Inquiry Name: Inquiry into End of Life Choices

Ms Glenys Sleeman

SUBMISSION CONTENT:

I make this submission as a private citizen, however I have worked as a social worker in oncology units for 25 years and also in home based palliative care for 3 years and in the public service in Aged Care, so it is based on both my experience in these settings as well as my personal values.

In my work in terminal care, very few people with cancer expressed a wish to end their lives. Most clung tenaciously to life even enduring suffering and often useless treatment to make the most of the time they had left. In my 25 years in this field only 3 people I knew took their own lives. Others elected to be pain-free in the last days of their lives which may have minimally hastened their death. In my three years in palliative care where contact was generally in the last three months of life, 3 clients took their own lives.

In my work in Aged Care and from my own experience of my mother spending the last 2 years of her life in a Residential Aged Care facility, most people I know and have worked with, vow that they will not enter such care. My mother constantly expressed a wish to die and that has been my experience of other friends and family in this setting. The loss of independence and the experience of life in such settings while waiting to die is soul destroying.

Research shows that as people age, most fear dementia and the loss of control that this brings, rather than life-threatening illnesses.

I personally believe that one should be allowed to take ones own life if you feel that the quality of your life is diminished. This is a very individual choice and would vary from person to person. To be able to access lethal medication would be preferable to other forms of suicide. I do not ask anyone to bring about my death, just that I have the means to take my own life painlessly. I also do not expect anyone else to be pressured to hold the same views of me. I do not believe that this would be a slippery slope, as I have previously stated most people cling on to life, but those of us who do not believe that life is worthwhile unless it is
one of quality should be allowed to make our own choice and not have other societal values placed on us.

The issue of better palliative care services while worthwhile should not impact on having a choice to take ones own life. As stated earlier I do not believe that it is just the last three months of life that people address the issue of suicide. It is quality of life, not the time that one has left that is the determinant for most people wishing to make this choice.

Advanced Care Planning should allow one to indicate your wishes for any future illness and also to ask that you be given the means to end your life under certain conditions.

I am in my 60's travel, ride my bike three times a week, enjoy my family spend lots of time caring for my grandchildren so I currently live life to the full. I just ask that I be allowed to make the choice to end my life when I am no longer able to do the things I enjoy and love. I do not attend to spend my twilight years in a nursing home. Death is far more preferable than that.