



DEBATES

OF THE

LEGISLATIVE ASSEMBLY

FOR THE

AUSTRALIAN CAPITAL TERRITORY

HANSARD

27 September 1989

Wednesday 27 September 1989

Electricity and Water (Amendment) Bill (No 2) 1989	1483
Suspension of standing and temporary orders	1517
Planning, Development and Infrastructure - standing committee	1521
Petition: Education	1522
Questions without notice:	
ACT Ambulance Service.....	1523
Yarralumla Brickworks.....	1524
Birthing centres:.....	1525
Currong Flats	1525
Tuggeranong Community Arts Festival	1526
Gaming.....	1527
Libraries.....	1527
ACT Ambulance Service	1528
Asbestos removal.....	1528
Government car maintenance	1529
Swimming pool	1529
Deportation of minor	1530
Nurses.....	1530
Parks and conservation	1531
National aquarium	1531
Child-care facilities	1531
National aquarium	1532
Street lighting	1532
Civic Square library	1532
Vietnam memorial	1533
Birthing centres	1533
Public education night.....	1533
Electricity and Water (Amendment) Bill (No 2) 1989	1534
Independent audit to determine assets transfer	1565
Presentation of paper	1569
Housing policy review (Ministerial statement).....	1569
Drugs in sport - government policy (Ministerial statement)	1574
Gaming Machine (Amendment) Bill 1989	1576
Adjournment:	
Winfield Cup	1577
ACT flag.....	1578
Answers to questions:	
Leases at Mitchell (Question No 13)	1581
Waste disposal (Question No 25).....	1582
Jolimont Centre (Question No 27).....	1583
Metal recycling (Question No 28)	1583

27 September 1989

Wednesday, 27 September 1989

MR SPEAKER (Mr Prowse) took the chair at 10.30 am and read the prayer.

ELECTRICITY AND WATER (AMENDMENT) BILL (No. 2) 1989

Debate resumed from 23 August 1989, on motion by **Mr Prowse**:

That this Bill be agreed to in principle.

MR BERRY (Minister for Community Services and Health) (10.30): Mr Deputy Speaker, I seek leave to move a motion to refer the private member's Bill to amend the Electricity and Water Act to the Standing Committee on Social Policy.

Leave not granted.

Suspension of Standing and Temporary Orders

MR BERRY: Mr Deputy Speaker, I move:

That so much of the standing and temporary orders be suspended as would prevent the Minister for Community Services and Health from moving a motion now referring the Electricity and Water (Amendment) Bill (No. 2) 1989 to the Standing Committee on Social Policy.

I move this motion, Mr Deputy Speaker, to draw into focus the issue of public consultation on the subject of fluoridation, which is affected, of course, by the Electricity and Water (Amendment) Bill (No. 2). I raise the issue not to debate the merits or otherwise of fluoridation but merely to draw into focus the absence of a commitment by this Assembly and its participants to public consultation on an issue which has various degrees of public support.

From the Labor Government's point of view, it is crucial that the public have time to place their position before a committee and have that position properly evaluated before any committee reports to this Assembly and seeks to have its report endorsed by the Assembly. It seems to me that participants in the process here have sought to avoid that sort of consultation and to deny the people of the ACT the right to hear from an expert point of view the pros and cons of fluoridation of the water supply, and therefore just to impose their will without the consultation process which the Labor Government has long been committed to. I

27 September 1989

suggest that those other parties who have any element of democracy in their make-up could not deny the people of the ACT the right to consider this.

I think, Mr Deputy Speaker, that to bully this amendment through the Assembly is a denial of democracy to the people of the ACT and a denial of their right to express their view. Some of the issues, of course, are relevant to what is largely an emotive debate - and I think the way that it has been managed displays the emotion behind it. I think these issues need to be placed before the Assembly in its consideration of a motion to refer this matter to a standing committee. I say "emotive" because I think that the statements that have been made are driven largely by emotion and have very little on-the-ground factual information that can be supported by any definitive research.

Mr Prowse: Rubbish!

MR DEPUTY SPEAKER (Mr Stefaniak): Order!

Mr Whalan: Yes; call that man to order. I move that he be suspended.

MR DEPUTY SPEAKER: Let us not go overboard. Continue, Mr Berry.

MR BERRY: I say that from both sides of the fence, because I do not think the public have had the opportunity to hear a very clear debate on the issue and I hope that this Assembly would not support a process which prevented them from doing so. Bullying this amendment through this Assembly prevents the people of the ACT from properly considering the issues and, of course, properly considering the attitudes of those political luminaries amongst us who might impose upon them certain conditions which many of the people of the ACT seem to be content to do without.

The private member's Bill to amend the Electricity and Water Act, if passed into law, may - I say "may", without getting into the issue of the pros and cons of fluoridation - have long-term deleterious effects on the dental health of future generations of Canberra children. If this were to happen without sensible and informed debate on the issues, today's children, and those who have received the advantages of fluoridation for 25 years, would never forgive us for loading them, as future parents, with the expense and worry of dental bills and the lifelong problems of reduced dental health their children might suffer.

MR DEPUTY SPEAKER: Your time has expired, Mr Berry.

Mr Berry: Can I have an extension?

Mr Prowse: No.

27 September 1989

MR DEPUTY SPEAKER: There has to be a motion of the Assembly to allow Mr Berry to have an extension.

MR WHALAN (Deputy Chief Minister): I move that Mr Berry be granted an extension of time.

MR DEPUTY SPEAKER: Of how many minutes? I think you need to actually specify the period.

MR WHALAN: According to the standing orders.

Ms Follett: Half the time he was allowed - two and a half minutes.

(Extension of time granted)

MR BERRY: Thank you. It comes back, Mr Deputy Speaker, to this issue of public consultation, not the pros and cons of fluoridation. It is about getting the issue out in the public forum so that the people of the ACT can closely scrutinise all of the deliberations and the pros and cons of the fluoridation debate. This Assembly ought not be used as a tool to bully through this sort of legislation and to avoid that very important aspect of democracy. I think that, if this Assembly, including all of the political parties, were to do that, it would demonstrate their unwillingness, if you like, to properly serve and implement the wishes of the people of Canberra in relation to this important issue of dental health.

I think that, because of the status quo which exists in relation to the provision of fluoride in the ACT water, the people of Canberra deserve the right to have full and close scrutiny of the deliberations of the Assembly on this matter and to target, if they like, those people who do not support their particular view on the future health of their children and their relatives.

MR HUMPHRIES (10.39): I rise to indicate that we will not be supporting the suspension of standing orders, for two reasons. First of all, we are concerned, and we have expressed for some time our concern, about the proliferation of committees that have been created in this place. I note that the Government's attitude towards those sorts of committees has changed over time.

Mrs Grassby: This is a standing committee.

MR HUMPHRIES: Well, okay. The creation of committees and the reference of matters to existing committees are both matters of concern to the Liberal Party. I know that we have had a large number of things referred to committees in the past few months, and a large number of other committees have been created. Quite frankly, I think the line has to be drawn somewhere, and I hope we would be in a position at the moment not to create any more committees or any more references to committees unless and until some of the existing workload is relieved. That is the first point I want to make.

27 September 1989

The second is that in the last few weeks, I, like other members of this Assembly, no doubt, have been looking at the scientific evidence to which the Minister referred, and there is a huge amount of it. It is extremely complex, and not being a scientist, I found it very difficult to make much of it. It seems to me that referring matters of this kind to a committee consisting of politicians is not a sensible way of dealing with this. Whether this Bill is passed today or not, I certainly would support the idea of studies being done - a study in particular in the ACT being done - by properly qualified people into the effect - - -

Mr Berry: Of those involved in medical research?

MR HUMPHRIES: I do not disagree with what you are saying, Mr Berry, as you will hear when the debate ensues, but the point I make is that I do not believe that we are going to profit from having politicians looking, for two months or whatever, over the evidence on this sort of subject. I think the evidence is already clear, incidentally, but that I will reserve for debate. I do not think it is profitable to go down this track, and we will not be supporting the suspension of standing orders.

MR STEVENSON (10.41): We hear about medical matters and political matters. Mr Berry suggests that the prevention of the addition of fluoride to the water supply of the citizens of Canberra is an emotional matter and it should be looked at from a medical point of view. When, in 1964, fluoride was added to the water supply of Canberra, it was a political decision. The suggestions that the will of the people should have something to do with it, that democracy should have something to do with it, that the people had not had the opportunity to hear, that conditions and bully tactics were imposed, were all used at the time of the introduction of fluoridation in Canberra.

Jim Killen suggested that the matter should be put to referendum, but it was the National Party's Doug Anthony who, during a weekend, made an administrative decision to force mass medication on the people of Canberra. It is our duty, as political representatives of the people of Canberra, to make sure that that will is no longer imposed on the people.

MS FOLLETT (Chief Minister) (10.43): I rise to support the move of my colleague Mr Berry to have this matter referred to the Standing Committee on Social Policy. In doing so, Mr Deputy Speaker, I should say at the outset that I have the greatest respect for the genuinely held views of people like Mr Prowse who would seek to remove fluoride from our water supply in Canberra. It is not out of any disrespect for that view that I would seek to have a process of community consultation.

We have heard also from Mr Stevenson the manner in which fluoride was first introduced to our water supply in

27 September 1989

Canberra some 25 years ago and, Mr Deputy Speaker and members of this Assembly, there is no way in the world that anyone in this day and age would support such a process. It was quite wrong to have unilateral action like that taken to add a substance to the water supply without due community consultation and without an adequate airing of views.

But, Mr Deputy Speaker, I submit that 25 years down the track it is just not open to us to repeat that error. Two wrongs do not make a right. After 25 years of fluoridated water, there are definitely two views within the community as to its efficacy. Quite clearly there is a view held by Mr Prowse and other members, that fluoride is not efficacious and should be removed. There are also substantial numbers of people in the community - I put it to you that it is probably about 50 per cent - who think fluoride in the water is quite a good thing. Speaking for myself, a person who grew up in Canberra with the benefit of fluoridated water, I can say that I have very good teeth and that my dentist attributes that to fluoride in the water. I think that view is quite commonly held.

But the basis of Mr Berry's argument, and it is an argument that the Government supports totally, is that the community has every right to expect to be consulted. We do not send this matter to a policy committee for the benefit of politicians. We send it there for the benefit of the community who are affected by the decision that we make on this matter. We send it to the policy committee to give the community a chance to air their views and a chance to hear informed debate on the matter. There has not been a great deal of public debate on it so far.

Mr Deputy Speaker, there is a term in union matters called custom and practice, which holds very great sway. I believe that fluoride, by virtue of the custom and practice of the past 25 years, has a place in our community life, and that it is appreciated by very many members of the community. I ask the people whose views on this matter I respect, whose views on the removal of fluoride I think are genuinely held, to extend to the community that same degree of respect to enable them to have a chance to have their say, to hear the debate, in advance of an irrevocable decision being made.

MR DEPUTY SPEAKER: Order! The time for the debate has expired.

Question put:

That the motion (**Mr Berry's**) be agreed to.

27 September 1989

The Assembly voted -

AYES, 5

Mr Berry
Ms Follett
Mrs Grassby
Mr Whalan
Mr Wood

NOES, 12

Mr Collaery
Mr Duby
Mr Humphries
Mr Jensen
Mr Kaine
Dr Kinloch
Ms Maher
Mr Moore
Mrs Nolan
Mr Prowse
Mr Stefaniak
Mr Stevenson

Question resolved in the negative.

MR BERRY (Minister for Community Services and Health) (10.48): The issue, as I said a moment ago, is that the debate has been emotion driven. The private member's Bill to amend the Electricity and Water Act, if passed into law, may have long and deleterious effects on the dental health of future generations of Canberra children. I think the last time I said that, there was a cry of "Rubbish!", but I also preceded my comments in relation to this matter with the very clear statement that the Government has not taken a position on fluoride.

This is about getting the matter out to the public for consultation, and I think it is a matter of great shame that so far amongst the people on the other side of the house there has been great resistance to the idea of public consultation. In fact, the larger part of them have walked away from it on one significant occasion in the past.

Mr Kaine: We walk away from any charade and we will continue to do it, Mr Berry.

MR BERRY: You might be rather agitated about that, Mr Kaine, but the record is clear - - -

Mr Kaine: I am not agitated at all. You seem to be.

MR BERRY: The record is clear; you walked away from it.

Mr Kaine: I sure did. I am not into games playing.

MR BERRY: If this happened without sensible and informed debate on the issues, today's children, and people who have received the advantages of fluoridated water for 25 years, would never forgive us for loading them, as future parents, with the expense and worry of dental bills and the lifelong problems of reduced dental health their children might suffer.

27 September 1989

On 6 July 1989, Doctors Mark Diesendorf, John Colquhoun and Philip Sutton wrote a letter to Professor John Chalmers, chairman of the National Health and Medical Research Council, headed "Exaggeration of the effectiveness of water fluoridation". Amongst other things it suggested that the recommendations of the council had been unscientific and biased.

These three professionals are closely associated with Mr Prowse, who has presented the Bill to this house. As a result of Mr Prowse's private member's Bill, three professionals who are opposed to fluoridation have approached the National Health and Medical Research Council - the premier group, I think all members would admit. Professor Chalmers sent the letter to Mr David Roder, director of the epidemiological branch of the Health Commission of South Australia, for review, and to Professor Tony McMichael, professor of occupational and environmental health at the University of Adelaide. Professor Chalmers has since invited Professor McMichael to chair a working group for the National Health and Medical Research Council to examine the allegations contained in the letter. Now what is happening, of course, is that there is an attempt to bully this sort of amendment through this house and impose another will on the people of Canberra while an eminent group is considering the matter.

This will be the third group that the council has convened since 1979 to review the council's position on the fluoridation of domestic water supplies. In the two previous reviews, in 1979 and 1984, the council reaffirmed its strong view that fluoridation of water supplies at the recommended level was a safe and effective way of controlling dental decay. It may be that there is some fear that the National Health and Medical Research Council might come to the same decision again, but the proper decision is to wait and find out what this premier group will find in relation to fluoridation.

I mention this in some detail because the proposed Bill, if passed, will effectively remove fluoride from our water supply and, as I said, the views of the foremost body will not be considered in the debate. It would therefore be premature and irresponsible for this house to make a decision on the question without first hearing the result of the working group's findings, which can be examined and evaluated along with public submissions that other organisations and individuals may care to place before an appropriate committee of the house.

When Mr Prowse introduced this Bill on 23 August, his speech contained a number of statements which should be considered in more detail. He said that fluoride is a poison of high toxicity, quoting the World Health Organisation as his source. What was omitted - I think Mr Prowse will agree with me on this - was that the WHO said that poisoning and toxicity are related to dose. The WHO strongly recommends the addition of fluoride to domestic

27 September 1989

water supplies at a prescribed level as an important public and dental health measure.

Fluoride at high levels can be toxic. Similarly, chlorine, a chemically related substance, is a highly toxic gas, yet it is introduced to public water supplies world wide, at a prescribed level, again as a public health measure. I hope an extension of this debate would not be that we should remove chlorine from our water and that those who want to drink clean water can be told that they have the option of chlorinating their own water with tablets or that they may prefer the alternative of boiling the water that they might drink. This seems to me to be an extension of the debate to remove so-called toxic products from the water.

At the prescribed level of dose - one part per million in the ACT - a person would have to consume a bathful of water at one sitting to receive a fatal dose of fluoride.

Mr Prowse: That is a load of rubbish. It is a cumulative toxin.

MR BERRY: I must say this is another angle and, of course, it opens up the emotions again about fluoride, rather than dealing with the facts. It is a clear example. It has also been said that the National Health and Medical Research Council was a group of six people who have hung their academic hats on fluoride.

Mr Prowse: Correct.

MR BERRY: That is your opinion. I guess the National Health and Medical Research Council might have a different view about that. I could say that generally throughout Australia they are regarded as a premier group. I would not like to make that sort of judgment. It would be pretty easy to do it here in the coward's castle, but I think, if you went outside saying those sorts of things, you might be in a bit more trouble.

Mr Kaine: You live in the turret of this castle, do you?

MR BERRY: Well, the Labor Party is on top, if that is what you mean, Trevor.

The council consists of some 25 members, with representatives from the Australian Council of Trade Unions, the Confederation of Australian Industry, the Australian Federation of Consumer Organisations, the Australian Council of Social Services, representatives at the highest level from every State and territory, the Commonwealth Department of Community Services and Health, the Australian Vice-Chancellors Committee and representatives from its own expert principal committees - the Public Health Committee, the Health Care Committee and the Medical Research Committee. The council is funded by the Commonwealth and not, as has been suggested, by Coca-Cola or Cadburys.

27 September 1989

Mr Prowse: That is incorrect again. It was the New South Wales University school of dental health, talking about Coca-Cola. Get it right.

MR BERRY: I must say, Mr Deputy Speaker, I find your protection from interjectors a little bit lacking.

Professor Graham Craig, professor of preventive dentistry at Sydney University, has prepared a detailed response to the member's speech. A resume of his paper will be of interest in this house.

Canberra has fluoridated its water for 25 years. The level of dental health in Canberra's children and adolescents is extremely good. The decay rate is below the national average. The 1987-88 Australian national oral health survey found that there was a 32 per cent difference in the incidence of decayed, missing and filled primary teeth in children aged five to nine years; a 42 per cent difference in decayed, missing and filled permanent teeth in 10- to 14-year-olds; and a 25 per cent difference in adolescents aged 15 to 19. They are fairly substantial figures in anybody's language.

Mr Prowse: On whose figures?

MR BERRY: Well, it is a national oral health survey.

Mr Prowse: Is it scientific?

MR BERRY: The differences were even more marked between Brisbane, the only non-fluoridated capital city, and Canberra: 59 per cent, 53 per cent and 40 per cent, respectively.

Mr Stevenson: Not true.

MR BERRY: We cannot even agree in here, so really that demonstrates the need for it to go to a committee, where they can evaluate these sorts of things.

Mr Kaine: You just need to get properly informed and then we will be able to agree, Wayne.

MR BERRY: We will give you the opportunity, Mr Kaine. You could listen to the expert advice that would turn up before a committee. It seems that the Liberal Party is opposed to public information as well.

Children would have to receive extensive hand fluoridation to keep decay rates under control. In Queensland, each child treated by the school dental service receives a topical application of concentrated fluoride solution. That is said to be - - -

Mr Prowse: How often? It happens here as well.

27 September 1989

MR DEPUTY SPEAKER: Order, Mr Prowse!

MR BERRY: Thank you, Mr Deputy Speaker. It is 12,300 parts per million every 10 to 12 months. What the community and the Government would need to be convinced of is that there would be no return to the old drill and fill cycle. Those of us who suffered poor oral health in the early 1950s would remember the horror of the dental chair.

Professor Craig's paper continues:

From the comments made by some, it is quite obvious that the origins and nature of fluoridation are not understood, fluoridation was not discovered in a laboratory but it is simply mimicking nature. All water supplies contain fluoride as a result of water flowing over soils and rocks prior to reaching the point of consumption. Some water supplies have too little fluoride to provide adequate protection against dental decay, additional fluoride is added to bring the concentration to the appropriate level. Fluoride used in water fluoridation does not come from the aluminium industry. Water fluoridation has now been in operation for over 40 years in more than 20 countries in different parts of the world ... Probably few other health measures have been so critically evaluated. Possible secondary effects caused by fluorides taken in optimal concentrations throughout life have been the subject of thorough medical investigations, which have failed to show any impairment of general health.

There is another problem - minor perhaps for the ACT but possibly significant for our New South Wales neighbours. The ACT Government supplies water to Queanbeyan and other surrounding New South Wales areas. Under the Fluoridation of Public Water Supplies (Amendment) Act 1989 in New South Wales it is illegal for a water supply authority to remove fluoride from the water supply without the authority of the New South Wales director-general of health.

Mr Stevenson: A good democratic principle!

MR BERRY: It was put there by the laws of the people. You might mock the laws of the people.

Mr Stevenson: I do not.

MR BERRY: It cannot be done without the authority of the New South Wales director-general of health, and that is appropriate in terms of the laws which have been decided by the people in New South Wales.

There is some doubt about the relationship between the ACT as supplier and the local New South Wales councils in this regard, and this is yet another example of the haste - and it is the haste that I am trying to point to - in which

27 September 1989

this Bill has been presented without due consideration for all of its ramifications.

Mr Prowse: We have the numbers in Queanbeyan; we are right.

MR BERRY: The numbers might be okay, Mr Prowse, but the issues have to be considered as well. The people - the people outside of this house - who are serviced by these water supplies have to be considered as well, and that is the reason for this debate.

While the ACT has no legally binding responsibility to supply fluoridated water to the surrounding New South Wales councils, they may have trouble with their own State Government's legislation. We heard on the radio the other morning a dentist from New South Wales who talked about the difference between the children in Queanbeyan who had fluoridated water and those outside of the city area who did not. It is all right to say that that is not a scientifically based study, but the fact of the matter is that there is a lot of division amongst the population about the benefits of fluoride, and it is proper for this place to provide proper access to those people to hear the debate in full - not just one side of it, but both sides of the argument.

That is really what those who rubbish the Labor Government's position on this matter are saying. They do not want the people to hear; they do not want the people to have public information on this issue; they do not want them to hear both sides of the story. What the Labor Government is about is making sure that people in the ACT and the surrounding areas hear both sides of the debate. What is being attempted here is to cut the debate off and make sure that people do not know what number crunchers in this place are up to.

The argument has been put forward that, if people want to fluoridate their children's teeth, there are fluoride toothpastes, fluoride tablets and visits to a dentist where a dentist will administer a concentrated solution of fluoride as necessary. That may well be a valid argument.

Mr Prowse: It is.

MR BERRY: It may well be.

Mr Prowse: It is.

MR BERRY: But I am not sure, Mr Prowse, that the rest of Canberra's population will accept your promise that it is the case. The fact of the matter is that they want to hear from an expert group, and I think the National Health and Medical Research Council would provide that sort of a view in relation to fluoride. I respect your views on the matter as well, but I think that you must accept that the people of the ACT are entitled to hear both sides of the

27 September 1989

story in full, not just the bits that either side wants them to hear.

My great concern is not for the well educated, the affluent and the health-aware parent because they are the sorts of parents who would be able to provide their children with fluoride other than by the water supply and who could afford this decay preventing substance. But I am concerned for the ordinary person in the street who is confronted with bills at every turn, who is looking for ways to short-circuit the rising cost of living and who will, as a result of this Bill, find barriers to the benefits of fluoride and the benefits that might flow on to his or her family.

If it can be clearly shown - and it has to be clearly shown to the whole of the population, not just to a select few - by expert and soundly based scientific analysis that fluoride is of no worth to the fight for dental health then it should be removed. But in the Government's view the debate has been no more than shallow and emotive and it would therefore be an advantage to the people of the ACT if they were given access to the debate. I think this is something that they are entitled to and something that we are duty-bound to provide for them - a full debate on the issue before any decisions to interrupt the status quo are taken.

This Assembly will be widely criticised, in my view, if it takes the step proposed by Mr Prowse without proper recognition of the advice of the National Health and Medical Research Council, which is indisputably the peak research body in this country. It is essential that in the interim this Assembly refers this matter for consideration and report by the Social Policy Committee. I do not think that any person in this place can properly argue that there is no role for public consultation on this issue and the right of interested bodies to express their views in a public forum before this very important decision is made to upset the status quo of the provision of fluoride in the water supply which has been in place for many, many years.

MR HUMPHRIES (11.08): Mr Deputy Speaker, I rise to articulate in this debate not the view of the Liberal Party as such but my own personal view on this Bill. Before it was introduced I had very little information on, or understanding of, the issues surrounding fluoride and, as a result, I have done a lot of reading and listening to proponents and opponents of fluoride over the last few weeks. Indeed, my colleagues have also been doing that. I have come to a view on the basis of that evidence, but I acknowledge that there are other members of my parliamentary party, some of whom have been longer acquainted with the arguments in this area, who do take other views, having seen that evidence. The differences between us, I think, are based not so much on philosophical differences but on the fact that there is an abundance of evidence on both sides of the argument and that it is not easy to at the one time discern clearly which of the two

27 September 1989

sides is the better. We were unable to agree on that evidence which we saw as ambiguous. We have no party policy on that. As a result, there is no Liberal Party line in this debate and my colleagues and I will be voting as we see fit.

