

'The right to die is as inviolable as the right to life'. Sir Mark Oliphant

A new SAVES website to support our campaign

SAVES' campaign for law reform continues unabated. As we gear up for promoting future voluntary euthanasia legislation we have taken the opportunity to review and update our extensive information and resource base which has been compiled over the more than 30 years since the society's inception. Anne Bunning, SAVES' campaign manager and strategist, together with president Frances Coombe, has taken the initiative to integrate this material within a new website design at <https://www.saves.asn.au/>. We express our heartfelt appreciation to Anne for undertaking this huge task to promote both our 'public face' and our advocacy. We also express our sincere gratitude to Brenda Aynsley OAM who has professionally managed our site for so many years.

Please visit SAVES' website for the latest information on how you can get active NOW. For example, the site provides information on contacting candidates for the 2018 state election. This is the most important action you can take in 2017: talking now to these candidates and elected members who need to understand the views of their constituents; rather than just being swayed by a highly organised and vocal minority opposition. SAVES' website has a link to the list of candidates, even though not all have been nominated at this stage as selection is made closer to election time.

A personal visit to your MP is the best way to ensure that our state representatives get face to face contact with people who are passionate about the issue, or those that have been personally effected by the current lack of end of life choices. It is important to let your MP know your personal stories. The push to progress our attempts at law reform is bolstered by the overwhelming testimonies of people whose family members have experienced needless suffering at the end of life.

Understandably, some people are unable to visit their MP in person, but still want to ensure that their MP hears about their support for assisted dying laws. A personal letter or email to your MP can be very

powerful in illustrating why you want your MP to vote for assisted dying laws.

Ask your candidate if he or she holds in-principle support for voluntary euthanasia by asking 'What will you do to make voluntary euthanasia legal and stop people suffering at the end of life?' This choice will only become legal when a majority of MPs vote for the legislation.

When candidates are 'out and about' campaigning for election let them know that you want them to state publicly that they will support legislation which will stop the suffering of people at the end of life. It is also important to talk to your neighbours, your family, your friends and to get them to talk to their candidates as well.

Don't overlook the Legislative Council (Upper House) either, as legislation must get through both Houses. As Legislative Councillors represent the whole state, every Councillor and every candidate is aiming to represent you. Contact as many of them as you can and ask them the same questions and let them know that this social issue will not go away until properly dealt with.

AMA adopts criteria of unbearable suffering

In November 2016 the AMA released a position statement on Euthanasia and Physician Assisted Suicide (PAD). The AMA stated

"there are some instances where it is difficult to achieve satisfactory relief of suffering (and that) doctors have a responsibility to provide care which strives to ensure that a dying patient is free from pain and suffering".

The statement continued

"A patient's request to deliberately hasten their death by providing either euthanasia or PAD should be fully explored by their doctor ... Understanding and addressing the reasons for such a request will allow the doctor to adjust the

patient's clinical management accordingly or seek specialist assistance."

This policy exactly mirrors the principle behind the criteria of "unbearable and hopeless suffering" central to the original Voluntary Euthanasia Bill introduced by Hon Steph Key MP in February 2016. The key eligibility criteria underlying the Voluntary Euthanasia Bill 2016 were the words "unbearable" and "hopeless". The Bill stated that when the patient found their suffering no longer *bearable*, the person could request euthanasia; the doctor would take this as a signal to explore further treatments in order to make the suffering bearable; this two way process would continue until the doctor could identify no further treatments acceptable to the patient which could make their suffering bearable; at this point their situation would be defined as *hopeless*; only then would the person meet the criteria for voluntary euthanasia or PAD.

The AMA statement says that if the law allows euthanasia or PAD, doctors must be involved in the development of regulations and guidelines.

The immediate past president of the AMA, Prof Brian Owler, chaired the 2017 committee advising the Victorian Government on the legislative framework for its forthcoming assisted dying legislation discussed later in this bulletin. Prof Owler has indicated that he supports assisted dying law reform. It was unfortunate that the AMA's schedule for policy reviews did not coincide with the passage of the Voluntary Euthanasia Bill 2016 in South Australia. However, it is hoped that the revised policy can be used to contribute to a more informed debate when the next Bill is introduced after the March 2018 election.

Fade to Black: a documentary

In November 2014 SAVES Bulletin discussed the high profile media campaign instigated by the then terminally ill Melbourne man, Peter Short, ('Tic, toc, tic toc, dying to a killer clock'). Mr Short, CEO of a multi-million dollar company, lobbied politicians and gained a meeting with then Prime Minister Tony Abbott who agreed to allow a conscience vote on the issue if it was brought to parliament. Mr Short also raised funds for the production of a documentary about the last months of his life as an opportunity to continue campaigning 'beyond the grave'.

