

WEST AUSTRALIAN VOLUNTARY EUTHANASIA SOCIETY (Inc)

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Our Mission: To bring about such changes in Western Australian Statute Law and to medical ethics as will allow a person to receive medically assisted euthanasia under circumstances specified by him or her, when legally competent to do so.

The time has come

... to legalise Voluntary Enthanasia

Voluntary Euthanasia has been in the news practically everyday, which shows how important the subject has become. With nearly 80% of public support, it is surprising that our parliamentarians have not seen it fit to endorse legalisation. Even more surprising is that five bills were introduced in the parliament in Western Australia over the years and only the last even reached second reading stage.

One may wonder why the mental and legislative block? Why the reluctance on our parliamentarians' part to face the question and debate the issue? An impartial observer would agree that there is a groundswell of support for legalisation, but the parliament has been glossing over the fact and avoids tackling the issue. Why?

There is no doubt it is a contentious issue, mainly because there are strong views on the subject of assisted dying. But politicians have faced tough questions before, though reluctantly at times – like the legislation on abortion. Former Senator Prof Peter Baume provided a possible answer when he said that most politicians are afraid they may lose about 10% of votes if they were seen to support the legalisation. He thought that about 10% of the electorate are committed anti-euthanasia supporters and may change their votes. Prof Baume felt that very few politicians have the luxury of a 10% buffer in their electorates.

Be that as it may, it was painfully evident that the debate in the Upper House on Robin Chapple's Voluntary Euthanasia Bill 2010 was not to legalise voluntary euthanasia, but more on the reasons for not legalising it. With immense popular support, one would expect parliamentarians to say the bill needs passing and, if necessary, what safeguards should be put in place to stop misuse. Instead, we witnessed a sterile debate.

Wild claims were made about the so-called 'slippery slope' and accusations about misuse were claimed without any foundation. In their opposition, the religious lobby often put forward statistics from the Netherlands and Belgium, more often than not deliberately twisted and incomplete. So much so that it will be appropriate to quote what Dutch academics, John Griffiths (Emeritus Professor of Sociology of Law), Heleen Weyers (Lecturer in Legal Theory) and Maurice Adams (Professor of Law) have

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Wednesday, 15th May 2013 at 2 pm at Citiplace Community Centre

on the walkway between the Art Gallery and Myer Store opposite the escalators at

Perth Railway Station.

Guest speaker to be confirmed

Afternoon tea provided - All welcome

to say about how academic research on voluntary euthanasia in The Netherlands is distorted by those with ideological agendas,

"Imprecision, exaggeration, suggestion and innuendo, misinterpretation and misrepresentation, ideological ipse dixitism, and downright lying and slander (not to speak of bad manners) have taken the place of careful analysis of the problem and consideration of the Dutch evidence."

With good intentions and goodwill we should be able to enact a law which will be compassionate, sympathetic, practical and workable. With that in mind, I suggest the following to start a discussion with an open mind.

- * I do <u>not</u> believe that voluntary euthanasia legislation should only be available for the terminally ill. It would preclude a vast number of persons suffering from Motor Neurone Disease, Multiple Sclerosis, Parkinson's Disease, Hodgkin's Disease to name a few. For example neither Christian Rossiter nor Barbara Harrison would have qualified under legislation confined to terminally ill patients.
- * I suggest that Voluntary Euthanasia should be available to anyone eighty years old or over, when competent and suffering, mentally or physically, more than he or she wishes to bear. The medication will be able to be prescribed by a doctor and either ingested by self or injected by the doctor. In case the patient is incompetent, it will be sufficient to show that an Advance Health Directive or Living Will, properly executed and witnessed, was made to that effect by the patient while competent.

 Below eighty, a person will have to show a similar terminal ailment to the satisfaction of two medical practitioners, one of them being a psychiatrist.

