




Speech By
Hon. Shannon Fentiman

MEMBER FOR WATERFORD

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ASSISTED REPRODUCTIVE TECHNOLOGY BILL

 **Hon. SM FENTIMAN** (Waterford—ALP) (Minister for Health, Mental Health and Ambulance Services and Minister for Women) (3.10 pm), in reply: I thank members for their contributions to the debate on the Assisted Reproductive Technology Bill. I appreciate that there is general agreement about the need for this bill not only among members in this House but also among people born as a result of assisted reproductive technology, patients and providers of fertility services.

In this debate, and in the time leading up to it, we have heard many stories about how the fertility industry has touched people's lives. I thank those members who have shared personal stories of their own or their constituents' fertility journey. I would also like to thank the Assisted Reproductive Technology Regulation team in the System Policy Branch of Queensland Health for their ongoing work. I again acknowledge the dedicated and passionate advocates who have been calling for reform in this area.

The Miles government has listened and understands there is a need to enhance the industry's existing self-regulatory model with regulations. This bill is about safeguarding the industry into the future, for patients and for the people who are born. This bill is about ensuring people who are born as a result of donated gametes and embryos have the ability to know their genetic heritage through the establishment of a donor conception information register. One donor-conceived person told the committee, 'This legislation will be leading the way forward in truth and transparency.'

It is a privilege to progress this bill through the parliament today. I will now address some of the matters raised by members during the course of this debate. The member for South Brisbane raised concerns regarding whether the rights of donor-conceived people are the paramount consideration in the bill. I am pleased to advise the member for South Brisbane that the main objects of the bill, at clause 3, state—

- (2) The welfare and interests of people who are born as a result of assisted reproductive technology are, throughout their lives, of paramount importance in the administration and operation of this Act.

This principle will inform how the bill will be interpreted and will be the primary consideration.

Several members raised concerns regarding the definition of 'family' for the purposes of the family limit. 'Family' is defined to mean a parent, their spouse and their children. If, for example, a couple separates and one of them repartners and wishes to start a family with their new partner using donor gametes, this would be counted as a separate family. 'Family' has been defined to achieve the purpose of reducing the impacts of donor-conceived people having many siblings as well as avoiding other risks. I appreciate that there are many types of families and many possible scenarios to work through. Queensland Health will work with the sector to guide them through how this provision should be applied and will release guidance material to inform the sector during implementation.

The bill sets a time limit of 15 years to use donated gametes and embryos. The 15-year time limit aims to strike a balance between the use of donated material by intending parents and the rights and welfare of donor-conceived people. Throughout consultation, donor-conceived people described the importance of storage time limits on the ability to form meaningful relationships with their siblings and

the difficulty of being able to do this when siblings are from different generations. For many, sibling relationships are the longest lasting relationships of our lives. This time limit is not, however, a blanket ban as proffered by the member for Mudgeeraba.

The bill recognises that every person's fertility journey is different. In some circumstances a person may require more than the 15-year limit to complete their family. In that situation, a person may apply to Queensland Health to seek an extension to the time limit prescribed in the bill and the director-general may approve extensions if satisfied there are reasonable grounds for doing so. The director-general will consider applications on a case-by-case basis to ensure the ongoing use of older material is ethical and appropriate in the particular circumstances. This is not intended as a clinical or scientific review of the efficacy of using older material. The bill provides that an ART provider must dispose of any donated gametes or embryos once the time limit has been reached. There is no time limit for a person seeking to store their own biological materials, given this is managed in line with the person's consent.

I note that the member for Mudgeeraba made commentary on the consultation process for this bill. I make no apologies for this bill being progressed with urgency, particularly given the extremely serious nature of the stories that I have heard and some of the cases that were uncovered this year during the Health Ombudsman's investigation. Whilst this bill may have been developed quickly, it has been developed thoroughly. We have had many advocates calling for this reform for many years. Queensland Health undertook extensive consultation during development of the bill, receiving 25 written submissions and 28 survey responses to its initial consultation paper along with hosting several information and focus group sessions. Overall the team had over 150 different engagement sessions during the development of the bill. The Department of Justice and Attorney-General also consulted thoroughly on the development of the requirements for the donor conception information register, building on the work of the former Legal Affairs and Safety Committee's inquiry. I again take this opportunity to thank everyone who participated in consultation processes relating to the development and the scrutiny of the bill.

The member for Moggill raised concerns about the retrospective nature of the donor register and the fact that it may have unintended consequences, particularly to donors. It is accepted that the establishment of the register will impact upon the privacy of donors who donated on the condition of anonymity. Although historical donors may have been assured anonymity at the time they donated, we now know that this was not best practice or in the best interests of donor-conceived people. It is appropriate, fair and just that all people conceived through donor conception have the right to understand their complete identity and genetic history.

Whilst the bill delivers this right for donor-conceived people, it also ensures any impact on privacy is limited as far as possible. While a donor's name and date of birth will be provided to the donor-conceived people who apply for it, the donor's contact information—their email address or similar—will not be released to any person without the donor's consent. The bill outlines that the registrar may take reasonable steps to contact a donor if a donor-conceived person has made application for identifying information. At this point the registrar can advise the donor of counselling services that will be available to them. Ultimately, the bill will ensure all donor-conceived people—regardless of when they were born—have the same legislative ability to access important information about the donor.

This bill will improve confidence in Queensland's fertility industry, improve protections for patients and, most importantly, protect the people who are born as a result of assisted reproductive technology throughout their lives. I commend the bill to the House.

It has been brought to my attention that a government media release regarding laws currently being debated in this chamber was published inadvertently due to an administrative error. We have asked that the release be removed. I am advised that that request preceded the matter of privilege by the member for Glass House. I apologise to the House. The government respects the institution of this parliament and would never purposefully publish a release ahead of the deliberations of this chamber. Given the bipartisan support for this bill, this should not distract from how historic this day is for many donor-conceived people in Queensland.