

## **Inquiry: Inquiry into End of Life Choices**

I SUPPORT increased resources for palliative care and OPPOSE the legalisation of euthanasia and assisted suicide for the following reasons:-

1. The lack of safeguards in 'euthanasia legislation'.
2. Euthanasia would not only be for people who are "terminally ill".
3. Euthanasia can become a means of health care cost containment.
4. Euthanasia will become non-voluntary.
5. Legalizing euthanasia and assisted suicide leads to even more deaths and suicides.
6. Euthanasia is a rejection of the importance and value of human life.

### **1. The lack of safeguards in 'euthanasia legislation'.**

Elderly people in particular are vulnerable to pressure from society that they are a 'burden' as well as from family members.

### **2. Euthanasia would not only be for people who are "terminally ill"**

There are two problems here -- the definition of "terminal" and the changes that have already taken place to extend euthanasia to those who aren't "terminally ill." There are many definitions for the word "terminal." For example, when he spoke to the National Press Club in 1992, Jack Kevorkian said that a terminal illness was "any disease that curtails life even for a day." The co-founder of the Hemlock Society often refers to "terminal old age." Some laws define "terminal" condition as one from which death will occur in a "relatively short time." Others state that "terminal" means that death is expected within six months or less.

Even where a specific life expectancy (like six months) is referred to, medical experts acknowledge that it is virtually impossible to predict the life expectancy of a particular patient. Some people diagnosed as terminally ill don't die for years, if at all, from the diagnosed condition. Increasingly, however, euthanasia activists have dropped references to terminal illness, replacing them with such phrases as "hopelessly ill," "desperately ill," "incurably ill," "hopeless condition," and "meaningless life."

An article in the journal, *Suicide and Life-Threatening Behavior*, described assisted suicide guidelines for those with a hopeless condition. "Hopeless condition" was defined to include terminal illness, severe physical or psychological pain, physical or mental debilitation or deterioration, or a quality of life that is no longer acceptable to the individual. That means just about anybody who has a suicidal impulse.

### **3. Euthanasia can become a means of health care cost containment**

Perhaps one of the most important developments in recent years is the increasing emphasis placed on health care providers to contain costs. In such a climate, euthanasia certainly could become a means of cost containment.

#### **4. Euthanasia will become non-voluntary**

Emotional and psychological pressures could become overpowering for depressed or dependent people. If the choice of euthanasia is considered as good as a decision to receive care, many people will feel guilty for not choosing death. Financial considerations, added to the concern about "being a burden," could serve as powerful forces that would lead a person to "choose" euthanasia or assisted suicide.

People for euthanasia say that voluntary euthanasia will not lead to involuntary euthanasia. They look at things as simply black and white. In real life there would be millions of situations each year where cases would not fall clearly into either category. Here are two:

Example 1: an elderly person in a nursing home, who can barely understand a breakfast menu, is asked to sign a form consenting to be killed. Is this voluntary or involuntary? Will they be protected by the law? How? Right now the overall prohibition on killing stands in the way. Once one signature can sign away a person's life, what can be as strong a protection as the current absolute prohibition on direct killing? Answer: nothing.

Example 2: a woman is suffering from depression and asks to be helped to commit suicide. One doctor sets up a practice to "help" such people. She and anyone who wants to die knows he will approve any such request. He does thousands a year for \$200 each. How does the law protect people from him? Does it specify that a doctor can only approve 50 requests a year? 100? 150? If you don't think there are such doctors, just look at recent stories of doctors and nurses who are charged with murder for killing dozens or hundreds of patients.

#### **5. Legalizing euthanasia and assisted suicide leads to even more deaths and suicides.**

When the media portrays assisted suicide as a means of "taking control" or claims that someone helping another person kill themselves is "death with dignity," then society (including teenagers) is receiving the dangerous message that suicide is a legitimate answer to life's problems. See this article: <http://www.nationalreview.com/human-exceptionalism/348985/suicide-contagion-real-wesley-j-smith>

#### **6. Euthanasia is a rejection of the importance and value of human life**

People who support euthanasia often say that it is already considered permissible to take human life under some circumstances such as self-defence - but they miss the point that when one kills for self-defence they are saving innocent life - either their own or someone else's. With euthanasia no one's life is being saved - life is only taken.

Yours sincerely,

Linda Franze

