

## President's Report

To the DWDV community,

This is the time of year when, more than ever, we think of those no longer with us and the impact their deaths have had upon grieving loved ones. We remain forever mindful that despite our relief that many Victorians have finally been afforded the opportunity to access a VAD death, every death is still a terribly sad event for their loved ones and those involved.

This year marked our 50th anniversary and has proven hectic but very productive. We have embarked upon many new initiatives, of which we are extremely proud, and have continued to work enthusiastically on our long-term projects.

Our Griefline/DWDV VAD support program has proved extremely successful and we have decided to fund this critical program for another year. I would especially like to thank Jane Nosworthy and DWDV member, Nicole Grundy, for the time, energy and compassion they have invested into these groups, as well as thank the delightful and inspirational Griefline team.

A year ago, we published Dr Rodney Syme's book 'A Completed Life' and have since sold 1,100 copies that now occupy bookshelves not only throughout Australia but around the world!

Many jurisdictions globally have been debating VAD legislation this year. DWDV has provided submissions to the governments of Scotland, Ireland and New Zealand as well as The ACT and The NT.

DWDV was represented at two important VAD conferences this year. Dr Nick Carr and I attended the 'World Federation of Right to Die Societies' conference in Dublin. Accompanied by Jane Nosworthy and DWDV Young Ambassador Tara McDonald, we then attended the Trans-Tasman VAD conference in Brisbane.

Our Young Ambassador program has been surging forward in leaps and bounds in popularity both within Australia and overseas.

A zoom meeting was conducted in November, in which DWDV YAs Dani Clarke and Jono Simko met with others from The Netherlands and Ireland. Another meeting is scheduled for early next year to discuss the group's intended principles and goals. I cannot wait to see what our YA program achieves in 2025.



*Jane Morris*

This year, as well as the addition of Danielle Jacobs to our Board and our special canine ambassadors Ollie and Mia, we have also welcomed nephrologist Dr Adam Steinberg as a new Board Member. We are looking forward to benefiting from his amazing skills and experience.

From a personal perspective I have loved establishing relationships and friendships with the leaders of other assisted dying organizations around the world. It is uplifting to meet these individuals and share their stories. Our Australian VAD organizations, with the inclusion of our de facto state New Zealand, meet regularly and highly value our friendship, goodwill and genuine concern for each other.

We are so proud of what we have achieved this year and sincerely thank those who have provided us with support and greatly appreciated collaboration, particularly the Victorian VAD Statewide Care Navigators, The Victorian VAD Review Board, the Victorian Health Department, Griefline, Go Gentle Australia, 'Voluntary Assisted Dying Australia and New Zealand' (VADANZ) and those journalists who have been particularly supportive of the VAD cause (you know who you are!).

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## President's Report (cont.)

DWDV is indebted to the incredible work of our General Manager Natalie. Natalie is a highly valued and appreciated member of our organization. She is loved by all for her commitment, compassion and incredible operational skills. I would also like to thank Tiffany Papagiannopoulos who joined us this year to help us with our social media platforms. This she has successfully achieved, evidenced by our increased numbers of supporters and valued levels of social interaction. Thank you to Sue James who maintains our website and helps produce our quarterly newsletters.

I am so incredibly lucky to work with a team of highly skilled and wonderful individuals, passionately committed to our cause and so generous with their valuable time. I am constantly aware that much of our inspiration and commitment is, and always will be, derived from the legacy of the irreplaceable Rodney Syme. I can only hope that he would be happy with the direction we are taking.

Thank you to everyone for your support this year. The DWDV team wishes you a very happy festive season with time to unwind and relax before we march into 2025.

It was with horror that I realized that I had not thanked our incredible witnesses in my President's speech at our AGM in November. Having completed over 530 'witnessings' since VAD was implemented in 2019, our program has been the envy of the nation. In addition to our wonderful GM Natalie, who sensitively and effectively coordinates the program, I would like to sincerely thank every single person who has taken on this role. DWDV, doctors, VAD Statewide Care Navigators and of course the amazing individuals and families are deeply appreciative of the service we provide.

