




Speech by

Jo-Ann Miller

MEMBER FOR BUNDAMBA

Hansard Tuesday, 21 August 2012

BREASTSCREEN QUEENSLAND

 **Mrs MILLER** (Bundamba—ALP) (12.18 pm): Cancer is not a word that most of us want to hear. As a diagnosis, it strikes terror into our hearts—for us, our family and our friends. Cancer is a complex set of diseases. Currently, cancer places the largest, and a growing, burden of disease on patients, families and the health system in Australia. More than 100,000 new cases are diagnosed every year and there are more than 30,000 preventable cancer related deaths every year. Cancer is potentially one of the most preventable and treatable of all diseases. Risk factors include tobacco consumption, poor diet, insufficient physical activity, being overweight or obese, alcohol misuse, infectious diseases and an exposure to ultraviolet radiation.

As a nation, we have made significant strides in reducing the incidence of lung cancer by containing the epidemic of tobacco smoking through successful public health strategies, of which plain paper packaging is only the latest. Here in Queensland, our medical research heroes have achieved world renown, with the development of a vaccine for cervical cancer, Gardasil, which can prevent the human papilloma virus in both girls and boys. Population screening helps protect the health of Australians through early detection, even if symptoms of the disease are not present. Some screening programs can also help to prevent cancer developing if changes can be found before they become a cancer. Population screening programs for breast, cervical and bowel cancers have achieved major successes across Australia, saving tens of thousands of lives. These programs have been so successful that most women now think of pap smears every two years as being a normal part of staying healthy.

Breast cancer screening programs across Australia, including those delivered by BreastScreen Queensland, are recognised as one of the most comprehensive population based screening programs in the world. They provide free mammograms to women in the target group of 50 to 69 years. Women aged 40 to 49 and over 70 years are also eligible to attend. There are two components within the BreastScreen Australia program: screening and assessment services, where mammograms aid diagnosis, and the coordination units at state and territory levels. BreastScreen Australia states—

The Co-ordination Units do the planning and overall co-ordination of the program in each state and territory and play a large role in the recruitment of women.

The state and territory governments have primary responsibility for the implementation of the program at their local level.

Recently, this LNP Newman government announced changes to the operation of BreastScreen Queensland—changes that the opposition believes will be detrimental to the program's operation and, therefore, to the health of Queensland women. We know that nearly two-thirds of the staff of the Queensland cancer screening coordination unit will be axed. That is right: they will be sacked. After nearly 20 years of service to the people of this state, the senior director of our cancer screening services has resigned in disgust, and what a loss to Queensland she is. On behalf of the opposition and the women of Queensland, I want to thank Jennifer Muller for her service to BreastScreen Queensland and I want to thank her and her team at BreastScreen Queensland for the work that they have done. I had the pleasure of working with Jennifer Muller when I was a parliamentary secretary for health and she and her team did an excellent job whilst we were in government.

Health minister Springborg claims that these cuts will not affect the delivery of breast cancer screening. Clearly, others do not agree with his assessment, including the CEO of Cancer Council Queensland, Professor Jeff Dunn, and also the readers of the *Sunday Mail*. As a client of the BreastScreen Queensland Ipswich service myself, I share the concerns of many women and clinicians. This is what I want to know. These are the questions that I want them to answer. How will 16 separate hospital and health services ensure state-wide contact and follow-up with women due for a mammogram? How will these local services recruit, train and retain and provide relief for the specialist radiographers needed by BreastScreen Queensland? Will those local services retain the national standards required for accreditation? Which hospital services will get access to the limited number of mobile screening vans and which will not? Who will now represent Queensland on national cancer issues to advocate on our behalf?

The Premier and the health minister will go down in the history of this state for their infamy as the wreckers of two decades of careful, sustained work to build world-class cancer treatment and prevention programs in this state. Shame, Newman, shame!

(Time expired)