



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.

Rational Suicide

Is this an oxymoron?

On April 1 Dr Philip Nitschke appealed to the Supreme Court of the Northern Territory against a decision of the Australian Medical Board (AMB) which has seen him suspended from practising medicine since last July. The case raised many disturbing questions, most particularly how the AMB refuses to even consider strong evidence that people are not always mentally ill because they want to suicide.

Dr Nitschke is accused of posing a serious risk to public safety because he took no action to prevent the suicide of a stranger. At the heart of the case is a very troubling assumption that all people seeking suicide must be mentally ill and require medical intervention.

Dr Nitschke's lawyers have pointed out that suicide is the lawful right of a rational person. Suicide may indeed be a very sane response in certain circumstances.

Why does society have such trouble accepting the possibility of rational suicide? Ranjan Ray, WAVES Vice President, recounts how over the centuries "*We have clung to a belief that life is God's gift which should not be put asunder by a mere mortal. And so, while our society has also enshrined in law an individual's right to suicide, the belief lingers that this must be the result of a sick mind*".

If two-thirds of all suicides are caused by depression and/or mental illness, why have we decided to ignore the other one third of those statistics? Why do we need to believe that *every* suicide is ipso facto caused by depression and could have been avoided?

Jeff Kennett, media commentator and *beyondblue* supporter, has condemned Dr Nitschke for saying that Nigel Brayley could have had quite legitimate reasons for committing suicide.

The Western Australian Mental Health Commissioner, Tim Marney, has gone so far as to label rational suicide an oxymoron. Why is this belief so entrenched at the same time that the right to suicide is also so widely supported?

Is it because we might have to acknowledge that there are unpalatable reasons why some people choose suicide? Intense isolation, profound disability, and unrelievable pain are among the explanations sane people have provided for wanting to suicide.

Although the phenomenon of rational suicide may be confronting, Dr Nitschke hopes his court case will help turn around the tendency to lump all suicides into the 'depressed mind' category.



Notice of GENERAL MEETING

**Wednesday, 20 May 2015 at 2 pm
at Citiplace Community Centre**

Walkway between the Art Gallery and Myer Store opposite the
escalators at Perth Railway Station

Guest speakers: Nicolette Smith and
Stacey Farmer of *Gift of Grace*, end of life service
providers. Afternoon tea provided - **All welcome**

Resolution on the proposal for a new name

Under the terms of the Constitution of our Society, at the Annual General Meeting of WAVES on 15 October 2014, members considered a motion which proposed the following change to the Constitution: the name of the organisation be changed from '*West Australian Voluntary Euthanasia Society*' (also known as '*WAVES*') to '*Dying with Dignity Western Australia*'.

The pros and cons were discussed in detail at that meeting, and the proposed resolution received strong support from those present. An earlier postal survey of members conducted before the meeting was also strongly in favour (56 for the change and 25 voting against it).

In keeping with the terms of the Constitution, those attending the next General meeting on 20 May 2015 will be asked to cast a formal vote on whether to accept '*Dying With Dignity WA*' (also to be referred to as *DWDWA*) as the new name for the organisation, replacing '*West Australian Voluntary Euthanasia Society*' (also referred to as '*WAVES*').

The existing text of the Constitution, which it is proposed should be amended, is Clauses 1.1 and 1.2, which read as follows:

1.1 The name of the organisation shall be the "West Australian Voluntary Euthanasia Society, Inc., hereinafter, 'the Society'.

1.2 The Society may also be referred to by the acronym 'WAVES'.

The proposed amendment is to delete:

In 1.1 the words 'West Australian Voluntary Euthanasia Society, Inc.' and to substitute the words 'Dying With Dignity Western Australia Inc .' and

In 1.2 the word 'WAVES' and to substitute the word 'DWDWA'.

A ballot paper will be provided to those attending to show support, opposition, or to abstain from voting on the motion. Under the rules of the organisation, the decision on the resolution will depend on whether a majority of not less than three-quarters (75%) of the members present, and voting, ratify the recommendation of the committee that this amendment be made.

