SUPPORT FOR VOLUNTARY ASSISTED DYING LAW REFORM

This is an update of Information Paper 1[^1], distributed for the debate on the proposed voluntary assisted dying legislation in Tasmania in 2013 and available on the DwDTas website. It adds information from a 2013 EMRS Tasmanian poll, recent interstate ABC Vote Compass results and information on doctors’ support for voluntary assisted dying.

This Paper provides information about the continuing very high level of support across the community for a voluntary assisted dying law in Tasmania, and elsewhere in Australia. There is no other social issue involving law reform - and possibly no other political issue - where the support is as high as it is for a legal last resort option of doctor-provided voluntary assisted dying in limited circumstances. The support is as strong across gender, age groups, people with different party voting intentions and those with and without a religious affiliation.

These facts have been established through well conducted surveys by reputable organisations, including the 2013 EMRS[^2] poll conducted for DwDTas, a number of Newspoll surveys and the ABC. Information from those surveys is included here, with comparisons to other surveys that add weight to their findings. The paper refutes ill-informed and unreasonable claims disparaging community views on this issue.

It is also clear from this information that the vast majority of the Tasmanian population support a ‘last resort’ voluntary assisted dying law of the kind advocated by Dying with Dignity Tasmania (DwDTas) and very similar to the Voluntary Assisted Dying 2013. The sponsors of that Bill, MPs Lara Giddings and Nick McKim, have announced they will move another Bill later in 2015. We expect it to be the same as or very similar to the 2013 Bill.

This paper also includes some information related to the views of doctors on this issue. No-one seems to know what the support for VAD legislation is among Australian doctors. However, based on Australian research and anecdotal evidence, and recent respected surveys of doctors in Canada and the US, we can reasonably assume that at least a significant minority of doctors support legalising VAD and many would be prepared to assist.

It continues to be of concern that there is such a gap between community support and voting by politicians, particularly Liberal Party ones, that in debates on Bills the only views cited are those of the tiny minority opposed to the legislation and that some of them continue to make false and misleading claims even when they have been provided with good quality information. DwDTas has consistently stated that politicians should not support assisted dying legislation simply because of this high level of community support. However, this level of support adds great weight to the need for law reform.
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SUMMARY

- There is a gap between politicians voting and the high level of community support for VAD law reform, even though this high support and the support of many doctors increases the disrespect for the law, covert illegal activity and results in greater risks than a transparent, regulated and monitored system.

- Reputable opinion polling of the public on the issue of voluntary euthanasia/voluntary assisted dying has been conducted over many years. Results show a significant increase in community support for a legal option of doctor-provided voluntary assisted dying and approximately 80%, the vast majority of the Australian population, including Tasmanians, now support it. Support is now at a higher level than for any other similar social issue and other political issues.

- This level of support was confirmed again in the 2013 Enterprise Marketing and Research Services (EMRS) survey of 1,000 Tasmanians conducted for DwDTas, and the Newspoll national survey conducted in late 2012. The question asked in the EMRS and a series of Newspoll surveys is very clearly about a doctor providing voluntary assisted dying through a ‘lethal dose’ so there is no confusion with withdrawal of treatment, refusal of treatment, increased pain relief or terminal sedation.

- A key finding of the 2013 and 2012 surveys is that the vast majority of Tasmanians support a legal option very similar to that in the 2013 Tasmanian Voluntary Assisted Dying Bill - that is, doctor-provided assisted dying, in response to a patient’s request, when that patient is experiencing unrelievable suffering and has absolutely no chance of recovering. Nationally in 2012, 82.5% expressed support. Support for this option was expressed by 80% of Tasmanian respondents in the 2013 EMRS, 78% of Tasmanian respondents in the 2012 Newspoll and nationally, 82.5% of respondents.

- In both polls, support was similarly high across gender and age groups, across religion and party voting intentions. Support was very high amongst Liberal/National voters (EMRS - 74%; Newspoll - 82%) as well as ALP (EMRS - 84%; Newspoll - 84%) and Greens voters (EMRS - 96%; Newspoll - 88%).

