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Legislative Assembly Committee Office
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Submission to Joint Committee **ON END OF LIFE CHOICES**

I am making this submission as an individual member of the general public. I do not wish to appear before the committee.

Overview

We should not kill people, even if it is at their own request. We must help all people with practical social and medical support to alleviate their pain and suffering.

Expert care and pain relief

We should provide palliative care in the community to care for the dying person and help to reduce their pain, fear, depression and isolation.

When we are sick we find it difficult to think clearly. "I can't see how I can get out of this ... on my own". We need to rely on others to care for us at this time.

Is it simply the physical pain or is it other matter that is making the person think that euthanasia is the best option. The dying person may be tired and depressed, finding it hard to cope with the pressures of being terminally sick, the inability to attend to responsibilities and other emotional turmoil in facing the end of life.

What is required is regular personal attention from an appropriate professional (e.g. social worker) in the field of palliative care. They can coordinate the best care from a range of professionals, including expert medical care focusing on pain relief that is regularly monitored and adjusted. This palliative care could be provided at home or in a hospice.

Risks

If the dying person is unable to communicate their end of life choices, then it is very risky to rely on a relative.

I have witnessed a son's misperception that his mother was in pain when she definitely was not. It is understandable that relatives can't bear seeing their loved one sick and close to death and (for their own sake) want see this over.

"My father is a proud man, he would feel embarrassed with anyone fussing over him. It would be an affront to his dignity". Private embarrassment is not enough reason for the law to allow assisted suicide. Nurses and other professionals can provide care in a very respectful way.

Wider application

If legislation is passed to allow 'assisted suicide' (euthanasia) then it becomes socially acceptable and a more common practice. Even if narrow conditions are set initially, courts of law will construe legislation with regard to the social norms of the day. So the euthanasia net will be cast wider as time goes on.

Other points

A prominent pro-euthanasia campaigner named Andrew claimed that palliative care is not effective for 6 percent of people. If relied upon, this statement needs to be very carefully unpicked and examined explored by the committee. Medication for severe pain may have side effects. Pain relief may dull the senses and the person may not function as well. As end of life draws near a person may be in a sedated state. It is a different phase of life where the dying person is more reliant on others.

A dying person's end of life choices may be clouded by these thoughts, 'I am a nuisance to my family and others. I am a financial burden'.

Conclusion

As a community we can show our generosity and compassion by affording greater emphasis to palliative care.

John McShane.