

## WA END OF LIFE INQUIRY

We view with concern the proposal to include euthanasia as a means of managing end of life choices for Western Australians. Those who advocate such a course generally invoke cases of unrelenting suffering of the ill person while their loved ones watch helplessly as their family member is in torment with no relief in sight. Euthanasia may seem to be the best option. However, such a course of action does not take into account the reality that most pain can be managed with appropriate medication. Nor does it consider that it is impossible to have adequate safeguards to prevent abuse of legalised euthanasia. Countries which have taken this path (e.g. Belgium and the Netherlands) have started off with stringent safeguards such as informed consent by the patient, agreement of a specified number of medical experts, etc. However, these safeguards have soon been eroded. What starts with the requirement of the person having a terminal illness, soon gets diluted to people who are tired of living, suffering mental illnesses, fearful that they are a burden to their family or just plain lonely. In Belgium, there are now protocols for the euthanasia of children! It is highly dubious that children can give informed, mature consent to such a course of action. In any society with a high instance of elder abuse, it becomes all too easy for family members to put pressure on the patient to feel that they are being selfish if they choose to keep living. The right to die soon becomes a duty to die. However, this gives a terrible message that some humans (those who are suffering in these ways) are less valuable as people than the rest of society. Rather than seeking to shorten people's lives, our energies should be directed into meeting the specific issues that these people face. Many mental illnesses are temporary conditions and although the person may feel, at the time, that life is not worth living, with appropriate care, many such people are cured and go on to live positive lives where they make valuable contributions to the community. In the case of terminal illnesses, quality palliative care is what is required. Perhaps this is where the real challenge lies. With an increasing aged population, the demands for nursing home and palliative care are likely to increase. Obviously, it would be less of a financial burden for governments to legislate for the euthanasia of the elderly, rather than expend the considerable sums required to provide more hospice and other appropriate care. However, such expenditure is vital. The measure of a society is the compassion it shows to its most vulnerable members.

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22 October 2017