

# SPECIAL NEWSLETTER – VOLUNTARY ASSISTED DYING BILL 2013 SEPTEMBER 2013

By now you would be aware that the *VOLUNTARY ASSISTED DYING BILL 2013* was tabled in the Tasmanian House of Assembly on 26 September and is likely to be debated on 15 October. Your help is needed to get it passed – please act now!

Thank you very much to our donors who are making it possible for us to conduct a very active campaign for the legislation. We include more details below. But now is the time when it is critically important for action by supporters of the Bill to make their views known directly to the members of Parliament who are making their decisions whether or not to vote for it and/or to move amendments to the Bill.

**Tasmanian members:** Please contact your members of Parliament in the House of Assembly and tell them you support the legislation. The top priority at present is the House of Assembly only if the Bill passes in the House will it go to the Legislative Council for debate. For contact details check the Parliament House website or contact us for details.

The best form of lobbying is to meet with members but that is not always possible. You can make a call to their offices leaving a message of support for the legislation and a brief indication of why you support it. Messages on websites and Facebook pages, emails and letters are also important, particularly if you can provide additional details of why you support the legislation. It's very important to tell MPs if you intend to make a request for assisted dying in the near future or any experience of a loved one who suffered badly because no legal option of assisted dying was available.

These are the members of the House of Assembly who have indicated they will not support the Bill or who have not yet made their position known publicly and whom we believe are worth lobbying. We would expect that most of the Labor members will support the Bill and remain hopeful that some of the Liberal members will support it or abstain from voting (eg because they have a personal religious conviction but respect the right of others to make decisions according to their own beliefs):

- Denison: Liberals Elise Archer and Matthew Groom; Labor Graeme Sturges
- Franklin Liberals Will Hodgman; Labor David O'Byrne
- Lyons: Liberal Mark Shelton; Labor Michael Polley
- Bass: Liberal Peter Gutwein; Labor Michelle O'Byrne and Brian Wightman
- Braddon: Liberal Adam Brooks and Jeremy Rockcliff; Labor Bryan Green and Brenton Best.

**Other supporters:** If you get this newsletter but do not live in Tasmania, please make your support for the Bill known to the Premier, Lara Giddings, the Leader of the Greens, Nick McKim, and the Leader of the Opposition, Will Hodgman.

**NW Members – Public meeting about the Bill:** Next Thursday, 10 October at 3:30pm probably in Devonport. Check with Paul O'Halloran's office for details - (03) 6429 8500

# WHAT'S IN THE VOLUNTARY ASSISTED DYING BILL 2013?

In your contact with members of Parliament, you may want to make comment about particular parts of the Bill you support, or additional things you would like to see in the Bill.

The Bill includes many safeguards and strict requirements for everyone concerned - the person making an assisted dying request, the doctors and others involved, and the Registrar who will be responsible for very careful monitoring and reporting. The Bill has been developed through a long, time-consuming and thorough process and is based on detailed research on overseas legislation and how to improve on that legislation. It is similar but not the same as any other legislation because it includes much more stringent requirements and a much more detailed process to be followed.

Everyone involved in the process for an assisted dying request is able to make a voluntary choice to be involved.

The Bill is largely the same as proposed in the very detailed consultation proposal earlier this year (see our website or the Premier's and Greens websites for copies). There have been a few changes made as a result of comments received in the consultation process, including the DwDTas submission. For example, our recommendation was accepted for assisted dying to be available to those with incurable, progressive diseases and with unrelievable suffering even though they may not be likely to die in the near future. We argued this on the basis of the Elizabeth Godfrey example but she is by no means the only person who was or will be in this situation.

We know that some members will be disappointed that the Bill does not provide access to assisted dying through an advance care directive. To be eligible for assisted dying, the person making the request must remain competent and able to initiate repeated voluntary and informed requests, including the request for administration of the assisted dying medication. One of the minimum waiting periods has been reduced to 7 days (from 14) but our argument was not accepted for a shorter time in exceptional circumstances. There may also be a longer delay than the 7 days because the third request (the subsequent oral request) cannot be made until the second doctor's report has been received (Clause 21).

# **SUMMARY**

This is only a brief summary of the Bill which is very detailed. You can get a copy of the Bill and detailed information from the Premier's website (<a href="http://www.premier.tas.gov.au/">http://www.premier.tas.gov.au/</a>), or contact us and we'll send you a copy. The numbers in brackets refer to the main relevant section/s of the Bill).