- The EMRS poll did not collect information on religious affiliation. In the 2012 Newspoll, support was very high by those who identified as Anglicans (88%), Catholics (77%), no religion (89%) and spiritual belief but no formal religion (90%). The vast majority (81%) who opposed the legal option had a religion. Claims by church groups opposed to voluntary assisted dying that they represent the views of the majority of Christians are mistaken.

- ABC Voter Compass surveys before recent State elections in Victoria, Queensland and NSW found very strong support for voluntary assisted dying law.

- Doctor attitudes: There is much less known about the views of doctors not only in-principle about voluntary assisted dying law reform but also about alternative options for that reform. However, there are good reasons to believe that at least a significant minority support it in-principle and many would be prepared to provide assistance.
WHY IT MATTERS THAT POLITICIANS ARE OUT OF STEP WITH COMMUNITY AND DOCTOR SUPPORT FOR VOLUNTARY ASSISTED DYING LAW REFORM

DwDTas has consistently stated that politicians should not support assisted dying legislation simply because of the high level of community support. However, it continues to be of concern that there is such a gap between community support and voting by politicians, particularly Liberal Party ones. Not a single Liberal Party MP has voted for a voluntary assisted dying Bill in Tasmania (2009 and 2013), NSW (2013) or WA (2010) and only a small number voted for the 2012 SA Bill.

It is also very disturbing that in debates on Bills the only views cited are those of the tiny minority opposed to the legislation and that some MPs continue to make false and misleading claims to disparage soundly-based data on community support as part of their justification for voting against Bills.4

When a large percentage of the community no longer support a particular law, distrust in and disrespect for the law increases, along with covert, illegal behaviour that creates greater risks than in a transparent, regulated monitored system. Professor Margaret Otlowski, Dean of Law at the University of Tasmania has written extensively on this issue.5

ATTITUDES TO ASSISTED DYING LAW REFORM OVER 50 YEARS

Scientific opinion polls6 have been conducted in Australia for decades on the issue of voluntary euthanasia/voluntary assisted dying. This chart shows the results of national polls since 1962.

[Graph showing attitudes to voluntary euthanasia over 50 years]

Research results from Roy Morgan, ASRBP and Newspoll national surveys
RECENT SURVEYS

2013 EMRS Tasmanian poll: An opinion poll was conducted for DwDTas by the respected Tasmanian survey organisation, Enterprise Marketing & Research Services Pty Ltd (EMRS), between 14 and 18 September 2013. The poll was of 1,000 Tasmanians across the State (500 in South and 250 each in North and NW). Respondents to the 2013 poll were asked the same question as for Newspoll surveys:

Thinking now about voluntary euthanasia, if a hopelessly ill patient, experiencing unrelievable suffering, with absolutely no chance of recovering asks for a lethal dose, should a doctor be allowed to provide a lethal dose?

2012 Newspoll national poll: The latest in a series of Newspoll surveys was conducted in 2012 via a national public opinion poll. Residents of all states were included in the sample of 2,521 people. Interviews were conducted by telephone late October through mid-November 2012. Respondents were asked the same question as that used in the 2013 EMRS poll.

OVERALL RESULTS

In common with the national trend, support by Tasmanians for a legal voluntary assisted dying option has increased significantly since the 1998 Parliamentary inquiry into the need for legislation on voluntary euthanasia. In the report of the inquiry (page 10), it is stated that the latest poll on the subject, specifically whether Tasmania should legalise voluntary euthanasia as the Northern Territory had done, 54% of respondents answered yes, 34% of respondents answered no and 10.8% were undecided.7

The EMRS poll found 80% support, 14% opposed and 5% don’t know or unsure.

The 2012 Newspoll found an overwhelming national majority said yes (82.5%), outnumbering the small minority who said no (12.7%) by more than six to one, with 3.8% don’t knows and 1.0% refused. The Tasmanian sample was much smaller than in the EMRS poll and the results were 78% said yes, 17% said no and 5% don’t know or refused to answer.

