

Dying With Dignity Victoria

Respect the right to choose est. 1974

PRESIDENT'S UPDATE

HUGH SARJEANT

It is now over two years since Voluntary Assisted Dying was implemented in Victoria and there seems to be a general sense of calm about the practice. Similarly, our contacts in Canada, who are reflecting on around four years of MAID - their version of VAD - have noted that, as time has gone by, the initial levels of anxiety and reluctance to consider MAID have decreased. The most recent VAD Review Board report notes what has been a consistent story - compliance at extremely high levels. And where any cases of non-compliance have been detected, they appear to be trivial administrative matters. The response from those making use of the service, as noted by both the VADRB and our Witnesses, shows strong support for the provision of VAD, and heart-felt gratitude to the medical staff involved.

Our congratulations to DWDQ, with Queensland becoming the fifth state to pass legislation. Despite all the political turmoil in NSW over the last fortnight, Alex Greenwich intends to introduce his VAD Bill on October 14. Premier Dominic Perrottet, despite not being in favour of the Bill, has stated he will provide LNP members with a conscience vote. A letter from the Federal Attorney-General to ACT MLA Tara Cheyne states that the Federal Government does not have any plans to repeal overriding Federal Legislation affecting the Territories, nor to amend the suicide related material offences in the Commonwealth Criminal Code (Telehealth). All this just delays the inevitable success of these two issues.

In Victoria, our primary task of assisting in any way with implementation has been impacted by the

lock-downs. The established method of providing information to groups, via a presentation in person, has resulted in ever-repeated extensions or just cancellation until restrictions are lifted.



Following a plan to do hybrid delivery (face-to-face and virtual), we have produced and revised what may suffice as second-best - an entirely virtual run-through of the Advance Care Directive, Medical Treatment Decision Maker, and VAD required information. When presented live it can make some provision for questions and feedback. Recorded, it may provide an option which, though no-response, is at least a permanent record; and a version has been posted to the website. We plan extensions to this service, to allow for more detail on certain topics.

Other work has included a continuation of attempts to reduce the impact of the ban on Telehealth; and surveying interest in, and levels of cooperation from, providers of residential aged care.

Our thanks to Sue James, Natalie King, and Chris Noonan for carrying the burden of development of our new website. At the time of writing there are still a few loose ends to be tidied up, but the new format and content have been applauded. And we are now able to modify at will, whereas until now we have had to make an application to the service provider.

DWDV AGM 13 November, 2021 @ 2:00 pm.

Due to the uncertainty of lockdowns, the 2021 AGM will be via Zoom. The QR code will take you to a web page where you can register to attend or submit an apology and appoint a proxy.



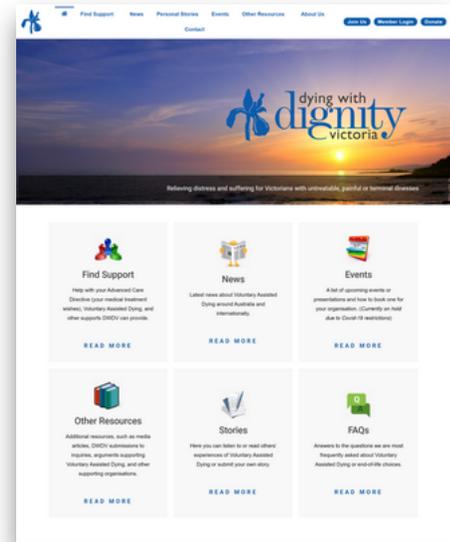
OUR NEW WEBSITE

We are delighted to have a whole new look for our website - with a fresh layout that's designed to make it easier for you to find the information you need.

We warmly invite you to visit and browse - for example to **Find Support**, explore our **Other Resources**, read some of the latest **News**, or discover **Personal Stories** about people's experiences with Voluntary Assisted Dying. And for that last, we'd love you to share your own story with us, if you would like to do so.

We also welcome your feedback - you can email us on office@dwdv.org.au or use the *Send Us a Message* form on the **Contact** page.

<https://www.dwdv.org.au>



AGED CARE FACILITIES AND VAD

SUE CUMMINGS

Earlier this year we conducted a survey among a random sample of members of DWDV to determine the level of interest in the provision of a listing of Victorian aged care facilities which support VAD (Voluntary Assisted Dying). The findings were overwhelmingly positive, with Members telling us that such information would be not only helpful but also influential in their choice of an aged care facility, should the need arise.

