




Speech By
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MEMBER FOR ROCKHAMPTON

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VOLUNTARY ASSISTED DYING BILL

 **Mr O'ROURKE** (Rockhampton—ALP) (4.57 pm): I rise to speak in support of the Voluntary Assisted Dying Bill 2021. I was part of the 56th Parliament's health committee considering voluntary assisted dying. We travelled the state hearing from over 500 witnesses and saw some 5,000 submissions. During the consultation process we heard diverse and polarised views about a person's choice regarding voluntary assisted dying. Some of the evidence was very confronting when we were hearing stories from those with terminal illness or who were suffering from neurodegenerative conditions or the families and friends of those who have since passed away.

There were those who were totally opposed to voluntary assisted dying for a variety of reasons. One of the key arguments for not supporting VAD was the sanctity of life and that voluntary assisted dying is in direct conflict to religious beliefs. Faith groups argued that the worth of human life and death is a matter for God and only God. All the information we received was considered in developing this bill. To ensure that the basis of the bill is robust, it was referred to the Queensland Law Reform Commission back in May 2020.

The bill provides wideranging safeguards. This includes strict eligibility criteria. Voluntary assisted dying laws allow eligible people who are dying to choose the timing and the circumstances of their death. The person's prognosis is that they are expected to die within a 12-month time frame and that the person considers the pain to be intolerable. Having a 12-month time frame made it clear that voluntary assisted dying is an option only for those who are at the end of their life. Also it is only available to adults. A key requirement is that the person must have decision-making capacity at the time of administering the substance. Their decision-making capacity is assessed at multiple stages throughout the process and must also be assessed as acting voluntarily and without coercion.

Another key safeguard of the bill is that to access voluntary assisted dying a person must complete a staged request and assessment process. The person must make three separate requests for access to voluntary assisted dying. The requests must be clear and unambiguous. The person must meet a waiting period of at least nine days between their first and final request. The staged request and assessment process, together with the waiting period, ensures that the person's decision to access voluntary assisted dying is enduring and not a fleeting decision made in a moment of pain or suffering. A medical or nurse practitioner may initiate a discussion about voluntary assisted dying if and only if at the same time the practitioner also informs the person about the treatment options available and the likely outcome of that treatment and the palliative care and treatment options available and the likely outcome of that care and treatment.

The bill also recognises the rights of religious organisations not to participate in the scheme. The Queensland Law Reform Commission considered that there is uncertainty and significant concerns around whether providing information and advice about voluntary assisted dying via a carriage service would contravene the Commonwealth Criminal Code. The Commonwealth Criminal Code makes it an offence to use a carriage service such as a telephone, videoconference, email or other form of electronic

communication to publish or distribute material that counsels or incites committing or attempting to commit suicide.

Given Queensland's geography, it will be difficult for any voluntary assisted dying scheme to ensure equity of access for people in rural and remote areas while the Commonwealth Criminal Code provisions remain in place because the Commonwealth laws take precedence under section 109 of the constitution and the only way to definitely resolve this issue is for the Commonwealth to amend the Commonwealth Criminal Code to expressly exclude participation in state government voluntary assisted dying schemes.

During the hearings we heard stories of those who have committed suicide. Tragically, in Queensland there is the suicide of someone with a terminal or debilitating illness, on average, once every four days. That has a terrible impact on their loved ones. There is one story that I keep going back to. After one of the hearings I met a young man who spoke to me about finding his grandfather after he had ended his life. His grandfather had a terminal illness and did not want to go to hospital. He just wanted to stay in the family home. He was struggling with pain and, knowing it was only going to get worse, he went out to the shed and ended his life. The young man then spoke about how his grandfather's death had affected his mother and aunty and their sadness in not being with their father at his passing.

That is not a unique story by any means. I suppose that the biggest factor for me is that terminally ill people are already making the choice to end their lives rather than face what awaits them. They are doing it alone and in violent ways. They deserve better than that. I believe if terminally ill people make a choice to end their life on their own terms, we as a society should provide the support they need to make it as comfortable as possible for them and their families. That is not a choice everyone will make—in fact, I suspect most will not—but some will and we should respect that choice. I commend the bill to the House.