



Speech by

**Jann Stuckey**

**MEMBER FOR CURRUMBIN**

Hansard Tuesday, 6 February 2007

---

## **PALM BEACH NEEDLE AND SYRINGE PROGRAM**

**Mrs STUCKEY** (Currumbin—Lib) (10.00 pm): Palm Beach residents have opposed a needle exchange facility for more than a decade. Since 1995, the Labor government gave the people of Queensland repeated assurances that the proposed community health centre would not include a needle and syringe supply program. Here we are in 2007 with residents once again fighting the battle against a needle and syringe program setting up in the middle of a thriving business precinct and improved residential dwellings.

On 16 June 1995 the then member for Currumbin, Merri Rose, asked the then Minister for Health, Jim Elder—

... can he inform the House whether the community health centre soon to be opened at Palm Beach will have a needle exchange program?

Mr Elder replied—

The short answer to that question is that the Palm Beach community health centre will not have a needle exchange unit.

Mr Elder went on to state—

... it is an outrageous lie to say that the Government will be putting a needle exchange unit in that centre.

I would like to state clearly that neither me nor the Palm Beach Action Group, which formed to protest the location of the facility in Fifth Avenue, Palm Beach, have taken a moral stand on this issue. The key objection is that the community health centre is an inappropriate location for this service due to its proximity to residences, businesses, parks and beach.

In December 2006 this action group and I met with Queensland Health officials who answered our questions in a polite and straightforward manner. Probably the biggest shock was to be told that of course IV users were not encouraged to bring back used equipment as they would be 'dirty'. This makes a mockery of the term 'needle exchange', which was used when these programs were first started. I imagine that the majority of the population would be of the belief that there was some onus on users to bring back their used needles to be exchanged for clean ones. Somewhere along the way the lines have blurred and we have needle supplies in place of needle exchanges. Has the general public been duped into believing that this program is a true needle exchange when, obviously, it is not?

Needle and syringe programs were conceived as a harm minimisation strategy designed to provide sterile injecting equipment for people who inject drugs. What we see happening today has become marginalised and diluted, bearing very little resemblance to the original program. Governments have a duty of care to the entire community and have an obligation to place everyone's safety on the same level. Of particular concern is the disposal of dirty, used needles by IV users into regular waste bins. It is grossly irresponsible of Queensland Health to not only permit this practice but also encourage it by not making an effort to get back used needles.

GPs cannot throw their sharps containers into the ordinary rubbish. They would be sued for doing so. They have to pay an approved waste disposer to collect them and dispose of them properly by incineration. Monitoring of needle and syringe programs is critical. It is timely at the 20-year mark of the

implementation of needle and syringe programs to review the effectiveness of the project and to ensure that every effort is being made to not only minimise infection but also rehabilitate IV users. By doing so, public confidence would rise and communities would be more accepting of these programs if they were told the truth and felt secure that every effort was being made to follow the original intent of the program.