

Medically-assisted dying is an option of last resort when palliative medicine cannot, or can no longer, meet the sufferers' needs.

Because technology keeps offering opportunities for people to survive longer, most of us will one day have to decide if and when a life of suffering – that would soon end anyway – is worth prolonging.

The philosopher, John Stuart Mill in his 1859 *Essays on Liberty* said: this principle lays down that the only defensible reason for preventing people doing with their lives as they wish is if their acts cause harm to others.

**WE ONLY GET ONE SHOT AT DYING  
EXERCISE YOUR HUMAN RIGHT TO DIE WITH DIGNITY**

HOW CAN YOU HELP:

WRITE TO YOUR LOCAL MP; WRITE TO THE PAPERS; RING TALKBACK RADIO; TELL EVERYONE YOU KNOW; JOIN DYING WITH DIGNITY NSW

**85%** OF AUSTRALIANS SUPPORT A CHANGE IN THE LAW ON MEDICALLY ASSISTED DYING

**DYING WITH DIGNITY NSW**

DWDnsw is a not-for-profit organisation and we rely on membership, donations and bequests to continue our work.

The larger our support base – the more effective our representations for legislative change.

Any donation/bequest will be gratefully accepted.

**respect for the right to choose**

MORE INFORMATION AT [WWW.DWDNSW.ORG.AU](http://WWW.DWDNSW.ORG.AU)



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**WITH DIGNITY**  
**DYING**



**ABOUT**

# DIGNITY

DYING WITH

It may happen to any of us – or to those we care for – an accident or illness brings us to a point where our lives become intolerable – with no reasonable prospect of recovery or substantial improvement.

Some people in such circumstances may wish to end their lives and consider it cruel to be denied their release. Even if you yourself are spared such a dying, as a humane person you would wish to help those who suffer in this way and whose torments are beyond endurance. You would want to do what you could to ensure that their wishes are respected.

The aim of Dying with Dignity NSW is to promote legislation which, with the proper safeguards, entitles any person suffering severe pain or distress, with no reasonable prospect of recovery, to a painless, medically assisted and dignified death in accordance with his or her expressed wish and direction.



## WHAT

are the arguments



### Sanctity of Life Argument:

- Life is sacred, a gift from God
- Deliberately shortening life is against God's will
- Only God should determine the time of death
- 'Suffering in the last stages of life is part of God's saving plan' (Pope John Paul II, 1980)

### The Doctor-Patient Relationship:

- Doctors role is to cure, not kill
- Doctors should not play God
- Doctors would lose respect and trust

### Palliative care argument:

- Palliative care can make terminally ill patients comfortable
- Patients receiving good palliative care don't want assisted-dying
- Kill the pain, not the patient
- Sanctioning medically-assisted dying will undermine palliative care



### This argument fails because:

- Our opponents make many exceptions (self-defence, war, capital punishment, abortion)
- Compassion for a suffering person's dying wish justifies exception
- Allowing suffering against a person's wishes is cruel
- Career churchmen are not the only interpreters of God's will
- Many people do not believe in God
- Believers should not dictate to others how to live and die

### This argument fails because:

- Doctors role is to help patients and families with life/death decisions
- Doctors naturally tend to preserve life
- Doctors undermine trust if they turn away from calls for help
- Doctors already help their patients to die
- Medical professionals should develop guidelines for responding to requests

### This argument fails because:

- Palliative care cannot relieve all suffering
- Some patients receiving optimum palliative care still request assistance to die
- The debate stimulates palliative care development
- People want availability of both palliative care and medically-assisted dying
- Emphasis on autonomy and quality of life is common to both

# 3 moral principles

- 1** Respect for self-determination. It is self-evident that in a free, democratic society individuals have a right to make their own decisions on matters that are primarily their own concern. The way one dies is such a matter. It is accepted that the right of personal decision-making should not be so exercised as to infringe, or deny, the same right to others, or to harm society. The question is not why assisted dying should be permitted but why it should be prohibited.
- 2** Concern for the quality of life. There is far more to the concept of life than a beating pulse, the drawing of breath, or the reaction of nerves to a stimulus. Life embraces self-awareness, the ability to communicate with others; to be alive is to have conscious identity, to be a person. When such attributes have gone, never to return, life is devoid of quality and of meaning. No one should be forced to endure, against his/her will, such an end to life by prolonging the dying. Similarly, a patient subject to severe and unremitting physical or mental suffering, should have the option of quick and painless relief, whether or not the condition is terminal.
- 3** Compassion for those who suffer. This principle is embodied in medical and nursing practice and in secular and Christian ethics; it is recognised as being among the primary virtues. Our concern is that compassion should not be denied to those who seek merciful release from a life which has become meaningless and for whom there is no prospect of remission or cure.

## advance health care directives

Sometimes called a living will, an advance health care directive is a statement, written in advance, setting out a person's medical wishes for the time when they are coming to the end of their life.

An advance health care directive alerts doctors, and others, in writing as to their wishes. An advance health care directive allows you to record your wishes for future treatment in case you lose the capacity to make these decisions.

Dying with Dignity NSW members receive two copies of an advance health care directive as part of their membership – along with information about appointing an enduring guardian. A recent common law case decision means there is no doubt that advance health care directives are legally binding in NSW.

## DYING WITH DIGNITY LEGISLATIVE CHARTER

- 1. Persons with a terminal or incurable illness that creates profound suffering shall have the right to choose to die with dignity in a manner acceptable to themselves and shall not be compelled to suffer beyond their wishes.**
- 2. No individual, group or organisation shall be compelled to either participate or not participate in an assisted or supported death of a sufferer.**
- 3. It shall not be an offence to confidentially advise a sufferer of their right to choose to die with dignity, or to support such a death, or to be present at the time of that death.**
- 4. Sufficient safeguards shall be in place to prevent abuse of the process.**