- * The usual cry that vulnerable persons will be targeted and victimised is unproven by statistics from jurisdictions where voluntary euthanasia has been legalised. Once the so-called vulnerable people have been identified, making safeguards should not prove to be too difficult. It has to be accepted that no amount of honest intention will ever make any legislation fool-proof or immune from misuse. There have been enough examples of elder abuse, financial, physical and mental, that should make society blush. If we consider them to be vulnerable to pressure and abuse then should we not legislate to allow them to safeguard their dignity? It will be hypocritical to refuse them the right to physician assisted death while leaving them susceptible to abuse.
- * People try to decry voluntary euthanasia by calling it 'killing', but that is an emotive word for what is a compassionate help to suffering individuals. Different words are used in the language to mean the same act performed with differing motives. It is not euphemism; it is employing the right word for the right act. I would term voluntary euthanasia as physician-assisted death to relieve suffering, which is what the vast majority of people understand by the word and support.

So far politicians have only mouthed pious words and behaved as if the words and talk of more funds will suffice. That is not going to help vulnerable and the suffering persons seeking a peaceful end.

I earnestly hope that serious parliamentarians will approach this question with an open mind and tackle the matter with compassion, honesty and willingness to solve it.

Ranjan Ray

A Tragedy in Karrinyup

At about 9 am on Thursday, 3 January, 2013, two brothers found their mother, Helen Allen dead at her Dempster Road home in Karrinyup. Their 75-year-old father, Robert, was nearby and very ill. They called an ambulance and Robert was taken to hospital and stabilised.

Helen had had advanced motor neurone disease and Robert has developing dementia, facing life in a nursing home without her. They had been members of Exit International, a pro-voluntary euthanasia association, for over five years, and had

decided to end their lives together as neither could bear the thought of living after the other had died. Gabrielle Knowles' report in *The West Australian* on 4 January states that the police have not revealed how Helen died but think her death was not suspicious.

A compassionate person unfettered by religious dogma will recognise the tragedy of this story, which is not that Helen died but that Robert didn't.

David Prichard

President's Report - Summer 2013

STATE ELECTIONS

The elections have come and gone and whilst the Liberal Party had a comprehensive win, we are no closer to getting carefully safeguarded voluntary euthanasia legislation debated in the state parliament. On the positive side, however, the leader of the state opposition made his position clear on VE prior to the election.

Mark McGowan is on the public record as a supporter and said that he would be prepared to put forward a Bill to allow voluntary euthanasia in Western Australia. It is the committee's intention to approach Mr McGowan to find if his pre-election pledge is part of his future planning and when we could expect to see such a Bill put forward. At that time we will offer our experience and assistance should he require it.

MEDIA SUPPORT

Since the sad deaths of Bernie Erickson, Julie Kuhn, Barbara Harrison and Helen Allen, there has been extensive coverage in the electronic and print media on the subject of voluntary euthanasia. The coverage has been generally supportive of our position and this is very encouraging. It is important that our members and committee take advantage of any situations, although sad, to press and publicise our support for VE.

FOCUS ON STRATEGY

It has been said before but is well worth repeating that given 80 to 85% of the West Australian public support an end of life choice, we really need not preach to the converted. This means that around 15% of the population either have no opinion or are against us. This being the case, our efforts need only be directed to around ten per cent of the population.

"Who are they?" you may ask (or may already know).

Those against us are sections of the **medical profession** who for reasons known to themselves currently are against VE. A growing number of enlightened members of the profession are changing or at least showing willingness to change their position. By far our greatest resistance comes from the conservative branches of **religious groups** principally the Roman Catholic Church. And given the position taken by the new pope, this attitude is unlikely to change at the top in the near future. There are, however, reformers within the laity of the Roman Catholic Church, so who knows!

In the end it is our **politicians** who need to be pressured to introduce and pass VE Legislation and are the people on whom we should concentrate. We have to corner them and ask what they fear given the widespread support VE enjoys. I suspect that they fear the pressure that a minority of those against can bring to undermine their chances of re-election.

We have a growing number in our community who are very concerned what their futures hold given the current trend in the medical profession towards the prolonging of life beyond what most of us would consider our 'use by date'.

MEMBERS ARE URGED TO USE EVERY OPPORTUNITY TO MAKE THEIR VIEWS KNOWN.

