



Speech By Hon. Dr Steven Miles

MEMBER FOR MURRUMBA

Record of Proceedings, 13 August 2020

HEALTH LEGISLATION AMENDMENT BILL

Hon. SJ MILES (Murrumba—ALP) (Deputy Premier and Minister for Health and Minister for Ambulance Services) (4.34 pm), in reply: I thank all members for their contributions to the debate on the Health Legislation Amendment Bill 2019. This is an important opportunity to make significant reforms to health legislation to protect and improve the health of Queenslanders. I particularly thank the member for Cook for her support of our new proposals for Aboriginal and Torres Strait Islander representation on health boards. As the world's only Torres Strait Islander member of parliament, she knows just how important representation is. The bill will strengthen the governance of Queensland's public health system to ensure it delivers the best care to Queenslanders regardless of where they live. It will also embed the right of our First Nation peoples to receive culturally appropriate health care.

If the bill is passed, Queensland will become one of the first jurisdictions in Australia to ensure that LGBTIQ individuals who receive health services are protected from the harmful and unethical practice of conversion therapy. Much of the debate today has focused on the provisions that prohibit the practice of conversion therapy by health service providers. I thank the member for Greenslopes for his strong support for the banning of gay conversion therapy. I note that he raised instances of people being sent overseas for the practice. This bill would not prevent that, but I hope that it sends a strong message that the practice is unacceptable. I commit to the member that I will consider this issue and get back to him.

I also note the emotional contribution of the member for Bancroft and thank him for his deliberation and deep consideration of this bill. It is disappointing that in 2020 there are still members of the House who will not stand up for the rights of all Queenslanders. Instead of doing what is right and supporting these important legislative protections, some members are more interested in mischaracterising the bill and preying on people's fears and misperceptions in order to score political points. The provisions in the bill to prohibit conversion therapy should not be controversial. The provisions will prohibit health service providers from engaging in a narrow class of practices that offer absolutely no therapeutic benefit and have the proven potential to inflict severe emotional and physical harm.

We heard repeatedly from those who oppose these measures that more evidence is needed, but the evidence is clear and compelling. We know from the round table I convened in 2018 that these practices are occurring in Queensland, among both registered and unregistered health practitioners. The committee received submissions and testimony confirming this fact. The committee also heard directly from survivors of conversion therapy, like Nathan and Roe—about the severe psychological pain they experienced as a result of these practices, often over the course of many years.

As the Human Rights Commission pointed out, even if the practice is not widespread the severity of the harm justifies a strong legislative response. Since existing regulatory schemes have not proved effective, the introduction of an offence is appropriate and necessary. Of course, the reality is that no amount of evidence would convince some members of this House to support the bill. There are those

who are simply unwilling to recognise that LGBTIQ people are entitled to the same dignity and respect as other members of our society. Rather than admit their prejudice, they seek to sow confusion and promote hysteria.

As I have previously explained, the bill does not impose on health service providers any new requirements or obligations whatsoever. It does not prohibit legitimate treatment decisions or in any way interfere with reasonable professional judgements about how to provide the most appropriate care to patients. The amendments passed during consideration of the bill will remove any potential for doubt on this point. The amendments will also assist in the operation and enforcement of the provisions.

The member for Caloundra said that the Office of the Health Ombudsman already had the power to deal with this practice, but I would like to correct him. We asked the Health Ombudsman if that was the case, and he informed us that he did not have the power to act. I understood that correspondence was tabled at committee hearings at which the member was present. It is already unethical for health service providers to engage in these practices. To protect vulnerable members of our community, it should be illegal as well. I commend the bill to the House.