

Submission into the Voluntary Assisted Dying Bill 2021

Submission No.: 1210
Submitted by: Name withheld
Publication: Making the submission public but withholding your name
Position: I/We do not support the Voluntary Assisted Dying Bill
Comments in relation to: The request and assessment process, Safeguards, Conscientious objection by either individuals or entities
Attachments: No attachment

Submitter Comments:

To whom it is concerned,
I am writing about my worries regarding the Assisted Suicide Bill. Below I focus on the key four issues I am most worried about.

Firstly – There is no safe guard nor is the knowledge of a specialist doctor required for the approval of assisted suicide or euthanasia. How can it be determined that the terminally ill Queenslanders truly have a 12 month prognosis or there are other treatment options possibly by anyone other than a specialist. One of the approving doctors must be a specialist on the illness they are suffering from to minimise wrong decisions being made.

Second – One of the doctors must have training on end-of-life management in order to ensure the patient is fully informed of their options. What if someone is making their decision on fear or have wrong information? A doctor with training can ensure the patient is making a fully informed decision. It is no different to making any other decisions such as life insurance decision or business purchase decision where a PDS is legally required to be provided and lawyers and/or accountants with training on the area must be consulted. It should be the same requirements with ending a life – full information must be provided by those with skills and training in the area.

Thirdly – There should not be jail time for anyone seeking to talk a person they love and care about. You want to jail someone's sister for speaking up about losing a family member that they could be worried is being taken advantage of or is making a decision based on the wrong facts or emotions. Family and mates who know the patient best must be able to speak up to avoid abuse happening.

Fourth – No one should raise the idea of assisted suicide or euthanasia other than the patient. Not even a nurse or doctor, it runs the high risk of making a patient feel that they have no value and nothing left to give. Doctors and nurses are people in authority. When a person in authority makes a suggestion to a person who is very likely in a vulnerable position, runs the very high risk of making the patient feel that they are best not alive anymore and they must follow this path. The vulnerable, sick, elderly the disabled should never in the smallest way be made to feel they are a burden or the world might be best without them in it.

This bill seeks to actively end a life; this is not a removal of life supports that sustains a patient who in the normal course of events would die. Pain can always be managed with good palliative care.

This is people's lives affected; it cannot be treated or taken lightly.