

250814 Spud submission to parliamentary inquiry into VAD

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Answers to Key Questions:

1 Do you support making VAD legal in the NT?

YES 100%. VAD legislation should be legislated as a matter of urgency in the NT. The NT has specific legislation from 30 years ago when we were the only jurisdiction to have legalised euthanasia. This legislation could easily be re-enacted & updated to be meaningful in 2025. This could be adapted to incorporate legislation that other jurisdictions have in their legislation which would enhance & solidify the NT legislation.

2 What eligibility criteria should a person need to meet before they can access VAD?

The eligibility criteria should be CASE specific. Each case should be assessed independently & then eligibility to access VAD should be enabled.

We know of personal circumstances where a young child (2-3 years old) had a terminal illness & her end of life was horrific for all involved. The parents exhausted all possible scenarios to save their little girl with available medical treatments all to no avail. They should have then had the right to access VAD for their child to give a peaceful & pain free end to her life.

We also know of a friend who has a degenerative disease that has drastically reduced her quality of life & has an unknown future due to pain & mobility & all other sorts of complications. This person should have the right to access VAD at a time of her choosing.

Eligibility should NOT have restrictions such as age, terminality of illness etc on it.

3 How could the NT make sure that an eligible person can access VAD in a safe and effective way, including people living in remote areas, and Aboriginal and Torres Strait Islander people?

The NT should develop a purpose specific FIRST contact application process for a person wishing to access VAD. This contact point would be professionally trained in all the processes involved on how to start the VAD journey.

I think this could be a facility/section such as what we have for cancer patients. This would be staffed by professionals who are trained in all aspects of VAD & should include a range of professionals from doctors, nurses, psychiatrist etc

There should be a process of professional assessment when a person makes application to access VAD. The process would walk the applicant through all phases from initial application, helping to sort out things like wills etc, where the person has decided to end their life (ie at home or a specific facility) all the way up the point of going out peacefully. This process then obviously considers remote applications, cultural heritage, religious beliefs etc

4. How could the NT monitor the process to ensure VAD is delivered safely and effectively?

There is already recording/data reporting etc happening in other jurisdictions & as in point 3 there would be allocated steps in the process that need to be monitored by the professional team members to ensure that all processes have been completed & adhered with.

Answers to other points in the Consultation Paper:

- **Eligibility criteria**, including minimum age (18 years), mental competence to consent, illness causing severe pain and suffering, prognosis (with no time limit), and no available treatment to effect a cure.

As stated earlier there should be an application process that assesses the individual case without any limiting criteria.

I think we should all be able to write up an “end of life strategy” similar to how we write a **will** well prior to death. This end-of-life strategy would be legally binding & endorsed & would be enacted when required. This would then eliminate argument due to loss of mental capacity such as dementia, alzheimers or similar diseases. Another example would be events such as vehicle accidents where the end-of-life strategy would be enacted. I personally do not want to be lying in bed totally incapacitated & being kept alive by a machine – just let me go peacefully by my wish to use VAD.

- **How can we ensure that cross-border residents are treated fairly under NT VAD laws?**

There should be available an option for residency exemption. An application could be made for an exemption – for example if a long time NT resident has relocated to another state but then decides to return to access VAD.

Mental illness

In all other Australian jurisdictions, VAD is not available for people who are solely diagnosed with a mental illness. This is on the basis that mental illness is not regarded clinically as a terminal condition.¹ However, a person with mental illness is eligible for VAD if they meet all other criteria on the basis that they should not be discriminated against or denied access.² It is noted that, previously in the NT, the ROTI Act required a psychiatrist to assess that a person is not suffering from treatable depression prior to granting access to VAD.³ No other Australian jurisdictions have this requirement

This topic needs to be assessed with more detail & consultation & be included in legislation when the legislation is reviewed in a couple of years. There is an ever increasing case for PTSD type illnesses to be included in application for VAD. There is so much suicide related death attributed to PTSD that this needs to be forefront of further discussion.

- Will reviewing the VAD legislation on its third anniversary and then every 5 years provide sufficient oversight of the operation of the legislation?

First review at 3 years, second review at 3 years further & then a review every 5 years after that

Conclusion

VAD should be legalised in the NT asap. VAD is a CHOICE & every NT resident should have this choice the same as the rest of Australia (& now the world).

To the objectors of VAD. You are not being forced to use VAD. If you don't agree for whatever reason then I support your right to not access VAD, but I personally wish to access VAD & I should have my own right to choose this process.

There were many other questions in the consultation paper (eg self administration versus practitioner administration) that were requiring comment but as I have alluded

¹ *Voluntary Assisted Dying Final Report*, above n 4, p. 59.

² Queensland Law Reform Commission, *A legal framework for voluntary assisted dying* (2021), p. 93.

³ *Rights of the Terminally Ill Act 1995* (NT), s 7(c)(ii).

to above, being able to have a legally binding document for “end of life strategy” similar to having a WILL would all be addressed in that document.

It is noted in the Expert Panel Report from 2024 that **some countries (such as Belgium, the Netherlands and Canada) have advanced directives which allow people to consent to VAD in advance for a future time when they no longer have decision-making capacity, such as after developing dementia or another cognitive condition.**

This should be fully supported & integrated into the legislation at some point, if not initially, & this would consolidate the assessing eligibility for a person wishing to access VAD

The NT has the unique opportunity to have the most thorough & thought-out legislation because there has already been extensive consultation & gathering of information to support a strong legalisation of VAD for NT residents.

Please enact this legislation ASAP

Thx

Spud Thomas