My view is as follows: I am satisfied by the evidence that has been put before me that fluoride should continue to be added to the water supply of Canberra. I am very much afraid of what will happen to the next generation of Canberrans if we do not continue with the fluoridation of the water supply.

The evidence is very clear, to my way of thinking. Fluoride was originally added to water supplies some years ago - I think, first in the United States when it was observed that areas where there was a natural occurrence of fluoride in the water supply had higher levels of tooth preservation than areas where it did not occur. Many studies were done in the United States, where it was found that the addition of fluoride to the water supplies in areas low in naturally occurring fluoride produced benefits similar to those in areas where it occurred naturally in high quantities.

Canberra's own fluoridation began, as the Minister indicated, in 1964 and I think he might have referred to a survey by Dr Lloyd Carr, published in 1976, which was conducted in 1974, showing that there had been a 71 per cent reduction in caries levels in children aged five and a 51 per cent reduction in children aged 10 which he attributed to the introduction of fluoride.

I mentioned before that there was a multiplicity of evidence, a great volume of it, and it was in some cases contradictory. There is a welter of reports and studies. I have been directed to a paper which lists some 95 studies conducted in 20 countries, all of which purport to show that there has been a significant decrease in caries as a result of the introduction of fluoride in these places. Those studies are there. I understand they are disputed by some, and that is all well and good. I will come to speak about that in a minute.

There are other studies cited by people such as Mr Stevenson and Mr Prowse that allegedly point in different directions. It seems to me that it is very difficult, as I said on the motion to suspend standing orders, for us as politicians to stand in this place, or sit on a committee, and attempt to wade through very technical data about the scientific position to determine whether or not there is really a very clear trend in that evidence in favour of or against fluoride. As a result, I decided to do something else. I decided that, rather than try to read these reports and analyse them myself, I would try to identify referees.

27 September 1989

The Minister referred, I think, to the National Health and Medical Research Council as an expert. Well, in one respect that is true but in another respect it is a referee, a body of people who can be called upon to look at competing evidence conducted in Australia. As the Minister said, it is the chief scientific research organisation in Australia which is able to look at that evidence, analyse it and come to some conclusion. I therefore looked for some respectable, peak scientific, medical or dental organisation in this country or anywhere in the world, national or international, that would take these competing claims, analyse them and assess whether or not the trends were in one particular direction or another. I think it is reasonable for us to do that.

Now, I have not yet been pointed to any such peak scientific, medical or dental association or organisation which has said that the introduction of fluoride in water supplies is harmful - not one. It seems to me strange indeed that nobody, no organisation of that kind, can be found to say that, with this alleged welter of evidence showing that fluoride is bad, fluoride should be removed from water supplies.

Let us look at the sorts of referees to which I turned. The National Health and Medical and Research Council, to which the Minister referred, has done extensive studies over time and it says, without any shadow of doubt it seems to me, that there is benefit in adding fluoride to water supplies. The World Health Organisation, to which the Minister also referred, again recommends the use of fluoride in water. The United States Surgeon-General has done studies and said that fluoride is beneficial in people's water supplies.

Now I turn to the opponents of fluoride. I should say before I go on that I was referred to one report - I assume it was a report; I was not given the full document - of the National Health and Medical Research Council, dated December 1953, which made comments that were adverse to fluoride, but I am not prepared to rely on this. It is 35 years old and it was done before any fluoridation occurred in Australia, and therefore before any studies on populations could be conducted in Australia. I accept the fact that the National Health and Medical Research Council's view has now changed. On the basis of seeing what fluoride actually does to water supplies, it now supports the introduction of fluoride into our water supplies.

The anti-fluoridationists say that there is no valid study which establishes a direct and clear scientific nexus between the ingestion of fluoride and improvements in any person's teeth. Frankly, I tend to think that is probably true - there probably is not such a study. It is also true that there is no single scientifically established nexus produced by research between cigarette smoking and the incidence of lung cancer, or emphysema, or heart disease,

27 September 1989

but most scientific bodies in Australia, and indeed the world, will say that they are satisfied, on the basis of statistical correlation between cigarette smoking on the one hand and these diseases on the other, that there is a nexus between those two things, that the incidence is so high that there is - - -

Mr Duby: Balderdash!

MR HUMPHRIES: One of the three smokers in this Assembly says, "Balderdash". I will remind you of this at your funeral, Mr Duby. Mr Deputy Speaker, I think that that connection is very clearly there in the case of cigarette smoking, and I think it is equally clearly there in the case of fluoride.

Let us for one moment put to one side the studies that have been argued and bandied about in this chamber purporting to show or not show that fluoride is good. I have spoken to some dentists and doctors about this. I have asked them for their view, and their view is almost inevitably that fluoride has actually produced, to their own knowledge and their own observation, benefits to the ACT community.

Mr Berry referred, I think, to the words of Carmelo Bonanno on the radio the other day. I found these very convincing and I find them very hard to go past. I want to refer to the National Health and Medical Research Council report to which the Minister also referred and to quote from the council's 1985 report. After having conducted a study, it said, and I quote:

Fluoride is widely distributed in the environment and the body. Unsubstantiated claims of adverse effects of fluoride in the control of dental caries have been made for almost 50 years. These claims have been based largely on speculation and supposition, and also on unwarranted assumptions concerning the application in the biological context of laboratory studies using extremely high concentrations of fluoride. Extensive investigations both in Australia and other countries have consistently shown that the levels of fluoride used in fluoridation programs were not a health hazard.

In the 1979 report the council said:

There is substantial evidence pointing to a lack of adverse effects of fluoridation. The evidence suggesting various effects, and in particular the recently much-publicised allegations that fluoride leads to an increase in cancer mortality, does not stand up to scientific scrutiny.

Mr Prowse: That was challenged in court and he lost.

27 September 1989

MR HUMPHRIES: Well, you may say that, Mr Prowse, but the National Health and Medical Research Council went through all the claims that had been made by the anti-fluoridationists. It went through all the claims and looked at each one about particular diseases flowing from the use of fluoride - skeletal fluorosis, cancer, Down's syndrome, the connection between fluoride and enzyme function and renal function, allergies, hypersensitivity, mutagenicity, repetition strain injury, dental fluorosis. All of those claims were dismissed. The council said that there was no connection between any of those things and fluoride on the basis of the evidence put before it by the people who said that there was.

Now, Mr Deputy Speaker, I think I have indicated clearly enough that I do not believe that we can rely on that kind of evidence. I believe that we should rely on the more reliable evidence of bodies that we normally trust to give us accurate information about all sorts of other things in our communities and in our everyday lives. I think the simplicity, the simplistic nature, of the argument against fluoride is best summed up by some bumper stickers that I have seen which say something like, "How can fluoride be a poison and a medicine?".

We should think about how simplistically stupid that kind of statement is. Look at things like salt. Our bodies must have certain quantities of salt to survive. We must have salt. But in large quantities salt is very, very damaging - in fact even lethal - to human beings. The same could be said of pure water probably or vitamin C. The question is one of dosage, not whether the substance is intrinsically poisonous or not. To argue otherwise is, I think, frankly antiscientific.

It has been pointed out that other countries in the world have removed fluoride or not taken it up. I am not convinced by that argument either. Australia, for example, has the best air safety regulations in the world; we are one of the few countries in the world to have compulsory voting. I do not think that the fact that other countries in the world do not follow our very laudable lead in these sorts of respects means that we should abandon our own progressive ideas and return to the more primitive ones being used elsewhere in the world.

Mr Deputy Speaker, I will say in conclusion that this Bill assumes something of a conspiracy between government, chemical manufacturers, doctors and dentists in our society. It says that there is clear evidence that damage by fluoride is being subverted by a combination of disinformation, the turning of a blind eye to the evidence before us and self-interest.

Mr Prowse: The Bill does not say that.

MR HUMPHRIES: Well, it does by implication, Mr Prowse, and that hypothesis to my mind simply does not stand up. It

27 September 1989

does not accord with my view of the way that the world operates and I refuse to accept it. In fact, it debases and denigrates the bona fides and integrity of large sections of our community, those sorts of people who have been working for many years in this area, who have seen with their own eyes the effect of the addition of fluoride to our water supply and who say, in all honesty, that they believe that it is a positive contribution to our health system.

I see this Bill as being basically irrational, anti-scientific and even primitive. I hope that our successors in this place in 10 years' time, or whatever time it might take, will have the integrity to acknowledge that in passing this Bill today we have made a mistake and will have the integrity and the honesty to reverse it.

MR MOORE (11.23): Let me start by saying that I think that I, of all the members of the Assembly here, have the most intense personal interest in this particular matter as I have children who are just entering the target years when fluoride is shown to be most important - the years from one to 12. My view is clear and is in line with the Residents Rally policy, that our water supply is not the place for fluoride.

First, let me take on the claim by the Labor Party, that what we require is a public debate on this. One of the reasons why I am most uneasy about a public debate on this particular issue is that it would be so totally unbalanced. On the one hand, the proponents of fluoride in the water are supported by the sugary foods industry - firms like Coca-Cola, Colonial Sugar Refining, Cadbury-Schweppes, Kellogg, and so on. They have access to astronomical amounts of money to which the anti-fluoride lobby does not have access. In other words, one part of that particular group would be able to run, for example, full page ads in the Canberra Times and influence things through the media in that way. Proponents of the other view would not have the same access to the media or the same access to people, and that in itself makes this a particularly unfair debate.

The Residents Rally is the only party that clearly stated its policy on fluoride in its policy summaries in the campaign and, of course, it is incumbent upon us to do what we can to ensure that our policies are implemented. That is what we are going to do. Our policy came about through looking at the research and looking at the facts and figures. Some of the points that have been raised by Mr Humphries do, of course, require further study.

Let me draw attention to one particular area of research and Mr Humphries' reliance upon the National Health and Medical Research Council. I quote from an article by Mark Diesendorf and Wendy Varney. It says:

Australia has also at least one home-grown Foundation with its own industrial links. In NSW,

27 September 1989

the Dental Health Education and Research Foundation (DHERF) was set up in 1962 and has received funding from the food and pharmaceutical industries. Its expressed objectives are "improving dental health education and improving dental research", but a great deal of its resources have been expended on the promotion of fluoridation. In 1979, donors listed in the annual report of the DHERF included Coca-Cola, the Colonial Sugar Refining Company, Cadbury-Schweppes, Australian Council of Soft Drink Manufacturers, Kelloggs (processed breakfast cereals), Scanlens (sweets), Arnotts (biscuits) and Wrigleys (chewing gum).

Obviously when a research group is interested in its research funding, to a certain extent its hands are tied. Each of these parts of the sugary food industry is at major risk if it does not have someone to blame or somewhere to look to change the direction of accusations about the dental industry. It may be that people are actually saying that: perhaps we should be looking carefully at the sugary food industry rather than looking at whether or not fluoride is in the water. And of course I would argue that that is exactly where we should go. Most importantly, Dr Diesendorf then went on to say:

The reliance, not just by the dental profession but also by bodies such as the National Health and Medical Research Council, on institutions deemed to be "expert" in the area, such as those institutions already discussed with their industrial links.

So in fact there is a link coming all the way through to those peak bodies that Mr Humphries has relied on for their research.

Let us first of all ask about fluoridation. Most of the problems that people talk about in relation to fluoridation concern ingestion of fluoride, and by having it in the water supply we have no choice but to ingest. One of the possible solutions, and the solution that I will certainly apply to my children, is not ingestion but rinsing, because the benefits of fluoride have been shown by some statistical analysis to be obtained with rinsing without giving rise to any of the side effects.

Let us remember what we are trying to achieve. We are trying to achieve looking after teeth, and when we look at ways of trying to achieve this it is incumbent upon us to look very carefully at the statistics. Fortunately, in Australia, we have one of the very best forms of statistical analysis. We have the city of Brisbane that has had no fluoride and we have cities like Canberra, Melbourne, Adelaide, Perth and so on that have had fluoride. When Mr Humphries referred to statistics, he used the statistics that were presented by professionals, the pro-fluoride lobby, to show how Canberra has a far better dental caries rate - in other words, fewer caries -

27 September 1989

than that of Brisbane. Therefore, the conclusion to be drawn is that having fluoride in the water gives a greater improvement. In fact, had these members of the pro-fluoride lobby been fair, had they been scientific in their approach, they would also have presented the statistics for Melbourne. When one compares the statistics for Brisbane and Melbourne one finds that they are basically the same; Melbourne with fluoride in the water, Brisbane without fluoride in the water.

When we look at a comparison of the statistics along those lines, then of course we start to ask ourselves why the pro-fluoride lobby does not wish to present a fair picture in the first place and why we would have a situation where one fluoridated city is in exactly the same position as a non-fluoridated city. What is happening in Canberra? What has been happening since the days, as somebody else commented, when we all had our mouths filled with metal? I will tell members what has been happening. There has been a totally different approach to dental hygiene and dental health care since we were children, from the time we were babies. That is really what has brought about these improved figures, and that is particularly clear from Brisbane.

Many other countries have discontinued using fluoride. Of course, that in itself is not an argument. We have to look at the reasons and find out why. If we look, first of all, at those statistics and say there is no particular reason to have fluoride in the water and then we look at the studies done on possible harm - particularly those by the Dutch physician, Hans Moolenburgh, on hypersensitivity and on people with kidney disease and osteosclerosis - we then need to ask whether it is really worth having fluoride in the water. I particularly draw attention to the fact that Canberra is a city where people commonly have hay fever; there is a large number of people with some hypersensitivity. Dr Moolenburgh's study, which covered a very broad range of people, found that hypersensitive reactions could be explained in terms of the toxic effect of this particular agent.

One must remember that we are talking about a cumulative poison. So when Mr Berry talks about drinking a bathful of water, he must realise that we drink more than a bathful of water in our lives. We have a cumulative poison going into our bodies. So, the older we get, the more likely we are to have problems caused by fluoride. At this stage we have not had fluoride in the water long enough to really assess those problems in Australia, but such studies have been done in India. So, when we look at the statistics and when we look at the situation there, we really should ask ourselves what right we have to keep fluoride in the water. My colleague Dr Kinloch will talk about the civil liberties issue, which is one of the major issues that has influenced the Residents Rally, and I believe we will have a few other comments from Mr Jensen about what the normal medical approach should be when there is any doubt.

27 September 1989

MR WOOD (11.33): When Mr Prowse introduced this Bill a month ago, he held up a blown-up colour photograph, which is still around, of some mottled teeth, and it certainly looked very dramatic and rather dreadful. Also, although I did not see the unfortunate person, I believe there was a young Japanese person around this building who had a strange mouth of teeth. These were dramatic indications. I will accept that they were due to fluoride in the water. I do not know that they were. I do not know who the person was or what caused the state of the teeth. The cause of the problem was not particularly identified in any scientific way; it was just said that fluoride caused it. There is a good deal of that around at the moment - just saying things.

Mr Prowse: The patient's dentist identified that.

MR WOOD: I will not deny the point. I will accept that. But, if you want to be more dramatic, I can do something for you. I can suggest you go out to the schools in this city. I have spent a number of years in those schools, and one of the things I have been most impressed with is the bright, gleaming, good teeth of the students in those schools. It is very impressive. That would be dramatic. I suggest that you might talk to the dentists and the dental therapists in the school dental clinics and ask their view about the condition of the teeth of our children.

Mr Prowse: Ask in Brisbane.

MR WOOD: I will come to that. I would think that that would have been the sort of undertaking that an investigation might have been able to do. But let us look at my own example. In the middle of this century, a 15-year-old, as I was then, could expect to have some 13 or so decayed or missing teeth. That was on statistical data. The decay rate was so high that I know that dentists did not know what they should be doing. Because of the high decay rate, many adults had no teeth at all, giving rise to the disparaging comment that Australia was the land of the gum. That was the case, and I am evidence of it because my teeth were not good, despite coming from a family that insisted on the best care they could get for my teeth. I have very clear memories of the way I was required to look after my teeth and still I have got a mouth full of metal.

Today the situation is entirely different. Decay rates have plummeted and it is quite common to see a mouth without a single cavity. Now, if a 15-year-old has four or more teeth with any fillings, it is highly unusual. When the dental nurse came, I used to see the children from my class in school jump up with pleasure. They would go up to the dental clinic and come back with, of course, clear teeth.

A member: Anything to get out of class.

27 September 1989

MR WOOD: Well, it might be anything to get out of a class, but I know in my day I had to be pushed to go to the dentist.

Mrs Grassby: I still need to be pushed.

MR WOOD: You still do? So there is something there that has changed. I have been very emphatic about the care of my own children's teeth and with good result, because when they were young, in that formative age that was mentioned, I was meticulous with them. When they got to the teenage years one of my children in particular, without that close supervision, was less meticulous. But off he went to the dentist the other day and he has, quite undeservedly I think, a perfect set of teeth. That is due to fluoride.

Mr Moore made some comment about changed lifestyles, changed dietary habits which, he expects, have brought about this great change. Well, I do not know; I go to the supermarket and I see shelf upon shelf of Coca-Cola, teeth rottener. It is there. That has increased dramatically. The range of soft drinks has increased; there is no question about that. By coincidence, only the other day there was a report in the news - I have not seen the data behind it - that we are eating just as much in the way of sweets as we ever did. So what changed dietary patterns is the member talking about?

Mr Prowse: Fruit, vegetables and no dripping and bread.

MR WOOD: Yes, that is fine, but we are still consuming the same amount of sweets and, I would expect, much more in the way of teeth rottener in soft drinks. But this is anecdotal, and it is easy to give anecdotal evidence. Let us look at the heavy research that is around the place, and there is no small amount of that. Let us look at research that is objective, that is reputable, that deserves a high standing. Let us look at a rather conservative but meticulous and very thorough body such as the group we have been quoting from, the National Health and Medical Research Council. This is a most reputable body, undenied, and indeed one that is fairly and properly cautious about its findings. That body has kept a continuing overview of the use of fluorides in the control of dental caries and claims of associated health issues.

Mr Humphries referred to its summary of a very comprehensive review. I want to quote that in detail, if I may, because I think it ought to be written in full into Hansard. I quote from this report.

Mr Prowse: What page?

MR WOOD: Page 20, Mr Prowse. It was published by the Australian Government Publishing Service in 1985. It is the report of the working party on fluorides in the control of dental caries. It says:

27 September 1989

Examination of scientific literature confirms previous recommendations by Council concerning the safety and effectiveness of fluoridation of water. Allegations which have been made from time to time concerning particularly skeletal fluorosis, carcinogenicity, congenital abnormalities, interference with enzyme function, adverse effects on renal function, allergies and hypersensitivity and mutagenicity are not supported by scientific evidence.

Mr Prowse: Please turn to page 6 of the same document. There is a contradiction - - -

MR WOOD: I have read the full document. You will have your say. Now, there are any number of scientific references. Look at the national oral health survey which points out clearly the benefits that Canberra children have derived from the use of fluoride in the water. I do understand why there is so much emotion about this. I do understand that some people feel that we should not have this mass medication and I will make some reference to that shortly. But as a result of that emotional input I think there are a lot of misconceptions spread around about fluoridation. Let me correct some of those briefly in passing. Fluoridation was not discovered in a laboratory but is simply mimicking nature. All water supplies contain fluoride as a result of water running over soils and rocks prior to reaching the point of consumption.

Mr Prowse: There is also some strontium-90.

MR WOOD: There is a whole host of stuff. Some water supplies have too little fluoride to ensure adequate protection. Fluoridation is not pollution, as it is a natural constituent of all water supplies. Fluoridation is not mass medication, as it is a preventive dental measure. Fluoride used in water fluoridation does not come from the aluminium industry.

I want to make some reference to the concerns that people have about mass medication. On the surface there is some appearance of validity in that claim because it is putting into water something that we all have to take in. But have a look around. We have already mass inoculation of our young children. There is no parent in this community who would deny their much loved young child, or children, the protection that is afforded through the inoculations that are available.

It was not so long ago that we had a mass anti-TB campaign when we were all required to be X-rayed. That is not so any more. Why not? Because it has been proved successful. TB has been substantially eradicated. That is why it is not so any more. What would happen if we suddenly found a cure for or an inoculation to prevent AIDS? Would we not all race to that mass medication?

27 September 1989

Mr Prowse: No.

MR WOOD: Well, like you, I certainly do not feel the need to be so inoculated. But mass medication is an accepted fact of life in preserving our health and certainly the health of the children who are in our care. Mr Deputy Speaker, the evidence is clear that fluoride is for the public good. As an Assembly, as a responsible group looking after the interests of Canberra, we ought to sustain that and therefore we ought to reject this Bill.

MR DUBY (11.45): Mr Deputy Speaker, the issue that we are debating today is really a simple one, and that is that of freedom of choice. I do not intend to get myself involved in the pros and cons of whether fluoride is a good preventive measure against dental caries or whether it is not. The problem and the issue that we should be looking at is whether it is appropriate that compulsory medication of some kind should be applied to the whole population for something which is certainly not a life-threatening situation.

We all accept the right of the state to interfere in our daily lives - for example, with the imposition of seat belt laws, et cetera. But no-one has ever been killed by putting a seat belt on or wearing a motorcycle helmet. No-one has ever received injury from those. The fact is that there are some members of the population who do suffer adverse effects from the ingestion of fluoride in drinking water. I suppose it boils down to whether we, as the majority, have the right to impose upon those poor folk something of that kind. There is no doubt that some people do suffer bad effects from fluoride. I think that has been proven without doubt. What therefore needs to be done is, instead of having the fluoride compulsorily placed into the drinking water, people should have the freedom of choice to determine whether they and their children are to receive a dose of it.

To that end, at the end of this debate when I am sure the fluoride will have been removed from the drinking water of Canberra, I will look forward to the Minister for Community Services and Health taking steps to make available to those folk in the Canberra community who wish still to continue the ingestion of fluoride for themselves and their children fluoride tablets or fluoride rinses. Whatever the method of ingestion of the stuff, it should be freely made available to all who ask at health and medical centres. I would like to make sure that at the end of the day that is the situation which exists in the ACT so that those who wish to partake of what some people fervently believe is a great preventive measure against dental decay and caries can continue to do so, but that those who suffer ill effects or those who feel that they do not wish to partake in the ingestion of a toxic substance do not have to.

27 September 1989

As things stand now, if someone is adversely affected by the ingestion of fluoride that person is required to take quite expensive measures to remove fluoride from the water which is necessary for one's daily life. Many people who are in this situation are socially disadvantaged. They have great difficulty in affording the not insubstantial number of dollars required to supply these filtering mechanisms to remove the fluoride from the drinking water that applies to them and their family. I think that situation is simply not good enough. If people want to have this stuff - fluoride - in their water they should have the right to do so. They should not be forcing others who do not to be in the same boat as themselves. That is what this whole debate should be about, not the pros and cons of fluoride, whether it is good for you or bad for you, but about the right of the individual to determine his own destiny.

I will be supporting the Bill to remove fluoride from the water. I would urge the Minister to make sure that the appropriate mechanisms are there within the health system so that those who wish to have fluoride for themselves and their families can get it free of charge, no questions asked.

DR KINLOCH (11.49): The members of the Residents Rally do not come to this subject in unseemly haste. This was an issue for the Residents Rally in January and February. Indeed, we had discussions about it at that time. At that time I had many of the concerns that have been raised here today, for example, by Mr Humphries, Mr Berry and Mr Wood, and there was a division of opinion in the Rally. I think that was early on and based on insufficiently well informed opinion. Some of us set about trying to do something about that. I had the opportunity to consult a former colleague, Dr Ben Selinger, at the ANU. In particular I wanted to know about the effectiveness and accuracy or otherwise of the work of Dr Mark Diesendorf. I mean, we are all lay people, are we not? I was certainly assured by Dr Selinger, whom I much respect, about Dr Diesendorf's work and about some of the serious questions that can be raised about putting fluoride in the water in a compulsory way.

That is not to say there are not areas of dispute. Of course there are, and we have heard some of them today. I much endorse Mr DUBY's comments this morning, not only in connection with freedom of choice, about which I wish to speak, but also about offering an alternative. When there is a danger or a potential danger or a difference of opinion, or when some people do not wish to be compulsorily medicated, then there has to be some alternative offered, which he has rightly suggested.

