

## Pro forma submission

3,622 people expressed a view on the proposal set out in the Bill via the pro forma submission on the committee's website. A selection of the responses received are set out below. These responses are illustrative of the thousands received. It was not possible to publish every single response.

### Supporting the Bill

"I have seen the pain and suffering of a person dying from a terminal illness and believe that they should be able to choose a medically assisted death, if that is their wish. The last thing a person feels or sees before they die, should not be pain or a hospital room. They should be given the chance to say good-bye in the way they feel is best and to pass gently in a place and at a time of their choosing".

"The Bill is a necessary piece of legislation because:

1. Provision of dying with dignity is a means of providing, what is to most people a viable option for medical services that are unable to find a satisfactory alternative.
2. The Pre-conditions to providing dying with dignity medical services as proposed are clearly rigorous;
3. I believe the process proposed is too rigorous, however I support the Bill because it provides a sound balance of options of communicating with medical practitioners, and being able to provide the patient with an understanding of the process;
4. It provides Immunity from civil, criminal and disciplinary actions to those medical people who are afraid to undertake the process because of outmoded legislation;
5. It works well in other countries, such as the Netherlands, even though their legislation is slightly different;
6. It should not be an offence to determine the way a person wants to die".

"The bill contains extensive attention to safeguards. Passage of the bill would prevent unnecessary suffering for terminally ill patients who wish to take control over the manner and timing of their death. For terminally ill patients, the option to control the manner and timing of one's death provides comfort and reassurance. "Sanctity of Life" arguments may be relevant to those with strong religious beliefs, but they should not be inflicted on others. End of life choices are already available in four American states and other European legislatures. In spite of scaremongering by opponents, there is no evidence of abuse".

"Because it is the right thing to do. Give people some dignity in their life, palliative care can only do so much. Up to a person's choice when they feel they have had enough pain, suffering and lack of dignity. People can choose not to use this option, but they have no right to stop others from saying it is my time to go. We treat animals with more respect surely we can also have the same respect for us. I don't want to live a life like a vegetable or have

nothing more to look forward too that is so cruel on me as a person and to my family especially my child. Dying is part of life why do we do everything we can to keep people alive when they don't want to be here any longer and they have no quality of life. If we have made peace with death we should be allowed to go and be assisted if we cannot do it ourselves".

"There are now 9 jurisdictions worldwide which allow physician assisted dying. It is about time that our members of parliament began to represent their constituents in this matter. Community support now sits at around 80%. Regardless of their own personal or religious views it is incumbent on our parliamentary representatives to listen to what the average Australian wants in relation to Voluntary Euthanasia legislation".

## **Opposing the Bill**

"Euthanasia and physician-assisted suicide are contrary to the most basic tenets of our society. We do not kill innocent people, even for reasons of compassion. As Christians we hold to this teaching (Exodus 20:13) and oppose these practices as contrary to human dignity. All human life is valuable, regardless of our situation, as we are all made in the image of God. (Genesis 1:27). Euthanasia and PAS do not involve the right to die, but the right to be killed and no-one has the right to ask this of another citizen. There is no 'safeguard' which will prevent this legislation from being abused. All places where euthanasia and PAS have been legalized have seen the guidelines weakened so that patients are killed without knowledge or consent, making such a law dangerous to vulnerable people in our community, such as the sick, the elderly and the disabled. Introducing such laws gives our society the message that death is an appropriate response to suffering. In view of the high suicide rate in our country, this is a dangerous step. Physical suffering can be largely avoided by early intervention with palliative care. We need to improve access to palliative care services in Australia so that suffering is reduced. If such laws are introduced, it is important that patients actually experience a trial of palliative care before deciding that they want to die. Knowledge that it may be available is not enough to communicate what good end of life care can do for the dying. By calling this bill the 'medical services' bill, it confuses the role of doctors. They are traditionally seen as protectors of life, and it could weaken community confidence in the medical profession if they cannot be trusted as such. This is unhelpful for those who are sick and need to be confident that their doctor has their best interests at heart".

"We only need to look at the consequences of legalising euthanasia in the Netherlands. This WILL lead to a broader acceptance and increased incidence of euthanasia. Euthanasia will become the default mode of death for the terminally ill. Patients will increasingly demand it as a right and there will be unjustifiable pressure on physicians, whose primary role is healer not killer. The art of palliative care will be neglected. Although stated otherwise in the Bill, minors, mentally ill and patients with dementia will be provided with this 'service' – just look at the Netherlands."

"This proposed legislation would change attitudes towards the sick and the elderly, basing human dignity on one's level of health. Human life must always be protected. This is the role of a medical practitioner. The sick and

elderly need to be supported through their illness, they are especially vulnerable and would more readily feel like a burden on society if this legislation passes. As a result many would make the fatal choice and it would give rise to many abuses. This must not be passed for the sake of the human dignity that assisted suicide has utterly misunderstood".

"No. Death is in God's hands not ours. As a Baptist Minister I know the intense pain and suffering cloud judgement and confuse many. This will lead to miss-use by the sufferer and those who want to support them. Effective Palliative care until natural death is the more just, humane and appropriate option".

"Legalising euthanasia puts at risk the lives of society's most vulnerable people – the elderly, the lonely, the sick, and the depressed. Euthanasia transmits the message that some lives are no longer worth living or worth caring for.

Euthanasia undermines the fundamental relationship of trust between doctor and patient. Patients trust doctors to act in their best interest.

Euthanasia puts pressure on patients who are concerned about being a burden to their families or friends.

Despite safeguards, in countries where euthanasia has been legalised, a large number of euthanasia deaths occur without the explicit request or consent of the patient.

After euthanasia is introduced, the strict boundaries are often relaxed to include, for example, mental illness but no terminal physical illness. Euthanasia for children as young as 12 is permitted in the Netherlands, and for children of any age in Belgium.

In most cases, physical pain can be treated with palliative care".