Submission Cover Sheet

End of Life Choices in the ACT

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Submission to Select Committee on End of Life Choices in the ACT

To Whom It May Concern,

I would like to make a submission regarding the inquiry into end of life choices in the ACT. I would like to qualify that all views expressed are strictly my own.

I am a strong supporter of legislating voluntary assisted dying and have been a member of Dying With Dignity (DWD) ACT for some time. At 37 years of age I cannot say for certain that I am the youngest member, however I have been the youngest attendee at every gathering by a significant margin. I am not a member because I am terminally ill. I am a member as I believe this is a humanitarian issue. Conditions that cause unbearable suffering do not discriminate by age. I would attribute the age demographic in DWD to the fact that people generally don’t become active in a cause like this one until it becomes personally relevant, even though they support it principle.

The issue of assisted dying became personally relevant in the case of my grandfather. My grandfather was not technically ‘terminally ill’ at the end of his life but there was no question he was dying. Breathing was difficult, there were issues with multiple organs (but again, nothing ‘terminal’) and he was in an incredible amount pain, regardless of the palliative care provided. He asked to die. Repeatedly. Needless to say the family felt beyond helpless and he continued to deteriorate to the point that the grandchildren were told not to visit. One day I did anyway. There was virtually nothing left of him, for a man who had always been somewhat overweight, he was emaciated and he was hovering on the edge of consciousness but with the occasional movement in a way that left no doubt in my mind that he was still in pain. It was truly beyond unbearable suffering. It was several more days before he passed away.

It was a while after my grandfather’s death that I joined DWD. The memories came back after watching a segment on something like 60 minutes and I decided to do something for the cause. The story was of two women who had been best friends for most of their lives. One had terminal cancer and wanted to die as she was suffering through the terrible end stages. Her best friend wanted to help her but obviously would face penalties so they both took their lives. I believe it is a huge injustice that allowed this to happen.

I make a point of mentioning that my grandfather was not ‘terminally ill’ as I believe that to be a flaw with the Victorian legislation. I understand there are some exceptions for certain degenerative conditions but even then I believe the waiting periods to be too lengthy. My strong preference is that the criteria be for assisted dying to be made available to anyone experiencing ‘unbearable suffering’. There are too many examples of situations, as in the case of my grandfather, where someone will obviously continue to deteriorate and suffer until death that will not qualify under Victorian legislation.

I also believe that very severe mental health conditions should qualify. I understand this is a harder one for many people to support and I believe this is because the suffering is not visible. I support this addition as there are cases of severe mental illness that have exhausted treatment and fit into the ‘unbearable suffering’ category and leave the sufferer with no quality of life. If the sufferer can make the decision (and there are multiple assessments etc.) I believe the option should be available.

That brings me to the topic of risk management. The argument has been used quite a lot from opponents of assisted dying that it’s a means to ‘get rid of granny’. For the sake of providing
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community views I’ll just state that I feel the checks and safeguards provided in the Victorian legislation are more than adequate and that argument is baseless.

In addition I’d like to state that I believe the ability to end one’s own suffering is a human right. Suicide is not illegal, assisted dying should not be either. In fact, it would seem that assisted dying would reduce suicide rates, for example data was released from the WA State Coroner that a person with a terminal or debilitating illness commits suicide every nine days in WA. It is often that people who have the option won’t actually take it. This is examined in Peter Short’s documentary Fade to Black, which I would recommend to anyone who is debating their position on this debate.

On a purely selfish note, I want this legislation introduced so in the future I wouldn’t have to watch another family member suffer, and so I wouldn’t be in that position myself.

I believe the ACT should have the power to make its own legislation in these sorts of matters.

My view is as simple as this: we should not force others to suffer.

Thank you for time,

Kirstin Stirling