

Parliament of Victoria

Voluntary Assisted Dying Amendment Bill 2025

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Bill Brief

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Bill information

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House: Legislative Assembly

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Links to key documents including the Bill, Explanatory Memorandum, Statement of Compatibility and Second reading Speech can be found at the [Library’s Infolink page for this Bill](#).

For further information on the progress of this Bill, please visit the [Victorian Legislation and Parliamentary documents website](#).

Executive Summary

Voluntary assisted dying (VAD) refers to when an eligible, terminally ill adult makes a request to a health practitioner for medication to end their life, which is then self-administered or administered by the practitioner. Following several attempts across the country, including a short-lived scheme in the Northern Territory in the 1990s, Victoria became the first state to legalise assisted dying through the *Voluntary Assisted Dying Act 2017*.

The Act came into effect in June 2019 and is supported by a VAD Review Board and a statewide care navigator service. While the territories remain without VAD laws (although VAD laws in the Australian Capital Territory will come into force in November 2025), similar laws are now in place in all Australian states. There have since been calls for reform to Victoria's VAD scheme, where access is now comparatively more restricted.

Two Private Members' Bills have sought to amend the VAD Act and, following the release in February 2025 of a five-year review of the Act's operation, the Victorian Government announced that it would be introducing legislation to improve access to VAD and to bring the Victorian scheme in line with other Australian jurisdictions.

The Voluntary Assisted Dying Amendment Bill was subsequently introduced on 14 October 2025. The Bill seeks to make a number of amendments, such as:

- removing the 'gag clause' prohibiting medical practitioners from raising VAD;
- ensuring that practitioners who conscientiously object provide minimum information to patients about accessing VAD;
- amending VAD eligibility in terms of residency and prognosis timelines;
- reducing the timeframe between first and final requests for VAD;
- removing the need to obtain a specific administration-method permit, and
- expanding the 'administering practitioner' cohort to include nurse practitioners and registered nurses.

Responses to the Bill have been mixed. The Royal Australian College of General Practitioners has voiced its support for the amendments, as have the leaders of Dying With Dignity Victoria, Go Gentle Australia, and Christians Supporting Voluntary Assisted Dying. Family members of people who have accessed VAD also expressed support. Conversely, some medical ethicists and religious faith leaders from Christian, Muslim, Hindu and Sikh communities have expressed concern about the proposed amendments.

1 | Introduction

This Bill Brief provides an overview of the Voluntary Assisted Dying Amendment Bill 2025 ('the Bill'), including the background to its introduction, the proposed amendments, and responses to the Bill. It concludes with a comparison of relevant legislation across Australia. The paper should not be seen as offering legislative interpretation or legal advice, nor is it an exhaustive account of the Bill.

What is voluntary assisted dying?

In Australia, voluntary assisted dying (VAD) is 'when an adult with a terminal illness requests and receives medication from a health practitioner which they take or have administered to end their life'.¹ Importantly, a person who wishes to access VAD must have the capacity to make a voluntary choice to do so. 'Voluntary assisted dying' is therefore the term commonly in use in Australia, though different terms (including 'medical assistance in dying', 'physician-assisted dying' and 'euthanasia') are in use in overseas jurisdictions and under specific settings.²

Background

In 1995, the Northern Territory was the first jurisdiction in the world to legalise assisted dying through the *Rights of the Terminally Ill Act*. However, the Act was overturned soon after it came into operation in 1997 by the Federal Government.³ After numerous attempts around the country, Victoria became the first state in Australia to legalise VAD through the *Voluntary Assisted Dying Act 2017* ('VAD Act').⁴

Assisted dying laws are now in place in all Australian states, and will come into effect in the Australian Capital Territory in November 2025.⁵ The NT remains the only jurisdiction without VAD laws, though the issue is currently being debated in its parliament.⁶ (See 'Other jurisdictions' section.)