I also much respected the Chief Minister's comments, which should be heard most carefully. Having heard those, and although taking the same view in many ways about them, I want to come to somewhat different conclusions. I agree that on such a matter as putting a potentially toxic

27 September 1989

substance in the water there should be public consultation; and to echo the Chief Minister's comments there should have been that public consultation 20, 25 years ago or whenever it was, before some of us - - -

A member: There was. There was discussion by the advisory council.

DR KINLOCH: Well, I read Mr Arndt's letter on this matter. I do not know the degree to which there was consultation but I certainly agree that such a thing should not be done without public consultation. The problem with public consultation often is that most of the public do not know the details of the matter. So, what I am suggesting is that that process of public consultation now take place in a fully informed manner. But the very first thing that needs to be done before that public consultation can be achieved is to go back to square one, to go back to the place where indeed most people in the world are - I am not saying they are all in a happy position there - where a toxic and possibly harmful substance is removed from the water. I keep using the word "possibly" because I want to see the evidence in due course. Then at the point when a toxic substance is removed from the water I would be happy to support the establishment of a select committee to examine the matter or to put the matter before the Social Policy Committee and to take the most up-to-date, objective advice - and I stress the word "objective".

We have had delegations come to us over the past two weeks. Frankly, there has been bullying of various kinds. I will not go into the details of it, but I certainly felt somewhat harassed and bullied indeed by one of the delegations brought by a public relations person. I felt that that was quite a partisan matter.

The main principle on this matter for me and for many others in this society is not to do with caries; it is not to do with Brisbane vis-a-vis Canberra, although those things are important; indeed, it is nothing to do with teeth. But it is to do with the freedom of the individual to be medicated or not medicated, especially in circumstances in which the medication is directed to only a proportion of the public. In this case, that is children up to the age of 12 or so.

Of course we are all feeling worried about our children and of course we want the best for our children. We also surely want the best for all members of society of all age ranges. There are serious questions about the overall effect of this particular substance which in its pure state, if that is the right way to put it, is toxic. So there are literally scores of thousands of people in this Territory, and in other parts of the world, being forcibly medicated against their will, and that has to be considered.

27 September 1989

So, following the logic of the Chief Minister's argument and in order to protect civil liberties, I wish to remove fluoride from the water and then look at the reasons why, for example, Holland has eliminated fluoride from the water and also whether there are preferable ways to deliver that medication if it is good medication. I would want to see that proven.

I am also worried about the bullying, both from the pro-fluoride people and from the anti-fluoride people. I do not want to be pressured. I want to have a chance to look at this evidence carefully and thoughtfully and without at the same time having the very substance which is being examined continuing to be delivered. So, my reason for supporting the Bill is partly one of delay, of wanting to make sure that over a good period of time there can be a fair look at the matter without the existence of the fluoride in the water while we are doing that.

I do respect Mr Humphries' arguments. I join with him in not wanting to come to any conclusion which is unscientific. It is clear to me, however, that the research data is not conclusive. Some research data is conclusive in one direction, especially if it is related to the subject only of caries. Some research data is conclusive in the other direction if it is not related to the question of caries, but the question of caries is itself dubious, as we have heard from some of the comments, especially those made by Mr Moore.

Both sides, pro-fluoride and anti-fluoride, have been exaggerated and I would like to see studies which do not concentrate on the limited area of caries. The 1984 booklet has been raised by several speakers, and I have looked at it. I do not find it a convincing booklet. We did raise, in the group that came to us, a question about some of the articles in the booklet. I asked specifically that some articles be given and they said that they were too technical. I said, "Well, what material can you give me that isn't technical but really goes beyond the simplicities of that booklet?". For instance, Down's syndrome, about which I have particular concern, was dismissed in a couple of sentences. I just did not think the material was adequate for the kind of discussion we were having.

So what I am asking is that, given the lack of public consultation in the first instance and given the lack of certainty about the matter, we now remove fluoride from the water and at that point, beginning as soon as possible, look most carefully at objective evidence from around the world, to be able to come to some conclusion eventually. Unhappily, one area about which it is very hard to make conclusions is the area which is related to the long-range effects of fluoride. We have only 20, 30, 40 years of evidence. The same kind of thing is true for birth control pills and so forth. However, that research, presumably, will go ahead. But for the moment I will certainly support

27 September 1989

the Bill on the basis of the civil liberties of those who are being medicated against their will.

MRS GRASSBY (Minister for Housing and Urban Services) (11.58): Mr Speaker, I rise to quickly brief the Assembly on the sources of the treatment of the ACT water as it comes under me.

A member: Under you?

MRS GRASSBY: Under me - yes, I had not thought about that - that is very good!

Mr Wood: Are you still floating; that is the main question?

MRS GRASSBY: I tell you what, if we soon do not get out of here, I will be. The ACT receives its water from two rivers, namely, the Cotter and the Queanbeyan rivers. For most of the year the Cotter River system is used exclusively. This water is of very high quality and requires very little treatment. Small quantities of lime are added to correct the potential acidity problems. The water is chlorinated and fluoridated at the rate of one part per million. There is a low residual level of chlorine left in the water after treatment to prevent algal growth both in the supply network and within the household piping systems. It is interesting to note that other systems to treat the water at the source do not prevent algal growth after the water leaves the treatment system.

Water from the Queanbeyan River is used only during high demand periods of summer. This water undergoes full secondary treatment, as occurs in most major cities in Australia. Aluminium sulphate is added during the treatment to settle particles from the water. This chemical is virtually completely removed prior to chlorination, lime correction and fluoridation.

All residual levels of chlorine, calcium and aluminium are constantly monitored to ensure compliance with the National Health and Medical Research Council guidelines. ACT water fully complies with the World Health Organisation and National Health and Medical Research Council requirements for water quality.

I believe that members of the Assembly should have freedom of choice, as should the voters. That is why I support the Government's motion to refer this matter to the appropriate policy committee for detailed consideration so that we can all make a decision. I have no real feeling about it. I do not know. I would like to speak to a lot of people on this; I would like to know what it is all about. I have read one book on it and I have spoken to one person. I have heard other people say it is bad for the health, but I would like the choice. I would like to see both sides of the picture so that I can make up my own mind about the issue.

27 September 1989

I am not happy about adding things to anything, but I still think that we should listen to both sides of the story from experts, not from people like me, who do not know a lot about it. I really would like to see the matter go to a committee so that people could appear before that committee and give us the benefit of their knowledge and then the decision could be made. If the decision is then made to take fluoride out of the water, I will fully support that.

MR JENSEN (12.02): Minister Berry, I would suggest, summed up this issue quite well when he used the word "may" during his speech in relation to the effects of fluoride. However, what is not in doubt about this whole matter is that fluoride is a poison and that there are people in our community who are sensitive to this substance, whenever and wherever they ingest it.

Another key factor in the debate was stated by the Chief Minister when she said - and I will try to quote correctly - "a view commonly held that fluoride reduces tooth decay". I think the key words in this particular statement are "commonly held". The evidence, in fact, on both sides of the argument is conflicting and the debate today clearly shows how conflicting the issue is.

However, it seems to me that, when there are any doubts about a public health matter, we should err on the side of public safety. The Rally supports the concept of fluoride being made available as a free service to those who wish to use it. However, we do not support, as our policy clearly says, the idea that it should be forced on those people who do not wish to use it or do not have to use it. Let me close my remarks by saying that on public health issues, when there is doubt, don't, or in this case, when there is doubt, take it out.

MR COLLAERY (12.04): Mr Deputy Speaker, let me give just a few anecdotes, because I notice that Mr Wood said a number of anecdotal things without reference really to all of the prepared documentation on the subject. Before I cast a few anecdotes, I say that I personally support Mr Prowse's Bill on this matter. The Rally, as you now note, is united on this subject, and it was on the agenda in the Rally's original documentation a number of months ago.

Mr Deputy Speaker, for five years my four children grew up in France, in a non-fluoridated, non-milk-pasteurised zone. They have too many teeth and are all healthy, and I have been paying through the teeth to get their extra teeth out since they came back to Australia. I remain personally unconvinced that fluoride has done anything for them. It may well be that the nuclear reactor we lived near has done something for their teeth, but the fact is that the Rally supports the removal of the substance because, as my colleague Dr Kinloch said, we oppose it on scientific and in-principle grounds.

27 September 1989

I personally am more swayed by the philosophical grounds that we should not medicate, or "drug" - whichever term you wish to use - the majority of the populace for a minority group. That is a Jansenite theory which I have rejected before in this Assembly. I maintain that we need to look for other measures if it can be proven that fluoride is useful for a lower age group. I mean also to take into account the very serious medical issues that may concern preventive dentistry. In my comments I try not to make light of the issue but simply to indicate that on philosophical grounds I am opposed to an element being added to our water system when we have found throughout the twentieth century that wonder drugs have other effects. We find out afterwards. Looking around, one never knows what has been at work on us over the last few years.

MR STEVENSON (12.07): The question we are debating obviously involves a raging controversy on the medical side of the matter, but the real question we should be looking at is that of individual rights. Should people have the freedom of choice to determine those drugs they so choose to take? Should it be a matter of individual rights or should they be compulsorily medicated via their drinking water, which is an essential product, although fluoride is not? One of the results of the Victorian inquiry in 1979 was that it was inconclusive that fluoride was an essential element to mankind.

We could look at why it is that approximately only one per cent of the world's population are fluoridated compared with over 70 per cent of Australians. Are we more enlightened, or is it something else? From an ethical point of view, some people in this Assembly would suggest that we do what no single doctor in Australia ethically can do and that is force any individual to take a drug against his or her will; nor can any doctor, prior to a complete and thorough medical examination, prescribe any medicine, drug or chemical to any patient. These things are covered within the medical code of ethics. Nor can doctors prescribe a medicine in an uncontrolled dose. They cannot say to you, "Yes, take the drug any time you feel thirsty". If they did, they would no doubt be struck off the medical register and, if there were a problem caused by that, no doubt they could be successfully sued. Yet some members of this Assembly recommend that we should make the decision to do that which no doctor ethically can do in this country.

The information that was given - Mr Humphries mentioned it a short while ago - by the dentists and the doctors in this town to a meeting a few days ago stated that fluoride is not a mass medication. That is simply not true. The Food and Drug Administration of America, the national body handling additives to food and water, said fluoride, a drug - that is, a medicine - is "something that aids in the prevention of dental caries". That was on page 39869 in September 1985.

27 September 1989

Fluoridation is something that should not be discussed in a democratic society. The suggestion of forcing the population - every man, woman, child, plant and animal - to take a medicine that supposedly only benefits the teeth of children up to the age of 12 would more suit a totalitarian regime than a democracy.

So let us have a look at the effect on teeth. Is there any benefit to young children's teeth from fluoride? One of the studies that is used throughout the world to show that there is a wonderful benefit for children's teeth is the Hastings study in New Zealand. Let us look at the facts behind that study. The study started out with the control town of Napier. After some years, when it was shown in a dental survey of two towns in 1957 that the children aged under 10 in Napier, the unfluoridated town, had better teeth than those in the fluoridated town of Hastings, Napier was dropped as a control and is not now mentioned.

Dr John Colquhoun was the chairman of the Dental Health Association of New Zealand and the chief dental officer in Auckland. He was a strong promoter of fluoride for New Zealand. He was a respected member of the Health Department - that is, until he started to speak against fluoride. He presented figures that showed that up to 23 per cent of mottling was occurring in the children's teeth in Auckland.

Let us have a look at what mottling is and, once again, let us have a look at the facts of these matters. Mottling is when the permanent teeth of children tend to erupt more or less chalky white in colour and later tend to become pitted and stained yellow, brown or almost black with heavy ingestion of fluoride. Dorland's Illustrated Medical Dictionary defines mottled enamel as "a chronic endemic dental fluorosis that is found in communities using a drinking water that contains one part or more per million" - one part per million, that part that is added to the water of Canberra.

In the book that Mr Humphries mentioned by the NHMRC, the report of the working party on fluorides in the control of dental caries, under dental fluorosis it states:

The use of fluoridated water at recommended levels during tooth formation may lead to some insignificant dental mottling. This is not of aesthetic significance.

Tell that to the children who will not smile because they are embarrassed by badly mottled teeth.

Mr Berry: How many do you know?

MR STEVENSON: I know a number, Wayne. I have personally spoken to a number of people who have mottling of teeth. One woman was told that the mottling was brought about by using the wrong toothpaste. That is what a dentist told

27 September 1989

her. I know of a lot more cases; I have been associated with the area for a long time. The NHMRC statement here runs totally contrary to the Illustrated Medical Dictionary and its statements.

It has been said by Mr Berry and Mr Humphries that the NHMRC is the peak body in Australia. Indeed it is; but let us have a look at the fact that it said that fluoride is perfectly safe for teeth. Can it be wrong? It also said that the Dalkon Shield was perfectly safe; DDT was safe; Debendox was safe; copper 7 was safe; DES was safe; 2,4-D was safe; 2,4,5-T was safe. I am not saying that the NHMRC does not do a lot of useful things, but I certainly suggest that it could be wrong, and it has been wrong often before.

Let us have a look at Sydney. There was a dental survey team which showed that there was only a two per cent reduction in dental caries, not the 60 per cent that is often claimed - only two per cent over a four-year study in Sydney. The team later admitted that they had selected children with above-average numbers of sound teeth. A scientific survey? Not likely.

The US National Institute of Dental Research, a peak body, conducted a survey of 39,207 children aged between five and 17 years which confirmed reports of other countries regarding the ineffectiveness of fluoridation. Its data showed that children who had drunk fluoridated water all their lives had no fewer decayed, missing or filled teeth than similar children raised in non-fluoride areas. It is unfortunate that that body did not publish openly the results of its work and that that information had to be obtained by Dr John Yiamouyiannis under freedom of information requirements. It is unfortunate that the debate on this issue has not been opened.

Mr Jensen mentioned that fluoride is a poison. If one looks in a medical dictionary one will find it listed as a rodenticide and an insecticide. That means it kills rats and insects. We are told that that does not really matter; obviously it depends on the dose one takes. In the 1970 booklet *Fluorides and Human Health*, the World Health Organisation stated that fluoride accumulates in the body. This particular rat poison builds up in the body. It is not only the dose one takes; it is whether one continues with the dose. It builds up in bones. It also builds up in the soft tissues.

Today we have talked about scientific research. What research has been done on those various other parts of the body? We talk a lot about teeth, but what about the other organs in the body? I say that there has been no scientific research conducted in Australia to look at the adverse effects on the rest of us, apart from our teeth.

There is no doubt that we have a raging controversy. This raging controversy is only on the medical side, not on the human rights side. There is no controversy there; it

27 September 1989

should not be done. But where should this controversy be looked at? Well, in America in 1978, 1980 and 1982 there were three court cases: the first in Pennsylvania, the second in Illinois and the third in Houston. In those cases, where both sides had the best opportunity ever to present their case, the judges in each of those cases decided that fluoride was a health hazard and a carcinogen. That evidence has never been refuted. In a study in America, Doctors Burk and Yiamouyiannis - and let us look at medical evidence - proved that the incidence of cancer increased in those areas of America that were fluoridated. There were fewer cancer deaths in unfluoridated areas in America.

The proponents of fluoride, throughout the years, have said that Burk and Yiamouyiannis did not adjust for age, race and sex, but in the court cases that I mentioned it was proven and acknowledged that Burk and Yiamouyiannis had adjusted for age, race and sex. Yet the proponents continue with this nonsense of trying to state that that was not a scientific study. The head of the AMA in the ACT made this very same statement a few days ago - that the Burk and Yiamouyiannis study had not adjusted for age.

That is the sort of medical nonsense that is presented in what has been called an emotional debate. People do get emotional when the truth is not told. It is unfortunate. It is not through lack of investigation of scientific people proving the harm caused by fluoridation; it is the fact that these things unfortunately usually are not reported. There was the case of Dr Frederick Shatz in Chile. He showed a vast increase in the incidence of cancer and other drastic diseases in Chile caused by fluoridation. That brought about the restriction of the fluoridation in the water supply of Chile in 1970, I think it was.

Mr Berry: What did they restrict it to?

MR STEVENSON: They took it out altogether, Wayne. Thank you for bringing up the point. That study was fully submitted to the Medical Association and Dental Association in America, but they have never published that. Who is Shatz? Shatz was the co-discoverer of streptomycin, the antibiotic for which a Nobel Prize was given. We talk about peak bodies and scientists.

So why is it that doctors and dentists maintain fluoridation? Not all doctors and dentists do, by any means, but the associations maintain fluoridation. It is because they have based their reputations on the fact that fluoride is safe when countless studies and medical evidence show that it is not. It is not the job of opponents to prove harm; it is the job of proponents to prove safety. So I commend those people who have spoken out against fluoridation. It is not only a matter of knowing the truth, but of having the courage to speak the truth - particularly scientists, and I commend them on that.

27 September 1989

It is about time that fluoridation was stopped totally in Australia, and it is a valid argument that it should start on a major scale with the prevention of the addition of fluoride to the water supply of the Australian Capital Territory.

MR WHALAN (Minister for Industry, Employment and Education) (12.22): I would like to commence my remarks by reading the full text of the letter referred to by Dr Kinloch, the letter written by H.W. Arndt and printed in the Canberra Times on 26 September. The text of the letter is:

As one of the few surviving members of the ACT Advisory Council which in the 1950s, on the strong advice of the World Health Organisation and the Commonwealth Medical Officer and with the support of the overwhelming majority of the dental profession, recommended to the minister the fluoridation of the Canberra water supply, allow me to urge the House of Assembly not to undo a reform which has conferred great benefit on the children and people of Canberra.

While the question was under discussion, we were flooded with scurrilous propaganda from cranks who denounced fluoridation as a Jewish-communist conspiracy and predicted all sorts of disastrous consequences. There has been no evidence of any such consequences, but the cranks are still at it.

Let the Assembly listen to professional medical opinion, not to ill-informed scaremongers.

I would like also to refer, Mr Deputy Speaker, to an article that was in the Canberra Times on the same day, 26 September, under the heading "No fluoridation, no ring of confidence". The article reads:

The Australian Dental Association has slammed a proposal to remove fluoride from the ACT water supply, saying it would re-introduce trauma for children going to the dentist.

Association spokesman John Fricker said yesterday that there were no proven adverse effects from fluoride use and the benefits were widely accepted.

The United States Surgeon-General issued in July last year a nutrition report reviewing 2500 research studies, Mr Fricker said. The report had recommended that a water supply should contain 1 mg of fluoride a litre.

The Australian National Health and Medical Research Council had in 1985 reaffirmed its previous recommendation that water fluoridation was an effective control of dental decay.

27 September 1989

Mr Fricker said the council working party had investigated matters linked to cancer, Down's syndrome, kidney function, allergies, birth defects and RSI, and found no tie to fluoridation.

Mr Fricker said people who did not like fluoride could purify their own water. A disease caused by fluoride, fluorosis, was only attributable to excess fluoride and was "very uncommon".

I refer to those two recent publications in the Canberra press, Mr Deputy Speaker, because the issue is one which has had very little opportunity for public discussion and public consultation. If one goes through the newspaper files, one will see that, contrary to the normal interest in the ACT in social issues, on this particular matter there has been very little opportunity for discussion. I think that the Canberra community will be very disappointed if this Assembly lends itself to legislation by stealth, social change by stealth.

What I find very difficult to comprehend is the attitude of the Residents Rally party, which has continually stressed its supposed commitment to consultation with the community in relation to matters of importance. I would take the opportunity to refer the Assembly to, and to remind members of the Residents Rally party of, some of the things which they have said in their policy document. The very first sentence in the policy statement of the Residents Rally says:

Self-government has been foisted on the ACT without real consultation.

The emphasis here for the Residents Rally party is clearly that, if they were in a position to determine this, then they would ensure that there would be consultation. Such a proposal is totally inconsistent with the attitude that they are taking in relation to this draconian legislation which is before the Assembly today.

The policy which is headed "Welfare, Social Justice and Ethnic Affairs" commences with the wording:

The Residents Rally for Canberra is fully committed to consulting with the residents of Canberra at every level.

How can we reconcile these sorts of pledges with this behaviour that we have seen here today on the part of the Residents Rally party? I have taken the opportunity to leaf through the policy of the Residents Rally party in other areas and there is one constant theme, Mr Deputy Speaker, which continues to emerge throughout their policy, and that is a commitment - I should now say "an alleged commitment" - to community consultation, which is clearly totally absent from their commitment to support this

27 September 1989

legislation now before the Assembly, because they are denying the citizens of Canberra the opportunity to be consulted on this issue before the drastic and irreversible action is taken to proceed with this particular course of action.

Mr Deputy Speaker, I would refer you to several of the policy areas of the Residents Rally party as an indication of the contradiction, inconsistency and sheer hypocrisy of the position which its members have taken on this particular matter. On the regional issue of the Canberra Airport, the Residents Rally party was committed to an international standard airport, subject to an environmental impact statement - in other words, community consultation, as elsewhere.

MR DEPUTY SPEAKER: Order! As the time for private members' business has expired, the debate is interrupted in accordance with standing order 77, as amended by temporary order. The member speaking has leave to continue his remarks when the debate is resumed.

SUSPENSION OF STANDING AND TEMPORARY ORDERS

MR KAINE (Leader of the Opposition) (12.30): I move:

That so much of the standing and temporary orders be suspended as would allow private members' business to be called on forthwith at the conclusion of questions without notice and having precedence of executive business for a period not exceeding two hours.

Let me say, in support of my motion, that this matter currently before the house has not been concluded. It is a matter of great public importance, and that is why the debate has continued as long as it has and in as great detail. The debate should be finished. There are other matters on the private members' list of considerable importance. I refer specifically to things like the independent audit of our assets and liabilities. In view of the budget yesterday, that is of increasing and enormous importance. There was a motion from Mr Moore concerning AIDS, illegal drugs and prostitution, and I know that the Chief Minister was in favour of dealing with the question of prostitution because she said so on the floor of the house.

These matters are important. There are, I agree, matters of importance on the Government's list, but we will get to them, and if we do not deal with the private members' business immediately it will be deferred for at least three weeks. I believe that we must extend the time to allow these private members' matters of importance to be dealt with.

27 September 1989

MR WHALAN (Deputy Chief Minister) (12.32): I think the first thing that has to be said about this matter is that on Monday, when we were discussing the business of the Assembly for this week, a proposal was put forward by the Government that last night's sitting be devoted to private members' business. The Residents Rally party refused that proposal outright on the basis that there was too much government business on the business paper, that that should be dealt with and disposed of, and that private members' business should be confined to the Wednesday morning, as provided for in the standing orders. Now, quite clearly, having made that proposal, the Government has then proceeded to order its business on the expectation that the Residents Rally party would honour the position that it had adopted in relation to this matter only 24 hours previously.

It is very difficult to reconcile the behaviour on this matter - and I am assuming that there has been a caucus between the Liberal Party and the Residents Rally party on this particular issue - - -

Mr Kaine: On a point of order, Mr Deputy Speaker; that is a reflection on the members of the Liberal Party. No such caucus has taken place and I would ask - - -

MR WHALAN: I withdraw unequivocally. To suggest such a thing is to suggest the most terrible bad taste on the part of the Liberal Party. We must consider the consequences of what we have before us. First of all, an opportunity is provided during private members' business for the sorts of business that we have had before the Assembly today. Mr Prowse has introduced a most draconian piece of legislation which, if it is adopted by the Assembly, will have the most far-reaching and disastrous effects upon the health and well-being of our community.

Members interjected.

MR WHALAN: It could be demonstrated from the hysteria on the other side of the chamber that there is a difference of opinion on this particular matter, and it is for that reason that we believe there should be a sane debate, not this steamrolling effect; that there should be a sane inquiry; that there should be the opportunity for consultation with the community instead of this steamrolling effect that we are finding thrust upon the Assembly, with its consequences for the people of the ACT. As a result of the motion which will take two hours of government business this afternoon, that business which is of considerable importance to this community will not be debated until after 5.00 pm.

Mr Collaery: Tell us what the government business is that is of considerable importance.

MR WHALAN: Mr Deputy Speaker, can you protect me from this person?

27 September 1989

MR DEPUTY SPEAKER: Just continue at this stage, Mr Whalan. If you need protection, I will step in.