Mr Short died in palliative care on 29th December 2014 after receiving counselling and provision of medication to control the manner of his dying by Dr Rodney Syme. As Dr Syme explained:

Ultimately Peter died in palliative care. This might seem a paradox, given his energy for the right to die at home at his own time. Dying, however, can be complex, not so easy to control. What Peter was arguing for was choice, and in the end he exercised choice; the actual choice he made is not important, the fact that he had a choice is what matters.

The documentary 'Fade to Black' is the outcome of this collaboration between Peter Short and his family and producer Jeremy Ervine. It was screened nationally, including several sessions held in central and southern Adelaide during August. SAVES and other voluntary euthanasia advocacy group members met with Peter Short's widow Elizabeth and Mr Ervine prior to the screenings. These screenings were followed by informative 'Q and A' sessions for audience members. The response to the documentary was highly positive; endorsing one synopsis of the film that called it both entertaining and informative (link below). It portrayed the film as 'frank, confronting and often humorous' in documenting the fight to legalise physician assisted suicide in Australia'. It claimed 'This documentary reminds us that the best adventures in life - and death - are those you could have never possibly imagined'.

Bequests to SAVES

A bequest to SAVES is a significant gift furthering the primary aim of the society to achieve law reform allowing choice for voluntary euthanasia.

The appropriate wording for the gift of a specific sum is I bequeath to the South Australian Voluntary Euthanasia Society Inc. the sum of \$.....

In the unlikely event that you wish to leave your entire estate to SAVES it would read I give, devise and bequeath the whole of my real and personal estate to the South Australian Voluntary Euthanasia Society Inc.

Thank you

Audiences were also provided with a range of contacts to approach in order to advocate for wider public availability of the movie via mainstream television stations and other media outlets. Please send a message to TV stations and streaming platforms to say you want to see this film. ABC Email: acquisitions@abc.net.au
SBS Email: acquisitions@sbs.com.au

Netflix: <https://help.netflix.com/en/titlerequest>. Greater publicity will provide a powerful tool for legislative change.

The film will hopefully be available on DVD early in 2018 <http://www.documentaryaustralia.com.au/films/2855/fade-to-black>

Victorian Ministerial Advisory Panel recommendations

The July 2017 SAVES Bulletin noted the impending release of the Final Report of the Legislative Council's Legal and Social Issues Committee Inquiry into *End of Life Choices*. This was presented to the Victorian Government on July 31st by the Chairperson, immediate past president of the AMA and neurosurgeon Prof Brian Owler. Two of the seven member panel were South Australian palliative care physicians; Emeritus Prof Ian Maddocks, AM, and Dr Roger Hunt. The 257 page report gave 66 recommendations which were framed by Victoria's *Charter of Human Rights and Responsibilities Act 2006*. The Panel considered each human right and found seven to be particularly relevant to voluntary assisted dying.

The Panel presented the recommendations in four parts, covering eligibility criteria, request and assessment processes, oversight, and implementation. Each recommendation of the June 2016 Parliamentary Committee report is discussed, and The Panel report 'aims to take the reader through the recommended voluntary assisted dying process step by step. It 'describes and explains the considerations, conclusions and recommendations made by the Panel at each point in this process'. (p47) Space does not permit reporting on each, but the following are some key recommendations.

Recommendation 1 provides the guiding principles to aid interpretation.

- Every human life has equal value.
- A person's autonomy should be respected.
- A person has the right to be supported in making informed decisions about their medical treatment and should be given, in a manner that they understand, information about treatment options, including comfort and palliative care.
- Every person approaching the end of life has the right to quality care to minimise their suffering and maximise their quality of life.
- The therapeutic relationship between a person and

their health practitioner should, wherever possible, be supported and maintained.

- Open discussions about death and dying and peoples' preferences and values should be encouraged and promoted.
- Conversations about treatment and care preferences between the health practitioner, a person and their family, carers and community should be supported.
- Providing people with genuine choices must be balanced with the need to safeguard people who might be subject to abuse.
- All people, including health practitioners, have the right to be shown respect for their culture, beliefs, values and personal characteristics.

Recommendation 2 establishes the eligibility criteria, whereby a person must:

- be an adult, 18 years and over, ordinarily resident in Victoria and an Australian citizen or permanent resident
- have decision-making capacity in relation to voluntary assisted dying
- be diagnosed with an incurable disease, illness or medical condition, that – is advanced, progressive and will cause death – is expected to cause death within weeks or months, but no longer than 12 months – is causing suffering that cannot be relieved in a manner the person deems tolerable.

