

18 March 2008

Mr Peter Hallahan
Secretary
Senate Legal & Constitutional Committee
Dept of the Senate

Dear Sir

I write in support of Sen Brown's **Rights of the Terminally Ill Bill**.

I have studied literature and news reports dealing with euthanasia over more than a decade. During this period I believe there has been a clearly observable movement of opinion in Australia in favour of a choice of medical practitioner assisted death for the terminally ill. This anecdotal impression is reflected by repeated opinion polling which shows an increasingly large majority in favour. There are no reasons from a science of public opinion measurement standpoint which suggest this is not a valid expression of the wishes of the Australian people.

It is the responsibility of members of the Australian Senate to act in accord with the wishes of the Australian majority rather than to reflect the views of various Church movements which remain opposed to euthanasia. It is evident that these views continue to be placed before senators in an organized way which has the effect of representing disproportionately the actual level of support for them in the community. Whilst I am not aware of an exact figure for this contrary view the results of euthanasia polling suggest that it now represents only a small minority, perhaps not more than some 10% of the Australian electorate. This would be in keeping with the figure quoted recently by the prominent Australian writer David Marr (*Quarterly Essay 26*, June 2007, p 49), that only 9% of Australians are now regular churchgoers.

When the Senate voted in March 1997 to overturn the Northern Territory's Rights of the Terminally Ill legislation and pre-empt passage of similar legislation in the ACT I resented such overriding of the democratic rights of self-governing Territories. I considered the Federal Parliament's action had demeaned Australian democracy. Since then the passage of a number of restrictive and intolerant pieces of legislation, coupled with illiberal administration, gradually brought about an alienation of Australian public opinion on civil rights issues. In my view this was an important factor in loss of support and defeat of the coalition Government last November.

In 1997 at an intellectual level I was also disturbed that Australia as a once socially advanced and progressive nation had fallen behind other world communities. In the intervening 11 years there has been increasing demonstration that public opinion on voluntary euthanasia here and abroad has in many respects moved beyond that of parliamentary representatives. This has been brought about particularly by a general realisation of the dramatic lengthening of life spans in advanced nations. This has been accompanied by widespread experience at the community level of deteriorating

condition and painful, lingering death by partners and relatives. With this has come a realisation that whilst survival is being prolonged, the quality of health in the last years of life is showing severe decline.

A current study in the United Kingdom by the head of a Cambridge research group on cell death declares that death and aging will be the defining problems of the twenty-first century. Apart from looming damage to the economies of both the developed and developing world it foresees a future where, whilst death recedes and aging continues '*each individual will have to face up to a slow, grinding, degrading journey into darkness, and possibly dementia*' (Guy Brown, *The Living End: The Future of Death, Aging & Immortality* (Macmillan 2008) p. 12). The study discusses at length the very rapid increase in the incidence of Alzheimer's disease (estimated in the United States as from 25-50 % at age 85!) and Mild Cognitive Impairment, the precursor to it, brought on by aging. It notes that life span is being extended at the end, rather than the beginning or middle, so that most of the extra life is being lived in ill health and disability. It describes trends of recent decades in Britain as follows (p 75):

Dying is no fun. UK (General Household) surveys have looked at disability in the final year before death. In 1969, 30% of such people needed help getting in and out of the bath, dressing and undressing and/or washing for at least a year before death. By 1987 this had risen to 52%, indicating again that extended life is being bought at the price of increasing years of disability. Mental confusion, depression and incontinence were all reported to occur over a longer time period before death in the 1987 survey than in the 1969 survey, again probably because of the increased age at death.....Symptoms experienced in the last year of life were analyzed as a function of cause of death in a 1990 UK survey.

Those dying from cancer in general suffered from the most symptoms in the final year: 88% suffering pain, 54% breathlessness, 59% nausea and vomiting, 41% difficulty swallowing, 63% constipation, 41% mental confusion, 28% pressure sores, 40% urinary incontinence and 32% bowel incontinence.....almost all suffered substantial pain.

In his concluding postscript (p 260) on how the problem of death should be approached, Dr Brown urged *We need to find out how people want to die and enable them to do it. Euthanasia will be inevitable for some people - let's do it properly. Stop sending people to hospital to die. Hospices should be as ubiquitous and well funded as maternity hospitals.*

The three editors of the recent well received general Australian study *In Search of Sustainability* (CSIRO 2005) noted the same problems arising from survival of the aged, making the extraordinarily challenging statement that *It is now becoming recognized that half our medical resources are devoted to people in the last year of life, producing an ongoing shortage of hospital and nursing home beds.*

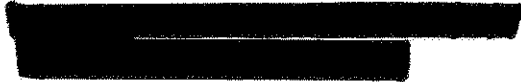
After declaring the need for medical practice to focus increasingly on the quality of life they did not shrink from identifying the profound ethical questions *whether it is justifiable or humane to keep people alive against their wishes when the prospect of quality living is close to zero* and whether there is a right to die and the relative merits or demerits of passive versus active euthanasia (p.10, Preface to *In Search of Sustainability*: edited Jenny Goldie, Bob Douglas & Bryan Furnass).

The above references are not drawn from polemical texts in the euthanasia debate but from high quality, cutting edge thought about current life (and death). It is the responsibility of parliamentarians everywhere to keep abreast of such thought.

The Australian Senate has an opportunity through Sen. Brown's Bill to redress the wrong done in 1997. It is hoped that the Legal & Constitutional Committee will recommend its passage.

Yours faithfully

Darrel Killen

A large black rectangular redaction box covering the signature area of the letter.