

**Question on notice no. 1552**

**Portfolio question number: DoHAC SQ24-003043**

**2024-25 Budget estimates**

**Community Affairs Committee, Health and Aged Care Portfolio**

**Senator Malcolm Roberts:** asked the Department of Health and Aged Care on 5 June 2024—

Senator ROBERTS: When will government hold a royal commission into the infected blood scandal in Australia, Minister?

Senator McCarthy: I will take that question on notice.

Senator ROBERTS: When will financial assistance be provided to victims still living with their contaminated blood caused illnesses?

Senator McCarthy: I'll take that question on notice.

Senator ROBERTS: When will an apology be made to the victims of this scandal?

Senator McCarthy: I'll take your question on notice.

Senator ROBERTS: Are you aware the Canadian government has recognised the disaster of contaminated blood and has compensated victims since 1994?

Senator McCarthy: I'm not going to answer that question.

Senator ROBERTS: Are you aware that a major report into infected blood in the UK has just released its findings confirming the epic scandal and cover-up by the UK government that had provided previously negligible support for victims? They knew about it and they kept doing it-infected blood. Are you aware of that?

Senator McCarthy: I'll take your question on notice.

**Answer —**

Please see attached answer.

## Senate Committee: Community Affairs Committee

### QUESTION ON NOTICE

Budget Estimates 2024-2025

Outcome: 1 - Health Policy, Access and Support

PDR Number: SQ24-003043

**Question Subject:** Contaminated blood

**Type of Question:** Spoken, Hansard page 106, 05 July 2024

**Senator:** Malcolm Roberts

#### Question:

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Senator McCarthy: I will take that question on notice.

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Senator McCarthy: I'll take your question on notice.

#### Answer:

The Australian Government is aware of the findings of the UK Infected Blood Inquiry however, the findings of this inquiry are specific to the circumstances in the UK.

The safety of Australia's blood supply during the 1980s was examined through the 2004 Senate Inquiry into Hepatitis C and the Blood Supply in Australia (Inquiry). In its report, *'Hepatitis C and the Blood Supply in Australia'*, the Senate Community Affairs Committee noted that it was confident that due consideration was given by governments to evidence at relevant times, and that decisions, including decisions about testing of the blood supply, were reasonable in the circumstances.

Australia had a policy of self-sufficiency in the blood supply and did not rely on high-risk imported blood products. Australia introduced HIV patient screening in May 1985, earlier than in the UK. When a specific test for hepatitis C became available in late 1989, Australia was one of the first countries to commence using the test in screening the blood supply, from November 1989. The UK did not introduce the test until September 1991.

States and territories managed the blood supply at this time. The Australian Government contributes to hepatitis C settlement schemes administered by most states and territories. The Senate Community Affairs Committee considered these settlement arrangements during the Inquiry and no changes were recommended.

The Committee considered that the most effective way to assist all people with hepatitis C was to improve access to services, to improve education of medical personnel, and to support research efforts to develop more effective treatments for the hepatitis C virus.

The Government has implemented a range of initiatives consistent with the Senate Committee's recommendations, including ongoing funding for the Australian Red Cross Lifeblood's Lookback program, implementing national strategies and programs to address blood borne viruses, including hepatitis C, and subsidising medicines to treat hepatitis C and other blood borne viruses through the Pharmaceutical Benefits Scheme (PBS). Since 2016, the Government has invested over \$7 billion to provide access to curative direct acting antiviral medicines through the PBS, to all eligible Australians regardless of how they acquired hepatitis C or their current circumstances.