



**LEGISLATIVE ASSEMBLY**  
FOR THE AUSTRALIAN CAPITAL TERRITORY

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**SELECT COMMITTEE ON END OF LIFE CHOICES IN THE ACT**

Ms Bec Cody MLA (Chair), Mrs Vicki Dunne MLA (Deputy Chair), Ms Tara Cheyne MLA,  
Mrs Elizabeth Kikkert MLA, Ms Caroline Le Couteur MLA.

## Submission Cover Sheet

### End of Life Choices in the ACT

**Submission Number: 481**

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26 March 2018

[REDACTED]

Dear Ms Cody,



**Re: End of Life Considerations**

Attached is an email that I tried to send by COB on the 32/3 to the address of the Parliamentary website. I discovered, much to my dismay, this morning that it had bounced back.

I hope that it will be considered by the appropriate committee, given that I believe that I did all that I could do to send it as directed and spend a considerable amount of time composing it.

Thank you,

[REDACTED]

M J Le Brun

Dear Madam/Sir,

Several months ago I had hoped to see published a letter that I wrote to *The Canberra Times*. In it I described how a friend accompanied his wife with their children to Switzerland so that she could take her own life. Several months earlier she was diagnosed with pancreatic cancer and, despite many interventions, death beckoned. When my friend first heard of her wish to travel to Switzerland to end her life, he was appalled but after some months of difficult discussion and when faced with her strong determination not to suffer more, he acceded to her wishes. The family travelled to Dignitas, said their farewells, and he and his children left the country immediately after her death. She was fortunate. She was well enough to withstand the journey and they were financially able to shoulder the bill. I doubt that many citizens in the ACT would be able to do that. I doubt that I would.

I have worked as a legal academic for almost thirty years in several common law jurisdictions and I have kept a watching brief on international developments regarding dying with dignity which has been relatively easy particularly because a close friend spearheaded the campaign in Tasmania, where the battle to change the law appears to be easier because Tasmania is a state, not a territory. Although passing legislation in this area is difficult, as the Victorian example illustrates, it is almost insurmountable in the case of territories.

I am, thus, writing to your committee to support the move to grant the power to the ACT Legislative Assembly to pass legislation to enable the ACT to reconsider the rights of the dying in the event that the Federal Parliament does not support the granting of statehood to the ACT for the following reasons:

- 1) treating the ACT as a territory or denying rights granted to states to the territories deprives ACT citizens of their full democratic rights. This is particularly galling since people in the ACT are, on large, better educated and resourced than people in other jurisdictions. Citizens of all states of Australia have an additional tier of government to petition that is denied to citizens of the ACT and the NT. I do not support the Coalition government and, hence, I do support few laws that the federal government passes.
- 2) Seventy per cent of these well-educated people think that dying with dignity should be available to all.
- 3) Australia is now a secular country so the dictates of one's persons religious beliefs should not be imposed on all others. To do so is to mix church and state, which is anathema to me.
- 4) There are effective models that have been developed and used in other jurisdictions (eg USA, Switzerland, Belgium, the Netherlands) that provide more than adequate protections. We don't need to invent the wheel, as it were; we can learn from the experience of others.
- 5) People are living longer and dying is often prolonged unnecessarily for numerous reasons (eg fear of litigation; religion; desire to learn more about the efficacy of medical interventions) and 'medicalised' unnecessarily.
- 6) Not all wishes of the dying are respected, despite the best laid plans.
- 7) I believe, unlike many legislators, that each individual should have property in her/his own body. We have witnessed changes in attitude to suicide (eg not as stigmatised as it once was; some religious individuals no longer see it as a sin) and suffering. The time has come to admit that life is wonderful when one is well but when one is terribly ill, no one should have the right to deny another the ability to alleviate suffering through death, no

matter how well intentioned.

8) The number of palliative care places are limited as are their availability. Our health resources are already stretched. Once the health of baby boomers begin to decline significantly, these already stretched resources will break unless action is taken.

9) Palliative interventions are not effective for all, no matter what many member of the medical profession states. To illustrate: I am over the age of 65 and, although I am currently in good health, I have developed a number of allergies and intolerances over time. I also have been an athlete all my life and my joints are showing signs of deterioration. I wear a medi-alert bracelet which notifies others that I am anaphalactic and intolerant of NSAIDS, opiods, sulphates, etc. I, thus, can only take panadol for pain and that is not particularly effective when I am suffering from anything more than a mild headache. I have refused operations (eg knee surgery) and doctors have advised against surgery that can enhance my life because of the difficulty of managing any ensuing pain. There are limits to what medicine can do.

10) I am a single woman. I have lived and worked in seven countries as diverse as PNG, Africa, and China. I have visited numerous other countries. Individual agency has been central to how I see my life and how I have lived my life. I totally resent the idea that another person should be able to tell me the limits of the most important decision I will ever make: that is when, how, and where I die. As the law now stands, if I were ill now, I would have to move from the ACT if I wished to take my own life. As a single woman with no family or partner in Australia and friends who are also elderly, I believe that this would prove impossible, which, in turn, means that individuals in situations like mine would be doubly penalised. Unlike my friend who accompanied his wife to Switzerland, I would lack that intimate support.

As you would be aware, politicians are no longer held in high esteem in Australia. Many of us voters feel alienated as a result. Many of us are strong in our determination to change the laws in regard to end of life decisions. Decisions about such a crucial matter should not be made by people of faith or 'good conscience' who impose their faith and morality on another. I have my own 'faith' and 'good conscience'; for me, that is enough. I want my full agency protected and respected.

Thank you for an opportunity to contribute this submission to your committee. I wish you well in your deliberations.

Please contact me if you have any questions.

M J Le Brun

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Fri, Mar 23, 2018 at 1:46 PM

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