We have started the process of contacting all the facilities, and you can find the details of some which do support VAD on our website at:

<https://www.dwdv.org.au/find-support/vad-and-aged-care-facilities/>



NOW WE NEED YOUR HELP

We invite you to contact aged care facilities in your area - during a personal visit if possible, when these are again permitted - and find out if they support VAD or whom we should contact to gather this information. Obtaining the contact details of the people who make these policy decisions is a crucial step in obtaining the information we need for the listing.



If you are up for helping with this important task, please contact DWDV by email or phone, giving your full contact details including phone number, email and postcode or suburb.

We can then get back to you about facilities in your area from which we need information and the questions we would like you to ask. You may even want to enlist family or friends in this venture, as we would like to update our existing list with as many facilities as we can.

VAD AND ORGAN DONATION

DR. NICK CARR



July 2021, 05.00, Bruny Island, Tasmania - it's pitch dark and 3 degrees outside, not much warmer inside. Wrapped in every puffer jacket, blanket and discrete pair of gloves I can find, I arrange the iPad and fire up Zoom. The image that

the camera shows me is of a sleep-deprived hobo, unshaven face peering reluctantly from the confines of various scarves and beanies. Bad luck, that'll have to do. Now, where's the coffee?

Thus began my involvement in a WONCA¹ conference about organ donation after euthanasia (ODE). It was organised by the indefatigable Dutch, in particular Johannes Mulder and Hans Sonneveld. They corralled a small group from around the world for a virtual meeting, resulting in representation from Luxembourg, Netherlands, Belgium, Spain, Columbia, Canada, New Zealand and, yes, Australia.

What we discussed alerted me to an issue that I had not previously considered. So this brief article is not intended to describe in detail how ODE occurs, more to alert DWDV members to the issue and to provide some small insights into this new area.

ODE is currently only active in 3 countries – Netherlands, Belgium and Canada. ODE is only an option for deaths that do not involve malignancy, and as worldwide around 80% of VAD deaths are due to cancer of one kind or another, the pool of possibilities is already quite small. Add to this the inevitable medical, logistical and ethical issues, and the numbers become smaller still.

In Belgium, with over 20 years' experience of VAD (Voluntary Assisted Dying), ODE did not begin until 2005. In the 16 years since then, there have been 56 VAD deaths that also involved organ donation.

The process is complex. As an example, in the Netherlands, a patient must initiate the request; they go on to have several interviews with the transplant team, all in the presence of the VAD doctor. If the patient is at home, they are attended on the day of death by a specialist team. Farewells said, the patient

is sedated and then transferred by ambulance to hospital where the organ surgery takes place. Clearly this is not a straightforward process, and one that might be a huge barrier for people at the end of their lives.

So where did the impetus for ODE come from? From the patients themselves. People, mostly with neurodegenerative diseases, saying: I'm going to die, I have lungs/heart/liver/kidneys etc that could save someone else, please don't waste them. People who, at the end of their own lives, wanted nothing more than to help others unknown to them to live.

When it comes to my turn to speak, dawn has broken, the frost outside is visible and my misty breath keeps filming up the camera. I look like a bedraggled Andalusian goat-herder lost in the fog. A fog which occasionally clears to reveal a rather nice living room (thanks, Stayz). I explain the Australian situation, with just 2 years' experience of VAD. I mention that we are still trying to get our heads around this new system, and that I don't think we are ready for this whole new area of ODE.

I say that, as far as I am aware, the subject has yet to come up. The Canadians are surprised. Their version of VAD, MAiD (Medical Assistance in Dying), began in 2015. Their first request for ODE came just 2 months after the legislation began.

Maybe it's time we start to prepare here in Australia.



1. WONCA is an unusual, yet convenient acronym comprising the first five initials of the World Organization of National Colleges, Academies and Academic Associations of General Practitioners/Family Physicians. WONCA's short name is World Organization of Family Doctors.

CONSCIENTIOUS OBJECTION

MEREDITH DOIG

As Queensland inched closer to adopting VAD legislation, which was ultimately passed on 16th September, some religious leaders were fighting a rear-guard battle. A media release from Catholic Health Australia included statements such as, "The Queensland government is forcing Catholic hospital providers – against our values and beliefs – to open up our facilities to assisted dying" and "This bill forces those who conscientiously object to assisted dying to enable it ... Our nurses, residents and patients have chosen to work in hospitals and aged care homes that have a unique ethic of care. Their choices should be honoured."

