, Clause 28 of the bill. As the Committee is no doubt aware the provisions, if passed by the Queensland Parliament, would make the state the first state or territory in Australia to outlaw conversion therapy.

The explanatory notes issued with the bill state on page 4 that:

“Conversion therapy is a term used to describe treatments and practices that attempt to change or suppress a person’s sexual orientation or gender identity.”

Under the proposal the *Public Health Act 2005* will be amended to incorporate a new Chapter 5B Conversion therapies. The proposed wording for the new Chapter 5B can be found on pages 15-20 of the bill. Matters worth noting about the proposed new Chapter 5B include:

- the definition of sexual orientation (page 16);
- the meaning of conversion therapy (page 16);
- the practices exempted from the meaning of conversion therapy (pages 16-17);
- the meaning of gender identity (page 17);
- the capturing of all health service providers (as defined by the *Health Ombudsman Act 2013*, section 8*) by the provisions (page 18); and
- a maximum penalty of 18 months imprisonment for a health service provider who is found guilty of an offence (page 18).

*** 8 Meaning of health service provider**

A **health service provider** is—

(a) an individual (a **health practitioner**) who is—

- (i) a health practitioner under the National Law; or
- (ii) another individual who provides a health service;

or

(b) an entity, other than an individual, who provides a health service (a **health service organisation**).

Examples of health service organisations—

- a corporation providing a health service at a private health facility under the *Private Health Facilities Act 1999*
- a Hospital and Health Service established under the *Hospital and Health Boards Act 2011*, section 17
- an ambulance service
- a medical, dental, pharmaceutical or physiotherapy practice

The matter I wish to specifically raise with the Committee is the potential impact of outlawing conversion therapy in so far as it relates to gender dysphoric children and adolescents. The incidence of children and adolescents undergoing treatment at the Queensland Children's Gender Service has skyrocketed in recent years. Attachment one is a copy of the response by Children's Health Queensland to a Right to Information (RTI) application I made in 2018. I specifically draw your attention to the figures in the first table found on page two of the response. The figures show that the number of children and adolescents, who are transgender or gender diverse, receiving treatment at the Queensland Children's Gender Service rose from 48 in 2014 to 207 in 2018; more than a fourfold increase. This is a most significant increase. In October last year I made a further application to obtain the figure for 2019. I have not yet received the figure, but am expecting it in the near future. The expectation is that there will be a further increase. I undertake to forward the information to the Committee when I receive it.

As the Committee would be aware there is growing public concern regarding the impact of gender dysphoria treatment programs on children and adolescents. The following link will take you to an article written by Professor Dianna Kenny dated 4th September 2019 <https://www.diannakenny.com.au/k-blog/item/12-children-and-young-people-seeking-and-obtaining-treatment-for-gender-dysphoria-in-australia-trends-by-state-over-time-2014-2018.html>. You will note the article includes information relating to Queensland that I have referred to above.

As further evidence of concerns regarding children and adolescents undertaking gender dysphoria treatment programs, I draw your attention to the following article written by Ryan T. Anderson and Robert P. George dated 8th December 2019 <https://www.thepublicdiscourse.com/2019/12/58839/>.

Under the proposed legislation health service providers who wish to work with and/or treat children and adolescents outside of the programs run at gender clinics potentially would be acting unlawfully. This is a matter of great concern. Accordingly, it is my submission that Part 5, Clause 28 of the bill should be deleted.

If you would like me to answer any questions or provide oral evidence at a hearing that may be scheduled as part of the inquiry, do not hesitate to contact me on (02) 9230 2280 or by email on greg.donnelly@parliament.nsw.gov.au.

Yours sincerely,

A handwritten signature in black ink, appearing to be 'G Donnelly', written in a cursive style.

Greg Donnelly MLC
Parliament of New South Wales



Your reference no:
Department reference no: 18/101

Children's Health Queensland
Hospital and Health Service

22 November 2018

Hon. Greg Donnelly
Parliament of New South Wales
Macquarie Street
SYDNEY NSW 2000

Email: greg.donnelly@parliament.nsw.gov.au

Dear Mr Donnelly

NOTICE OF DECISION AND REASONS – RTI ACT SECTION 54

I refer to the application made on under the *Right to Information Act 2009* (the RTI Act) which became compliant on 26 September 2018 seeking access to:

"Relevant information as per the attachment provided in relation to transgender and/or gender diver services."

Authority

In accordance with section 30(2) of the RTI Act, I am authorised to deal with the application.

Searches

Searches have been carried out within Children's Health Queensland and nil documents were located which fall within the terms of the application.

Post application document

In order to respond to your request a post application document has been created.

Charges

There are no processing or access charges payable in relation to the production and release of a post application document.

Review rights

An applicant does not have any review rights in relation to a post application document.

For further enquiries please contact this office on telephone number 3068 4842 quoting reference number **18/101**.

Yours sincerely

A handwritten signature in black ink that reads "Gemma Cox".

Gemma Cox

Manager, Health Information Access

Queensland Children's Gender Service

Right to Information application 18/101 – Parliament of New South Wales

1. How many children and adolescents, who are transgender or gender diverse, are receiving treatment at the Queensland Children's Gender Service?

Year	Number of clients
2018	207
2017	190
2016	84
2015	74
2014	48

2. How many children and adolescents, who are transgender or gender diverse, are receiving stage one puberty blocker treatment at the Queensland Children's Gender Service?

	2014	2015	2016	2017	2018
Spirolactone	0	0	0	2	0
Leuprorelin I.M	2	16	30	74	171

Note: these are figures based on Queensland Children's Hospital (QCH) Pharmacy Reports only. They do not represent young people that access medication outside of the QCH Pharmacy.

3. How many children and adolescents, who are transgender or gender diverse, are receiving stage two gender affirming hormone treatment at the Queensland Children's Gender Service?

	2014	2015	2016	2017	2018
Oestradiol	0	0	1	0	3*
Testosterone	0	2	2	0	30
Spirolactone					1

Note – these are figures based on QCH Pharmacy Reports only. They do not represent young people that access medication outside of the QCH Pharmacy.

*This will be an underrepresentation – particularly of Oestradiol as that is a script that many young transgender women do not get filled at the hospital.



4. How many employees including consultants (measured as full-time equivalents (FTEs)) work at the Queensland Children's Gender Service?

	FTE	
	2017	2018
Mental Health Clinicians (allied health)	0.6 FTE HP3 0.2 FTE HP3	1.8 FTE HP3 0.5 FTE HP4
Coordinator	1 FTE HP5	1 FTE HP5
Nursing	0	0.6 FTE CN (sexual health)
Exercise Physiology	0	0.2 FTE (Senior Physiology – mental health speciality)
Consultant Psychiatry	0.5 FTE	0.5 FTE
Psychiatric Registrar	0	0.5 FTE
Speech pathologist	0.5 FTE HP3	0.4 FTE HP3
Paediatric Endocrinologist	0.2 FTE	0.4 FTE
Administration	0.5FTE AO3	1 FTE AO3
Total FTE	3.5 FTE	6.9 FTE

Note: From 2014 – 2016, there were unfunded positions. Dr Stephen Stathis and Professor Jennifer Batch provided a Right of Private Practice (ROPP) clinic to patients once per month, with no funded FTEs.