



**Summary of LVNZ responses to public statements made by the End of Life Choice Bill's sponsor**

	David Seymour's claims	LVNZ Responses
1.	The End of Life Choice Bill's safeguard against coercion in section 8 involves a process of detecting coercion that is overseen by two doctors.	Wrong (sections 8 and 11 of the Bill).
2.	"If you're so depressed that you feel that your life is hopeless you're not going to meet the criteria of being somebody capable of making the decision"	Wrong (section 4(f) of the Bill).
3.	"Well, if you accept that this Bill is safe, and that is the position of the Supreme Court of Canada..."	Wrong. The Supreme Court of Canada has not analysed or commented on the End of Life Choice Bill.
4.	"The trial judge in [the Canadian case of] <i>Carter v. Canada</i> found that 'a properly administered regulatory regime is capable of protecting the vulnerable from abuse or error.' She pointed to expert evidence from Oregon and the Netherlands which showed that the 'predicted abuse and disproportionate impact on vulnerable populations has not materialised.'"	<p>Equal or more superior courts in other jurisdictions have made findings to the contrary or have specifically rejected the conclusions of the trial judge in <i>Carter v. Canada</i>, including:</p> <ul style="list-style-type: none"> <li>• The Courts of the UK including the Supreme Court</li> <li>• The Courts of Ireland including the Supreme Court</li> <li>• The European Court of Human Rights.</li> </ul> <p>Legislatures which have rejected assisted dying laws after analysing assisted dying regimes and observing that safeguards are not adequate in protecting vulnerable citizens against the risk of abuse include:</p> <ul style="list-style-type: none"> <li>• The United Kingdom Parliament (2015)</li> <li>• The Scottish Parliament (2015, 2010)</li> <li>• The National Assembly for Wales (2014)</li> <li>• The Guernsey Parliament (2018)</li> <li>• The Isle of Man Parliament (2015)</li> <li>• The Portugese Parliament (2018)</li> <li>• Parliaments of Australian states and territories</li> <li>• Legislatures of 39 states of the United States.</li> </ul>
5.	"[N]o English-speaking country that has an assisted dying law has considered" extending euthanasia to children.	Wrong. Canada is doing just that.
6.	"I'd be very surprised if New Zealand was ever to consider [extending euthanasia to children], and it's certainly not being considered in this law"	Wrong. The former Attorney-General's section 7 Report to Parliament has ruled the End of Life Choice Bill discriminates against eligible 16 or 17 year olds who may also wish to be euthanized or assisted to commit suicide. He has recommended that in order to "protect" the right to be free from discrimination on the basis of age, the Bill should be amended either by reducing the age limit to 16 years or "by removing the age criterion altogether and relying on the other criteria and safeguards to ensure competence".
7.	"You've now got 150 million people living in jurisdictions where assisted dying is legal..."	That leaves the other 7.55 billion people around the world who live in jurisdictions where assisted dying is not legal.

8.	"There is no evidence after extensive research in all those countries which has found that coercion is an issue"	Wrong. There is a considerable body of evidence that coercion and abuses have occurred in the minority of jurisdictions that have legalised assisted dying.
9.	"The fact that some Canadian says [this kind of legislation is ... going to be a gateway or a slippery slope to people like minors or people with disabilities or who have a mental illness] doesn't mean that Canada's going to do it."	Wrong: <ul style="list-style-type: none"> <li>• In 2016 the Canadian government appointed the Council of Canadian Academies to specifically review whether minors and mentally ill Canadians should be able to access euthanasia and assisted suicide and the Council's report is now under government consideration.</li> <li>• Earlier this month the UN Special Rapporteur on the Rights of Persons with Disabilities has just recorded her "extreme concern" over Canada's euthanasia law, confirming she has "received worrisome claims about persons with disabilities in institutions being pressured to seek medical assistance in dying, and practitioners not formally reporting cases involving persons with disabilities".</li> <li>• Court challenges are already underway in Canada to expand the euthanasia law's criteria further.</li> </ul>
10.	"[I]t's not people who are vulnerable, who don't have access to health insurance, palliative care, and so on – it's overwhelmingly people who actually have greater access to all of those things, people who are more used to making choices and being assertive throughout their life.	Wrong: <ul style="list-style-type: none"> <li>• In May 2018 a letter from the Quebec College of Physicians warned Canada's Health Minister that a lack of palliative care services in parts of Quebec could be forcing patients to choose euthanasia or assisted suicide as a way to end their lives. It told the Minister: "Palliative care cannot be limited to access to medical aid in dying".</li> <li>• In Oregon, between 63.3% and 66.9% of all assisted suicides during the past five years were of people on low incomes who were accessing state health care insurance through the Oregon Health Plan. The same Oregon Health Plan has denied coverage to terminally-ill citizens for their chemotherapy or drug treatments, instead offering to pay for the drugs enabling them to commit suicide under the Death with Dignity Act.</li> </ul>
11.	"The New Zealand Medical Association's done a survey, almost 40 per cent of doctors are in favour... That's what the data is"	The actual data from recent polls is that: <ul style="list-style-type: none"> <li>• Between <b>52 - 58%</b> of New Zealand's general practitioners "totally" or "strongly" oppose euthanasia or assisted suicide;</li> <li>• <b>80.1%</b> of our palliative care specialists and palliative general practitioners totally oppose euthanasia or assisted suicide and only <b>2%</b> of them would be willing to participate in these practices.</li> </ul>
12.	"The bill is incredibly clear: nobody has to do anything they don't want to do. If you're a doctor, and you want nothing to do with this, then you can conscientiously object."	Wrong on both counts. The Bill's mandatory, rigid processes override any conscientious, ethical or clinical objections doctors may have. It also requires all doctors with conscientious objections to facilitate euthanasia or assisted suicide regardless of their objections.
13.	"In this Sponsor's Report I make a series of recommendations for how the Bill might be improved."	The Sponsor's Report's attempts to improve the Bill fail to repair the vast majority of the serious deficiencies that have been highlighted by Lawyers for Vulnerable New Zealanders (see "35 Fatal Flaws" at <a href="http://lvnz.org">lvnz.org</a> ). In fact the Report creates altogether new problems, such as a proposed change to s 179 Crimes Act that will grant the cover of criminal immunity to the very abusers who are likely to try and coerce or pressure their family members into requesting euthanasia or assisted suicide.