

MY LIFE MY CHOICE

A newsletter produced for the purpose of educating and raising awareness of the need for voluntary assisted dying law reform in Queensland — No.26 July 2021

SA MPs state the facts



Jos Hall
President
Dying With Dignity
Queensland

Late last month we welcomed news that the South Australian Parliament had [passed a voluntary assisted dying Bill](#).

The [Private Member's Bill](#) was put forward by [Kyam Maher](#), the leader of the Labor Party in the SA Parliament's upper house.

But it received support from MPs on all sides of politics, as it should.

It is instructive to read the Hansard record of [debate last month](#) in the SA Parliament's lower house.

Some extracts from the comments on the Bill by lower house MPs are reproduced at right.

Notably, they canvass and respond to some of the main arguments mounted by VAD opponents, namely the totally discredited idea of a "slippery slope" and the argument that VAD erodes or supplants palliative care, which it never will.

Some MPs also noted their own personal position on voluntary assisted dying meant they would be unlikely to seek access to it once it was legalised. But they voted to support the Bill because they did not wish to deny the choice to their constituents.

At present the *Voluntary Assisted Dying Bill 2021* drafted by the independent Queensland Law Reform Commission is being scrutinised by the Queensland Parliament's cross-party [Health and Environment Committee](#).

We hope that when it reaches the floor of our Parliament in September that our 93 MPs will recognise the need to vote for the better end-of-life choice it offers. We also hope that even those who do not personally support VAD will back the Bill for the same reasons given by their counterparts in SA and other parliaments.

After all, while our MPs will exercise a conscience vote, the VAD Bill is not about them. It is all about their constituents and their overwhelming and clearly expressed desire to see voluntary assisted dying laws passed in Queensland.



'It is also important to recognise that with the passage of these laws we will not be entering on the so-called slippery slope.'

Steve Marshall, SA Premier

'Contrary to what has been said by some, voluntary euthanasia does not undermine high-quality palliative care. It should be seen as one of the options available in what is a spectrum of approaches to assisting the dying and the families of the dying. It should also be noted that the real-world examples of the jurisdictions that have had assisted dying for many years show that there is no evidence of the slippery slope and no evidence of abuse or coercion.'

Eddie Hughes, Member for Giles



'One of the things I always hold in my mind is that when I am in this chamber I am the Member for Adelaide. In fact, it is an offence to use my personal name in this chamber, which is a reminder that when I speak here I speak on behalf of those who elected me and those I represent. So, for me, a conscience vote is determined by the conscience of the people I represent.'

Rachel Sanderson, Member for Adelaide

'My careful examination of the terms of this legislation has completely allayed my fears of any undue influence or pressure being brought to bear on anyone considering assisted dying. My final point is that this legislation does not in any way detract from the wonderful work done by those incredibly selfless, compassionate people who work in palliative care. In fact, voluntary assisted dying is simply another path that could be taken.'

Blair Boyer, Member for Wright



'Importantly, I would not choose euthanasia for myself. If I were voting only for me, I would vote against this legislation because I believe we should never deal with a problem of suffering by eliminating those who suffer. Even so, it is clear to me that the plain majority of my community wishes to see this legislation passed and wishes to see me vote for it as their representative. I cannot in good conscience prefer my own private beliefs to the desire of my community to have the choice of [VAD] in face of pitiless and hopeless suffering.'

Dan Cregan, Member for Kavel

Our message: Pass the Bill as is

Committee urged to recommend QLRC's draft

The My Life My Choice coalition supporting voluntary assisted dying law reform has asked for the [Voluntary Assisted Dying Bill 2021](#) now being considered by the parliamentary Health Committee to be passed in its current form without amendment.

The Clem Jones Group's submission to the Committee said the Bill as drafted by the Queensland Law Reform Commission delivers equity of access for those seeking VAD as well as necessary safeguards while providing for conscientious objections, and aligning with human rights principles.

We have urged the Committee to recognise that voluntary assisted dying laws give terminally ill people or those with a neurodegenerative condition more options about how they end their lives and can help ensure their lives come to a close in a way and at a time they choose and without unnecessary suffering.

All such laws should focus on the needs and wishes of the dying individual – to give them control over how and when their life is drawn to a close.



We believe that the Bill as it stands does so.

It is important to remember that no VAD law gives automatic access to voluntary assisted dying.