We have decided to dedicate a section of this newsletter to our fabulous witnesses and listen to what some of them have to say. As a witness myself, I can only say what a tremendous privilege it is to be welcomed into the lives of strangers at such a personal and intimate moment. As is the nature of human interaction the emotions we leave with are complex and varied and I like to sit in my car contemplating the scenario I have been privy to and think about the extraordinary individuals, including the beautiful, brave and committed doctors, that I have just met. Thank you to everyone.

## DWDV's Volunteer Witnesses

In October 2019, a few months after Voluntary Assisted Dying became operational in Victoria, DWDV put a call out to members, asking if anyone would be willing to act as independent witnesses to people wanting to access VAD. Immediately, our wonderful members responded - within 24 hours, over 70 people had volunteered, despite knowing very little as to what was involved.

Only a few days later, we received our first request for assistance – an elderly gentleman who wanted to keep his VAD wishes private. The appointment went very smoothly, with the compassionate doctor explaining the paperwork and answering questions as needed. The witnesses signed the required documents to confirm the patient appeared to have decision-making capacity, had freely and voluntarily signed the request for VAD, and understood what he was signing. The gentleman, and his adult daughter who was supporting him through the process, were most appreciative.

Since that day, DWDV has provided this invaluable service on over 530 occasions. Our list of volunteers has slowly grown, and now includes some family members and friends of those who have accessed VAD. We have provided witnesses throughout Victoria, and assisted other states in setting up their own volunteer programs.

Our deepest thanks go to all of our volunteers, who gladly give up their time to ensure others have timely access to VAD.



## Bob

This year marks my 40th year as a member and activist for DWD. Most of those years have been frustrated by the glacial progress of VAD during that time. However, since VAD became law in 2019, I and my wife have been privileged to play a more productive and active role by witnessing end-of-life documentation for terminally ill individuals nearing the end of their lives. It has been rewarding to play this small role and to help smooth the way for these people as they seek an end to their suffering. In every case, their appreciation has been palpable, and we have felt honoured to be a part of the process. It is a sad role to play, yet we have never witnessed for anyone who had not made a conscious, informed and rational choice. It was clear that in every case they experienced relief at having the option available to them, and had come to terms with VAD as their "Plan B" if all else failed.



More recently, and coincidentally, I have also been diagnosed with a terminal condition, and it's heartening to know from experience how supportive the process will be when my turn comes around.

## Judith

For myself - and my responses may be almost the same as for you and other witnesses we know; or not - my first reaction when I get a call from Natalie in the DWDV office is a mixture of feelings that are positive:



- I am glad to be asked, because I think it is an important role, enabling someone to move a step closer to achieving something that is centrally important to them in the here and now.
- I feel honoured: that I can give a little time and attention to a stranger in a situation where there is a true difference to be made, in helping them meet the requirements of the law; and thereby move closer to achieving the death that they choose.
- I prepare myself to give the patient my full attention; in the time preparing to leave home I try not to rush, or be distracted by other concerns; nor is this a social visit, so I caution myself not to ask questions, or to be distracted into chat - unless it is the patient who wants to talk.
- There invariably is something emotionally affecting in the interactions that are part of this finalising of the request process: two patients I remember have been upset that their signature does not resemble their usual one (usually because their illness has affected their ability to write). Both times the doctor has reassured them that this is their 'mark' at this time, that we have all seen them put pen to paper in response to being asked to put their signature in a particular space on a page, and that the following signatures of the witnesses, and of the doctor, verify this.
- For reasons relating to the emotional content inherent in every one of these Final Request sessions, I walk home if I possibly can, the time on my own, simply remembering and reflecting is helpful.
- In addition, I always phone Natalie in the DWDV office afterwards and report back, including how it was for me. As it has turned out these conversations are not so much a debriefing, but a sharing of our satisfaction in being an active part of seeing a law in which we have a personal interest working in practice.

A final point about my experience as a VAD witness. Almost always the patient or a family member expresses their thanks, often very warmly, for our being there, and once there were flowers for both of us, each with an appreciative card.

