




Speech By
James Lister

MEMBER FOR SOUTHERN DOWNS

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VOLUNTARY ASSISTED DYING BILL

 **Mr LISTER** (Southern Downs—LNP) (9.22 pm): I, too, rise to make a contribution on the Voluntary Assisted Dying Bill 2021. I have been surprised by the number of constituents who have written to me asking me not to support this bill. I say that because I sincerely believe that it is an overwhelming majority in the community who do wish to see voluntary assisted dying introduced. That is why I was surprised also when I heard the member for Warrego say that she, too, had received a lot of correspondence. Those who oppose this bill are very motivated to do their part to influence their local members.

One of the things I would like my constituents to understand in my thinking is that the question about whether or not we support someone's right to die with dignity if they are diagnosed with a terminal illness is not the same question as that which I face on this particular bill. I was given a survey that the ABC conducted which came out with 80 per cent support. The question was: should terminally ill patients be able to end their own lives with medical assistance? That is what received the 80 per cent support, and I can understand that. As I say, it is not the question we are faced with here. I believe that there are significant flaws in this bill and for that reason I will not be supporting it.

I do not wish to see people suffer and I certainly do not wish to see people's choice taken away from them. That word 'choice' is something I will come back to a few times in the course of my speech. I would like to say at the end of this introduction that I am quite certain that all members on all sides are acting with only the very best of motives. I think that that can be said for everybody who has responded to such surveys.

I have concerns in three particular areas: firstly, protection for those who have a conscientious objection to participation in voluntary assisted dying; protections for institutions, some of which have long and proud histories and values which are incompatible with VAD; and, I think most importantly, in my view the bill fails to adequately protect people who are vulnerable.

I know there are going to be a number of amendments introduced. It is my expectation that I will support those amendments but, like the member for Everton, that does not indicate that I have support for the bill beyond those amendments. I was disappointed that the government has not agreed to allow time for those amendments to be debated if it turns out we are running short at the gag point because I feel some of those amendments may go a long way towards addressing the concerns that many people have and, in my view, would make the bill a better one.

I will turn to the last of the three points I raised, and that is the protections for the vulnerable. In order for people to be protected, they need to have the same circumstances apply to them. What I am talking about there is access to high-quality palliative care. I do not believe that all Queenslanders, where they live and where they want to be treated and die, have access to an equal standard of palliative care. If people are going to have a choice between having palliative care until their death or voluntary assisted dying, they need to have all of the options before them. If the palliative care that is available to

them, such as in places that I represent, is inferior to what others in Queensland might receive, it follows naturally that they would be more likely as a group to elect to take voluntary assisted dying, and I think that distinction between the two is unacceptable.

I agree with the amendment that was proposed by the member for Traeger earlier this evening. The purpose of it was to highlight that we need significant additional spending on palliative care. It has been said to us by experts that about \$275 million each year additional expenditure on palliative care is necessary if the disparity between what some people can have and what others can have is to be addressed. I note that the government has promised to spend an additional \$171 million on palliative care, but as I understand things, that is over quite some period of time—about six years. There is obviously quite a shortfall between what the government has proposed and what experts say is required for palliative care. In this instance, I know something about it. I know because I live in an electorate where local hospitals, which are cherished institutions in our small towns, have to have the hospital auxiliary raise money for a bed for somebody to be more comfortable when they are dying and to raise money for equipment that might be taken for granted in other hospitals around the state.

I am concerned about the pressure that people who are diagnosed with a terminal illness may feel to take their life. I am concerned that it is a very subtle kind of pressure and it is a pressure which would be very difficult to produce in an evidentiary sense, but it is nevertheless there. These are people who are worried about taking a bed in a nursing home or a hospital, people who are worried about being a burden on their loved ones or perhaps people facing subtle pressure from extraneous sources about ending one's life because of the involvement of inheritances, assets and so forth. I think that we cannot seriously say that any legislative measure or safeguard to try to stamp that out would be 100 per cent successful. I am concerned about that.

I think the vulnerable are entitled to protection. I understand and I respect the points that have been made by members in the House today that people ought to have a choice; they ought to have autonomy over themselves. That is true. However, if the price of granting that autonomy risks other people, I do not think that the case has been met.

Talking about conscientious objectors, I think the bill's protections are one-sided. They seek to ensure, like a ratchet, that at every stage there can be forward movement towards advocating for, or informing about, voluntary assisted dying. However, there can be no pushback, there can be no loved ones or professionals involved in the case who might try to dissuade the patient for the very best of reasons. There is not even the pretence of protections for people who are involved on the peripheries such as administrative staff and other hospital workers.

It is effectively a crime to advocate to change a person's mind. I get that we do not want to be bothering people at the end of their life—we do not want to impinge upon their choice—but I feel that some of that is necessary if we are to protect society at large.

Regarding institutions, the credentialing of healthcare professionals to work in institutions is a very complex matter. It is ironic, really, that somebody who wishes to provide palliative care services to a patient in an institution will have to be credentialed, be of good standing and work within a scope of practice, but there is no similar requirement for someone who is going to administer voluntary assisted dying. We have seen cases in our state's history where inappropriately credentialed or uncredentialed people have by mistake been allowed to practise and we have seen disastrous outcomes in that sense.

Lastly, I would like to take up the point made by the member for Miller that some pain cannot be prevented. I have spoken with a palliative care doctor in my electorate, Gerard Purcell, who tells me that that is not the case. In his view, no-one should die in pain if they have the proper palliative care. That goes further to my point that we need to spend more money on palliative care and we need to ensure that the case is equal for every person in Queensland before we bring in voluntary assisted dying.

This is a difficult topic. It is one I have given a great deal of consideration to. I sincerely wish that the question were as simple as 'do we support people's ability to die or right to die if they have a terminal illness and they are in pain?' For the reasons I have said, I do not feel I can support the bill. I will support the amendments but I will be voting against the bill.