The policy intent is to ensure that voluntary assisted dying is limited only to the people for whom it is intended, and to provide clear guidance to the community and health practitioners. The Panel affirmed that no medical practitioner or health service can be forced to participate. In cases of conscientious objection, the practitioner should inform their patient as soon as reasonably possible and ensure their personal objection does not impede that person's access to medical treatment.

Further recommendations include:

R46 which establishes a Voluntary Assisted Dying Review Board to review every case and report on the operation of voluntary assisted dying in Victoria.

R52 sets the role of the Review Board to report to Parliament every six months in the first two years, and then annually.

R53 proposes that the Act be reviewed after five years.

R54 outlines protection against criminal, civil or professional liability providing a health practitioner complies with the legislation.

R58 explains how voluntary assisted dying is to be implemented within the context of existing care available to people at the end of life, and to ensure that it is embedded within existing safety and quality processes. The report includes seven detailed pages documenting the step by step process for voluntary assisted dying.

The Panel expresses confidence that ‘the recommendations it has made will inform safe and compassionate voluntary assisted dying legislation that embeds safeguards, checks and balances at every point of the voluntary assisted dying process’. (p48)

The information in this article has been provided to SA MPs in the form of a weekly newsletter that is sent every parliamentary sitting week. The fifty newsletters to date are all on SAVES’ website and provide invaluable information for members and the wider community – as well as talking points when contacting local members.

References

Panel Report <https://www2.health.vic.gov.au/about/publications/researchandreports/ministerial-advisorypanel-on-voluntary-assisted-dying-final-report>

ABC News, 25.7.17

The Australian, Sue Hutchinson, 25.7.17

Victorian Government response to Advisory Panel recommendations

Following the release of the final report of the Ministerial Advisory Panel on Voluntary Assisted Dying Victoria’s Premier Daniel Andrews accepted all 66 recommendations. He also stated that he expects the matter to be decided by the end of the year. Mr Andrews argued that regardless of an individuals’ view on end of life choices:

The time has come to make some profound change and to no longer deny to those who want a more dignified end to their life, or at least want to know that that option is available to them. The time has come to stop denying them that...I’ve come to the conclusion that whether you would avail yourself of this option isn’t really the point.

Premier Andrews shared his hope that Victorians suffering with an advanced and incurable illness,

disease or medical condition would be able to seek a medically assisted death from 2019, under a model to be considered by the state parliament. It has been billed as the most conservative framework in the world, with 68 safeguards and restrictions.

The desperate need for law reform was highlighted by Victorian Coroner John Olle’s statement to the parliamentary inquiry where he stated:

There is a cry for help. It may be muted, it may be veiled, but it is there nonetheless. And they all know it – including doctors. They know that this person is screaming for help but no one is going to answer this call. Not in this society. So they have got to die alone.

Reference:

Assisted dying: Victorian Premier Daniel Andrews accepts report recommendations ABC Radio Melbourne 25th July 2017 <http://www.abc.net.au/news/2017-07-25/time-profound-changes-on-end-of-life-choices-daniel-andrews/8740520>

Proposed Victorian law reform faces backlash

As was the case in the SA 2016 campaign, the focus of Dying with Dignity Victoria is to get voters to talk to their local MPs. This is the most effective form of advocacy in any state based law reform initiative, and one that is adopted by opponents of law reform. In response to the recommendations for law reform in Victoria, a loose coalition of social conservatives and religious groups have spearheaded a strategically focused campaign against the move. Their response was swift, with 260,000 flyers distributed through the postal service by Right to Life Australia headed “You can stop this!”

Right to Life Australia’s president Margaret Tighe contends that the Bill can be derailed by relentlessly lobbying MPs in a limited number of vulnerable electorates, particularly through seeking face-to-face meetings which they have been successful in achieving in several electorates. Some of these electorates are on very tight margins. There is also a focus on a letter writing campaign, promoted in preference to emails which, according to Tighe, are not as effective.

In August the Saturday Paper reported how Right to Life’s approach is a ‘tried and tested tactic’. It also noted that in November 2016, the organisation ‘celebrated the South Australian parliament’s decision to shoot down the state’s 15th attempt to legalise voluntary euthanasia since 1995’. It had

taken out newspaper ads and rallied local supporters to call and write to their local MPs. Whether or not it is the case, Right To Life were keen to claim victory in helping to determine the result, with Ms Tighe maintaining ‘We just hammered and hammered,’... and that’s it, it was lost.’

Separate but overlapping religious communities are also active, with the Victorian Council of Churches calling the issue a ‘flashpoint’. The Australian Christian Lobby (ACL), arguably the country’s most influential religious lobby group claiming 12,000 members in Victoria alone, is also working hard to influence MPs.