And, in turn, my thanks and admiration are with the VAD Coordinators, and the Doctors, who are the backbone of this VAD program.

**It's always a privilege to be a witness. (Michelle)**

## N.R.

At the numerous occasions I've attended as a witness for VAD, the applicants' response has without exception been the same. Distress that they didn't know about it sooner, distress at the lengthy approval process and finally that the medication can't come soon enough. I've seen patients so decimated by their progressive illness and even though there was no perceived cure, operations on their already frail bodies, that it seems inconceivable that medical practitioners are unable to suggest this gentle way of ending pain and often unbearable discomfort much sooner. All doctors need to be able to inform terminally ill patients about this choice and printed information needs to be in every waiting room.



## Michelle

After witnessing a VAD application for a lady with heart disease, the lady said "This is the happiest day of my life." She followed this by saying "I can already feel the pain starting to lift." It is always a privilege to be a witness.



**"In every case, their appreciation has been palpable, and we have felt honoured to be a part of the process" (Bob)**

## The 2024 Rodney Syme Medal



*Ian Wood with his Rodney Syme Medal*

This year's recipient of the Rodney Syme medal is Ian Wood. The Rodney Syme Medal recognises distinguished effort in pursuit of the Dying with Dignity cause.

DWDV would like to thank Board Member, Michelle Hindson, and her wonderful husband, Simon, for visiting Ian at his home in Bowral, NSW. They met Ian's family, presented him with his award and filmed the medal ceremony. An incredible job!

Ian has worked tirelessly for many decades for the right of an individual to access a humane and dignified death and is renowned for being a gentleman, an individual of an unassuming nature, and an incredibly fearless advocate of end-of-life rights.

Ian and fellow Christian, Reverend Trevor Bensch established a group of Christians, with the purpose of providing support for what was then referred to as VE. The group is now known as Christians Supporting Choice for VAD.

Since Rev Bensch's death in 2019, Ian has maintained his position as National Coordinator.

The group works collaboratively with the other DWD organizations around Australia and has brought to the forefront the strong public support amongst more enlightened and thinking Christians for the legal right to make end of life decisions. The organization has most admirably critically countered much misinformation put forward by the omnipresent religious opposition. We thank Ian for everything he has done for those seeking a humane and compassionate death. He continues to fulfil a unique role leading a Christian group supporting VAD!

**To see Ian presented with his award, and hear his acceptance speech, visit our website (<https://www.dwdv.org.au/news/>) or our DWDV YouTube channel (<https://www.youtube.com/@dwdvaust>)**

# Update on VAD-specific grief & bereavement support

In September 2024, DWDV and Griefline concluded a groundbreaking pilot program of four VAD-specific grief and bereavement support groups. DWDV Board member, Jane Nosworthy, and Kerrie Arthur from Griefline presented findings from this Australian-first program at the 2024 Trans-Tasman VAD Conference held recently in Brisbane.

In their presentation, Jane and Kerrie highlighted the unique challenges of VAD-related grief and demonstrated the success of DWDV and Griefline's collaborative pilot program offering tailored support for those navigating this complex journey.

Conference participants recognised bereavement as an area requiring urgent attention, with the work of DWDV and Griefline paving the way for transformative support services.

The conference presentation is summarised in a white paper titled "VAD-Specific Grief and Bereavement Support: Learnings from an Australian-First Pilot Program", which is available to download from the DWDV website.

## *What's planned for 2025?*

DWDV and Griefline will expand the support group program in 2025 to include:

- eight post-VAD support groups (6 week program x 2 hours per week)
- ten pre-VAD drop-in sessions for the families, friends and caregivers of people seeking VAD.

Groups will commence in February 2025. Registrations of interest for the 2025 program can be submitted at <https://griefline.org.au/get-help/vad-support-groups/>.

In addition, DWDV will continue to offer 1:1 peer support for people supporting someone choosing VAD. Griefline also plans to develop a meaning-centred therapy program specifically designed for people considering VAD for themselves.



