




Speech By
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MEMBER FOR THEODORE

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ASSISTED REPRODUCTIVE TECHNOLOGY BILL

 **Mr BOOTHMAN** (Theodore—LNP) (12.00 pm): I rise to make a brief contribution to the Assisted Reproductive Technology Bill 2024. During the committee process we heard stories from many different perspectives, including stories from individuals who are and who always will be affected by the past—traumatic stories that have taken donor-conceived individuals on an emotional roller-coaster. Witnesses to the committee referred to the Ombudsman's report into IVF treatment. The report highlighted harrowing systemic failures that have been going on for a very long time—failures that deeply affect the lives of donor-conceived persons and their families.

Currently in Queensland there is no state-based legislation that regulates assisted reproductive technology services. This is different from other states where the majority have legislation in place—states such as Western Australia, New South Wales, South Australia, Victoria and the ACT. Operators in Queensland must adhere to federal requirements to maintain their professional accreditation. Failure to comply with the reproductive technology committee code of practice or the National Health and Medical Research Council guidelines is not an offence under federal law and there is almost no enforcement done.

This has resulted in a self-governing approach by the assisted reproductive providers in Queensland. This self-governing approach has led to claims of clinics using wrong donor gametes and, through right to information, there were concerns that a donor could have possibly fathered a thousand children. Therefore, it is long overdue for safeguards to be put in place in the industry to protect the interests of consumers, donors and those Queenslanders who are donor-conceived.

The primary objectives of the bill will establish a state-based framework to regulate assisted reproductive technology services and a donor conception information register. Assisted reproductive technology providers will require a licence to operate in Queensland. The bill requires licence holders to provide counselling to those involved in donor conception programs. It also requires a variety of record keeping of information by assisted reproductive technology providers.

The bill proposes several restrictions on how gametes and embryos can be used: limiting the number of donor related families that can be created to 10 and reducing the number of families that can use a particular gamete donor.

As I said, I will keep my contribution short because many other members wish to speak. I want to thank the brave individuals who presented themselves at the committee hearing to tell their stories. Your courage and strength was inspirational to everyone who was present. I thank you for expressing your opinions and the desperate need for change. I thank you for your contributions.