Even with the government and opinion polls on their side, assisted dying advocates aren’t taking victory for granted. Lesley Vick, president of Dying With Dignity Victoria (DWDV) was reported as saying ‘I wouldn’t want to proffer a prediction on how the vote might go, other than to say I do think it probably will be quite tight’.

Reference

Power, J The assisted dying campaign in Victoria, The Saturday Paper, Aug 5-11 2017
<https://www.thesaturdaypaper.com.au/news/politics/2017/08/05/the-assisted-dying-campaign-victoria/15018552005024>

Andrew Denton

Andrew Denton and his organisation Go Gentle Australia (GGA) supported SAVES’ campaign in 2016. They are now focusing on Victoria: working behind the scene to strengthen the chances of success. Readers may not be aware that Andrew Denton has recently undergone multiple bypass surgery for a serious heart condition. We are pleased to hear that he is recovering well, and that the team at GGA advise that their work will continue in his absence. Andrew hopes to return to the campaign trail some time in September with ‘an exciting new scar’. SAVES has sent him our very best wishes for a speedy recovery.

The VE Bulletin is available by email:

Please consider this option to reduce postage costs. Email: info@saves.asn.au to receive future editions by email.

Western Australia

The WA Parliament has been engaging in renewed debate on legalising voluntary euthanasia. The Legislative Assembly has voted to establish the Joint Select Committee on End of Life Choices. It comprises four members each of the Legislative Assembly and Legislative Council. The terms of reference are:

That the Committee inquire into and report on the need for laws in Western Australia to allow citizens to make informed decisions regarding their own end of life choices and, in particular, the Committee should:

- (a) assess the practices currently being utilised within the medical community to assist a person to exercise their preferences for the way they want to manage their end of life when experiencing chronic and/or terminal illnesses, including the role of palliative care;
- (b) review the current framework of legislation, proposed legislation and other relevant reports and materials in other Australian States and Territories and overseas jurisdictions;
- (c) consider what type of legislative change may be required, including an examination of any federal laws that may impact such legislation; and
- (d) examine the role of Advanced Health Directives, Enduring Power of Attorney and Enduring Power of Guardianship laws and the implications for individuals covered by these instruments in any proposed legislation.

David Templeman, the government minister responsible for deciding which laws will be debated, said the committee would deliver its report by June 30th 2018. This would allow any recommended end-of-life legislation to be debated by the end of next year. An inquiry would allow the public to make submissions, and Mr Templeman said he hoped it would also include public hearings.

Premier Mark McGowan holds in-principle support for assisted dying and will allow Labor MPs a conscience vote; as will Liberals, Nationals and possibly One Nation. In 2010, a bill promoted by Greens MP Robin Chapple was defeated 11-24 in the Upper House and was not referred to the Legislative Assembly. It is interesting to note that not one Liberal MP supported the measure, and five of 11 Labor MPs also voted against it; highlighting how divergent their views are from the broader community. Private members bills had also been unsuccessful in 1997, 1998, 2000 and 2002.

References

Kagi, J 'Legalising euthanasia: What you need to know after parliamentary inquiry announced' ABC News 10 August 2017 <http://www.abc.net.au/news/2017-08-10/wa-parliamentary-committee-on-euthanasia-explainer/8790896>

Hondros, N 'Euthanasia: WA parliament to consider end-of-life legislation' WA Today 27 July 2017 <http://www.watoday.com.au/wa-news/euthanasia-wa-parliament-to-consider-endoflife-legislation-20170726-gxjl0v.html>

New South Wales

Dying with Dignity NSW advises that notice was given in the NSW Legislative Council on the 8th August for the *Voluntary Assisted Dying Bill 2017*. The Bill has been drafted by the NSW Parliamentary Working Group on Assisted Dying; comprising Trevor Khan MLC (Nationals), Lee Evans MP (Liberal), Alex Greenwich MP (Independent), Lynda Voltz MLC (Labor), and Mehreen Faruqi MLC (Greens). As reported on in the previous SAVES Bulletin, the Bill would give terminally ill patients, aged over 25, with less than 12 months to live, the right to request and receive assistance to end their lives with medical help, if they are experiencing severe pain, suffering or incapacity. The Bill allows for self-administration but not voluntary euthanasia.

As in Victoria, the Catholic Church has mobilised a grassroots campaign with parishioners, school staff and parents urged to petition politicians well ahead of a Bill going before state parliament. Bishop Peter Comensoli, designated spokesman for Catholic bishops on the issue of voluntary euthanasia, has organised distribution of the petition to parishes and schools.

