I am 80 years old and have lived for six years in a retirement village with about 100 people about my age. So let me take the Committee for a moment beyond the law, the church and the medical profession to the people upon whom this Inquiry immediately impacts.

It is at 30, Ernest Hemingway wrote, that a man first accepts that he is going to die. That is scary at the time but, as the years pass, fear fades. I would say few, if any, in my village fear death but most of us, lying awake in the hours around dawn, would think about how they are going to die. Slowly? Painfully? Embarrassingly?

Few of us, I think, have a faith that would fit precisely with the teaching of any Christian church. A few have embraced atheism and agnosticism; most have melded the faith they first learned with life experience and have arrived at a point where they are content. All that remains is the mechanics of departure.

Deaths of residents and former residents are announced in my village and one I particularly remember was at a village dinner about a resident who had been spending time with her family. She had had lunch with them all, had sat down to have a nap, and died. The room erupted in applause. Bingo! She had achieved the perfect death. No lingering, no pain and with dignity.

Most residents in my village are women, as is probably true of all villages, and women, science tells us, prove better than men at handling stress, and my experience is that a death sentence unleashes in them an extraordinary valour. One whom I subsequently helped through five years of ovarian cancer told me she had seen her oncologist and held up five fingers. I said, ‘Years?’ She nodded and said, ‘Let’s have a drink’. Another resident, told early last autumn that she had three months to live with inoperable lung cancer, went out and bought an entire winter wardrobe, announcing, ‘If I’m going to go, I’m going to go looking my best’. There is a lot of laughter in retirement villages.

My first contact with Dying With Dignity Victoria was in 2008 when my partner was dying of liver cancer. I phoned them and was immediately asked whether we had arranged power or attorney, advance healthcare directives? No? Then they would send me the forms and, they said, Dr Rodney Syme would ring me, which he did and he said he would call. But my partner died before he could visit so I called him and I remember him saying, ‘Be grateful. He had the death he deserved’.

Until I retired at 73 I was a journalist so, out of gratitude, I wrote to Dying With Dignity, offering my services as a writer and for some time wrote for its website profiles of people terminally ill and facing painful and sometimes long deaths.

All of them spoke of the comfort they felt from knowing that their death would be managed. One said, ‘It’s extraordinary. I didn’t want to live. Now that everything is in hand, I want to live as long as I can.’

Another sufferer, a memorably doughty American with cancer of the brain and lungs, said, ‘Dr Syme has given me peace and a confidence about dying by giving me control over my life and confidence about continuing to live positively while confronting dying’.
She said, ‘I’ve helped other people die and it is horrible, and it is a total waste of those people whose job it is to take care of sick people.

‘I don’t want to be endlessly taken care of. And I don’t think anybody should be made to suffer. It isn’t life.’

Queen Victoria was one of the first women to use chloroform to give birth to one of her many children. Her bishops decried it, claiming it was against the Will of God, that woman was born to suffer the pain of childbirth. Nonsense, said the Queen.

At the end of life, as at the beginning, doesn’t the same apply?

Gerald Mayhead
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