But they do allow competent adult individuals to seek access according to set criteria and subject to legislated protections and safeguards.

VAD laws elsewhere also recognise that applicants approved to access VAD may ultimately decide not to use it.

They recognise the immense palliative effect such laws can have simply by being an option available to those who may face intolerable suffering.

The Bill as it stands meets these important requirements.

The hard work of the QLRC, the widespread consultation and evidence gathered by the previous Health Committee's statewide inquiry, and the many submissions made to that inquiry have all resulted in a VAD Bill worthy of support by all of our 93 MPs.

Like all other voluntary assisted dying laws, the Bill now under examination by the Health Committee will not result in a single extra death.

It will, however, result in a lot less suffering.



David Muir AM
Chair
The Clem Jones Trust

Who's who on the Health Committee

Following each election, [cross-party portfolio committees](#) are formed to examine Bills introduced into the Queensland Parliament.

Committees can also conduct inquiries if the Parliament refers a matter to them, as happened with the end-of-life inquiry conducted by the Health Committee formed for the previous State Parliament.

MPs serving on the [Health and Environment Committee](#) that is examining the VAD Bill are:

- Chair: Aaron Harper, Labor Member for Thuringowa,
- Deputy chair: Rob Molhoek, LNP Member for Southport,
- Joan Pease, Labor Member for Lytton
- Ali King, Labor Member for Pumicestone
- Steve Andrew, One Nation Member for Mirani, and
- Dr Mark Robinson, LNP Member for Oodgeroo.

Only Mr Harper and Ms Pease served on the former committee.

The current Committee's report on the VAD Bill is expected by Friday 20 August.



Aaron Harper



Rob Molhoek



Joan Pease



Ali King



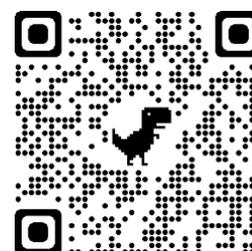
Steve Andrew



Dr Mark Robinson

**TIME IS RUNNING OUT
FOR YOU TO TELL YOUR
STATE MP.....**

IT'S **MY LIFE**
IT'S **MY CHOICE**
AND I WANT **MY LAW**



We must keep fighting

Decision day just weeks away

The recent passage of a voluntary assisted dying Bill through the South Australian Parliament should give all campaigners for VAD law reform here in Queensland cause for optimism.



Dr Sid Finnigan MBBS, FRANZCO
Queensland Convenor
[Doctors For Assisted Dying Choice](#)

But any optimism we may feel cannot extend to complacency.

Just because VAD Bills have now been passed in SA, Tasmania, Western Australia, and Victoria we cannot let ourselves believe that the same will happen here.

There is no domino effect at work with VAD laws.

Just because one state passes a VAD Bill doesn't mean another one will follow suit.

Every state is different. Every parliament in every state is different and the broader political culture and dominant issues are different.

Every MP in every parliament is also unique.

Each one of them has their own perspective on voluntary assisted dying and will also have the opportunity of casting a conscience vote on VAD, free from any constraints of their party's official policy.

So all of us who wish to see VAD laws in Queensland must continue to work hard before our 93 state MPs finally start to debate a Bill in September.

The VAD Bill drafted by the Queensland Law Reform Commission is now being examined by the cross-party Health Committee of our State Parliament.

We are rapidly approaching the point where all of our 93 MPs will have access to all the evidence that they need to determine that the VAD Bill is necessary, workable, and contains sufficient demonstrable safeguards and protections.

'Even though MPs will have a conscience vote, a VAD law is not about them as much as it is about what their constituents want.'

But they still need to know that their constituents want them to vote for VAD.

Even though MPs will have a conscience vote, a VAD law is not about them as much as it is about what their constituents want.

So if you haven't made your views known to your state MP, you need to do so – now.

Queensland's Bill makes improvements

The VAD Bill to be debated in the Queensland Parliament in September is a carefully drafted piece of legislation that has benefited from the progressive development of VAD laws both overseas and in Australia.

Just one example is the provision relating to how doctors and other designated medical professionals such as nurses can raise the subject of voluntary assisted dying with a patient.

The Victorian legislation contains a blanket ban on medical professionals initiating discussions about VAD with a patient.

Western Australia's law contains a more flexible provision that allows medical professionals to initiate discussions if all options available to a patient are discussed. The Queensland Bill drafted by the Queensland Law Reform Commission takes the same approach which Doctors for Assisted Dying Choice strongly endorses.

