




Speech By
Hon. Cameron Dick

MEMBER FOR WOODRIDGE

Record of Proceedings, 16 June 2016

HEALTH AND OTHER LEGISLATION AMENDMENT BILL

Introduction

 **Hon. CR DICK** (Woodridge—ALP) (Minister for Health and Minister for Ambulance Services) (2.38 pm): I present a bill for an act to amend the Criminal Code, the Hospital and Health Boards Act 2011, the Public Health Act 2005 and the Queensland Institute of Medical Research Act 1945 and the legislation mentioned in schedule 1 for particular purposes. I table the bill and the explanatory notes. I nominate the Health, Communities, Disability Services and Domestic and Family Violence Prevention Committee to consider the bill.

Tabled paper: Health and Other Legislation Amendment Bill 2016 [\[962\]](#).

Tabled paper: Health and Other Legislation Amendment Bill 2016, explanatory notes [\[963\]](#).

The Palaszczuk government is committed to removing discrimination and improving sexual health outcomes for Queenslanders. Last month I released for public comment the draft Queensland Sexual Health Strategy 2016-2021. This strategy, the first of its kind in Australia, aims to support healthy and safe sexual experiences and provide Queenslanders with the knowledge required to maintain optimal sexual and reproductive health.

This bill will support the sexual health strategy by removing a longstanding source of discrimination. Queensland's Criminal Code sets a minimum age of 16 years for consent to all sexual activity except anal intercourse, which has a minimum age of 18 years. This measure has a particularly long history, with homosexuality being made illegal throughout most of the 20th century. This criminalisation of homosexuality started life at a time before the federation of Australian states when Queen Victoria was literally Queensland's monarch.

Through the 1970s and 1980s, other states began to liberalise laws governing homosexuality, but Queensland, particularly under then premier Sir Joh Bjelke-Petersen, refused to change its laws. Throughout the 1980s, which I remember well, homosexuality was still illegal in Queensland, and in 1989, in the dying days of the then National Party government, five men from Roma were charged with a variety of antihomosexual offences. It should also be noted that during the 1989 election the National Party premier of the time, Russell Cooper, said that the Australian Labor Party's policy of decriminalisation of homosexuality would, as he put it, 'send a flood of gays crossing the border from the southern states'. The Goss Labor government in 1990 decriminalised homosexuality, but that government introduced an anal intercourse law. The age of consent for consensual anal intercourse was set at 18 years.

The expert panel of health experts asked to consider the implications of the current law advised me that the disparity in the age of consent for different sexual activity has adverse impacts on young people and recommended adopting a consistent age of consent. Queensland cannot continue to discriminate between forms of sexual intercourse, particularly when we know that young people feel compelled to withhold information about their sexual history from health practitioners for fear of possible

legal consequences, whether for themselves or their partner. This can have serious implications for their medical treatment, particularly as unprotected anal intercourse is the highest risk behaviour for transmission of HIV. It also has the effect of stigmatising same-sex relationships which in itself can be harmful for an individual's wellbeing.

This bill will standardise the age of consent for all lawful sexual intercourse to 16 years, reflecting the position in other Australian states and territories, where the age of consent for anal intercourse and all other forms of sexual activity is consistent. The bill achieves this by amending the Criminal Code to omit the offence of sodomy and making further consequential amendments to ensure that the concept of carnal knowledge used in the code is extended to include anal intercourse. The expert panel also advised they consider using terms such as 'sodomy' in the Criminal Code may stigmatise this form of sexual activity and homosexual relationships in particular. The government has acted on this recommendation, removing archaic references to sodomy.

For too long, debate about sexual practice has focused on criminal and moral considerations. By including this important amendment in a health bill, the Palaszczuk Labor government is sending an important message: public policy debate about lawful sexual practices should be focused, first and foremost, on improving the sexual health and wellbeing of Queenslanders.

The bill also amends a number of Health portfolio acts to support the implementation of policy initiatives to protect and improve the health of Queenslanders and to improve the operation of the acts. Amendments to the Hospital and Health Boards Act 2011 will facilitate general practitioners having access to the Queensland Health database, the Viewer. Queensland Health's 10-year vision and strategic framework for health in Queensland, *My health, Queensland's future: advancing health 2026*, identified the importance of the entire health system working together with a shared vision for the future health care of Queenslanders. The vision includes a focus on improving collaboration between parts of the health system and continuity of care for patients. Allowing general practitioners to view components of their patients' public hospital medical records through the Viewer will help ensure patients receive consistent, timely and better coordinated care, supporting our vision for health care in Queensland.

Appropriate safeguards will be in place to ensure the privacy of patient information. It is intended the system will require the health practitioner to search by a unique identifier such as the patient's Medicare number. The system will involve regular monitoring and audits. Misuse of confidential information will be subject to criminal sanction. A communication plan will also be developed to support implementation, including communication with patients both at hospitals and at GP practices. This is an important initiative which will help improve the coordination and integration of health care in Queensland.

The bill also amends the Hospital and Health Boards Act to streamline an existing process relating to disclosure of confidential patient information for research purposes where the adult patient is unable to consent to the disclosure of the information. Information will only be disclosed where the patient's substituted decision-maker has consented to the patient's participation in the research. This amendment delivers on a commitment to the Australian Medical Association Queensland. To support this amendment, the bill makes a minor amendment to the Public Health Act 2005 to clarify that health information relating to deceased patients can be disclosed for research purposes.

Further amendments to the Public Health Act will support the delivery of the School Immunisation Program and school dental program by enabling school principals to share student information with school immunisation and oral health service providers. To be vaccinated as part of the School Immunisation Program or to receive oral health services through the school dental program, students must return a signed parental consent form to the school. Despite the best efforts of the schools and the immunisation and oral health providers, a substantial number of consent forms are not being returned. The amendments will allow providers to follow up with the parents of students who have not returned their consent form, improving the uptake of the programs and the health of Queensland children. To protect student information, approved providers will be bound to comply with the privacy principles under the Information Privacy Act 2009.

Finally, an amendment to the Queensland Institute of Medical Research Act 1945 will allow the Queensland Institute of Medical Research Council to approve the payment of bonuses to successful discoverers or inventors up to an aggregate annual limit of \$10 million. This amendment will give the QIMR Berghofer greater flexibility in making payments to successful discoverers and inventors, enabling them to enter into more attractive commercial arrangements, attract high-quality researchers and boost the profile of the institute.

The Palaszczuk government is committed to improving sexual health outcomes for all Queenslanders regardless of their sexual orientation or preferences. The bill demonstrates this by standardising the age of consent for all forms of sexual intercourse, reflecting community expectations

and removing a source of discrimination against young people on the basis of their sexual orientation. The bill also supports the protection and improvement of health care for Queenslanders and enhances the operation of a number of health portfolio acts. I commend the bill to the House.

First Reading

Hon. CR DICK (Woodridge—ALP) (Minister for Health and Minister for Ambulance Services) (2.47 pm): I move—

That the bill be now read a first time.

Question put—That the bill be now read a first time.

Motion agreed to.

Bill read a first time.

Referral to the Health, Communities, Disability Services and Domestic and Family Violence Prevention Committee

Madam DEPUTY SPEAKER (Ms Farmer): Order! In accordance with standing order 131, the bill is now referred to the Health, Communities, Disability Services and Domestic and Family Violence Prevention Committee.