Please come to the meeting and cast your vote on this important issue.

No matter what the outcome of the ballot, the Society will maintain its commitment to the right to be independent as far as possible in the manner of our own deaths.

Editor's Note

Vice President, Ranjan Ray, has pointed to the possibility that there may be a loss of momentum for the organisation if we adopt a name that omits the word 'euthanasia'. Ranjan makes it clear that he is not arguing against a name change, but he fears it will confuse the issue and dilute our message. As Ranjan also points out, a name change is unlikely to convince religious leaders or the AMA to come on board with legalizing voluntary euthanasia and assisted suicide.

Supporters of the name change remain convinced that avoiding the negative connotations being deliberately and wrongly associated with the word 'euthanasia' is a necessary step to better communication of our intent.

Whatever the name, we are all in agreement that the organisation needs to communicate more effectively, especially with those who are undecided and/or ill informed as to what we are really seeking to achieve.

President's Report

Dear Fellow Members,

We have been debating lately about what our organisation stands for and how to get that message out. I am struck by the fact that our opponents still manage to convince the legislators that we want the right to kill the old and the defenceless because they are abhorrent or lack dignity. They have hi-jacked the word euthanasia and redefined it as murder, rather than its original meaning, 'peaceful death'. Let me share with you a recent example of such redefinition here in Western Australia by John Barich, National Vice President of the Australian Family Association (AFA)*.

Euthanasia is murder whether voluntary or not. Legal safeguards are illusory. Palliative care is the panacea for suffering. These old chestnuts were served up by Mr Barich in objecting to my article about our right to a dignified death in the Health Consumers' Council publication, *Health Matters*. Mr Barich offered a confused interpretation of 'dignity' along the lines: *'Dying with dignity' is a con by which the dying are duped into feeling useless and into believing the only dignified thing to do is end it all'*.

Legalising VE would not force anyone into thinking they must kill themselves. The dignity comes from being able to choose the means and time of our death, especially when a very undignified end is a probable alternative.

On the issue of dignity, I can recommend *'Being Mortal'* by American doctor, Atul Gawande. He talks about a 2008 project, *Coping with Cancer*, that compared the quality of different kinds of deaths in the USA. The study found *'terminally ill cancer patients who received various intensive care interventions in their last days had a substantially worse quality of life than those who chose to remain mentally aware, spending the time strengthening relationships with family and friends, and finding a sense of completion'*.

Indeed it seems to me that our own techno-focussed health system is not much different from the American situation. There must be a point *'where we can say no to continued palliative care and ICUs, and have a death of our own choosing'*.

Correspondent Grant Gascoigne also ponders how free we really are if we cannot choose when to die. Writing in the online **Review**, *This Life* (February 8, 2014), he says of opponents of VE: *'Their dislike of death is ridiculous... Their fear is of the manner of dying yet they insist others endure it'*. And he concludes: *'the topic [of VE] is not illegal; there is no hindrance to thinking of it, discussing it, forming an opinion of it or of communicating that opinion publicly'*.

I suggest we follow Grant Gascoigne's lead. If you are interested and have internet access, please contact us and add your name to our Rapid Response Group which will respond quickly to news items related to voluntary assisted dying. As the saying goes, 'if you see something, say something!'

MURRAY HINDLE
PRESIDENT



* The AFA is a conservative political organisation founded in 1980 by National Civic Council's then president, B. A. Santamaria, to "promote the family as the natural and fundamental unit of society".

Through Each Other's Eyes

Peter gets his wish

Tony Abbott brought peace of mind to a 57 year old Victorian man just before Christmas last year.

The Prime Minister promised dying campaigner, Peter Short, that Liberal Party members would have a conscience vote when the bill by Greens senator, Richard Di Natale is voted on. Peter wanted other terminally ill people to be able to choose when and how they die, just as he himself was to do.

While Mr Abbott indicated that he was unlikely to personally support such legislation, he told Peter that he would not "whip" his members into taking a party line on the issue.

