Extract from Hansard

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ASSISTED REPRODUCTIVE TECHNOLOGY AND SURROGACY

Statement by Minister for Health

MS A. SANDERSON (Morley — Minister for Health) [9.04 am]: I rise to update the house on progress towards Western Australia's new assisted reproductive technology and surrogacy framework. It is well understood that Western Australia's legislation governing reproductive technology and surrogacy has not kept pace with medical advancements and societal changes. Western Australia's legislation is discriminatory and out of date. In 2019, Dr Sonia Allan undertook a review of WA's legislative framework, resulting in 122 recommendations. The majority of recommendations were accepted, including ensuring equity of access for women who face impending infertility, single men, people in same-sex relationships, transgender people and intersex people. However, some questions remained outstanding, including how donor information should be managed and released, and whether people should be able to use a deceased partner's gametes or embryos.

In 2022, I appointed a ministerial expert panel chaired by Dr Roger Hart, an internationally recognised fertility expert, to conduct further targeted consultation on these outstanding matters. I am pleased to announce the release of the ministerial expert panel's final report and the government's response to its recommendations. The final report recommends a range of important reforms that will streamline access to ART and surrogacy and provide vital access to information for parties to donor conception. Western Australians should not have to travel interstate to start a family. Reciprocal IVF, whereby the egg of one partner is fertilised and carried to term by the other partner, will be permitted. This method is permitted in all other Australian jurisdictions.

A number of important safeguards will remain, including a continued ban on commercial surrogacy arrangements and cloning. Importantly, the government has accepted the MEP's recommendations relating to information for parties to donor conception. The MEP heard loud and clear that access to information is a priority for many donor-conceived people. Currently, people born after 2004 are able to access identifying information about their donor. For those born prior to 2004, information can be accessed only if the donor has opted to provide it on a voluntary basis. This is a significant reform that will allow donor-conceived people to access information, where records are available, about their donors regardless of when they were born. Western Australia will be only the second jurisdiction to implement this change after Victoria's reforms came into effect in 2017.

I want to thank the people with lived experience of assisted reproductive technology, surrogacy and donor-conception who contributed to the report. Finally, I thank all members of the MEP for their valuable contribution to this final report. Their expertise in navigating complex medical, research and legal matters is greatly appreciated and is reflected in the considered and practical recommendations of that report.