

dying with dignity

WINTER 2014 NSW

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President's Message



It is both exciting and daunting to take over the role of President of Dying with Dignity NSW. Daunting, because I am trying to balance my new role with continuing to work in my practice as a clinical psychologist. But also exciting, because there are lots of interesting things happening in the assisted dying arena, both on the home front and overseas.

Dr Rodney Syme

The most significant event in recent weeks has been the public admission by Dr Rodney Syme that in 2005 he provided terminally ill cancer patient, Steve Guest, with the lethal drug Nembutal. As many readers know, Guest had advanced oesophageal cancer, and was weak, disabled, skeletally thin and reliant on a stomach peg for nutrition. He was particularly distressed at his lack of control, and made a public plea for help while being interviewed on Melbourne's ABC radio.

As a result of his public admission in *The Age*, we now know that Dr Syme provided Guest with the drug that subsequently enabled him to end his life. The admission spurred a series of further newspaper articles in *The Age* as well as other papers, the majority being sympathetic to Syme's actions. *The Age* editorial was particularly supportive, and urged the Victorian Liberal Government to refer the issue to the Victorian Law Reform Commission, which is ideally placed to receive submissions and report back in detail.

Dr Rodney Syme (pictured) chose to speak out because of his frustration at the lack of progress in this area. He reminds us that in the last 20 years, 16 separate assisted dying bills have been brought before various Australian State Parliaments, and in spite of widespread public support, not one has passed.



By coming forward, Dr Syme is daring the Victorian legal authorities to charge him: *"I just believe passionately that there are too many people suffering too much not to try a little bit harder to change things ... And a lot of these things it seems will only be changed in a court decision, so bring it on."*

If he is charged, the inhumanity of the current laws will be highlighted through further media publicity, and the ensuing debate may even force our MPs to respond to public opinion.

If, on the other hand, legal authorities refuse to prosecute, they will be sending a strong message about the current law – that it is so unreasonable that even the Office of the Director of Public Prosecutions is not prepared to enforce it.

Response to our Letter Writing Campaign

The other important development has been the great response to our call to members and supporters to write to their NSW Member of Parliament (MP), asking them to declare their stance on end of life choices. We have had a terrific response, and I am very grateful to those of you who have contacted us to pass on your MP's reply. So far we have written responses from 37 MPs and we have received some great examples of personal letters written by our members to their MP.

To those of you who have not yet contacted your local MP, I strongly urge you to do so, as we still have no response from many western Sydney and regional electorates. This information will be vital to our *"Make Our Pollies Accountable"* campaign, in the lead up to the 2015 election.

Please remember that most MPs do care what their constituents think, and a letter, phone call or visit from residents of their electorate can make a significant difference. In some cases it may influence the MP's perspective, while in other cases it simply reminds them that their constituents care about this issue. Finally, having to declare their attitude keeps our MPs accountable, and publicising their response prior to the election will enable voters to make informed choices when they come to vote.

Later in the year we will be asking our members to also write to candidates who will be running against the sitting member, and to report their responses back to our office. (In most electorates these candidates have not yet been preselected.)

Assisted Dying Bill Moved in the Senate

A very important recent development has been the move by Greens Senator Richard Di Natale to table a draft bill to legalise assisted dying in the Federal Senate. Following the announcement, the ALP Member for Perth, Alannah MacTiernan, has offered to co-sponsor the Bill. Both have received substantial press coverage.

The Bill relies on section 51 of the Australian Constitution to claim that assisted dying is a medical matter, and therefore is under the jurisdiction of the Commonwealth, rather than individual states. Whether or not the bill ultimately succeeds, it will focus media attention on the proposed legislation, which is likely to be helpful to our cause. (For details see page 8.)

Québec passes Bill 52

On a very positive note, the Canadian province of Québec has become another legislature to legalise assisted dying. Bill 52, which, subject to strict safeguards, makes voluntary euthanasia legal, has been passed in the Parliament of Québec by an overwhelming majority. (For details see page 11-12.)

Panel Discussion at ACS State Conference

On 14 May I participated in a panel discussion at the NSW State Conference of the Aged and Community Services, on the topic of "Euthanasia".

Aged care services are predominantly delivered by Catholic organisations, so it was not surprising that three of the other four panel members came from a strong Christian perspective (including Father Frank Brennan and ethicist and anti-euthanasia campaigner, Dr Bernadette Tobin).



Euthanasia Panel Discussion at ACS State Conference 2014 - Father Frank Brennan, Sue Field, Dr Sarah Edelman, Leigh Kildey and Dr Bernadette Tobin (left to right)

The audience consisted of about 150 delegates, mostly workers in the aged care sector. The session was chaired very fairly by the MC, journalist and broadcaster Julie McCrossin. I was given ample opportunity to present the pro-choice perspective, and to respond to opponents' arguments.

In spite of the apparent anti-euthanasia stance of the conference organisers, I commend their willingness to stage a panel discussion on this subject, and to invite me to participate. I was treated very courteously, and left with the impression that the majority of the audience (that is, the people who work with sick and dying patients) support the option of voluntary assisted dying.