Voluntary assisted dying in Victoria

The VAD Act came into effect in June 2019. It allows terminally ill Victorian adults with decision-making capacity to access VAD if they have an incurable and advanced disease, illness or medical condition that causes intolerable suffering and is expected to cause death within six months (or within 12 months for a neurodegenerative disease).⁷ There are multiple stages to VAD in Victoria, including: making a first request; being assessed by a coordinating doctor, followed by a consulting doctor; completing a written declaration once deemed eligible; and making a final request (at least nine days after the first request) before a permit to access VAD medication can be granted.⁸

The VAD Act is supported by a Voluntary Assisted Dying Review Board that oversees its operation, including promoting and ensuring compliance with the Act, collecting data, providing information to the community and reporting to the parliament.⁹ A statewide care

¹ B. White et al. (2025) 'Voluntary Assisted Dying', QUT End of Life Law in Australia website.

² *ibid.*

³ G. Lamba et al. (2025) 'How voluntary assisted dying in the NT would be different to down south', *The Conversation*, 16 October.

⁴ For background on the VAD Act, please consult the Library's Research Note: C. Otter (2017) *Voluntary Assisted Dying Bill 2017*, Parliamentary Library & Information Service, Melbourne, Parliament of Victoria.

⁵ White et al. (2025) *op. cit.*

⁶ Lamba et al. (2025) *op. cit.*

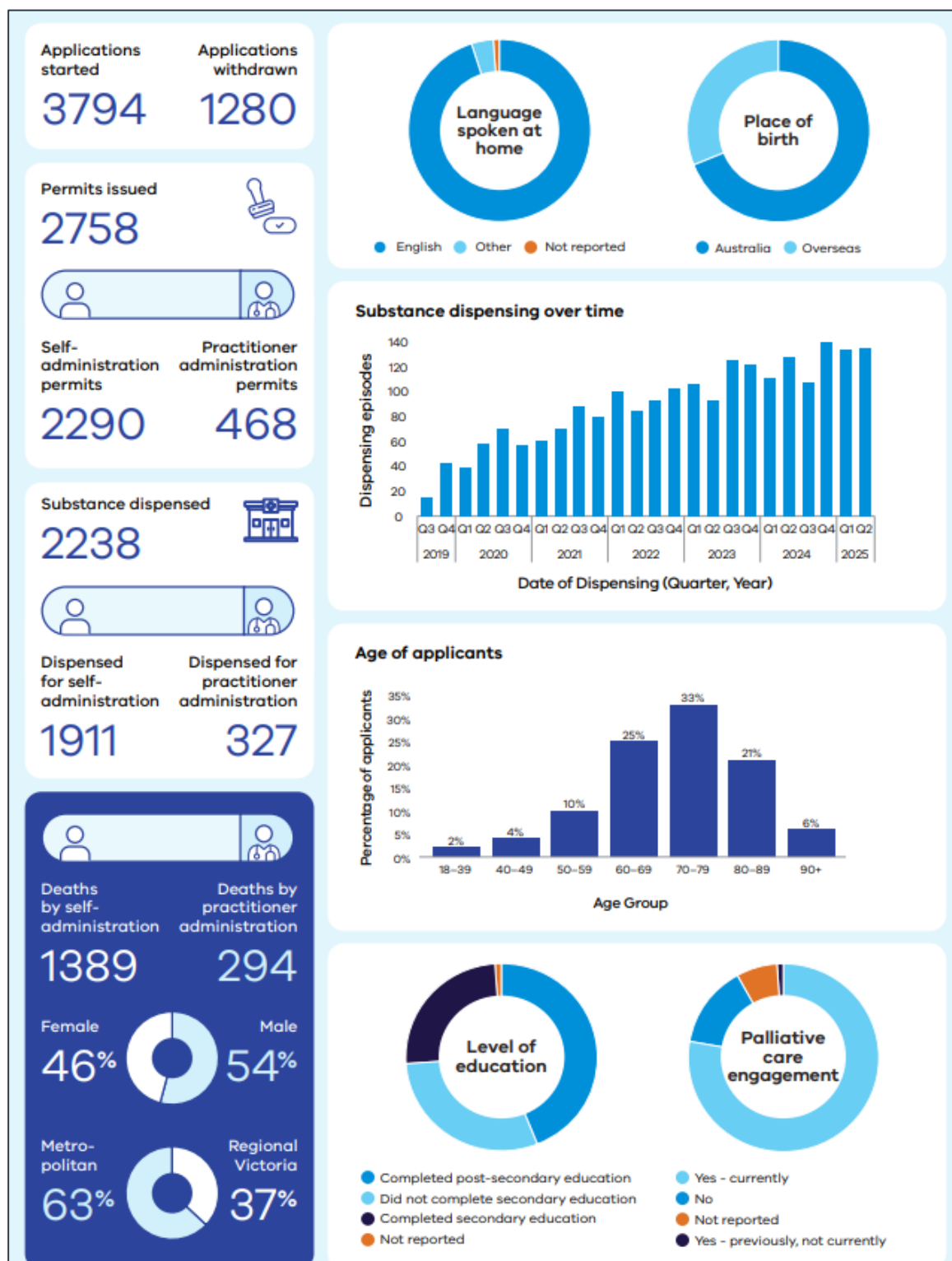
⁷ *Voluntary Assisted Dying Act 2017*.

