



LEGISLATIVE ASSEMBLY
FOR THE AUSTRALIAN CAPITAL TERRITORY

SELECT COMMITTEE ON END OF LIFE CHOICES IN THE ACT

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Submission Cover Sheet

End of Life Choices in the ACT

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From: Ruth Haig

To: LA Committee - EOLC

Subject: End of life Choices

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My representation to the Select Committee.

- In nomadic communities, as people came to be too old to keep up, they would choose to remain in a sheltered place and wait for death. Since I turned 70 (I am now 82) I have had an Advanced Care Directive which has stated that I have had a good life and that I am happy to go and do not want unnecessary treatment to keep me alive. In an overpopulated world it is not wise to be putting so much resources into the old and not enough into the young who still have so much to live. Some years ago there was a wonderful ABC program about an 80 year old French/Australian lady from WA who, although she was not ill, chose to end her life as she had experienced life to its full. She was assisted by a medical practitioner.
- In the 80s when AIDS first became a problem I knew of a lovely pillar of the community, who was gay, and who when he chose, was provided, by a compassionate doctor, with the means to end his life. Before he did he gathered his friends for a farewell and then when they had gone, lay down and took the provided medication.
- I am a Quaker and member of the Greens. Four and a half years ago Aina Ranke, Fellow Quaker and Green, who had muscular dystrophy, obtained the necessary drugs overseas so that she could take them to end her life whilst she was still able to do so. She did not let her friends know as they could be held criminally responsible. She did want to involve the wider community to the importance of people being able to die with dignity. She contacted a Sydney Morning Herald journalist, not to tell her of her intentions, but so she could report on how difficult it was for her to live with dignity. Next day, whilst her occasional carer was out she took the medication. Sadly the carer returned before she died and, despite her having an Advanced Care Directive, doctors at the hospital kept her alive for a few days. Since that time in NSW, hospitals have been much more ready to allow people to die. It is so important that the medical profession and friends and family be able to be a full party to dying with dignity.
- I have just seen "Breathe" the BBB feature film about Robin Cavendish, who contracted polio in 1958 which paralysed his breathing. He lived a full life for 20 years due to the courage and resourcefulness of his wife Diana and her brothers and inventors dedicated to enabling him to escape the prison of hospital. When he started haemorrhaging from the lungs, back in about 1980 his doctor friend was prepared to help him to die gently with his wife and son, after he had said his farewells to the wider group of family and friends. "Breathe" has been made by, amongst others, the son of Robin and Diana Cavendish, who is a film maker. I'm sure he feels it is time that others can choose to end their lives with dignity.
- My mother would have been happy to be able to choose when she died. She had colonic cancer. She died from starvation. It took 7 weeks.
- I know that when my husband died 12 hours after going into hospital, when his heart could no longer beat strongly enough to keep him upright, that the staff were very pleased that he had an Advanced Care Directive and did not feel compelled to do CPR.
- I tried to support Anne, who had muscular dystrophe, and the bill which was before the NSW Upper House. It was so sad that the bill did not pass.

This is my submission. Sorry not to be able to get rid of the material below I don't know how it got onto the email. We'll blame it on the Gremlins.

Sincerely,

Ruth Ann Haig. BSC Dip Ed.

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