National support for reform was increased from 2007 Newspoll results (79.7%) and was not significantly different from 2009 results (84.9%).

Important additional information is provided by the 2013 EMRS poll that was not collected in the Newspoll. This relates to the strength of support or opposition. A high 62% of the total agreed strongly with the need to change the law, and 18% somewhat agreed. This compared with only 9% who disagreed strongly and 6% who somewhat disagreed.

The overall results are comparable with other research such as a 2010 Australia Institute survey8 reported in January 2011, which surveyed 1,294 Australians. The question asked was: This question is about voluntary euthanasia. If someone with a terminal illness who is experiencing unrelievable suffering asks to die, should a doctor be allowed to assist them to die?

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75% said yes, just 13% said no, and 12% were undecided. The level of opposition was nearly identical to the 2012 Newspoll survey, although “don’t knows” were slightly more common in the Australia Institute study.

OTHER COMPARISONS

These comparisons are between the 2013 EMRS Tasmanian data and the 2012 Newspoll national data. Separate Tasmanian data was not available on some aspects in the national poll.

- **Gender:** Both polls found almost no differences between men and women in their support or opposition to the proposition.

- **Age:** There were some differences. In the EMRS poll, the highest level of support was 89% among 18 - 24 year old respondents, compared to support between 78% and 85% in all other age groups except over 70s where the support dropped to 68%. In the Newspoll, support for the voluntary assisted dying option was very high and similar in all age groups, but especially high among a key baby boomer group, those in their 50s (88%).

RESULTS BY PARTY VOTING INTENTION

Both polls show support for assisted dying law reform is very high across voters for all the mainstream parties. In the Newspoll the sample size for smaller parties was too small to permit specific statistical numbers to be reported, but support for assisted dying law reform was lower for the small, conservative and religiously-based parties Family First and the Christian Democratic Party.

| PARTY VOTING INTENTION: Doctor can provide a lethal dose |
|-----------------------------|---------------|---------------|---------------|---------------|---------------|---------------|
|                             | 0%            | 20%           | 40%           | 60%           | 80%           | 100%          |
| Total population            | 13%           | 5%            |               |               | 82%           |               |
| ALP                         | 12%           | 5%            |               |               | 84%           |               |
| Lib/Nat                     | 13%           | 5%            |               |               | 82%           |               |
| Greens                      | 7%            | 5%            |               |               | 88%           |               |
| Independent                 | 13%           | 4%            |               |               | 84%           |               |
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This result compares to that in the Tasmanian EMRS poll which found those in favour of changing the law included 74% of Liberal voter respondents, 84% of Labor and 96% of Greens.

This compares to voting in favour of the 2013 Voluntary Assisted Dying Bill by 70% of Labor MPs (7/10) and 100% of Greens (all 5), but 0% of Liberal MPs (0/10).

RESULTS BY RELIGION

The EMRS poll did not collect information on religious affiliation of respondents. One of the most interesting aspects of the Newspoll results, given claims by representatives of religious groups, is the very high level of support for a voluntary assisted dying option by those with a religious affiliation, particularly by those respondents who claimed they were Anglicans (88% or nearly 9 out of 10) and Catholics (77%, more than 3 out of 4).

Opposition to reform was highest amongst smaller Christian groups, but overall, even amongst this group, opposition is a small minority. Owing to limited sample sizes amongst non-Christian-religion respondents, no specific statistics can be reported for these groups.

This chart shows the results by religion.

RELIGION: Doctor can provide a lethal dose

The 2012 results show an increase from the 2007 Newspoll survey in support by Anglicans (82%) and Catholics (74%). The Newspoll results are comparable with the 2010 survey by the Australia Institute that found 65% of Christians agreed that if someone with a terminal illness who is experiencing unrelievable suffering asks to die, a doctor should be allowed to assist them to die.
The findings of this survey also confirm the view that there is a strong correlation between opposition to voluntary assisted dying law reform and religious affiliation. Of the small percentage of respondents to the 2012 survey who opposed the legal option, the vast majority, 81%, had a religion compared to 15% with no religion (that is, nearly seven times more likely to have a religion than not). This was substantially than those who supported the option reform - 56% had a religion - and in the general population where approximately 60% have a religion. This result is similar to that found in the 2007 Newspoll that 84% of those who opposed the legal option were religious, 12% had no religion, and 4% refused the question or were undecided.