⁸ Department of Health (2024) 'What process do my doctor and I need to follow?', DoH website.

⁹ Department of Health (2025) 'Voluntary Assisted Dying Review Board', DoH website.

navigator service is also in place to assist people seeking information about VAD.¹⁰ At 30 June 2025, 1,683 people had died using VAD in Victoria since the VAD Act commenced.¹¹

Figure 1: Victorian voluntary assisted dying minimum dataset, 19 June 2019 to 30 June 2025¹²



¹⁰ Department of Health (2024) 'Voluntary assisted dying statewide care navigator service', DoH website.

¹¹ Victorian Government (2025) *Voluntary Assisted Dying Review Board: Annual Report, July 2024 to June 2025*, September, Melbourne, Victorian Government, p. 56.

¹² *ibid.*

Private Members' Bills

Two Private Members' Bills have been introduced in the Legislative Council seeking to amend the VAD Act since it came into effect in Victoria. In May 2021, Derryn Hinch's Justice Party Member Stuart Grimley introduced the Voluntary Assisted Dying Amendment (Telehealth and Other Matters) Bill 2021, which sought to allow doctors to use telehealth for all VAD requests and correspondence, except the first request. The Bill also sought to redefine 'permanent resident' in the Act to mean a person who has lived in Australia for three years.¹³ Mr Grimley highlighted that the inability for doctors to conduct VAD assessments via telehealth had had 'huge implications' on uptake by coordinating medical practitioners, and emphasised the access challenges for regional and rural applicants.¹⁴ The Bill did not progress past the first reading stage and lapsed at the conclusion of the 59th Parliament in late 2022.¹⁵

In October 2024, the Victorian Greens introduced the Voluntary Assisted Dying Amendment (Equity and Access) Bill 2024 in the Legislative Council. The Greens asserted that the Victorian laws were now lagging behind other Australian jurisdictions, and that the VAD Act 'urgently needs updating to stop people from suffering unnecessarily'.¹⁶ The Greens' Bill seeks several amendments, including: removing the 'gag clause' preventing doctors from discussing VAD with patients, as well as the requirement to demonstrate an explicit prognosis timeframe; legislating that practitioners who conscientiously object to VAD cannot refuse to provide information if requested; removing the requirement that applicants must have been a Victorian resident for at least 12 months; and expanding the type of practitioners able to provide VAD services.¹⁷ The Bill is currently at the second reading stage in the Legislative Council.¹⁸

Five-year review of VAD in Victoria

Between June 2023 and June 2024, the Department of Health's Centre for Evaluation and Research Evidence conducted a five-year review of the VAD Act's operation, finding that VAD was 'working as it was intended'.¹⁹ The review, completed in October 2024 and tabled in February 2025, made five recommendations:

- Increase the provision of sector guidance and build on approaches to continuous improvement.
- Enhance community awareness of VAD and grief and bereavement supports.
- Support the workforce to ensure VAD is accessible, viable and sustainable.
- Consider enhancements to the statewide service models to meet anticipated future demand.
- Advocate to the Commonwealth Government for greater federal support for VAD.²⁰

¹³ S. Grimley, State Leader of Derryn Hinch's Justice Party (2021) *Grimley Introduces Voluntary Assisted Dying Bill to Address Issues on Telehealth and Permanent Residency Interpretation*, media release, 4 May.

