

Legislative Council

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CONSENT TO MEDICAL TREATMENT AND PALLIATIVE CARE (END OF LIFE ARRANGEMENTS) AMENDMENT BILL

The Hon. A. BRESSINGTON (20:40):

I also rise to speak to the bill put before us by the Hon. Mark Parnell to allow voluntary euthanasia to be available via palliative care in South Australia. First, I want to say that I believe that the Hon. Mark Parnell has put together a bill in good faith and I believe that he has done it for the reasons that he says. However, at the outset let me say that I believe that individuals in the final stage of a terminal illness should have the right to say, 'I have suffered enough.' I do not believe that this decision should be left up to the treating physician and other family members, as occurs now, with what is known as double effect, which technically allows a physician to administer pain relief in doses that will see the person who is ill eventually die as a result of trying to achieve pain relief. I have difficulty accepting that double effect is the ideal situation.

However, I have difficulty in coming to terms with the notion that we are all terminally ill. I must say it was this statement that caused me to rethink long and hard about how this bill could and possibly would be amended in the future. This is not a moral issue for me, nor is it one of religious belief. It is an issue of responsible legislation which I am paid by the people of this state to undertake. Those who are pro voluntary euthanasia deny such a thing as a slippery slope but I have seen for myself how that slippery slope works over years and years of persistence. The effort that goes into changing people's perception often causes confusion. First, it is my observation that this occurs by creating a problem through recruiting individuals to tell of their hardship and heartbreak so that the wider community is struck with a sense of compassion. I do not believe that compassion is why we should put together legislation in this place.

Then, of course, we see government's inability or unwillingness to address the core issue and, in this case, it is effective, accessible and affordable palliative care for the sick and dying. Then we allow the debate to rage for years, if not decades, allowing time for the message to sink in and for people to be literally worn down by the stories and the dysfunction of the system. I am also not afraid to say that, during that recruitment period of years and even decades, we are fed all sorts of statistics to ensure that, if you are opposed to the idea, you will feel as though you are in the minority and, of course, if we speak out publicly we are led to believe that we are in need of serious medication or that we are heartless fiends.

One such example is the imbalance of information. I agree with the Hon. Michelle Lensink, I might say, that we do need an absolutely independent review of all the literature because both sides of this argument (and every other argument) will come up with their own stats and research to prove their point of view. We are seeing that happen more and more. Science is being discredited in one way or another and none of us know who to believe anymore. I think that is a sad case.

Over 6,300 people participated in the Adelaidenow poll and 25.1 per cent said yes to the question 'Should euthanasia be legalised in South Australia?' That was conducted last night and today and I think these figures were obtained at 10 o'clock last night—74.17 per cent said no, and 0.73 per cent remained unsure. Then there was a poll which said that 87 per cent of

Australians are in favour of euthanasia. We all know, as the Hon. Robert Brokenshire pointed out, that it is actually how we ask the question that will probably determine the answer.

I do not believe that these sorts of polls are what we should be basing our decisions on. If we are going to get down to the nitty-gritty of it, I believe, let's have the absolute poll. Let's have a referendum on this and make sure that, if we are going to vote for or against euthanasia, it is done through the will of the people. We know that, before referendums, both sides will be educating people who are prepared to listen but, at the end of the day, this voluntary euthanasia bill should be the decision of the people. I do not believe that any of us in here are qualified, or unbiased or uninfluenced enough to be able to make a decision that is going to affect every person in this state, one way or another.

The decision should be up to the people who are going to actually be accessing it or are going to be affected by it. There is a rising concern out there in the ability of the major parties to protect the best interests of the people, and I say that concern is probably well deserved. Experience shows that the best indicator for the future is the past and present. Again, I stress that I see little that convinces me that this, or any other, government is grown-up enough, or fit and proper enough, to monitor, oversee or report on what the true effects of voluntary euthanasia may be in five, 10 or 15 years' time.

We all witness every day that apologising or rectifying mistakes is not a strong point of the major parties, let alone acknowledging that a mistake has ever even occurred. It seems it is so much easier to create a story of spin to cover up any misdeeds or to persecute anyone or any person who may blow the whistle on the fact that all is not well. If there is anyone who does not believe that this occurs daily in this state, then I invite you to come into my office for a month and listen to the story upon story where public policy and legislation are being abused and our average citizens have absolutely no recourse.

I will just refresh members' memory on issues that remain unresolved and adversely affect the people of this state: drug addiction, mental health, child abuse (past and present), WorkCover, the child protection system, disabilities, the Housing Trust, victims of abuse in state care and abortion. I have got to say that the issue that absolutely was my tipping point was forced water fluoridation. I say that, not because I believe that I should be believed about the science that I have read. What has absolutely gobsmeared me is the reluctance to look at the science and then do our own studies and find out for ourselves.

If that is the case with this and with all of those other issues—child abuse, WorkCover, all of those that I mentioned—I guarantee you that most members in this place have a solution to those problems. We know what the core issue is of each one of those problems. We can put up pieces of legislation time and time again and have them rejected because it is going to cost money. What do you think is going to happen with VE down the line? If we cannot solve these problems now, and we are allowing them to roll on for decade after decade, with the same inquiries going now that were going 40 years ago, how many lives with voluntary euthanasia would be lost in the process of trying to turn that around?

That is the guts of my problem with this—no faith. I have no faith at all in governments' ability to review honestly and fix problems. Then of course, we had the breaking of the EBAs with the Public Service, which is sort of off-track again, but this government cannot keep its word. It cannot keep its promises. I stress that trust and confidence in any authority must be earned, and that is done by governments keeping their word and doing their best to solve problems for their constituents and by governments, and every member of parliament, serving the people who pay us to do so.

I believe that this issue should go to a referendum and I do not believe we are going to resolve it in any other way. I also stress that my comments should not be seen to reflect poorly on the Hon. Mark Parnell. As I said in the beginning, I believe that he has tried to put the best into this bill that could be done. He has tried to be careful but I do not think we can be careful enough. Right here and right now, I can only base my judgement on what I have seen over the past 4½ years and consider how this legislation would play out in the future. In this case, a slippery slope is a deadly slope.

Let us go back very quickly to the issue of abortion where we were told, when that legislation came in, that it would be for medical purposes only—if a mother is at risk of dying giving birth to or carrying a child—and a few minor exclusions. I have heard from a number of young women who have literally been forced to have abortions: they have been offered no other option. We are told that that is a pro-choice issue, just as we are being told that euthanasia is a pro-choice issue, but these young girls did not feel that they had a choice.

I met with a woman who had an ultrasound on her unborn baby and the doctor told her that there was a possibility that the baby could be Down syndrome; before the end of that consultation that doctor had her booked in to go over the border to Victoria to have an abortion, because she had to be there by the following Thursday. She had to go home and break the news to her husband that the baby could possibly be Down syndrome. He said, 'I don't want a disabled kid; yep, have an abortion,' but she insisted—insisted—on an amniocentesis test, and that test came back negative. It was a fine, healthy baby.

These things are happening here every day; we were promised with abortion that they would not happen, and now we are talking about a debate on decriminalising abortion, which will involve what has happened in Victoria—full-term abortions. I do not care what anyone says and I do not care if it is just not hip to be pro-life, but we cannot keep a handle on this. There are slippery slopes; they do exist and they are allowed to exist, and people's perceptions are allowed to be changed until they are confused between what is right and what is wrong. I believe that that would happen with voluntary euthanasia no matter how many safeguards we have.

There being a disturbance in the Strangers' Gallery:

The PRESIDENT: Order! The gallery will not applaud any speech or I will have you all put out on the street.