CHRISTIAN SUPPORT

The results from these reputable polls add research evidence to personal opinion and reports in the media and letters to the editor where the view is expressed that there is no single “Christian” viewpoint and that many Christians support voluntary assisted dying legislation, eg the Australian group, Christians Supporting Voluntary Euthanasia Choice9. In 2014, the former Archbishop of Canterbury, Lord Carey, announced he had changed his mind and supported ‘right-to-die’ legislation. As he said in his reported comments: The current law fails to address the fundamental question of why we should force terminally ill patients to go on in unbearable pain and with little quality of life. It is the magnitude of their suffering that has been preying on my mind as the discussion over the right to die has intensified. The fact is that I have changed my mind. The old philosophical certainties have collapsed in the face of the reality of needless suffering.10

Church leaders and religious groups opposing VAD law reform routinely fail to acknowledge that there are some people who experience intolerable and unrelievable suffering and maintain the cruel pretence that palliative care can relieve all suffering. They also routinely overestimate the Christian opposition to VAD law. The Uniting Church is a notable exception and in its submission to the 2013 consultation on the proposal11 for voluntary assisted dying legislation acknowledged and expressed respect for the different viewpoints within the Church.

Church leaders who were signatories to what they called “the Salamanca Agreement” claimed in 2013 that they represent 170,000 Tasmanians in opposing social reforms including voluntary assisted dying law reform.12 This claim is certainly mistaken and they ought reasonably to have known this. It is not possible for the group to represent 170,000 without the support of the large majority of Anglicans and Catholics. Yet, as the Newspoll demonstrates, that is not a reasonable assumption to make.

The basis for their claim is stated as “according to latest census data on faith affiliation”. 2011 Census figures show that 128,711 (26%) of Tasmanians are Anglicans and 88,837 (18%) are Catholics but the other signatories represent churches with small numbers. For example, the largest of them in the group are Pentecostal (4,801; 0.9% of Tasmanians); Baptists (8,599; 1.7%); 12,064 (2.4%) are in the category Christian nfd which includes the Apostolic Church,
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Church of God and Australian Christian Churches; and 12,105 (2.4%) are in the ‘Presbyterian and reformed’ category.

Therefore when looked at in the light of the Newspoll data, the group’s assumption is poorly based and unreasonable speculation and a significant exaggeration of the support for their views, at least on the issue of legalisation of voluntary assisted dying.\(^{13}\)

ABC VOTE COMPASS

The ABC now conducts voter opinion surveys on a range of issues in the lead-up to national and State elections. This includes a survey on the proposition: "Terminally ill patients should be able to legally end their own lives with medical assistance". The results found in recent elections show high level support from large numbers of respondents.

They are not scientific polls and the ABC acknowledges that “Online surveys are inherently prone to selection bias” but points out that “statisticians have long been able to correct for this” and “the ABC applies sophisticated weighting techniques to the data to control for the selection effects of the sample, enabling us to make statistical inferences about the Australian population with a high degree of confidence.” Further information including graphs on political voting intention and religious affiliation is available on the ABC website.\(^{14}\)

Results were:
- **Victoria - State election in November 2014**: The ABC’s Vote Compass found 77% of 60,000 respondents supported the proposition.
- **Queensland 2015 State election**: 75.9% of 70,000 respondents agreed with the proposition
- **NSW 2015 State election**: 72% of 34,000 respondents strongly agreed or agreed with the proposition, compared with 16 per cent of respondents who did not. Eleven per cent of people said they were neutral.

COMPARISONS WITH OVERSEAS

Interestingly, Vote Compass returned a 77 per cent "yes" vote during the last Canadian general election. The results of the Australian surveys are consistent with public opinion overseas in showing the vast majority support for doctor-provided VAD.