MR WHALAN: There is a very important report on a matter coming from the Minister for Housing and Urban Services which is of the greatest concern to this Assembly. It is the housing review. I would say that this motion of Mr Kaine's is a ploy to deny the Government the opportunity to raise this vital and crucial matter in the chamber this afternoon.

In addition to that, it is essential that we have introduced into the chamber today - and again an agreement was reached with the Liberal Party, the Residents Rally party and the No Self Government Party on this particular format - the Gaming Machine (Amendment) Bill, because there are revenue consequences in relation to this. It would be totally irresponsible for the members opposite to deny the opportunity for this legislation to come through. We have given evidence that if this is not completed this week there will be substantial revenue lost to the ACT Treasury. Now, in addition to that, Mr Deputy Speaker, the government business which will be denied - - -

MR DEPUTY SPEAKER: Order! Mr Whalan, your five minutes have expired.

MR KAINE (Leader of the Opposition) (12.37): I move:

That the question be now put.

MR DEPUTY SPEAKER: The question is that so much of the standing and temporary orders be suspended as would allow private members' business to be called on forthwith - - -

Mr Whalan: The question is that the question be put. That is the gag. Trevor Kaine just moved the gag.

MR DEPUTY SPEAKER: Right; thank you. The question is that the question be now put.

Mr Berry: Mr Deputy Speaker, on point of order; I think that Mr Kaine just moved the gag.

MR DEPUTY SPEAKER: Mr Berry, I understand that you want to raise a point of order.

Mr Berry: Thank you, kindly. The point of order that I wish to raise is that I heard Mr Kaine plainly - - -

Mr Kaine: I withdraw my motion, Mr Deputy Speaker.

Mr Berry: My point of order lapses in that case.

MR DEPUTY SPEAKER: Right; the question is that so much of the standing orders and temporary orders be suspended - - -

27 September 1989

Mr Kaine: No. I have withdrawn my motion.

MR DEPUTY SPEAKER: You have withdrawn that, right.

MR KAINE: No, I do not withdraw that motion.

Mr Whalan: Let us adjourn. He just withdrew.

A member: But he withdrew his withdrawal.

Mr Kaine: No, I withdrew the gag, Mr Whalan.

Mr Whalan: No, he withdrew the motion. I raise a point of order, Mr Deputy Speaker.

MR DEPUTY SPEAKER: Resume your seat, Mr Whalan.

Mr Whalan: But he withdrew his motion.

Mr Kaine: That was a misunderstanding. I withdrew my gag motion, Mr Whalan.

MR DEPUTY SPEAKER: He withdrew his gag motion.

Mr Jensen: Mr Deputy Speaker, on a point of order; I understand that you requested Mr Whalan to resume his seat. He has not done so.

MR DEPUTY SPEAKER: I ask both members to resume their seats.

Mr Whalan: Mr Deputy Speaker, on a point of order; this is becoming outrageous. Very clearly Mr Kaine said, "I withdraw my motion". The only motion before the chair was the motion to suspend standing orders. Clearly, that is the only motion which he is capable of withdrawing. You accepted that withdrawal, Mr Deputy Speaker, and I put it to you that you adhere to your own rulings.

MR DEPUTY SPEAKER: I will just take advice on that, Mr Whalan.

Mr Kaine: I will move the motion again if Mr Whalan would like me to clarify it.

Mr Whalan: Well, I am quite happy to debate it again, too.

Mr Kaine: We might move the gag again, too.

Mr Whalan: We know that the opposition will deny democracy. We are used to that. It is taking fluoride out of the water without any consultation. There is nothing less democratic than that.

Mr Prowse: It went in without consultation. This is correcting the situation.

27 September 1989

MR DEPUTY SPEAKER: Order! I have just taken advice. Mr Kaine removed his closure motion. The original motion still stands. That motion is:

That so much of the standing and temporary orders be suspended as would allow private members business to be called on forthwith at the conclusion of questions without notice and having precedence of executive business for a period not exceeding two hours.

Question resolved in the affirmative.

PLANNING, DEVELOPMENT AND INFRASTRUCTURE - STANDING COMMITTEE
Reporting Date and Printing and Circulation of Proposed Report

Motion (by **Mr Collaery**) proposed:

That -

- (1) the resolution referring the redevelopment of the Canberra Times site to the Standing Committee on Planning, Development and Infrastructure for consideration and report be amended by omitting "28 September 1989" and substituting "17 October 1989";
- (2) if the Assembly is not sitting when the Standing Committee on Planning, Development and Infrastructure has completed its inquiry into the redevelopment of the Canberra Times site the committee may send its report to the Speaker or, in the absence of the Speaker, to the Deputy Speaker who is authorised to give directions for its printing and circulation; and
- (3) the foregoing provisions of this resolution have effect notwithstanding anything contained in the standing orders.

MR WHALAN (Minister for Industry, Employment and Education) (12.42): Mr Deputy Speaker, I would like to speak to this motion.

Mr Kaine: You ought to be careful.

MR WHALAN: In relation to this particular motion Mr Kaine is acting in a threatening and bullying way by interjecting across the chamber. Mr Deputy Speaker, there was no discussion in relation to this change of procedure. Earlier today when there was a slight change in procedure the courtesy was paid to all the parties and they were informed that such a change would be taking place. Each Monday a considerable amount of time and effort is devoted to discussing the business of the Assembly for the week to ensure that the procedures of the house are reasonably predictable and the business of the chamber - - -

27 September 1989

Mr Kaine: I raise a point of order, Mr Deputy Speaker. Are we debating Mr Collaery's motion? If we are not, just what is it that Mr Whalan is speaking to?

MR DEPUTY SPEAKER: Yes, Mr Whalan, what are you speaking to?

MR WHALAN: I am debating the motion.

Mr Collaery: Mr Deputy Speaker, I have not spoken to my motion yet.

Ms Follett: You had your chance.

Mr Collaery: I would be quite happy to delegate one of my colleagues to speak to it if Mr Whalan wishes to be on his feet all lunch hour.

MR DEPUTY SPEAKER: Please resume your seat, Mr Collaery. Please continue, Mr Whalan.

MR WHALAN: The point which I wish to make is that we do have some procedures of communication so that the business of the Assembly is predictable. The fact is that we do not have any problem with this particular motion, and I think it is an appropriate way to deal with this particular issue, given the circumstances which are beyond the control of the Assembly and the committees. So we would support the motion which is being put forward by Mr Collaery, and we had at all times intended to do that. However, the manner in which it was raised causes us concern, and I suggest that in future there be some courtesies in relation to raising matters of this sort.

MR DEPUTY SPEAKER: Thank you, Mr Whalan. I do take your point there. I assumed that this motion had been discussed and was by consent, as it were, and I am rather surprised it has not happened. I think there indeed should be consultation beforehand.

Mr Whalan: Before fluoride?

MR DEPUTY SPEAKER: I do not know about that.

Question resolved in the affirmative.

Sitting suspended from 12.44 to 2.30 pm

PETITION

The Acting Clerk: The following petition has been lodged for presentation, and a copy will be referred to the appropriate Minister:

Education

To the Speaker and members of the Legislative Assembly for the Australian Capital Territory.

The petition of certain residents of the Australian Capital Territory draws to the attention of the Assembly:

That in the proposed budget of the Australian Capital Territory Government there are plans to cut millions of dollars from public education. These cuts will critically undermine the standard of public education in this Territory in a number of ways including:

- . cutting out reading recovery programs
- . decreasing course options
- . increasing class sizes
- . eliminating professional support for preschools
- . decreasing all counselling and support services
- . cutting such vital programs as English as a second language.

Your petitioners therefore request the Assembly to:

Reject all budget proposals which cut funding to public education in the Australian Capital Territory.

By **Mr Whalan** (from 514 citizens)

Petition received.

QUESTIONS WITHOUT NOTICE

ACT Ambulance Service

MR HUMPHRIES: Mr Deputy Speaker, my question is to the Minister for Community Services and Health. Can the Minister explain why Canberra residents who subscribe to the ACT ambulance scheme are still being billed for their annual subscription while, at the same time, the Government proposes that the ambulance scheme will be funded through a new levy on private health insurance contributions? Is the Government deliberately intending to charge people twice for the same service or does the Government intend giving people who renew their subscription a refund once the new scheme is up and running?

MR BERRY: This is a three-barrelled question. The first part relates to the ambulance subscription scheme, which is currently administered by the department. What I can say

27 September 1989

to Mr Humphries, Mr Deputy Speaker, is that people who hold private health insurance will automatically subscribe to the ambulance scheme. The cost of this insurance will be the same as for the scheme itself. People who do not wish to take out private health insurance will be able to obtain ambulance-only cover. The proposal is designed to streamline the administration of the scheme and will not involve any person in excessive cost. I think that answers all your questions, but in a different way from the way in which you approached them.

MR HUMPHRIES: There is no double taxation. Is that what you are saying?

MR BERRY: No.

Yarralumla Brickworks

MR JENSEN: Mr Deputy Speaker, my question is directed to Mr Whalan, the Minister for Industry, Employment and Education. In view of the recent problems of the Hooker Corporation and the fact that the details of the terms of agreement between Hookers and the ACT Administration have not been made public, is the Minister satisfied that all conditions in the yet to be released terms of agreement for the development of the Yarralumla Brickworks site will be met?

MR WHALAN: I thank Mr Jensen for the question, Mr Deputy Speaker. Representatives of Hooker Projects have had discussions with the secretary to the Department concerning the implications of the Hooker collapse on Hooker's local activities in the ACT. The future of the operations of Hooker Projects is being considered by the provisional liquidator but has, as yet, not been determined.

Discussions with representatives of Hooker Projects reveal it is possible that a joint venture arrangement for the development of the brickworks will be proposed by the liquidator. Should this course of action be proposed, the ACT Government will need to consider a range of options. Hooker Projects has not received all necessary in-principle development approvals for the redevelopment of the Yarralumla Brickworks. The offer of lease of the brickworks site and adjoining land made to Hooker Projects on 17 March was conditional upon compliance with heritage and environmental legislation and the degazettal of a former proposed tourist road.

Policy plan changes to the Yarralumla policy plan and the Yarralumla Brickworks policy plan are also required. It is expected that the Territory Planning Authority will release the draft policy plans in October. This process will involve full community consultation. No approval to any plans for the development can be given until these processes are finalised. Officers of the Administration

27 September 1989

have already had three meetings with representatives of the Yarralumla Residents Association and I understand that the planners have had two meetings. The association has been advised that officers are available at any time to discuss the redevelopment with the residents.

MR JENSEN: I have a supplementary question, Mr Deputy Speaker. Is it proposed to release the details of the terms of agreement to the public, and when is that likely to take place?

MR WHALAN: There will probably be aspects of the terms of agreement which may be commercial in confidence, so it may not be appropriate for them to be released, and that is a normal situation. The Government is engaged in business of that sort. I will take that aspect of the question on notice and I will come back to the member on that.

Birthing Centres

MR MOORE: My question is to Mr Berry, the Minister for Community Services and Health. I provided him with a copy of it earlier. The Federal Government budget allocated \$5m to the establishment of birthing centres throughout Australia. Will the Minister tell the house how much of those funds has been allocated to the ACT?

MR BERRY: Yes. Mr Deputy Speaker, Mr Moore did provide the question to me and I am in the process of putting together an answer for him on the matter. I will make sure that he gets that at the very earliest moment.

Currong Flats

MR COLLAERY: Mr Deputy Speaker, my question is directed to Ellnor Grassby, as Minister for water purity. I refer to the report by Graham Downie in the Canberra Times on 15 August 1989, indicating that the ACT Housing Trust intended to spend \$1.3m to replace water and space heating systems at the Currong Flats. The report indicates that it is planned to replace the gas fired central boiler with individual 160 litre hot-water systems in each of the 212 flats and to provide each flat with an electric heater.

The report goes on to say that the decision to change from gas to electricity has been made despite acknowledgment by the trust and ACTEW that gas was cheaper for large-scale heating. The report adds that it is now the policy of the Housing Trust, which you administer, Minister, to have individual unit occupiers pay for their own electricity. Will the Minister advise what the reasoning is behind the trust's decision to arrange for individual occupants of flats such as Currong Flats to be levied individually for their electricity usage when the overall cost to those people appears to be greater?

27 September 1989

MRS GRASSBY: Yes, that is true. We are replacing the system that is there at the moment, which is completely defunct and does not work any more, so much so that some people down one end of the flats are boiling to death and those at the other end are freezing. So it had to be replaced. It is not true that we did not look into gas heating. We did. When looking into gas heating and looking into electricity we found that it would not cost the tenants of the flats that much more, and they would also be able to turn the heating up and down as they wished.

Also, we have formed a tenants committee there. We had a meeting with the tenants committee just recently, and they are very happy with what we are doing. We are not having any complaints about it. So what you are reading in the paper is not quite correct. I can get you the whole details on it, if you would like, Mr Collaery, and you can read them.

MR COLLAERY: I have a supplementary question, Mr Deputy Speaker. In view of the fact that the Rally has been approached, or my colleague Mr Moore has been approached, by the spokesperson for that residents group with a complaint about this very matter, will the Minister undertake to get further advice to determine whether her advice is correct that the residents are satisfied?

MRS GRASSBY: I would be very happy to do that, Mr Collaery, and let you know the very moment I find out.

Tuggeranong Community Arts Festival

MRS NOLAN: My question is to the Minister for Housing and Urban Services and it relates to the recent Tuggeranong Community Arts Festival. Could the Minister please explain why she informed the organisers of the festival only one or two days before the festival began of the amount of funding that they were going to receive?

MRS GRASSBY: I think I have already told Mrs Nolan, when she came to see me about that, that when it came across my desk it had to be agreed to by that time. As I said to Mrs Nolan at the time, if they were running a festival thinking that they were going to get money out of that fund, then I do not think they were very good at running a festival. I think that they should have organised themselves. If they had got the money, then it would have been a different matter. When I got the brief on my desk I went through it. Then they were rung up, three days before, I think it was, by one of the members of my staff and told the amount that they had. Normally, they would not have known then. They would have had to wait for a letter to go out, as everybody else did. But, because they had been ringing the office on and off and ringing other people, we rang them and paid

27 September 1989

them the courtesy of letting them know about three days before the festival.

MRS NOLAN: I ask a supplementary question. Given that the committee that made the recommendations in relation to this area of funding met some four to six weeks beforehand, could you tell me why there was such a lengthy delay?

MRS GRASSBY: No. I am sorry, Mr Deputy Speaker. I cannot tell Mrs Nolan why there was a lengthy delay about it. By the time I got it, it was about two or three days before it had to be signed, and I do not know why there was a lengthy delay at all.

Gaming

DR KINLOCH: Mr Deputy Speaker, my question is to the Chief Minister in her role as Attorney-General. Just as a preface, I would thank her for supplementary information in relation to a question I asked yesterday. I refer the Chief Minister to the undertaking she gave in response to my question of 29 June 1989, that she would seek further information from the ACT Gaming and Liquor Authority in respect of the non-settlement of Pub-Club TAB betting in the sum of approximately a quarter of a million dollars at the Molonglo Tavern on 8 April 1989. Could the Chief Minister advise the Assembly of the subsequent results of her inquiries into that matter?

MS FOLLETT: Mr Deputy Speaker, I thank Dr Kinloch for again drawing that matter to my attention as I did give an undertaking at the end of June to provide him with full information. I will indeed do so. I am afraid I do not have the detail of the matter available to me at the moment but I do undertake to provide it to Dr Kinloch and to the Assembly during this week's sitting.

Libraries

MR JENSEN: My question is directed to the Minister for Housing and Urban Services. I refer the Minister to a consultant's report on management structure of joint use libraries in the ACT, which I understand is due to be completed by the end of August. As a community member of the area and a member of the friends of that particular library who was interviewed by the consultants, I am interested, as are other members of the public, in seeing this report. Can the Minister advise when the report is to be made available to the public?

MRS GRASSBY: As I have not seen the report yet, I cannot tell you, but as soon as the report comes across my desk I will be making it available.

27 September 1989

MR JENSEN: I have a supplementary question. In view of the fact that the report was due by August, could the Minister undertake to advise why we have not yet received the report?

MRS GRASSBY: I will find that out and let the member know.

ACT Ambulance Service

MR HUMPHRIES: Mr Deputy Speaker, my question is to the Minister for Community Services and Health. Will the Minister confirm that on 31 August this year only three ambulance crews were on duty for approximately half that day; that on 8 September for a period of about 14 hours only three crews were on duty; that on 10 September from 6.00 pm until 8.00 am the following day only three ambulance crews were on duty; and that on 15 September from 12.30 pm until 6.00 pm only two ambulance crews were on duty for the whole of the ACT? If this is true, and I have it on good authority that it is, does the Minister consider that there being as few as two crews on duty at particular periods in the ACT is satisfactory?

MR BERRY: In relation to the last part of the question, there is at times, as you would appreciate, depending on the incidence of emergencies, the necessity for some of the ambulance crews to be away from their stations and, because of their involvement in those emergencies, only two might be freely available to respond in those sorts of circumstances.

In response to the question about whether there should be only two ambulances available in the ACT at any one time, that in my view is not acceptable, but I can say to you that my department is currently developing a position paper prior to a review of the ACT ambulance service and its deployment of personnel. This review, of course, has implications for the service's staffing numbers. The review will involve full consultation with the workers and, of course, their unions. It is anticipated that that review will be finalised by December of 1989. I think that by then we should have resolved any questions about the need for further ambulance staff and the arrangements by which we can achieve that where it is necessary.

Asbestos Removal

MR STEVENSON: My question is to the Minister for Housing and Urban Services and it concerns asbestos removal. There are two points: firstly, people with asbestos in their homes cannot renovate until it is removed; and, secondly, they are severely disadvantaged if they try to sell their properties. Would the Minister be good enough to inform the Assembly when asbestos removal will begin. I believe

27 September 1989

it was scheduled earlier but there have been some setbacks. Secondly, once the decision has been made, will all people with asbestos in their homes be informed of the likely time that their homes will be gotten around to in the schedule?

MRS GRASSBY: As the tenders have just closed, we are looking at the tenders now, and we hope to be organising that very quickly. As for knowing exactly when each house will be able to be done, I am afraid we cannot say that because there are, I think, 1,010 homes needing to have it removed in Canberra. We will not be able to tell people exactly when it will be.

MR STEVENSON: Which part of the year? Can you give that sort of indication?

MRS GRASSBY: I would not like to state that we could honestly put a day on it. It would be wrong to do it because people would expect that and then, if it could not be carried out, it would be very upsetting for them.

Government Car Maintenance

DR KINLOCH: My question is to the Minister for Housing and Urban Services. At the moment the maintenance of ACT government cars is undertaken by ACTION, as I understand it. I also understand that ACTION itself might well be happy to be relieved of that responsibility. There are problems related to it. Would the Minister look into the possibility of car maintenance programs being undertaken by private contract arranged by public tender?

MRS GRASSBY: I am afraid our Government does not believe in privatisation. I do not know where you got that idea, because I understand ACTION wishes more cars to be done. At the moment I am trying to talk another Minister into bringing his cars back to ACTION so he can have them done as well as we do them in ACTION. I understand that people who have their cars repaired by ACTION are very happy because ACTION does a wonderful job. I do not know where you got the information that ACTION wanted to close down its works. I understand ACTION is very happy there and would like to be doing more cars.

Swimming Pool

MR JENSEN: I have another question for the Minister for Housing and Urban Services. I am sure the Minister is aware that the Tuggeranong Valley currently has a population of some 60,000 people and it is expected to increase to 70,000 to 80,000 people in the not too distant future, yet it is served by one 25 metre swimming pool only, which is clearly an unsatisfactory situation for the number of residents in that particular valley when compared

27 September 1989

to the facilities in other parts of Canberra. Could the Minister advise the Assembly of the likely timetable for the provision of a 50 metre swimming pool in Tuggeranong?

MRS GRASSBY: No, I cannot give you a timetable. It is in our plans to build a pool at Tuggeranong but, as for putting a time or a date on it, I am afraid I cannot do that at the moment.

Mrs Nolan: Privatisise it.

MRS GRASSBY: We do not believe in privatisation.

Deportation of Minor

MR MOORE: My question is to the Minister for Industry, Employment and Education. I refer to my question on 25 July 1989, at Hansard page 837, asking the Minister to look into the threatened exclusion from Australia of a year 11 pupil at Dickson College, Janice Thorpe. Since the Minister undertook to look into the matter, could he please now advise the Assembly of what steps he has taken to ensure the welfare of that child?

MR WHALAN: Yes, I did give that undertaking and I did maintain contact, Mr Deputy Speaker, with the office of the Minister for Immigration and also with the office of Mr John Langmore, who was principally involved in the negotiations with the relevant Commonwealth Minister.

Nurses

MR HUMPHRIES: My question is again to the Minister for Community Services and Health. Is the Minister aware of allegations that nurses have been warned by ACT hospital management not to sign petitions opposing budget cuts in health? Are those allegations true? Will he be taking any action on those allegations?

MR BERRY: I am aware of allegations in that respect. I in fact read them in the press. I am not confident that they are matters of fact but what I can say is that, as far as this Government is concerned, it is wide open to the nurses to express their view about their industrial conditions in relation to the budget. I think at no time during the course of the budget consultative committee were there any restrictions on nurses putting their views to this Government. I remember a couple of occasions when they did so quite publicly and there were no recriminations supported by the Government. So, in terms of whether or not it was a matter of fact, I am not able to say. As far as I am aware, there was no pressure put on nurses by this Government not to sign documents concerning the budget.

27 September 1989

MR HUMPHRIES: I have a supplementary question, Mr Deputy Speaker. What action will the Minister be taking to ascertain whether the allegations are true?

MR BERRY: If I can take that as a request to find out, I will certainly look into it. It is not something that I have seen as a high priority in the past but I will do it at your request.

Parks and Conservation

MRS NOLAN: My question is again to the Minister for Housing and Urban Services. I would like to draw the Minister's attention to a question I asked her on 6 July about reconstituting a committee to replace the ACT parks and conservation committee. The Minister told me in her answer that she was looking at committees and a decision would be made by the next sitting period, which was 25 to 27 July. I ask the Minister: has that committee been appointed? If not, when will such a committee be in place to look at aspects of land management relating to nature conservation and outdoor recreation in the ACT?

MRS GRASSBY: No, the committee has not been put together yet, and possibly it will be. We have been looking at committees but, as my time has been taken up with the budget, which I felt was much more important, we will be looking at that once the budget is through and I can spend some time looking at committees.

National Aquarium

MR MOORE: My question is directed to Mr Whalan, as the Minister responsible for development. It is with reference to the National Aquarium fish farm. Is the Minister aware that the crown lease provided for the completion of the work - in clause 5A, subclauses (3), (4) and (5), which in turn refers to clauses 3B and 3C - within 18 months of the start of the lease on 17 March 1988. Is the Minister aware that that time has now passed, and would he inform the house whether an extension to the lease has been granted, by whom and when?

MR WHALAN: I will take it on notice.

Child-care Facilities

MR JENSEN: My question is directed to Mr Berry, the Minister for Community Services and Health and it refers to the upgrading that recently had to be undertaken at the Tuggeranong Town Centre child-care facility because the facility, although appearing to meet certain design

27 September 1989

standards and appearing to have been approved prior to construction, had some major problems with safety and had to be completely redesigned. Can the Minister advise the cost of this particular problem and give an undertaking that this type of error will not happen again?

MR BERRY: I do not have that information with me at the moment but I will certainly inquire into it and let the Assembly know.

National Aquarium

MR MOORE: I address a further question to the Minister for Industry, Employment and Education on this particular matter, the National Aquarium fish farm. Considering the ramifications of my motion currently on the notice paper and his own suggestion that it could result in legal action, will the Minister assure the house that he will not grant the extension until the matter of an EIS has been resolved by this Assembly?

MR WHALAN: No.

Street Lighting

MRS NOLAN: Again my question is to the Minister for Housing and Urban Services and it follows a question I asked on 27 July in relation to inadequate lighting in the surrounds and car park of the Erindale Centre. Following that I was promised an investigation to ensure that the lighting system was operating effectively. Might I ask: has that investigation been carried out and, if so, why have the results not been made available?

MRS GRASSBY: An investigation of all parking areas and street areas has been done by my department and, where it was needed, more lighting was done and, where they felt that lighting was quite sufficient, this was not changed.

