



NT Voluntary Euthanasia Society Inc

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NEWSLETTER

January 1999

The unexpected defeat of the referendum on Statehood in the Northern Territory was devastating for supporters of Voluntary Euthanasia.

Statehood Setback

repeat the legislation that vetoed the *Rights of the Terminally Ill Act*.

It was confidently predicted that a new State Parliament of the Northern Territory would have reintroduced the law.

Repeal is not even remotely likely in the short-term given the support of Prime Minister John Howard and Opposition Leader Kim Beazley for the Andrews' law.

Once the Northern Territory is a State it will no longer be hamstrung by the Kevin Andrews' Act that outlawed the Northern Territory's *Rights of the Terminally Ill Act*.

That leaves us with Statehood as our only hope, which means we should support moves by the Legislative Assembly to address the concerns raised last year and then have the question put again to Territorians.

With the gift of hindsight it was probably the wrong time to have held such a referendum - in the middle of the politically charged atmosphere of a Federal Election campaign.

Australian Appointed World President

And while the Statehood issue has bi-partisan support, the whole referendum campaign was dogged both by allegations of political manipulation and backbiting on the way the issue was managed.

The President of the South Australian Voluntary Euthanasia Society, Mary Gallnor, has been appointed President of the World Federation at the conference of Right To Die societies held in Zurich, Switzerland, in October.

If that was not enough to erode the "YES" vote, there are a significant number of Territorians who are concerned that Statehood may mean we have to pay more taxes or lose parts of our unique Territory lifestyle and conform to the rules and regulations of other states.

Held bi-annually, the conference was attended by 130 delegates from 30 Right To Die societies in 22 countries.

But the only way Territorians will ever regain their right to access voluntary euthanasia is by becoming a State or having Federal Parliament

The aims of the world body are to share information among member societies; to help in the formation of new societies; and, to make representations on behalf of member societies to international organisations.

The next World Federation conference will be held in Boston, USA, next year.

Philip Nitschke Forces Andrews to Preferences

In an extraordinary effort, Philip Nitschke forced Kevin Andrews to rely on preferences to secure his re-election in the Federal Election.

As the last *Newsletter* noted, Philip didn't stand much chance of unseating Andrews in the blue-ribbon Liberal seat in Victoria, but to force Andrews to preferences for the first time was a great job.

It is a remarkable achievement for a single issue independent, and one who has travelled from the other end of Australia to contest the election, to win 9.3 per cent of the vote. Andrews' vote dropped by roughly the same amount.

Philip's effort means that the seat of Menzies is no longer regarded as blue ribbon and it is likely any pre-selection challenge to Andrews before the next Federal Election will be successful.

Polls Continue To Support Right-To-Die

From Canada's *Dying With Dignity Newsletter*, January 1998: 'An Angus Reid poll conducted at the end of October found that 76% of surveyed Canadians said 'they support the "right-to-die" for people who wish to end their own lives rather than enduring the full course of a terminal illness'. The support is widespread regionally and, from a generational perspective, 81% under 35 expressed support with that number declining to 69% among those 55 and older. Meanwhile, an early December poll conducted by and for the *Ottawa Citizen Global* found that 7 out of 10 Canadians believe 'doctor-assisted suicide is acceptable in some circumstances and a majority favours outright legislation'.

An *Ottawa Citizen* article on 16 December quoted executive director Marilynne Seguin as saying 'if Parliament could just catch up with grassroots Canadians, there wouldn't be such a battle on this issue. The problem is that government is scared'.

Doctor Seeks Clarification

Victoria's Dr Rodney Syme has referred to the Coroner a case where he increased sedation drugs and helped hasten the death of 60-year-old colon cancer sufferer.

Any death not from natural causes must be reported to the coroner who then decides whether any further investigation is necessary and if charges should be brought.

A doctor who uses drugs on a terminally ill patient at the request of the patient and with the intention of both relieving the suffering and hastening death could go to jail.

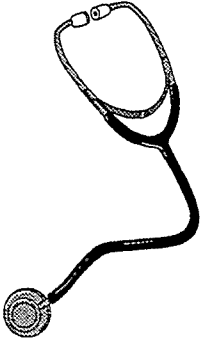
However, it is common practice to sedate a suffering patient until death and under present Australian laws it is lawful to do so as long as the intention was to relieve the suffering rather than hasten the death.

It does not matter that the doctor knows the drugs will hasten death as long as he or she can say that their intention was only to relieve the suffering.

This is referred to as the "principle of double effect" and it has long troubled many doctors. Eventually politicians will be forced to address the issue.