New group in Port Macquarie

I was delighted to talk to Annie Quadroy, who has just started a new DWDnsw group in Port Macquarie. Annie has teamed up with a small group of enthusiastic supporters to organise local DWD meetings. Forty one people attended their first meeting on 6 June! (See the Port Macquarie group report on the next page.)

Country members who would like some help in setting up a local DWD meeting group in their area, please contact our office at dwd@dwdnsw.org.au or call 02 9212 4782.

As always, thank you all for your membership and ongoing support.

Sarah Edelman
DWDnsw President

Please email dwd@dwdnsw.org.au or phone 9212 4782 if your club or social group would like to have a speaker come and talk about Dying with Dignity. We ask that the audience is at least 30 people.

Allied Group Reports

New Port Macquarie Group

Ms Annie Quadroy joined DWDnsw in January and "hit the ground running". Upon learning that a Port Macquarie DWD group did not exist, she decided to start one !! Her report follows.

The Inaugural Port Macquarie DWD group meeting on 6 June was held in the Public Library Meeting Room. 41 people attended.

As Group Convenor, I was interviewed on community radio station *2WAY FM* prior to the meeting. This was followed up with an opinion piece in the local *Port News* (which gained 39 "likes" and no "dislikes" on their Port News website). An interview with Gideon Cordover was featured in the *Port News* on the day of the meeting.

I opened the meeting with a personal story about my mother, who died after five long suffering years in a nursing home and frequently said "*If I was a dog they would have put me down by now – why can't they?*"

Many people readily shared their stories, including a woman who had recently been diagnosed with terminal cancer, given only months to live, and felt fearful of her impending end of life experience. Another person related the experience of her father contemplating that he would commit a criminal offence by assisting her mother to die, as she was suffering and wanted to die.

Dr Romaine Rutnam (pictured) travelled to Port Macquarie to share her activism experiences as past Convenor and continuing member of Central Coast DWD Group. Her passion for legislative change was motivated in part by her sister's death over eleven awful years from an incurable, terminal illness.

Gideon Cordover, DWDnsw Communications Co-ordinator, came from Sydney to give a briefing about the assisted dying movement in Australia and overseas, drawing upon the experience of his father's progressive deterioration from motor neurone disease and his eventual assisted death in 2009, when Gideon was 19 years old. Gideon also discussed advocacy strategies in the lead-up to the 2015 NSW State election.

Both speakers inspired the audience and the room was buzzing with questions and energy, culminating in the Port Macquarie DWD Leadership Group being formed.

The first meeting of the Port Macquarie Leadership Team was held on 17 June to start planning the way forward for the new DWD group. The next general meeting of the Port Macquarie DWD Group will be held on Tuesday, **5 August 2014**. The venue is to be confirmed. The plan is to include speakers on the theme "*Legal Aspects of Getting Your Affairs in Order*".

Annie Quadroy
Port Macquarie Group Convenor

Central Coast Group

The subject of the first three meetings of 2014 is practical aspects of end of life care. This is based upon our belief that the more people talk about dying, the more they will become aware of their current legal rights and the stronger the pressure on the Government will be.

At our March meeting, Mr Peter Cleasby, Service Director for Central Coast Palliative Care, briefly described the development of palliative care in NSW. He was followed by Dr Ian Charlton of "Kincumber Doctors", who emphasised the importance of making known, in good time, how you wish to be treated at the end of your life, by means of an Advance Health Care Directive.

At our June meeting, Dr Sarah Jeong, Assistant Director of Clinical Education, Newcastle University, presented "The Capacity Toolkit". She demonstrated how to go about completing the questionnaire, describing also the basis on which mental competence is assessed.

(Report continues on page 6)



Dr Romaine Rutnam and Ms Pippa Preston at the IWD March

The topic for our Sept 19 meeting will be “*Top Five and Emergency Planning*”. The Speaker will be Sian White, Carer Support Manager, Central Coast, Local Health District. We are hoping to have local MPs and political candidates give talks at our 28 Nov meeting.

We are exploring the use of small local group meetings to build active support groups. We have sorted members in our five local constituencies. In order to gauge the level of interest, meetings have already been held for the Gosford and Terrigal sub-groups.

Joy Shannon
Central Coast Group Secretary

Voluntary Euthanasia Party NSW

The Voluntary Euthanasia Party is a single issue political party with the same goal as DWDnsw.



Ms Shayne Higson

Pictured speaking at the DWDnsw AGM on 5 April

Over the past few months our VEP NSW Committee has been discussing campaign strategy and policies. One of the most important messages to convey to supporters of voluntary assisted dying law reform, who might consider voting for the VEP, is that the method of voting in the March 2015 NSW Legislative Council election is significantly different from last year's Federal Senate election.

The method of voting for the NSW Legislative Council (Upper House) is optional preferential which allows you to vote for one or more parties and, most importantly, to direct your own preferences.

