

DEATH WITH DIGNITY BILL

Introduction and First Reading

Dr McFETRIDGE (Morphett) (10:32): Obtained leave and introduced a bill for an act to provide for choices and dignity at the end of life. Read a first time.

Second Reading

Dr McFETRIDGE (Morphett) (10:32): I move:

That this bill be now read a second time.

This is the 15th bill that this house has had to consider on the issue of voluntary euthanasia. This morning, I had a message of encouragement and congratulations from Marshall Perron. We know the history of the Northern Territory with voluntary euthanasia; let's hope that in South Australia, a sovereign state, we can actually move forward on this issue.

This bill is a result of many years of debate, concerns being aired, issues being raised, some furphies being put out there and, unfortunately, also some lies. This is such a serious issue and that volume of debate should not be ignored. That is why we as members of this place need to consider this piece of legislation very carefully. Over the years, we have had members in this place and the other place, such as the Hon. Steph Key—and congratulations to Steph on her courage, determination and persistence—

The SPEAKER: The member for Morphett will refer to members only by their constituency or title.

Dr McFETRIDGE: Thank you, Mr Speaker—the member for Ashford. The late Bob Such, the Hon. Sandra Kanck, John Quirke, Anne Levy and the late Frank Blevins all put in considerable time and effort to try to get to this stage. The need to recognise their efforts is something that I think every member in this place should reflect upon and ask themselves, 'Why are we here today?'

This bill is a very, very important piece of legislation for this house. The bill we have today is the result of months and months of negotiation on behalf of the member for Ashford with numbers of stakeholders, individuals and members of parliament. There is not a member in this place who has not had the opportunity to negotiate the amendments that have been put together by the member for Ashford in her bill.

It became clear that the member for Ashford's bill was still facing some opposition, some concerns, and so with her consent—and the member for Ashford has seconded this bill—we have put together this new piece of legislation which embodies, encompasses and includes all those amendments that were suggested by members of parliament. All the safeguards are there. All the necessary argument has been dealt with.

This is a very sensible, straightforward piece of legislation. You should not need to go to the Acts Interpretation Act to look at this legislation and ask yourself, 'What does it mean?' You do not need to be a QC to look at this and see that this legislation is a straightforward, honest, deliberate piece of legislation to give 75 per cent of South Australians who want this choice, that choice. Everybody in this place should remember that each and every one of their constituents is who they should be thinking about today—the 75 per cent. One Newspoll in 2012 showed that 82 per cent of people want this choice.

This is a choice that is wanted, not demanded, but wanted and needed by those few people where palliative care does not work, so let's give those people that

democratic right to make the decisions about the way they leave this life. All of us, every one of us, everybody in this place, is going to die; there is no argument about that. There is nothing more certain about that.

What we do have is the choice today. We have the decision-making ability in this place today to decide for those few people who are in a position of terrible suffering, and if you want to read about some of those stories I am more than happy to give you copies of the *Go Gentle* book that relates some of those stories. This bill is going to give those few people that opportunity to decide when and how they die. It is about voluntary euthanasia. It is about somebody with a terminal illness.

These people are going to die. It is about whether we are going to stand here and say to those people who are going to die from a terminal illness, 'No, you cannot have the choice about dying with dignity, dying with your loved ones around you and dying in a peaceful way, or are you going to be sedated out of your mind, starved to death and dehydrated? What are you going to do?' It is up to us. It is as serious as that.

The bill we have before us today is the result of those months and months of negotiations by the member for Ashford and others in this place, and I thank all those groups that have been contributing to this. I will just read the most important part about this bill. This bill is about a request for voluntary euthanasia. Only a person with a terminal illness can make this request. That person has to go through seven distinct, clear steps before that request can be assented to. That person has to be an adult who is mentally competent to make the request.

They have to be diagnosed with a terminal illness. Their death is inevitable due to the terminal medical condition. The suffering of the person has become intolerable to them and there is no reasonable available medical treatment or palliative care option that could relieve their suffering. That person has to have lived in South Australia for 12 months. No-one will be able to make a request for voluntary euthanasia on the grounds of their disability, their age or their mental health condition—that is very, very clear. The definition of 'terminal medical conditions' is one that is incurable. The person will have reached a stage where their suffering is untreatable. These people are going to die.