Dr Syme's action is intended focus the attention of the public and politicians on this issue.





Doctors Out of Step - With Themselves

The South Australian Voluntary Euthanasia Society has made an interesting comparison between the World Medical Association's attitude toward abortion and their opposition to Voluntary Euthanasia.

To show what would happen if the WMA were consistent, SA VES took the WHA Policy Statement on abortion and constructed a consistent statement on Voluntary Euthanasia.

WMA Abortion Statement

1. The first moral principle imposed on the physician is respect for human life **from its beginning**.
2. Circumstances which bring the vital interests of a **mother** into conflict with the vital **interest of her unborn child** create a dilemma and raise the question of whether or not the pregnancy should be deliberately terminated.
3. Diversity of response to this situation results from the diversity of attitudes towards the life of the **unborn child**. This is a matter of individual conviction and conscience which must be respected.
4. It is not the role of the medical profession to determine the attitudes and rules of any particular state or community in this matter, but is our duty both to ensure the protection of our patients and to safeguard the rights of the physician within society.
5. Therefore, where the law allows **therapeutic abortion** to be performed, the procedure should be performed by a physician competent to do so in a matter approved by the appropriate authority.
6. If the physician considers that his convictions do not allow him to perform **an abortion**, he may withdraw, while **ensuring the continuity of medical care** by a qualified colleague.

VE Equivalent

1. The first moral principle imposed on the physician is respect for human life **until the end**.
2. Circumstances which bring preservation of the **life of a patient** into conflict with the relief of suffering create a dilemma and raise the question of whether or not the life should be deliberately terminated if the patients wishes.
3. Diversity of response to this situation results from the diversity of attitudes towards the life of **an individual** conviction and conscience which must be respected.
4. It is not the role of the medical profession to determine the attitudes and rules of any particular state or community in this matter, but it is our duty both to ensure the protection of our patients and to safeguard the rights of the physician within society.
5. Therefore, where the law allows **voluntary euthanasia** to be performed, the procedure should be performed by a physician competent to do so in a matter approved by the appropriate authority.
6. If the physician considers that his convictions do not allow him to perform **voluntary euthanasia**, he may withdraw, while offering the patient **alternative medical care** by a qualified colleague **if the patient so wishes**.

**Disappointing result
in Michigan**

The referendum on legalised assisted suicide in the US state of Michigan was rejected by those who voted on November 4 by a ratio of two to one.

The sponsors of the Citizens Initiated Referendum raised \$900,000 to collect sufficient signatures to have the matter placed on the ballot paper but had only \$75,000 left for advertising in the referendum campaign.

In contrast, the Roman Catholic Church and Right To Life organisations had a \$5 million war chest to wage their anti campaign.

A spokesman for the referendum's sponsors accused these organisations of running a misleading, frightening campaign which was designed to inflame, confuse and deceive the citizens of Michigan.

For example, the Director of Hospice in Michigan was quoted as saying that she had never heard of a single person under their care dying in pain. She claimed that 100% of pain can be controlled 100% of the time.

While the defeat in Michigan was very disappointing - and despite the huge financial resources the Catholic Church and Right To Life groups seem to be able to muster -

groups in several other US States are continuing with plans to collect enough signatures to have voluntary euthanasia initiatives put to their voters.

**Inquiry In
South Australia**

A Bill to decriminalise voluntary euthanasia in South Australia has been referred to a parliamentary committee.

The Bill was originally introduced by then SA MP Anne Levy and passed the State's Upper House. However it was not dealt with by the Lower House before parliament was prorogued for the 1997 State election.

While this meant the Bill fell off the agenda, the SA parliamentary Standing Committee on Social Development has now been asked to conduct an inquiry on the Bill and report to parliament by the middle of the year.

Our Patron, Marshall Perron, has been invited to make a presentation to the Standing Committee in April.

It would be fitting if South Australia was the first Australian State to adopt humane Right To Die legislation as they have in the past led either the world or Australia with enlightened legislation in relation to women's right to vote and abortion law.

NT Voluntary Euthanasia Society - MEMBERSHIP/RENEWAL APPLICATION

I.....of.....

of..... Telephone Home Bus.....

hereby make application to become a member / renew my membership of the NT Voluntary Euthanasia Society. As a member I agree to abide by the rules and support the objectives of the Society.

My cheque/money order for \$15 is enclosed.

Signed.....

Tick box if receipt *REQUIRED*

**Make cheque payable to NT Voluntary Euthanasia Society, and mail with completed form, to
NTVES PO Box 2734 Darwin NT 0801.**

Receipt No.....