None of the results are as high as the support in the Netherlands, which is the country with arguably the most experience of voluntary assisted dying and where the population has had the greatest opportunity to judge the effectiveness of safeguards and the safe and responsible implementation of the law by doctors. As reported in the 2013 Tasmanian consultation paper (p 8), the Royal Dutch Medical Association gave evidence to the Commission on Assisted Dying in the UK in 2011 that 92% of the population in the Netherlands support their euthanasia law and 84% of physicians have either performed self-administered assisted dying or doctor-administered assisted dying or are willing to do so.
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A late 2012 European ISO Public study (p6) found overwhelming support for personal end-of-life choice from 71% to 87% across a range of European countries, and a small majority in Greece (52%). A similar majority said they would consider assisted dying if faced with a serious incurable illness (p8).

The 2011 report of the Royal Society of Canada Expert Panel on End-of-Life Decision Making contains a lengthy section on attitudes of Canadians towards voluntary assisted dying (voluntary euthanasia and assisted suicide) from the perspective of the general public, health care professionals and patients, and provides international comparisons that show significant public support, eg in a 2010 Angus Reid survey of a national sample of 1,003 Canadians, a large percentage (67%) of respondents was in favour of legalising voluntary euthanasia.16

DOCTORS AND VOLUNTARY ASSISTED DYING LAW REFORM

In the submission to the consultation on the 2013 detailed proposal for voluntary assisted dying legislation, AMA Tasmania states: “We clearly acknowledge that there are individual medical professionals who support assisted dying and believe the provision of relief of pain and/or suffering through assisted dying is consistent with providing good quality care. ... The majority of doctors, however, do not share this belief and consider the deliberate taking of life by a doctor to be unethical and contrary to the profession’s ethic of care.” The AMA, however, recognises and supports the use by doctors of end-of-life practices to relieve suffering, such as increased pain relief and palliative (terminal) sedation, which are known to also hasten death.

Australian research on this issue is both limited and dated. The debate and decision-making by politicians would be greatly assisted by better research on Australian doctors’ attitudes, even if that was only of AMA members.17 We requested information from AMA Tasmania on the evidence for its claim but received no response. We are aware of doctors in Tasmania and elsewhere who support voluntary assisted dying legislation and a growing number of doctors are joining the national group, Doctors for VE Choice (http://drs4vechoice.org/). Their position was outlined in an article in the Medical Journal of Australia in 2013. As they say: “although the doctor may ‘try to ensure that death occurs with dignity and comfort’, this desirable outcome does not always occur. The code [the AMA Code of Ethics] leaves unstated the ethics of how to manage a patient when there is no treatment for certain forms of distress and suffering, when death is not imminent, or when a disorder is not terminal. It does not deal with all aspects of the reality of suffering and death”. (https://www.mja.com.au/journal/2013/198/4/doctors-support-law-reform-voluntary-euthanasia)

There is an issue of whether there is still a majority of Tasmanian doctors opposed in principle to assisted dying legislation and, if so, whether it is only a slight majority. In-principle views are not the only issue relevant to legislation. The AMA has given no indication and we are not aware of any research about the likely differences in level of support by doctors for the two main methods of administration of the lethal drugs for assisted dying:

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(a) self-administration by the patient of drugs prescribed by the doctor. This is usually by oral ingestion and is the only method legal in Switzerland, Oregon and other US States. It may be called ‘assisted suicide’, ‘physician-assisted suicide’ or ‘physician-assisted dying’ (PAD).

(b) doctor-administration of the drugs, usually by injection. This is legal in the Netherlands, Belgium and Luxembourg, and in the Quebec Province of Canada. This is usually called ‘euthanasia’ or ‘voluntary euthanasia’.

Recent well-conducted overseas surveys provide information on the views of doctors in comparable countries, US and Canada. The Canadian study showed a difference in doctor support for these TWO options.

- **US:** A survey has shown growing support among US doctors for physician-assisted dying. The poll, reported in the Medscape Ethics Report released in December 2014, was a survey of 21,000 US and European doctors. A news report said the sample included 17,000 US doctors and that it found that 54 percent of US doctors surveyed think physician-assisted suicide should be allowed, up from 46 percent in 2010.

