

I oppose the end of life choice bill. I'm convinced it will make vulnerable people even more vulnerable.

Some of these vulnerable people are terminally ill. Diagnoses of terminal illness can be wrong, and even if the diagnosis is correct, time frames can be incorrect. If patients have to be able to give their written consent they may not be able to give consent at the time when they wish to die, therefore they would have to give consent sometime before their request is actioned; at a later time can doctors be sure the patient still wishes to die?

My grandma had several strokes. My dad was asked by a rest-home duty manager to decide whether, if she stopped breathing for some reason, she should be resuscitated. Dad pointed out that Grandma was capable of making this decision herself and that they should ask her. If supervisors in the aged care system now have so little idea or respect for appropriate procedures regarding life and death decisions, should we not be concerned? Could we in the future be sure that a choice to end life will truly be the patient's decision and not that of administrators, family members, or others?

In the Netherlands every year, hundreds of people are euthanised without their written consent, despite this being illegal. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3070710/#b7-conc-18-e38> It's alarming that they got to this situation. Despite safeguards, worldwide about 900 people are reported to be euthanised without written consent each year. Others are making decisions about euthanising supposedly in the best interests of their patients/victims.

Although proponents of this bill say that it would put an end to pain and suffering, in Oregon where assisted suicide is legal, prevention of pain is not even in the top five reasons people end their lives. Two of the top reasons are a feeling of losing autonomy and a feeling of being a burden to others. <http://www.oregon.gov/oha/ph/ProviderPartnerResources/EvaluationResearch/DeathwithDignityAct/Documents/year17.pdf> p.5

Rather than being a last resort to end pain, death is being used instead as a pre-emptive measure before there is pain. Euthanasia requests seem to be motivated by fear rather than actual suffering. This fear could be dealt with by real information, encouragement and support.

If people in Oregon are choosing death because they feel a burden to their families, it reflects poorly on societal attitudes to the elderly that they should be made to feel so unvalued. It indicates a need to endorse the value of elderly people. Elder abuse is already a problem in this country, and we should be careful that our legislation does not encourage it further.

There has been quite a lot of discussion that I have heard in the media about the effects of this bill on elderly or terminally ill people but I have heard only a little discussion about the effects on those with disabilities. Someone can choose to end their life if he or she "

suffers from

a grievous and irremediable medical condition; and is in an advanced state of irreversible decline in capability; experiences unbearable suffering that cannot be relieved in a manner that he or she considers tolerable; and has the ability to understand-the nature of assisted dying; and the consequences for him or her of assisted dying." In other words -they suffer from a disability and they consider their suffering intolerable. This seems to be a very vague statement that could be interpreted in a variety of ways.

If we give disabled people (who are not terminally ill) the option of dying we are saying we believe their life is of so little value they could be better off dead. There are many cases where severely disabled people have after a period of depression and or frustration gone on to lead a full and meaningful life. Some examples include Nick Vujicic (no arms and no legs) Helen Keller (blind and deaf) Joni Eareckson (paralysed from the neck down) Temple Grandin (autistic) Dr Earl Carlson (Cerebral Palsy) Mark Grantham (Cerebral Palsy) Martin Pistorius (Spent 13 years locked inside his body unable to communicate) Karen Gaffney (Downs syndrome- now an advocate for people with Downs Syndrome emphasising the fact that every life matters). What a terrible tragedy that we encourage a disabled person in suicidal thoughts; to believe that death is a better option for them than life. We need to support our disabled community and break down barriers to access transport, entertainment, health services and to employment.

The disabled are already marginalised in our society: for example, 88,000 disabled people are underemployed. * <https://www.tvnz.co.nz/one-news/new-zealand/employers-encouraged-take-more-workers-disabilities>

As someone with a disability, I worry that others with disabilities will not be encouraged to see how full their life could be, and instead consider death as a preferred option. It also concerns me that there are financial incentives for governments, insurance providers, and health care providers to advocate this position. It is obviously cheaper for some disabled people to die than for them to be a lifelong burden to the healthcare system. I worry about myself that I may become further incapacitated in the future. Should I then think my life is not worth living? Should others encourage me to think of death as an option?

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