

Admin, LACO

Subject: FW: Euthanasia

From:

Sent: Wednesday, 4 October 2017 2:09 PM

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

Subject: Euthanasia

My input re parliamentary enquiry.

I am pro euthanasia.

I believe Australian people are a very *different mix of cultures* since the loss to our country during the world wars.

I STRONGLY believe we don't have a proactive approach to end of life choices.

I believe we MUST have EVERY person who is diagnosed with any surgery AND life threatening disease to be a *mandatory* provision to be SENT to a counsellor. A counsellor because their medical model is of a positive wellness one.

Absolutely NOT a GP, psychologist NOR a psychiatrist and the like because their medical model is from the perspective of an illness model.

Those considering euthanasia are not necessarily depressed: in fact they often have addressed and very carefully considered euthanasia and it's implications.

The counsellor mandate is to talk with people PRIOR to surgery or treatment for life threatening disease FOR REAL ISSUES to be discussed. Things like *choices* in care- including "doing nothing/enthanasia" plus home care, family care, small medical/surgical steps, spiritual/ cultural needs in this care, among many others-: balanced against the urgency of treatment.

To TELL a male Aboriginal his prostate is being removed 9am tomorrow and any issues after that we can talk about IS NOT ACCEPTABLE! (Real example).

Lastly, the patients in these medical predicament must also have the discussion of *education* of writing 1. an advanced health directive, 2. power of guardianship, 3. enduring/power of attorney, with a Justice of Peace, Social worker or with the Counsellor.

Purposefully providing the national statistics and data measures to have improved choices and processes after the passing of a life. Egto know there are no government paid funerals any more. People will know about and make their *own* choices.

People will educate *others* by these simple requirements.

People will be financially prepared for a burial, cremation nursing-type care and legal documents will be correctly written.

This will also provide statistics to the aging state of the nation in preparation for preventative budgeting needs.

Yours sincerely

Lorna Mclean

Sent from my iPhone

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