The brochure has been produced by the anti-euthanasia group HOPE. NSW Nationals MP Trevor Khan from the cross-party Parliamentary Working Group is critical of the campaign, arguing "I'm providing the information to assist the people of the diocese informing their conscience about euthanasia".

Dying with Dignity NSW, which is supporting the Bill, arranged for Dr Leigh Dolin, president of the Oregon Medical Association during the debate that led to legalised assisted dying in 1996-97, to speak to NSW MPs.

The Bill is due for debate in the upper house in mid-September.

References

For further information see New South Wales Parliamentary Working Group on Assisted Dying <http://www.mehreenfaruqi.org.au/wp-content/uploads/2017/06/Voluntary-Assisted-Dying-Bill-2017-NSW-Overview.pdf>

Nicholls, S 'Catholic church mobilises against NSW assisted dying laws' Sydney Morning Herald, 20th Aug 2017

Australian Capital Territory

As other Australian jurisdictions move to introduce assisted dying laws, momentum is again growing in the ACT to legislate on the issue. The 'Andrews Bill', instigated by Kevin Andrews MP, which overturned the NT legislation in 1996 also legislated to disallow the ACT, Norfolk Island and Northern Territory from ever passing assisted dying laws.

ACT Labor politician Tara Cheyne is seeking to repeal this Bill to once again allow the territory the right to legislate. She argued 'We are beholden to outdated legislation, more than 20 years old, made by people who don't represent us, rendering us a second class jurisdiction.' ACT Senator Katy Gallagher has previously described the bill as a 'legislative sledgehammer, and Chief Minister Andrew Barr has also argued for its repeal.

Reference

Burgess, K 'ACT pushes for right to choose on voluntary euthanasia laws' Canberra Times 31 July 2017 <http://www.canberratimes.com.au/act-news/act-pushes-for-right-to-choose-on-voluntary-euthanasia-laws-20170729-gx1bp8.html>

Refuting fallacies promoted by Victorian bishops

In a half page advertisement in the Herald Sun on the 31st July Victorian Archbishops Philip Freier and Denis Hart, and Bishops Ezekiel, Suriel, Lester Briebbenow, Bosco Puthur and Peter Stasiuk admonished the Victorian Government over its initiative to legalise assisted dying. They framed their opposition in language commonly used by opponents of law reform: using terms such as 'killing' and 'government endorsed suicide', while posing arguments about the possibility of mistakes being made in the healthcare system and trust in doctors being undermined. While such arguments have been refuted by SAVES on many occasions, including in 'myth-busting' correspondence and newsletters to SA MPs, it is important to expose these spurious claims whenever they arise. Neil Francis, who leads the

website Dying for Choice, deconstructed the bishops' advertisement in an article in Guardian Australia. The following brief summary highlights his refutation of seven fallacies in the bishops' newspaper advertisement which had taken the form of an open letter to MPs.

The 'abandonment' fallacy

In their letter the bishops argue that assisted dying represents the 'abandonment of those who are in greatest need of our care and support'. On the contrary; to ignore people's deeply-held beliefs and stated wishes is to deny their own values and critical faculties and to instead impose religious dogma.

The 'competition' fallacy

The bishops called for more healthcare funding instead of access to assisted dying, thereby pitting one option against the other. The Victorian Government is increasing palliative care while also aiming to provide assisted dying. As Palliative Care Australia acknowledges, even the best care is sometimes not enough. It is a fallacy to claim that these options must compete against each other another for legitimacy.

The evidential fallacy

The bald statement that trust in doctors will be undermined is spurious. Scientific studies into attitudinal change cited in Francis' article show that more people trust doctors when assisted dying is legal. Patients can finally talk openly about their options, even if they decide against an assisted death.

The equivalence fallacy

The bishops refer to assisted dying as 'government endorsed suicide'. In doing so they fallaciously equate a reasoned decision for a peaceful assisted death with the impulsive, violent, isolated, and tragic suicides of individuals who are unable to cope with problems including mental illness and drug addiction. Terminally ill people are not choosing between life and death, but between two different ways of dying, and the bishops disrespectfully conflate the two.

The inconsistency fallacy

The bishops also argue against assisted dying because 'mistakes happen in healthcare' and 'the vulnerable are exploited.' However, an identical hypothetical problem exists under the 30 year old Victorian statutory right to refuse care which has only three contingent safeguards. In stark distinction, the Victorian proposal contains more than 60 safeguards and oversights. Arguing for inconsistency potentially places the bishops at risk of ridicule.

Just a reminder...

SAVES public meetings are held twice-yearly at 2.15 pm on Sunday afternoons at the Box Factory 59 Regent St South, Adelaide.

These are important forums for updating members on SAVES' activities, legislative issues and relevant local, national and international events and initiatives.