MRS NOLAN: I ask a supplementary question. That question was taken on notice and you did get back to me in reply and you promised me results of the investigation. Will they be available, and when?

MRS GRASSBY: I am sorry, Mr Deputy Speaker; I thought that had been done. I will make sure and get it sent to Mrs Nolan.

Civic Square Library

MS FOLLETT: I would like to provide the answers to a couple of questions which I took on notice. The first was

27 September 1989

from Dr Kinloch yesterday about the library in Civic Square. I provided Dr Kinloch with a little bit of supplementary information yesterday. I would just like to confirm that, by providing the answer which is to say that there will be a continuity of library service available in Civic during the development of section 19.

Vietnam Memorial

MS FOLLETT: The other question that I took on notice was from Mr Jensen and it concerned the request to the ACT Government for a contribution to the Australian Vietnam Forces Memorial Committee. Mr Deputy Speaker, the answer that I have given to Mr Jensen is that the ACT Government will be making a contribution of \$15,000 towards the cost of that memorial.

Birthing Centres

MR BERRY: As promised, I have an answer to Mr Moore's question which he raised earlier today in relation to birthing centres. Mr Deputy Speaker, the Federal Government has announced an allocation of \$600,000 in the current financial year for birthing services, and that amounts to a total of \$6.4m over four years. The initial communication from Neal Blewett, the Commonwealth Minister for Community Services and Health, says that the money is to assist States and territories to respond to demands for alternative birthing services. It will be a contribution towards the cost of establishing new birthing centres and outreach home birth services provided by midwives engaged by the birthing services.

We have not yet received a formal offer from the Commonwealth about either the amount of money or the terms and conditions of the funding for the birthing services. It is my understanding that the intention of the Commonwealth is to provide some recurrent funding and one-off capital funds to encourage the reorientation of hospital services. Given the decision about the relationship between the proposal and the redevelopment of the ACT public hospitals, which will be discussed in the near future, we will need to negotiate with the Commonwealth to be able to develop a proposal best suited to our needs.

Public Education Night

MR WHALAN: In relation to a question that Mr Humphries asked on 24 August, concerning the cost of the public education night, the response is that there were 700 invitations sent out, about 300 guests were expected, and

27 September 1989

\$5,000 had been budgeted for the public schools night. The event was cancelled because of industrial action by the ACT Teachers Federation. The costs incurred in preparing for the public schools night totalled approximately \$1,160 and, of this, \$670 was spent on production of an information presentation package on the public schools system, which will be used at other venues on other occasions. Other expenditure incurred was for the printing of invitations and posters, postage, and clerical assistance. The cost of an advertisement concerning cancellation of the event was also included in the total.

ELECTRICITY AND WATER (AMENDMENT) BILL (NO. 2) 1989

Debate resumed.

MR WHALAN (Minister for Industry, Employment and Education) (3.01): Earlier today, we were debating the question of fluoride and the removal of fluoride from the ACT's water system, and we were raising on this side of the chamber the very obvious inconsistency between what the guiding principles allegedly are of the Residents Rally party and their refusal to allow community consultation on this very important issue before a decision is made to cut off the provision of fluoride in the water supply. I drew attention to the Residents Rally bible, or whatever it is they have produced - what is it?

Ms Follett: It is their vision, I think.

MR WHALAN: Their vision, the pink vision of the Residents Rally party. I drew attention to some aspects of the policy there which placed considerable emphasis on their commitment to consultation, and I referred to their section on social justice and welfare where they said:

The Residents Rally for Canberra is fully committed to ... consulting with the residents of Canberra at every level but with a special emphasis on consultation with the actual service providers.

Then I started to go through, and I will now continue, drawing attention to a number of policy areas of the Residents Rally party in which they seek to enshrine in their policy documents their absolute, total, unswerving, 100 per cent commitment to consultation before action is taken. Yet on this occasion I draw your attention once again, Mr Deputy Speaker, to the fact that they are party to a proposal to bulldoze through this Assembly legislation which has the most draconian consequences contained in it, without any concern for or any regard to their alleged commitment to consultation.

In their parking policy, for example, they undertook to review the parking in inner city suburbs. I suppose there is no vested interest with Mr Moore in relation to that,

27 September 1989

but they did say they would take full account of residents' opinion. I hope, of course, that it was the opinion of residents in Tuggeranong as well as of people in the inner city suburbs of Canberra, because the people in Tuggeranong have some rights in relation to the inner city area as well as the people of the inner city itself. But, anyway, the commitment was there to consultation, and I hope that it did include consultation with the residents of Tuggeranong.

On employment and training, the Residents Rally would hold discussions with unions and employers to establish a set of conditions - again consultation before action. On community recreation they say that, to ensure regional balance in this provision, there will be a voluntary consultative body assembled of the community groups that are involved.

In the general policy proposals there is the question of public consultation. In planning, they say there is the requirement for community consultation and for the liaison section to be included in the legislation that establishes the Territory Planning Authority, and the Territory Planning Authority is to establish a community consultative committee. Once again, there is lip-service to consultation, but in fact they deny it on this issue.

They refer to forward financial planning, women's refuges, and participative decision making. On public housing, they say they will establish a mechanism for user and public consultation on public housing design and management. On incentives, they will encourage the community to protect their neighbours' heritage and encourage public education and awareness programs.

On public participation, in the summary of their heritage proposals, they say that the public are to participate fully in the process of listing. On the machinery of government, they say the public will be involved. On part-time employment for women, they refer to a comprehensive survey to determine the extent of and demand for patterns of part-time employment - again, consultation.

On tertiary institutions' amalgamations, they refer to full community consultation; on land, to simplifying processes of amending crown leases, and public consultation. It will only take place after public consultation. On consultation, they refer to the use of specific purpose grants, and participative decision making. On school closures, they say no schools should close until all alternatives have been considered and the school community has had an opportunity to discuss the proposals and make recommendations on the future. On commercial tenancies, they say there should be consultation with relevant organisations.

Mr Jensen: I raise a point of order, Mr Deputy Speaker. Whilst I revel in the fact that Mr Whalan is providing for Hansard and also for the people in the public gallery

27 September 1989

details of the Residents Rally's policies, I wonder whether it is appropriate to the nature of the debate. We are talking about fluoride, but he has not given us one indication as to what the Residents Rally's policy is on fluoride. If he is going to use our policies, I would suggest he should use that as well.

MR WHALAN: Mr Deputy Speaker, he has just used up 30 seconds of my speaking time with his nonsense. You should have stopped him. That was not a point of order. He did not refer to the point of order. He is embarrassed by the fact that his party, which has pledged itself - allegedly pledged itself - to community consultation, is denying the people of Canberra the opportunity to make their contribution to this decision making process. They support this draconian legislation, carrying fines of tens of thousands of dollars in relation to certain actions. This is the sort of hypocrisy that we have come to expect in this chamber from the Residents Rally party. We know that it is consistent with the line taken by Katharine West, who is the Residents Rally candidate for the seat of Canberra. We know that fluoride is one of her important policy areas. It is consistent with the - - -

MR DEPUTY SPEAKER: Thank you, Deputy Chief Minister. Your time is up.

MS FOLLETT (Chief Minister) (3.08): Mr Deputy Speaker, indeed, I had not planned to - - -

Mr Prowse: Has the Chief Minister not already spoken?

MS FOLLETT: No, I have not spoken. Mr Deputy Speaker, you are being asked a question from the floor here and the answer is, "No, I have not yet spoken in this debate".

MR DEPUTY SPEAKER: The Chief Minister has not spoken. Continue, Chief Minister.

MS FOLLETT: Thank you. I do rise to speak in this debate because, Mr Deputy Speaker, I have been most interested in the way that it has developed. It is clear to me, as it must be to people in the gallery - our media gallery in particular - that there is an enormous division of view on the question of whether fluoride should be included in our water supply or not. Even within particular parties opposite we obviously have differences of view.

Mr Prowse: Even on the other side of the house, too.

Mr Stevenson: They speak as one.

MR DEPUTY SPEAKER: Order! Continue, Chief Minister.

MS FOLLETT: Thank you. Mr Deputy Speaker, it seems to me that, while there is a difference of view, even within parties opposite, and an expressed difference of view, the responsible thing to do is to enable those differences of

27 September 1989

view and to enable the differences of view which quite obviously exist in the community to be fully aired. I cannot conceive of any other responsible course of action.

We have heard, for instance, from the Minister, Mr Berry, about the National Health and Medical Research Council's views on this matter. We have heard opposite that body denigrated although I had always been led to believe that it was a body in good standing, indeed a body whose advice on medical and health issues was well worth listening to and, Mr Deputy Speaker, on issues like health and medicine, where I would claim no expertise whatsoever on my own behalf, I feel it is my duty to listen to bodies who are held in good standing in the community and who have advised governments and other health authorities over very many years on any number of health issues. I will not overlook their advice.

Mr Deputy Speaker, I have also had the benefit in the weeks preceding this sitting of having met with some people who are opposed to the addition of fluoride in the water supply and I have to say that I do not find their arguments terribly convincing. In fact, in some cases, I would go so far as to say those people are cranks. I cannot see any other way of describing them. They have blamed fluoride for every disease under the sun - for diseases like RSI, diseases of the spine, not to mention problems with teeth, with blood pressure and what have you.

Mr Deputy Speaker, I did not find their arguments terribly convincing or terribly consistent. That is a problem that I believe most of the community will also have on the issue of fluoride. As I have said on many occasions before, I believe the only responsible course of action that this Assembly can take is to allow members of the community to have expression of their views on this issue, to allow them to listen to the debate on the matter, to allow them the benefit of expert advice, such as that from the National Health and Medical Research Council and also to allow them to listen to what other contrary view people with genuinely held views might wish to put.

I really believe that that is the only sensible course of action. I was alarmed to hear from Dr Kinloch that he does not believe the public is able to cope with the detail of such an argument. It is my belief that the public is more than able to cope with the detail of such an argument, and I further have confidence that members of the public are able to discern when they are being lobbied by an interest group and when they are being given useful and good information. I have confidence that the community, if given an opportunity, would be able to weigh up the pros and cons of this matter and come to a sensible conclusion, on their own behalf, without having this Assembly take the decision for them in the absence of any detailed debate.

So, Mr Deputy Speaker, I am afraid I do not share the lack of faith of my colleague opposite in the ability of our

27 September 1989

community to reach a sensible decision. It is my view that people do that every day of their lives; that they are able to discern when they are being lobbied, when they are being subjected to propaganda, when they are being snowed; and that they are able to reach sensible conclusions. I know that does not suit everybody in this house, but it is a fact. They are a sensible lot and they are quite capable of coming to a sensible decision, or at least to putting forward a sensible point of view when given the opportunity to do so. I would urge members of this Assembly to give them that opportunity, to reconsider their opposition to Mr Berry's notion of putting this matter to a committee, and to provide that opportunity to the general public.

I would also like to draw attention to the attitude of the people opposite who purport to be the alternative government. I think it is worth noting that there does exist at least some commonality of purpose on this matter, if not a commonality of view. I would like to draw attention to the stated positions of the alternative chief ministers in this chamber.

Mr Collaery, for instance, got to his feet and ridiculed this issue. He talked in a flippant fashion about his own children's experiences growing up in France without fluoride, or with fluoride - I do not remember which - but he never, at any stage, addressed the substantive issue. Nor did he ever, at any stage, address in a sensible fashion, the reasons why he seeks to deny the community of the ACT an opportunity to put their views in a sensible way on this issue. I think that is an extremely reprehensible manner in which to deal with an important health issue. Mr Kaine, on the other hand, we have not heard from yet; I trust that we will.

Mr Kaine: That is right, so do not quote me.

MS FOLLETT: I will not. I have no intention of quoting Mr Kaine on this matter.

Mr Prowse: Well, why refer to him?

MS FOLLETT: For the very reason that on this important issue on which this Assembly, as I see it, intends to make a decision today - a decision which could affect the health of every ACT citizen - we have not heard from one of the alternative leaders.

Mr Kaine: There is only one alternative leader and you have not heard from him yet.

Ms Maher: You have heard from two of them already.

Mr Duby: I raise a point of order, Mr Deputy Speaker. There are many more alternative leaders here.

Mr Kaine: How alternative are you, Craig?

27 September 1989

MS FOLLETT: Mr Deputy Speaker, I leave people to draw their own conclusions on those matters, but I do think that it is worth drawing attention to the attitude of both of those gentlemen on this important matter and to the attitude of the combined forces, other than the Government, in this Assembly who purport to be the alternative government, who purport to be interested in a collegiate style of government, a committee style of government, and yet who propose here today to take a course of action - without any community consultation whatsoever, without even a full debate in this Assembly - that will have an effect on the health of every person in the ACT.

Mr Deputy Speaker, I put it to you that, regardless of your views on fluoride, you must regard the way in which this decision is being taken today as reprehensible. I think that when it comes to people's views on fluoride, you will not find a hardline view amongst the Government ranks. If you check our policy on the matter, and I am sure you have checked our party policy, you will find we do not have a policy on fluoride, hence we are free to examine the matter on its merits.

Mr Moore: So, now you are trying to cover up your own inadequacies.

MS FOLLETT: I have no intention of covering up. As I say, I think it is very remiss of the non-Government members of this Assembly to try to paint this as an "us and them" situation where they are clearly going to have a win on the numbers - might is right - and in some way insinuate from that that the Government has been opposed to them. As I said, my party has no policy on fluoride. We are open to debate on the issue as, I suggest, are the vast majority of Canberra citizens.

All that I am seeking today is an opportunity for those citizens to be involved in a sensible debate, to have the opportunity to study the evidence for and against the inclusion of fluoride in the water supply. I do not believe that it does this Assembly any credit whatsoever to push through this Bill with undue haste, without adequate opportunities for community consultation and simply on the notion that might is right. As I said before, I do not agree with the way in which fluoride was introduced to the water supply in the first place. Nobody would. It was done, in my view, without an adequate, open and consistent assessment of all of the issues at the time. But 25 years later, when we have now a debate again on whether fluoride should be included in the water supply, my colleagues opposite propose to do exactly the same thing - to treat the public like idiots.

I do not know whether Dr Kinloch is basing his scepticism about the public's intelligence on his experiences at the ANU or not, but I do not share his scepticism. I believe that the public deserves the right to debate this issue at length and in an informed and open way without

27 September 1989

scaremongering, without the kind of pre-emptive action that this Assembly proposes to take, and I would urge members opposite to reconsider their view on this. They will not find that the Government will push them in a hard line on the issue, except to say, and we are adamant about this, that it is an issue which deserves full and adequate consultation.

Mr Collaery: I claim to have been misrepresented, Mr Deputy Speaker. In the strongest speech we have heard to date from this Chief Minister - a speech about doing nothing - she referred to remarks I had made as "flippant". I draw to the attention of the Assembly and those present that those remarks were prefaced by the remark that I would, like Mr Wood, give a personal anecdote, and that was against the background of the full and comprehensive exposition of this issue by my colleague Mr Moore and my other colleague sitting behind me. I claim to have been misrepresented mostly improperly by the Chief Minister.

MR KAINÉ (Leader of the Opposition) (3.21): I must say that, personally, Mr Deputy Speaker, I was quite offended by the tone of the Chief Minister's participation in this debate. Her denigration of members of this Assembly, either because they have an opinion about the matter, whether they expressed it or not, or because they do not have an opinion, was, I think, most intemperate and unreasonable. It might have escaped the Chief Minister's notice that we in the Liberal Party have a spokesperson on health matters - Mr Humphries. Mr Humphries put the case very well, and there is nothing that I could say that could - - -

Mr Whalan: He said he was not speaking for the party, because he said you did not have a position.

MR KAINÉ: I did not say that he was. I said that he expressed the case very well.

Mr Whalan: But you said he was speaking on behalf of the party.

MR KAINÉ: Do not tell me what I said. Why do you not just shut up and listen for once?

Ms Follett: Mr Deputy Speaker, I draw your attention to the language.

MR KAINÉ: Yes, well, I objected to the language earlier but I did not interpose. Mr Humphries put the case for continuing fluoride very well, and I happen to agree with it. To be told by the leader of the Government that somehow there is a Liberal Party policy, that we are in opposition to the Government on this matter and that we are moving might instead of right is quite wrong. I object to being told that. I will express my view on this when we vote, and I do not appreciate being abused by the Chief Minister because I choose to listen to the debate and to what other people have to say.

27 September 1989

While I am on my feet talking about people's views, I point out that there are 42 per cent of the population out there who are going to be highly offended at being called cranks by the Chief Minister. Anybody who wants to remove fluoride from the water, according to the Chief Minister, is a crank.

Ms Follett: On a point of order, Mr Deputy Speaker; I did not.

MR KAINE: That is exactly what you said.

Ms Follett: I said that some of the people who had come to speak to me about removal of fluoride I could only describe as cranks. I would never describe the population in that way.

MR KAINE: Yes, and they were so described because they had a particular view on fluoride and 42 per cent of the population of Canberra happens to have that view.

Ms Follett: They were not from Canberra.

MR KAINE: But whether they come from Canberra or not is not the point. People out there have an opinion and they are entitled to hold that view, and to be told that they are cranks because they do not share the Chief Minister's view is quite unreasonable. I do not happen to share their view either, but I do not believe they are cranks because they hold it. Nor would I argue that the 43 per cent who are in favour of retaining fluoride in the water have necessarily got all the facts either. It is a very technical debate. People out there have their own views. People here have their own views and we are entitled to express them and to vote accordingly. I would submit, Chief Minister, that when we vote on this matter in a few minutes, that vote will accurately reflect the view of the population out there.

If that is in any way unfair or unreasonable, as the Chief Minister seems to suggest, then I do not know what course of action she would take other than conducting a full referendum to find out. If she has \$800,000 in her pocket or in some of her hollow logs, then I suppose we could conduct a referendum, but I do not suggest that that is what we were elected for. We were elected to take decisions on behalf of this community, and that is what this debate is about. We will soon make that decision and I do not expect to hear later that those in this house who opted to remove fluoride from the water are cranks. I do not think they are. I think they have an informed view, perhaps even more informed than the Chief Minister's, and they are entitled to have it.

MR PROWSE, in reply (3.25): Fluoride has always been a very emotive issue, and let us hope that I can hold it to a sensible discussion.

27 September 1989

Mr Whalan: If you get it in the water it makes you go mad.

MR PROWSE: I seek your assistance, Mr Deputy Speaker, to protect me from this man. There are six issues that can be debated with respect to fluoride: efficacy, legal conscription, ethical mass medication, social justice, health and pollution. So let us deal with them one at a time.

Let us deal with the "does it work" attitude. It depends which dentist you ask. And that is the problem. We have seen the results of reports from a Dr Philip Sutton who came here. The Chief Minister - and, really, I expected better of her - called this man a less than perfect person to speak on this issue. He is one of the very few people in Australia who has researched fluoride. He went to the islands to research fluoride; he is a doctor of dental science. I will repeat that in case members did not hear. He is a doctor of dental science. There are very few of these people in Australia. He is opposed to fluoride.

We have Dr John Colquhoun who was the head of the Dental Health Department in New Zealand, the man responsible for introducing fluoride to New Zealand's water supply. He researched his own figures, the school dental health reports, and found that teeth in non-fluoridated areas were as good as those in fluoridated areas. These are two very senior dentists, not those fellows who spend their days filling holes - holes which should not be there, I might add, if fluoride is working - not those fellows who sit around in Canberra. These are research fellows. And that is the difference. They have time to research the world literature and look to what is actually happening as a result of fluoride.

Mr Wood and Mr Humphries referred to the National Health and Medical Research Council document, a report on the working party on fluorides and the control of dental caries. This group of people whom we hold in such high esteem have come up with a report. I will read some significant points from this document:

Fluoride either activates or inhibits a wide range of enzymes mainly by complexing with the metallo-enzymes, but also by acting directly on the enzymes.

Would members please hear those words.

Mr Wood: Well, read the rest of it too. Read that whole section and it might give credibility to the report. That is a selective quotation.

MR PROWSE: That certainly is. I cannot go through the whole publication in 15 minutes, Mr Wood. Mr Wood is now saying I should read the whole publication. What I am saying in here is that these people say in their own words

27 September 1989

that fluoride affects the metabolism of the body. We are not talking about teeth. They are freely admitting that it affects other parts of the body, and that is most important. That is what we are talking about. There are health issues here as well. In summary the same publication says on page 20:

Interference with enzyme action is not supported by scientific evidence.

On page 6 the council says that fluoride does affect enzymes; on page 20 it says it does not. This is the sort of rubbish that these people are prepared to publish. And these are the people that we have been hoodwinked into believing are the epitome of science in this country.

I will go further, because this particular publication has brought nothing but criticism from the scientific community of Australia. Our primary body says on page 10 of the same report that fluoride is an endogenous ion of the human body, the human organism. That is the most ridiculous schoolboy howler that has ever been perpetrated, because endogenous means that the ion is produced within the body. In other words, we are all alchemists. We can produce an element in our bodies. That is the sort of rubbish that these people are prepared to produce. I will not go on. The point is that we are being led to believe that these people know all, and in fact it is a very sad situation.

I am not challenging the whole of the National Health and Medical Research Council because there are some very good and learned people within that group. But the point is that within the dental side of that body there are six people responsible. That is what I am talking about. There are hundreds of people involved in the National Health and Medical Research Council who are excellent and are to be looked up to, but I am afraid that within that little group there is a problem.

I will now present a page from the report of the Committee of Inquiry into Fluoridation of Victorian Water Supplies 1979-80. On page 203 of that document, it is stated:

A vast amount of evidence is available as to its value, and to the possibility of harmful results.

I will repeat that. Again, we are not talking about teeth. We are talking about people and their general health. It says that a vast amount of evidence is available as to its value and to the possibility of harmful effects. Later, in the summary in the documentation, the report goes on to say that there really is not any evidence of harmful effects at all. However, general practitioners - doctors, mind you - presented affidavits that 100 of their patients had been adversely affected by fluoride to the degree that they needed to seek medical attention.

27 September 1989

There are the facts of the issue. Whether fluoride fixes teeth or not is secondary to this issue. For goodness sake, can members not understand that, if we take something into our bodies that can affect hard tissue, it can also affect bone cells, and it can affect the lymph and the blood that carries that toxin to the bone cells? Of course it can. There have been many researches done on the carcinogenic and other mutagenic effects of fluoride on the population.

Let us look at how effective fluoride is. We have had reports that fluoride is the wonder, the panacea, of the twentieth century. What a load of rubbish. Brisbane, as a non-fluoridated population in Australia, has the same decay rates as Adelaide and Perth, which are fluoridated. Melbourne is worse than Brisbane. Canberra is slightly better. But it has got nothing to do with fluoride. It is to do with socioeconomics and diet. Anybody who suggests otherwise is really not with it. That evidence was produced by an independent person.

Mr Humphries has called for an independent adjudication on this, and I propose to give it. It has been produced. It is in Science magazine. It was just released the other day and I have given everyone a sample of that paper by a Dr Mark Diesendorf. He is not a dentist, he is not a doctor, he is an independent adjudicator. He is a statistician. By using freedom of information - freedom of information, I might add, is the only way one could get hold of this information - he has produced the results of dental cavities as recorded by the dental health departments in the schools across this nation. He is the independent person and he has, in fact, come up with this result, that Brisbane people's teeth are as good as anyone else's in Australia. That is irrefutable. His is an independent judgment on this issue.

There is the answer. I do not know whether holes in teeth are there or not. I am not a dentist. We have dentists who say there are and dentists who say there are not. Then we go to an independent person and we see the results of the dentists themselves being produced as proof that this fluoride, this toxin, which has been put into the water supply and which is poisoning our people, is in fact not working. I will ask the other question. If it is working, why are there now more dentists in Canberra per capita than there were before fluoride was introduced? People have got to be silly if they cannot see the facts of that issue.

Mr Wood: Where is that data?

MR PROWSE: The facts are there.

Mr Stevenson: The dental registry files.

MR PROWSE: Yes. Have a look; the information is available. So why are we having this debate? The point is that people's health is being affected. As a naturopath I

27 September 1989

have seen them come to me, as the president of the Pure Water Association I have seen them come to me - people crying for help. In one case a man said to me, "My dizziness, my disease, cannot be diagnosed at Woden Valley Hospital. They told me that I have a disease that is unknown but I am going to die from it. I am now invalided from work". I will give members the name of this man if they wish. He could not go to work, he was invalided out of work, simply because of fluoride poisoning. When he went on to purified water, his disease went away and he is now back at work. Just one person in the community, that is all it takes. If, as a result of this imposition on us, that is going to happen to one person, it is not acceptable.

