



Speech by

Robert Messenger

MEMBER FOR BURNETT

Hansard Thursday, 24 May 2007

HEALTH AND OTHER LEGISLATION AMENDMENT BILL

Mr MESSENGER (Burnett—NPA) (3.59 pm): In speaking to the Health and Other Legislation Amendment Bill, I continue by reading a letter from a constituent, Ted Brown, who was a patient at the Bundaberg Base Hospital. He writes to the coastal rag—

Friday being my pension day, I planned on a different day out in lieu of bingo at the Tavern. I started by watching Gene Kelly in 'Singing in the Rain' on TV. Then whistling and singing down the hill from home I went to the Westpac agency to pay my rent.

There I collapsed near the counter, hitting my head, elbow and knees on the way down. Apparently I had no pulse for 30 seconds, had vomited, and was close to death.

However an Irishman named John, happened to be nearby at the time. He gave me CPR and revived me. He was a doctor on holidays passing through to Victoria to take up locum duties. How lucky was that!

I came to see a beautiful young woman peering down at me saying "You will be alright now." I asked her if she was an angel and if so was this heaven? Then I became aware of all the faces around me and knew I was being foolish.

I owe my deepest thanks to many people, but those that I can recall are Dr John and his wife 'the angel', Dallas Honey, Ambo Ryan, Annie Lightfoot, Gwen Sims, my neighbour and friend Peter Nairn, Josie Meng, Lyn and the Baptist Church and Trish Davison.

I cannot speak too highly of the staff at Bundaberg Hospital and my fellow patients in ward 10, medical. Mark Peters in a bed opposite mine kept me in stitches with his jokes and life experiences, hope you all have a speedy recovery.

Finally if I had taken my usual Friday track from home to the Tavern for a game of bingo and had collapsed in the bush, the ants and birds would have had a meal off me.

Thank God for Friday!

Coincidentally, it was Friday 13th. I share with members that good news story from the Bundaberg Base Hospital.

I congratulate the minister on the appointment of the new CEO, Pattie Scott. I have had a number of meetings with Pattie and she is a very dedicated and affable lady who works very hard for the community of Bundaberg. I believe that she was recently a manager at Gympie.

Massive pressures are being placed on healthcare workers, nurses and doctors at the Bundaberg Base Hospital. The nursing staff and doctors work very hard, but once again I know that they are under pressure. Now is the time to start planning for the healthcare needs of Bundaberg and Burnett residents. There are a number of pressures there.

At the Bundaberg Hospital, as in most hospitals in Queensland, we have a lot of access block. There is a long waiting time between accident and emergency and being admitted to the wards proper. Medical and surgical wards are often operating at around 95 to 99 or even 100 per cent capacity. That places pressure on all staff to get patients out of beds. I know that the paediatrics ward is often shared by adults. That is a less than ideal situation. As I have mentioned before, we really need to plan for an increase in paid bed numbers and the appropriate staff to look after those beds.

At the moment, the Bundaberg Hospital services the whole of the Wide Bay-Burnett area. Five towns from the western areas have been added into the service area. About 120,000 people are serviced by the Bundaberg Base Hospital. That number will grow to close to 200,000 by 2015. We are experiencing phenomenal growth along the Burnett coast and the inland area. Apparently, part of the reason for that

growth is the location of Paradise Dam, because a lot of developers are saying that it provides an assured water supply.

Mr Robertson: Who built that dam?

Mr MESSENGER: I will take that interjection from the minister. I think he will find that it was the coalition government which promised to build the dam and then—

Mr ROBERTSON: I rise to a point of order. With respect, as important as service planning is with respect to the Bundaberg Hospital, I question the relevance of this to the particular legislation that is before the parliament.

Madam DEPUTY SPEAKER (Ms Darling): I am sure that the member for Burnett was getting back to the point of the legislation.