YLR.COM

We have been urged by the current management of Your Last Right.Com to rejoin as a member and provide a director. The CEO Neil Francis has resigned and the trustees of the Clem Jones Estate are keen for the organisation to continue as a conduit for funds to assist in the passage of VE Legislation in Australia. The organisation will be run as a 'slimmed down' model and will be chaired by Dr Rodney Syme of DWDV (Dying With Dignity Victoria) and directors from each state VE body.

I feel that access to funds for specific approved projects is too good to miss and provided various questions of a legal nature can be satisfied by YLR, we will probably rejoin. Members will be advised in due course.

WAVES' COMMITTEE

My thanks go to Ranjan Ray and the committee for the work they have done in the past six months particularly during my absences. I urge all members to recognise the work the committee does on our behalf and urge all to assist where possible.

Murray Hindle



The 2013 WA Election has been decided ... so what now?

The Western Australian State election was held on Saturday 9 March 2013. As widely expected, the principal result was the return of the Barnett Liberal government for another term (of four years). The size of the swing to the Liberal and National parties in the Legislative Assembly was greater than many had expected in the lead up to and during the campaign - although the Newspoll published on the day prior to the election proved to be accurate.

Legislative Assembly

Noteworthy features of the results included:

- 1. the handsome size of the swings in certain metropolitan seats (such as Perth, and certain northern suburbs);
- 2. the gain by the Liberals of some long-held and 'heartland' Labor seats, like Belmont and Balcatta;
- 3. a continuation of the resurgence of the National Party in the bush, on the back of the Royalties for Regions programme and particularly Brendon Grylls' successful transfer to the Pilbara from the Wheatbelt (involving the loss of another traditional Labor seat);
- 4. the associated change to the geographic spread of Labor representation to the point that it risked having no country seats at all;
- 5. several nail-bitingly close counts, three of which (Albany, Midland and Collie-Preston) have led to Labor 'holds' when all had looked lost (although recounts in the last two are now taking place, and reversals cannot be ruled out);
- 6. the end, at least for now, of the presence of independents, with the retirements of two members (including Liz Constable in Churchlands) and the defeats of Adele Carles in Fremantle and Janet Woollard in Alfred Cove with the return of those seats to the major parties that traditionally had held them (except in the case of Kalgoorlie, which completed its transition from Labor to conservative); and
- 7. a notable reduction in the Green vote after many years of it building to the point of it even becoming competitive in certain lower house contests.

Legislative Council

As is customary, the count in the upper house has been much slower than in the Assembly. At the time of writing, the results are not final.

However, it seems clear that the conservative parties have gained several seats at the expense of the Labor Party and The Greens. Some 'marginal' parties or independents had relatively good

elections, and one or two, such as Shooters and Fishers, and the ex-National Max Trenorden, are still hoping for seats.

Implications for VE legislation

Perhaps there are two major aspects of the results to consider for their likely impact on the passage of VE legislation.

First, what, if anything, do the results say about the level of support for VE law reform?

Realistically, we have to accept that VE, or dying with dignity, was not a prominent issue in the election, despite recent publicity on some individual cases, the diligent letter-writing by Murray Hindle and others to the West Australian, and the WAVES advertisements in the week prior to the election.

In those advertisements, we had listed sitting members who had indicated their support, and who were again standing. There were seven such candidates in the Assembly. Three of them (Adele Carles, John Hyde and Terry Redman) did quite badly, though one could safely say that was for other reasons. One increased his vote greatly – but he is a Liberal in the metropolitan area. And the last three (including Mr McGowan) did quite well.

The major party leaders had made clear their personal attitudes to legislation to permit voluntary euthanasia: Colin Barnett was opposed, and Mark McGowan supportive. These were personal views and neither sought to bind their parties. However, particularly given that the leaders will be very influential in the important decision of whether to allow a 'conscience vote', those personal views are of some importance for WAVES members.

Mr Barnett's 2013 primary vote was massive – almost 65% - but Mr McGowan's was also impressive – in excess of 56%. In each case, the vote had increased from the 2008 election (somewhat more so in Mark McGowan's case).

