INQUIRY INTO END OF LIFE CHOICES

STANDING COMMITTEE ON LEGAL AND SOCIAL ISSUES 58TH Parliament

INTRODUCTION

The Voluntary Euthanasia Party (Vic) is a single-issue party, registered in Victoria, to:

Support the provision of medical procedures for the painless, assisted death of patients with a terminal or incurable illness, who are enduring unbearable suffering and have expressed a desire for the procedures within appropriate legal safeguards. We believe that these patients deserve the right to make informed choices about the time and manner of their death through appropriate and humane medical assistance.

To achieve this aim, the Committee of the Voluntary Euthanasia Party (Vic) is authorised to present these views. As a recently formed political party we do not have the legal, ethical or medical knowledge to answer all the points of the Inquiry.

VEP (Vic) will comment and offer suggestions expressed by members, many who are suffering from a terminal illness, or who have family members who are suffering. These members are facing, or will face in the near future, the distinct possibility of a painful and drawn out death, or of watching their loved one die without dignity.

A fair number of our members will have died a painful, long and drawn out death before any new legislation is passed. Some will have reluctantly taken the often messy alternative of suicide, to the distress of their family and friends.

VEP (Vic) will support any changes in legislation that will encourage doctors to follow the wishes of their terminally ill patients and allow them to talk to Medical Attorneys and families without fear of recrimination.

Australia has signed the United Nations Declaration of Human Rights. Article 5 states:

‘No one should be subject to inhuman or degrading treatment.’

Many terminally ill Australians are receiving such treatment in hospitals, nursing homes and under palliative care every day.

SUBMISSION

(1) Assess the practices currently being utilised within the medical community to assist a person to exercise their preferences for the way they want to manage their end of life, including the role of palliative care.
The Medical Treatment Act 1988 (Vic) is the legislation that governs the end of life in Victoria.

In the Preamble, Parliament 'recognises that it is desirable to ensure that dying people receive maximum relief from pain and suffering.'

VEP (Vic) strongly believes that this Act has failed the majority of Victorian people who have attempted to use the Legislation to end their intense suffering in the last months/weeks/days of life for themselves, or through the person who holds their Medical Power of Attorney.

That the legislative content of this Act has not been updated to keep up with changing societal attitudes for 27 years is indicative of the power of Churches and other organised religious groups and certain groups within the medical profession. Changes in societal attitudes over this time can be seen in the acceptance of Gays, Lesbians and Transsexuals and in Gay Marriage.

1. Historical Perspective

Until the 1960’s most people died at home, cared for by family and friends. Now most die in hospital. The process of dying has been turned into an anonymous medical procedure. Advances in medicine and public health measures now mean we will live longer, many to our eighties and nineties. A major outcome of prolonging life is that diseases such as cancer, heart disease, etc., now appear in the older age group, making it imperative that end of life choices are available to those suffering unbearable pain.

There are also many younger people who need to have access, if they request it, to be able to end their life when suffering unbearable pain from an incurable disease.

2. Specific Points

2.1 Advanced Medical Directive

There is confusion over an Advanced Medical Directive. The Medical Treatment Act 1988 (Vic) only recognises the ‘current condition’ and does not recognise the concept of an advance directive. Many thousands of Victorians have signed an Advanced Medical Directive form with the false confidence that their end of life wishes will be respected. The Act does not give the right to refuse palliative care.

2.2 Doctors and The Medical Treatment Act 1988

The Australian Medical Association Federal Assembly, May 2002 supports:

Doctors whose primary intent is to relieve the suffering and distress of terminally ill patients In accordance with the patient’s wishes and interests, even though a foreseen consequence is the hastening of death.
In reality this rarely happens and when it does it is usually done by a caring doctor who recognising the wishes and suffering of their patient, gives the necessary injection without the consultation of colleagues, as the doctor may fear being referred to the police.

Any Act resulting from this Inquiry needs to consider measures to protect doctors from fear of recrimination or disapproval from colleagues and the law when they have followed the correct guidelines, hopefully included in the new legislation resulting from this Inquiry.

2.3 Palliative Care

There appears to be even more confusion if the Medical Treatment Act 1988 applies if one is admitted into a Palliative Care Unit. It appears one cannot refuse hydration or peg feeding, even if the patient has a current Advanced Medical Directive.

The Palliative Care Hospitals caringly supply end of life support to many. However, as most of the hospices of units are tied to a religious denomination, the beliefs of that denomination come before the wishes of the patients and their families.

There are fewer than 400 palliative care beds to service the whole of Victoria. It is usually only those who have private health care or are very comfortably off who can access these beds.

2.4 Public Opinion on End of Life Choices

In 2014 a Fairfax Poll of 1000 Victorians found that 76% supported a change to the law banning assisted suicide and euthanasia.

This attitude holds across religious, political, age and social grouping. Later polls have suggested higher figures of acceptance.

As we live in a secular society, where the Church supposedly has no role in the affairs of the State, VEP (Vic) puts this question to all state Members of Parliament:

As you are elected by your constituents to represent their views, how can you in all conscience, vote against any Bill to legalise assisted suicide and voluntary euthanasia when 76% of your constituents support these changes?

2.5 The Role of Religion in Politics

Many of our politicians have strong religious views. The question must be posed, if given a conscience vote on the subject of this Inquiry, how many would feel free to represent their electorate and not their church or religion?

This question is even more relevant than it was in 2007. A News poll avowed that 74% of Australian Catholics would support a doctor providing a lethal dose to a person with intolerable pain and suffering? The Internet is allowing organisations such as the National Civic Council, the Australian Christian Lobby, the Australian Family Organisation and
Pentecostal Groups to wield growing power at the three levels of government. With membership lists, parish records, school mailing lists and email addresses at their disposal, they can immediately generate thousands of people to email, telephone, or visit an electorate office to push the organisation’s views.

If a party allows a free vote on an issue, these groups can now blackmail individual politicians to toe a certain line or suffer defeat in pre-selection.

VEP (Vic) asks the Inquiry to consider if this is allowable behaviour in a secular society when ideally, a politician is meant to represent their constituents?

Thanks for the opportunity...on behalf of the VEP (Vic)

David Scanlon
(Vice-President)