It is designed to allow patients to be given comprehensive information about all end-of-life options relevant to them.

A lawful VAD system should not be singled out as an exception to normal medical practice, where doctors and nurses routinely raise options for their patients' consideration.

Dr Sid Finnigan

US doctor sets the record straight

Lawmakers in the US state of Connecticut failed to progress a voluntary assisted dying Bill along with other proposed new laws in their most recent legislative session.

The demise of the Bill to enact VAD, or medical aid in dying (MAID) as it is often called in the US, was welcomed by some doctors including two from the School of Medicine at Yale University in Connecticut expressed their views to the news website *Connecticut Mirror*.

As a reply from MAID supporter Dr Paul Bluestein showed, the arguments for and against VAD in the US mirror those here in Australia.

Dr Bluestein began his letter to the editor by saying the original anti-VAD commentary by the two Yale doctors was "so unfair" that he felt compelled

to write a response to them.

"Their letter, like so much of what I hear from opponents of medical aid in dying, was just misleading, starting with the misuse of the term 'assisted suicide', which seems to be the obligatory bumper-sticker sound bite," Dr Bluestein wrote.

'Despite nearly 25 years of warnings about abuses, coercion, and a slippery slope to the Netherlands, the evidence just isn't there'

"Terminally ill patients don't want to die. They want to live, but that's not going to happen, regardless of good doctors' thoughts and prayers.

"They just don't want to live out their last days without dignity.

"They want the right to have a

say in how and when they die.

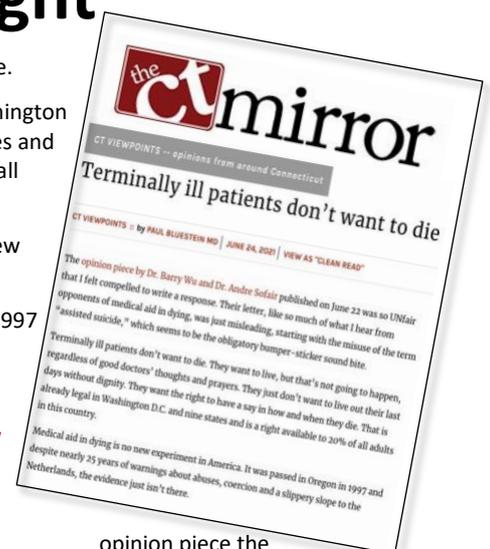
"That is already legal in Washington DC and nine [American] states and is a right available to 20% of all adults in [the USA].

"Medical aid in dying is no new experiment in America.

"It was passed in Oregon in 1997

and despite nearly 25 years of warnings about abuses, coercion and a slippery slope to the Netherlands, the evidence just isn't there."

He said anyone was "just one bad death away" from being a VAD advocate and noted that in their



opinion piece the two anti-VAD doctors had said they were "deeply saddened" by the testimony at a public hearing on the MAID Bill.

"Now, just imagine what it must have been like to actually live through that experience and not just hear about it on Zoom," he wrote.

A very notable conversion

Faith is no barrier to law reform

Everald Compton leads Christians for Voluntary Assisted Dying Queensland. Many years ago he worked together in South Africa with the then Anglican Archbishop of Cape Town, Desmond Tutu, on the successful campaign to release Nelson Mandela from prison. Everald is delighted to note that he shares another important belief – voluntary assisted dying – with the Archbishop who is one of the leading religious figures of his generation. He is particularly impressed that his old friend actually changed from being a life-long opponent of VAD.



Everald Compton's

CHRISTIANS for
VOLUNTARY ASSISTED DYING

Queensland

In July 2014 Desmond Tutu wrote an [article in The Guardian](#) newspaper declaring that he had changed his mind on voluntary assisted dying.

After being a lifelong opponent of VAD, he asked politicians, lawmakers, and other religious leaders to take action to give the option to those who were terminally ill and suffering at the end of life.

"People should die a decent death. For me that means having had the conversations with those I have crossed in life and being at peace," he wrote.

"It means being able to say goodbye to loved ones – if possible, at home.

"Some say that palliative care, including the giving of sedation to ensure freedom from pain, should be enough for the journeying towards an easeful death. Others assert their right to autonomy and consciousness – why exit in the fog of sedation when there's the alternative of being alert and truly present with loved ones?"