¹⁴ *ibid.*

¹⁵ Legislative Council of Victoria (2022) 'Voluntary Assisted Dying Amendment (Telehealth and Other Matters) Bill 2021', *Notice Paper No. 178*, 21 September, p. 28.

¹⁶ Victorian Greens (2024) *Greens push for voluntary assisted dying reform as Victoria's laws lag nationally*, media release, 12 November.

¹⁷ *ibid.*; Victorian Greens (2025) *Greens outline further reforms needed to prevent barriers from accessing voluntary assisted dying*, media release, 5 March.

¹⁸ Voluntary Assisted Dying Amendment (Equity and Access) Bill 2024.

¹⁹ Department of Health (2025) 'Voluntary assisted dying five-year review', DoH website.

²⁰ Department of Health (2024) *Review of the Operation of Victoria's Voluntary Assisted Dying Act 2017*, October, Melbourne, Victorian Government, p. 9.

Though assessing the VAD Act itself had been outside the review's scope, the report indicated that a lot of feedback had been received on the Act's operation, including barriers to accessing VAD and issues around timeliness.²¹

First Nations consultation

The Review Board also commissioned a consultation report on First Nations people's experiences of and attitudes towards the VAD Act. The report made a number of findings, including that the VAD process was described by First Nations stakeholders as a 'lengthy and complex' process that 'often feels burdensome and inaccessible', and has led to tragic outcomes.²² The consultation paper concluded that education, cultural safety, incorporation of traditional practices and regular community feedback—among other recommendations—would all help to ensure 'a more inclusive and respectful end-of-life care system' that is 'dignified and culturally appropriate' for access by First Nations Victorians.²³

Victorian Government review response and Bill introduction

In its response to the VAD five-year review in February 2025, the Victorian Government accepted all recommendations, acknowledged that the review had found 'areas for improvement', and pledged to 'rewrite legislation to improve access to VAD, bringing it in line with other jurisdictions'.²⁴

The Voluntary Assisted Dying Amendment Bill 2025 was subsequently introduced in the Legislative Assembly on 14 October 2025 by Minister for Health, Mary-Anne Thomas.²⁵ Premier Jacinta Allan stated that the legislation would 'remove unnecessary barriers to accessing VAD, improve clarity for practitioners, strengthen safety measures and make the system fairer and more compassionate'.²⁶ The Premier also indicated that the Bill sought to 'bring Victoria's VAD legislation into line' with the other states, and did not seek to go any further than settings in those jurisdictions.²⁷

2 | The Bill

The Bill amends the Voluntary Assisted Dying Act 2017. This section outlines the most significant amendments made by the Bill.

'Gag clause'

The Bill removes the so-called 'gag clause'—which had effectively prevented a person's medical practitioner from raising the subject of VAD. Clause 7 substitutes section 8 of the Act to provide that a person's registered medical practitioner or nurse practitioner can initiate the discussion provided it is in the course of discussing end-of-life care. The practitioner must take reasonable steps to ensure the person also knows about their available treatment options as well as palliative care options, and their likely outcomes.

A new section 8(A) expands the cohort that can initiate the discussion to include a person's registered health practitioner who provides them with health services or professional care services, such as nurses and allied health professionals.²⁸ Again, such a discussion can only be had within the discussion about end-of-life care, and the practitioner must advise the

²¹ *ibid.*, p. 8.

²² *ibid.*, p. 80.

²³ *ibid.*, p. 65.

²⁴ M.-A. Thomas, Minister for Health (2025) *Voluntary assisted dying laws still the compassionate choice*, media release, 20 February.

²⁵ [Voluntary Assisted Dying Amendment Bill 2025](#).

²⁶ J. Allan, Premier of Victoria (2025) *Compassion and dignity for terminally ill Victorians*, media release, 14 October.

²⁷ *ibid.*

²⁸ M.-A. Thomas, Minister for Health (2025) *op cit.*

person that their registered medical practitioner or any other medical practitioner is the more appropriate person to discuss VAD and any treatment or palliative care options.