*Jane & Kerrie presenting at VADCON24  
[Image credit: Savannah Rowland]*



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# New Board Member: Dr Adam Steinberg

We are delighted to welcome Dr Adam Steinberg to the DWDV Board! His expertise will be a wonderful asset for our work together.

Adam is a nephrologist and general physician at The Royal Melbourne Hospital, where he is also the Deputy Director of Physician Education. He teaches clinical skills and professional practice to medical students at The University of Melbourne where he is also undertaking a PhD looking at quality indicators in the practice of nephrology across Australia and New Zealand.

As he says: " My patients have chronic diseases including kidney failure and confront important decisions towards the ends of their lives."

"I am passionate about communication, shared decision making, and person-centred values-based care as the way of achieving the best outcomes for my patients. Because of this, I became a VAD physician to ensure patients are empowered throughout their care including their deaths."

"I learn something from each patient, and together with my experience on other committees and boards, hope to contribute meaningfully to DWDV's vital mission. I have no doubt that through my involvement I will continue to learn and grow too."



*Dr Adam Steinberg*

## Volunteers Wanted!

We have a couple of projects for which we would love some assistance from any volunteers with the time and interest to help:

- Mapping related organisations: a number of organisations operate in areas related to Dying With Dignity Victoria and what we are working to achieve, for example, Advance Care Planning Australia, Compassionate Communities Australia and ELDAC: End of Life Direction for Aged Care. DWDV believes that collaborating with appropriate organisations could be invaluable in strengthening our efforts and outcomes. We are looking for a volunteer willing to research and develop a list of such organisations so we can explore opportunities to work together.
- Podcasts about end-of-life, death, dying and grief: we're seeking a volunteer to research and develop a list of such podcasts so that we can both listen to them and, where appropriate, put one of our team forward for interviews.



If you would like to assist, please contact Danielle Jacobs on [volunteers@dwdv.org.au](mailto:volunteers@dwdv.org.au)

### *PERSONAL STORIES*

Have you caught up with all the wonderful Personal Stories on our website? A new one added since our last newsletter is Jim's and Ellen's story - a very moving read!

If you have a story you'd be willing to share, or an image of a piece of art or craft you've created to honour end-of-life, loss or grief, we'd love to hear from you! Visit the Personal Stories pages on our website, or the Grief Through Art page to contribute.



# Christmas Pudding



Dr Nick Carr

One of my first patients in general practice was an unfortunate gentleman I'll never forget. He was sitting awkwardly on the waiting room chair, obviously in severe pain.

The problem, it turned out, was a pain in the bum - he'd unwittingly swallowed a small chicken bone that had safely travelled the whole length of his intestine, until the last centimetre (also known as the anus), when it somehow turned sideways and got jammed on the way out - Ouch!

Despite being fairly new to the job, I managed to remove the bone - and then wrote a paper about it.\*\*

And I've still got the bone as a souvenir (don't worry it's been cleaned).

Fortunately, most things we swallow go through without any trouble. Take your Christmas pudding. Do you pop a couple of silver coins into the mixture?

It's a tradition that goes back hundreds of years, and finding that silver thruppence or sixpence was a sign of good luck. And back then, they really were made of silver.

Modern so called silver coins are actually made of cupro-nickel - copper and nickel - which can not only turn green during cooking, but also make the food taste metallic. Not great.

So if you're using, say, an Aussie 5 cent piece, just sneak it in after the pud's cooked. Oh, and make sure to clean it first, you don't know where it might have been...

But there are other things that are the same sort of size as a 5-cent coin, but are potentially very dangerous, and that's button batteries. So for those with younger kids coming for Christmas, be aware that if a child swallows a button battery, and it gets stuck in the gullet, it can burn through in just two hours. So no mucking about, straight to hospital. The other risk is those small magnets in some kids' toys. If anyone swallows a couple of these, they can do what magnets do, join up and burn a hole in your intestine. So again, straight to hospital.