I will go further. You have asked for proof again, Mr Wood, so I will give it to you. I have a report from Abbott Laboratories Scientific Division, North Chicago, Illinois, dated 18 June 1963, and addressed to a doctor who was inquiring into this matter. I will not read the lot of it but what it says is:

Dear Doctor,

One per cent of our cases reacted adversely to fluoride.

One per cent - and that figure has been repeated in World Health Organisation factual documents. So we see a circumstance where one per cent of the community, or more - and I am saying everybody is affected, obviously, but these people are affected to the degree where they need help - are adversely affected. That means that in Canberra there are 2,500 people going to the doctor or seeking medical attention because of this toxin that is placed in the water supply. They do not have a choice; they have to drink it. If one does not drink water, one dies.

Here is a circumstance in which 2,500 people are adversely affected to that degree, but the point I am making is that this is a cumulative toxin. It is not one bathtubful of water. That is a load of rubbish. Would anybody suggest that we drink lead? Everyone knows that lead is a cumulative toxin. We suggest that that would not be on, would it? But here is fluoride, which is a cumulative toxin, being sold to us as being okay and that we really need to drink a tubful of water. Well, of course, if we drank a tubful of water, we would die immediately. We would end up with water poisoning. But the point is, if it has fluoride in it, we would get knocked off as well because of the amount of fluoride we ingested.

There is a social justice issue here. If one of us becomes unwell and it is identified that it is the fluoride in the water that we must drink to stay alive, we can go and purchase a water purifier. We can purchase purified water, per se, or we can purchase a purifier. But the poor people cannot. Now, where is the Labor Party's principle on this

27 September 1989

issue? The poor people cannot afford to stop drinking this water; they cannot afford to get purified water. If this Bill is not passed, will the Government offer to the poor people of our community - the people who are being socially affected by this - a free purifier? That is the alternative. If the Government wants to put this poison in the water, those who are affected by it should be given the opportunity to drink water that is not poisoned. That is the point.

The ethical point, of course, is that this is mass medication against the will of the people. This is medicine; it is a drug; it is recognised as a drug world-wide; it is against our democratic rights to be medicated against our will without consultation with a doctor. Some people react to the antibiotics that are prescribed; some people react to a number of things. There are people reacting to fluoride and the Government should not dose them with this drug if they have not had a personal examination by a doctor.

The point is that we have a number of issues - legal conscription, et cetera. The pollution is another. The water waste from our area goes into the Murrumbidgee system. Some of the fluoride gets taken out through personal ingestion by members of the public and stored in their bones but the rest of it goes into the Murrumbidgee through the flushing of toilets and so on. It is a highly toxic poison. If only people would understand that.

So the issue is: does it fix teeth? Who cares? The point is that it is poisoning the people and we have to look at that. This toxin was introduced into the water; it was introduced into the water without asking the people. That is where we are at. We want to ask the people. (Extension of time granted)

Fluoride was put into the water without consultation. Let us have a referendum on the issue. All this talk of getting into a debate with the public is a load of rubbish. How in the heck is that debate going to occur? As the president of the Pure Water Association, I have been debating this for two years. I have been on TV over the last two years; I have been in the papers; we have had the debate with the public. Now is the time. If the Government wants to put fluoride back in the water once it is taken out, it should have a referendum; that is the right way to do something like this. It cannot medicate the people without asking every single one of them, and that is the point.

You cannot just have a committee. I am appalled by the fact that the Labor Party is again hiding behind this committee system. For goodness' sake, it is about time you stood up and took some decisions, as a government should. The point is that you can go to a committee later. You can take the fluoride out. It was put in without asking the people. Let us show that we have got some strength in this

27 September 1989

Assembly. Let us do something. We have been here for a few months and nothing firm has come out of it yet. Let us just go to the issue and take the fluoride out of the water. Then have your debate, have your consultation. Let us do it properly. Let us do it over a two-year period, if necessary.

We are giving everything to committees, but let us call in the experts and do it properly because it has never been done in Australia. We will create a first in this country if we do have this committee of inquiry. I applaud your requirement to have that done, but what I am saying is: let us switch it off now. If necessary, if people believe that their teeth are going to be affected or not affected by fluoride, let us have a free issue of fluoride tablets, rinses, et cetera, from our community health areas. In this way we can keep the health of the people up. All the people now, because of this debate, will be aware and will take their fluoride tablets if they so desire.

Let me make another point: as a homoeopath I use very minute dosages of toxic and non-toxic materials, at dosages less than one part per million. They are such minute dosages that it is difficult even to resolve just what the dosage level is in those pills, but they work, and that is the point. You can have a massive effect on the health of a person with these minute dosages of toxin. What I am saying to you is that there is an effect. Let us stop doing it now.

Have your inquiry and then at the right time have a referendum. You cannot drug the people against their will without a referendum. I will fight vigorously to ensure that the public have their say in this issue. I am more public-oriented in this matter, I believe, than those who are calling the shots on the opposite side of the house, saying that they are the only ones on the side of the public. That is rubbish. I am here because I stand for the public and I refuse to be poisoned any longer. In concluding, I appeal to your sense of fair play and ask you to vote to stop this action of pollution.

Question put:

That this Bill be agreed to in principle.

27 September 1989

The Assembly voted -

AYES, 10

Mr Collaery
Mr Duby
Mr Jensen
Dr Kinloch
Ms Maher
Mr Moore
Mrs Nolan
Mr Prowse
Mr Stefaniak
Mr Stevenson

NOES, 7

Mr Berry
Ms Follett
Mrs Grassby
Mr Humphries
Mr Kaine
Mr Whalan
Mr Wood

Question resolved in the affirmative.

Bill agreed to in principle.

MR BERRY (Minister for Community Services and Health) (3.47): Mr Speaker, I move:

That the Bill be referred to the Standing Committee on Social Policy.

MR DEPUTY SPEAKER: The question is that the motion be agreed to. Mr Berry can speak to it.

Mr Prowse: We have already done that.

Mr Berry: In fact we have not already done it because the motion - - -

Mr Jensen: Mr Speaker, I raise a point of order.

MR DEPUTY SPEAKER: Yes, Mr Jensen.

Mr Jensen: Mr Deputy Speaker, I have the feeling that we have been through this debate already once this morning.

Mr Whalan: On a point of order, Mr Deputy Speaker; I refer Mr Jensen to standing order 174, which states quite categorically that, immediately after a Bill has been agreed to in principle, any member may move that the Bill be referred to a select or standing committee.

Mr Moore: This is ridiculous. This is wasting the Assembly's time.

MR DEPUTY SPEAKER: Mr Berry's motion is in order. Continue, Minister.

Mr Whalan: Do you think that democracy is wasting people's time?

MR SPEAKER: Order! Continue, Minister.

27 September 1989

MR BERRY: Thank you, Mr Deputy Speaker. This is, of course, an important issue which should, as I have moved, be referred to the standing committee in its in-principle form. Of course, the Labor Party's position is clear on this matter. We do not have a position in relation to fluoride except that, because it is a matter of public interest, it ought to go to an appropriate standing committee for in-depth consideration. That has been the issue that has been avoided by the opposition throughout this debate. It is important that public attention is focused on the failure of the opposition parties to deliver appropriate consultation on this issue of public importance.

The Residents Rally, which, as has been correctly pointed out by my ministerial colleague Mr Whalan, has long relied on consultation and repeats it over and over again. But it appears that, when it has adopted a policy, it seems to think that it can throw consultation out of the window. That is what it has done in this case - thrown consultation out of the window and ignored the people who elected its members.

The Liberal Party does not have as strong a commitment to consultation as that claimed by the Residents Rally, and I would therefore expect that the Residents Rally would have at least participated in a process which related to consultation. None of them are taking much notice at the moment because they would not want to hear this sort of information - it would be embarrassing for them. They need to be told over and over again, because they seem to be slow learners, that when you are elected on a policy of consultation you are expected to stand up to that electoral commitment.

We have heard this morning a lot of evidence from both sides. In the first place, we heard Mr Humphries very eloquently put the pro case. I think Mr Humphries traversed the whole range of issues that are relevant to the matter and presented it in such a way that it would convince some. Just a little while ago, Mr Prowse, who is very obviously emotionally committed to a no-fluoride outcome, emotionally pursued the case and argued long and strong about the relevant demerits of fluoride. I would have to say, after having listened to it, that I would not have been convinced either way, notwithstanding the eloquence of both cases, because this is not the sort of place where you sit down and argue such a technical case. If you attempt to do that sort of thing and you seek to do it with the intention of delivering a properly considered policy, then you are deluding yourself. This is not the place to deliver properly considered outcomes of such a technical nature.

Other issues were thrown in to cloud the matter. One was that of civil liberties, which came in from Dr Kinloch. Dr Kinloch pursued that with his usual sincerity, but I must say that at the end of it I was no more convinced about the

27 September 1989

relevance of civil liberties to the matter than I was when the Residents Rally was arguing the case for a reduction in civil liberties for the people of Canberra with the move-on powers. We will probably not forget the Residents Rally's stand on that in relation to civil liberties.

My view is that the Government has an obligation to deliver a responsible decision to the people of Canberra on this matter, and that is why we must not back away from any opportunity to get this matter out into an area where it can be publicly debated and considered by the people in Canberra. As the Minister responsible for health, irrespective of the relevance of the arguments that are put here today, I believe that what has to be considered is a proper inquiry. Any responsible Minister for health matters would not move on the quality of the debate here today, because it just has not been up to the standard on which one would make a decision which affected so many members of the community.

It is all right for you to mock the depth of feeling about issues of health which affect our relatives and children, but it is a serious matter and one that we have to consider closely, not lightly, in the way we have done in a couple of hours this morning. There are lots of issues that need to be considered in this. One of the issues that I think demonstrates clearly that this is an ill thought out piece of legislation is the issue of the supply of alternative means of delivering fluoride to people who might want it. There has been not one word on how much that would cost the community - not one word. Not one moment has been spent on developing a policy for the supply of this - - -

Mr Jensen: Why did you not tell us that in your speech?

MR BERRY: If you had not realised - - -

Mr Jensen: I realise all right; you are wasting time again.

MR BERRY: You are getting quicker on the uptake. If you had not realised, what I am trying to point out to you is the need for it to be referred to a committee. We realise, Mr Jensen, that it takes a little time to get the message across to people like you, but you will get your turn to speak, like everybody else.

Mr Jensen: I have got all night.

MR BERRY: So have we, because this is an important issue and we intend to pursue it to seek to implement the Government's policies on consultation.

I think I should now turn to the issue of the Australian Labor Party's platform so that members of the Assembly will be very clear on the party's position in relation to consultation. I think this describes it well, and I quote:

27 September 1989

What the ALP supports is a legislature which allows the highest degree of community participation and which will, on balance, lead to a more enlightened form of government -

Something that we have not seen much of here today, I might add.

Mr Moore: You are the Government and you are not enlightened? I love it.

MR BERRY: It is all about the numbers, as we have been informed here several times today, Mr Moore, and it is all about the power of the numbers to be able to switch things off at will, even when you have not thought them through. Let me continue:

The community participation should not, however, be limited to only providing information in consultative processes, but should include direct participation in the decision-making process. For a successful democratic process, elected representatives need to be totally accountable.

That is the sort of message that should ring true to democrats in this place. They seem to be pretty thin on the ground. The ACT community was cynical about our Government when we started off on this process, but it now rightfully expects to have accountable representatives. The sort of behaviour that has gone on in connection with this Bill will lead to a continuance of that cynicism. I am certain that people will hold the members of this Assembly accountable for this decision. You can rest assured that I for one and, I suggest, other members of my party will repeatedly advise them of the performance of the other members in this house on this issue today.

The Rally's commitment to public consultation on planning, as stated in its platform, does not extend to municipal planning issues such as fluoridation. The Resident's Rally selectively drops the whole consultation. Of course, it does not suit them sometimes, but that has been the pattern that we have become used to.

Mr Moore: Rubbish!

MR BERRY: It is a whim. There is no public consultation on this issue; it is just a matter of the Rally, closeted behind closed doors, developing a quick policy and whipping it in - no public consultation.

Mr Collaery: It was in our election mandate.

MR BERRY: No consultation. We know for sure that you did not copy this policy from ours, because we did not have it then.

27 September 1989

Mr Collaery: It was in a policy distributed before the election. We distributed it publicly before the election. We have a mandate. So what are you talking about?

MR BERRY: It might upset you to learn of this occasionally, but the fact of the matter is that we have policies too, but we still consult the public before we - - -

Mr Moore: You copied them, like the environment policy that you copied from us.

Mr Collaery: No-one reads them.

MR BERRY: You read them because you had to copy some of them. Many questions have been raised this morning and virtually none of them have been completely answered. Claim and counterclaim have done nothing to resolve the debate and very little substantiated evidence has been allowed to enter the debate. Over and over again we have heard it, yet members seem hell-bent on proceeding with this amendment in unseemly and undue haste.

Fluoride has been in the water for 25 years, yet the members opposite cannot allow a short period of time - not even the shortest period of time - for the issues to be aired. I would suggest that some do not want to hear all of the evidence and that is why they do not want it to be aired over a short period of time, because of the weight of opinion on one side or another. I am prepared to hear it all.

Mr Prowse: It has all been done in public debate for the last two years.

MR BERRY: I am prepared to hear it all, and so is the Labor Government.

Mr Prowse: You are not. That is not true.

MR DEPUTY SPEAKER: Order!

MR BERRY: I am prepared to hear it all in a proper forum.

Mr Prowse: You would not listen.

MR BERRY: As I indicated to you, Mr Prowse, I was prepared to hear the debate in a proper forum, and a proper forum of relevance to this Assembly is a committee of inquiry. Of course, there has been some resistance to that. As you told me, you were worried that a lot of people would put a lot of weight behind the pro debate. I think that the opportunity should have been granted for those issues to be aired so that the community could have the opportunity to put their views on the subject. They needed to have the opportunity.

27 September 1989

The arguments fall into three categories. We heard the arguments one way, in respect of the benefits, this morning, and I must say that they were incomplete and, to me at least, not fully convincing. We heard the arguments on the ill effects of fluoride. I must say that the anecdotal evidence that I hear is more convincing than what I heard this morning about the ill effects of fluoride. Then we heard the question of civil liberties, and I must say that that argument was equally unconvincing.

Mr Stevenson: Enforced medication.

MR BERRY: You had your turn and you will get another turn, Mr Stevenson, to have a say on this issue and you will be able to express again those views that we have heard ad nauseam. The proponents of this amendment do not necessarily agree on all of these issues and in fact all three areas are contentious. It is an unholy alliance of issues, but the thing which is of most importance to the people of Canberra and to the members of this Assembly is that the matter be properly exposed to public scrutiny through the appropriate Assembly standing committee, and that is, as I have moved in my motion, the Social Policy Committee. I urge members here to reconsider the position that they have taken in relation to the passage of this Bill and hold it up for a short time while that Social Policy Committee considers the matter and gives us an air of responsibility in government.

MR WHALAN (Minister for Industry, Employment and Education) (4.03): In support of this motion that has been so appropriately raised by the Minister responsible for health matters in the ACT, I would like to raise a number of questions as to why people who are supporting the bulldozing of this legislation through the Assembly are afraid to have it referred to a committee. There is something fundamentally wrong with these people who are afraid to have their claims examined by an appropriate policy committee.

What has happened during the debate this afternoon is that there has been a very clear demonstration of the fact that there are many issues which cannot be adequately addressed across this room. Many of those are of a highly technical nature, many of them relate to health matters, which should be more appropriately the subject of advice from technically skilled people. There are people who are supporting the bulldozing of this legislation and who are accusing others of us. We know that there has been a substantial caucusing to ensure that the numbers are there. As Mr Prowse has said from the floor of this chamber, "I have the numbers to push this through".

Those of us who are trying to have a debate raised on it today are being accused of wasting time. Those of us who are trying to defend the health of the children of the ACT are being so accused by the Residents Rally. Michael Moore at this moment is alleging that we are wasting time by

27 September 1989

seeking to have this very important, fundamental issue debated. It is very inconsistent of Michael Moore, Mr Deputy Speaker. I would like to remind you of a discussion in this chamber on 25 May, when Michael Moore moved a motion in relation to the proposed casino development on section 19. He said, "The motion before you is about public participation in decision making. It is about open, consultative government". He went on further during the debate to say, "This motion is about resolving conflict". You can notice the conflict that we have had today and differences of opinion. He said, "It is about the consultation process".

Now what has happened? What has happened on the road to Damascus that Michael Moore has had this dramatic conversion, that he no longer believes in the consultation process, that he no longer believes that it is relevant? We also had in that same debate a speech from Dr Kinloch. I find a fundamental inconsistency in what Dr Kinloch said in today's debate when he said that these issues are too complex to be referred to people out in the community; that they are too dumb to understand them; that they are not worthy of consultation on these issues. He wants us to bulldoze this draconian legislation through. You read the Hansard, Dr Kinloch, and see what you said about the people of Canberra and about their capacity to understand the issues when their children's teeth start to fall out as a result of this insane proposal.

Dr Kinloch in this debate on this day said, "I urge the Assembly that we have been without a gambling casino for the entire history of this Territory" - - -

Mr Kaine: I raise a point of order, Mr Deputy Speaker. I understood we were debating a motion to refer this matter to a committee, not to re-debate it. May we please get on with the debate on referring the matter to a committee?

MR DEPUTY SPEAKER: Yes. The point is taken.

MR WHALAN: To conclude on that point, it is relevant because I am trying to persuade Dr Kinloch to change his position. I can see him wavering. On this occasion Dr Kinloch said, "And to feel that it suddenly has to be rushed into being is not proper". You had your hand on your heart, Hector, and you said, "This should not be rushed. It is not proper. It is certainly not proper for an Assembly that wants to have open government, consultative government". Hector, those words now come back to haunt you. They come back to haunt you at the moment when you are denying people in the ACT their democratic rights by bulldozing this bit of legislation through. Those words are there on the record to remind you of your inconsistency when dealing with these matters.

Mr Moore: You voted against it. What about your inconsistency? Remember you voted against that. Now you have changed. Have you been on the road to Damascus?

27 September 1989

MR WHALAN: This is precisely the problem that we face. What has been raised in the debate today, and particularly in the concluding speech of Mr Prowse, highlights the real need for this to be referred to the committee, as proposed by my colleague Mr Berry. When Mr Prowse was speaking, he spoke about fluoride poisoning and the high toxicity of the chemical, and in doing so quoted the World Health Organisation. We all realise - and Mr Prowse has acknowledged this - that poisoning and toxicity are related to dose, and he was saying that he does, in fact, as a naturopath or whatever, prescribe poisons to people in certain dosages, but of course they are minute. But in relation to this, he does not continue to state that the World Health Organisation strongly recommends the fluoridation of water supplies for human consumption at a prescribed level as an important public and dental health measure.

Now,, it is not denied that fluoride at high levels can be toxic. I think that is generally acknowledged. But, equally, chlorine is a chemical which is related to fluoride. It is a highly toxic gas which can cause death, but it is universally used in the chlorination of water supplies as a public health measure, again at a recommended dose. Where does Mr Prowse stand in relation to chlorine? Is this acceptable or is it not? Sodium in the form of caustic soda is very toxic, yet when added to another toxic chemical, chlorine, it produces salt, which is again used by most people in the community.

So chemistry is very complex, and that is one of the reasons why we need to have the opportunity for so many of these complex issues to be examined by the competent members of our Social Policy Committee, so that they can avoid a situation where they can be quoted out of context. If fluoridation of water is to be regarded as mass medication, then so is chlorination. So why do the anti-fluoridation people not become anti-chlorination people as well?

Mr Prowse: It is a different reason. That treats the water; this treats the people.

MR WHALAN: Come on; they are both chemicals. You have got to be consistent. Maybe Mr Prowse is suggesting that we should all be issued with chlorine tablets, in the same way as the Residents Rally, as part of their policy, is going to issue free fluoride tablets to the community as their response. He raises the question of the relationship between cot death and fluoridation, and that was an issue that was raised during the debate. We have just recently had a fundraising appeal in relation to research into cot death, and it is widely acknowledged that the cause of cot death is at this point of time unknown. There is quite a number of possible causes, and it is quite open to those who wish to misrepresent any situation to put forward a cause.

27 September 1989

Of course, the anti-fluoride people have jumped on this particular bandwagon. The matter of mottled teeth due to fluoride has also been raised. This is not at all common. Most cases are very mild, and only rarely is recapping needed. Certainly it is not a reason for dentists to be wanting fluoridation, which is sometimes suggested. If there were no fluoridation, any subsequent increases in dental fillings would have a beneficial financial effect for the dentists, who pride themselves on preferring preventive dentistry.

Also in his speech Mr Prowse referred to the National Health and Medical Research Council and he stated in his earlier speech that this is a group of six people who have hung their academic hats on fluoride. This is a bit unfair to the people concerned. The council consists of some 25 members with representatives from the Australian Council of Trade Unions, the Confederation of Australian Industry, the Australian Federation of Consumer Organisations, the Australian Council of Social Services, representatives at the highest level from each State and territory, the Commonwealth Department of Community Services and Health, the Australian Vice-Chancellors Committee, and representatives from its principal committees which themselves have similar representation as well as expert committees and working parties reporting to them.

Mr DUBY: I raise a point of order, Mr Deputy Speaker. The matter to be debated is whether this matter should be referred to a committee, not a rehash of this morning's debate on the efficacy of the taking of fluoride in the water. Please ask the speaker to stick to the point.

MR DEPUTY SPEAKER: Yes. Minister, please stick to the point.

MR WHALAN: Mr Deputy Speaker, I do not think that we can overexaggerate the right of community views in relation to this matter to be raised here today in this chamber because we do know that there is an irresponsible move to bulldoze this draconian legislation through and to deny the rights of people to be consulted in relation to it. We know that this is being supported by the Residents Rally party, contrary to all their mouthings about being supportive of the consultative process. It is for that reason, I think - the prospect that I am unable to persuade Dr Kinloch to reconsider his position - that every opportunity should be taken to air these issues.

That is the point of raising the technical aspects and emphasising them, so that the members of the Assembly can have reinforced the fact that the only way, and the only proper way, that this matter can be resolved is by going to an Assembly committee where that Assembly committee has the opportunity to place advertisements in newspapers, maybe even national advertisements, to invite submissions to discuss this issue, then to receive representations from

27 September 1989

individuals in the community, from organisations that have particular views like expert medical organisations and expert dental organisations and then, if necessary, to engage assistance in the assessment of the evidence that it has before it.

But it is totally inappropriate. None of those processes are possible when we push through legislation of this sort. When you push through legislation of this sort there is no opportunity for learned organisations to make their contributions, and there is no opportunity for academics like Dr Kinloch to make worthy contributions to the examination. There is no opportunity for the reconciliation of different views on a highly controversial and highly divisive issue. It is for that reason that Mr Berry, as the Minister responsible for this area, has quite rightly advised the Assembly by way of his motion to have this matter referred to the committee so that it can be considered in a way which is calm and objective and in a way in which everybody in the community who has an interest has the opportunity of being consulted. It is only when that process has been passed through that we should be considering the proposal in the legislation which we have before us.

MR HUMPHRIES (4.16): Mr Deputy Speaker, I put some arguments this morning as to why the Liberal Party would not support a motion of this kind - to refer this matter to a standing committee - and since this morning nothing has changed.

MR COLLAERY (4.17): Mr Deputy Speaker, I will make just a few remarks. The Rally did not intend responding to this tirade but, in the event that anyone takes notice of it, I wish to give a conclusive answer to the Deputy Chief Minister's statements. Firstly, Mr Deputy Speaker, he states that this has been bulldozed through and put on without adequate notice. From the Rally's point of view, it was in its policy statements, issued and widely circulated at considerable cost to the community funding base of the Rally before the election. That policy said, and I will read it:

The Residents Rally will remove fluoride from the water supply and make free fluoride available from community health centres with the appropriate advice on who ought to be taking fluoride. This action will allow freedom of choice in the community.

Now, Mr Deputy Speaker, there is an answer to the bulldozing effort.