By voting 1 for the VEP you will ensure that we have the best possible chance of representing you in the NSW Parliament. After voting 1 you can direct your second preference to any other party of your choice. The major parties will often try to discourage voters from voting for single issue, minor parties, saying that your vote will

end up with a party not of your choosing. This cannot happen in the NSW election for Upper House seats. **VEP NSW will not be directing preferences to any other political party.** This is one of the most important things to convey to others if you want to encourage them to vote for the Voluntary Euthanasia Party (NSW) next year.

One of our first priorities, following the successful registration of the VEP in NSW, was to produce and distribute a brochure that could outline reasons for supporting voluntary assisted dying, provide information about our political party and explain what we hope to achieve by standing candidates for the Upper House in next year's state election.

If you would like copies of our brochure to distribute to your family, friends, colleagues or neighbours, simply email, phone or write to me via the contact details shown below and I will be happy to mail some out to you.

We now have a Facebook page so you can 'Like' us to follow our progress, as we will post updates throughout the campaign as well as links to related stories in the media. The link is - www.facebook.com/voluntaryeuthanasiapartyNSW



Ms Shayne Higson
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DWDQ - Our Condolences

On March 29 the Dying with Dignity Queensland (DWDQ) President, Dr James ("Jim") McAllister died aged 70, after a short illness which began with a simple ear infection!

Following Jim's death, Alastair Henderson agreed to be the acting DWDQ President until the AGM in August. Alastair has been a long-standing campaigner and his wife, June, has been DWDQ Secretary for about 8 years. The Committee and Staff of DWDnsw were very sad to hear that on May 17 Alastair Henderson died of an apparent heart attack during his early morning swim.

Our thoughts are with June and all the DWDQ volunteers.



Christians Supporting Choice for Voluntary Euthanasia (Ch4VE)

Since Dr Syme's public admission (*for details see President's Message Page 2*), I have been busy writing letters to the editors of various newspapers and have made online comments on behalf of the Ch4VE.

Meanwhile, I asked all our Ch4VE members in NSW to contact their MP to ascertain support or otherwise for legislative change on this important issue. I am having difficulty in getting a response from my own MP in our remapped electorate. I have written, phoned and emailed, but still no reply at the time of writing!

In anticipation of the NSW election in 2015, I have initiated and attended a few meetings (along with Dee Johnson from the DWDnsw committee) with some key NSW politicians who had expressed their support for voluntary assisted dying in 2013.

If you have not already joined Ch4VE please consider doing so. Membership is FREE. Simply advise your name and address by email iagree@christiansforve.org.au or write to me at Villa 1 / 4 Wills PI, Mittagong NSW 2575.

Mr Ian Wood

Co-founder Christians Supporting Choice for VE.

DWD ACT Inc.

We have three new committee members: Roderick Kidston, Janet Smith and Peter Martensz. Regrettably Clive Monty has ended his many years of committee membership. We thank Clive for his participation and work on the committee.

Our first General Meeting was held in April and 21 people attended. About 1700 people die in the ACT annually. Our guest speaker, Helen O'Brien, Executive Officer of Palliative Care ACT, reported that about 200 people die at home, 700 at Clare Holland House, and the rest in hospital.

Canberra Hospital now checks whether incoming patients have an Advance Care Plan. We urge everyone from the ACT who has not made a plan to contact the *Respecting Patient Choices* program at the Canberra Hospital as soon as possible. Our DWD ACT website gives links to the *Respecting Patient Choices* website which will lead you an Advance Care Directive form that can be printed out.

Our General Meeting on 21 August will be a combination of a Special General Meeting (to accept changes to our Constitution) and a talk that I will be giving at the *Chicago Conference of the World Federation of Right to Die Societies* in September. Our meetings are now held at the Grant Cameron Community Centre at 27 Mulley Street, Holder. Everyone is welcome.

Jeanne Arthur

President DWD ACT

PO Box 55, Waramanga ACT 2611

"35 Letters"

The documentary "35 Letters", written and directed by Janine Hosking, premiered at the 2014 Sydney Film Festival, where it was a finalist for the "Documentary Australia Foundation Award".



Angelique Flowers (right) and her older sister Michelle.

Many DWDnsw members attended the film's premiere on 6 June, with some free tickets provided by Exit International. Afterwards, a Q&A session was conducted with the film's Director Janine Hosking, Angelique Flower's siblings Damian and Michelle, and EXIT International Director, Dr Philip Nitschke.

The film combines family home videos and photographs with interviews and observational footage to tell the poignant story of Angelique Flowers and her family. In 2008, Angelique, aged 31, died of colon cancer. Around that time she made a passionate video plea to the Labor government and the then Prime Minister Kevin Rudd to legalise assisted dying. Angelique said "All I want after 16 years of painful Crohn's disease and now cancer is to die a pain-free peaceful death. Because euthanasia was banned in Australia I am denied this right ..."