Amazingly, however, even many sharp objects, like broken glass or drawing pins, mostly go through without any problem. If anyone should know, it's a crazy Frenchman called Monsieur Mangetout, who was famous for eating metal. Large amounts of metal. Over his lifetime he ate - and I promise you this is true - two beds, seven TV sets, 18 bicycles, 15 shopping carts and, spread out over a 2-year period, an entire aeroplane. And everything he ate came safely out of the other end, so I suspect there were some very odd clanking noises when he went to the toilet. Oh, and his name? Mangetout - it means eats everything.

So if you do happen to swallow that small coin in your Christmas pud, don't worry, it will happily pass through your intestinal tract, only to appear in the toilet a day or two later - that's if you decide to have a rummage around and look for it ...

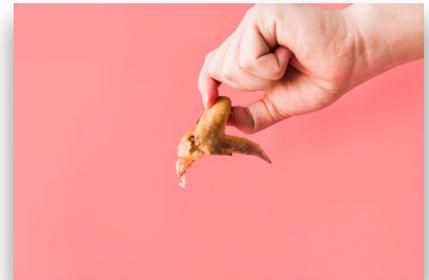
So, eat well, eat safely, and have a very merry festive season.

Nick Carr

December 2024

\*\* If you're really keen and want to look it up, here's the reference:

*Acute anal pain and a chicken bone. N Carr Journal of the Royal College of General Practitioners 1987; 37:314.*



# NEWS FROM AUSTRALIA ...

## National News

The Trans-Tasman Voluntary Assisted Dying Conference took place in Brisbane on 28-29 October. The conference was co-hosted by Go Gentle Australia, VADANZ and the Australian Centre for Health Law Research, QUT.

It was an enormous success and focused on the themes of 'Equity and Access'. For the DWDV members who attended, it was indeed a thought-provoking 2 days that included a wide range of excellent speakers, including VAD practitioners, health department staff from VAD units, palliative care physicians, nurse managers, health policy experts and academics.

The topic of ineligibility to access VAD for those diagnosed with dementia was a major theme addressed by many presenters. Other topics covered were the continuing problem with the telehealth ban, remuneration for VAD providers, difficulties for doctors providing time until death prognoses, the lack of awareness of the availability of VAD as a legal end-of-life option and the provision of grief and bereavement support.

The recipients of VAD awards were announced at the conference dinner.

- The Go Gentle Individual Community Champion Award went to Fiona Jacobs, who together with the late Tanya Battell, waged a relentless community campaign to get the Queensland laws passed.
- The Go Gentle Organisational Community Champion Award went to Totara Hospice in Auckland New Zealand. Totara is the only hospice in New Zealand that allows VAD and is run by an incredibly committed and inspiring team of courageous individuals.
- The VADANZ Innovation Award for Emerging Research went to Jessica Young of Victoria University, Wellington, New Zealand.
- The Rodney Syme Medal was awarded to Ian Wood.



## Australian Capital Territory

As a result of a Labor win in the recent ACT election, it can be hoped that VAD laws are secure.



## Northern Territory

In light of the recently elected Chief Minister, Lia Finocchiaro's, comment stating that she supports VAD but it is not a priority for her government, the incoming NT Greens MP for Nightcliff, Kate McNamara has announced that she intends to introduce a VAD bill.



## Queensland

A report was released by The Australian Centre for Health Law Research, QUT, that looked at how the Queensland VAD system has been working since it became operative in January 2023. It has shown that the approach to providing access for individuals across the state has been largely successful.

Unlike other Australian VAD models, access is predominantly through the public sector and nurse practitioners/nurses are given greater roles.

It was suggested before the recent election that the LNP would overturn abortion and Voluntary Assisted Dying laws, should they be elected. This caused a great furore and we can only hope that the new Premier will not oversee such changes.



# NEWS FROM AUSTRALIA ...

## South Australia

Astoundingly a bill to recriminalize abortion was voted upon in the SA parliament and fortunately defeated by only one vote. The narrow defeat of this bill is of tremendous concern and is a stark reminder to all of us that we can never afford to be complacent about societal legislation on issues such as abortion and VAD.



