

**Hansard**  
**November 3, 2016**  
**DEATH WITH DIGNITY BILL**

Second Reading

Adjourned debate on second reading.

(Continued from 20 October 2016.)

**Mr GEE ( Napier ) ( 11:18 ):** I would like to say a few words on the Death with Dignity Bill 2016, sponsored by the Member for Morphett. It is my personal opinion that this bill is really about a couple of principles. It is about dignity and respect. It is about having a legal right to make a choice.

My view on this issue has not always been set in stone. My position on voluntary euthanasia is coloured by personal experience, and I am sure so many others here today are moved by the same feelings. I remember the day when I was told that my father had cancer. I will never forget the day he died—not because of sadness but because of relief. Where was his dignity and respect? Where was his choice and where were his rights? I still feel his pain.

This issue has come before parliament many times, and people have had many different and varied views. The United Nation's Universal Declaration of Human Rights states that people are born with dignity, and further, that no-one shall be subjected to cruel or inhumane treatment. I believe that South Australians who have a terminal, incurable medical condition should not be prevented by this parliament from dying with dignity.

It is inhumane to make people with an incurable medical condition suffer when we can provide them with a right to end their pain. I support life and the protection of the right to life by all, but people have a right to a quality of life that is free from pain and suffering. When a person can no longer expect a quality of life, then they should have a choice to decide if they would prefer to put aside their suffering.

There are some members of our community who are opposed or concerned about voluntary euthanasia because of stories about what happens overseas or some of the methods that have been talked about in the past. I want to address these concerns. This bill has all the appropriate safeguards in place to ensure that the right to die peacefully is limited to those who need it. I will outline the strict eligibility criteria. To be eligible, the person must be a competent adult who is of sound mind and has lived in South Australia for more than 12 months.

The person must be suffering from a terminal medical condition that is causing suffering that is intolerable to the person and there is no available medical treatment or palliative care options that would, having regard to both the treatment and any consequences of the treatment, relieve the person's suffering in a matter that is acceptable to the person. Further, the person's death has, disregarding any medical treatment that may be administered to prolong the person's life, become inevitable by reason of the terminal medical condition.

Some members of the community believe that the elderly, disabled and

children will be put at risk as a result of the legalisation of voluntary euthanasia. It is a requirement of this bill that everyone who wants to access their right to voluntary euthanasia will need to consult with two independent doctors and potentially a psychologist. In addition, the bill clearly states, to avoid doubt, that a person is not eligible merely because the person is of an advanced age; suffering from a disability, however described; or suffering from a mental health condition, whether or not the person finds those matters intolerable.

These are appropriate protections to ensure that this bill is not misused and the elderly and disabled cannot be coerced or euthanased against their will. There are penalties in this bill, including \$10,000 fines and 10 years' imprisonment for people who commit an offence under this bill, along with the standard indictable offences. In relation to children, in Belgium, euthanasia of children is legal under very strict rules, and the legislation has been used once. This bill deals solely with adults. I strongly oppose voluntary euthanasia being extended to children.

At least 85 per cent of Australians support voluntary euthanasia, including up to 77 per cent of Catholics, 88 per cent of Anglicans and over 90 per cent of those with no religion. All of these people support a voluntary euthanasia bill that is likely broader than this bill and knowing that we have a good healthcare system and quality palliative care. They understand that as part of the range of options, voluntary euthanasia needs to be available as palliative care is not always enough. Susan Byrne, convenor of SA Nurses Supporting Choices in Dying, told InDaily recently:

Most people want to live, almost at all costs. It's not a decision that these people come to easily...The majority of people I've looked after towards the end of life would never ask the question—they cling to life, they want to see their loved ones, they want to see the sun come up the next day.

But there has to be a choice. Byrne goes on to say that even though the principal tenet of the medical profession is, 'Do no harm':

If someone is really suffering at the end of life, and the health professionals are unable to assist them to die, 'we're definitely doing harm to our patient' .

I am aware that not all doctors and nurses are pro euthanasia, and this bill does not place an obligation on all members of the medical profession to assist patients to end their suffering. The bill says they can refuse without prejudice, discrimination or loss of employment. Again, this bill offers choice. I am certain that many doctors and nurses will have been asked across their careers to increase medications to end a patient's suffering.

A study in the Medical Journal of Australia concluded that in 1995-96 approximately 1.8 per cent of all deaths in Australia occurred as a result of voluntary euthanasia and that 0.1 per cent were due to physician-assisted suicide. Further, the study found an estimated 3.5 per cent of all Australian deaths involved termination of the patient's life without the patient's explicit request. This bill allows nurses and doctors to say that they can legally assist without risk of prosecution, as long as the correct process is followed.

It is alleged by some people that the introduction of voluntary euthanasia will increase the suicide rate. This is untrue, as suicide is entirely distinct from voluntary euthanasia and there is no credible evidence of increased suicide rates because of euthanasia laws overseas. I know the

member for Morphett is an advocate for suicide prevention. In addition, sadly, members of our community commit suicide every day, and will continue to do so whether this law is introduced or not. It is possible that rates of assisted suicide will fall with the introduction of this bill, as people will be able to access the legal means to end their suffering by medical supervision.

In conclusion, South Australians should have the right to end their suffering in a controlled environment with many safeguards in place and pass away with dignity, not be forced to experiment with backyard methods. This bill is about choice, giving people a choice to end their suffering, giving nurses and doctors a choice to assist patients to end their suffering, and demonstrating that South Australia is a state that cares about its citizens at a time in their life when they need our support the most. I urge all members to support extending this choice to those most in need.

Debate adjourned on motion of Ms Sanderson.

The Hon. T.R. Kenyon interjecting:

**The SPEAKER:** The member for Newland will not say aye until I have asked.

The Hon. T.R. Kenyon interjecting:

**The SPEAKER:** I call the member for Newland to order.