Secondly, this Bill has been around for a month. It has been well and widely known what the mover of this Bill's interests were, and widely foreshadowed that this Bill would come before the house. With the exclusion of Mr Wood, none of the Labor Party speakers to this motion have

27 September 1989

come up with any sophisticated form of data or informed speech on this subject.

Mr Wood: I do not know that I did, either. I did not send out reams of data.

MR COLLAERY: Yes, but we do not want to attack you.

Despite the resources available to this Government, despite the 17,000 public servants and the health and dental services available, this Minister for Health has not tabled in the Assembly today, as he should properly have done, an informed advice to support his assertions. It is not here. Mr Deputy Speaker, we have seen the very cynical use of this debate. This group over me, of four people at least, have not had the slightest interest really in fluoride or the community. They have seen this as another attempt to get at the Rally. And I think that is clear to everyone.

Mr Wood: Nonsense!

MR COLLAERY: Yes, it is clear. It is very interesting that the four in front of me are now falling in behind Mr Whalan in his fixation on the Rally. We heard in every sentence a reference to the Residents Rally. I assume it is on his lips at all times, even in the middle of the night. He dreams it - "the Residents Rally, the Residents Rally". This rhetoric, Mr Deputy Speaker, shows clearly that the Deputy Chief Minister has his priorities in order. They are not fluoride and this debate today, but to take up as much time of the Assembly as possible, to take as many cheap shots and gibes at the Rally - particularly at my colleague Dr Kinloch, who approached the original debate on fluoride in our vexed room at the time, when we tossed it around and looked at all the data and the text very carefully and cogently.

For the Chief Minister to suggest, when we decide that we will not simply regurgitate the very carefully researched speech prepared by our colleague Mr Moore, that we adopt a flippant attitude is simply cheap, political points scoring in the hope that the media might fall for it. It was ill becoming, as my colleague Mr Kaine said, for the Chief Minister to adopt that approach.

We say that the Rally has never opposed, per se, any due inquiry into fluoride. It is an issue that is widely and currently debated; it has been known to have been on for some considerable months; and the Government has not brought an informed contribution to the debate. That is extremely regrettable. This Deputy Chief Minister's best defence in that situation is his typical, classic bluster. Well, bluster is not good enough in the health area. We need facts.

Mr Prowse has brought facts forward. Mr Moore has brought facts forward. Mr Stevenson has brought facts forward. Others have come into that and added to the debate, and we

27 September 1989

have not seen an informed commentary from the Deputy Chief Minister, who appointed himself to take over a debate, again, for reasons best known to himself.

MR DUBY (4.21): Mr Deputy Speaker, I rise to speak also in relation to this matter. To tell you the truth, I am absolutely fascinated to listen to the Deputy Chief Minister describing how this matter is being bulldozed through the house. It has come to my attention that things are bulldozed through the house, according to the Deputy Chief Minister, when he is on the wrong side. "Bulldozed" is not the way to put it.

The fact of the matter is that there has been an enormous amount of consultation amongst the members of this Assembly. This matter has been up for a month. This claim by the Government that it is being bulldozed through, against the wishes of the Canberra community, because it will not be referred to a committee, simply does not hold up. It does not wash. The fact of the matter is that the Government was offered the proposal, long before this debate came into this Assembly, that by all means this matter can be referred to a committee and the committee can recommend one way or the other, but in the meantime, until that committee makes a recommendation, unfortunately the taps get turned off. That is not acceptable.

Apparently, any other way - the taps stay on and the fluoride goes into the water until the committee makes whatever recommendation it may decide to make - is a different kettle of fish. That is bulldozing it through; that is not taking things into consultation. I mean, for goodness sake, we have recently had a whole series of consultations about the budget. Does the Government want to have consultation about fluoride? Does it need an angry crowd of 500 dentists outside this building, screaming that fluoride must be - - -

Mr Whalan: They would be the lisping 40-year-olds.

MR DUBY: Lisping, yes. I will not get into that. Is that what consultation is supposed to mean? Consultation, surely, is for a committee of this Assembly. We are not experts. No-one ever proposed that we were.

Mr Berry: You are pretending you are.

MR DUBY: No, no; on the contrary. What we are trying to assume is that the average people in the street know what is best for them. For someone else to determine what should be ingested into their bodies against their wishes, come what may - they have no choice in the matter - to me is clearly unacceptable.

The arguments have been put in favour of fluoride. Fluoride is there and it will be, I assume and I hope and I will make sure, freely available to those who want it from any health centre throughout the Territory.

27 September 1989

There is this argument about consultation. Frankly, Deputy Chief Minister, I do not accept it. "Bulldozing" is not the word. I think this has just been a time-wasting ploy. I refuse to partake any further. As a matter of fact, Mr Deputy Speaker, I move:

That the question be now put.

Mr Whalan: I raise a point of order, Mr Deputy Speaker. I would just like to draw your attention to the fact that there may be others who wish to speak and, given that this is one of the most important pieces of legislation, in the words of Mr Prowse, to be brought before this chamber, then no-one should be denied the right to speak.

Mr Moore: I raise a point of order, Mr Deputy Speaker. The question, according to standing order 70, "that the question be now put", shall be put forthwith and determined without amendment or debate.

MR DEPUTY SPEAKER: I will put the question.

Question resolved in the affirmative.

MR DEPUTY SPEAKER: The question now is that the Bill be referred to the Standing Committee on Social Policy.

Question put.

The Assembly voted -

AYES, 5

Mr Berry
Ms Follett
Mrs Grassby
Mr Whalan
Mr Wood

NOES, 12

Mr Collaery
Mr Duby
Mr Humphries
Mr Jensen
Mr Kaine
Dr Kinloch
Ms Maher
Mr Moore
Mrs Nolan
Mr Prowse
Mr Stefaniak
Mr Stevenson

Question resolved in the negative.

MR DEPUTY SPEAKER: Is it the wish of the Assembly to dispense with the detail stage?

Mr Whalan: No.

Leave not granted to dispense with detail stage.

27 September 1989

Suspension of Standing Orders

MR JENSEN (4.28): Mr Deputy Speaker, I move:

That so much of the standing orders be suspended as would allow me to move that the detail stage be dispensed with.

MR DEPUTY SPEAKER: The question is that standing orders be suspended. Deputy Chief Minister?

Mr Moore: I move that the question be now put.

Mr Whalan: Sorry; I was on my feet. I had the call. Mr Deputy Speaker, I am on my feet. You gave me the call.

Mr Jensen: I raise a point of order, Mr Deputy Speaker.

MR DEPUTY SPEAKER: Yes, Mr Jensen?

Mr Jensen: I understand that Mr Whalan indicated that he had been given the call. I certainly did not hear you give Mr Whalan the call.

Mr Whalan: Mr Deputy Speaker, this is yet another extraordinary denial - - -

MR DEPUTY SPEAKER: Order! I will take advice.

Mr Moore: I take a point of order. Whether any other member is speaking or not, I can call for the question to be put.

Mr Whalan: We are entitled to debate this Bill clause by clause, and you are denying us that right.

Ms Maher: You have already debated it.

Mr Whalan: Not clause by clause. There are issues we have about which there has been no discussion. I refer to the penalties, the referendum, the six-year period. It is extraordinary.

MR DEPUTY SPEAKER: I have taken advice. Resume your seats, please. I have a discretion under standing order 70 and, although I am mindful of some of the points people have been making about wasting time, at this stage I am prepared to hear the Deputy Chief Minister.

MR WHALAN (Deputy Chief Minister) (4.31): Thank you, Mr Deputy Speaker. I do appreciate this opportunity, and I am now speaking against the suspension motion. Just to get this quite clear, because Michael Moore does not seem to understand this, Mr Deputy Speaker, there has been a suspension motion moved to deny the Assembly the opportunity to discuss this Bill in detail. If this suspension motion is carried, the effect of it will be to deny members of this Assembly the right to discuss

27 September 1989

important elements of this piece of legislation. They include the definitional expressions and the penalties in relation to bodies corporate and individuals.

It particularly precludes discussion on the distinction between certain types of chemicals as specified in the legislation and how they can be applied within the terms of the legislation and added to water. But what is particularly concerning - it has not yet been the subject of detailed discussion and is of grave concern to the Government - is the fact that there can be no review by way of this referendum which has been proposed by Mr Prowse in this legislation before six years have passed. There has been no justification of the period of six years. There has been no opportunity for members to query the appropriateness of that sort of procedure. So, even if the legislation does allow for a referendum, the referendum cannot be held under six years. This is a part of the most draconian elements of the draft legislation and is further justification for having a detailed examination, and it is the detailed examination of these issues which will be denied by the passing of Mr Jensen's motion.

Question resolved in the affirmative.

Mr Jensen: Mr Deputy Speaker, on reflection, I think it is probably now appropriate that I withdraw the motion that I just moved and we will allow the Government to put its money where its mouth is.

MR DEPUTY SPEAKER: We will now proceed to consideration of the detail stage of the Bill.

Mr Whalan: I raise a point of order. I am afraid, Mr Deputy Speaker, that he will need leave to withdraw. I am afraid you do not get off the hook quite as easily as that, Norman.

MR DEPUTY SPEAKER: Deputy Chief Minister, he was moving the suspension of standing orders to move a motion. He has not actually moved his motion.

Detail Stage

Clause 1 agreed to.

Clause 2 agreed to.

Clause 3 (Insertion)

MR WHALAN (Minister for Industry, Employment and Education) (4.36): Mr Deputy Speaker, if you examine the principal legislation, you will see that the principal legislation is divided into 10 parts, and we note that it is proposed that this should be incorporated at part VIIIA. I wonder whether the proposer of the legislation could give us some

27 September 1989

explanation as to why it would be located at that particular point. There seem to be other more suitable places for it to be included in the legislation.

Mr Prowse: The government draftsman drafted this. It has been before the house. If you had a problem, why did you not address it when you had time?

Mr Whalan: Can I speak again, Mr Deputy Speaker?

MR DEPUTY SPEAKER: Yes. You have two periods, Minister. You can now have your second period.

MR WHALAN (Minister for Industry, Employment and Education) (4.38): Mr Deputy Speaker, I am rather disappointed in Mr Prowse's reaction to this. He did not stand up to speak which is an abuse of the - - -

Mr Kaine: On a point of order, Mr Deputy Speaker; this is becoming a travesty of a debate and I would respectfully submit that it is time this nonsense was stopped here and now and we got on with debating the substance of this Bill. They wanted a detailed debate. If they want to debate the detail of the Bill, let us do it. They are not doing that. They are not debating the substance of the Bill at all. It is getting quite out of order.

MR DEPUTY SPEAKER: Minister, you need to speak to clause 3 of the Bill. That is the substantive part of this Bill.

MR WHALAN: Yes, and that is what I am talking to, Mr Deputy Speaker.

MR DEPUTY SPEAKER: Well, would you confine your remarks to it.

MR WHALAN: We sought an explanation from the proposer of the legislation, and the Assembly has been denied an explanation on this particular matter because he has chosen that course of action. Now it is up to him to deny information. I think the whole way in which this legislation is being proposed is to deny this Assembly information and to deny the people of Canberra and the ACT information and an opportunity to discuss and be consulted in relation to it. This abuse is yet a further example of that.

Mr Prowse: Mr Deputy Speaker, I seek leave of the Assembly to make a statement.

MR DEPUTY SPEAKER: Mr Prowse, you do not need leave of the Assembly to make a statement.

MR PROWSE (4.40): I put this point back to the Deputy Chief Minister. This was drafted by the government draftsman. It has been on the floor of the Assembly for a month. Why are you now reacting with this delaying tactic? For goodness' sake, if there is a problem we expect you to

27 September 1989

come forward when the Bill is presented on the floor and, if it is wrong, and your draftsmen have done the wrong thing, please inform us. Do not take up the time of the Assembly with this rubbish.

Clause agreed to.

Question put:

That the remainder of the Bill be agreed to.

The Assembly voted -

AYES, 12

Mr Collaery
Mr Duby
Mr Humphries
Mr Jensen
Mr Kaine
Dr Kinloch
Ms Maher
Mr Moore
Mrs Nolan
Mr Prowse
Mr Stefaniak
Mr Stevenson

NOES, 5

Mr Berry
Ms Follett
Mrs Grassby
Mr Whalan
Mr Wood

Question resolved in the affirmative.

Question put:

That the Bill be agreed to.

The Assembly voted -

AYES, 12

Mr Collaery
Mr Duby
Mr Humphries
Mr Jensen
Mr Kaine
Dr Kinloch
Ms Maher
Mr Moore
Mrs Nolan
Mr Prowse
Mr Stefaniak
Mr Stevenson

NOES, 5

Mr Berry
Ms Follett
Mrs Grassby
Mr Whalan
Mr Wood

Question resolved in the affirmative.

Bill agreed to.

INDEPENDENT AUDIT TO DETERMINE ASSETS TRANSFER

MR KAINE (Leader of the Opposition) (4.48): Mr Deputy Speaker, I was going to begin by thanking the Government for graciously allowing this debate to take place but, in view of what has happened over the last four hours in this Assembly, even if I said it with tongue in cheek I could not possibly have meant it, so I will get straight on with the debate. I move:

That -

- (1) this Assembly requires the Government to commission an independent audit to determine the assets transferred to the Territory on self-government and the public debt associated with those assets;
- (2) the report be provided to the Assembly no later than 30 November 1989; and
- (3) the report be referred to the Public Accounts Committee for consideration.

The motion before us has to do with the commissioning of an independent audit to determine the assets transferred to the Territory on self-government and the public debt associated with those assets. I seek leave of the Assembly to remove the reporting date in paragraph (2) since it would now be impossible to achieve that reporting date and to substitute for the date "30 November 1989" the words "the first sitting day of 1990".

Mr Deputy Speaker, this is not a new issue. It is an important issue and it is one that requires early resolution, but it is not a new issue. It is an issue that has been on the Liberal Party agenda since the beginning of our election campaign and it is one that I have alluded to on many occasions and particularly during the period since 11 May 1989 in this house.

It is interesting that Government members have not taken up this particular Liberal Party policy. They have picked up a few others. They have responded to the criticism that we have directed to them on many matters. They very quickly produced a discussion paper on planning when we criticised their lack of action on that. They injected a first home buyers stamp duty plan and a fidelity trust fund into their budget - a direct steal out of Liberal Party policy and one that nowhere received any attention in their own policies nor in the initial budget statement, but they were quick to pick it up and insert it in their budget. However, they have not picked up the question of identifying what our assets and our public debt amount to. The reason for that, I think, Mr Deputy Speaker, is pretty obvious.

It is important and imperative that we know all the details of the assets we have inherited and their condition. I notice that the Chief Minister did allude to that latter problem - the condition of assets - in her budget speech yesterday when she claimed that the Commonwealth was partly

27 September 1989

responsible for our economic and financial situation because it gave us some run-down assets.

It is imperative also that we know the details of our public debt: how big is the debt bill; what assets does it relate to; and what is the annual interest bill? One would have thought, Mr Deputy Speaker, that these were matters of such importance that we would have been enlightened in the budget, but what are the facts in the budget? All we are told in the budget is that there is a provision for \$91m approximately to be paid from the consolidated fund by way of debt servicing. That is \$91m, a very large sum, but what does it relate to? One might also point out that this compares with a similar payment last year of only around \$50m. There has been an 80 per cent increase in the servicing cost of our public debt from last year to this year.

Incidentally, when the Chief Minister brought down her initial budget statement only eight or nine weeks ago, the figure there was put at just over \$82m, so over a period of about nine weeks it has grown from \$82m approximately to \$91m, a growth of \$9m over the last eight to ten weeks. So it is obviously a very rubbery figure. Just what is the cost of servicing our public debt?

In addition to that \$91m that is shown as being a payment from the consolidated revenue fund, there are two other references to debt servicing in the budget. The first is on page 60 of budget paper No. 4, where ACTEW has provision for debt servicing of over \$17m, and that of course is in addition to that shown in the consolidated fund.

There is also reference at page 10 of budget paper No. 8 to an amount of \$10.9m debt servicing from the municipal debt. It seems to me that that may or may not be subsumed in the original \$91m, but there is no explanation that that is so. So we really have no idea exactly what the debt servicing cost in this year is, let alone anything about the assets to which it relates. So I think that there is a great need for some work to be done to find out what our debt really is.

The debt itself is quite a fascinating subject, because if you try to find out what the public debt is, the only reference to it is on page 23 of budget paper No. 7. It is described as being "the historical notional debt calculated using a hypothetical model", and on the basis of some historical notional debt calculated using a hypothetical model the debt is set down at 1 July 1989 at a figure of around \$285m, but what does the figure mean? Nowhere in the budget papers is there any indication of what the \$285m represents, and when you learn that it is an historical notional debt calculated using a hypothetical model, you really have to ask: does anybody know just what the public debt is that we individually as taxpayers and ratepayers are responsible for?

27 September 1989

The fact is that we do not know anything about our public debt. The fact is, Mr Deputy Speaker, that the Government does not know anything about what our public debt is. We need to know it and the only way we are going to find out is to have an independent audit carried out on the assets that we inherited from the Commonwealth on self-government day. As the Chief Minister rightly pointed out in her budget speech, we need to know what condition those assets are in so that we can know whether they are really assets or whether they are just rubbish.

Finally, Mr Deputy Speaker, we do need to know what the public debt really is, what it relates to, and how much it is going to cost this community in future years. Unless you know that, how can you enter into increasing public debt by way of continuing borrowings from year to year? I submit that we are in a very delicate situation. It is a very large part of our budget, nearly \$100m in debt servicing charges per year alone, about one-twelfth of our budget, and we do not even know what we are paying it for.

I think that it is a matter that the Chief Minister should have taken up long before this. It should not have to be brought to her attention by me or by any other member of this Assembly. The information should have been there, it should have been in the budget and, if she does not have the resources to determine this information for herself, then she will support this motion that we get an independent auditor to come in, do the work for us, and satisfy us on what our true financial position really is.

MR COLLAERY (4.57): I wish to add a few remarks to support the motion moved by my colleague Mr Kaine. In the four minutes available to me I would like to point out that in the much-vaunted policies which the Deputy Chief Minister has now finally conceded that the Rally has, which he said we did not have, the Rally has long supported this motion and has said in its original policies that in government the Rally will immediately instruct the ACT Treasury to present an itemised inventory of ACT government property assets.

Mr Kaine essentially said it all. He indicated, and the Rally agrees, that the inventory would be a primary determinant of a number of issues, including our revenue base. Interestingly, Mr Deputy Speaker, the matters that would be involved in that bringing forward of an inventory would include an independent audit, which in itself is something that one would have thought should have been a preliminary piece of work before the Government brought down this budget. Really we have in the supplementary documentation to the budget all of the supposition that could have been dealt with by that independent audit which the Rally indicated in its finance policy, and which the Labor Party had to hand from 11 May or earlier, was a necessary prerequisite to a proper arrangement. That, of course, is something that we might be approaching in due course.

27 September 1989

Mr Deputy Speaker, the assets of the Territory included at one stage forests of the Territory, and some of our Commonwealth assets included softwood forest production. Recently, we lost a proportion of that inventory belonging to the Territory. The Deputy Chief Minister, as a consultant to the Federal Government, was aware of the grant of acreage at and near the Stromlo Forest for a fish farm; and one would be interested to see in a compilation of the property inventory what was done in respect of the estimated loss of \$59,000 of softwood production and what is the ongoing loss to the Territory of that revenue as a result of that softwood production area having been forever removed from the inventory.

I also note that as part of the Commonwealth inventory the ACT Government is intending to create and handle its own insurance except that it is having a major consultancy, according to the budget overview document, carry out a study of how to insure the assets of the Territory against damage. Of course, it is not indicated in that document what type of damage to the assets of the Territory the Government could get insurance for, but that could include impact, fire and damage, and of course it is not clear to us whether the Government is intending to insure the Territory against the damage it will do itself to our assets by virtue of its own actions.

MS FOLLETT (Chief Minister) (5.00): Mr Speaker, as Mr Kaine pointed out in his opening remarks on this motion, it is not a new issue. It is one that he has raised on a number of previous occasions and one on which I have previously addressed this Assembly at some length in my remarks on the Government's financial management strategy. I refer to my response on 23 May and also to a detailed address in this Assembly on 22 August.

Mr Speaker, I think it is important that we understand as an assembly - and I am happy to give a brief summary - how assets are transferred from the Commonwealth to the ACT. If the Opposition Leader or, indeed, Mr Collaery would like to pursue this matter in more detail then I would refer them to the self-government legislation, and in particular to the ACT Self-Government (Consequential Provisions) Act, which does set out in the statute the actual technique for transfer of assets from the Commonwealth.

The principal provision in that Act for the transfer of assets and rights to the ACT is section 5. This section requires that the Commonwealth Minister responsible for the territories transfers those assets and rights used for ACT functions. So, while there is agreement in principle to the scope of the transfer, there are some concerns by this Government, particularly relating to the retention by the Commonwealth of certain parcels of land which have no clearly defined national purpose.

27 September 1989

MR SPEAKER: Order! As the time for private members' business has expired, the debate is interrupted. The Chief Minister has leave to continue her remarks when the debate is resumed.

PRESENTATION OF PAPER

MS FOLLETT (Chief Minister): Mr Speaker, I present the following paper:

New Capital Works Program 1989-90 - Government's response to the report by the Standing Committee on Planning, Development and Infrastructure.

HOUSING POLICY REVIEW 1989-90 Ministerial Statement

MRS GRASSBY (Minister for Housing and Urban Services), by leave: Mr Speaker, in the ministerial statement on 25 May 1989 I announced a review of the housing policy and I promised that it would bring about real changes. The Chief Minister, in her budget statement, outlined the first results of the review. I now wish to detail the housing measures in the first budget for the ACT which will advance the social justice objectives of the Government.

In the election campaign, we promised to retain a strong public housing sector to meet the needs of those on low incomes. The Commonwealth-State housing agreement is the means by which we will be able to achieve this objective. I am pleased to announce that the ACT will become a full party to the agreement this year. This has been made possible by self-government. Once the negotiations for the new agreement are finalised, we will be introducing legislation to amend the ACT Housing Assistance Act to make it consistent with the new agreement.

This means for the ACT that all Commonwealth funds will be provided as grants; the ACT Government will need to match the funds to get all the grants; more money will be directed towards rental housing for those on the lowest incomes; funds for special housing programs will increase; new home ownership policies will need to be in place by the next financial year; a joint ACT-Commonwealth housing plan will be announced each year and we will consult with the community on its priorities; and the Housing Trust will involve its tenants more in decisions.

The agreement sets the general principles for housing but the ACT Government must decide the details of the policies suitable for Canberra. We have promised that we will provide an annual housing program of 280 dwellings for each of the next four years in order to fulfil our commitment to those most in need. The 1989-90 budget gives effect to the first year of this commitment.

27 September 1989

There has been comment that there is no rationale for this expansion. I can assure the Assembly that there is. This year we will see a 2.6 per cent increase in the stock of Housing Trust dwellings. This is about equal to the estimated household formation rate. Our objective is to maintain the waiting time for a house at about the current level, and this can only be achieved in a socially just manner if the size of the program is related to the growth rate of the new households.

While these long-term plans will be assisted by the Commonwealth under the new housing agreement, I must express concern about the Commonwealth's decision to sell Gowrie Hostel. The ACT Government will make its views very clear on this issue. We also promised in our election campaign to improve housing so that the most needy benefit from the expenditure of limited resources.

One of the early measures considered by the Government as part of the ACT housing policy review was the rent setting strategy of the Housing Trust. I announced the policy on 9 July 1989. It will mean that higher income tenants will have up to a 20 per cent increase in rent this year as we remove subsidies from those no longer in need. Rents for higher income tenants will move towards the market levels while rents for those on lower incomes will remain affordable through the rental rebate system.

This policy will see a number of public housing tenants in receipt of a rental rebate increase of 73 per cent in 1989-90. But the review of housing policy must be an ongoing process. We will review the rent and the rent rebate policy again this year to see whether our existing practices take account of issues such as family size and work force incentives, particularly for women. Prior to the ACT election, we said that we would review the current system of maintaining the public housing stock to reduce hardship to tenants and to reduce turnover times.