- **Canada:** The Canadian Medical Association has been very active on the issue of voluntary assisted dying including a series of public “town hall” meetings and a survey of 5,000 members. Findings of the survey were:
  - 44.8% said they were in favour of legalizing physician-assisted death
  - 36.3% said they felt euthanasia should be legalized
  - 26.7% said they would be likely or very likely to participate if physician-assisted death was legalized.

The CMA has adopted a new policy with 91% support recognising the right of doctors to act according to their own conscience on the issue. This is a stark contrast to the AMA that routinely cites a World Medical Association that assisted dying is unethical and does not acknowledge the right of doctors to their own ethical view.

The Association has acted responsibly to prepare for the likelihood of Canadian VAD legislation. It has started work on issues related to implementation of VAD legislation in recognition that Quebec legislation already exists and national legislation is highly likely following the February 2015 judgement of the Canadian Supreme Court that assisted dying should be legal in some circumstances.

A small NZ survey of GPs was reported on in February 2015 in a letter to the New Zealand Medical Journal. There were 78 responses to 200 letters to GPs in the Waikato District. Three different scenarios were put to doctors with greatest support - 47.3% - and equal opposition for doctor-provided assisted dying law with adequate safeguards for adult competent patients with end-stage terminal disease and irreversible unbearable suffering.
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We recognise that, even if a majority of doctors oppose voluntary assisted dying and will exercise their right under the proposed legislation not to participate, there is anecdotal evidence that there will be enough doctors in Tasmania to provide the service although we foresee difficulties in some rural areas. Overseas experience has shown that very few people choose assisted dying and over time more doctors are prepared to provide the assistance.

CONCLUSION

There is substantial evidence that Tasmanians, like other Australians, support assisted dying law reform and that this is of the kind proposed in the 2013 Voluntary Assisted Dying Bill 2013 that will be the basis for the proposed 2015 Bill. We do not suggest that parliamentarians blindly follow opinion polls but the views of such a large percentage of the community need to be taken into account. When combined with a likely significant minority of doctors who also support VAD legislation, there are increased risks in the ‘status quo’.

ENDNOTES

1 A copy of the original paper can be found at http://dwdtas.org.au/wp-content/uploads/2013/05/DwDTas-Information-Paper-1-Community-Support.pdf
3 The 2012 Newspoll survey was commissioned by YourLastRight.com Limited. This paper includes information is based on a report prepared for YLR.com in December 2012 by the then CEO, Neil Francis, from a very detailed Newspoll report. YLR.com is the national peak body for dying with dignity/voluntary euthanasia organisations including DwDTas.
5 See for example http://amsterdamlawforum.org/article/viewFile/188/379
6 Note that online polls that are often by media organisations are not scientific. This is acknowledged by some, eg the Fairfax disclaimer states: These polls are not scientific and reflect the opinion only of visitors who have chosen to participate. Online readership polls, therefore, do not provide reliable or valid indicators of community opinion or meet the standard required for authoritative input to public policy.
9 http://christiansforve.org.au/
We will not comment about the other social issues because we do not have such detailed information about community opinion on those issues.


We don’t know what percentage of doctors in Tasmania are members of AMA and understand it could be as low as 30% if it is in line with the national picture. (Source: MJA Insight, 28 May 2012)

Whenever the term ‘euthanasia’ is used, great care needs to be taken to check the definition being used because it varies significantly. It may be a specific and limited definition in legislation or an all-encompassing term that includes all end-of-life practices that hasten death. This may include increase in pain relief and terminal sedation which are used to relieve suffering but although they also hasten death are not generally regarded as ‘euthanasia’ except by the group using this term.

See for example, the 2014 AMA submission to the Senate inquiry into the Exposure Draft Medical Treatment (Dying with Dignity) Bill available from the Senate Committee website.


Reported at http://www.3news.co.nz/nznews/poll-voluntary-euthanasia-has-growing-support-2015011813#axzz3RpgFGP4k