The most important requirements are that the person making the assisted dying request:

- making the requests voluntarily and must be competent, with both these requirements
  confirmed repeatedly throughout the process. (See in particular sections 3, 10, 14, 15 and
  19. We understand that in the form to be completed for the written request the person will
  have to declare that the request is voluntary and the witnesses to the request must state
  that to the best of their knowledge the person is competent and making the request
  voluntarily.)
- must have an incurable and irreversible medical condition that is either:
  - 1. going to result in their death and is causing persistent, unrelievable suffering that the person finds intolerable; or
  - 2. is a progressive medical condition that is causing persistent, unrelievable suffering that the person finds intolerable. (11)

The person making the request must also:

- be an adult Tasmanian resident (For example, on the electoral roll or have a Tasmanian drivers licence) (10);
- be competent which means with the ability to make and communicate considered decisions and not suffering from a disorder to the degree to cause their judgement to be impaired (10 and definition in 3);
- be given detailed information so they can make an informed decision, including on all other reasonable treatment options such as palliative care (12);
- be given information on all relevant treatment options that may adequately and to their satisfaction improve their medical condition or relieve their suffering and agree with the doctor that there are none available (22);
- be offered the chance to rescind their request at every stage of the process;
- initiate three requests to their doctor an initial oral request, a written request which is signed by two witnesses, and a subsequent oral request. There has to be at least 2 days between the first oral request and the written one, and at least 7 days between the written one and the subsequent oral request (although as noted above there may be a longer period because of the requirement for the second doctor's report to also have been received);
- initiate the decision to tell the doctor they are ready for the assisted dying medication that will end their life (;
- decide with their doctor if they will take the assisted dying medication themselves (eg take tablets) or have the doctor administer the medication (eg an injection).

The person's treating doctor (called the primary medical practitioner) must:

- provide detailed information to the person making the request at the time of the oral request and throughout the process;
- refer the person to a psychiatrist or psychologist if in any doubt about the person's competence or that they are making the request voluntarily;
- refer the person to a second doctor (called the secondary medical practitioner) for confirmation of the person's medical condition;

- be satisfied that the person meets all the requirements before writing a prescription for the medication for administration;
- before writing the prescription, discuss with the person all relevant treatment options that
  may adequately and to the person's satisfaction improve the person's medical condition or
  relieve their suffering and agree with the person that there are none available;
- maintain control of the medication and return all medication not used to the pharmacist who dispensed it;
- send records and information to a Registrar throughout the process.

The Registrar is to be appointed to:

- prepare a detailed report to go to Parliament each year;
- review deaths that occur as a result of assisted dying
- investigate, report and make recommendations on any matter to the Minister responsible for the Act
- communicate to other authorities any concerns about compliance or non-compliance with the Act (for example, in relation to any possible offences)
- distribute information and provide education about the Act.

Remember this is only a summary. Get a copy of the Bill to see the exact wording and details.

## WHAT ELSE YOU CAN DO

• Letters to the papers and comments on opinion pieces. Send your letters to all three papers and send us a copy. We know that letters in support of the legislation have not being printed. If you send us a copy, let us know if it is just for information or we can publish it on the website.

The opponents of the legislation particularly the religious ones are out in force and getting their letters published even though they represent a tiny proportion of the community (see the latest opinion poll results below) and even when they contain inexcusable inaccuracies, fear-mongering irrelevancies and bizarrely unreasonable beliefs with no basis in fact or logic. The 6 letters in the Mercury on Saturday 5 October are classic examples. All are opposed to the legislation, although only 15% of the population are and only 9% are strongly opposed as these letter writers are. Three of the letters are from well-known opponents of this and other similar legislation based on their religion which is shared by a tiny percentage of the population. (Signatories to the Salamanca Declaration, the Reverend Campbell Markham, Presbyterian Church (with a number of other religious groups only 2.4% of the Tas population according to the Census), and Eric Lockett, Baptist Churches of Tasmania (1.7% of the Tas population)and Jim Collins, State Officer for Family Values Australia (formerly Festival of Light) (No data but reasonable to assume that less than 1% of the population.)

