

Committee Secretary  
Senate Standing Committee on Legal and Constitutional Affairs  
Department of the Senate

Rights of the Terminally Ill (Euthanasia Laws Repeal) Bill 2008  
A Bill for an Act to Repeal the Euthanasia Laws Act 1997

Dear Sir/ Madam

Submission on the “Rights of the Terminally Ill (Euthanasia Laws Repeal) Bill 2008”

As a concerned citizen of this Country I have submitted my considered views on this proposed Bill. Everyone would like to avoid pain, but the means to achieve this can be contentious. The proposed Bill will destroy so much social capital that society as a whole will be poorer for it. The bill should not be approved.

I find it difficult to believe that the present Federal Government would step back in time and approve the killing of its citizens by lethal injection when it is arguing against Capital punishment by the same methods in other Countries when there is such expectation on technology to relieve pain in this millennium.

Will the Government be notifying those who submit submissions the decision taken?

Yours Faithfully  
Barrie Burrow

## COMMENTS ON THE PROPOSED EUTHANASIA REPEAL BILL

### GENERAL

The following statements are the considered views reached by myself in regard to the proposed Bill. It is hoped that the Federal Government is open-minded to the submission.

The problem of this Bill highlights very much the “Principle of Double Effect” – according to which it is permissible to take an action that has some bad effects, provided a good effect is intended.

“that bad effect” however cannot be used as a means to achieve good.

The relief of pain from any cause is of concern to medical professionals. Today pain management is recognized by most professionals and in all hospitals. However pain management should be carried out with safe, effective and approved drugs. A Government should not be involved in approving an action which is not ethical or a bad principle.

### QUESTION

In today’s society many people expect to have control over all aspects of their lives, which is a result of individualism and erroneous ideas of equality running wild. Legalising euthanasia seems such an easy solution but is it the direction in which society should go and is it a proper use of choice?

This then brings up the discussion of “assisted suicide and euthanasia” at the end of a person’s life, where no one has control over the end. Should euthanasia be legalised or not? The current debate too often ignores traditional values and laws, and bases the advocacy for euthanasia on distorted presentation of human rights.

### AWARENESS

In order to have an understanding of what is being talked about, there are some definitions or starting points for discussion.

**Voluntary Euthanasia:** where a person, usually a doctor, supplies and administers the lethal injection to take the life of a person at his/her request intentionally.

**Non-voluntary euthanasia** – this is where euthanasia is carried out without the consent of a person.

**Assisted suicide** where another person, could be a doctor, supplies the necessary drugs to the person wishing to commit suicide with the intention that they will be used for that purpose.

### Euthanasia is NOT

- Withdrawal or withholding of treatment even though it is sustaining which at the time is considered to be of no benefit or is making life difficult for the patient, and is not done for suicidal motives.
- Using a particular strength of medication, which has been found necessary to control severe pain even though it may over a period of time shorten the patient’s life?

These two items are not euthanasia as there is no intention to kill the patient. There have been reports of medical practitioners prescribing medication or giving lethal injections. Because it is done in private there is very little information about the frequency or the circumstances surrounding assisted suicide or euthanasia.

Australian law regards attempted suicide as a plea for help and therefore does not merit punishment. Suicide is usually not a rational choice nor is it a new phenomenon. No one knows, except the person thinking of suicide, what is going through their mind and what it means to be suicidal and what feelings are involved. Depression is the commonest cause of suicidal feelings, and should be urgently treated. Assisting in suicide is a crime.

### **Comments on Existing Laws**

The common law allows competent people the right to accept or reject medical treatment, except for suicidal motives, which also includes life support treatment. People can prepare an Enduring Power of Attorney in case of mental failure or not being in a position to make a medical decision, but law does not back up this document.

If no Enduring Power of Attorney is available, family members can be consulted on decisions on withdrawal/ withholding of unwanted or futile medical treatment, but they have the rights in law.

Attempted suicide does not carry any criminal penalty.

Person's involved with assisted suicide can be charged with manslaughter, whereas persons involved with euthanasia can be charged with murder.

Doctors can give as much pain relief medication as is genuinely required so control severe pain, even if it may finally cause death. Doctors cannot predict this with accuracy.

