

VOLUNTARY ASSISTED DYING BILL 2021

Legislative Assembly Second Reading Debate – copied from Hansard 19 November 2021

Mr PAUL TOOLE (Bathurst—Deputy Premier, Minister for Regional Transport and Roads, and Minister for Regional New South Wales) (16:43): I contribute to debate on the Voluntary Assisted Dying Bill 2021. I thank fellow members of this Chamber for their thoughtful and respectful contributions to this debate. These types of conscience debates can be challenging for many members of Parliament as we go beyond the standard party or geographical lines and focus on what is the right and proper thing to do according to our own values. Like others in this place, I have sought viewpoints from people within my electorate. I respect the opinions presented by both sides of the debate. I have read every letter and survey that has been returned to my office.

I have heard from constituents who are suffering from terminal illnesses and those who have watched an elderly relative unable to walk to the bathroom and unable to eat for weeks, until their body shuts down. Another constituent writes of the need to have choice about their circumstances in both life and death, especially when there is no cure and only pain. In regional area many of us are accustomed to treating sick and injured animals, whether they be native, domestic or livestock. Tough decisions have to be made to euthanise animals. We have often heard it said that while we can offer this respite for animals, we take a different approach to human suffering. It is a view that resonates among many. One couple wrote to me saying, "Horses and cows have more rights than humans." The bill we are debating seeks to address some of these concerns.

Many people come to this debate guided by a range of personal circumstances, religious beliefs, the views of loved ones and extended family members, and their own view of what end-of-life decisions should look like. Whatever decision they reach and no matter what path they take to get there, none of those views is wrong. Others raise concerns that older people who feel like a burden to their families could seek to use the laws. Some say it is rushed and others say the time has well and truly arrived. I am the first to acknowledge that no matter how any of us vote on this bill there will be always be people who fundamentally oppose it one way or the other. I respect and acknowledge all those views.

If this debate was simple laws would have been introduced years ago. It is often pointed out that New South Wales is the last remaining State to legislate for voluntary assisted dying. That is hardly a barometer. Every State and Territory has taken a different approach. There is an argument that it might be preferable to have adopted a uniform national law to reduce the risk of doctor-shopping or border-hopping in a bid to utilise laws in another State. We are elected by the people of New South Wales and we have to make a decision in this place based on the interests of New South Wales, irrespective of what any other jurisdiction has done to this point. Victoria passed its voluntary euthanasia laws in 2017, and they took effect from June 2019. In the following 18-month period, whilst almost 700 people sought a first assessment, only 276 people ultimately administered medication.

Advocates of voluntary assisted dying are already saying the Victorian laws still make it too difficult to access programs. As many as 30 per cent of people who legally qualify for and seek access to the medication die before they get it. It should be noted that the Victorian law requires either the coordinating or consulting practitioner to be a specialist. Anyone who has had to make an appointment to see a specialist knows how difficult that can be, especially in regional areas. The bill before us seeks to address that by allowing general practitioners with a minimum of 10 years' experience to take on that role. Two years on there are already calls in Victoria to amend those laws and that raises the question: in seeking to legislate for voluntary assisted dying do we unduly complicate a system that already quietly enables people to slip away at the end? That includes important and informed decisions already made on a daily basis such as turning off ventilators or withdrawing food or drink.

Members in this place have raised the importance of improved funding for palliative care. There is no doubt we can always do more in that area, but equally there will always be circumstances where no matter what level of palliative care is rendered there will be many patients for whom suffering has become too much. That was highlighted by another constituent who notes, "Some people are beyond the help of palliative care." The

question then arises: Is there any pain-free manner of dying? We cannot pretend that every death, even if assisted, will be a painless passing. No law can remove pain or suffering—if only our laws could. Death is painful for so many, whether it be physical, mental or emotional. It will impact on people in so many different ways. The manner of death will not change, but the choice on how to manage it may well change. Another important element of this bill is the requirement for a person to have the requisite capacity to make a decision on voluntary assisted dying. It means that dementia sufferers and those with other degenerative illnesses who lose the ability to make decisions for themselves would be ineligible to access this new law.

The NSW Law Reform Commission proposed, in its 2018 review of the Guardianship Act, proposed a new Assisted Decision-Making Act that would provide a formal framework for both supported decision-making and, as a last resort, substitute decision-making. There is a strong argument that as the population lives longer and ages that many more people would benefit from this type of legislation. But ultimately this debate and this vote comes down to the legislation before us. As legislators, we take our responsibility of lawmaking seriously. The bill proposes a total of 17 steps for a person to be eligible for voluntary assisted dying in New South Wales. I have heard opponents argue the fact that there are so many boxes to tick only highlights the inherent dangers. But that is countered by the relatively small number of people in Victoria who have accessed the laws there. Indeed, the proponents of this bill acknowledge it intentionally has a narrow scope.

As legislators we must focus on the proposed bill and that is different from the generic concept of voluntary assisted dying. There is broad support for the concept. What is crucial here is how we go about achieving it because this will be the law in New South Wales. We need to avoid the Victorian situation where two years down the track there are already calls for amendments to the law from supporters of voluntary assisted dying. Even as I stand in this House today, the bill before us is now already subject to more than 50 amendments. There are many factors to consider that are being presented by the speakers in this House when voting on this important bill. I thank the House for its time.