



Speech By
Hon. Cameron Dick

MEMBER FOR WOODRIDGE

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**TOBACCO AND OTHER SMOKING PRODUCTS (SMOKE-FREE PLACES)
AMENDMENT BILL; TOBACCO AND OTHER SMOKING PRODUCTS
(EXTENSION OF SMOKING BANS) AMENDMENT BILL**

 **Hon. CR DICK** (Woodridge—ALP) (Minister for Health and Minister for Ambulance Services) (8.19 pm), in reply: I thank all of those members who have taken the opportunity to put forward their support for stronger tobacco laws. I particularly thank those members who shared their personal experiences of the harmful impacts of smoking, whether based on their experiences having worked as healthcare professionals or simply as individuals who have witnessed firsthand the often devastating effects of a cigarette habit, perhaps because they have smoked or have family members who have smoked.

The stories recounted by the members for Bulimba and Moggill, who have treated patients with smoking related diseases and addiction, were particularly poignant, as were those recounted by the members for Thuringowa and you, Mr Deputy Speaker Crawford. As former paramedics, both the member for Thuringowa and you have seen the effects of advanced lung disease and smoking related illnesses. Both you and the member for Thuringowa were able to illustrate for the House the debilitating consequences a smoking habit has for far too many Queenslanders.

I also wish to acknowledge the contribution of the member for Stafford and my ministerial colleague the Minister for State Development and Minister for Natural Resources and Mines. It was informative to listen to the member for Stafford talk from his clinical experience—obviously as a maxillofacial surgeon he did not deal directly with the consequences of smoking, being a trauma surgeon—about the very severe impacts on the head, face and neck that smoking can cause.

We also heard tonight from many members who have sadly lost loved ones to the harms of smoking. That was a common theme throughout the second reading debate—the number of members of this House who have had experience of a close family member or friend having been seriously harmed by smoking or having lost their life due to an addiction to smoking. I acknowledge and thank those members for sharing their experience, particularly of the passing of a very close family member such as a parent. All of us in our own lives have faced, I am certain, one of those experiences along the way.

The examples we have heard tonight reinforce the importance of our shared commitment to introduce new measures to curb smoking and to pass this important legislation. It is my sincere hope, as Queensland's Minister for Health, that smoking related illness and death will become a thing of the past. Enacting this bill is an important step towards realising this goal. Since 1998 Queensland has been a leader in enacting strong tobacco laws to protect the community. I am pleased to see the continued support from both sides of the House for this next step in strengthening Queensland's tobacco laws.

We have heard many alarming statistics today about the impact of smoking, both for smokers and for those exposed to second-hand smoke. Thankfully, we are making a difference. The phased introduction of smoking bans and other strategies in Queensland during the period between 2001 and 2014 contributed to reducing smoking rates by 30 per cent. As the member for Mackay has reminded us, it was not that long ago that we were smoking in restaurants and bars. While concerns were expressed before the laws were introduced, these smoking bans were quickly adopted by industry and the community and are now completely accepted across the state. But we must not be complacent. In 2013, national survey results showed that the rate of daily smoking in Queensland was about 18 per cent higher than the national rate.

As we know, smoking habits are often developed during formative teenage years. The Cancer Council Queensland reports that young people who start smoking have their first full cigarette before they are 16 years old. The health risk from smoking commences as soon as a smoker takes up the habit and increases the longer they smoke. That is why this bill focuses on children and young people—something I am particularly proud of. Young people are more likely to see smoking as desirable when they frequently see other people smoking including, as the member for Waterford pointed out, celebrities on television and in motion pictures.

It is critical that we reduce the normalcy of smoking by reducing smoking in those public places frequented by children and young people. I share the member for Springwood's desire that our youngest children do not grow up seeing smoking as popular or normal. I would like to wish the member's daughter a very happy birthday. One of the challenges for all of us who serve in this parliament is that, due to our responsibilities here, there are many occasions on which we do not have the opportunity to share special occasions with our families. I do wish the member for Springwood's daughter a very happy birthday.

The bill will reduce the normalcy of smoking for young people by banning smoking at and near skate parks, at local government owned and operated swimming pools and at children's organised sporting events. Children will also benefit from the changes that will make all public transport waiting points and outdoor pedestrian malls smoke-free. These additional smoke-free public places will help to protect the community from the harmful effects of second-hand smoke. Advice from the Cancer Council Queensland is that even brief exposure to second-hand smoke can adversely affect the health of nonsmokers. The bill will also improve the community's enjoyment of Queensland's magnificent outdoor public places.