Guest speakers provide further interest, as well as to informal discussion over tea and coffee.

The next meeting is highlighted on page 11

Make a diary note now!

The not-so-hidden agenda

The bishops' approach is also unsubtle in hoping that the erroneous arguments they promote will not be seen to have religious connotations. Yet all signatories are those of clerics employed directly in the promotion of their religions.

The authority fallacy

The bishops may well rely on their religious status to convey authority and gravitas. However, as people holding paid positions, just like anyone else their titles grant them no special privileges in lecturing Victorians about how they should die in the face of a terminal illness.

The previous Bulletin discussed the low level of religious adherence in Australia. To put this issue into greater context, the bishops' combined faiths represent approximately 33% of the Victorian population, while 32% of Victorians identify with no religion. Furthermore, according to the 2016 ANU study, 89% of non-religious Victorians support assisted dying law reform, as do 78% of Victorian Catholics and Anglicans.

References

'An Open Letter from Christian leaders to the Premier of Victoria regarding the proposed Victorian Assisted Suicide and Euthanasia Bill' Herald Sun 31st July 2017 <http://melbournecatholic.org.au/News/an-open-letter-from-christian-leaders-to-the-premier-of-victoria-regarding-the-proposed-victorian-assisted-suicide-and-euthanasia-bill>

Francis, N 'Seven fallacies in Victorian bishops' arguments against assisted dying', Guardian Australia 5th August 2017 <https://www.theguardian.com/commentisfree/2017/aug/03/seven-fallacies-in-victorian-bishops-arguments-against-assisted-dying>

Link to the references on attitudinal changes cited in Guardian Australia article: <http://www.dyingforchoice.com/docs/AMAUncoveredFullReport27Mar2017.pdf>
 Link to the ANU study on support for voluntary euthanasia: <http://www.australianelectionstudy.org/>

The World Federation of Right to Die Societies

The World Federation, founded in 1980, consists of 49 right to die organizations from 21 countries. The Federation provides an international link for organizations working to secure or protect the rights of individuals to self-determination at the end of their lives.

<http://www.worldrtd.net/>

End of Life Law in Australia

The Australian Centre for Health Law Research is a specialist research centre within the Faculty of Law at the Queensland University of Technology in Brisbane. The Centre is Australia's largest health law research group, and undertakes research into complex problems and emerging challenges in the fields of health law, ethics, technology, governance and public policy. End of Life Law in Australia is the name of a website which is an initiative of the centre. It is designed for use by patients, families, health and legal practitioners, the media, policymakers and the broader community. It allows access to information about Australian laws relating to death, dying and decision-making at the end of life. The website notes that these laws are highly complex, particularly in Australia where the law differs between States and Territories, and where areas of uncertainty exist about the law.

Visit this website to get a broad introduction to these laws, and to stay informed about recent developments in the end of life area.

References

Website <https://end-of-life.qut.edu.au/>

Also see the centre's report on two decades and trends, models and politics of voluntary euthanasia: <https://eprints.qut.edu.au/95429/1/Failed%20Voluntary%20Euthanasia%20Law%20Reform%20UNSWLJ.pdf>

International News

Canada

Although more than 630 Ontarians have legally ended their lives with medical assistance, not one has been able to do so in hospitals with historic ties to the Catholic Church. Ontario law currently provides exemptions to any institutions that have objections. Advocates for medically assisted dying argue that since these are public-funded health-care centres, they should offer the option. The law states that the hospitals, hospices and long-term care centres unwilling to perform medically assisted death must transfer a patient to a facility that will.

Dying With Dignity Canada may challenge this legal arrangement. Shanaaz Gokool, CEO of Dying with Dignity Canada, claims that patients in Ontario should not have to transfer to another facility to receive medically assisted deaths. While supporting the right of exemptions for individual nurses or doctors, objection should not extend to an organisation.

The potential legal challenge would also tackle a clause in the Bill that restricts freedom of information on which facilities do or do not assist, as the current arrangements make it harder for patients or family members to navigate their end-of-life options.

Health Minister Eric Hoskins said that people can be connected with health-care staff who are willing to carry out the procedure and that the Department is monitoring the situation closely. Half of the medical assistance occurs in patients' homes and not in institutions.

Reference

Fraser, L 'Dying with Dignity may challenge Ontario law exempting religious hospitals from offering assisted death' CBC News 14th August 2017 <http://www.cbc.ca/news/canada/toronto/assisted-dying-religion-ethics-accessibility-1.4244328>

DONATIONS TO SAVES

SAVES members continue to be generous donors towards the society's ongoing campaign for law reform. The different initiatives and ongoing work incur considerable costs, even though the society is staffed entirely by volunteers.