Two different doctors will be involved, one of whom is normally the treating doctor who has seen that person progress and deteriorate through their illness. That medical practitioner will be the initial person who examines the patient who is making the request. Then a different completely independent doctor has to examine that patient and explain to the patient what the treatments are and what procedures they can undertake. If either of those doctors has any doubts whatsoever about that patient's mental health condition, they will have to refer that patient to a psychiatrist for examination. There are two doctors, one who is completely independent and has never seen the patient before and then there is that psychiatric backup.

On top of that, there have to be two completely independent witnesses. Those witnesses cannot be beneficiaries of the estate of the person who is making the request. They need to make sure that they understand that this is a request for voluntary euthanasia. They need to be clear in their own minds that there is no coercion, inducements or other pressures on this person. In fact, if people are found to have been acting in an unethical or coercive manner, there are severe penalties for those people in this bill, up to 10 years' gaol. There are severe penalties. There are safeguards.

Seven steps are laid out in the bill. They are very clear and very easily understood by everybody. As well as the doctors' examinations, the psychiatrist's

examinations and the witnesses, a report to the Coroner has to be lodged, a report to the parliament has to be lodged every year and there is a clause providing for a five-year review. Some people may think that is too long. I have had it put to me that perhaps it should be three years. I am more than happy to talk about that, but a review within five years is provided for in the bill.

This bill is like any other piece of legislation in here. We are in charge, we are in control and we are the authors of our destiny. We are also the authors of the destiny of those people in South Australia who want this choice. I have letters and submissions, as we probably all have. Can I just say on the doctors' front, I know the AMA is still not supporting this, and I suppose that is putting it kindly, but you have to understand that only 29 per cent of doctors belong to the AMA. It would be interesting to see how many of that 29 per cent actually support voluntary euthanasia.

In the nurses' federation, there is overwhelming support from hundreds of thousands of nurses. In the nurses' federation, 85 per cent support it. We have submissions from lawyers supporting voluntary euthanasia, we have submissions from youth groups and young people supporting voluntary euthanasia and we have submissions from Christians supporting voluntary euthanasia.

In the submission from Christians for voluntary euthanasia, interestingly, they talk about their various polls. A Morgan poll showed that in South Australia, 81 per cent of Anglicans, 87 per cent of Methodists, 66 per cent of Presbyterians, 69 per cent of the Catholic community, 74 per cent of the Uniting Church, 74 per cent of Lutherans and 68 per cent of Baptists supported voluntary euthanasia. A 2012 Newspann showed that 82.5 per cent overwhelmingly supported voluntary euthanasia. That is part of the submission from the Christian lobby.

Also in their submission, they use evidence from two extremely well-respected and highly credentialed members of the church: Lord Carey, the former archbishop of Canterbury, and Archbishop Desmond Tutu. I do not think anybody in this place would have any qualms about the ethics, morals or truthfulness of these two people or their ability to put a position that needs to be put and needs to be argued. Both those men said that they support voluntary euthanasia. Desmond Tutu said:

I have been fortunate to spend my life working for dignity for the living. Now I wish to apply my mind to the issue of dignity for the dying. I reverence the sanctity of life—but not at any cost.

There is another quote in here from an English minister, Canon Rosie Harper, who watched her uncle die: 'He had no choice about dying. He did have choice about the manner of his death.' Why did he have that choice? He went to Switzerland—one of the countries where voluntary euthanasia is available.

This is all we are asking today. We are asking this place to see the sense, to see the need and to show the compassion for those few, that small group, who do not respond to palliative care, so that they can be able to make this choice. Across the Christian lobby, the doctors, the nurses, the young people and the lawyers there is very, very strong support. Recently, we did some work with another group in South Australia. Last month, we ran four focus groups in South Australia. The result was those focus groups were in support of voluntary euthanasia. There were criteria, and those criteria were:

that it be voluntary, that it be the individual's choice;

that the person be dying and in the final stage of life. That the illness be terminal;

the person be in 'excruciating pain' or 'terrible suffering' or 'suffering a lingering painful death' or 'untreatable pain'; and

that these three above 'facts' be independently verified by established mainstream Australian medical protocols and rigorous medical checks and balances.

That is from the four focus groups last month in Adelaide, and that was the result they came up with. That is why it is very important today that we recognise the need is there and the responsibility is ours. So, do the right thing by your constituents, do the right thing by the people of South Australia and give them death with dignity.

The SPEAKER: Does the member for Morphett have any clause notes to table?

Dr McFETRIDGE: Not at the moment, no, Mr Speaker.

Debate adjourned on motion of Hon. P. Caica.