

Investigation into Ending Life

I oppose to Assisted Dying/Euthanasia/ Assisted Suicide because to me every time someone takes their own life or another is asked to assist in this process is a mark against our society because life is a gift. Each person is unique and valuable and contributes to society. I believe that End of life “choice” gives yet another way for society to absolve itself from caring for people who deserve our care.

This submission is my reflections on the bill as an Anglican priest and disabled person trained in Sociology.

The factors that contribute to the desire to end one's life

I believe that factors contributing to the desire to end one's life fundamentally fear of suffering, fear of the unknown, being unable to imagine losing one's independence.

People cannot imagine living life in another way, particularly if it means loss of autonomy and dependency. This can be hard when society prizes individualism over community and those who are dependent tend to be ignored.

Throughout our lives we are adjusting to new situations- it is part of being human. Our society perpetuates the myth that our worth depends on us being autonomous and independent. In reality as a society we are all interdependent and need each other to build strong communities where all can flourish.

Often people cannot imagine how they can live a worthwhile life being dependent on others for personal care so they say “I would be better off dead than suffer the indignity of being a burden on others”. This flies in the face of those who are disabled and are reliant on others for personal care and make valuable contributions to society. Is a person less valuable because they rely on others for personal care? The indignity comes from not having that assistance with that care provided in a timely and respectful manner. There is a great need for debate around how we as a society provide this care.

I see this bill as a result of our society's attitude towards life. We live in a death-denying culture and this may contribute to our fear of our mortality and of death and so we need to control it.

Of course we try to avoid suffering, but it is part of life. Suffering is part of growth and at each stage of life we suffer to some degree. For example a child learning to walk will fall over, young adults need to learn about relationships. Dying too is part of

life and there will always be suffering and loss. As a society we do have a duty to ease suffering but we cannot end life.

From my reading and discussion with others, when a person wants to end their life because of pain and suffering is assisted to deal with these issues, often they actually want to keep living. It is more helpful for professionals and support people to discover what the person is thinking and feeling and so do what is possible to help. We cannot say to those who are terminally ill that we do not value their quality of life enough to want to improve it.

Increasingly, our society does have the technology to prolong life. At times the medical profession who are trained to preserve life at all costs may artificially sustain life when it may be preferable to let someone die peacefully. Alternatively it may be the family who cannot let the person go and demand treatment that may prolong but not increase quality of life.

There are ethical questions to be asked about the appropriate use of this technology. These are challenging issues that need to be discussed in our society. The current debate on “Assisted Dying” may actually prevent us from debating the appropriate use of technology to prolong life.

The effectiveness of services and support available to those who desire to end their own lives?

The wording of this question implies that it is acceptable for people to end their own lives. Yet there is great concern in society around young people and those who are elderly committing suicide. Over the last decade a lot of state resource has been poured into suicide prevention.

Yet here we are saying that it is okay for some people to end their own lives. Is the state saying if a person appears fit and healthy we will put resources into preventing you from committing suicide; yet if you are terminally ill and want to die we will assist you? This is a double standard and who decides whose life is worth living?

The argument about “assisted dying” being a rational choice whereas “suicide” being an irrational one seems to be a justification to distance “assisted dying” from “suicide”. In this context, rationality and irrationality remain a value judgments often made by people who are fit and healthy and who are asked by the state to pronounce on these matters.

People, who desire to end their own lives, can commit suicide or have the option of having a notice “Do Not Resuscitate” placed on their file if they should be found unconscious. When people are unwell they do have the right to discuss treatment options where they wish to be made well or whether it is palliative care only. There is a question as to how well these challenging discussions take place between an individual, their family and the medical professionals. More education is needed as to how to better facilitate these discussions.

The attitudes of New Zealanders towards the ending of one's life and the current legal situation

Some disabled people and others fear this proposed bill will lead to people ending their lives under duress however subtle. The proponents of the bill argue that this debate is all about individual autonomy without consideration of the wider effect on society. While on the surface assisting an individual who is sick and dying to take their own life may be seen as a compassionate act, we, as a society, need to take heed of the inherent dangers in such a bill.

Many in the disability community and others especially those who are elderly, experience lack of autonomy particularly when ill and decisions are taken out of their hands. This is often done with the best of intentions, being told it will make it easier for all. Assisted dying/suicide could so easily be extended to people who are vulnerable because of age, disability and terminal illness because others perceived it as being in their best interests.

This debate seems to me to be about the autonomy of an individual to be assisted to end their life versus the collective responsibility of society to protect all people from abuse. It is arrogant for society to assist people to end their life because some perceive either themselves or others to be enduring undue suffering and this action is for their own good. It is preferable for society to provide a high quality of personal and end of life care so people have confidence that they can live fully and die with dignity.

Rev Vicki Terrell