



Speech by

LINDA LAVARCH

STATE MEMBER FOR KURWONGBAH

Hansard 12 November 1998

HEALTH AND OTHER LEGISLATION AMENDMENT BILL

Mrs LAVARCH (Kurwongbah—ALP) (5.02 p.m.): One of the key elements of the Health and Other Legislation Amendment Bill is the establishment of the Queensland Pap Smear Register. This is the aspect of the Bill I wish to address today, for it is a vital health initiative for women. Ninety per cent of the most common type of cervical cancer may be prevented if early cell changes are detected and, if necessary, treated. A Pap smear reduces the risk of developing cervical cancer by identifying abnormal changes in the cells of the cervix.

It is proposed to establish a Queensland Pap Smear Register, in accordance with the national cervical screening program, to create an essential database of Pap smear results. The register will contain information pertaining to the results of all Pap smears, normal and abnormal and, where relevant, the results of the related histology or other clinical management. It will also assist individual women by providing a back-up reminder service and ensuring that they are aware of recommended follow-up action if cervical abnormalities are detected. In this way it is anticipated that the incidence, morbidity and mortality associated with cancer of the cervix will be reduced.

The national cervical screening program was commenced seven years ago by the Commonwealth Government. As part of that program a national advisory committee was set up. That committee produces a handbook entitled *Screening For the Prevention of Cervical Cancer*, which is published regularly to provide health professionals with further information on improving the prevention of cervical cancer in Australia. There are some important statistics in the latest handbook which I will go through today, because I think it helps us to understand more about this disease.

Cancer of the cervix has now dropped to eighth on the list of cancers amongst Australian women, but still more than 1,000 new cases are identified each year. It is further reported that the lifetime probability—to age 75 years—of an Australian woman developing the disease is one in 101. Invasive cancer is virtually unknown in women under the age of 20 and is very rare before the age of 25. Between the ages of 25 and 39 there is a rapid increase in the incidence of invasive cancer. The peak in the incidence rate is reached in the early 60s. Three out of four women who develop cervical cancer did not have regular Pap smears or never had a Pap smear. We have all seen the recent advertising campaign which drives home to us that cancer of the cervix is one of the most preventable and curable of all cancers, so long as it is detected early.

A Pap smear is the procedure by which cancer of the cervix is detected. The Pap smear takes only a few minutes, but it may save your life, your mother's life, your sister's life or your spouse's life, although the reality is that many women do not have a regular Pap smear. I am honest enough to say that I often use the excuse that I am too busy.

The Pap Smear Register will operate as an opt-off register, which means that all women who have had a Pap smear will automatically be registered unless they specifically request that they not be. An opt-off register has been chosen because it has been demonstrated by experience in other jurisdictions that voluntary registration would not be high enough to achieve the intended purpose. Women will be able to opt off by advising their Pap smear provider at the time of their Pap smear that they do not wish to participate. Where a woman has opted off, laboratories and Pap smear providers will be required to ensure that no details relating to this woman are listed on the register. In addition, should a woman wish to have her records removed from the register, she will be able to do so by sending a written request to the chief executive of Queensland Health.

As this register will contain identifying and clinical information about individual women, the potential is created for infringement of the privacy of individual women and of the confidentiality with which that information is kept. This matter was raised by the Scrutiny of Legislation Committee in its Alert Digest No. 9, and the committee resolved to refer to Parliament the question of whether the Bill has sufficient regard to the right to privacy of women in relation to whom information is entered on the Pap Smear Register.

I am personally satisfied that sufficient regard has been had for the privacy and confidentiality of women and that there are sufficient safeguards built into the Pap Smear Register and into the legislation to limit the intrusion upon one's privacy. The legislation identifies clearly who can disclose confidential information about a woman on the register and imposes penalties for any breach of the disclosure. The penalty is significant; it is 50 penalty units. A woman can request her own screening history at any time by making a written request to the registrar.

Health practitioners, directors and nominated persons of pathology laboratories have a duty to keep confidential registered screening histories obtained from the register. Any breach of this confidentiality provision will result in a penalty. Under no circumstances should a woman's address be disclosed to a health practitioner or pathology laboratory. The intent of this is to minimise the risk of a threat to the privacy and personal safety of women who are on the register.

For the opt-off principle to be effective, it is essential that women are aware of the registry and of their right to opt off. Pap smear providers have a key role in informing women about the register when they have had a Pap smear. A comprehensive communication strategy will be implemented to introduce the register to women and to Pap smear providers. The strategy will include a mail-out of information to every household in Queensland and radio advertising, and information at the time in newspapers, professional journals and newsletters. The register will send women a letter when they are initially entered on to the register to inform them that they have been entered and that, if they choose to, they can have their records removed at any time.

The Explanatory Notes point out that the Pap Smear Register seeks the balance of the principal policy objective of maximising women's participation in the register with the need to accommodate concerns some women may have about privacy. The legislation achieves this objective by including statutory duties of confidentiality and penalties, as I outlined earlier.

Phase 2 of the State plan for the Queensland cervical screening program sets an optimal screening level of 85% of the eligible population of women. This will be a difficult goal to achieve, but the establishment of the Pap Smear Register will go a long way towards achieving that goal. It is my hope that we will no longer have to ask the question: when did you last have a Pap smear?