## Victoria

The Greens Victoria issued a press release, saying that the Victorian VAD legislation urgently needs updating to stop people from suffering unnecessarily.

They wrote to the Premier and Opposition Leader, urging them to co-sponsor a bill that would remove a number of the legislative barriers that make it difficult, if not impossible, for many Victorians to access VAD.

- Remove the gag clause that prevents doctors discussing VAD with their patients.
- Remove the requirement to demonstrate an explicit prognosis time frame.
- Legislate that practitioners who hold a conscientious objection to VAD cannot refuse to provide information if requested.
- Remove the requirement for a person to demonstrate 12 months residency in Victoria.

At the time of writing, we have not yet heard about the State Health Department's report on the 5-year review of VAD operation in Victoria. It is due to be tabled before the end of the year.



## Western Australia

A very comprehensive report was released by the Western Australian VAD Review Board. In Western Australia 292 individuals accessed a VAD death in the third year of VAD operation.

Interestingly 94.9% of deaths were practitioner administered, and only 5% were self-administered. Compare this to Victoria's most recent figures for 2023-2034 in which 19% of deaths were practitioner administered and 81% self-administered.

The VAD Board chair noted the Board's disappointment upon learning that some requests for VAD had been "brushed aside or ignored when made to a medical practitioner in a consultation".

The much-awaited Western Australia VAD legislative review report has been tabled in parliament. The report is believed to contain 10 recommendations, all of which have been accepted by the Health Minister.

One of these recommendations focuses on the issue that terminally ill people are being denied choice by doctors who are conscientious objectors.

Health Minister Amber-Jade Sanderson is also reported as saying she has agreed to lobby the Federal Government to introduce Medicare benefits for voluntary assisted dying, to improve "timely access" and funding for GP training.



# ... AND AROUND THE WORLD



## Bangladesh

It is always interesting to hear about other countries initiating discussion around VAD legislation. Bangladesh is one, however it appears at this point unlikely to progress further.

## Canada

Quebec now allows individuals, who have received a diagnosis of a serious and incurable illness that leads to incapacity and inability to provide consent, to make an advance request for an assisted death. Interestingly the Canadian government has stated that it won't amend the criminal law to safeguard Quebec practitioners who administer MAiD to people with dementia via an advance directive. More recently the federal government has also announced they will launch consultations on the use of advance directives for MAiD for the whole of Canada. The situation is being intently monitored by other VAD jurisdictions around the world where the issue of the ineligibility of individuals diagnosed with dementia to access an assisted death is a topic of overwhelming concern to their constituents. In Canada there are increasingly persistent articles claiming that people who were not terminally ill but simply had unmet social needs have had MAiD deaths. With most of these cases, there has been an underlying terminal illness but of course that has not been reported.

## China

A Shanghai woman who has had lupus for 20 years is seeking to die in Switzerland. This case has initiated a social media debate in China about assisted dying.

## Cyprus

An assisted dying bill has been introduced into the Cypriot parliament as a consequence of a British man being found guilty of manslaughter after assisting his wife to die in Cyprus, at her request.

## France

A man who helped his incurably ill wife to die at her request has been acquitted of murder. The French Parliament began debating a bill to legalise assisted dying earlier this year, but debate ceased after the French President dissolved parliament in June. Macron has again called for assisted dying laws in France.

## Ireland

A report of the Joint Committee on Assisted Dying was present to the Dail in March. The committee ran for 9 months, met 26 times and had more than 100 witnesses from jurisdictions all over the world. The report provided 38 recommendations and 11 of the 14-member committee supported legislative change. Unfortunately, time has run out for the current government to introduce a bill before the next election. Irish MPs were however provided with a vote indicating their approval of the bill, 76 MPs voted in favour of the report and 53 against it. Hopefully next year we will see a lot more progress achieved in the effort to legalise assisted dying.

## Kenya

The question has been asked whether it is time to allow a 'good death' in Kenya. VAD was discussed in relation to cases of "mercy killings". where distressed relatives helped their suffering loved ones to die. The situation is compounded by levels of poverty in Kenya which means that medical treatment, let alone palliative care, is available only to a small percentage of the population.