I would like to briefly address some points raised earlier in the debate. As indicated in my opening remarks, the government does not support the private member's bill introduced by the member for Caloundra. The government's smoke-free places bill will not just achieve the objectives of the private member's bill but also do much more. It will also address the drafting issues identified by the committee.

In what was generally a very strong bipartisan debate, I was disappointed to hear the contribution from the member for Gympie. The member for Gympie claimed that the government was slow in providing leadership on this issue following introduction of the private member's bill. I do not want to be overly critical of the member for Gympie, but I must point out that it is not leadership to put poorly drafted or unenforceable bills into parliament. The legislation must be fully developed and must be able to be applied when passed. The committee's report into the private member's bill identified a lack of clarity around the application of new smoking bans and recommended improved definitions to ensure greater consistency with the existing provisions in the tobacco act. The committee recommended changes to the provisions related to smoking bans at public transport waiting points, skate parks, government buildings and swimming pools.

Unlike the private member's bill, the government's smoke-free places bill is the product of considerable and detailed policy development. Members can be confident when passing this bill that its provisions will be effective and able to be implemented by our environmental health officers and our local government officers, who will be responsible for enforcement of the new provisions. All of the committee's recommendations on the private member's bill have been addressed in the smoke-free places bill.

The government's bill also goes much further than the private member's bill, providing for many more smoke-free public places across Queensland. Unlike the private member's bill, smoking bans will apply at early childhood education and care facilities and residential aged-care facilities, prescribed national parks and government precincts and children's organised under-age sporting events. The government's bill also makes a series of minor and technical improvements to the operation of the tobacco act. These changes will ensure greater clarity around definitions and close loopholes in existing smoking ban matters not addressed by the private member's bill.

Also, we have done what the LNP did not do. We have listened to the clear message of the Local Government Association of Queensland at its conference in 2013. I understand that the member for Gympie was a councillor at the time of that conference. I am sure he was disappointed that the LNP did nothing to implement the call from local government to be able to make their own smoke-free places.

The bill provides local governments with the power to make local laws prohibiting smoking in outdoor public places in their local government area. This power may be used to declare certain parks, boardwalks or pedestrian areas to be smoke-free. Any fines imposed by the local government under this power will be paid to the local government.

I note that the member for Gympie also expressed some concerns around local government's role in enforcing these new laws. To the extent that these criticisms are valid—I am not sure that they are—they are concerns he should also direct to the member for Caloundra in relation to the private member's bill, which proposed the same enforcement role for local government.

Of course, the broader issue is about the role of local government. At a time of council elections it is something important to reflect upon. Councils do more than maintain roads, collect rates and look after rubbish. Local governments represent their communities. They have a responsibility to respond to their communities across the spectrum of issues, including social and health issues, and if they have a substance that is harming their constituents at a much faster rate than any other preventative cause I think they would recognise they have an obligation to do their bit to try and limit it. We will always run hospitals to provide treatment, but we ask that councils work with us to try to minimise risks to their own constituents.

The member for Caloundra suggested I had some reluctance to acknowledge the changes made by the former minister. I acknowledged the former minister in my second reading speech and I am happy to acknowledge again the smoke-free bans introduced at schools and hospitals which we are building on today. While the changes the former minister, my immediate predecessor, made were important, they must be seen in the context of the major changes made by the Beattie and Bligh Labor governments, including smoking bans at enclosed public places such as workplaces, outdoor eating and drinking places, children's playgrounds and sports stadiums.

The member for Buderim spoke about the ban on smoking within five metres of government buildings and I noted his concerns that this might simply shift smokers to other areas. I presume he means moving smokers to other non-government buildings. I share the member's concern. That is why the government's bill does not adopt the approach taken in the private member's bill but will instead allow for government precincts to be flexibly defined through a regulation. This will mean careful consideration can be given to any potential impacts on neighbouring buildings. The no-smoking area can be defined in a way that is sensitive to neighbours rather than an arbitrary five-metre boundary that follows the contours of a building.

