

Admin, LACO

Subject: FW: Submission: End of Life Choices Inquiry

From:

Sent: Monday, 23 October 2017 2:59 PM

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

Cc:

Subject: Submission: End of Life Choices Inquiry

Dear Members of the Joint Select Committee on End of Life Choices.

It is with concern that I hear the proposed Bill on End of Life choices and I thank you that we as public been given the chance to send you a submission regarding this.

Even though I understand people's emotional attachment to making the decision to end their own life but when a government endorses such action it is taking a first step on a slippery slope.

“To legalise assisted suicide / euthanasia would place large numbers of vulnerable people at risk – in particular those who are depressed, elderly, sick, disabled, those experiencing chronic illness, limited access to good medical care, and those who feel themselves to be under emotional or financial pressure to request early death. Patients will come to feel euthanasia would be ‘the right thing to do’, they have ‘had a good innings’, and they do not want to be a ‘burden’. Once the genie is out of the bottle, it is unlikely to go back in again.” says Bob McCoskrie, National Director of Family First NZ.

I arrived from the Netherlands some 20 years ago where at that time the doctors would look the other way. Now the Netherlands and Belgium has fully legalized this and step by step increased the scope of the law on euthanasia.

As others can say it better then me I copied a few quotes from others which also explains my concern:

“The Netherlands are simply following the trend in Belgium. A Belgium Senator admitted that during the debate on the passing of child euthanasia laws, euthanasia supporters talked about children with anorexia, mental illnesses, and children who were simply tired of life. Belgium is unable to control or prevent the abuse of the existing law. Now they have expanded it to impact children. A recent [documentary](#) in Belgium featured a doctor killing a healthy young woman who was struggling with mental illness.”

Professor Theo Boer was a member of the Dutch Regional Euthanasia Commission for nine years, during which he was involved in reviewing 4,000 cases. He admitted to being a strong supporter of euthanasia and argued that there was no slippery slope. However, by 2014 he had a complete change of mind, regretted that he had made a terrible mistake, and even [warned](#) the United Kingdom Medical Council against following the Dutch example.

This bill brings many conflicts and problems with it.

1. First of all the bible very clearly indicates we are not in control of when our life should be finished.
2. Many times I have seen and experienced serious sick people who humanly speaking could have taken "the way out" but stayed on, and I have seen the impact these people still have on their direct families especially grand children and a wider community around them.
3. If Australia has a very good level of palliative care and pain management clinics the euthanasia should not have to be an option.
4. The indications are coming from Holland to where sick elderly people taking up hospital beds are helped along with euthanasia or put under huge pressure to give up their beds by making the choice for euthanasia.

No restrictions in the law would be able to prevent that from sooner or later to happen here too.

5. Children especially will at one time been given the way out. Children who do not understand life in it's fullness and struggling with bullying at school, anorexia, depression etc will request their life's to be ended.

6. the pressure and cost on our health system and doctors in particular will increase dramatically over the years to come once this option is freely available.

7. Is "ending our lives by our own choice" going to come free, paid for by Medicare?

I Would like to recommend that the committee do everything in its power to prevent legalised euthanasia and instead recommend to the government:

a. support palliative care so that people do not feel the need to end their life.

b Increase a far better and easier access to good medical care for the depressed or living with anxieties.

c. recommend to the government to put much greater emphasis on family values where elderly parents will be looked after instead of dumped somewhere because they have lived out their usefulness. Where communities again will be stimulated look after and out for each other. Lots of people call that old fashioned nowadays and are not interested in looking after even their own parents but I strongly believe that was always better than an "everyone for themselves" society. That is not how Australia got where we are now.

Yours sincerely,

Reinier Dorgelo