But have they – made a choice?

Firstly, many patients do not have a choice of hospital or aged care home. Often a Catholic facility is the only one available within reasonable reach. Also, many doctors and nurses work at Catholic facilities because that is where they can get a job, not necessarily because they are Catholic. If Catholic hospitals and aged care homes employed only Catholic staff, logically they would at times be denying their patients the best person for the job, who may not be Catholic.

Secondly, what about this "unique" ethic of care? To be blunt, that's code for the Catholic doctrine of sanctity of life at all costs – even at the cost of existential suffering. Why should the Vatican's values be imposed on the rest of us, particularly when Australian taxpayers are footing the bill for these facilities?

Thirdly, what about the claim to 'conscientious objection'? Article 18 of the UN Declaration of Human Rights declares that 'Everyone has the right to freedom of thought, conscience and religion' – but this refers to individual rights. There is no such thing as the institutional right to conscientious objection.

As Neil Francis observes in *Religiosity in Australia*¹ (2021:2), "*In practice, it's used to entrench and protect religious dogma rather than service a public of diverse consciences.*"

Conscience is formed by the interaction of a natural person's private thoughts and emotions exercising moral judgement. As natural persons, individual doctors and nurses may object to certain actions because of their conscience. But institutions are not natural persons. They don't marry, for example, while natural persons can. Natural persons die but institutions don't (unless they are legally 'killed off').

By claiming a unique 'ethic of care' and certain 'values and beliefs', Catholic Health Australia attempts to portray their institutions as moral agents with conscience. But this conflates agency with conscience. Agency is the ability to act. Conscience is a form of contemplation, not action. Institutions don't have thoughts and emotions, and therefore don't have consciences.

When an institution, like Catholic Health Australia, tries to claim institutional conscientious objection, they are really claiming ideological regulation of action – a regulation that suppresses individual consciences which may or may not agree with the institution's policy.

Enough of this institutional bullying.

1. Neil Francis, *Religiosity in Australia Part 2: religious minds, religious collectives*, 2021, *Rationalist Society of Australia*.



Email: dwdv@dwdv.org.au

Phone: 0491 718 632

Address: PO Box 743, Kew, VIC, 3101,

ANGEL FLIGHT AUSTRALIA

Angel Flight Australia is a charity which coordinates non-emergency flights to assist people to access specialist medical treatment that would otherwise be unavailable to them because of vast distance and high travel costs.

All flights are free and assist passengers travelling to or from medical facilities almost anywhere in Australia.

Given the tyranny of distance affecting many patients who wish to apply for VAD, DWDV is pleased to be promoting this service for our members and others who may need to avail themselves of it.

A 'health professional' (medical practitioner, nurse, social worker) is the only person who can authorise a flight request, so this needs to be arranged through a local doctor or other health professional.

More information is on our website at:

<https://www.dwdv.org.au/find-support/angel-flight-australia/>



BOOKS, FILMS AND PODCASTS

For you to read, watch or listen, we have begun collating a range of books, films and podcasts related to VAD and the end-of-life. You'll find them on our website under *Other Resources*.

We have chosen suggestions that are informative, moving or inspiring - sometimes all three!

For example, books include *The Inevitable* (2021) in which Katie Engelhart, a veteran journalist, focuses on six people representing different aspects of the right to die debate. From an 80-year-old British woman illegally importing pentobarbital, to an Australian doctor dispensing suicide manuals online, Engelhart travels the world to hear the stories of those on the quest for a 'good death'.

And if you haven't already seen it, the 2021 film *Laura's Choice* is wonderful viewing! In this WA-made documentary, filmmakers Sam Lara and her mother Cathy Henkel follow the journey of their grandmother and mother Laura Henkel to access voluntary assisted dying.

We will be continue building this collection, so do check back from time to time for new additions.

And if you have any other suggestions of your own, please let us know!



SOCIAL MEDIA

Despite the constant and well-founded reminders of the dangers and ills of social media, many of us have found the enormous benefits to be gained from it, during the Covid lockdown restrictions that have confined so many of us to our homes, .