Peter said receiving the commitment during a long phone conversation with the PM on 20 December last year was like reaching '*the top of a mountain*'. Ten days later he died in palliative care, having access to and choosing not to use the lethal drug he had available.

As Dr Rodney Syme said in his funeral oration, '*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*'.

Chris Fotinopoulos, a Victorian teacher and ethicist, has also reflected on the manner of Peter's death.. He has suggested that it may not be the harrowing stories of death that will move legislators to finally reform our anti-euthanasia laws. He believes '*it is the stories of good deaths that can influence the debate concerning dying with dignity in a positive manner*'.

Footnote: While the PM's promise is welcomed, its effect on any outcome is questionable, particularly if a secret vote is not allowed. To date being given the right to a conscience vote has not influenced Coalition MPs voting patterns which are almost without exception unanimously opposed to changing current legislation.

Hospitals that care

The quality of hospital care for chronically ill Australians is coming under scrutiny on a number of fronts. The Australian Commission on Safety and Quality in Health Care will release a Consensus Statement and community guidelines in May 2015, which it is hoped will have the endorsement of all Australian Health Ministers.

Meanwhile, here in Western Australia, the Department of Health and the Health Consumer's Council held focus group discussions in February, asking chronically ill patients and families what would make the hospital experience better.

Patients and families everywhere are very clear that patient care should be more than just healing. Its also about building a connection between the patient and carer. In 2014 the Cleveland Clinic responded to families' calls for more caring medical professionals with a graphic four minute training video. It had more than 100,000 views in its first fortnight on *Youtube*. Entitled *Empathy*, it outlines an e-patient 'Dave's' journey through the hospital system with all his uncertainties on display.

Thoreau's question opens the video and captures its intent: '*Could a greater miracle take place than for us to look through each other's eyes for an instant?*'

This is recommended viewing for medical professionals and the community (<https://www.youtube.com/user/ClevelandClinic>).

News Update

At Home

National Following a multi-party Senate committee recommendation in 2014, Liberals as well as Labor now have a free vote on VE. This should help the Green's draft *'Exposure Bill'* being developed for the Senate's consideration.

NSW VE Party fielded 21 upper house candidates in the March elections, led by law reform campaigner Shayne Higson. In a "Pollies register" held by DWDnsw, 13 out of 77 State MPs opposed change (all Liberal-Nationals were opposed even though given a conscience vote); and 16 MPs from across the political spectrum gave either qualified or full support.

A NSW Parliamentary Forum *'Voluntary Assisted Dying, Democracy and Politics: Keeping our Politicians Accountable'* was well attended.

QLD During the election in 2015 the ABC *Vote Compass* survey reported majority Queensland support for voluntary assisted dying from supporters of all the large political parties, religious groups and age groups. Such a one-sided result across all groups is rare in *Vote Compass* surveys.

VIC The VEP Victoria attracted more than 1% of the vote in two regions in the 2014 State Election. Under a group voting ticket agreement with the VEP, the Australian Sex Party achieved their first parliamentary seat for Fiona Patten, who has asked the Victorian Upper House to refer Euthanasia to the Victorian Law Reform Commission. Greens Party MLCs have a motion that a committee of the Parliament investigate instead.

SA SA was the only State to respond (and in the affirmative) when State Coroners were asked to make findings about the lack of voluntary euthanasia laws as a cause for older people ending their lives sooner than they would otherwise.

In the 2014 elections the Legal Voluntary Euthanasia Party received 7,468 votes after preferences were distributed (0.74% of the total vote). No minor parties were given any media coverage and the LVEP vote was down (from 0.94% in 2010).

And Abroad

Canada The Supreme Court unanimously overturned a law banning physician-assisted suicide. If a new law is not passed within a 12-month deadline, physician-assisted death will not be legalised, but it will be legal for mentally competent adults to suicide if they have intolerable physical pain or are psychologically suffering from severe and incurable medical conditions. This may become an election issue in the coming federal election.

