

Dying *with* Dignity Tasmania (Inc)

PO Box1022
Sandy Bay
Tasmania 7006

your right to choose

www.dwdtas.org.au

May 2009

DwDTas Committee

Mike Harris (President)
Trish Kershaw (Treasurer)
Kay Scurr (Secretary)
Beatrice Bentley

Marian van den Byllaardt
Alan Cameron
Helen Cutts
Barbara Porter

ANNUAL GENERAL MEETING FRIDAY 3 July 2009

Date **3 July 2009**
Time **1.00 pm**
Venue **Glenorchy Library,
4 Terry Street, Glenorchy**

The AGM will be followed by refreshments and then a talk by Dr Rodney Syme commencing at 2 pm.

All members, together with members of the public, are invited to attend Dr Syme's talk.

AGM Agenda

Items of general business at the DwDTas AGM include:

- 1) Apologies for absence
- 2) Confirmation of minutes of the last AGM
- 3) Annual reports
- 4) Election committee members

DwDTas Elections

→ see back page for nomination paper

Please note that ALL committee positions become vacant so now is your chance to take an active part in DwDTas and our push to achieve law change. There is a proposal form for your use – see the last page of this Newsletter. Nominations close on 23 June 2009.

WORKSHOP WITH DR RODNEY SYME

Adult Education Centre
Church Street, North Hobart

Saturday 4 July, 9 a.m.

There have been many responses from members wishing to attend this Workshop at which Dr Syme will address both end-of-life issues and state of the current law and will answer questions from those attending. At the Workshop, attendees will be provided with a set of documents on end-of-life issues and instructions as to how best to complete, witness, register and store them.

Those who have requested a place will be notified shortly.
There will be a small charge of \$20.00 to offset expenses.

There are a few places still available. Please contact Mike Harris
Email - *mike@pangolin.co.nz*
Letter - *DWDTas (Inc), PO Box 1022, Sandy Bay 7006*

Do our politicians want law change?

Throughout the years politicians have steadfastly ignored the 80% of Australians believe that terminally ill individuals should have a right to seek and obtain assistance to end their life with dignity. However, if we are ever to achieve law change in this area it has to be through our elected local representative, but what do we know about their views? Do they share our objectives? - we decided to find out.

The debate associated with proposals for formulating legislative change in the area of assisted dying are easily clouded by many complex moral and ethical issues. To obtain a focused response from politicians we did not ask them for their individual perspectives or even that of their party. Instead we asked for an opinion on the objectives for law change that we have already proposed in our DwDTas Legislative Charter.

To keep things as simple as possible we asked for a response from the following list:

- [A] Support of the charter
- [B] Support but with some qualifications
- [C] Opposed to the charter
- [D] Decline to answer/no response

See how your elected representative responded on the DwDTas web site
www.dwdtas.org.au

In spite of being sent 4 emails requesting a reply many did not respond and are recorded as [D].

If yours is one of these why not write to them as a constituent and request that they reveal their opinion?

ANNUAL SUBSCRIPTIONS DUE:

If your annual membership subscription is due for the 2009 - 2010 year, a notice will be posted to you by separate mail.

FINANCIAL ASSISTANCE SOUGHT

We are excited by the invitation to send two delegates to a National Conference hosted by South Australia VES, in October this year. It has been a very long time since we have been able to meet and learn from our fellow VE Societies in Australia. Unfortunately, there will be significant costs in attendance, airfares and accommodation. If anyone felt that they could assist us with a donation towards these costs, we would be so very grateful.

Trish Kershaw.
Treasurer.

THINKING OUTSIDE THE SQUARE

Sheila Howe, May 2009.

Over 80% of Australians say they want voluntary euthanasia laws in this country.

20% of Australians are undecided or they say they do not want voluntary euthanasia laws
Newspoll Feb 2007

Ten years ago figure statistics told us only 60 percent of the population was in favour of VE, showing a strong, positive change in public attitude. Commonsense tells voters that whilst they may not be immediately concerned, by legalising voluntary euthanasia laws now they protect themselves and others. Too many people nowadays remember seeing a dying relative or close friend who had needed this protection. Of the 20 percent who do not agree, let us say that half are undecided and the rest are actively against voluntary euthanasia. Why are the leaders of the two major political parties so against it, why are their views still predominating in a democratic country? Whilst individual politicians will often agree when talking with us informally, at the first signs of a debate or a vote on voluntary euthanasia these same people are transformed into instant obedience to the party line.

