

Submission into the Voluntary Assisted Dying Bill 2021

Submission No.: 35

Submitted by: [REDACTED]

Publication: Making the submission public but withholding your name

Position: I/We do not support the Voluntary Assisted Dying Bill

Comments in relation to: Eligibility criteria* ,The request and assessment process,Safeguards,Conscientious objection by either individuals or entities,Oversight and review

Attachments: See attachment

Submitter Comments:

VAD Bill Queensland Parliament

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Critique of the bill:

- Safeguards to protect the vulnerable are woefully insufficient.

One of the leading causes of those who request euthanasia is mental health issues such as depression. The VAD Bill being put forward has no requirements to have a mental health expert assess whether the person is being motivated by such issues. This will lead to people tragically killing themselves where help and treatment could have been provided.

There likewise also needs to be greater protection for people who feel like they are a burden to their family are requesting VAD because of this. People might claim they are requesting VAD for physical suffering but might actually be doing so for other reasons like this.

- Eligibility.

Eligibility should be restricted to those only who pain medication is ineffective or not an option for. The bill should emphasise that VAD is a last resort option and many steps must be taken prior to pursuing euthanasia such as seeing a palliative care expert.

- Name.

The bill should be renamed to “Voluntary Assisted Suicide” as the word “dying” doesn’t accurately infer that the person is choosing to kill themselves.

- Religious freedom.

Health professionals with a conscientious objection would be forced to refer a patient for euthanasia. Their religious freedom must be protected by the bill.

- Overseas investigation.

Prior to the bill being passed, a thorough investigation of the result of euthanasia in other countries should be completed.

- The bill has been arbitrarily constructed.

Guidelines for VAD have been arbitrarily constructed, there is no research or evidence that backs its timelines for when a person can apply for VAD. 12 months prior to death has not been decided by any metric. The bill provides no reasoning for why this shouldn't become 24 months, 48 months, or simply no limit at all. This hollow justification exposes this VAD bill itself as insignificant. There is no intrinsic reason why in the future it shouldn't be amended or changed, thus, the Health Committee must consider this proposed bill as what it might become in the future. As by accepting this bill, and accepting the logic that underpins it, those who accept it must be prepared to accept all possible implications that this will have for future bills passed.

A personal objection:

- My Grandfather has dementia.

A strong personal objection I have to this bill being passed is that of all the places in the world where euthanasia has been introduced, none have been successful in safeguarding it against the vulnerable. It scares me that in Holland where euthanasia was introduced much like it is proposed here, that many people with dementia who can't consent are being killed. If this bill is passed, I cannot see why we won't become like Holland and other places in the world. It'd horrify me for this to happen to my grandfather, myself, my children or to anyone else.