In my view, one cannot read a lot into these figures. However, any message from them is not discouraging.

Secondly, how will the likely level of support in the new parliament compare with that in the old?

One obvious fact is that the number of Greens in the Legislative Council will decrease – from four to (probably) two. And two former supporters in the Assembly will no longer be there.

It is noteworthy that far and away the most successful Green candidate was Robin Chapple, who of course is well known as the proponent of two unsuccessful VE law reform attempts in the past. His primary vote, in Mining and Pastoral (hardly a hotbed of revolutionary sentiment!), exceeded the party vote in metropolitan regions, where the Green vote for many years was strong.

While it is my opinion that Robin has assiduously established his high level of support through plain-speaking environmental advocacy and hard work, his outstanding result has not been hampered by his championing of the cause of voluntary euthanasia. And it is important in itself that he has been returned, and will be there in the next term and able to introduce another Bill.

An educated guess is that new conservative members, especially those in country seats, will be unlikely to support VE law reform. However, their predecessors, even those from the ALP, were hardly our supporters anyway.

It appears that no candidates representing either Family First or the Australian Christian Party (formerly the Christian Democrats) have been elected. Those groups would be our most vociferous opponents.

One or two new Liberal members, such as Eleni Evangel in Perth, should not be assumed to be opponents, as they are representing constituencies with large numbers of "progressive" electors. Early approaches to such people, to seek their support or at least a commitment to an open mind, will be important.

Conclusion

While overall it would be drawing a long bow to suggest that the community support that we know exists for VE legislation has had a clear and demonstrable effect on the election result, nevertheless we can see that:

- 1. the two parliamentarians most visibly associated with the cause have had very good results in their electorates; and
- 2. there is a sound foundation in the new parliament for WAVES to renew its push for the law reform for which our members have waited so patiently and for so long.

Steve Walker

What is needed now ... is a man like Booth

Booth Gardner, a two-term Washington governor who later in life spearheaded a campaign that made Washington the second state in the country to legalize assisted suicide for the terminally ill, has died after a long battle with Parkinson's disease. He was 76.

The millionaire heir to the Weyerhaeuser timber fortune led the state from 1985 to 1993 following terms as Pierce County executive, state senator and business school dean. Since then, he had worked as a U.S. trade ambassador in Geneva, in youth sports and for a variety of philanthropic works.

But his biggest political effort in his later years was his successful "Death with Dignity" campaign in 2008 that ultimately led to the passage of the controversial law that mirrored a law that had been in place in Oregon since 1997. The law allows terminally ill adults with six months or less left to live to request a lethal dose of medication from

their doctors. Gardner knew that he wouldn't qualify to use the law because Parkinson's disease itself, while incurable, is not fatal. But at the time, he said his worsening condition made him an advocate for those who want control over how they die.

"It's amazing to me how much this can help people get peace of mind," Gardner told The Associated Press at the time. "There's more people who would like to have control over their final days than those who don't."

The Washington law took effect in March 2009, and since then more than 250 people have used it to obtain lethal doses of medication. In his biography, when asked how he wanted to be remembered, he responded, "I tried to help people."

"I got out of the office and talked with real people, and I think I made a difference."

The Associated Press, March 16, 2013

Members' Contributions

I Don't Want to Die in Agony ~ A Point of View

I do not think I am about to die, but am concerned about my dying. I am not, however, concerned about my death. It is eventually unavoidable with the most probable result being analogous to an eternal dreamless sleep, the prospect of which I find quite attractive.

However, the process of dying is one that I find quite appalling to contemplate and in the debate on voluntary euthanasia and/or suicide, the eventual inevitability of death seems underemphasised by most and by some ignored altogether. If I come to a point where I wish and am able to end my life, how shall I accomplish the act? What convenient, unmessy ways are there? Should I jump off a tall building, under a bus or train, or what? If I do, will it be fair on those who will have to clean up the mess?

