
From: [REDACTED]
Sent: Sunday, 27 June 2021 8:38 PM
To: Health and Environment Committee
Subject: I oppose the "Voluntary Assisted Dying" Bill

Re: I oppose the "Voluntary Assisted Dying" Bill

Dear Health Committee Members,

I am writing to you due to my concern regarding what is being called the "voluntary assisted dying bill". My concerns about this bill are as follows:

1. With only two doctors (and no requirement that they know anything about palliative care or mental health) the decision is being made without any understanding of other options available to the client.
2. Medical staff whose conscience will not allow them to take part in the killing of these people then being forced to refer to another doctor who will do it is a horrendous abuse of that person's conscience! If this was a killing outside of that person's will, it would be called murder and if someone referred that person to someone else who could kill them, that person would be an accessory to the murder. The only difference is the willingness of the one being killed. You are forcing medical staff to be complicit in murder.
3. You call it "assisted dying" but really it is not simply dying. It is suicide. It is like coming across someone ready to commit suicide on the Story bridge and saying, "here let me help you" and then pushing them off the bridge.
4. Why do you put money into suicide prevention and at the same time help people to commit suicide? It makes no sense. You can't have it both ways!
5. Once you cross that line of deciding in what circumstances it is alright to kill someone, you have a very blurry line because each person will draw that line in a different place and eventually the line will be pushed further and further back. Where will it end?
6. If institutions whose charter is opposed to euthanasia are forced to allow doctors to come in to kill their patient they may as well close down shop rather than be sued and have their staff jailed if they follow their conscience. You could potentially be causing the shutdown of very necessary private facilities.
7. Doctors and nurses who have a conscientious objection to this are likely to quit their profession rather than end up in jail or sued or forced to comply with something that abuses their conscience. This could potentially result in an even worse situation in our hospitals due to lack of staff.
8. On the one hand you are putting money into mental health and on the other hand you are killing off those who may simply need some help to get past a mental health issue, like depression for example, because there is no requirement to be assessed by a mental health expert like a psychiatrist. Do you want to help people with mental health issues or do you want to get rid of them? If you think this won't happen you should look further into statistics from other nations.
9. We already have inadequate palliative care in regional areas yet palliative care is not first sought? Why? Under this bill, they will be able to access death well before they can access palliative care.
10. Trying to talk someone out of killing themselves could result in jail for up to 7 years! What are we supposed to do, just watch our loved ones kill themselves because they are depressed or think they are a burden? Don't think this won't happen. If you look at the record of other nations some years down the line, the excuses for killing themselves become more and more ridiculous.
11. To even consider recording the cause of death on the death certificate as the underlying health issue is an outright lie. It is falsifying legal documents. Death certificates will no longer have any credibility.
12. To even consider facilitating tele-"health" deaths is so open to abuse I can't even fathom that you would consider it.
13. To allow medical staff to suggest to patients that they kill themselves would leave vulnerable people feeling pressured to comply.
14. Elder abuse is already high and this is likely to make it worse as someone who is already vulnerable can be made to feel that they are a burden and therefore the family better off if they were dead.

15. Until palliative care funding is at an appropriate level in both urban and regional areas, people are likely to choose killing themselves as a way to deal with pain and feeling like a burden. The government would do well to put this money into palliative care instead of putting it into killing them.

16. You are ignoring the multitude of medical bodies, associations and individual doctors and nurses who strongly disagree with this. How is it that you think government knows better than trained medical professionals?

17. I for one will NOT be seeing any doctor who advocates for this as I cannot trust a doctor to have my best interests at heart, to try to save me if at the same time they are ready to kill me.

18. To expect doctors to do this is breaking the hypocritic oath to “do no harm”. I know that this oath has changed over time but many of our current doctors made this oath when they graduated.

I implore you to please reconsider this bill all together but if you are still determined to do this please consider these points above and make some adjustments to improve this deplorable bill.

Regards

[Redacted signature]

Please do not publish my name and contact details.

Sincerely,

[Redacted signature]