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Subject: SUBMISSION - INQUIRY INTO END OF LIFE CHOICES
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INQUIRY INTO END OF LIFE'S CHOICES - LEGAL AND SOCIAL ISSUES COMMITTEE

I wish to make a written submission to the Inquiry on End of Life Choices conducted by the Legal and Social Issues Committee.

As a pastoral care worker in my local church community I am frequently in touch with individuals who are suffering from terminal illnesses. It has been my experience that almost without exception these folk accept their coming end months and days with peace and equanimity when they have adequate palliative care and a supportive family whose concern is to give love and enjoyment and support to the individual during their last times together.

It is the individuals who do not understand or receive appropriate palliative care and support who are fearful of terminal illness and the ending of their life. Loneliness and pain are the most feared and it is incumbent on our society and our governments that these issues be adequately addressed.

I believe it is contrary to all that is positive about our humanity to introduce legalized euthanasia into our society. Euthanasia is extremely poor social policy which only serves to weaken the nurturing of care and compassion within society in general and also across family life, and, importantly, euthanasia undermines the values of the medical profession.

This is evidenced in Belgium and Netherlands where the "criteria" for enabling euthanasia is steadily expanding and the medical profession is being involved in increased "involuntary" euthanasia.

Euthanasia and physician assisted suicide are against the codes of ethics of peak medical bodies around the world and the World Medical Association reaffirmed their opposition to both euthanasia and assisted suicide at the 194th WMA Council Session in Bali, Indonesia, in April 2013.

In this inquiry into end of life decisions I believe Palliative Care to be a major consideration and I would like to submit the following :

- Palliative care must be further improved with greater financial support for research and delivery - it must become more available and accessible to people in all areas both urban and rural.
- Palliative care should be accessible to all people regardless of income just as other medical treatment is available.
- There is a need for more educational resources on palliative care so that people know of it's possibilities to support their end of life process.
- Once the end of life process has begun there must be an acknowledged freedom which allows that person the choice of saying no to further medical interventions/treatment that would neither substantially prolong life or improve the quality of life.
- Euthanasia and assisted suicide must not become part of palliative care as it has in other countries that have legalized euthanasia. Killing, even "gentle" killing must never be condoned.

I would particularly like to submit that palliative care is the most critical issue in looking at end of life issues where pain, "aloneness", or lack of control are most likely to be the overarching factors in end of life distress.

All three of these factors can be managed in a caring society with correct legislative framework and a will to manage them.

Euthanasia serves only to undermine society's ability to manage these issues because euthanasia can be seen

as easier, cheaper, and ultimately could allow society to rid itself of the “unwanted” in our midst.

History should be our loudest teacher in these matters.

Janet White

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