Two years later, in an [article for The Washington Post](#) in October 2016, Archbishop Tutu went further, declaring he wanted voluntary assisted dying as an option for himself when the time came.

"Just as I have argued firmly for compassion and fairness in life, I believe that terminally ill people should be treated with the same compassion and fairness when it comes to their deaths," he wrote.

"Dying people should have the right to choose how and when they leave Mother Earth. I believe that, alongside the wonderful palliative care that exists, their choices should include a dignified assisted death.

"I believe in the sanctity of life. I know that we will all die and that death is a part of life.

"Terminally ill people have control over their lives, so why should they be refused control over their deaths? Why are so many instead forced to endure

terrible pain and suffering against their wishes?"

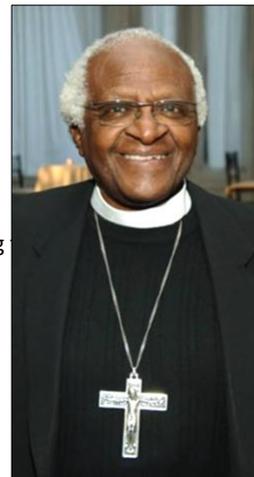
Desmond Tutu's words remind us all that being a person of faith is no barrier to supporting VAD and some of them are especially important for our state MPs to consider and remember when it comes time to vote on our VAD Bill.

"Regardless of what you might choose for yourself, why should you deny others the right to make this choice?" he said.

"For those suffering unbearably and coming merely knowing that an assisted death is open to them can provide immeasurable comfort.

"In refusing dying people the right to die with dignity, we fail to demonstrate the compassion that lies at the heart of Christian values.

"I pray that politicians, lawmakers and religious leaders have the courage to support the choices terminally ill citizens make in departing Mother Earth. The time to act is now," he said.



Archbishop Tutu

Watch Archbishop Tutu [here](#).

Scots set to debate VAD

The Scottish Parliament is expected to consider a voluntary assisted dying Bill this year.

The Bill, sponsored by cross-bench [Liberal Democrat MP Liam McArthur](#), is expected to be the subject of community consultations in coming months before being debated later this year.

In a message posted on his [Facebook page](#), Mr McArthur said a current blanket ban on VAD was not working.



Liam McArthur

He said as a result "too many Scots are forced to endure a protracted, painful and undignified death, often despite the very best of palliative care".

"They and their families deserve greater compassion and dignity in death," he said.

"From international evidence, we know this can be made to work alongside the important and necessary safeguards."

The director of [Dignity in Dying Scotland](#), Ally Thomson, said there was "huge support" throughout the community and within the ranks of Scottish MPs for a VAD Bill.

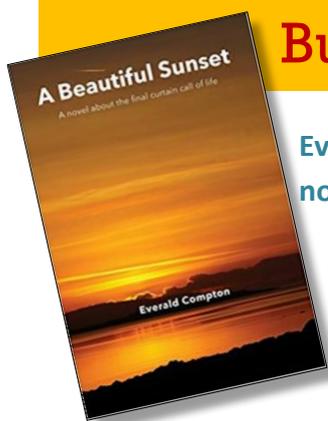
Ms Thomson took aim at those opposed to law reform who likened VAD to suicide.

"I would like anybody who would describe this as assisted suicide to speak to the people who have spoken out so bravely about their own experiences of how they are suffering just now," [she told the BBC](#).

"They do not want to die but that choice has been taken from them."

Ms Thomson pointed to VAD laws enacted or passed in the USA, Australia, and New Zealand as examples Scotland could follow.

Buy the book and back VAD



Every purchase of Everald Compton's novel about voluntary assisted dying, *A Beautiful Sunset*, helps Dying With Dignity Queensland.

PLACE YOUR ORDER NOW!

christiansforvadqld@gmail.com



[@ChristiansforVAD](#)



Rabbi pinpoints his change of mind

Moves in both the UK and Scottish parliaments to legalise voluntary assisted dying have prompted leading VAD advocate and Minister of Maidenhead Synagogue, Rabbi Dr Jonathan Romain, (pictured) to reflect on how and when he turned from opposing law reform to supporting it.



When I became a rabbi in 1980, I felt that nobody had the right to play God, as I saw it.

Like many people in Britain at the time, I thought assisted dying was a euphemism for euthanasia, and that it could lead directly to appalling consequences — the state-sanctioned murder of people with severe disabilities, for example.