Contravention of these provisions would be regarded as unprofessional conduct under the Health Practitioner Regulation National Law.²⁹

Conscientious objectors

Clause 6 of the Bill enshrines the right of registered health practitioners to conscientiously object to participating in or facilitating access to VAD. This right currently exists under section 7 of the Act. The Bill inserts a new subsection 7(2) to stipulate that a health practitioner who is a conscientious objector must advise the person that another health practitioner or health service provider may be able to assist them in receiving information on VAD. The practitioner must provide the person with information approved by the Secretary of the Department of Health (the Secretary), which will include contact information for the Statewide Navigator Service and the relevant Department of Health website.³⁰ Advising a person in this case does not mean a referral to another registered health practitioner or health service provider.³¹

Eligibility

Eligibility to access VAD in Victoria rests on two main criteria, residency and prognosis, both of which are being amended under clause 8 of the Bill.

Citizenship and residency

Subclause 8(1) of the Bill amends section 9(1)(b) of the Act concerning citizenship and residency. Previously a person was only eligible to access VAD if they were an Australian citizen or a permanent resident. A person will now also be eligible if they have lived in Australia for three years at the time of application.

A person must still be a resident of Victoria or have resided in Victoria for at least 12 months at the time of making the first request for VAD to be eligible for the scheme.

A new section 9A, however, provides for a person to apply to the Secretary for an exemption from the Victorian residency requirements. The Secretary must provide the exemption in writing if the applicant satisfies the ‘substantial connection’ and ‘compassionate grounds’ clauses.³² To attain this exemption, an applicant must:

- reside in Victoria or in a place that is on or close to the border; or
- has previously lived in Victoria; or
- works, receives medical treatment, or receives residential care service in Victoria;³³ or
- the applicant’s family or carer lives in Victoria.³⁴

Prognosis period

A prognosis window refers to the amount of time a person is expected to live to be eligible to access VAD. The amendment concerning VAD eligibility based on the prognosis window is provided under subclause 8(2), which amends section 9(1)(d)(iii) of the Act and applies a consistent 12-month prognosis for all disease, illness or medical conditions. That is, the condition must be expected to cause death within 12 months, rather than the current six months. Under the Act as it stands, eligibility based on a 12-month prognosis is limited only to people with neurodegenerative conditions.

²⁹ Voluntary Assisted Dying Amendment Bill 2025, cl 7.

³⁰ ‘[Explanatory Memorandum](#)’, Voluntary Assisted Dying Amendment Bill 2025, p. 3.

³¹ *ibid.*

³² Voluntary Assisted Dying Amendment Bill 2025, cl 9.

³³ ‘Care’ as defined in the *Health Services Act 1988* (Vic), s 3(1).

³⁴ ‘Carer’ as defined in the *Carers Recognition Act 2021* (Vic), s 3; Voluntary Assisted Dying Amendment Bill 2025, cl 9A(3).

Access amendments

Minimum period between first and final requests

Under the current Act, a person must wait nine days from making their first request for VAD and their third request (also known as the final request). Clause 28 of the Bill amends section 34 of the Act to shorten this period to five days.

Third specialist assessment

The current Act requires two assessments from separate medical specialists—and a third for applicants with neurodegenerative conditions—before they can access the scheme. Clause 15 repeals section 18(4)(5) to remove the latter requirement for applicants with a neurodegenerative disease. The requirement for two assessments by separate medical specialists remains for all applicants.³⁵

Interpreter accreditation

Clause 75 allows for interpreters assisting persons accessing the VAD scheme to apply for an exemption from the requirement (under section 115(a) the Act) to be accredited by a prescribed body. The Secretary may provide an exemption if they are satisfied that another interpreter who is appropriately accredited is not available and there are exceptional circumstances warranting the exemption.³⁶

Administration amendments

The Bill contains several amendments to the process of administering the VAD substance.

Administration methods

The Bill allows applicants to decide whether they will self-administer the VAD substance or have it administered by an administering practitioner.³⁷ Currently self-administration is the default method, and a patient can only have the substance administered by a practitioner if they cannot do so themselves. Clause 32 creates two new parts in the Act and states a person can make the ‘administration decision’ (i.e. self-administration or practitioner administration) at any time during or after their final request, and must do so in consultation with their coordinating medical practitioner. The decision can be communicated ‘verbally or by gestures or other means of communication available to the person’.³⁸

The Bill removes the requirement to specify the administration method on a VAD permit application, meaning that if a patient’s condition changes or they change their mind on administration method they don’t need to obtain a new permit.³⁹

Administering practitioner

The Bill establishes a new role of the ‘administering practitioner’.⁴⁰ Currently only the coordinating medical practitioner can administer the VAD substance. The Bill expands this cohort to state that an administering practitioner can be a medical practitioner, nurse practitioner or registered nurse.⁴¹

³⁵ ‘Explanatory Memorandum’, op. cit., p. 7.