USA Last year terminally ill patient, Brittany Maynard, took her life after moving to Oregon where doctors prescribed a lethal dose of medication. In California leukemia sufferer, Christine White, has sued the attorney general and top prosecutor and asked the San Francisco Superior Court to "clarify" that a California law making it illegal to aid suicide does not apply to doctors assisting a dying, mentally competent patient. The Disability Rights Legal Center and five San Francisco doctors are entered in support of the lawsuit.

Switzerland Conservative forces self identifying as "bioethics" groups are infiltrating research projects, medical advisory boards, and ethics committees, and creating pseudo scientific research results as a base for undermining the legal status quo on assisted dying. One such report, 'Suicide tourism', was published by a Swiss group, NRP 67, led by a catholic moral-theologian. After being delayed for more than 3 months, Swiss Right to Die organisation, *Dignitas*, has been allowed to respond in the *British Medical Journal* to NRP 67's false claims.

United Kingdom A Government poll, *YouGov*, has found 73% of English and Welsh adults support the Assisted Dying Bill which has been amended in the committee stage in the House of Lords to require judicial permission for assisted dying for the terminally ill.

New Zealand In a legal first, the Law Reform Commission is seeking a High Court ruling on GP-assisted death being demanded by a NZ cancer sufferer.

A Tale of Two Cities

Medford, Oregon

Lisa Vigil Schattinger, a nurse from Ohio, tells how her stepfather was able to die in Oregon with his family in attendance in December, 2014, (as reported in The (Cleveland) Plain Dealer).

'All of us, including Grandpa Jack, sat around the breakfast table and talked about what was to come. We talked about how strange and surreal that moment was and we all expressed our love and respect for him and his decision.

He was adamant that it was his right to choose his own fate in the face of a life-ending medical diagnosis [and chronic pain].

"Grandpa Jack" was actually Dr. Rowe, a noted neurologist and neurophysiologist, author and lecturer who specialized in epilepsy research.

He had considered all that he would be missing, all that he would suffer, as well as what he would be putting us through, and made his choice.

The night before, Jack spent the evening opening capsules full of the medication he would be taking. It was time-consuming and just plain strange. My mother did not help but was nearby, knowing that her time with Jack was ending.

That morning Jack opened cans of peaches and drained the juice...something sweet would hopefully help.

Earlier in the morning, he had taken a couple of medications [to] prevent vomiting the lethal medication.

At the breakfast table, Grandpa Jack said, 'Well, it's time.'

He walked into his bedroom and got into bed. His favourite classical guitar music was playing. My mother and his son each held one of his hands. My brother and I sat nearby.

He sat on his bed and drank the mixture quickly, grimacing at the bitterness. He took it at about 10:14 a.m.

We asked him questions and talked for about 2 or 3 minutes. He then became extremely drowsy and his words started slurring.

We quickly moved to lie him down. He gave a gentle snore and his body stopped working by about 10:25 a.m.

It was that quick, apparently painless and certainly very peaceful'.

In closing her story, Lisa says :

'Please Ohio, let's continue this conversation about the right for a terminally ill person to choose death with dignity'.

Adelaide, South Australia

Earlier this year in Adelaide, Frances Coombe told how she found a yellow post-it note on her 92-year-old friend's front door. It said: *'Prepare yourself for an unpleasant sight'.*

Bob Brown ("Browny") was a respected conservationist and a long-time committed member of SAVES.

Macular degeneration was robbing him of his eyesight, and he was concerned about losing his independence or accidentally walking in front of a car. His story is that of many older Australians forced to act alone and earlier than they would otherwise, so that they die with dignity. *'It's shameful that Browny was put in that position'*, Ms Coombe said.

Mr Brown's other great fear was that his death would be described as a suicide driven by depression. He left a letter for the coroner, stating that was not so: *'He said he would like it to be recorded as rational self-administered euthanasia'*, Ms Coombe reported.

Following this death, the SA Coroner, Mark Johns, has called for a public debate about the circumstances causing many older Australians to end their lives. The Coroner said he was not advocating for voluntary euthanasia laws which would be beyond his jurisdiction. *'But I do think the public should be aware of what's occurring and that should inform a public discussion'*, he said.