Also, I worried that it would put immense pressure on the elderly to opt for medical suicide, rather than live on in expensive care homes or as a “burden” on their families. There was in addition the alarming spectre of greedy people “hurrying” their elderly relatives on their way, so they could inherit sooner.

Gradually, I have addressed all these concerns. My opinions have changed, but this did not happen quickly. All the same, I can identify one moment when the penny dropped — when I was suddenly aware that my previous assumptions had been entirely wrong.

As a congregational rabbi in Maidenhead, Berkshire, one of my duties is to visit seriously ill people, both in hospices and hospitals, and at their homes.

Palliative-care nurses, particularly in hospices, do a wonderful job with infinite patience and kindness. But there are some people they simply cannot help, because their pain is too great or the horrors of their death are too appalling.

One day I entered a hospice room to find a man kneeling on the bed, doubled over, face down with his head between his legs.

He was in unspeakable agony from stomach cancer and nothing he could do would ease it.

His wife was sitting beside the bed in silent tears, helpless.

Her own agony was awful to see too.

Something I often hear both patients and their families say in such situations is: “You wouldn’t let an animal suffer like this. A dog is treated better than a human.” And that’s true.

Why should such people be forced to stagger on, if they don’t want to? Why can they not be offered the option of a death with compassion and dignity, instead of being dosed with drugs into a stupor — a stupor which dulls everything, until there is nothing left of you?

The more I thought about it, the more I realised that should I reach that point, I could wish for nothing better than to die at a time I chose myself, when I was still conscious and able to tell my family one last time that I loved them.

‘At that moment, I knew I had to campaign for a change in the law, to help people who had suffered enough and wanted to let go.’

Perhaps I would choose to die at home, in my favourite armchair, after receiving hugs and farewells, and holding a loving hand. And if one of my congregation thinks that is better than to die on a ward or in a hospice bed, how can we be so arrogant as to think we have the right to forbid it?

For whose benefit are we making that decision? Certainly not for the patient who pleads to be allowed to die.

But I still didn’t realise what I needed to do, until a few months later when I preached a sermon for the Jewish New Year, Rosh Hashanah.

It was one of my better ones, a rousing pep talk about seizing the opportunity for change and

making a break with the past.

Afterwards, in a quiet hour of reflection, I asked myself how I was going to apply the sermon to my own life. At that moment, I knew I had to campaign for a change in the law, to help people who had suffered enough and wanted to let go.

Currently, all options are bad for people in pain with no hope of recovery. Too often, in the grip of terminal cancer, motor neurone disease or other incurable diseases, they feel driven to suicide — taking their own lives while they still can.

Sadly, people frequently decide to do this in secret, so that no blame can attach to their families. It is a lonely death. If their attempt fails, it can leave them in even more pain, and it causes great trauma to their loved ones.

If they do kill themselves, often a family member will find their body. I have counselled people in the aftermath of such a shocking discovery. I know how deeply upsetting it can be to have to untie the rope or mop up the blood.

Some people insist there is value in suffering, that it refines the soul from a religious point of view. I think that is wrong.

Where we can heal, we should. But when a life is beyond saving, we should bring comfort and assist people to let go of life when that is their wish.

This is an edited text of an article Rabbi Romain wrote for the [Daily Mail](#).

New faith group backs VAD laws

Rabbi Romain and other faith leaders in the UK have formed a new group to advocate for voluntary assisted dying law reform.

The [Religious Alliance for Dignity in Dying](#) includes prominent figures from a range of churches.

As chair of the new group, Rabbi Romain said its aim was to “challenge the inaccurate view that people of religious faith are flatly opposed to assisted dying”.

“My experience is that many members of the clergy in all religions are sympathetic to the idea, and that the overwhelming majority of worshippers — Christians, Jews, Muslims, Hindus and other faiths — support it,” he said.

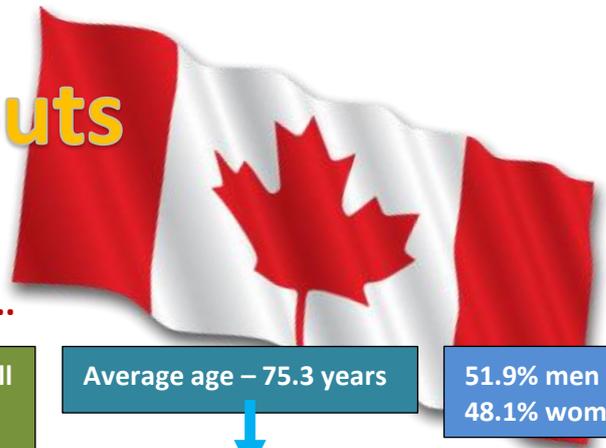
Rabbi Romain said in the past even raising the issue of VAD was seen as “troublemaking” by the hierarchy of some churches.