All donations - large or small - are always welcome.

Thank you!!

New Zealand

On June 8th the New Zealand *End of Life Choices* Bill, submitted by MP David Seymour in 2015, was randomly selected from the members' ballot. If passed, the law would allow people over 18, with a terminal illness or 'grievous' medical condition, the choice of assisted dying. New Zealand politicians will be allowed a conscience vote on the bill, which is unlikely to be voted on before the federal election scheduled for the 23rd September this year. It appears that it may have the numbers to pass.

A New Zealand study undertaken in 2015 and published in June this year explored the views of doctors and nurses on whether or not they supported legalising assisted dying. While only 37% of doctors were in support, 67% of nurses were supportive. The researchers stated that it was clear from respondents' comments that they wanted strong accountability processes and professional supports for safe provision of assisted dying.

Reference

Oliver, P; Wilson, M; & Malpas, P. (2017) 'New Zealand doctors' and nurses' views on assisted dying in New Zealand, *New Zealand Medical Journal* 130, no 1456

United States

Medscape Medical News, an American news site for physicians, published the results of a recent poll showing that the number of US physicians who support the concept of assisted dying is increasing. Although the poll shows rising support, even in States where it is legal few doctors have assisted patients to die. Almost 300 physicians responded to the poll. Sixteen per cent practice in States with a physician-assisted dying law. Of these 17% stated that they assisted a patient to die, 13% claimed that they had received a request, but had declined, and 70% said they had never been asked to assist.

Sixty two per cent of the respondents who practice in States where there is no physician-assisted dying law said that they had been in a situation in which they wished the patient could have been able to get assistance in dying.

Reference:

Ault, A 'Doctor Support for Assisted Death Rises, but Debate Continues' July 7th 2017 <http://www.medscape.com/viewarticle/882334>

Finland

The World Federation of Right to Die Societies www.worldrtd.net/ advises that on 7th November 2016 Finland put forward a citizens' 'Euthanasia initiative on behalf of a good death'. It is proposed that a drafting process begin for a law to allow voluntary euthanasia under clearly prescribed circumstances. Concurrent with the Act different municipalities and hospital districts must ensure organised high standard, extensively accessible palliative care.

Ambassadors for Law Reform

Over 100 Australians act as ambassadors for law reform. SAVES Bulletin will profile the convictions of South Australian ambassadors, with the views of Susie Byrne and John Willoughby highlighted in this edition. Susie Byrne, Convenor SA Nurses Supporting Choices in Dying states:

Our group, SA Nurses Supporting Choices in Dying was formed in South Australia in March 2010 to provide a forum for the nursing voice and perspective on the legislation of voluntary euthanasia and other patient choices in end of life care. We passionately support our patient's right to autonomy throughout every stage of life and most importantly the right to be able to choose the most appropriate when end of life approaches. We believe that voluntary euthanasia should also be included in these choices. We are honoured to be included as Ambassadors for Law Reform.

Emeritus Professor John Willoughby from Doctors for Assisted Dying Choice explains:

Two reasons motivate my willingness to be an ambassador. Firstly, and obviously, voluntary assisted dying is powerfully justified by some of the rare exigencies of life, namely, pain or suffering without possible relief. I've observed such situations. The second is the important public expression of the fact that medical practitioners, like me, can be found who also see voluntary assisted dying as ethically valid and who support legislation of voluntary assisted dying. This view is contrary to the often-held view that medical professions are opposed to legalisation.

Important notice

When making payments to SAVES through EFT please ensure that you include full details of your name and contact details.

Thank you

Voluntary Euthanasia Advocacy Groups

Several advocacy groups share the aim of law reform to allow choice for voluntary euthanasia under prescribed circumstances. These are listed below with contact details for members and other interested parties who may seek to join or make enquiries. **These groups all comprise volunteers and would be appreciative of any financial assistance.**

Drs for Assisted Dying Choice:

Website: drs4assisteddyingchoice.org

Dr. Rosemary A. Jones North Adelaide Medical Centre, Suite 22, 183 Tynte St North Adelaide, SA 5006.

Tel: (W) (61) (8) 8239 1988 Fax: (W) (61) (8) 8239 1085 Mobile: 0407 729 407

Email: rosiej@internode.on.net

Professor John Willoughby

Mobile: 0499 078 938 John.Willoughby@flinders.edu.au

SA Nurses Supporting Choices in Dying

Convenor: **Ms Susie Byrne** Email: sanursessupportingchoicesindying@hotmail.com

Facebook: SA Nurses Supporting Choices in Dying.