Mr MESSENGER: Yes. I am sure that bed numbers do count in this debate. I merely note that in 1989 we had 216 hospital beds. This year we had 120 beds and I think that has been increased with the addition of the mental health unit, so it must be around 133 beds. There has been a decrease in bed numbers and an increase in population numbers. That is one of the fundamental reasons for the healthcare problems that we have experienced.

This legislation refers to tobacco and other smoking products, and banning the sale of ice pipes. One aspect of the amendments proposed by the Health and Other Legislation Amendment Bill 2007 that I wish to discuss is the amendment to the Tobacco and Other Smoking Products Act to prohibit the sale, commercial display and supply of ice pipes and their component parts.

Proposed new section 26ZPA(1) states—

A person must not—

- (a) sell an ice pipe or a component of an ice pipe; or
- (b) supply an ice pipe, or a component of an ice pipe, as part of a business activity; or
- (c) display an ice pipe...

It is disturbing that the drug utensils used to smoke this highly dangerous drug are easily accessible in Queensland, despite the fact that the possession or supply of the drug is illegal.

The concept of banning the sale of ice pipes is not new. Victoria, New South Wales and South Australia already have in place laws where retailers face hefty fines and even jail for selling the pipes. I wholeheartedly commend this aspect of the legislation. It is time that we follow suit. I also recognise the shadow minister's passion when it comes to this ban and I congratulate him.

A very real problem in the Bundaberg community is the escalating spread of the drug ice, which is being used by our children, especially the homeless kids. It has been estimated that, on any one night in the Bundaberg-Burnett region, there are about 50 children sleeping rough. The Bundaberg *News Mail* dedicated a number of its editorials to the problem in order to alert the community to the endemic problem. Bundaberg Drug Arm worker Jodie Wein highlighted the increasing problem in Bundaberg *News Mail* on 24 February, stating that she has seen directly the devastating effect of ice during her street Outreach runs. She stated—

They are using ice—it's really big. I've seen self-harming from it, they've lost control of reality and they're not in this world anymore. I probably see a lot more on ice self harming than you think, around four to five times a fortnight at least—and that's just the ones we see.

I was shocked to read Mrs Wein's claim that children as young as 10 years old were using the drug. Mrs Wein said—

I see 10 to 16 years olds on it, its really popular for street kids because its affordable for them... The kids don't have much to do around town.

Another Drug Arm street Outreach worker, Damien Santalucia, backed up the argument, saying that there are increasing signs that pure methamphetamine is in Bundaberg streets. We all have to unite together to fight this problem.

Last month, Prime Minister John Howard announced funding of \$150 million over four years to tackle this ice epidemic. He is funding new law enforcement initiatives, drug and alcohol rehabilitation, and education programs.

I would like to see the government take a proactive stance to fund Life Education. That was an initiative that the conservative government introduced, but this government has failed to fund Life Education. It is an excellent program. It is the nearest thing we have that can possibly drug proof a child. I attended a graduation class of Life Education and watched 12-year-old boys in year 7 line up to hug Harold the hand puppet. At that point, I realised just how powerful the message was.

The Queensland Parliamentary Library research paper titled *Ice pipes: Prohibition on sale, supply and display* under the Health and Other Legislation Amendment Bill research brief collated a number of statistics on methamphetamine use in Australia which are worth noting. Almost one in 10 Australians, or 9.1 per cent, have tried methamphetamine at least once, and around 500,000 said that they have used it in the past year. Those figures are very difficult to comprehend. Once again, they show our utter failure to combat this problem, starting in our schools.

At this point, I would say that we do not know how big the problem is in our schools. As far as I know, there have been no definitive studies on drug use in Queensland schools although I think there has been a national report, so the challenge for this government is to commission a study on drug use in our schools. It is getting past the time where we can sit on our hands and do nothing.

