

## **Health (Protection) Amendment Bill**

We thank the Committee for the opportunity to make a submission on the Health (Protection) Amendment Bill (abbreviated as 'the Bill' hereafter).

### **Our Department**

The Department of Public Health at the University of Otago, Wellington, is one of the leading public health research departments in New Zealand. It includes researchers and practitioners with substantial experience and expertise in many areas of health protection and public health generally, including infectious diseases, environmental health and public health law.

### **General comments**

We support the intent of this Bill. Good public law is the basis for effective health protection. However, we are concerned that this Bill only deals with a small number of very specific public health threats. This Bill does not appear to recognise the need to provide a comprehensive legal base to support effective public health practice.

We note the Bill is concerned with strengthening public health protection in four areas:

- Support for effective contact tracing of people who may have certain infectious diseases or have been exposed to these diseases.
- An increase in the range of diseases that are notifiable, notably HIV infection, gonorrhoea, and syphilis.
- Increased powers to manage individuals with an infectious disease whose behaviour puts other people at risk of infection.
- Introduces a ban on provision of commercial artificial UV tanning services to people under the age of 18 years.

All of these changes seem worthwhile. However, in two areas we consider there are good arguments for a more comprehensive approach. Sexually transmitted infections are an important problem in New Zealand. There is a strong case for also making chlamydia (genital chlamydial infection) notifiable as such information could support delivery of effective treatment to vulnerable populations. Similarly, there are good arguments for extending the ban on provision of commercial artificial UV tanning services to the entire population.

Our major concern is therefore about the apparent low priority being given to updating the legislative base for health protection, and public health more generally. Our major legislation, the Health Act, has had only piecemeal amendments since it was enacted in 1956 and it is widely

considered to be fragmented and outdated. The incremental changes proposed in this Bill illustrate the problems that arise from piecemeal changes to legislation

The need for a comprehensive update was recognised by the drafting and introduction of the Public Health Bill in November 2007. That Bill was referred to the Health Select Committee which had hearings in 2008. It was reported back to parliament in June 2008. It is still waiting for its second reading.

That Bill provided for the management of a wide range of risks to public health. It recognised that non-communicable diseases now pose a much larger threat to the health of New Zealanders than do communicable diseases. For example, that Bill would have empowered the Director-General of Health to issue non-binding codes and guidelines to address risk factors for non-communicable diseases. It also provided for the Minister of Health to issue regulations if a code or practice issued by the Director-General failed to result in significant progress.

### **Summary**

We believe that carefully considered regulation, or at least the serious threat of regulation, is needed to bring about changes to New Zealand's environment to protect health and safety. These changes are important for prevention of both communicable and non-communicable diseases.

So, while we support the intent of the current Bill, we consider this a missed opportunity to review and update our public health legislation in a more comprehensive manner.