³⁶ *ibid.*, p. 31.

³⁷ Voluntary Assisted Dying Amendment Bill 2025, cl 32.

³⁸ *ibid.*

³⁹ *ibid.*, cls 34, 36.

⁴⁰ *ibid.*, cl 4.

⁴¹ *ibid.*, cl 42.

Clause 42 sets the minimum requirements for who can be an administering practitioner, and clause 51 details the circumstances under which an administering practitioner may administer the VAD substance.

The Bill also amends the Act to prevent the administering practitioner from being a beneficiary or family member of the VAD applicant.⁴² Clause 11(3) prevents the administering practitioner from benefiting in any way by the VAD applicant's death.⁴³

Regulation changes and review of the Act

The Bill allows forms used in the administration of the Act (such as assessment report forms, final review forms, among others) to be provided for in regulations, which will mean they can be more easily updated 'in response to clinical feedback, legal developments, or evolving best practice'.⁴⁴

The Bill also sets the requirement for ongoing review of the Act and its operation within the first three years of commencement and then every five years as a minimum.⁴⁵

The Bill reduces the period of specialist experience required of assessing medical practitioners to conduct VAD assessments from five years to one year.⁴⁶

3 | Stakeholder responses to the Bill

Members of Parliament

Both Labor and Coalition MPs will reportedly be granted a conscience vote on the Bill.⁴⁷

Aside from the Minister for Health and the Premier, Labor Member for Pakenham Emma Vulin has also advocated for VAD reforms, reflecting on her experience of living with motor neurone disease (MND). Vulin said she was 'determined to bring our state laws into line with the rest of the nation' and highlighted the MND community and the 'the heartbreaking stories of people who have wanted to access VAD but found barriers'.⁴⁸

Deputy Leader of the Opposition in the Legislative Council, Evan Mulholland, addressed an adjournment matter to the Minister for Health on 16 October 2025, asking her to 'urgently pause' what he sees as 'clearly ideological' as well as 'dangerous and reckless' reforms to VAD laws.⁴⁹

The Greens have advocated for reforms to voluntary assisted dying in the past, having introduced their own Bill earlier in 2024 (see 'Background' section), and 'strongly welcomed' the government's announcement of reforms.⁵⁰

Support for the reforms

The Royal Australian College of General Practitioners (RACGP) described the Bill's proposed removal of the 'gag clause' preventing doctors from raising VAD with patients as a 'sensible step'.⁵¹ RACGP Victoria's Chair, Dr Anita Muñoz, said this would 'have such a meaningful

⁴² *ibid.*, cl 11(2).

⁴³ *ibid.*

⁴⁴ M.-A. Thomas, Minister for Health (2025) *op cit.*; Voluntary Assisted Dying Amendment Bill 2025, cl 77.

⁴⁵ Voluntary Assisted Dying Amendment Bill 2025, cl 76.

⁴⁶ *ibid.*, cl 10.

⁴⁷ B. Kolovos (2025) 'Her death was tranquil': why Eve is urging Victorian MPs to make access to voluntary assisted dying easier', *The Guardian Australia*, 15 October.

⁴⁸ C. Everitt (2025) 'MP leads push for VAD', *Pakenham Gazette*, 17 September.

⁴⁹ E. Mulholland, Deputy Leader of the Opposition in the Legislative Council (2025) 'Adjournment: Voluntary assisted dying', *Debates [Proof]*, Victoria, Legislative Council, 16 October, pp. 129-130.

⁵⁰ Victorian Greens (2025) *Greens outline further reforms needed to prevent barriers from accessing voluntary assisted dying*, media release, 5 March.

