

**SUBMISSION TO PETITION**  
**FOR THE NEED OF WESTERN AUSTRALIAN LAWS**  
**TO ALLOW CITIZENS THE RIGHT TO MAKE BETTER INFORMED**  
**DECISIONS IN REGARDS TO THEIR END OF LIFE CHOICES**

To the Honourable the Speaker and Members of the Legislative Assembly of  
the Parliament of Western Australia in Parliament assembled:

I, the undersigned, commend the Western Australia Parliament for the enquiry to review its laws in order to entitle patients in time of vulnerability to make informed decisions in relation to end of life choices.

My submission to this petition is based on my work experience of 20 years as a Pastoral Practitioner.

- In this profession, I offered support and accompaniment to patients of different backgrounds, walks of life and affiliations in various hospital wards in Perth and in Melbourne.

Journeying with patients who suffered from ongoing chronic acute pain and terminal illnesses in rehabilitation, oncology and palliative care wards, I witnessed people's trust and openness in questioning existential matters and exploring their freedom to make end of life choices.

- In pastoral care, 'presence' has become the core of its practice. As part of ward based hospital teams, I observed how pastoral practice was appreciated and encouraged by all disciplines.
- Team meetings were pivotal in our interactions with one another and as a consequence in our clinical interventions with the patients entrusted to us.
- I saw how palliative care operated in many instances, and delivered the most dignified, humane and personalised ongoing support, tailored to each patient specific needs and those of their families.
- Palliative Care was monitored by a team of medical experts, who offered compassionate options to the patients allowing them to choose how to live their life situation in the moment, no matter for how long: moments cherished by family and friends. Patients felt empowered, owning a new dignity, after illness and other circumstances had 'robbed' it from them. In their search for clarity and peace of mind their deepest inner needs had been validated, along the way.

I found my opposition to the introduction of Euthanasia in WA upon these considerations:

Legalizing a practise that treats human beings as statistics and social inconveniences undermines human dignity. In the process of its delivery, medical and clinical professionals may minimise controversial agendas behind it, but no one can guarantee that integral elements of Australian work culture, as ethics and transparency, will be held. Instead of being ruled by Medical Professions this practice will be jeopardised by politics and factions.

I firmly believe that it is far more important to develop updated strategies to deliver quality Palliative Care to all in need than legalising Euthanasia.

In my view

- Any authority that sets a 'tot life time' or a 'time distance to death' and uses these as lawful measures to allow someone to kill a person, is accountable to breaching of human rights. If instead upholds life by setting financial support in times of distress is to be commended.
- Medical and clinical interventions in support of patients facing end of life issues need to be reconsidered and reviewed. When Health Professionals are not open to transcendental issues and don't offer a Pastoral Care presence to patients whose beliefs are other than religion, their patients' need for spiritual and emotional accompaniment are compromised and denied.
- 'Taking time' to be with each person in our care, in order to respond without rush to their present needs in times of vulnerability, is essential! It offers them the space to process options in a safe environment.
- Patients and families also in country towns need easier access to clear and all encompassing information to help them process decisions that honour their last desires, in the most dignified manner.
- Encompassing information requires transparency and availability from all care givers and practitioners, in public and private hospitals, to re-address the content and meaning of "informed" decision.
- In collaboration with palliative care teams, hospital quality performance committees can play a big role in this area. Listening to patients' relational, spiritual, educational, social and environmental life needs, besides supporting their physical and emotional wellbeing, they can provide valuable information.

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