



Speech By Jason Hunt

MEMBER FOR CALOUNDRA

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ASSISTED REPRODUCTIVE TECHNOLOGY BILL

Mr HUNT (Caloundra—ALP) (12.04 pm): I rise to make a brief contribution to the debate surrounding assisted reproductive technology. As always, I would like to thank my fellow committee members for all their hard work on this bill and, indeed, on all the bills that have come before us during this term of the 57th Parliament. I thank Peter Russo for his guidance as committee chair, Ms Jonty Bush for her endless hard work and Ms Sandy Bolton for her friendly and collegiate approach. I also thank Messrs Mark Boothman and Jon Krause, the members for Theodore and Scenic Rim respectively. I thank the secretariat who support us so very well and make every effort to ensure the committee process is as easy as possible for participating MPs—and don't we need it sometimes!

The Community Safety and Legal Affairs Committee's examined the Assisted Reproductive Technology Bill 2024. The primary objectives of the bill are to establish a state-based framework to regulate assisted reproductive technology, known as ART, services and a donor conception information register. During its inquiry into the bill, the committee received and considered a variety of evidence: 34 written submissions from stakeholders; written and oral briefings provided by Queensland Health and the Department of Justice and Attorney-General; and evidence provided by witnesses at a public hearing in Brisbane. The evidence received by the committee indicated that stakeholders were broadly supportive of the bill's objectives and how it seeks to achieve them. To that end, the committee has made but a single recommendation, and that is that the bill be passed.

The industry that has emerged around assisted reproductive technology has enabled families to grow and in many cases has enabled families to exist in circumstances that would otherwise have been impossible. With that in mind, we should acknowledge the pure and unmatched joy that the industry has made possible—a joy that only family life can bring.

I am not talking about the bit where you are already running late for school drop off and you walk into your child's room only to find them half dressed, daydreaming, playing on their iPad after you have expressly told them to hurry up because you are already late—not that bit of joy. I am not talking about the bit where your child comes to you after dinner and informs you that they need to take a list of incredibly arbitrary items to school the next day for a group assessment that no household could possibly summon up in less than 72 hours and that your child has known for three weeks—not that bit of joy either.

I am talking about the other bits—the good bits. Mostly it is terrific, and the assisted reproductive technology industry has had a part to play in the creation of many happy families, but—and there is always a 'but'—it is fair to say that in Queensland the industry has existed in a largely unregulated space and that this has not been without its share of problems both for the donor-conceived people and for the bodies that need to enforce compliance.

The bill has two main policy objectives: establishing a state-based framework to regulate assisted reproductive technology, or ART, services in Queensland and establishing a donor conception information register in Queensland. For context, in Queensland there is a relatively small number of

clinics that provide ART services—all of which are private providers. At present there are eight different providers operating in Queensland. Together they run a total of 24 accredited ART units across the state. Without the support that will be afforded by this bill, Queensland is unable to enforce compliance with either the National Health and Medical Research Council ethical guidelines or the RTAC code of practice. In effect, the industry is self-regulating.

Naturally a self-regulating industry will encounter service delivery problems from time to time, so in 2022 the committee was tasked to hand down a report into matters relating to donor conception. In its initial report, the committee made six recommendations including that all donor-conceived persons be legislatively provided with the right to know the identity of their donor when they reach the age of 18, regardless of when they were born; identifying information about donors, including their medical history, be made available on request to all donor-conceived persons when they reach the age of 18; and a central donor conception register be established within the Registry of Births, Deaths and Marriages. In response, our government has enlivened several key principles that will regulate how ART providers operate in Queensland.

The bill proposes a new licensing scheme for ART providers operating in Queensland and implements key preliminary recommendations made by the Health Ombudsman. In March 2024 the Health Ombudsman recommended 'that legislation is designed to provide robust oversight of ART providers, including the licensing of providers, audits, and investigation of non-conformities and adverse events'. This preliminary recommendation was made in light of a finding that 'there are gaps and risks in the current self-regulatory system in respect to ensuring the safety and quality of ART services'. These licences will be required for clinics rather than individual practitioners and personnel who work within them; however, clinics will be required to ensure that ART services are only provided by, or under the supervision of, a medical practitioner. This move towards regulation was welcomed by one donor-conceived person who indicated that she was relieved that legislative developments were progressing to regulate an industry where providers have, in her view, placed convenience and profit over health and safety.

The bill would require ART providers to provide people with information and counselling prior to the provision of ART services. As might be expected, the nature and breadth of these services will vary according to the nature of the services being provided by the ART provider—from a fairly rudimentary level of information and expectations right up to a more extensive level, which will include things like the ART provider's obligations in relation to collecting, keeping and disclosing information about the person and their donor-conceived offspring, and the person's rights and the rights of the donor-conceived offspring to information from the donor conception register.

Unsurprisingly, members of our LGBTIQ+ community make up a significant proportion of people accessing ART technology so their commentary on this point is highly relevant. It is notable that organisations representing LGBTIQ+ families indicated support for the counselling requirements. For example, Rainbow Families Queensland told the committee that a survey that it conducted in 2022 showed that—

... relevant, quality, affordable counselling ... was highly valued by our community. and that—

... few would strongly oppose it being a mandatory feature of the regulatory framework. Rather, most concerns were framed around cost, quality of service, and also appropriateness and sensitivity of the counselling for LGBTQ+ people.

The bill also proposes to establish a donor conception information register, known as the register, and a mechanism for noting a person's status as a donor via their birth certificate. The bill would require ART providers to collect and maintain certain information relating to donors and the ART procedures and to take reasonable steps to determine whether a child is born as a result of a procedure. If a birth has occurred, an ART provider must provide all relevant information to the registrar within three months of becoming aware of the birth. ART providers would also be required to provide historical information to the registrar within six months of the commencement of the relevant provisions.

A person's contact information would only be accessible via the register where they have consented to this. The bill provides that, in giving consent for their contact information to be provided, a person may specify how contact is to be made. A person who obtains other information about the donor from the register can use that information to seek them out outside the framework provided by the bill. This would impact on the donor's right to privacy. However, as noted in the statement of compatibility, submissions made to the committee as part of its earlier inquiry indicated that 'donor-conceived people generally seek information about the donor to inform their own identity and sense of self, rather than using the information to contact the donor if the donor has not indicated that they would like to be contacted'. This suggests that attempts to contact donors who have indicated that they do not consent to contact may be relatively rare.

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