Inquiry Name: Inquiry into End of Life Choices

Mr and Dr Brian & Jennifer Abbey

SUBMISSION CONTENT:

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Nowhere in Australia at the present time does the law adequately represent the balance of advanced specialist medical thinking on the course and character of the end stages of life. Nor does the law reflect the long-standing and widespread community opinion that any eligible individual should have access to a lawful, appropriately regulated protocol leading to death with dignity involving physician-assisted euthanasia.

We share and want to strongly support the most common stance: that such rights should be extended to all after a nominated period for public consultation and the framing of appropriate safeguards.

Opposition to reform now comes mainly from a relatively small but vociferous minority, motivated usually by their own sincere private religious beliefs, and a wider but still minor segment of the public whose caution is largely due to their having little experience or knowledge of the issues and of developments in overseas jurisdictions.

Reform proposals need to meet these residual public concerns as far as will ever be possible by making absolutely clear that every individual will retain all the freedoms they now enjoy as well as new rights they may or may not choose to pursue.

Reform legislation should ensure that health professionals who do not wish to assist in such matters remain free to abstain but are legally obliged to provide a referral to one or more qualified professionals known to be willing to provide advice and practical assistance to those seeking a dignified death at a time and in a manner of their own choosing.

One of us, Jennifer Abbey PhD, FACN, has spent more than 30 years in research and clinical practice specialising in the late-stage care of people with dementia. She has held chairs in three Australian universities and continues as an adjunct professor in two of them. Her work, especially in the area of detecting and managing pain for people with dementia, has brought her into contact with
hundreds of cases where early-stage cases have sought to establish advance directives only to have them later ignored, often reluctantly, by hospital professionals because of their legal anxieties or religious beliefs, often at the cost of much unnecessary suffering to the family as well as to the afflicted person. It is this steadily swelling problem that will eventually force this change. Reforms introduced sooner rather than later will avoid that suffering and be generally seen as more humane, as has happened abroad. This submission reflects that experience and draws on a wide knowledge of international practice.

Australia was widely admired throughout the 20th century as a leader in enlightened social policy, civil liberties and human rights. Our standing has diminished in recent years, but we may be on the verge of recovering it. While we reside in South Australia we believe that Victoria has an opportunity to lead a long-overdue reform to the law which we believe other states will soon follow, aligning us once again with world's best practice.