DWDnsw viewers commented "It was a very powerful film"; "I found it to be a very creative documentary and it exposed the different points of view very well"; "moving, sensitive and beautifully crafted film" and "the film did not bulldoze the audience with political rhetoric or gruesome medical scenes - it simply showed a human being at her most vulnerable and spoke eloquently of how she would like to die if she was given choice". ■

DWD Bill Tabled in Federal Senate

On 25 June, Greens Senator, Richard Di Natale (pictured) tabled a draft bill for national legislation on assisted dying - the “*Medical Services (Dying with Dignity) Exposure Draft Bill 2014*” - in the Senate. The Senate then passed a motion to have the Bill considered by a four month Senate Inquiry.



Services (Dying with Dignity) Exposure Draft Bill 2014” - in the Senate. The Senate then passed a motion to have the Bill considered by a four month Senate Inquiry.

Twenty five Federal MPs attended the launch at an event where three terminally ill cancer patients made their personal pleas for reform. These people were Peter Short, Cath Ringwood and Max Bromson. (See below for Short's Story).

The Bill relies on Section 51 (xxiiiA) of the Australian Constitution, which states that the Federal Parliament has the power to legislate regarding medical services. The Bill uses this power to define a “dying with dignity medical service” which would authorise medical practitioners to prescribe, prepare and/or administer a substance that would assist a terminally ill person to end their life in a humane manner.

Under the Bill, the person's condition would have to be verified by two medical practitioners, and the person would have to undergo a mental health assessment to ensure that he or she is of sound mind. The Bill provides that the Commonwealth can pay for this service, as it would for other medical services, and indemnifies doctors from prosecution.

According to Senator Di Natale this is not a partisan issue. The Senator is hoping to build a coalition of support across the Federal Parliament, so that when the final legislation is formally introduced it will have co-sponsors from all parties. Labor MP Alannah MacTiernan, who has expressed interest in co-sponsoring a bill, said that a federal bill is needed, as there should be one standard for all Australians, rather than separate laws in the states and territories. MacTiernan called on supporters to make their views known to politicians so that Parliament can resolve the issue once and for all. She stated “*We should have a choice in those final stages of our lives as to whether we die with dignity or we are required to continue to suffer in pain and agony.*”

The Senate Inquiry will explore issues such as:

- Should the Commonwealth legislate ?
- Can it withstand a challenge if it conflicts with State law?
- Do the safeguards in place strike the right balance? Or is it too onerous to involve three independent medical practitioners?
- Does it contain sufficient protection for medical professionals?
- Should it remain restricted to terminally ill people only?

Peter Short's Campaign



Peter Short and his wife, Elizabeth

On his 57th birthday in January 2014, Peter Short was told that his oesophageal cancer had returned. He was told he would probably die within about nine months. Although Short has believed in voluntary assisted dying all his adult life, his decision to campaign began several weeks after this diagnosis, prompted by reading the story of Steve Guest and Dr Rodney Syme's admission about helping him to die.

At this time, Short wrote an opinion piece in *The Age* and set up a blog to document his experience, promote his campaign and facilitate community discussion. He has also initiated an on-line petition to Tony Abbott, which is intended to make end-of-life choice a national discussion issue. The link to this petition can be found at the top of Short's blog on (<http://pgs28.wordpress.com>).

Recently, Short agreed to travel to Canberra to speak in favour of the Federal Bill tabled in Parliament on 25 June (see above for details). During his speech on this day, Short said “*I am passionate about the passing of Dying with Dignity legislation because I have through my blog and my petition for change had thousands of pieces of feedback. Some are harrowing or inspiring, others sad. A number are just beyond belief in terms of the pressure, pain and suffering we force people in this country to needlessly go through...Dying with Dignity is not about allowing wholesale suicide of terminally ill and suffering people. It is about Parliament giving those people the gift of choice.*”

Western Australia

The announcement by Ms MacTiernan MP (Member for Perth) that she would endorse the Federal *“Medical Services (Dying with Dignity) Exposure Draft Bill 2014”* was made the day after the Western Australian Police declared that they were satisfied no third party was involved in the death of an elderly couple on June 20.

Mr Jeffrey Rushton, 87, and his wife Sheila, 90, were found dead at their Middleton Beach property in Albany, WA. It is understood Mr Rushton had severe Parkinson’s disease while Mrs Rushton suffered from multiple sclerosis.

Ms MacTiernan (pictured) told 6PR Radio that



the death of this couple as well as 81-year-old Herbert Erickson in late 2012 shows that people are

being put in circumstances where they feel they have to use extreme means to end their life.

The Western Australian Voluntary Euthanasia Society President, Murray Hindle, says murder-suicides and double-suicides will only increase with an aging population: *“Only a small percentage of the population would ever take the action the Rushtons took in Albany but it is going to occur more and more as the population ages”*.

The *WA Speaks Survey* of more than 6000 people found 83 per cent support voluntary euthanasia. The survey, just released, was conducted by *PerthNow*, *The Sunday Times* and *Nine News*. It was analysed by respected pollster *Galaxy Research*.

