

# MEDIA RELEASE

## For immediate release

From: Kasey McCulloch, Media Officer, Mercy Health

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**The following statement is attributable to the Group Chief Executive Officer, Mercy Health – Adjunct Professor Stephen Cornelissen**

Mercy Health is a provider of inpatient and community palliative care services, as well as a range of residential aged care, home and community care, medical, surgical, sub-acute, mental health, maternity and newborn services.

Through our services, we care for people who face illness, injury, pain and death at every age and stage of life.

This practice of care requires skilled health and medical attention along with competent and compassionate conversations where the rights and needs of each person are put first to make sure their wishes and fears are heard.

At Mercy Health, we believe life to be sacred and not for individual self-determination. We do not agree with any legislation which would allow a life to be ended, as by doing so would be accepting that a value can be placed on life and on human beings.

We are also concerned about the risk of vulnerable people being exploited and even coerced into death if assisted suicide legislation is passed in Victoria. We believe this proposed legislation is not only unethical but unworkable.

It could lead to future judgements about the value of life especially about who can live and die across a range of conditions including newborn babies with disabilities and those with mental illness.

We are deeply concerned about the proposed assisted dying legislation but we are just as concerned that some people facing illness, pain or death believe a discussion about dying a good death needs to involve physician-assisted suicide.

Specialist palliative care not only offers the vast majority of patients with effective pain and symptom relief, it also offers support and information about dying. The provision of comprehensive palliative care services is a vital part of the health system to make sure patients and their loved ones receive the care and support they deserve during the dying and death process.

Mercy Health already assists patients in achieving a good and comfortable death, with most of our patients able to die in their place of choice (home, hospice or hospital), with a palliative care team supporting them and their loved ones.

Witnessing a good death can allow those left behind the opportunity to grieve, grow and perhaps even accept their own mortality. To witness death and be a part of it as a lived experience is a sacred act that we should not deny nor place a value on.

However, we acknowledge some communities have better access to specialist palliative care and pastoral care services than others and this should be addressed, along with greater investment in the sector and end-of-life research.

We understand why the community is having a discussion about end-of-life choices. Every person should be able to talk about their wishes and feel reassured that they will receive high quality compassionate care at the end of their life. However, a fear of dying and a fear of the unknown should not be drivers for determining whether or not Victoria legalises assisted suicide.

Physician-assisted suicide is a dangerous and illogical leap. It is a simplistic attempt to answer a question that deserves a much more comprehensive response.

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