Mr Johns was the only Australian coroner to respond affirmatively to a call that coroners consider noting in their reports whether an elderly person's death appears pre-emptive.

*Ms Coombe, President, quoted in the SA Voluntary Euthanasia Society (SAVES) publication.

BEQUESTS AND DONATIONS

WAVES is very grateful for donations and bequests - these gifts help with costs and enable us to do what is needed to further our voluntary euthanasia aims. You may prefer to remain anonymous.

Did you know that you can make a bequest in your Will without making a new Will by signing a short codicil?

Our website shows how this is done, or we can assist you. Write to WAVES (Inc.) at PO Box 7243 Cloisters Square PERTH WA 6850 or send us an email at memberships@waves.org.au

Thank you for your loyal support.

Notice Board

Management Committee 2014-15

We welcome Margo Beilby as Hon Secretary to the Committee. The position of Webmaster is still open if you can assist with maintaining the website. All that is needed is a little facility with a computer and an email address. Please let us know if you can help (phone 9387 5126; or email info@waves.org.au).

The Conversation Project

Members are recommending this as a useful website for end of life preparations. It includes a starter kit for broaching the topic with loved ones and physicians, and it offers different options for ensuring that your wishes are followed. Find more at <http://theconversationproject.org/>

EMAILING VE NEWS TO YOU

We are now planning to keep those with email addresses up to date with the latest developments via regular news roundups. If you would prefer not to receive such updates, or if you have changed your email address, let us know at memberships@waves.org.au

ARE YOU A FINANCIAL MEMBER?

We are updating the membership list. Please check the address label on this newsletter. **If the date ends in 15, your subscription is due for renewal on 1 July. If it is less than 15, your subscription is no longer current.** Life members all have the date 1/7/50 **and don't need to pay subs, although donations are welcome.** To continue supporting us and receive the newsletter, please renew your subscription using the payment details below. Or to talk about this, contact WAVES, preferably by email to memberships@waves.org.au

West Australian Voluntary Euthanasia Society (Inc.)

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Email: info@waves.org.au

MEMBERSHIP RENEWAL FORM

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

Standard Rates

- ☐ Single \$ 20
☐ Double \$ 30
☐ Life Single \$ 200
☐ Life Double \$ 300
Donation \$

Pensioner / Student Rates

- ☐ Single \$ 15
☐ Double \$ 25
☐ Life Single \$ 150
☐ Life Double \$ 250

(Rates effective from 1st July 2009)

Payable to WAVES at the above address or at any BankWest branch:

Account **WAVES - BSB no: 306-061, account no: 419 8239.**

Please complete this form and forward it to us, or bring it with you to the meeting.

☐ Mr&Mrs ☐ Mr ☐ Mrs ☐ Ms ☐ Miss ☐ Dr

Please print clearly

Initials Surname

Address

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EXIT News

EXIT has been warning that scammers are using Dr Nitschke's image and EXIT wording to sell drugs over the internet. Its site, <http://exitinternational.net>, does not offer drugs for sale.

In April Dr Nitschke awaits the outcome of his NT Supreme Court appeal against the Northern Territory Health Review Tribunal which upheld the Australian Medical Board's decision to suspend him from practice. He will face a further 12 counts before the Tribunal after the Supreme Court hearing.

EXIT provides free public information sessions which are followed by members-only workshops. Seminars and chat groups are also planned. The next information session/workshop is Monday 1 June 2015, 9am -1pm, Wembley Community Centre, 40 Alexander St, Wembley. Details: Carol O'Neil (0429 039 167).



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.

WEST AUSTRALIAN VOLUNTARY EUTHANASIA SOCIETY (Inc.)

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Vice-President: Ranjan Ray

Hon Secretary: Margot Beilby

Hon Treasurer: Gaye Harvey

Committee Members: Rodger Andrews, Tina Christensen, David Kelly, Geoffrey Walker, Stephen Walker, Gail Wyatt (Editor)

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