“Gradually, though, major figureheads have been voicing their support for choice — including the former Archbishop of Canterbury, George Carey, and Archbishop Desmond Tutu in South Africa.

“Desmond Tutu said [he would opt for assisted dying himself](#), if it is appropriate when his time comes.

“When such a revered personality speaks out, people listen,” he said.

Canadian report puts VAD facts in focus



Canadian health authorities have released their latest [statistical report](#) on the operation of voluntary assisted dying, or medical aid in dying (MAID) as it is widely known in North America.

Patty Hajdu, Canada's Minister of Health, said in the report that the onset of the COVID-19 pandemic in 2020 and associated public health measures had important impacts on all aspects of health care, including MAID assessment and delivery.

"Despite challenges, practitioners have continued to do MAID assessments and procedures by adjusting their approaches to respect physical distancing and to ensure their safety and that of their patients," the Minister said.

The report for calendar year 2020 showed a total of 7,595 MAID cases, or around 2.5% of total deaths in Canada of 300,310.

Cancer was the most commonly cited underlying medical condition in the majority of MAID cases during the reporting year.

The vast majority of Canadian MAID recipients (82.8%) received palliative care.

2020 key figures.....

7,595 deaths or 2.5% of all deaths reported

Average age – 75.3 years

51.9% men
48.1% women

82.8% had received palliative care

- 94.5% of cases aged 56 or older
- 80.3% of cases aged 65 or older

Underlying medical conditions:

- 70% – cancer
- 13.8% – cardiovascular conditions
- 11.3% – chronic respiratory conditions
- 10.2% – neurological conditions

- 24.2% lung cancer
- 12.2% colon cancer
- 8.0% pancreatic cancer
- 7.5% hematologic cancer
- 6.9% breast cancer
- 6.6% prostate cancer

Administration setting:

- 47.6% private home
- 28% hospital
- 17.2% palliative care facility
- 5.7% residential care
- 1.5% other

- 35.2% amyotrophic lateral sclerosis
- 18.1% Parkinson's disease
- 9.7% multiple sclerosis
- 4.4% progressive supranuclear palsy
- 33.6% other – including multiple system atrophy, neuropathy, and Huntington's disease

The report said of the patients who did not receive palliative care during 2020, 88.5% had access to such services had they wished to avail themselves of palliative care.

Doctors provided MAID in 94.7% of MAID cases with the other 5.3% of providers being nurse practitioners. Family doctors administered MAID in 68.1% of cases.

Premier says WA law offers 'choice and relief'

Western Australia's Voluntary Assisted Dying Act is now operational following an 18-month implementation phase.

The law was passed by the WA Parliament in December 2019 and took effect from 1 July this year.

WA Premier Mark McGowan said the landmark law was "compassionate and safe".

"We embarked on a monumental journey and delivered historical

change by legalising voluntary assisted dying in 2019," Mr McGowan said.

"This will make a significant difference to so many people's lives and their loved ones – giving them choice and relief.

WA Health Minister, Roger Cook, said there was overwhelming



McGowan

community support for the law.

He said a great deal of work had gone into ensuring that WA's VAD system was safe and effective.

During the implementation phase [new VAD-related services](#) such as the Statewide Care Navigator Service, mandatory training for participating doctors and nurse practitioners, the Statewide Pharmacy Service and

the Voluntary Assisted Dying Board were established.

So far 37 medical practitioners have been approved to train to administer voluntary assisted dying services and an additional 59 had so far requested access to the required training.

It is expected that the number of approved practitioners will grow now that the law has taken effect.



Doctors for Assisted Dying Choice



The *My Life My Choice* monthly newsletter is produced by the Clem Jones Group, Dying With Dignity Queensland, Doctors for Assisted Dying Choice (Qld), and Christians for Voluntary Assisted Dying (Qld) for the dominant purpose of educating and raising awareness of voluntary assisted dying law reform in Queensland and other states and territories.