Only 25 of Western Australia’s 95 politicians responded to an emailed question from *The Sunday Times* asking if they would support new voluntary euthanasia laws. Of those, 11 said they would, including Opposition leader Mark McGowan and fellow Labor MPs Roger Cook, Dave Kelly and Paul Papalia. Premier Colin Barnett said he would not support a change to the current law.

Nembutal Police Raids

Since April, police have raided the homes of 12 elderly people (all members of EXIT International according to Dr Philip Nitschke), who were suspected of having imported the “euthanasia drug”, Nembutal.

Two of these people have now been charged, including a 69-year-old disabled pensioner in WA who told ABC radio that the raid on his home by five policemen has caused him enormous distress and his health has suffered greatly.

Withdrawal of treatment not Voluntary Assisted Dying

Justice Rowan Darke of the NSW Supreme Court (pictured)



has given a chronically ill man permission to refuse medical treatment keeping him alive.

The man has had quadriplegia from the second vertebra since the age of seven, so he could only breathe via a ventilator applied via tracheotomy.

Darke declared that staff at John Hunter Hospital in Newcastle would be acting lawfully by following the man’s request and switching off the ventilator that was keeping the young man alive.

Darke dismissed concerns from hospital staff that in carrying out the man’s wishes they might be aiding and abetting suicide, a criminal offence in NSW. He referred to a recent NSW Court of Appeal decision that *“the legal concept of suicide, being the intentional taking of one’s own life, is not engaged in a case where medical assistance is refused, even in the knowledge of certain death”*. This and previous cases have established that patients who are kept alive via artificial means (such as a ventilator or life prolonging medication) have the right to choose to terminate medical intervention.

Endorsing this right is not the same as allowing voluntary assisted dying. Most individuals who want the option of a medically assisted death are not on life support, and so do not have the choice to die by simply terminating medical intervention.

Reflections of a distinguished author: The influence of religious groups in the assisted dying debate.



Following is an edited version of an essay by Mr Hani Montan (pictured) distinguished author of several books, including "Death by Choice versus Religious Dogma" (2012), and a Life Member of Dying with Dignity NSW.

Euthanasia and assisted suicide are issues that affect the whole of society and have a significant impact on family relationships. I would like to discuss their religious dimension. It is not my intention to offend anybody's religious belief, but to deal with the attitude of ultraconservative vocal theologians who I feel have hijacked and stifled the debate with emotional arguments to prevent a reasonable humane outcome for near death and suffering patients.

Often politicians have ignored the silent majority in favour of vocal religious-right groups, especially when those minorities have the capacity to manipulate and stifle the debate by bringing fear to the heart of politicians who are accustomed to responding only to loud voices. We know that some politicians are not only influenced but also controlled by aggressive religious lobby groups.

For politicians to take notice of us, we must first ensure that they understand that our vote will be directed away from them to more principled politicians who are committed to our just cause.

The current legal system is entrenching the traditional focus of medicine on fighting death to the end and at all cost. Unfortunately it does not always serve the comfort of patients, their families or the community. Doctors are trained not to fail, no matter what. Instead, medicine should be guided by the concept of providing comfort to patients and reducing suffering.

Patients should have the privilege to choose either to continue living until their last breath or to end their suffering and end their life peacefully. **A suffering patient's request to die is not a request to be killed; it is a request for mercy.**

Luckily, there are many progressive, moderate, religious people guided by moderate religious leaders, who contradict the ultraconservative theologians and support the legalisation of voluntary euthanasia and assisted suicide. These include members of the group "Christians Supporting Choice for Voluntary Euthanasia" who believe that Jesus' message is love and compassion and this should be reflected in our response to a request for voluntary euthanasia. They take the position of supporting voluntary euthanasia on the basis that God created human beings to make their own decisions and accept responsibility for themselves and their neighbours.

It is the expectation, in a secular society where religion and state are separate, that the universal imposition of religious ideals is not acceptable. Some theologians pontificate about helping people to live more fully with the dying process, but they do not explain how this can happen when the patient is twitching in agony, soiling themselves, rolling in pain, slowly drowning in the fluid of their decaying lungs etc.

Why do they limit relief during the dying stage to palliative sedation, rather than assisted death? There are no moral distinctions between switching-off a ventilator, prescribing morphine to relieve suffering that hastens death, and providing a pill that will kill a patient. These are merely similar ways of achieving the same end.

People instinctively don't want to die, and they usually avoid death because they value life. They want to die only when life becomes unbearable and death becomes a better option than staying alive.

The terminally ill and victims of severe accidents and traumas should never be forced to stay alive. Legally safeguarded assisted death would counterbalance the ever more exotic medical techniques for prolonging life, with little regard for its quality.

Some argue it is immoral to take life; many others argue that it is immoral to extend it when it has lost its meaning and is no longer tolerable. Ultimately, everyone should be entitled to make a choice that is consistent with his or her own beliefs.

The full essay by Hani Montan is available on our DWDnsw website www.dwdnsw.org.au on our Letters & On-Line Opinions News Page.