With such opposition from major political parties changing the laws is very, very difficult. The majority of States have tried hard and failed. Only last year a Victorian campaign that showed the most hopeful signs sadly missed out. In the NT, a few years ago, the Federal government annulled an Act that for such a brief period permitted voluntary euthanasia. Because NT is a Territory and not a state the Federal Government had this power. One thing we are fairly sure is that when one State in Australia succeeds, other states are likely to follow with much less resistance.

What can we do? Standing outside Parliament House, waving a banner and shouting at the television cameras may make us feel good, but it is probably not a great deal of value unless it is also part of an ongoing campaign. Writing to politicians, yes. I am told that one letter will make little difference, but a dozen letters on the same subject from different people to the same member concerns them. The self-preservation instinct kicks in as they think of percentages, reflecting on how those who vote for them are thinking! I have learned that a short typed letter of maybe three paragraphs may get as far as the sitting Member's desk and it will be read, but the

long and painstakingly put together manifesto will be read by somebody else and reported to them briefly. Certainly, if, at the next Election, more than 50 % of the voting public told all the aspiring candidates in their area that if they were successfully elected and they did not support a voluntary euthanasia bill they would not be voted for at the next election, our chances of success would be high.

The Enduring Guardianship is a strong document only available in Tasmania under the Guardianship and Administration Act 1995 and we tend to underrate it. Here we appoint a Guardian and set out our wishes in case, during our dying days, we become mentally or physically unable to speak for ourselves. Once this document has been registered with the Guardianship & Administration Board (there is no fee) all medical staff in Tasmania are obliged by law to follow its instructions. The Guardianship Board allows, indeed encourages us to use our own wording in this document and the most recent wording available to member of Dying with Dignity is acceptable to them. This wording sets out specific details to the point of no further treatment or medication apart from sedation, and that food and liquid should be left at the bedside, but no assisted feeding.

Most importantly what are we aiming for? Our thoughts on the type of euthanasia we want available to us are woolly indeed. Is this the right time that we should be agreeing amongst ourselves and then spelling this out in detail?

Methods of voluntary euthanasia vary from country to country. Holland, Belgium and Luxembourg have procedures allowing a doctor to administer a lethal injection to a patient after a safety protocol has been followed. Their laws apply to their country's citizens only. In Luxembourg, the most recent country to legalise voluntary euthanasia, when Grand Duke Henri whose signature was necessary before the Act passed into law had decided not to sign, the parliament stripped away his powers and the Act went ahead.

Switzerland allows all comers to travel there to die. After they have fulfilled the necessary legal requirements with proof of their poor health, a lethal dose is offered for the patient to drink. Oregon State, USA, law permits a doctor to write a script for a lethal tablet for a patient with a terminal condition. The person concerned holds this tablet and can take it when they decide the time is right. Which method is right for us or is there another alternative? Time to decide. Washington State, USA had recently introduced voluntary euthanasia laws.

Working outside the law is becoming increasingly common and it must be an indication that something is seriously wrong when normal law-abiding citizens do this. We have read so many pathetic cases of people begging to be allowed to die. Those who have assisted them can be charged with assisting a suicide, a charge that carries a jail term if found guilty. What sort of country is this that we condone prolonging the lives of those in extreme pain who want to die? We are fortunate that the judiciary in Tasmania shows compassion and commonsense in sentencing. When the accused in the most recent cases have been found or pleaded guilty necessitating a jail sentence, each time this sentence has been totally suspended by the judge and replaced by a good behaviour bond.

The universal drug of choice to die is the barbiturate Nembutal. Commonly in use in Australia for many years as a sleeping pill, it was withdrawn from legal use a few years ago. Now it has continued use in this country by veterinarians where it is the preferred drug and legally available for animal mercy-killing.

Nobody knows the amount of illegally obtained Nembutal currently coming into Australia through mail order deliveries and personal overseas travel. Certainly, it is rising, with many stories of people of advanced years showing interest in taking a holiday to Mexico. I have seen pictures of a veterinary supplies shop there with a two storey high sign at the side saying "Australian Veterinary Supplies".... The pathetic story of a sick and elderly man who fell outside such a shop still haunts me, he cracked several ribs and smashed his precious bottle. Somehow he managed

to get to his feet and to purchase more. It really doesn't seem beyond the bounds of possibility and commonsense for some of us here in Australia to reach an agreement with a compassionate 'drug baron' who will arrange for a veterinary supply warehouse to be broken into on our behalf, or for regular smuggled supplies from overseas. Why not? Here is a rising need and surely there is a trader to fill every need? Perhaps ridicule in the eyes of the world could be a catalyst for change

Thanks to the unremitting work worldwide of a comparatively few people, attention is drawn to the plight of the elderly and sick who want to die [is growing]. Sadly, so many of us fail to realise that publicity is like gold and don't appreciate the efforts of a few people who keep this going. We do not acknowledge and praise them sufficiently. Any publicity keeping voluntary euthanasia in people's minds is hugely important, as without it there is little progress. The more countries to legalise voluntary euthanasia, the easier it will become for other countries to follow.