Most current users take the drug infrequently. However, there are an estimated 73,000 dependent methamphetamine users in Australia, compared with the estimated 45,000 regular heroin users who typically inject or smoke the drug. There are currently about 50 deaths annually in Australia attributed directly to psychostimulant drug use, including methamphetamines. Methamphetamines are generally taken in a home environment with friends or acquaintances, and generally by smoking and passing a pipe between persons. The most regular methamphetamine users also use a variety of other drugs, such as cannabis, other synthetic stimulants and heroin. Most methamphetamine users can afford their drug use, spending around \$50 to \$100 per week. However, higher levels of crime are associated with regular users who may, for example, sell drugs to support their habit.

The Queensland drug council recently described south-east Queensland's amphetamine problem in particular as the worst in the world. I know we on this side of the chamber have highlighted this issue many times. In fact, the minister this morning in her ministerial statement quoted figures from the Australian Crime Commission report which came out a couple of weeks ago. That report was interesting reading. Basically, half the illicit drug labs that were discovered in Australia were found in Queensland, and about 41 per cent of all drug users and dealers who were arrested were in Queensland. When that figure is broken down more specifically, we find that around 30 per cent of all methamphetamine users and dealers arrested in Australia were arrested in Queensland.

I was enlightened on the subject a little bit more when I attended a community meeting and demonstration by Marty Nicholson from the Queensland Drug Squad. Marty, and I believe his sergeant, whose name escapes me at the moment, for which I apologise, gave a demonstration and PowerPoint presentation on the dangers of ice. What struck me was just how easy this drug is to manufacture. It can be manufactured in a matter of literally hours and it can be done in a sink. Apparently a Gympie chappie was the one who revolutionised the making of ice. That gentleman is dead, but he created what was known as the box lab. He sold box labs and lessons on how to manufacture these drugs for \$10,000 a hit. That brought about an explosion in the number of labs that were found in Queensland and Australia.

The CMC has also released a report on amphetamines, and it once again paints a very grim picture. How does this affect our mental health? With this drug and the purities they are dealing with now, there is no second chance. If you experiment with this drug, you could suffer instant psychoses, instant addiction or maybe both.

Mrs Sullivan: Is this relevant?

Mr MESSENGER: I take the interjection from the Labor backbenchers wondering whether ice is actually relevant to a bill that is talking about the banning of ice pipes. Their babble has all the eloquence, clarity and diction of a whacky whistle at the Bundaberg sideshow. It means absolutely nothing.

Why is mental health so important? In 2003, 2,213 Australians committed suicide. The male suicide rate is 17.7 deaths per 100,000 population. It is much higher than the female rate of 4.7 deaths per 100,000 population. Suicide rates tend to be lower in the capital cities—at 10.5 per cent per 100,000 population, compared to 12.3 per 100,000 population in the rest of Australia. Between 1993 and 2003, suicide rates in Queensland and the Northern Territory were consistently above the national average.

The first workers who visited me when I was elected were mental health workers. They were concerned about the wellbeing and health of their patients. I would like to sincerely express my thanks once again to the Bundaberg Base Hospital District Health Manager, Patti Scott, the acting service director of the Bundaberg mental health unit, Mr Graham Mahaffey, and staff for providing me with a comprehensive briefing of the mental health unit on Thursday, 3 May 2007. I appreciated the opportunity to tour the recently reopened mental health unit and the chance to put forward my concerns.

It was a very dark day for this health minister when he closed that mental health unit down, and I am very appreciative of the fact—as is the rest of my community—that he now has it open and running very smoothly. When I first visited the mental health unit in 2004, it had a bed capacity of about 16 and there were three people there. I found that unusual. We now have a bed capacity of about 12, and it is pretty well full. It does not take the violent people suffering from mental illnesses; they are transferred. This highlights to me the need for a functioning and viable mental health unit for our communities. So many families were

put out of sorts and suffered a lot of grief while that unit was closed. We are very appreciative of the fact that it is now open.

I believe there needs to be in our community a mechanism for involuntary admission for detox purposes. That is something that I will focus on in the remainder of my time in this parliament.

Time expired.