Religion in Australian Politics

During April, two newspaper articles drew attention to the disproportionate presence of practising Christians in both the Federal and State Liberal parties, relative to the general population. This trend becomes problematic when a politician's religious beliefs influence the way they vote on social policy issues, including voluntary assisted dying.



Mike Baird - NSW Premier 2014

One article by Sean Nicholls in the *Sydney Morning Herald* (SMH) of 26/4/14 reported that the NSW Premier Mike Baird is a committed Christian who once considered becoming an Anglican minister. Baird's Chief of Staff Bay Warburton is also a practising Christian, and in 2013, whilst addressing students at Redeemer Baptist School, declared "*I've served Jesus in a number of different jobs and now I'm serving Jesus as a Chief of Staff ... and Mike, who's the Treasurer – he believes he's serving Jesus as the Treasurer of the state.*"

Other practising Christians include Rob Stokes, the new environment minister, who holds a Diploma in Bible Studies. The Deputy Premier and Nationals leader Andrew Stoner attends the evangelical C3 church. According to the SMH article "*the Baird/Stoner government is shaping as the most devout in living memory*".

A similar situation exists at the Federal level, where the Prime Minister Tony Abbott as well as his treasurer, finance, trade, communications, education, agriculture and social services ministers are all Catholics, and at least four others belong to other Christian denominations.

The second SMH article by Swan and Visentin on 20/4/14 states that of the 19 Federal cabinet ministers, at least eight are Catholics, nearly double the proportion of Catholics in the general population. The article quotes Prof. John Warhurst, expert in religion and politics at the Australian National University, who says that the Catholicisation of the Coalition has been a trend in Australia

over the past several decades. According to Warhurst it is difficult to trace the public policy impact of having so many Catholic ministers at the highest level of this Coalition Government, however, "*on some issues, it's probably made the Liberal Party more conservative*". He cites same-sex marriage and opposition to voluntary euthanasia as examples.

International Developments

Québec

On 5 June Québec became the first Canadian province to legalise voluntary euthanasia. The Parliament voted overwhelmingly in favour of "Bill 52" (94 in favour, 22 against), which will allow voluntary euthanasia, within a range of safeguards.

Bill 52 followed an extensive Parliamentary Committee Inquiry and a lengthy report that recommended the legislation. The four-year process contributed to a high level of cross-Party support. While opponents have initiated petitions and shock advertisements warning that the Quebec law could lead to euthanasia of children, public opinion remains strongly supportive.

Bill 52 was introduced last year by the previous government, but it lapsed following the announcement of the election. One of the first acts of the newly elected Liberal Government was to revive it. The new leader, Philippe Couillard, a neurosurgeon by profession, is a supporter of the legislation and allowed a true 'conscience vote'.

The new law goes beyond the assisted dying laws passed in Washington State, Oregon, Montana and Vermont, as it will allow a doctor to administer the lethal dose, rather than simply prescribing it. To be eligible a person must be an adult, "at the end of life", capable of giving consent to care and be suffering from:

- an incurable serious illness,
- an advanced state of irreversible decline in capability and
- constant and unbearable physical or psychological pain which cannot be relieved in a manner the person deems tolerable.

The Quebec Medical Association supported the Bill. The President, Dr Laurent Marcoux stated:

(continues on page 12)

“The QMA applauds all the provisions. ... This Bill will transform the role of physicians because they will be able to openly discuss palliative care, anticipated medical directives and medically assisted death with their patients, families and health care teams.”

Hélène Bolduc, President of Québec's Dying with Dignity, warns that passage of the Bill is not yet a definitive victory. While Québec has jurisdiction over medical treatment and healthcare, the criminal code is under Federal jurisdiction. It is highly likely that the conservative Federal Canadian Government will challenge the new law in the Supreme Court of Canada. Other opponents are also preparing to mount Supreme Court challenges.

Canadian Medical Association

At the national level the Canadian Medical Association rejected a proposal to support euthanasia and physician-assisted suicide, voting against it at their 2013 conference. On this issue they are in step with the American and the Australian Medical Associations.

Canadian Supreme Court Case

The Canadian Supreme Court will hear an appeal of a British Columbia assisted-suicide case launched in 2011 by Carter and Taylor. Both women (now deceased) had intractable progressive diseases, and fought for the right to access assisted dying. In 2012, the British Columbia Supreme Court ruled that the Criminal Code of Canada provisions against assisted dying violate the rights of the gravely ill, and gave Parliament one year to rewrite the laws in favour of voluntary assisted dying. The Canadian federal government appealed the court decision, and in 2013 the British Columbia Court of Appeal overturned the earlier case and ruled against assisted dying.

It is possible that the Canadian Supreme Court will now decide that the current Criminal Code ban on voluntary assisted dying is unconstitutional, based upon the Canadian Charter of Rights and Freedoms. If this should occur, it will be up to the Canadian Federal Parliament to change the law in line with the court's ruling. However, members of the conservative Canadian government have already stated that they have no intention of opening up a debate on this issue.