We can all help by stepping outside our comfort zone and talking to others. Please try it and you may be pleasantly surprised.

Got a contribution for the Newsletter ?

Submissions welcomed by email or post:

Email: mike@pangolin.co.nz

Post: DWD Tas, P O Box 1022, Sandy Bay, Tas 7006.

Articles published in DWD Tas Newsletter articles do not necessarily reflect the opinion of the society or the committee.

AUSTRALIAN NEWS

High Court decision: attempted suicide and state of mind

In a recent decision (*Stuart v Kirkland-Veenstra* [2009] HCA 15, the High Court was unanimous in determining that there is no necessary correlation between attempting suicide and being mentally ill and that there is no obligation on any person (including police) to stop a suicide attempt. The decision, in effect, clarified the existing common law on this issue, rather than created a new law. However, the effect of the decision, binding on all courts in all States, is probably that anyone present at a suicide will not be chargeable simply because they did not attempt to stop that suicide. The problem remains, however, for the person(s) present in that they might still be charged with assisting at a suicide.

OVERSEAS

Phoenix

Four Final Exit members were indicted Thursday in connection with the April 2007 assisted suicide of a Phoenix woman (Jana Van Voorhis). They have been charged with manslaughter and conspiracy to commit manslaughter. The allegation is that two Final Exit members showed Van Voorhis how to use part of the equipment that brought about her death. The prosecutors claim that Van Voorhis did not have a terminal illness (she feared she had breast cancer) but was mentally ill. These arrests are part of the investigation of Final Exit by the FBI, the Georgia Bureau of Investigation, and police agencies in eight US States.

Oregon

The US State of Oregon has practiced physician-assisted dying for a decade now. The figures for 2008 were similar to those of 2007, and in line with the figures over the past decade.

- 88 prescriptions for lethal medications were written (cf 85 during 2007)
- Of these 88, 54 patients took the medications, 22 died of their underlying disease, and 12 were alive at the end of 2008. A further 6, who had received prescriptions before 2008, died from taking the medications, resulting in a total of 60 DWDA deaths during 2008.

- As in prior years, participants were between 55 and 84 years of age (78%), white (98%), well-educated, and were more likely to have cancer (80%). Patients who died in 2008 were slightly older (median age 72 years) than in previous years.

UK Nurses

Nurses are to receive detailed guidance for the first time on how to help terminally ill patients end their own lives. Assisted suicide remains illegal in Britain but the Royal College of Nursing (RCN) says that many nurses are being asked by desperate patients about travelling abroad, such as to the Swiss clinic Dignitas, to end their lives.

To date, none of those who have accompanied British citizens traveling to Dignitas have been prosecuted. However, some medical practitioners have been struck off or suspended for assisting friends and family to die in this way.

Nitschke and Chabot give talks in the England

After some initial entry problems, Dr Nitschke undertook a number of talks in England at which he also publicized the kit he has developed — dubbed by critics a "suicide kit" — which he says will allow anyone who has obtained a suicide drug to test it and make sure it will work properly.

Dr Boudewijn Chabot , a Dutch euthanasia expert, has also given talks in London. He denies he backs euthanasia but told the Evening Standard doctors should be allowed to give patients a lethal overdose as a last resort. In 1991, Dr Chabot was arrested in the Netherlands for providing a fatal dose of medication to a patient. The Netherlands changed their laws later that decade. Dr Chabot has published a scientific guide to DIY suicide in the Netherlands to help people end their lives quickly and painlessly

Please detach

Dying with Dignity Tasmania (Inc.)

Proposal Form for Committee Membership

I proposename of person nominated

Signed:signature of person nominated

For the position of:
 (President/Vice President/Secretary/Treasurer/General Committee)

Name of Proposer: Signed:

Name of Seconder: Signed:

Date:/...../. 2009

Send this form to: DwDTas, P.O. Box 1022, Sandy Bay Tasmania 7006
 to arrive before **23rd June 2009**