⁵¹ K. Burge (2025) 'Major step to remove GP 'gag clause'', *newsGP*, 15 October.

impact, as will extending the life expectancy limit for eligibility from six months to a year', as well as supporting an expansion of the workforce able to support voluntary assisted dying.⁵²

Jane Morris, the president of Dying With Dignity Victoria, said the reforms would make a 'meaningful difference' but that Victoria's legislation needs continued refinement 'to ensure it is fair, accessible and responsive to all eligible individuals'.⁵³

Dr Linda Swan, the CEO of Go Gentle Australia, was also supportive of the proposed reforms when they were announced in February this year, saying, 'We believe the proposed changes will bring Victoria in line with the rest of the country and significantly reduce needless suffering'.⁵⁴

Ian Wood, the co-founder of Christians Supporting Voluntary Assisted Dying, supported the proposal for medical practitioners to be able to share the option of assisted dying with patients, saying, 'I can't see how loving your neighbour can say, well, we'll hold your hand, but you continue to suffer intolerably until we think it's time for you to die naturally'.⁵⁵

There has also been support from family members of those who have accessed the current assisted dying laws. Eve Crotty, daughter of Marion Crotty, who accessed voluntary assisted dying in August 2023, told *The Guardian* that she saw dignity in VAD but described the application process as a months-long 'traumatic' experience that was 'caught up in red tape and bureaucracy'.⁵⁶ She welcomed the Bill and urged both Labor and Coalition MPs to consult families affected directly in deciding how they would vote.⁵⁷ Liz Tower, fiancée of Alex Blain, 28, who accessed the VAD scheme in January 2021 said, 'The changes being announced today are exactly what Alex hoped for'.⁵⁸

Opposition to the reforms

Medical ethicist Denise Cooper-Clark was 'deeply concerned' about the removal of the 'gag clause', describing the requirement for the patient to initiate the conversation about VAD as 'one of the main safeguards ... for ensuring voluntary decisions', and that 'it was naive to ignore the power imbalance of the doctor-patient relationship'.⁵⁹

While not commenting on the Bill itself, former vice-president of the Australian Medical Association Dr Stephen Parnis expressed concern about erosion of the safeguards in the VAD scheme, citing a number of issues including 'protection of the vulnerable' and cultural factors.⁶⁰ He opposed proposals to expand eligibility and also said health practitioners other than doctors being involved in the process disregarded the 'complexity of diagnosis'.⁶¹

There have also been varying levels of opposition to the Bill from religious faith leaders. Anglican bishop Garry Weatherill said there was not a unified Anglican position on assisted dying, but his view was that 'the Christian tradition always gave a high priority to life', unless certain situations gave rise to moral justification for ending a life, 'such as for soldiers or for medically necessary abortions'.⁶² He said he would be 'happy for there to be no change to the legislation as it stands'.⁶³

⁵² Burge (2025) op. cit.

⁵³ A. White (2025) 'Major change coming to voluntary assisted dying in Victoria — and it starts in the doctor's office', *Herald Sun*, 14 October.

⁵⁴ Go Gentle Australia (2025) *Victoria to make voluntary assisted dying fairer*, media release, 20 February.

⁵⁵ L. Scholl (2025) 'Faith leaders resist assisted dying changes', *The Melbourne Anglican*, 16 October.

⁵⁶ Kolovos (2025) op. cit.

⁵⁷ *ibid.*

⁵⁸ C. Godde (2025) 'Dying on 'own terms' to get easier in law refresh', *Yahoo! News*, 14 October.

⁵⁹ Scholl (2025) op. cit.

⁶⁰ John Curtin Research Centre (2025) 'Episode 30 - 17 September 2025 - Dr Stephen Parnis', *Curtin's Cast*, 17 September.

⁶¹ *ibid.*

⁶² Scholl (2025) op. cit.

⁶³ *ibid.*

A number of faith leaders—including Reverend Peter Comensoli, Archbishop of the Catholic Archdiocese of Melbourne, and representatives of the Christian, Muslim, Hindu and Sikh communities—jointly contacted the Premier in April 2025 to urge the government not to amend VAD legislation with the changes proposed by the Department of Health.⁶⁴ Catholic faith leaders reiterated these concerns in a pastoral letter to Victorian Catholics in October. The letter said the Bill would ‘weaken protections for vulnerable patients and reduce protections for medical practitioners who conscientiously object to euthanasia and assisted suicide’.⁶⁵ The group, including Rev. Comensoli, instead urged better access to ‘good palliative care’ and ‘particularly for those in the regions’.⁶⁶

4 | Other jurisdictions

Table 1 gives an overview of how the major amendments in the Bill align with similar provisions in other states and territories’ VAD laws.⁶⁷

⁶⁴ Catholic Archdiocese of Melbourne (2025) ‘[Euthanasia Bill](#)’, Catholic Archdiocese of Melbourne website.