United Kingdom

House of Lords Debate

The House of Lords will debate the Assisted Dying Bill on July 18. The Bill, introduced by former Lord Chancellor Lord Charlie Falconer, would give terminally ill, mentally competent adults the right to request life-ending medication from doctors, subject to strict upfront safeguards.

Previous attempts to legislate for assisted dying in England and Wales have failed at this stage. However, with increasing public support and politicians' greater awareness of the problems of the current law, the chances of success are better than ever. It is likely that there will be a vote after the Second Reading Debate on July 18 (contrary to the normal Parliamentary procedure) due to the oppositional tactics of some members of the House of Lords.

If the Bill passes its Second Reading, it will be debated line-by-line over the coming months, before eventually going to the House of Commons for further scrutiny.

Nicklinson decision puts pressure on House of Lords

Tony Nicklinson, who suffered from *"locked-in syndrome"*, following a stroke in 2005, campaigned to allow his family to help him take his own life without fear of prosecution. In 2012 a landmark High Court ruling denied the family the legal change they had campaigned for.



Nicklinson distressed after court ruling.

A week after the 2012 court decision, Nicklinson died of pneumonia at the family's home. In 2013, Nicklinson's widow Jane won the right to continue the fight in his name, and took the case before the London Supreme Court. She was joined by fellow campaigner Paul

Lamb, who was paralysed in a car accident in 1990 and also wished to end his own life. On 25 June, after waiting over six months for a decision, Paul Lamb and the family of Tony Nicklinson were told that their long-running appeal case was unsuccessful.

However, according to Dignity in Dying UK, the judgement puts significant pressure on both Parliament and the Director of Public Prosecutions to reconsider the law and prosecuting policy on assistance to die. With Lord Falconer's Assisted Dying Bill to be debated in the House of Lords on 18 July, the Supreme Court has issued a clear warning to Parliament that if it does not address the issue of assisted dying, the Courts may.

Lord Neuberger, President of the Supreme Court, said in his judgement: *"Parliament now has the opportunity to address the issue of whether section 2 [of the Suicide Act] should be relaxed or modified, and if so how, in the knowledge that, if it is not satisfactorily addressed, there is a real prospect that a further, and successful, application for a declaration of incompatibility may be made."*

Commenting on the decision Sarah Wootton, Chief Executive of Dignity in Dying UK, said: *"The Suicide Act is now over 50 years old and is out of touch with the problems facing dying Britons in the 21st Century. Public opinion is resolutely in favour of change and now the Supreme Court has clearly indicated that it is only a matter of time before the law is reformed. If Parliament is unwilling to address the issue, then ultimately the Courts will."*

Scotland

70 year old Margo MacDonald (pictured) died on 5 April 2014, suffering from Parkinson's



disease. As an Independent Member in the Scottish Parliament since 1999, she was known for her high-profile campaigns, including sponsorship of two assisted dying bills.

MacDonald's first Bill failed, but despite her illness she continued with renewed determination to campaign for a new Bill. This second Bill will be debated in the Scottish Parliament soon.

Acid poured on DGHS President



Elke Baezner, the President of the German Society for Human Dying (DGHS) had butter acid poured over her by an opponent of voluntary euthanasia at a public meeting in Frankfurt in June. The perpetrator was arrested and Baezner has been released from hospital.

USA - Connecticut

Connecticut is yet another US state that is considering legislation to allow medically assisted dying under strict safeguards. In March the Connecticut General Assembly Public Health Committee held a public hearing on "HB 5326", which is modelled on Oregon's "Death with Dignity Act", that was passed in 1997. The Bill would allow a physician to prescribe, but not administer lethal drugs to a patient diagnosed with an incurable and irreversible medical condition that will, *"within reasonable medical judgment, result in death within six months."* More than 500 witnesses submitted testimony at the public hearing.

The national pro-choice advocacy group Compassion & Choices USA has enlisted the help of professional organisers, media strategists and lobbyists to build public support for HB 5326. The group has spent \$US189,593 over the past 14 months on its campaign. Through radio interviews, online advertisements and digital media, they have framed the debate as a fundamental human rights issue, which historically included women's suffrage, the Civil Rights movement and gay rights.

The next World Federation of Right to Die Societies conference is 17-21 September 2014 in Chicago, USA.

The theme is *"Dignity, Control, Choice - Around the World"*. Everyone is welcome to attend.

See their conference website for details - www.wfconf2014.com .



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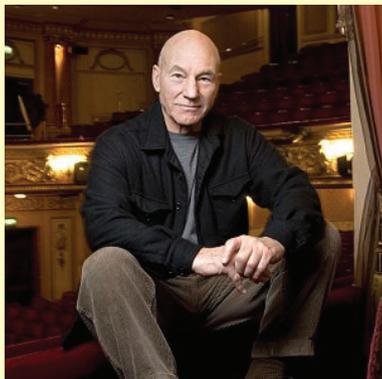
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Articles are listed under “News” and are sub-divided into the following pages International, Australian, NSW, Personal Stories and Letters/On-LineOpinions



Sir Patrick Stewart OBE (pictured) is an English film, television and stage actor, with a distinguished career on screen and stage (including the Star Trek series and The Royal

Shakespeare Company). The following article penned by him was published in the UK Daily Mail on 25 May.

