

Australian Capital Territory (2025-)

From 1997 when the Commonwealth's *Euthanasia Laws Act 1997* took effect to December 2022 when the *Restoring Territory Rights Act 2022* was passed by the Commonwealth Parliament the Legislative Assembly of the Australian Capital Territory (ACT) had "no power to make laws permitting or having the effect of permitting (whether subject to conditions or not) the form of intentional killing of another called euthanasia (which includes mercy killing) or the assisting of a person to terminate his or her life".

Euthanasia and assistance to suicide became legal in the ACT from 3 November 2025 when the *Voluntary Assisted Dying Act 2024* came into effect.

Eligibility criteria

Unlike all other Australian jurisdictions, there is no time period set under the Act for which death must be considered likely in order to access euthanasia or assistance to suicide. The relevant criterion (Section 11) reads:

An individual meets the eligibility requirements if ... they have been diagnosed with a condition that, either on its own or in combination with 1 or more other diagnosed conditions, is advanced, progressive and expected to cause death.

'Advanced' is further defined (Section 11 (4)):

an individual's relevant conditions are advanced if— (a) the individual's functioning and quality of life— (i) have declined or are declining; and (ii) are not expected to improve; and (b) any treatments for the conditions that are reasonably available and acceptable to the individual have lost any beneficial impact; and (c) the individual is approaching the end of their life.

This is a deliberately very fuzzy definition: "have declined or are declining" and "not expected to improve" would apply to anyone ageing. Treatments must be "acceptable to the individual" – with no objective test. Every individual is "approaching" the end of their life – that is none of us are getting further away from it.

It remains to be seen how this works out in practice but it seems likely that this will result in a rate of euthanasia higher than other Australian jurisdictions where the six or even twelve months prognosis act as some kind of limit.

Euthanasia or assistance to suicide

The Act allows a person to freely choose between having a "health practitioner" directly administer a substance in sufficient dose to cause the death of the individual or to prescribe a substance in sufficient dose to cause the death of the individual for the person to self-administer.

In jurisdictions like Queensland and Western Australia where this applies the rate of deaths under the relevant Act is more than three times that in Victoria where self-administration is the default and "practitioner administration" may only be used when the person is unable to self-administer the lethal substance.

The reason for the difference is because a significant proportion of those prescribed a lethal substance for self-administration choose never to actually use it to end their life whereas very few people cancel an appointment with a practitioner scheduled to administer the lethal substance.

Doctors and nurse practitioners may act as coordinating or consulting practitioners as well as administering practitioners. Registered nurses can also administer the lethal substance.