# ... AND AROUND THE WORLD

## New Zealand

The Ministry of Health completed the first review of the End of Life Choice Act 2019. The review has made several recommendations to improve the process but the key changes hoped for, e.g. the removal of the 6-month prognosis until death criterion, were not addressed. Alongside the review, the Ministry also provided an online process to give the public an opportunity to share their views on what changes could be made to the Act. A summary of these submissions was also released. Assisted deaths make up fewer than 1% of total deaths in New Zealand.

## Scotland

In March 2024, MSP Liam McArthur introduced the Assisted Dying for Terminally Ill Adults (Scotland) Bill. The Bill is currently at Stage 1 in which The Health, Social Care and Sport Committee is continuing with its scrutiny of the Bill, hearing from experts, organisations and members of the public, until early February. This will inform the Committee's report and recommendation about whether the Parliament should support the general principles of the Bill. MSPs will then debate the Bill and decide if it should proceed to Stage 2 or be rejected.

## South Africa

Dignity South Africa is about to initiate another round of debate around assisted dying. It plans to shortly submit a groundbreaking High Court application to decriminalise and legalise assisted dying.

## The Netherlands

A report from the Dutch Association for a Voluntary End of Life (NVVE) states that seven out of 10 Dutch people believe there should be a law that allows dying assistance for seniors who feel their life is complete.

## Switzerland

A criminal investigation commenced following the death of a 64-year-old woman who died using the controversial 'Sarco Pod'. She attended 'The Last Resort', Switzerland. The designer of the pod, Philip Nitschke has said that he will print off another machine that can be used in another country.

## United Kingdom

Fantastic news from the UK, 'The Terminally Ill Adults (End of Life) 2024-2045 Bill, was passed in the House of Commons 330 to 275 votes. It had been almost a decade since Westminster MPs voted on an assisted dying bill, which at the time was comprehensively defeated. The Bill was introduced by a Labour MP as a Private Member's Bill and co-sponsored by 11 others. The frenetic lead up to the vote was quite extraordinary and sadly provided many examples of journalism at its worst. With all the hallmarks of a spiteful debate the MPs surprised many with conduct that could only be described as courteous, respectful and dignified. Having passed this major hurdle, the next stage is the committee stage where MPs can table amendments. The Bill is then subject to further scrutiny and votes in both the House of Commons and House of Lords and if agreed upon, becomes law. This process could involve another 6-months of scrutiny.

## United States

Unfortunately, there has been little progress with MAID legislation in several US states. Alarming news from West Virginia which has become the first US state to place a ban on assisted dying in its constitution. The amendment, titled "Protection Against Medically Assisted Suicide" reads: "No person, physician, or health care provider in the State of West Virginia shall participate in the practice of medically assisted suicide, euthanasia, or mercy killing of a person." In late September a bill to legalise MAID in Maryland, again failed to pass, this time by a single vote. It appeared that cultural and religious beliefs played a greater role than party affiliation. For the ninth year, the New York Medical Aid in Dying Act failed to pass through the legislature despite monumental progress of the bill.



# DWDV Board



## PRESIDENT

*Jane Morris*



## SECRETARY

*Jane Nosworthy*



## TREASURER

*Hugh Sarjeant*

## BOARD MEMBERS



*Dr Nick Carr*



*Danielle Clarke*



*Michelle Hindson*



*Danielle Jacobs*



*Dr Adam Steinberg*

## CAN YOU HELP US WITH A DONATION?



We are deeply appreciative of the amazing work done by all our volunteers, but we also rely on the generosity of donors and other benefactors to help us support the right to individual end-of-life choices through voluntary assisted dying, advocate for improvements to current laws and provide support and education for individuals, organisations and communities.

You can do so through our secure online form here: <https://www.dwdv.org.au/donation/>  
(All online donations are processed securely using Stripe.)

Alternatively, contact our office for details to make a payment by direct bank transfer.

We are a Deductible Recipient Charity, so all donations over \$2 are tax deductible.