



**National Council of
Women of New Zealand**

Te Kaunihera
Wahine O Aotearoa

National Office
Level 4 Central House
26 Brandon Street
PO Box 25-498
Wellington 6146
(04)473 76 23
office@ncwnz.org.nz
www.ncwnz.org.nz

19 February 2018

S18.03

Submission to the Justice Committee on the End of Life Choice Bill

Introduction

- 0.1. The National Council of Women of New Zealand, Te Kaunihera Wahine o Aotearoa (NCWNZ) is an umbrella group representing 245 organisations affiliated at either national level or to one of our 19 branches. In addition, about 350 people are individual members. Collectively our reach is over 350,000 with many of our membership organisations representing all genders. NCWNZ's vision is a gender equal New Zealand and research shows we will be better off socially and economically if we are gender equal. Through research, discussion and action, NCWNZ in partnership with others, seeks to realise its vision of gender equality because it is a basic human right.
- 0.2. This submission has been prepared by the Parliamentary Watch Committee based on the submission to the Petition of Hon Maryan Street¹, which included consultation with the membership of NCWNZ. Responses were received from branches across the country as well as from affiliated organisations – mostly women's religious groups – and their branches.
- 0.3. The conclusion to that submission stated:
 - 5.1. What many NCWNZ respondents wished for themselves and the population of New Zealand, is that they could each have the option of choosing an easy, well managed death, overseen by a compassionate doctor who is able to act legally to end their suffering and release them to death. Having the option to choose does not mean that a decision will be made to choose medically assisted dying.
 - 5.2. A number of respondents identified that medically assisted dying should only be allowed when survival is estimated at six months or less.
 - 5.3. Other respondents valued the sanctity of life and that all people have a fundamental right to life.
 - 5.4. Some respondents wanted a better understanding of the drivers to legalise medically assisted dying. Is it a societal reluctance to care for the aged and frail, the expense of

¹ Submission to the Health Select Committee on the Petition of Hon Maryan Street and 8,974 others. [NCWNZ submission S16.04](#). 1 February 2016

the care and the medicines, the non-availability of hospital / palliative care beds and staff?

5.5. There was also a strong recommendation that there should be more funding for palliative care and for palliative training

0.4. The feedback collected for that submission has been associated with specific clauses in this Bill.

1. Part 1

Preliminary provisions

Clause 4 Meaning of person who is eligible for assisted dying

1.1. NCWNZ would agree with the definition of person being aged 18 or over, being a New Zealand citizen or permanent resident and suffering a terminal illness that is likely to end their life within a short period of time such as the six months stated. Most importantly as 4(f) states, the person must have the ability to understand the nature and consequences of assisted dying.

2. Part 2

2.1. Throughout the process (all of Part 2) it is important that accurate and appropriate records are kept. It is also essential that the person is reminded that they may change their mind at any point.

Clause 6 Conscientious objection

Clause 7 Effect of conscientious objection

2.2. Clauses 6 and 7 fit with the responses from NCWNZ members, that assisted dying must be overseen by a compassionate doctor who is able to act legally to end their suffering and release them to death.

Clause 8 Request made

2.3. The process outlined in Clause 8 fits with the thoughts of NCWNZ members, ie the person wishing to have the option of medically assisted dying must tell the attending medical practitioner of their wish. The practitioner then outlines the prognosis for the terminal illness or medical condition, the irreversible nature of assisted dying and the anticipated impacts of assisted dying. It is important that cl. 8(h) is enforced – that the person can express their wish free from pressure from any other person.

Clause 9 Request confirmed

2.4. The person with a terminal illness should be of sound mind and be able to sign consent for ending their life when they are still well enough.

Clause 10 First opinion reached**Clause 11 Second opinion reached****Clause 12 Third opinion reached, if necessary**

- 2.5. The process preferred by NCWNZ members is that a minimum of two doctors should make the decision based on medical grounds. It is important to assess that the person is of sufficient mental capability to participate in the process.
- 2.6. The process does not however take into account where a person might have a living will and then suffer an incapacitating illness or an accident. Such a legal document must have been signed before the event occurred.

3. Part 3 Accountability**Clause 20 Review committee**

- 3.1. NCWNZ supports the appointment of a Review Committee and in particular that it includes a medical ethicist (cl 20(1)(a)).
- 3.2. The expectation is that such a committee would have the authority to review each application on its merits and ensure that the appropriate protocols were followed.

4. Part 4 Related matters**Clause 24 Other rights and duties not affected**

- 4.1. It is pleasing to see this clause included in the Bill.
- 4.2. During their life individuals have the option of undergoing treatments to prolong life and also the legal right to refuse treatments². People may request a Do Not Resuscitate order. When we decide for medical reasons to withdraw or withhold certain treatments we allow the patient to continue their decline.

5. Missing from this Bill

- 5.1. Missing from this Bill is regulation concerning the validity of life insurance policies in the event of assisted death. Nor is there any indication of who should pay for the procedure, or whether assisted dying should be a procedure covered under health insurance policies. This is covered in the Oregon legislation³.

² New Zealand Bill of Rights Act 1990 s.11 Right to refuse to undergo medical treatment

³ Oregon (US). 1997. Death with Dignity Act. https://www.oregonlegislature.gov/bills_laws/ors/ors127.html. Accessed 8 Feb 2018.

5.2. Nor does the Bill clearly state that participation under the Act is not suicide. This is also covered in the Oregon legislation⁴.

6. Conclusion

6.1. NCWNZ members across New Zealand were canvassed for their opinions on medically assisted dying so that NCWNZ could prepare a response to the Maryan Street Petition in 2016. The End of Life Care Bill reflects the essence of the Petition and is supported, with some reservations.



Gill Greer
Chief Executive



Beryl Anderson
Convenor, Parliamentary Watch Committee

⁴ Ibid.