I thank the member for Nudgee for her leadership during the committee's inquiry into the bill. In outlining stakeholder support for the bill, the member for Nudgee noted the appetite of many stakeholders to go further. I also acknowledge the contributions of other members in respect of that matter. I look forward to the outcome of the current inquiries in that respect being progressed by the Health, Communities, Disability Services and Domestic and Family Violence Prevention Committee and the Education, Tourism, Innovation and Small Business Committee. These committees are considering the issues of tobacco licensing and smoking at higher education and training facilities respectively. They are important issues that will benefit from the detailed examination that the committees can offer.

Queensland does not currently have a licensing scheme for tobacco wholesale or retail sales. Licensing schemes are useful to identify and monitor the number, type and location of tobacco retail outlets and wholesalers. This assists with distribution of retailer education materials and planning of enforcement. However, there are limitations of such schemes, including costs and administrative burdens on business and government, and that the scheme may disproportionately disadvantage small business. The health committee is considering whether a licensing scheme for tobacco wholesale and retail sales supports the broader public health objectives.

While smoking is prohibited inside buildings at universities, TAFEs and registered training organisations, there are currently no laws prohibiting smoking in outdoor areas at these facilities. This, I believe, is inconsistent with the situation at schools. The committee is considering the benefits and implementation issues raised by a smoking ban across these facilities. I note the committees will be hearing from key stakeholders tomorrow morning. This provides a valuable opportunity for industry, health groups and the higher education and training sector to participate in this policy discussion immediately following the passage of this legislation. The committees are both due to report on 29 April 2016 and I can assure honourable members the government will carefully consider the outcomes of the inquiries after this date.

I am pleased to hear that the member for Greenslopes, as an avid rollerskater, will be taking advantage of the smoke-free environment at skate parks and I commend him for pursuing that very healthy pursuit. The member for Greenslopes also noted that one option is a complete ban on smoking. Some in our community have asked why we do not take this step, and that is an important question.

The member for Algester—and I noted the thoughtful contribution by the member for Algester and my ministerial colleague—has noted the difficulties that arise when people are involuntarily subjected to second-hand smoke exposure at public transport waiting points. The member is right: there is a community expectation of protection from second-hand smoke in situations of involuntary crowding such as public transport waiting points.

I do indicate to the member for Algester that of course smoking occurs at a higher rate in Indigenous communities than non-Indigenous communities. I was very pleased to join with leaders in the Indigenous health sector such as Adrian Carson, the CEO of the Institute for Urban Indigenous Health, and leaders in the sporting sector, including the CEO of the Brisbane Broncos, Paul White, for the launch of a new Deadly Choices advertising campaign at the old Tallebudgera Creek recreational camp, as it was known by me once, the now Tallebudgera recreational camp. It was a very splendid morning. A lot of young Indigenous people from high schools throughout Queensland were there and we launched this new advertising campaign. One of the ads was specifically targeted at smoking in Indigenous communities. I am very pleased that those ads are being rolled out thanks to the support of our government providing funding to the Deadly Choices campaign—something I am also proud of.

Currently, some Queensland public transport waiting points are smoke-free while others are not. For example, transport legislation prohibits smoking on busways, busway infrastructure, railway stations and light-rail platforms. The Ipswich City Council, the Fraser Coast Regional Council and the Redland City Council also have local laws in place that make certain public transport waiting points in their local areas smoke-free. The amendments in our legislation will provide Queenslanders with greater protection from exposure to tobacco smoke. Consistent public transport smoking bans will send a clear message that smoking in these areas is unacceptable, and this was acknowledged by the member for Yeerongpilly. The aim is to increase self-compliance and change smokers' behaviour.

While smoking rates have decreased significantly, there are still many daily smokers. We know that smoking is not an easy habit to kick. I congratulate the members for Ferny Grove, Caloundra, Thuringowa and Buderim for successfully quitting the habit. On average it will take seven or eight attempts to quit before a person will successfully give up smoking for good, but the government will support them through our Quitline and through other mechanisms. I do not consider banning a product a viable option at this time, but tobacco legislation such as the smoke-free places bill is an integral part of effective tobacco control.

Queensland's tobacco laws are amongst the toughest in Australia but they are not about discriminating against smokers. Rather, by setting a standard that applies equally to all, the laws contribute to a culture that supports smokers to quit and discourages young people from taking up the habit. The member for Waterford reminded us of the importance of community based programs for young people and community engagement programs such as the Logan Together program—something that I strongly support as the member for Woodridge.