Some comments follow for and against euthanasia:

#### **Those in favour of euthanasia ~-( Proponents )**

- suggest that euthanasia would not harm society as a whole, and if there were any potential dangers these would be minimised by appropriate safeguards.
- prefer to propose assisted suicide in the hope that it will be seen as a less stark proposal. In a moral sense there is no difference and the intention of the proponents to have legalised euthanasia is unchanged.
- believe in the autonomy of the person, however the proponent's personal choice is usually dominant and at the expense of some other person's choice.
- consider that those who are disabled/ disadvantaged, etc do not "have a life." This equates disability with lower dignity and hence lower value. It is a creeping insidious concept, which needs to be condemned.
- acknowledge that abuses will occur, which seems strange when most of these proponents would oppose the death sentence for criminals.
- propose many guidelines for euthanasia. There are no safeguards that could be guaranteed, nor would any Government attempt to provide a guarantee. The risk of abuse cannot be eliminated.

It is thought that patients suffering with depression as well can be sorted out by being examined by a psychiatrist. Unfortunately it is known that psychiatrists have failed to detect depression.

#### **Those against euthanasia ~-( Opponents )**

- consider that no person no matter whom they are and no matter the reasons or motives should not have any ultimate power over the life of another person. The UN Universal Declaration of Human Rights, 1948 supports this right.
- believe that killing the innocent is a crime no matter which country they live in.
- believe that a policy of euthanasia for children and incompetent adults is regarded as basically wrong,

- believe that a general reduction in respect for life would follow if official barriers are removed to allow killing.
- question who would do the killing. It is always assumed that doctors care for the sick and ill people. Doctors give medicines not lethal injections.
- Believe that any law on euthanasia could be abused.

## **REFLECTION on ACTION for the GOOD of the COMMUNITY**

A government in a democracy is required to ensure that the law protects the citizens. Usually this is to protect life, right to free speech and to assemble and to be represented in government. A government even has to protect its citizens from itself as well as individuals/ groups who would try to do harm to the citizens.

The state does have, a significant role in protecting people's freedom and choice in the event of terminal illness and death. Part of that role is to legislate against euthanasia so that the complex structure of choice at this most difficult time remains intact.

There are many people who believe that they are free to choose their own version of morality. Hence the reason why so many various opinions are expressed. Individualism plays a large role by those promoting euthanasia.

There is always a niceness about the way people who are promoting euthanasia. Also there are religious reasons to resist euthanasia, however even though there are encyclicals written for believers they are also written for people of good will. To convince everyone, it is necessary to show that the moral principles involved are relevant not just to believers, but to all others.

There are many social risks in contemplating legislation for euthanasia. These include:

- There can be any number of “ideal or good causes” for the legislation of euthanasia. But these “ideal or good causes” do not have relevance in the real world of social and present day medical practices.
- No matter what “safe guards” are put into place, someone will immediately start to work and find any loopholes in the legislation to gain an advantage for their particular cause.
- It will always be the poor, disadvantaged, those with no family and those with no access to good medical treatment who will suffer from the loopholes in the law.
- public debate only occurs with incidents that are dramatic, contentious and provocative, particularly for the media.
- Costs are always put ahead of the persons who are ill or so called “not having a life”. Unfortunately for some people costs are paramount. On the other hand some will make money.
- There are many people who advocate euthanasia while in good health and pontificate on quality of life, but continued life is usually preferred when confronted with an illness themselves.
- If society allowed voluntary euthanasia then there is no guarantee that society would be able to ensure that involuntary euthanasia did not occur.
- And then what about Mammon! People who will make money by legislation, and inheritances of families.
- The old red herring of the growing number of aged people, more a problem of rationalists wanting to prejudice the future economy.

The inaccurate use of the word “euthanasia” with its connotation of happiness is a useful tactic for those proponents who wish to politicise murder / suicide. This misuse of the word debases any claim to honesty or logic, which the proponents might wish to advance.

### **WHY are Doctors Singled out as solely responsible for carrying out Euthanasia**

Because doctors are required to be the givers of lethal injections for either assisted suicide or euthanasia, this places a whole new activity and ethical problem for all doctors.

Does this NT Bill allow doctors/ nurses/ other medical staff to decline participating in euthanasia practices? If not why?

Doctors should not be the ones to determine the quality of life that people should live.

Withdrawal or withholding of any life sustaining treatment which at the time is considered to be of no benefit or is making life difficult for the patient. There is a difference between killing a person and letting a person die.

In an increasingly litigious society will doctors be so constrained that whatever one doctor advises another doctor can be found to refute the previous advice?