We have been grateful for the increased camaraderie of organisations and individuals with similar end-of-life interests, not only from within Australia but throughout the world.

Facebook and Twitter have allowed us to keep abreast of the latest developments in the Voluntary Assisted Dying sphere, which continues to gain momentum.

We have lessons to learn from countries that have been dealing with end-of-life issues for much longer than we have, so provide lessons and advice to those just commencing to navigate these issues. Social media has provided the platform for this exchange of information.

We have seen some great discussions initiated by some of our Facebook posts and some excellent follow up discussions with groups, of whose existence we had been unaware despite many aspects of their work being intertwined with our own.



VAD SUPPORT GROUP

JANEMORRIS



As mentioned in our last newsletter, DWDV is establishing a support group for family members and friends left after their loved ones have ended their VAD journey. This is not a counselling group, but a forum in which VAD experiences can be shared.

Members of the group can choose to communicate with others in person (Covid permitting), phone, email or social media. Those who wish for it, will be afforded anonymity.

We have also had offers by a couple of support group members to tell their VAD story. It is critical that we hear and inform others of these stories, especially the ones that are so positive and exemplify the success of the Victorian VAD program. There is absolutely no obligation to take part in this.

We have a wonderful DWDV member, Nicole, who has volunteered her services to help in the co-ordination of this group. Nicole has had personal experience of VAD through her guidance and support of a loved one through the process.

We are extremely grateful for her help and her willingness to share her experience with others.

We have been contacted by individuals, from different regions in Victoria, who have expressed interest in joining our group and meeting others.

If you, or someone you know, would like to know more, please ring or email our office.



RENEWING YOUR MEMBERSHIP ON THE NEW WEBSITE

Member login can be used to renew your membership subscription and/or update your details.

[Member Login](#)

If you are a member you'll need to reset your password. If your membership has expired and you wish to renew, your new subscription will start on the date of renewal and will be due again one year later.

However if you prefer to keep your 30 June expiry date, please contact the office and we can change that for you.

OVERSEAS NEWS

Canada

A snap Federal election was held in Canada on September 21. The pro-life lobby campaigned against Justin Trudeau's Liberal Party and there were concerns that a Conservative Party win would result in planned extensions to MAiD eligibility criteria being abandoned. Justin Trudeau was however returned to power with a minority government and as a result the Joint Committee that had been set up to look at these MAiD issues, and abandoned prior to the election, has been re-instated.

United Kingdom

News from the UK. A private member's assisted dying bill, sponsored by Baroness Molly Meacher, will be debated later this year. Interestingly the British Medical Association, that currently opposes assisted dying, is to debate a move to adopt a neutral stance. A recent poll indicated that 73% of Britons supported assisted dying, with 74% support among Tories.

Scotland

In the Scottish Parliament, that is more pro-choice than ever, a proposed Assisted Dying Bill has been brought forward. A public consultation is to be held soon and then, if revised proposals are approved a Bill may be presented to parliament early next year.

Ireland

In Ireland, the Oireachtas (Parliament) Justice Committee voted to send a proposed VAD bill to a special committee rather than send it directly to the Parliament where it would have been debated.

Spain

An assisted dying law was approved in Spain in March which came into effect on June 25th, 2021. Two individuals have since been reported as having sought an assisted death.

Italy

A petition in Italy has achieved well over the required 500,000 signatures necessary for a referendum on assisted dying to be called.

New Zealand

Closer to home, the New Zealand 'End of Life Choice Act' is set to be implemented on November 7, 2021.



DWDV BOARD



PRESIDENT

Hugh Sarjeant



VICEPRESIDENT

Jane Morris



SECRETARY

Dr Meredith Doig OAM



TREASURER

Mark Newstead

BOARD MEMBERS



Dr Nick Carr



*Sue
Cummings*



*Dr Cameron
McLaren*



*Dr Lyn
Stavretis*



*Dr Rodney
Syme*

Give
the gift of
dignity.

We are a Deductible Gift Recipient charity,
which means all donations are fully tax-deductible.

Your donation will help us to continue successfully
advocating for dignified end-of-life choices for all Australians.

To make a tax deductible donation or find out more, visit
dwdv.org.au, call 0491 718 632, or write to
PO Box 743 Kew VIC 3101.



Respect for the right to choose | EST 1974