

Extracted from The Saturday Paper

The religious lobby against assisted dying

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For those who like to watch reruns of old dramas, there's one happening right now in Victoria. It's playing out in real time and it has a depressingly familiar storyline: how the Christian political lobby, which represents a small minority of the community, sets out to stop what the clear majority wants.

And here's the twist: they will use the processes of representative democracy to get a result that is wholly unrepresentative of the community view.

The issue in this case is voluntary assisted dying. Later this year there will be a conscience vote on legislation to be introduced to the Victorian parliament. The vote might be three months away, but already hardcore religious opponents have mobilised.

Vulnerable seats are being targeted. Government MPs on slim margins are being cajoled with the results of a "survey" purporting to show that Christian voters will punish them at the ballot box should they dare vote for an assisted dying law. Remarkably, the survey has been done anonymously. Even then, it still shows the majority of electors want a law.

A hand-picked medical expert is being flown out from the United States by Right To Life, to tell Victorian parliamentarians the grim news about how voluntary assisted dying laws have been working there. More on the doctor later, but – spoiler alert – he is against abortion and refuses to prescribe contraceptives because they are "against God's plan". He has openly questioned the validity of studies that prove there is no link between abortion and breast cancer, thus flying in the face of the medical and scientific evidence. But hey, who needs facts anyway?

Polls consistently show about 75 per cent of the general community support the proposition that terminally ill patients should have the choice to legally end their own lives with medical assistance. This includes support from 71 per cent of Catholics, according to ABC Vote Compass 2016.

THEY WILL SAY THAT IN ANY CASE IT IS GOOD FOR YOU TO SUFFER BECAUSE IT IS THROUGH SUFFERING THAT YOU WILL GROW AND COME TO KNOW GOD BETTER.

So the political wing of the religious opposition does not in any way represent the views of its constituents. Its position is more in tune with the cardinals of Rome than the citizens of Richmond.

All this and as yet no one has even seen the legislation. The details are still being worked on by a panel of medical experts reporting to the Victorian health minister.

But there are several significant things we do know.

The panel advising on the legislation includes eminent specialists in end-of-life medicine who have now concluded that voluntary assisted dying can and should be available as a patient choice alongside palliative care. The panel is led by the former head of the Australian Medical Association, Professor Brian Owler, who brings an acute understanding of doctors' concerns.

There has been a heroic level of consultation leading to this point, beginning with a 10-month Victorian upper house inquiry. The inquiry heard submissions from more than a thousand individuals and organisations, and held public hearings across the state. Six of the eight members of the cross-party committee recommended that a voluntary assisted dying law be written for Victoria. One of the two dissenting MLCs – neither of whom joined the rest of the committee in their fact-finding mission overseas to see how such laws work – is Liberal Inga Peulich. It is Peulich who is hosting the visit of the right-to-life doctor.

Finally, Health Minister Jill Hennesy has made it clear the law recognises the reality that, for some Victorians who are at the end of their lives, even the best palliative care will not relieve suffering. Every indication from Hennesy is that the law will be among the most conservative in the world. As a guide, under the very conservative laws in the US state of Oregon, fewer than 50 in every 10,000 deaths are due to death with dignity laws. The majority of people who use the law are at least 70 years of age and are in the final stages of cancer. They do not qualify for the law unless they are terminally ill, with six months or less to live. Above all, the patients' request must be voluntary.

The proposed law will not come at the expense of palliative care services – the government has already indicated increased funding – but is seen as complementary to it.

And there is a real and pressing need.

Two years ago, Victorian coroner John Olle gave gut-wrenching evidence to the upper house committee on the tragedy unfolding, quietly, in our neighbourhoods every day. Olle stopped to compose himself several times as he spoke of the elderly terminally ill men and women who take their lives alone and in often violent circumstances. Nail guns. Shotguns. Jumping off cliffs. Hangings.

The real-life dramas continue to play out, in the absence of a law.

A resident of the beach town of Inverloch in Victoria, Jen Barnes, was diagnosed with an aggressive form of brain cancer in May last year. Jen has been a nurse for 40 years so she knows the kind of suffering this can mean: impaired speech, paralysing seizures, being immobilised.

In an act of selfless courage, Jen is using her energies to campaign for a law which, even if it is passed, will likely come too late to help her. Her reason for wanting a law? "I know that at some point in time they're not going to be able to help me." She doesn't want others to be left in the same position.

Jen's husband and their adult children are behind her entirely. So, too, is her oncologist. He puts it this way: "It's about patient autonomy."

If it were a revolution, the street banner would be "power to the patient". The shift from paternalism to partnership in the doctor-patient relationship is an important cultural shift under way in medicine. But it is a distinct threat to those who don't like to surrender power, or choice, to others.

Those opponents who come in the name of God will make the case that palliative care can address all suffering at the end of life, even though the palliative care sector itself says it has no answer for the suffering of 5 per cent or more of patients.

They will say that in any case it is good for you to suffer because it is through suffering that you will grow and come to know God better.

Of course, that argument doesn't go down well in a secular society, so you may well find that the religious objections come in another guise: in the cloak of compassion. What about the elderly? They'll be coerced to die early, they will say. What about the disabled? They'll be shunted aside and done away with. They will make these claims even though they know they are wrong and dishonest. Shamefully, the religious extremists will leave the genuinely vulnerable – Victorians who are dying – to continue to suffer and to take their own lives.

The truth is that a voluntary assisted dying law does provide effective safeguards, specifically to protect the vulnerable. And we know they work because this has already happened in the US, where one in six Americans has access to such laws.

Despite this, Victorian parliamentarians will soon be hearing the views of Professor William Toffler, a doctor from Oregon who has stridently opposed that state's dying with dignity laws since before they were introduced more than 20 years ago. His view remains unchanged, although those around him have moved on and accepted the evidence that the laws operate safely.

Dr Toffler's dire warnings have been ignored in his own backyard. In 2015 the US's most populous state, California, adopted Oregon's version of dying with dignity laws.

Rather than a choice about how we end our days, what is it he wants? In the words of Right to Life chief executive Dr Katrina Haller, the terminally ill should receive sedation, yes, but other than that they should be "allowed to die from whatever fatal condition they have. They die because of their kidney failure, or they die because of their lung failure."

If you are an MP in a marginal seat and being targeted by the fringe Christian lobby, I urge you to make your decision based on facts rather than the false claims and fear peddled by those who seek to enforce suffering as a virtue.

You will do so with the sure knowledge that the vast majority of your electorate will support you. And you will be able to look Jen Barnes in the eye – and others like her who desperately need help – and say: I did the right thing.

And if you find your judgement conflicted by your beliefs, consider California governor Jerry Brown. Brown, who studied to be a Jesuit priest, consulted other priests before signing his state's death with dignity act into law with these words:

“I do not know what I would do if I were dying in prolonged and excruciating pain. I am certain, however, that it would be a comfort to be able to consider the options afforded by this bill. And I wouldn't deny that right to others.”

Acting for the greater good. Isn't that what public service is really about?

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