‘My friend’s shocking suicide convinced me that I want the chance to kill myself with dignity’

It was a simple email that changed me for ever. As a stage and screen actor, I have performed the words of some of our greatest writers, but a message from one of my oldest friends, David – a boy with whom I shared happy school days in the West Riding of Yorkshire - truly altered my view of life and death.

It must have been hard for my dear friend to write of how Gillian, a wonderful and doughty woman of 53 suffering the later stages of terminal cancer, had died. Lying in their bed, almost too ill to move, she suffocated herself with a plastic bag after convincing him to take their beloved dog for a walk. So desperate was she to be free of a world that had initially misdiagnosed her cancer, and then refused her the chance to die in dignity, that she had to die alone and in terrible pain.

It was his experience that led me to become a spokesman for this movement, and more importantly, to decide that I, too, want the chance to die with dignity. I have drawn up a ‘living will’, a document that gives specific instructions to doctors to withhold care from

me in certain circumstances. Sadly, because of the law in this land, it cannot include anything to do with taking one’s own life or my wish for an assisted death should I become terribly ill. If I could do that, I would.

And I am sure Gillian would have done so too. As it was, she had an official certificate asking that she should not be resuscitated in the event of a cardiac arrest. The medical profession had nothing else to offer her, even with a tumour so large and painful that she looked eight months’ pregnant. The whole process was traumatic.

Gillian bore her diagnosis for uterine cancer with incredible stoicism. But by the time it had finally been identified – in July 2010 – the cancer had spread to her liver, lungs, kidneys, spine and hips. As the pain grew, and this hugely vivacious, popular woman who had run her own dog-grooming business lost the ability to look after herself, she and David talked about the possibility of flying to Dignitas, the assisted suicide clinic in Switzerland, but they didn’t have the money.

In the end, on New Year’s Day three years ago, she convinced David to go and see some friends. She took an overdose of pills and David is in no doubt that she did this deliberately in an attempt to ensure that he could in no way be implicated in her death. But, sensing something was wrong, David came home early and found her lying on the floor, still alive but only just.

He sat with her all night at the hospital praying she would not wake, simply because he knew how excruciating she found her life. A fit and healthy woman, who rode horses and watched what she ate, Gillian did survive. She might have amazed the doctors, but she was bitterly disappointed, knowing she was condemned to endure more pain from the tumours that had finally reached her brain.

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As Gillian had previously made what is known as an advance decision to refuse treatment – or a living will – the hospital staff merely monitored her until she recovered sufficiently to be allowed home. When David walked the dog that night, she took advantage of his absence to tape her head into a plastic bag. She ended her life in a terrible way, all alone.

In my view and that of 80 per cent of the population Gillian should have been allowed the choice to quietly slip away in David's arms. Under the current, barbaric law, this option was not available to her. As a result, while she still lay dead upstairs, a grieving David was subjected to police questioning from midnight until 6am the next morning.

Britain is blessed with good palliative care for patients nearing the end of life. It has been ranked number one in the world and most people can expect to 'die well'. But, sadly, this is not guaranteed. Even Baroness Illora Finlay, a palliative care expert who opposes a change in the law, agrees that better care is not a blanket panacea.

That's because for some people, even the best care available can't allow them to die with dignity and at peace.

I believe that choice at the end of life should include a change in the law to permit the option of assisted dying for people who are dying. Who is the current law protecting? Certainly not David or Gillian. It is cruel and inhumane that we compel people such as Gillian to end her life alone, instead of in the arms of the man she loved, in order to protect him from prosecution.

The choice of assisted dying is a reality in some American states – Oregon, Washington, Montana and Vermont – as well as some European countries such as Switzerland, the Netherlands and Belgium. In Oregon, assisted dying has been legal for more than a decade and a half, and to my knowledge their society

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has not collapsed, nor have their vulnerable citizens been dispatched by greedy relatives keen to inherit.

People in Oregon are better protected by their law. In Oregon, the terminally ill's decisions about how they die are informed ones, made with health professionals, rather than in their absence. Allowing such choice importantly allows for alternatives to be suggested, for conversations about why the person wants to die and for loved ones to be able to come to terms with the decision in advance. Conversations David and Gillian were denied.

To argue that legalising assisted dying for dying competent adults will inevitably lead to a 'slippery slope' is absurd. When a law is passed, a framework for what is and is not permissible is set down. Any deviation from this is, by definition, illegal.

There is something broken and savage about a law that says when you are so ill, so full of cancerous pain, you cannot have your family, your pets, the things that made your life valuable, to comfort you when you choose to die.



Gillian Pinter, before her illness.

The activities of DWDnsw include public education campaigns, community talks, parliamentary forums, media publicity, liaising with and lobbying of politicians, providing information on advanced care directives, monitoring and reporting of overseas developments, communicating with pro-choice advocates overseas and collecting resources that help to advance our important cause.

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