

Item of business :

# End of Life Choice Bill

Submission name :

**Ms Anne Humphries**

## Comments

**Submission End of Life Choice Bill**

I oppose the End of Life Choice Bill.

I am a registered nurse, working in a large public hospital. Without exception, the patients on my ward are in hospital because they are going through a crisis in their lives. I help to look after people of all ages and ethnicities, from vastly differing backgrounds and from across the entire socio-economic spectrum. Some of our patients are told that they only have months to live, even with surgical or other life-prolonging intervention. Others are diagnosed with longer-term, but nevertheless debilitating, illnesses. My work includes caring for people at the end stage of their lives – those who require palliative care. The emphasis when caring for those patients is to ensure that they are comfortable. A key part of my work involves caring for the families and loved ones of these people, as they all adjust to their changed circumstances. It is these circumstances that make such patients – and their families – especially vulnerable. The introduction to the End of Life Choice Bill states that *risks can be managed and the law targeted to the small but significant group of competent adults who are not vulnerable and who wish to die without unbearable suffering and pain* . In my view, which is based on my own experiences caring for people with terminal illnesses, anyone who is confronted with a terminal prognosis is vulnerable.

In addition to the person who wants to end their life, assisted dying involves more than one person. It involves the people who prescribe and administer the drugs. Although the Bill does not explicitly refer to nurses, we are there by implication. Nurses administer the drugs that doctors prescribe. Our profession was founded on the moral premise of caring, and the belief that nurses have a commitment to do good[1]. Like all other nurses practising in New Zealand, I am committed to the principles of the Treaty of Waitangi – namely, partnership, participation and protection. I have a duty of care towards all of my patients. Therefore, I find the thought of being asked or expected to do something which would end a patient's life, absolutely abhorrent. Although there are provisions within the Bill for conscientious objection, it is simply not enough. Just knowing that my colleagues were assisting someone's death in my workplace would be morally distressing for me. The entire scenario flies in the face of everything that we do for our patients, as registered nurses.

When I joined the nursing profession – a profession that I am proud to be part of – I didn't sign up for this. I became a nurse to make a positive difference by caring for my patients with the goal of sustaining life, irrespective of the anticipated length of my patients' lives. Those two principles – the ending or sustaining of life – are incompatible. They are the antithesis of each other. If this Bill becomes law, within my own workplace we will on the one hand be doing our utmost to keep patients alive, for example those who are acutely unwell and deteriorating rapidly, while on the other hand we will be expected to administer lethal drugs. The state should not be compelling third parties to assist in the ending of life. Under the law of NZ there should be no room for allowing assisted dying as a state sanctioned act.

Death is an inevitable part of life. Our existing healthcare and hospice systems are there to ensure that terminally-ill people are well-cared for, irrespective of their prognoses. This is where our efforts and resources should be targeted. No-one in Zealand should ever feel they are alone and unsupported when they, or a loved one, is dying.

Furthermore, the passing of this Bill could potentially lead to a tier system where life is concerned, with some lives being regarded as having more worth than others. It is of huge concern to me that a Bill can be enacted which makes it legal for some people to end their lives, when New Zealand has the highest rate of teen suicide in the developed world[2]. Consideration of this Bill must also be viewed within the context of the high rates of mental illness and depression amongst our population. If the Bill becomes law, it will inevitably undermine suicide prevention efforts and effectively normalise the ending of one's life. The term 'unbearable suffering' can apply equally to mental suffering as well as physical.

For these reasons I do not believe it is safe to legalise assisted dying within New Zealand.

Thank you for taking time to read and consider my submission.

[1] New Zealand Nurses Organisation. Code of ethics. Wellington, New Zealand: NZNO, 2010, <http://www.nzno.org.nz>

[2] UNICEF NZ. Innocenti Report Card 14. <https://www.unicef.org.nz>

## **Recommendations**

I recommend that the End of Life Choice Bill be rejected.