• Just spread the word - talk to your friends and get them to take action, 'like' us on Facebook and share our 'posts', etc.

#### THANK YOU TO OUR GENEROUS DONORS AND SUPPORTERS

We cannot thank enough those people who have donated so generously to our campaign for the legislation. In the last month alone we have received close \$20,000 from individual donors in Tasmania and from Victoria following a request to DwDV members. Victorian donations are now close to \$16,000 including one individual donation of \$5000. This is a tremendous response and indicates how strongly people support the legislation.

Combined with other individual donations received in the last 2 years and the generous support of nearly \$34,000 from the Clem Jones Group of companies, \$10,000 from Dying with Dignity Victoria and \$5000 from YourLastRight.com, we have been able to run TV ads, radio ads, a large billboard on the Midland Highway between Launceston and Perth, a new opinion poll (see below) and accommodation for Marshall Perron's two visits to add his valuable support (he has paid his own airfares and many of his other costs).

The financial support is only part of the valuable support we are receiving and for which we are extremely grateful. We would like to acknowledge and thank our marketing advisers, Resilience Marketing, especially Gail, for the professionalism and skill they have brought to our campaign, for their work way beyond what we are able to pay them, and their personal and professional advice and support. Thank you to everyone who's 'liked' us on Facebook, shared our posts and left messages. Thank you to our ongoing members and new members who have sent messages of support.

# **LATEST OPINION POLL**

In a poll we commissioned by the respected Tasmanian survey company, EMRS, 1,000 Tasmanian adults across the State were interviewed in the poll, between 14 and 18 September. They were asked: "Thinking now about voluntary euthanasia, if a hopelessly ill patient, experiencing unrelievable suffering, and with absolutely no chance of recovering, asks a doctor to have his or her life ended, should the law be changed to allow the doctor to comply with the patient's wishes?"

The results were as we expected. There is no other issue like this with this level and strength of support. The poll confirmed the 80% support found in all recent polls. What's more important is that we found that ¾ of those in support (62% of all those interviewed) **strongly** agreed there should be a change in the law as proposed in the Bill. A total of 15% disagreed but only 9% of the those surveyed said they strongly disagreed with a change in the law, with only another 6% somewhat disagreeing. 5% were unsure or had no opinion.

It was the first time a poll had shown how strong the support was for the law that is being proposed. We're not surprised by this result because we've been getting an increasingly strong positive response for over a year at our stalls at Salamanca (including the one on 28 September).

You can see a copy of the full EMRS report on our website or contact us for a copy. Care needs to be taken when interpreting results on some aspects but it seems clear from the results that:

**Gender:** There is almost exactly the same total support among men (80%) and women (81%). Women appeared to be more strongly in support with 65% of women strongly agreeing with a change in the legislation, compared to 58% of men.

**Age:** Support was across the age groups but strongest in the 18 - 24 year group (89%) and lowest at 68% in the over 70 group.

**Region:** The support was virtually the same in all three regions.

**Voting preference:** Support was strongest among those who identify as Greens voters (96% agreed, 85% strongly agreeing), followed by Labor (84% agreed, 69% strongly), those unsure of their voting preference (80%, 51% strongly) and Liberal voters (74%, 55% strongly). Opposition was strongest among Liberal voters with 19% opposition (including 13% strongly disagreeing).

We were not able in this poll to get information on the religion of interviewees, but as you know, the 2012 Newspoll survey asking a similar question showed nationally support by 88% of those who identified as Anglicans, 77% of those who identified as Catholics and 82% of those who said they were usually Liberal voters.

## AGM and COMMITTEE FOR 2013 – 2014

# At the AGM on 23 August, the following became office bearers and members of the Committee for this year:

Margaret Sing (President)
Helen Brookfield (Treasurer)
Mike Harris
Hilde Nilsson
Noel Woodrow

Dr Helen Cutts

Bill Godfrey (Vice President)
Keith Anderson (Secretary)
Trish Kershaw
Barbara Porter

Allan Cameron AM was co-opted onto the Committee at the August meeting. Professor Colin Wendell-Smith AO remains our very supportive Patron.

The AGM was followed by an inspiring and interesting public address by Marshall Perron. We will include more details in the next general issue of the newsletter.

**Next meeting:** 9 October – 2pm, Glenorchy Library. All members are welcome to attend and join in the discussion.