



## Speech By Ros Bates

## **MEMBER FOR MUDGEERABA**

Record of Proceedings, 12 February 2014

## PUBLIC HEALTH (EXCLUSION OF UNVACCINATED CHILDREN FROM CHILD CARE) AMENDMENT BILL

Ms BATES (Mudgeeraba—LNP) (8.15 pm): I rise to speak against the Public Health (Exclusion of Unvaccinated Children from Child Care) Amendment Bill 2013. Ensuring that our children are adequately protected from preventable diseases through vaccination is an important duty and a responsibility that parents throughout Queensland should take very seriously. However, this duty is with the parents. I believe that there is a place for the government to encourage parents to ensure that their children are vaccinated for their own children's benefit and for the benefit of other children whose parents have not yet had the opportunity to make that choice. But that must be balanced with parental rights.

At this point, I should take the opportunity to put on the record my absolute belief that vaccination saves lives and prevents lasting health problems and is the most cost-effective way of doing so. No doubt, the member for Bundamba will attempt to brand the LNP with the title of 'vaccination deniers' or some other such ridiculous label. I note that the member for Bundamba has already attacked me personally in the *Gold Coast Sun*, claiming that my opposition to this bill is entirely political and that government members have acted arrogantly by refusing to support this bill. Political point-scoring is not what our opposition to this bill is about. It is about ensuring that when the parliament looks to legislate to raise the levels of children vaccinated in Queensland at the appropriate times in line with the national immunisation program schedule we do so in a way that takes into account parental rights and the full consideration of opposing views, no matter how poorly placed sometimes those views may be. It is also about ensuring that any such legislation is fully developed and takes into account potential unintended consequences.

We were promised proposed amendments that would address some of these issues, but I doubt that they were forthcoming. They may be and the—

Mrs Miller interjected.

**Ms BATES:** The shadow minister might address those issues and the shadow minister will get her chance to reply.

Mrs Miller: I will.

**Ms BATES:** But at the moment they are not forthcoming. Many of the concerns regarding vaccination in the community stem from a report that sought to link the measles, mumps and rubella vaccine with autism. The report has been roundly discredited and the paper's findings have been unable to be reproduced. This information is easy to find and I urge all parents who are in any doubt to investigate for themselves overwhelmingly that there are no conclusive links that have been found between autism and vaccination.

Some may argue, and have done so, that there may be unknown risks to vaccination. It is true that medicine is always discovering new information and there is still much that we do not know about the human body and how it works. But there are things that we do know and we know conclusively, and this knowledge includes the dangers of diseases that we know and how to prevent them through vaccination. Those parents who decide that they are making an informed decision when deciding not to vaccinate their children are by definition, if they are truly informed, making a decision to expose their children and the children of others to diseases that we know how to prevent. We know that diseases can kill. We know that diseases can incapacitate. Diseases can also limit a child's potential.

During the inquiry by the Health and Community Services Committee we received submissions from members of the public, many passing on anecdotal evidence about their own families—people saying, 'My kids weren't vaccinated and they are healthier than other kids I know who were.' Of course, this statement ignores the fact that these children are benefiting from the vaccination of others and that, thanks to a thorough and effective vaccination program in Australia over many years, we have stamped out the spread of many of the diseases for which we vaccinate.

However, if the actions of the few parents who refuse to vaccinate their children become more common we may well find that these advances are undone. Of course, some children who are not vaccinated will not necessarily contract diseases simply because they are not vaccinated. It is a question of risk. If there is a question of weighing up the risks, the question is between knowingly exposing our children to known and significant risks and exposing our children to unknown risks consisting purely of speculation and innuendo. There is only one responsible decision to make in regard to vaccination and that is to vaccinate. As the Health and Community Services Committee's report on this bill states, the committee believes that the parliament should consider supporting any future bill that would encourage parents to ensure that children are appropriately vaccinated on entry to child care. However, it also states that any such legislation should include provision for medical exemption and informed conscientious objection. This must include an emphasis on immunisation education for parents.

I am sure that there are many in this House who are about my age who had young kids when there were no vaccinations for certain communicable diseases. My kids, for instance, were born 27 years ago. I used to send my kids off to people's houses whose kids had chicken pox and measles so that they actually got the diseases so that they developed antibodies for them. I did raise with the member for Bundamba in the public hearing that there are a lot of kids who are actually exposed to communicable diseases who then develop their own antibodies but may not necessarily ever have had a vaccination or have a certificate to say they were vaccinated. My concern was that if you thought your child had been susceptible and exposed to rubella or to chicken pox and would have developed their own antibodies, the only way under this legislation for those children to be admitted into a child-care centre would be for the parents to undergo expensive blood tests to see whether their children had developed these antibodies. I think that this is a concern.

Another issue that I raised during the public hearings was that there are many people who put their children in child-care centres at a very young age. Some kids in child-care centres are four weeks of age. They would not necessarily have been able to have availed themselves of a vaccination at such a young age because that is not the schedule for them. Those kids under this legislation may well be exempt from going into a child-care centre. The other issue that I discussed was that you can physically isolate a non-vaccinated child from a baby, but that is only isolating one kid from another kid; it is not isolating them from their own siblings and it is not isolating them from diseases that the child-care centre staff may have. I feel that they were very valid concerns that I raised.

I believe that, with the implementation of a comprehensive education program where the facts are laid out in a way that it is not skewed by the emotional individual pushing the anti-vaccination barrow but is uncomplicated and balanced, parents would be led overwhelmingly to one decision. Again, that decision is theirs. Parents have a right to be part of the decision surrounding their own child's health care. When a government bends the arm of the public, the public often quite rightly push back. We would undoubtedly see broad mobilisation of the anti-vaccination campaigners and potentially create a greater problem than otherwise exists today. I recalled and mentioned during the public hearings that one of my areas of training was in the paediatric unit. It was at a stage where there was a scaremongering campaign about vaccinating kids against pertussis. We had an outbreak of pertussis in little babies. I am talking about babies who had been home for only one or two weeks. They were coming into the hospital and they almost died in our arms. It was pretty awful for a student

nurse to deal with. As I said, it is a decision for the parents. Fear is a powerful emotion, especially for the majority of parents who have an in-built compulsion to protect their children above all else. The anti-immunisation campaigners know it and utilise this knowledge to push their message. The anti-vaccination crusaders are in the minority—a vocal minority, but a minority nonetheless. There is little benefit to elevating them to a stage where they have an opportunity to put fear and doubt into the minds of Queensland parents through the media in response to the introduction of this legislation. We can win this battle of the hearts and minds of parents through communicating with them in a way that allows them to make their own conclusions. I have great faith in the ability of Queensland parents to make the right choice with the right information and the right guidance.

In addition, this bill effectively punishes the child for the actions of their parents. We in this place have a responsibility to not actively marginalise children from the broader community on the actions of their parents. This bill serves to do such a thing by excluding from mainstream child care children whose parents have not immunised them. This is not an outcome that we should be aiming for. Legislation such as this, which has a broad potential to have negative impacts, should be better developed than the bill we are considering today.

The New South Wales legislation includes the ability for certificates to be presented outlining previously contracted diseases that would exclude a child from acquiring immunisation against a particular disease. As discussed in the public hearing, this is not taking into account potential misdiagnosis of diseases and, with all due respect to the member for Gaven, many children who present with coryza—runny nose—can have rashes and communicable diseases which should not prevent them from child-care centres in Queensland.