

## Admin, LACO

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**Subject:** FW: End of Life Choices- Submission

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From: Emma Rose

Sent: Monday, 23 October 2017 1:08 PM

To: Joint Select Committee on End of Life Choices <eolcc@parliament.wa.gov.au>

Subject: End of Life Choices- Submission

To the Chair and members of the Joint Select Committee on End of Life Choices,

Thank you for taking public submissions.

When considering this issue it is clear there is a need for increased access to palliative care services. This applies to our main cities and to rural areas.

There continues to be an improvement in palliative care, and this needs to continue to ensure physical and emotional support can be provided to people to help manage pain and distress during this difficult time.

My mother in law recently went into hospital. While the hospital services were more than adequate she was very unsettled, unhappy and disempowered by being in hospital rather than her home. Similarly family members felt her frustration and distress along with the burden of travelling to hospital for visits/spending precious time together. Having affordable access to at home palliative care would help alleviate this situation. It also provides some control back to the patient and family member during this difficult time.

Euthanasia and doctor assisted suicide is often proposed under the guise of providing control to patients. Before we legalise these we should, as a society, first fund at home palliative care.

I wish to be clear in my submission that I do not support euthanasia or assisted suicide. I believe doctors should always be focused on "doing no harm" to their patients. Additionally, access to euthanasia or assisted suicide means some elderly or chronically ill people will feel like a burden and legal access to these services places pressure on them to 'take themselves away'. Even if the pressure is not really there from family and friends making euthanasia legal means it will sub-consciously be there. It is also important to remember the mental state of people - many people facing these situations are depressed (if not to the level of clinical depression) they are understandable not always the most positive frame of mind. When you are feeling very down about life, ageing or the pain ahead it is a very simple progression to start seeing suicide as a solution.

I do not believe we should be encouraging or legitimising suicide in any form as this will impact the broader community than just the terminally ill. When society says it is legally o.k to commit suicide for a selection of patients because they are going to die anyway (as we all are) this could be seen by other depressed members of society as tacit support for suicide. We know we have an increasing mental health burden in our society so we should be focusing on how to address this and ensuring we don't enact laws that lead to more suicides.

I've heard a saying the societies are judged by how they treat their most vulnerable (not the most powerful). As the law makers in this state I ask that you protect and value the most vulnerable and send a message that their life matters- even if the quality of life is less than perfect.

Yours sincerely  
Emma Rose