



National Office
4 Champion Street
Deakin ACT 2600
T 02 6259 0431
E natoffice@acl.org.au
ABN 40 075 120 517

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Protecting the Rights of Older Australians from Abuse
The Executive Director
Australian Law Reform Commission
GPO Box 3708
Sydney NSW 2001

Protecting the Rights of Older Australians from Abuse

The Australian Christian Lobby (ACL) welcomes the opportunity to provide input into the Australian Law Reform Commission's inquiry into Protecting the Rights of Older Australians from Abuse (Elder Abuse). ACL supports the ALRC inquiry into Elder Abuse and looks forward to the final report with anticipation.

About the Australian Christian Lobby

ACL's vision is to see Christian principles and ethics influencing the way we are governed, do business, and relate to each other as a community. ACL seeks to see a compassionate, just and moral society through having the public contributions of the Christian faith reflected in the political life of the nation.

With more than 80,000 supporters, ACL facilitates professional engagement and dialogue between the Christian constituency and government, allowing the voice of Christians to be heard in the public square. ACL is neither party-partisan nor denominationally aligned. ACL representatives bring a Christian perspective to policy makers in Federal, State and Territory Parliaments.

Assisted suicide and euthanasia as a form of elder abuse

The coercion and abuse of the elderly, which this Commission seeks to understand and provide a response to, should highlight to all the danger of legalising assisted suicide and euthanasia. The elderly are often vulnerable, due to sickness, frailty and financial circumstance, and are often keenly aware of the 'inconveniences' they place on carers and families alike. It is an absolute tragedy that this vulnerability is at times taken advantage of by people willing to use their positions of physical or emotional strength for personal gain. Elder abuse is a tragedy whose remedy lies in the continual upholding of every person's dignity irrespective of functional utility.

When we consider the context of vulnerability which the elderly find themselves in, it is clear that assisted suicide and euthanasia can never be legislated with sufficient protections from abuse.

Unfortunately, despite the risks faced by the elderly the Victorian Government has announced its support for the legalisation of assisted suicide and euthanasia and intends to introduce legislation in

the Victorian Parliament in the second half of 2017. The Government has stated its intention¹ for the bill to be consistent with recommendation 49 of the report handed down by the Parliamentary Inquiry into End of Life Choices.

Doctors have had a deep obligation to preserve life and throughout the history of medicine they have taken oaths to do so. Consider the Hippocratic Oath which includes the statement:

*I will use treatment to help the sick according to my ability and judgment, but never with a view to injury and wrong-doing. Neither will I administer a poison to anybody when asked to do so, nor will I suggest such a course.*²

The Australian Medical Association (AMA) has adopted the World Medical Association's (WMA) Declaration of Geneva as a contemporary companion to the 2,500-year-old Hippocratic Oath for doctors to declare their commitment to their profession, their patients, and humanity. The full text is as follows:

*I will maintain the utmost respect for human life; I will not use my medical knowledge to violate human rights and civil liberties, even under threat; I make these promises solemnly, freely and upon my honour.*³

The trust between a patient and a doctor is fundamentally important to our society and is eroded when doctors assume the conflicting roles of both healers and arrangers of death.

The focus of the assisted suicide and euthanasia campaign has regrettably been on ending people's lives rather than assisting them to live more fully. The elderly and infirm face many challenges on a daily basis. This does not diminish the value of their lives, rather, the strength, courage and tenacity of elderly family members can often inspire younger family members to embrace resilience and teach them the value of prioritising relationship over functional utility. Acceptance of assisted suicide and euthanasia pre-supposes a radical cultural shift involving a denial of the fundamental sanctity of all human life regardless of the functional utility or "quality" of that person's life.

During last year's debate over a bill that would have legalised euthanasia in South Australia, State politicians heard from people such as [Jax Jacki Brown \(Vic\)](#), [Naomi Clarke \(SA\)](#), [Katharine Annear \(SA\)](#), [Glenda Lee \(SA\)](#), [Sam Connor \(WA\)](#), [Kelly Cox \(NSW\)](#). Each spoke about abuse, about living with disabilities, about discrimination and about the devaluing of their lives. Their stories revealed that they genuinely fear the possibility of assisted suicide and euthanasia. Since the disabled and elderly are vulnerable in similar ways, the statements of these disability advocates are equally as applicable to the situation of elderly people.

Legalising assisted suicide and euthanasia will create a culture which accepts that some people will end their lives when their "quality of life" has decreased to some subjective level of an individual's choosing. All persons, no matter their age or frailty are endowed with an innate human dignity which should never be violated. Our laws and institutions need to affirm this unique and intrinsic worth of all human beings, no matter what their physical, mental or emotional state might be.

The vulnerability of the elderly to feel pressure by family members, medical teams and hospital staff to undertake assisted suicide and euthanasia should not be dismissed. Even with supportive families,

¹ Media Release: Victorian Parliament To Vote On Assisted Dying Legislation. *Attorney-General, Minister for Health, Premier*. 8 December 2016.

<http://www.premier.vic.gov.au/victorian-parliament-to-vote-on-assisted-dying-legislation/>

² Hippocrates of Cos (1923). "The Oath". Loeb Classical Library. 147: 298–99. doi:10.4159/DLCL.hippocrates_cos-oath.1923

³ Media Release, Australian Medical Association, AMA Adopts WMA Declaration of Geneva, 28 September 2006, <https://ama.com.au/media/ama-adopts-wma-declaration-geneva>

many elderly or disabled people will be aware of the “burden” they place on their loved ones, financially or emotionally. This abuse could be in the form of pressure, real or imagined, to die when an elderly person feels he has become a burden on his loved ones the strength to fight this pressure, even if it is imaginary, will be more difficult to those who are otherwise in physical pain or mental anguish. It could also be in the more direct form of the elderly being taken advantage of and even having euthanasia authorised by carers who no longer want to give the time or the effort or the money to caring for their elderly patients. In extreme cases, relatives who stand to gain through inheritance, or those seeking vengeance, could take advantage of the laws.

The kind of pressure faced by the elderly and sick to not “be a burden” on family and friends can be seen in the latest figures of assisted suicide out of Oregon, a jurisdiction which has legalised assisted suicide. “Being a burden” to family and friends is a concern for close to half the people who are given assistance to take their own life. Patients reported the concern of being a burden to family, friends and caregivers in 48% of cases in 2015. This points to an alarming aspect of assisted suicide. It is clear that people in Oregon who feel they are a burden on family and friends see assisted suicide as a way of “resolving” this.

Only a third of patients in Oregon mentioned pain as a reason behind why they were committing assisted suicide with 35.3% citing it as a reason for 2016, with an average of 25.2% reporting this concern over the 1998-2015 period.

Of deep concern is the figure that for 100 out of the 133 deaths there was no reporting of who was present when the poison was ingested. The lack of attending physician means that out of 133 deaths, it is unknown for 106 people whether the ingestion resulted in complications.

For the latest figures see:

- Oregon Death with Dignity Act Data summary 2016. *Oregon Public Health Division, Center for Health Statistics*. 10 February 2017. Retrieved 27 February 2017.
<https://public.health.oregon.gov/ProviderPartnerResources/EvaluationResearch/DeathwithDignityAct/Documents/year19.pdf>

Assisted suicide and euthanasia endangers the lives of the most vulnerable, the people we should be striving hardest to protect. As a society, we should be seeking to ease people’s pain through better palliative care, not promoting killing as an alternative to helping them.

Thank you for considering the important matters raised in this submission,



Lyle Shelton
Managing Director
Australian Christian Lobby