⁶⁵ M. Bychok et al. (2025) *A Pastoral Letter to the Catholics of Victoria on Euthanasia and Assisted Suicide*, media release, 14 October.

⁶⁶ *ibid.*

⁶⁷ VAD was briefly legal in the Northern Territory (NT) from 1995–1997 under the *Rights of the Terminally Ill Act 1995* (NT). In 1997, the Federal government overturned the Act and banned VAD in the NT. In 2022, the federal Act was repealed, allowing the NT government freedom to pass a new VAD law. As of October 2025, no law has been passed, however the NT Legislative Assembly Legal and Constitutional Affairs Committee recommended in September that ‘VAD legislation be adopted in the NT’. See: M. Mannheim (2022) ‘[Federal parliament overturns 25-year-old ban on euthanasia laws in ACT and Northern Territory](#)’, ABC News, 1 December; Legislative Assembly Legal and Constitutional Affairs Committee (2025) *Voluntary Assisted Dying in the Northern Territory*, final report, September, Darwin, the Committee; M. Qvortrup (2025) ‘[Committee formally recommends NT government adopt voluntary assisted dying](#)’, ABC News, 13 October.

Table 1: VAD laws in Australian jurisdictions

Jurisdiction	Relevant Act	Commencement	'Gag clause'	Citizenship requirements	Exemptions to 12-month residency requirements?	Minimum period between first & last request	Prognosis window
Victoria – current	<i>Voluntary Assisted Dying Act 2017</i>	June 2019	Yes	Citizen or permanent resident only	No	9 days	6 months (12 for neuro. conditions)
Victoria – if Bill passes	-	By April 2027	No	Lived in Australia for 3 years at first request	Yes	5 days	12 months
Australian Capital Territory	<i>Voluntary Assisted Dying Act 2024</i>	November 2025	No	None specified	Yes	Not specified	A person is 'approaching the end of their life'
New South Wales	<i>Voluntary Assisted Dying Act 2022</i>	November 2023	No	Lived in Australia for 3 years at first request	Yes	5 days	6 months 12 for neuro. conditions
Queensland	<i>Voluntary Assisted Dying Act 2021</i>	January 2023	No	Lived in Australia for 3 years at first request	Yes	9 days	12 months
South Australia	<i>Voluntary Assisted Dying Act 2021</i>	January 2023	Yes	Citizen or permanent resident only	No	9 days	6 months 12 for neuro. conditions
Tasmania	<i>End-of-Life Choices (Voluntary Assisted Dying) Act 2021</i>	October 2022	No	Lived in Australia for 3 years at first request	No	4 days	6 months 12 for neuro. conditions or exemption
Western Australia	<i>Voluntary Assisted Dying Act 2019</i>	July 2021	No	Citizen or permanent resident only	No	9 days	6 months 12 for neuro. conditions

Reference List

Legislation

Carers Recognition Act 2021

End-of-Life Choices (Voluntary Assisted Dying) Act 2021 (Tas)

Health Services Act 1988

Rights of the Terminally Ill Act 1995 (NT)

Voluntary Assisted Dying Act 2017

Voluntary Assisted Dying Act 2019 (WA)

Voluntary Assisted Dying Act 2021 (QLD)

Voluntary Assisted Dying Act 2021 (SA)

Voluntary Assisted Dying Act 2022 (NSW)

Voluntary Assisted Dying Act 2024 (ACT)

Voluntary Assisted Dying Amendment (Equity and Access) Bill 2024

Voluntary Assisted Dying Amendment (Telehealth and Other Matters) Bill 2021

Voluntary Assisted Dying Amendment Bill 2025

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Catholic Archdiocese of Melbourne (2025) 'Euthanasia Bill', Catholic Archdiocese of Melbourne website. <https://melbournecatholic.org/euthanasia-bill>

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