
From: [REDACTED]
Sent: Tuesday, 29 June 2021 9:13 AM
To: Health and Environment Committee
Cc: Robby Nason
Subject: Voluntary Assisted Dying

Submission to Queensland Parliamentary Health Committee

I fully support the proposal to legalise Voluntary Assisted Dying in Queensland, in terms of the following **principles** and **pragmatic considerations**

1. Principles

• The democratic issue

For over twenty years, between 70% and 85% of Queenslanders, and Australians generally, have supported VAD. This is confirmed by statistics from at least 19 other democratic states, including 2 in Australia, that have respected those statistics and made VAD legal.

• The 'Do no harm' (rights and responsibilities) issue

We have the right and responsibility to live balancing our needs and wishes with the needs of society and those around us. That should include the right to end life when it becomes unbearable to ourselves and our loved ones, and a useless burden to society – in other words harmful. Just as we have no right to cause harm to others or society; nor have others the right to cause or prolong harm and hurt to us and our loved ones.

• The unbearable life issue

We are genetically programmed towards survival, and therefore adults with terminal conditions and in their right mind – and judged to be so by qualified witnesses – should be respected when they attest that life is unbearable.

• The religious issue

Australia is a multi-faith society with essentially secular laws, and it is therefore improper and unjust for any religion to impose its particular moral code on the citizens who obey those laws. Appeals to 'sacred traditions' are usually based on the traditional dominance of established Christianity, which must be respected as appropriate for Christians but not forced on those who do not share it.

• The 'All life is sacred' issue

We have an army, navy and air force, who are legally sworn and trained to be ready to die, and many of them trained to kill. These people are among our strongest and most valuable citizens, whose survival could benefit society, as opposed to those wishing for VAD, whose survival benefits nobody and puts an extra burden on society.

2. Pragmatics

• The economic issue

At the moment millions of dollars, thousands of hours of professional medical, human services and care staff, and countless expensive medical machines and superfluous pharmaceuticals are spent on sustaining unwanted, non-productive and miserable lives. Add to that the hours, labour, money and emotional hardship of the relatives, loved ones and carers. All these will rise as the population ages, unless positive steps are taken, such as legalizing VAD.

• The suicide issue

Currently many terminally ill victims take the only recourse available to them: death by suicide, and alone. This is the worst of all outcomes, because it is invariably:

a.) painful and frightening – usually the noose, gassing, self-poisoning, jumping to death;

b.) lonely, despairing and unsupported (because of the legal implications of involving others);
c) a major trauma and practical nightmare for those who discover the body and those who have to clear up the remains, and therefore a frequent and quite unnecessary burden on police, paramedics etc.

- **The legal dilemma issue**

Because it is illegal to assist any life termination – i.e. suicide - relatives are put in impossible dilemmas. A woman close to me was dying, bed-ridden and in excruciating pain, quite *compos mentis*. She was constantly begging her son and daughter to fetch and give her the overdose of prescription drugs she had put aside against this situation. Both (one of whom was a lawyer) supported her wish and her right to die, but realized that they would be breaking the law and potentially liable to imprisonment. This is an intolerable dilemma that is faced by many families.

- **The personal preference issue**

Like (presumably) the other 70-80% who support VAD, I wish to die in comfort, in the company of my loved ones, and at home, not to die in a hospital or institution, surrounded by paid strangers, however kindly, having invasive medical procedures to prolong my unwanted life. If offered the opportunity to take VAD, like many others I might well in the end choose not to do so, but it would be a great comfort to know that I had that choice.

- **The method issue**

I also support the privilege of choice of a.) self-administered termination (perhaps with the assistance of loved ones) and b.) if available, medically assisted termination by a doctor who is willing to administer the procedure. Arrangements can be made for seamless transition to body disposal and funeral arrangements.

- **International comparisons**

In the international jurisdictions where VAD is legal, there is a range of permissiveness. Some, like Victoria, favour extreme caution, where the safeguards and residency requirements make it entirely proof against misuse, but extremely difficult and sometimes impossible to gain VAD. The other VAD jurisdictions have significant variations, which the Queensland Parliament should examine closely to see what is appropriate for Queensland and acceptable for Queenslanders.

- **The 'slippery slope' issue**

According to comprehensive and well-publicised studies internationally, there is little or no evidence from any of the VAD jurisdictions that to permit VAD will lead to progressive loosening and misuse of it by those of bad faith or motives. Many of the 'statistics' used to promote this 'slippery slope' argument are misusing real statistics by conflating the diverse practices in jurisdictions with different levels of permission, to make it look like a progressive and malevolent 'slide'.

- **Palliative care**

Palliative care is not 'the alternative' to VAD. Often, but by no means always, it can obviate the need for VAD. **The two should be seen as complementary.** In any case palliative care needs a considerable increase in capacity, and infusion of funds. It is significant that this did occur in Victoria alongside the provision of VAD.

I respectfully submit these arguments to the Committee for the consideration of the Queensland Parliament.



John O'Toole AM



29 June 2021