The Queensland government has a range of programs and other initiatives to help smokers kick the habit for good. One such initiative is the Workplace Quit Smoking Program which commenced in August 2011. This free, evidence based quit-smoking program is tailored to workers as, unfortunately, smoking rates for blue-collar workers are almost double the rate for white-collar workers. The program is delivered by the Quitline service. It combines four smoking cessation support calls with 12 weeks supply of nicotine patches, gum or lozenges. A unique component of the program is the opportunity for the partner, spouse or immediate family member who resides in the same house as a worker who is registered on the program to be part of the program as well.

Since the program started more than 9,840 registrations have been received from workers located in a range of industries throughout Queensland. These industries include construction, mining, wholesale trade, manufacturing, utilities and local government. The average participant age is 43 years, with 60 per cent of registrations received from males. Participants in the program are surveyed at program completion and then again at three, six and 12 months post program completion. I am pleased to announce that the quit rate of participants at 12 months post program is 26 per cent. This is more than five times the rate for individuals trying to quit unassisted. The feedback received from participants has also been very positive.

I am pleased to announce that this program is being extended to support the early childhood education and care sector. Education and care providers will be invited to participate in the Workplace Quit Smoking Program. Joining the program now means that these workers will have the opportunity to

quit before the new nonsmoking requirements at early childhood education and care facilities commence in September 2016, and I encourage employees in the sector to avail themselves of the program. This will have a beneficial health effect, not only for them but also for the children who use day care services like those visited by the member for Ipswich at the Jacaranda Street kindergarten. There is well-established evidence that children are particularly susceptible to the effects of second-hand smoke due to their higher breathing rates per body weight, their greater lung surface area relative to adults and the immaturity of their lungs.

In summary, we know there is still more to be done and we will continue to do more. However, this bill is an important next step in the Palaszczuk Labor government's tobacco control efforts to create more smoke-free places, reduce the social acceptance of smoking and provide supportive environments to help people quit.

I would like to take this opportunity to acknowledge the work of the Queensland Health Quitline staff. The member for Buderim expressed disappointment about his personal experience with the helpline when he was trying to quit smoking. The Quitline plays a vital role in reducing the rates of smoking and helping people to quit. In 2015, the Quitline received more than 34,000 calls including over 2,300 calls from Indigenous patients. Increasingly, GPs and other health professionals are recognising the valuable counselling provided by Quitline, referring more than 5,800 of their patients each year to the service. I thank the Quitline for the work that it does to help reduce the rate of smoking in Queensland.

I would also like to thank the members of the former health and ambulance services committee and the committee staff for their detailed consideration of the bill. Of course, health legislation never comes to the parliament without very detailed consideration by policy officers in the Department of Health. Some of those officers have worked for many years on the journey to develop more smoke-free places in Queensland.

I want to thank all the staff members from the Department of Health who have worked on this bill. I want to acknowledge the Chief Health Officer, Dr Jeannette Young, who for many years has been a strong advocate for increasing the number of no-smoking places in Queensland. Mark West has been a very diligent and thoughtful policy officer in the Department of Health for many years and has been involved in many legislative reforms that have come to this parliament. I want to acknowledge people such as Mark who represent the best in our Public Service—people who dedicate their professional career to working in the Public Service—and I thank him for his contribution. Of course, they are embarrassed when I name them, but it is appropriate for all of us to recognise the hard work of those diligent and dedicated public servants who are often easily criticised.

Mr Bailey interjected.

Dr Miles interjected.

Mr DICK: I thank the member for Yeerongpilly and the member for Mount Coot-tha for their support of public servants. Public servants are often the subject of criticism in the community. We are all paid to be criticised in this place, not the least by each other, but for public servants who do their duty diligently I think that it is appropriate for us, as members of parliament and particularly those of us in executive government, to acknowledge their work.

I also want to acknowledge Ms Rebecca Whitehead and Ms Kaye Pulsford from the Preventive Health Branch and Mr David Harmer, Ms Kirsten Law and Ms Anita Eenink from the Legislative Policy Unit in the Department of Health. I also want to acknowledge policy officers Eve Gibson and Sha Lang for their work. This is important legislative reform and I commend the bill to the House.