Christians Supporting Choice for Voluntary Euthanasia

Website: www.christiansforve.org.au

National Co-ordinator:

Ian Wood Villa 1, Hampton Mews, 4 Wills Place, Mittagong NSW 2575

Email: Christiansforve@westnet.com.au

Patron and Member of the Executive:

Rev Dr Craig de Vos, Minister North Adelaide Baptist Church, 154 Tynte Street,

North Adelaide SA 5006 Ph: (W) 08 8267-4971 (M) 0402 305 029

Email: minister@nabc.org.au Website: www.nabc.org.au

Syndicated Voluntary Euthanasia Youth Advocates- 'SAVE-YA'

Convenor: **Ms Amy Orange**: SAVEyouthadvocates@hotmail.com

Lawyers for Death with Dignity

Spokesperson **Stephen Kenny**: skenny@camattalempens.com.au or Emma at eriggs@cllegal.com.au with *Lawyers for Death with Dignity* as the subject heading.

Mailto: skenny@camattalempens.com.au

My Body My Choice VE spokesperson Phillip Beddall:

https://www.facebook.com/MY-BODY-MY-Choice-VE-350165335178263/?sk=timeline&app_data People with disabilities in support of Voluntary Euthanasia

South Coast Support Group

Convenors: **Denis and Pat Haynes** den1929@bigpond.com

NOTICE OF SAVES 2017 ANNUAL GENERAL MEETING

*** Please note change of time

The SA Voluntary Euthanasia Society Inc. (SAVES) will hold its 2017 AGM at
The Box Factory 59 Regent St South, Adelaide
Sunday October 29th 2017 at 2.00 pm

Guest speaker will be

Brian Morris, director of Plain Reason, who will speak on the topic

“A religious minority making us suffer unto death”

Tea/coffee and biscuits will be available at the conclusion of the meetings.

All welcome! Business will include the president's and treasurer's reports, and election of office bearers for a period of one year. Written nominations for official positions must be received by Thursday 12th October

South Australian Voluntary Euthanasia Society Inc. (SAVES)

Annual Membership fees: Single \$30.00 (Concession \$15.00), Couple \$40.00 (Concession \$20.00)

Life membership: Single \$350.00, Couple \$500.00

Annual fees fall due at the end of February. Payment for two or more years reduces handling and costs.

MEMBERSHIP FORM print and post or join online at <https://www.saves.asn.au/join>

Date _____ Renewal () New Member ()

Surname(s) including Mr/Mrs/Ms etc. _____

Given name(s) or Initial(s) _____

Address _____

Suburb/Town _____ Post Code _____

Phone (Home) _____ (Work) _____

Email _____ (is also used to provide additional information)

Year(s) of Birth (optional) _____

Please make cheque or money order payable to SAVES and send with this form to:

SAVES Membership Officer, PO Box 2151, Kent Town SA 5071

Or pay by Electronic Funds Transfer:

Commonwealth Bank BSB 065 129 Account Number 00901742

MEMBERSHIP RENEWAL: When renewing membership please email info@saves.asn.au to confirm your EFT renewal.

Do you wish to receive the Bulletin (newsletter) as attachment in PDF format? _____

How did you hear about us? _____

Your area of expertise that could be of help to SAVES _____

Membership fees for _____ years \$ _____

Plus donation to support the work of SAVES \$ _____

Total \$ _____

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SAVES' members support the society's primary objective which is a change in the law, so that in appropriate circumstances and with defined safeguards, death may be brought about as an option of last resort in medical practice. These circumstances include the free and informed request of the patient and the free exercise of professional medical judgement and conscience of the doctor.

SAVES IS NOT ABLE TO HELP PEOPLE END THEIR LIVES

(SAVES is not associated with Dr Philip Nitschke or EXIT International)

SAVES' Primary Objective:

A change to the law in South Australia so that in appropriate circumstances, and with defined safeguards, death may be brought about as an option of last resort in medical practice. These circumstances include the free and informed request of the patient and the free exercise of professional medical judgment and conscience of the doctor.



Committee:

President

Frances Coombe

Vice Presidents

Julia Anaf

Arnold Gillespie

Hon. Secretary / Minutes Secretary

Frances Greenwood

Hon. Treasurer

Vivienne Nielssen

Membership Officer

Elice Herraman

General member

Rosemary Doolan

Patrons

Emeritus Professor Graham Nerlich

Emeritus Professor John Willoughby

Telephone

Frances Coombe **0421 305 684**

Internet

www.saves.asn.au

SAVES Bulletin is published three times a year by the SA Voluntary Euthanasia Society Inc. (SAVES). Letters, articles and other material for possible publication are welcome and should be sent to *SAVES Bulletin Editor, SAVES, PO Box 2151, Kent Town SA 5071.*

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Editor: Julia Anaf