SUBMISSION:

"VOLUNTARY ASSISTED DYING BILL 2021"

by

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TO:

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Voluntary Assisted Dying Bill 2021:

When one's beloved relative is in agony and there does not appear to be any medical answers, it can be tempting to think of euthanasia—after a suffering loved one has gone we can't see them in severe pain anymore.

Much of the below text is from the Internet. I have found it very worrying.

The below fact sheet is based upon developments in the Netherlands through and since 1994. It includes data from the "Remmelink Report." See Holland

Holland legalized euthanasia many years ago. It is compelling to read of the situations which have happened in that country since the legalizing of euthanasia, or "voluntary assisted dying". The term "slippery slope" is very apt when discussing the many times that abuse creeps into frequent situations.

Palliative Care provides an ethical solution: Currently there are pain control centres in many large hospitals. The pain clinics have thousands of different concoctions of drugs to control pain, with specially trained staff to administer them. There are specially trained Palliative Care nurses who call on patients and their families, whom they teach how to care for their loved ones and keep them more comfortable, who had been in severe pain till the pain clinic was able to intervene.

No doubt a government will find that to have a palliative care system is more expensive than euthanasia, which is a cheap and easy way out.

(Paraphrased from the Internet):

"...[Holland.

Euthanasia became legal in the Netherlands on April 1st 2002.

Right-to-die advocates often point to Holland as the model for how well physician-assisted, voluntary euthanasia for terminally ill, competent patients can work without abuse. But the facts indicate otherwise.

Guidelines have been interpreted by the Dutch courts and Royal Dutch Medical Association (KNMG) in ever-broadening terms.

Dutch euthanasia practice has ultimately given doctors, *not patients*, more and more power.

"Dead patients cost less than live ones."

"Giving doctors the legal power to kill their patients is dangerous public policy".

What is good for the family is good for the nation.

An example of Palliative Care:

A male patient with carcinoma of the bladder was sent home to die. A Palliative Care nurse called regularly on the elderly couple. The wife led her into the back yard down the path to the chook-yard, where the patient was sitting in his favourite chair, smiling, talking and patting his chooks. He was wearing equipment on his belt which automatically infused a prescribed amount of morphine into his vein, ensuring his comfort.

I found that it is very common, perhaps usual for a patient wishing to return home to die.

I would certainly prefer to die at home surrounded by family than in a hospital or nursing home with its inevitably impersonal approach.

I could not more strongly condemn euthanasia, or "mercy-killing" for human beings.

Euthanasia is both morally and religiously wrong.

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