We have already made the most important decision in this area. On 25 July 1989 the Government announced its decision to replace Melba Flats at a cost of over \$35m over the next four years. The Melba Flats decision is without doubt one of the most significant decisions made by any Government. We have also decided in this year's budget to increase the number of older houses to be upgraded and to increase the money for repairs and maintenance. We will be examining ways of reducing the vacancy time while houses are being repaired.

I would like to turn now to the problem of homelessness. My colleague the Minister for Community Services and Health announced a short time ago that the ACT has signed a new agreement with the Commonwealth to cover the operation of the supported accommodation assistance program from 1 July 1989 to 30 June 1994. This program aims to ensure that homeless people in crisis have access to adequate and

27 September 1989

appropriate transitional support accommodation and support services. The new agreement will enable funding to be more efficiently provided to the most needy groups in the ACT.

The problems with youth homelessness in the ACT were also clearly recognised in this Government's election policy which promised to remove restrictions on people under 18 obtaining Housing Trust houses and to make houses available for this group, to improve publicity on housing options for 16- and 17-year-olds to help them find appropriate assistance, and to address the recommendations of the Burdekin inquiry in developing new measures for government consideration.

I asked the housing policy review to give priority to youth homelessness, which is a very real problem, with real economic and social costs to young people and society. Housing services for young people should aim to reduce housing related poverty by providing affordable and secure medium- to long-term independent housing and group housing options for those unable to live independently. Under the Commonwealth-State housing agreement, I will be advising the Commonwealth that \$655,000 will be spent in the ACT this year for a crisis accommodation program, an increase of over 130 per cent over the previous year.

The Commonwealth Government has also provided more money to develop up-to-date medium- and long-term youth accommodation under the crisis accommodation program. We will establish a new scheme to allow single people to share group houses. Some of these will be sponsored by community groups who already run shelters. Community groups will receive up to \$2,000 to assist with whitegoods and furnishings. There will also be a range of other measures to assist young people. Firstly, the Housing Trust will appoint a youth housing officer to help young tenants. Secondly, we will increase the training effort for Housing Trust staff. Thirdly, an information package will be prepared on Housing Trust services for young people. Fourthly, the priority housing procedures will be reviewed to ensure that there is no discrimination against young people. Fifthly, the rent relief and bond assistance schemes are to be amended so that, where the applicant agrees, cheques can be made payable to the agent or landlord. Finally, \$35,000 will be provided to develop housing education and living skills kits for use by youth workers.

These new steps expand the range of youth services already operated by the ACT Housing Trust. They include a singles housing register which enables 16- and 17-year-olds to register and be allocated individual housing, and rent relief of up to \$50 per week and bond assistance of up to \$600. Mr Speaker, the Government has moved quickly and decisively to take action on youth housing. The proposals I have outlined will enable a comprehensive ACT housing response to the recommendations of the Burdekin report and will fulfil the ACT Government's election commitments in the area of youth housing.

27 September 1989

Nor have we forgotten the needs of the aged. The budget provides funds for 56 new aged persons units. We have a discussion paper being prepared on how reverse equity schemes could operate in the ACT and how these can be linked to housing policies for the aged.

The budget also provides challenges for the private sector. The Commonwealth Government has offered the ACT \$210,000 this year rising up to over \$1m in five years' time to establish and subsidise a private sector rental housing trust. The trust would raise private sector funds and build or purchase existing rental dwellings, arrange property management and rent dwellings on the private market. We expect that this could contribute up to 500 dwellings over the next five years.

We will be inviting expressions of interest from financial institutions and housing industry organisations in November. The success of the proposal depends on the creative skills of the private sector. We will be looking at proposals on the basis of the social justice impact; the number of new dwellings to be provided; the financial capacity of the sponsor; and other options, such as the scope to link the systems of home ownership strategies.

Home ownership is one of the tasks for the next phase of the housing industry review. Under the new housing agreement, we must redesign our home ownership scheme this year to better complement private sector mortgage funds. As an interim measure, we have increased the funds under the commissioner for housing loan scheme from \$13.92m last year to an estimated \$15.1m this year. But importantly, as the Chief Minister announced, we have extended stamp duty exemptions of up to \$1,765 to first home buyers in this year's budget.

In order to direct assistance to the most needy first home buyers and to make the exemption more effective, the scheme will be subject to eligibility criteria. An income test will restrict eligibility to those first home buyers with an annual taxable household income of less than \$33,000. A full exemption of duty will be provided up to a house value limit of \$90,000.

The budget also provides assistance for those existing home buyers who are in danger of losing their home. Following the Commonwealth decision to provide more money for mortgage relief, the housing policy review has looked at the current scheme. The criteria for eligibility for assistance will be relaxed to provide assistance to home buyers with gross household incomes of up to \$850 per week. Non-interest bearing loans of up to \$3,000 will be provided. Those on the lowest incomes will be eligible for refinancing of their loans under the commissioner for housing loan schemes. We will also be amending the commissioner for housing loan scheme to allow granting of priority assistance to lower income households in difficulty.

27 September 1989

We promised in our election statements to establish a rental bond trust. We intend to introduce legislation this financial year for a rental bond trust and a real estate agents fidelity guarantee fund. The budget provides an advance of \$250,000 to meet the costs of establishing a rental bond trust which will provide protection for both tenants and landlords. It will be compulsory for both private landlords and real estate agents to lodge bond money with the trust. The interest earned within the trust will be mostly used to assist lower income renters and those disadvantaged in the private rental market. A five-person statutory rental bond trust board will be created. A discussion paper on the rental bond trust will be released next month and we will be seeking the views of the industry and the community, particularly on dispute settling procedures.

A fidelity guarantee fund will be created by an amendment of the Agents Act 1968 and will be introduced by the Minister for Industry, Employment and Education. This fund will provide compensation to those who suffer a loss as a result of real estate, business or stock and station agents being unable to account for the moneys being held in their trust accounts.

In addition to helping to meet the housing needs of ACT residents, the surplus income earned by both the rental bond trust and the fidelity guarantee fund will also be used to improve landlord and tenant relations; to provide information on the rights and obligations of both landlords and tenants; to provide education and assistance to industry on residential real estate; and to meet the costs of dispute settling and administration.

Mr Speaker, I seek leave to table a series of information papers providing more detail on the measures included in the budget.

Finally, Mr Speaker, I would like this Assembly to be aware of the ongoing work of the housing policy review. It is our intention to issue, for public consideration, a series of policy discussion papers to form a basis for future housing initiatives. These policy papers will focus on the special needs of groups such as women, the aged, people with disabilities, people living with AIDS, people from non-English speaking backgrounds and Aboriginal people. The housing policy review will also examine issues for people living in caravan parks and boarding houses. We will also be examining our election policy promise to create a housing and tenant council.

Another important area is the operation of the ACT Housing Trust, with some of these matters being touched on already. We will look at further improvements in repairs and maintenance to reduce vacancy times. We must redesign our home ownership schemes. We are looking at Housing Trust services for the aged. We will review the rent and rent

27 September 1989

rebate practices. We will examine the appeal and eviction procedures. We will be improving planning arrangements.

The next progress report, which I intend to provide early next year, will be a blueprint for social justice and housing in the ACT and will build on the very important progress we have already made with the housing policy review.

Mr Speaker, I wish to thank members of my department who have worked very hard on this housing review over the period of bringing this to fruition with the budget. I feel they have done a wonderful job with the policies that we have given them, which have been Labor Party policies. I congratulate them for this wonderful job they have done.

I present the following papers:

Housing Policy Review 1989-90 -
Ministerial statement, 27 September 1989;
Explanatory notes.

I move:

That the Assembly takes note of the papers.

Debate (on motion by **Mr Stefaniak**) adjourned.

DRUGS IN SPORT - GOVERNMENT POLICY Ministerial Statement and Paper

MR WHALAN (Minister for Industry, Employment and Education), by leave: Mr Speaker, the issue of the use by athletes of banned performance enhancing substances in sport has received wide publicity and was highlighted in events at the 1988 Olympic Games. Since 1984 the Federal Government has taken a number of initiatives in developing policies and programs to combat the use of prohibited substances and doping practices in sport.

A report by a Senate inquiry into drugs in sport, which contained a number of significant recommendations relating to random drug testing and education programs, was presented to the Federal Government for consideration on 14 June 1989. Senator Richardson, the Federal Minister responsible for sport, has since announced the establishment of an independent Australian Sports Drug Agency. This agency will coordinate a national random testing program supported by all the States and territories and develop comprehensive education programs.

To give effect to these programs the Federal Government will provide more than \$4m over the next four years to the Australian Sports Drug Agency. The Senate committee also recommended that a meeting of Commonwealth and State Ministers responsible for sport and health matters meet to

27 September 1989

consider the issue raised in the report. I will be attending, as the representative of the ACT.

The Government has a responsibility to contribute to eliminating the use of drugs and doping practices prohibited by the International Olympic Committee. The need for a nationally coordinated approach to eliminate the use of prohibited substances in sport and the establishment of a random drug testing program was agreed at the last Sport and Recreation Ministers Council meeting in March 1989. It is against this background that the Government has acknowledged the need to establish an ACT policy which is in line with Commonwealth Government policies.

The development of this policy demonstrates the commitment by the ACT Government to these agreements and implements ACT Labor Party policy relating to drug-free sport. The establishment of programs for elite and developing athletes under the ACT Academy of Sport also necessitates the development of formal policies, terms and conditions on the use of prohibited doping practices by ACT athletes or organisations receiving assistance from the academy.

The ACT policy on drugs in sport reflects this Government's strong opposition to the use of prohibited substances and doping practices by athletes. It supports moves by national and other sporting associations for random dope testing at championships and competitions and during training. It also encourages the development of drug education programs for ACT athletes and sporting bodies.

Financial and other assistance provided by the ACT Government for sporting organisations and athletes in future will be subject to this policy. In particular, any athlete found by a relevant controlling body of sport to have engaged in doping practices prohibited by that body would be ineligible for any financial or other assistance under the ACT sports assistance programs. These include the ACT sports development program, the ACT Academy of Sport and the talented athletes award scheme.

Athletes receiving government assistance will have to declare that they will not use prohibited doping practices. They must agree to refund the sum of money of any grant if suspended from sport for misconduct, including the taking of banned substances during the grant year. Other provisions in the policy allow for people involved with sport, such as coaches, officials, medical practitioners or employees of sporting organisations, to be ineligible for assistance if they are knowingly involved in any breach of the doping provisions by the controlling body.

To be eligible to receive financial or other assistance, ACT sporting organisations will be requested to provide a written statement of their policy on drugs in sport and to agree with any conditions related to the ACT Government policy. Hirers of ACT government-managed sports facilities may be required to cooperate in appropriate random drug

27 September 1989

testing procedures on athletes using these facilities. Such tests would be undertaken in conformity with the rules of the International Olympic Committee's medical commission. The Office of Sport, Recreation and Racing is liaising with the Australian Sports Drug Agency on arrangements for carrying out random drug testing procedures in the ACT.

An anti-drugs register is also being established for ACT athletes to publicly declare that they oppose the use of banned substances in sport and that they will not use any prohibited doping practices. The policy does not require any person to disclose information about an athlete which was obtained in a situation of professional confidentiality. The ACT Government will rely on the controlling bodies of sport to enforce doping provisions. Decisions to cease assistance or to bar a person from receiving assistance will usually be consistent with penalties imposed by those bodies.

I present the following paper:

Drugs in Sport - Government Policy - Ministerial statement, 27 September 1989.

I move:

That the Assembly takes note of the paper.

Debate (on motion by **Mr Stefaniak**) adjourned.

GAMING MACHINE (AMENDMENT) BILL 1989

MS FOLLETT (Attorney-General) (5.27): I present the Gaming Machine (Amendment) Bill 1989. I move:

That this Bill be agreed to in principle.

The Bill amends the Gaming Machine Act 1987 to allow for varied rates of tax to be levied on the gross revenue derived from gaming machine operations. The Gaming Machine Act 1987 provides for the licensing of gaming machine operators and regulates the operation of gaming machines in the ACT. Gaming machine licensees pay monthly to the ACT Gaming and Liquor Authority a prescribed percentage of their gross revenue. Current provisions provide only for a single prescribed percentage to be levied.

The Bill provides for different prescribed percentages to be applied to different ranges of gross revenue derived from gaming machine operations. This allows for prescribed percentages to be increased as gross revenue for a licensee reaches higher levels. The effect of this is to enable gaming machine revenue policy to be applied more flexibly and equitably than has hitherto been possible.

I present the explanatory memorandum to this Bill.

27 September 1989

Debate (on motion by **Dr Kinloch**) adjourned.

ADJOURNMENT

Motion (by **Mr Whalan**) proposed:

That the Assembly do now adjourn.

Winfield Cup

MR HUMPHRIES: I rise to indicate that I will be moving a motion of censure tomorrow and I wish to explain something about that. I was shocked and horrified to read in the Daily Mirror yesterday - it is not a publication that I generally consult, but on this occasion I was drawn towards it - that an act of cultural vandalism occurred this week in Canberra. I am referring, of course, to the careless mutilation by members of the victorious Canberra Raiders rugby league team of the Winfield Cup. I want to quote from the Daily Mirror on that day. It said:

Football fans and players should be told why the Winfield Cup was treated so disgracefully in Canberra yesterday and who was responsible. It was an inglorious conclusion to a season in which teams from Brisbane to Wollongong strove for the chance just to hold the cup on grand final day. The Raiders should know better than most the extraordinary effort needed to be rewarded by that touch, but it appears someone did not value the trophy as much as others.

It concludes:

If they did it would not be found lying shattered on a Canberra street.

You can see the angst in those lines, the angst that the editor of the Daily Mirror clearly felt when he wrote those lines.

Mrs Nolan: He comes from Balmain!

MR HUMPHRIES: He probably does, as my friend Mrs Nolan indicates. What is particularly painful to this author is not so much the fact that the trophy was found lying shattered on a street but that it was found lying shattered on a Canberra street. If it had been found lying shattered perhaps on Ultimo Road, Balmain, it might not have been quite so painful but, unfortunately for the editor of the Daily Mirror, it was not. I am distressed to see that someone made light of this great tragedy, and I ask members to think of how embarrassing it would be to this Assembly, and

27 September 1989

to the whole of the ACT, if we had borrowed Alan Bond's painting *Irises* and someone had accidentally put his boot through it. How embarrassed we all would have been in those circumstances. This is no less the case here, with the Winfield Cup.

Mr Wood: Well, someone put their elbow through a Monet, or something, in the National Gallery.

MR HUMPHRIES: Yes, indeed, and I hope we were very embarrassed on that occasion too, Mr Wood. But I think the Winfield Cup is certainly much better known than any Monet I am aware of.

I cannot overemphasise how careless the Canberra Raiders must have been to allow this to happen. I understand that it was the result of a car accident. I do not understand why one of the Raiders could not simply have dived down and saved the trophy from smashing. That would have been very easy. I saw many such heroic acts on Sunday. It would have been a simple matter to have dived down and saved the cup. I should have realised that the cup would be broken, because on Monday, at the reception, Mr Stefaniak and I tried to pick up the cup to see how heavy it was, and we were unable to do so - at least, I was unable to do so by myself. We noticed it was broken. I am deeply distressed.

Mr DUBY: It was broken then.

MR HUMPHRIES: Indeed, Mr DUBY, it was broken then. Now, I immediately suspected Minister Berry. I thought, "Aha, they have detached the bit that says 'Winfield Cup' - early implementation of the anti-tobacco sponsorship legislation". But, no, that was not the case. As I said, I tried to pick it up but to no avail. My hopes of becoming five-eighth in the Canberra Raiders have been permanently shattered on the grounds of being too puny. But I realised then, of course, that it was broken.

It goes without saying that it is not a proper cup. You try pouring a bit of victory champagne into that and you will not get very far! I think that this is a reprehensible act of the worst kind. I want to give notice of my motion of censure of the Canberra Raiders for their careless use of the cup on that day. I also think this matter should be referred to Mr Bill Wood's inquiry into public behaviour.

ACT Flag

MR WOOD (5.33): Mr Speaker, the Winfield Cup might well be referred to the inquiry into the arts. I am sure it is a work of art. While I am on that subject, let me say that I misled the house. I said that someone had put an elbow through a Monet. I understand, on professional advice, that it was a Rothko, at a significant display a little while ago.

27 September 1989

I want to take up a matter that has been occupying my mind for some time, and again it was the Raiders' success that prompted my raising it today, because I saw flying from City Hill the other day an enlarged Raiders' flag. It looked quite impressive, and it brought to my mind again the need for this Territory to get its own flag.

Mr Kaine: We will adopt it, Bill.

MR WOOD: A little time ago I took the trouble of getting out all the literature that the Administration has on file on proposals for a coat of arms and a flag. It certainly makes interesting reading, and it is good to know that steps are under way to give us a flag, after, I am sure, suitable consultation.

To respond to your interjection a little while ago, Mr Kaine, it looked all right.

Mr Kaine: It looks a lot better than some of the others that have been up.

MR WOOD: Well, it looks a lot better than some of the State flags, too, I might tell you. But I do ask the Assembly and the Government to hasten the steps that are necessary to give us a flag that is truly representative of the ACT. I know that all members will have a view on this matter and they will have personal ideas about what is good and what is bad about a flag. I draw attention to the collection of flags that used to stand on the display area of the building site of the new Parliament House. Each State had a flag flying. The one flag that we noticed, the one that stood out, the one that could be identified, was that of the Northern Territory - the only one that did not have a Union Jack in the corner. That was the noticeable flag, the one that had some particular identity. As the Government, the people and the parliament of the ACT take steps to bring about their own flag, I would urge upon them all to make it original, and not to forget our heritage and the new heritage that is developing in Australia. I think we can comfortably do that without putting into a corner, in an odd little way, a Union Jack.

I know that in due course members may make some comment on this and I would encourage that because, like fluoride, it is a subject that people have strong feelings about. I think that perhaps the first anniversary of self-government in this Territory on 11 May next year might be a suitable target, the day on which we raise on City Hill and elsewhere around the city, a new, distinctive and representative ACT flag.

27 September 1989

ACT Flag

MR COLLAERY (5.37): Mr Speaker, I rise on behalf of the Residents Rally to support the views enunciated by Mr Wood - most of them anyway. Mr Speaker, the need for a flag as a signal sign of the political maturity of this city and its diversity in terms of its landscape environment, its built environment and its people is obviously indicated, and I am sure that all the members of the Rally would endorse what Mr Wood said.

Once again, in listening to Mr Wood's speech, I was struck by the absolute tragedy that we do not have Mr Wood in the Cabinet as a Minister. Once again Mr Wood has flown the flag for his party. Once again he set the new, good standard that we would very much like to see, and one hopes that Mr Wood will carry the flag into battle one of these days.

Assembly adjourned at 5.38 pm

ANSWERS TO QUESTIONS

The following answers to questions were provided:

Leases at Mitchell (Question No. 13)

Mr Kaine asked the Minister for Industry, Employment and Education, upon notice, on 25 July 1989:

- (1) How many (a) commercial and (b) retail premises in Mitchell are leased to private enterprise.
- (2) Are deposits required upon application for such leases; if so how are the deposits administered.
- (3) Are deposits ever retained; if so under what circumstances.
- (4) What are the maximum terms of these leases.
- (5) Are leases transferable.
- (6) How often are rentals increased.
- (7) When was the last rental increase.
- (8) What was the percentage increase of the last rise.
- (9) By what means are rentals determined.
- (10) When are the next rental increases due.

Mr Whalan: My responses seriatim are set out below.

- (1) Lease purpose clauses can be broken down into two broad categories, residential and non-residential. The leases in Mitchell are non-residential. These leases may be used for such diverse activities as industry, warehouse and storage, service trades, recreation facility, or for the retailing of various categories of goods. Currently there are 96 leases on issue to private enterprise of which 18 permit retailing.
- (2) and (3) When a lease is sold at auction the successful bidder is required to pay a deposit of at least 10 per cent of the sale price. If the successful bidder does not proceed with the purchase he/she forfeits any deposit already paid. This money is paid into the land administration account.
- (4) Ninety-nine years.
- (5) Yes.

27 September 1989

- (6) Rentals are reviewed in accordance with the terms of the individual lease documents. The standard provision is that the rental is first reviewed six years after the initial issue and then triennially. There are currently 47 lessees in Mitchell paying land rent.
- (7) and (8) Rental increases are ongoing and are timed according to the original date of issue of the individual leases. There is no common date for the review of rent of Mitchell leases.
- (9) Rent is determined as 10 per cent of the current market value of a particular lease at its review date. Such determinations are carried out by the Australian Valuation Office.
- (10) See the answers to questions (6) and (7).

**Waste Disposal
(Question No. 25)**

Mr Moore asked the Minister for Housing and Urban Services, upon notice, on 23 August 1989:

- (1) What are the terms of agreement made between the ACT Government and the Queanbeyan City Council allowing Queanbeyan residents, businesses and municipal workers to dispose of rubbish at the Mugga Lane tip.
- (2) Will the Minister table all documents relevant to this agreement; if not, why not.

Mrs Grassby: The answer to the member's question is as follows:

- (1) The agreement, which was made before self-government, is for a five-year period from 1 January 1988. The ACT allows the disposal of various agreed forms of waste on appropriate sites within the ACT as determined by the ACT government service on a full cost recovery basis. Charges are adjusted annually taking account of cost changes and the population served by the Queanbeyan Council. This arrangement has negligible impact on the life of the Canberra land fill sites or on their operation.
- (2) I am tabling a copy of the agreement. It is not practicable to table all the documents relating to the agreement but if Mr Moore wishes to view them I could make arrangements through the city engineering section.

27 September 1989

**Jolimont Centre
(Question No. 27)**

Mrs Nolan asked the Minister for Industry, Employment and Education, upon notice, on 23 August 1989:

- (1) Did the Jolimont Centre lease contain a clause or an agreement requiring the provision of a tourist facility at the Jolimont Centre.
- (2) What was the wording of that clause or agreement.
- (3) Is that clause or agreement still valid.
- (4) Is that clause or agreement currently being adhered to.
- (5) What action can be taken to ensure that that clause or agreement is adhered to in the event that the centre owner abandons the principles of that clause or agreement.

Mr Whalan: My responses are set out below seriatim.

- (1) The lease purpose clause allows but does not require the operation of a tourist bureau and associated tourist facilities.
- (2) "3(c). To use the premises only for the purpose of a coach terminal tourist bureau premises and associated tourist facilities, banks, restaurants, taverns, entertainment, recreation, retail and offices, car parking and mechanical plant".
- (3) Yes.
- (4) An inspection indicated that the current use of the premises complies with the purpose clause.
- (5) If a lessee uses the premises for an unauthorised purpose the Supreme Court may, by order pursuant to section 9A of the City Area Leases Act 1936, direct the lessee not to use the land for that purpose.

**Metal Recycling
(Question No. 28)**

Mr Stefaniak asked the Minister for Housing and Urban Services, upon notice, on 23 August 1989:

- (1) Was Metal Recyclers NSW an unsuccessful tenderer for ACT Electricity and Water tender No. PC21/89.
- (2) Was MG Metals the winning tenderer.
- (3) Was the Metal Recyclers' tender better in all except two of the 10 classes of material and also better in the aggregate.

27 September 1989

Mrs Grassby: The answer to the member's question is as follows:

- (1) Yes. Metal Recyclers NSW Pty Ltd was an unsuccessful tenderer.
- (2) Yes. MG Metals was the successful tenderer.
- (3) Evaluation of a tender for the sale and removal of scrap metal must take into account the expected quantities of the various classes of scrap. It is not appropriate to merely compare the list of unit rates offered.

The "weighted" comparison by ACTEW resulted in outcome values for the two tenders that were virtually equal. Initial evaluation favoured the successful tenderer, MG Metals, by a small margin. On this basis, and their previous reliable service, they were awarded the contract.

Following previous representation on behalf of Metal Recyclers NSW it became apparent that the format of the tender document could have led Metal Recyclers to omit quoting for two minor items. When these are taken into account, the two particular tenders were even closer, with Metal Recyclers being lower by \$200 in \$167,000 or one-tenth of one per cent. Effectively, the tenders were equal. In such cases ACTEW looks beyond price in the selection process.

ACTEW's experience with sale and removal of scrap leads them to place considerable emphasis on reliability of service, as it can vary greatly between firms in this particular business. Previously MG Metals provided a reliable and prompt service.