As a young laboratory technician working in the haematology department of an English hospital, I had occasion to visit the children's ward. In a cot in the middle of the ward was a four month old with a grossly deformed head, hopelessly dying of osteomyelitis. The obscenity of the baby's appalling suffering was compounded by the hospital's preparedness to let it continue. To repeat a frequently heard point: "we would not let it happen to a dog". Not only did that baby have to suffer agonies, it also had the misfortune to carry human genes that prevented it being allowed the release normally permitted for dogs.

All life forms are subject to disease, pestilence and impermanence. Life is a temporary state. Why then are we bombarded by arguments from those who see some benefit in the perpetuation of pointless suffering? Even those who profess to speak from religious conviction seem intent on delaying for as long as possible the arrival in Paradise of suffering individuals.

The myth that drugs can always control extreme chronic pain is erroneous. Generally the pain is only partially controlled anyway but drugs tend to lose their effect through continuous use; doses have to be increased.

Eventually a point is reached when the dose itself becomes life-threatening. It is then that the suffering really begins, when doctors fear the professional and legal repercussions of palliative measures becoming the cause of death. People do not for no reason beg to be allowed to die.

The problem is exacerbated in Australia by a ban on the clinical use of heroin. Whilst being readily available on the streets at the requisite black market price, its use in medicine in Australia is illegal. Such legislation is sadistic; if English patients may legally be treated with heroin, why not also Australians?

Ways for people to peaceably end their suffering, if they wish, should be published in Australia as they have been in one way or another in America, Scotland, London and elsewhere. It is said that to publicly provide such information would be to encourage its misuse. Well, perhaps, but the same argument applies to knives, guns, fast cars, cigarettes, chainsaws, carcinogens and poverty. Methods of ending one's life are permitted to become common knowledge if they're traumatic and messy, but not if they're dignified and painless.

I appreciate the matter of voluntary euthanasia is contentious and that arguments in its favour must be presented with level-headed reason. Nevertheless, the language in which the arguments are generally couched is rather too delicate to have the desired impact. For example, the advocacy of the right of an individual to die 'with dignity' tends to trivialise the issue. Prolonged agony is not undignified; it is obscene.

David Prichard

"To assist a suffering human being to die, even if the request is entirely valid, still seems for many too difficult to contemplate. And this can only change if death and dying are no longer taboo topics. What we really need is a culture-change, where lawmakers and medical professionals accept that individuals have a legal right to orchestrate their own death."

Jean Tazelaar

Notice Board

Membership Matters

We remind members that our current membership year runs from 1 July 2012 to 30 June 2013.

The address label on your copy of WAVES News shows the date of expiry of your subscription.

Please make sure that, when paying directly into WAVES' Bank account, your NAME is printed on your payment slip as 'Reference'. Otherwise we have no way of knowing who has paid and for what — subscription or donation. Even better: send us a copy of your bank receipt, or email or post us the details: your full name, address and details of payment.

Please let us know if you require a receipt, as we normally do not issue one. Donations are not tax deductable.

Thank you for your support.

www.waves.org.au

Have you visited our website lately? You will have noticed that we are in the process of making it better. Eventually you will be able to access our information - newsletters, forms, references, etc - and connect to other sites using the many Links provided. But it is a slow process. Thank you for being patient.

We now have some additional email boxes for your convenience:

Office: info@waves.org.au

Membership: memberships@waves.org.au

News Editor: editor@waves.org.au Web Editor: webmaster@waves.org.au

You can send your queries and submissions

directly to the right person.

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MEMBERSHIP RENEWAL FORM

Membership year runs from 1st of July to 30th of June of the following year

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EXIT News

EXIT International welcomes WAVES' members to join their organisation and points out that only Exit members are allowed to attend the meetings.

Please phone Carol O'Neil on 0429 039 167 for further details.



W.A.V.E.S has no religious, professional or political affiliation. Its membership comprises a wide range of people - some from a variety of professions, including medical

and nursing; some from religious denominations and some politicians. Many have publicly expressed their support for the legalisation of voluntary euthanasia, both passive and active.

PARTICIPATE IN OUR CAUSE

You can help us make Voluntary Euthanasia a legal choice. Explain it to your friends and family. Write, phone or visit your State MP.

Make your views known?

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Executive Committee 2013

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