



VESNZ NEWSLETTER

Issue 19

March 2011

Voluntary Euthanasia Society of New Zealand Inc www.ves.org.nz

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NEW VESNZ BRANCH

A new Branch of VESNZ is being established in the Kapiti-Horowhenua region of New Zealand. A good percentage of our national membership live in, or near to this area – a district where a large proportion of residents are over 60 years of age, forming an admirable constituency for our political/legal objectives.

The Inaugural Meeting will be held immediately **before** the Autumn Meeting of the Wellington Branch, in the same venue, see details below.

KAPITI-HOROWHENUA BRANCH

The Inaugural Meeting of the Kapiti-Horowhenua Branch will be held on

Saturday, April 2, 2011 at 1.30 pm

at the

**KAPITI COMMUNITY CENTRE, 15 NGAHINA STREET,
PARAPARAUMU**

All members in this area, their friends and family are warmly invited to this meeting to meet and greet new and old members.

WELLINGTON BRANCH

Autumn Meeting will be held on

Saturday, April 2, 2011 at 2.30 pm

at the

**KAPITI COMMUNITY CENTRE, 15 NGAHINA STREET,
PARAPARAUMU**

This meeting is being held further north on this occasion so that others can more easily attend.

We welcome all members and their friends in the Wellington area.

The main topic will be "**What we want from new legislation.**" We will look at what has been written/achieved in other countries, how this may apply in NZ and also look at what we consider are the most critical aspects that we would want in a new Bill. A sub committee of the National Committee has been set up to look at possible legislation, one of the principal objectives of our Society. So let us help by giving them some ideas - even "off the wall" suggestions - these can often stimulate new ideas. *Please note later starting time.*

Directions to the Community Centre

Motorists: There is plenty of parking around the Community Centre at the end of Ngahina Street – second street on the left off Kapiti Road.

Pedestrians: From Rimu Road, at the rear of Coastlands, take the path past the Paraparaumu Library and it will lead you directly to the

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2011 NATIONAL ANNUAL GENERAL MEETING

The date of the National Annual General meeting this year is

Saturday, June 25, 2011 in Wellington
(venue yet to be identified).

This will be an important meeting, because we will be considering amending the Constitution (Rules) of the Society. There will be some far reaching changes proposed, including one which would allow **postal voting** for the election of Officers and future Rule changes. It is felt that in a Society where only about 50% are able to easily attend either Branch meetings or the National AGM, there should be a more democratic process for involving members in the affairs of the society.

Since a **two thirds majority** of those attending an AGM is required for any change to the rules, we hope that any of you who are interested in progressing the affairs of the society will seriously consider attending this meeting, so that your thoughts on the proposed changes can be expressed and considered.

Please make a note in your diary now.

BRANCH AND GROUP NEWS

Auckland Branch Public Meeting

A small gathering in February focused on the five key law changes VESNZ would like to achieve. The terminology currently used was also discussed, with terms such as physician assisted dying and death with dignity being preferred over for example voluntary euthanasia & assisted suicide. It was suggested that a booklet be published by the Society which would define current terms in use and also have a collection of questions and answers.

Hawkes Bay Group Report

The H.B. group had their first lunch meeting for 2011 in Havelock North in February. Eleven members attended and a good discussion was held. We have lost two of our members who have shifted to Auckland but the good news is that we have two new members. Anyone is welcome to join us –

please contact **Len Johansson, 06 843 6742**
lenjohan@clear.net.nz

Marlborough/Nelson Group?

A VESNZ member now living in Marlborough is keen to form a group with other members in this area and would like anyone interested to contact her:
ann.david@workplaceprofilingcompany.co.nz
03 573 8305.

RECENT CONFERENCES

Two significant Conferences were held in the Southern hemisphere at the end of last year. **The World Federation of Right To Die Societies** held their biennial conference in Melbourne and delegates from the 44 member societies travelled from all over the world to attend. Many international speakers who have worked (and researched) in the voluntary euthanasia field for many decades provided a very stimulating and intellectually challenging three day meeting. An exciting event on the day before the Conference was the formation of a new Australian-wide Right to Die alliance ([Your Last Right.com](http://YourLastRight.com)); and at the same time a national advocacy website (a co-operative effort of all the state and territorial VE groups) was launched. You can go to www.yourlastright.com A full report of this meeting is available on request.

The other conference was the 2-day Inaugural Conference held in Wellington by **Dignity NZ Trust** with a combination of national and international speakers some of whom had travelled on from Melbourne. It was a lively and invigorating meeting and there is to be a follow-up conference in September of this year.

“We are living too long. It's not viable. I can't think of any reason to stay alive once the mind goes. It is an existential nightmare that you can't get out of life. Medical science got us into this and medical science will have to get us out.” - British author **Martin Amis**.

NEWS FROM OVERSEAS

Germany

In February the German Medical Association liberalised its code on helping sick patients to die, giving more freedom to individual doctors. The Association's new guidelines do not justify or endorse assisted suicide but rather allow doctors to decide for themselves whether helping a patient die is justifiable. A survey published last year found that one in three doctors supported rules allowing physicians to support the suicide of patients with terminal illnesses. The change is a reflection of growing acceptance among German doctors of assisted suicide in certain situations. The Medical Association's President said "When doctors themselves have a clear conscience, we will not condemn them."

United Kingdom

Some giant strides towards reforming the assisted dying law have been made in the U.K. recently.

A **West Midlands NHS** chief criticised the current law as being inappropriate for the 21st Century and claimed that it is "unjust that only those who could afford to travel to *Dignitas* clinics in Switzerland were able to control their own deaths". These comments are a boost for the right to die campaign; West Midlands is the first U.K. health authority to support calls for a change in the law.

A **Commission on Assisted Dying**, has been established in London. It is chaired by former Lord Chancellor, **Lord Falconer** and was set up with funding provided by **Bernard Lewis** and **Terry Pratchett**. The Commission is an independent body which will hear evidence, consult experts, and study practices in other countries, investigate the circumstances under which it would be possible for people to be assisted to die. It will recommend what system, if any, should allow people to be assisted to die and what changes in the law would need to be introduced. The Commission's conclusions will be based solely upon the evidence it receives.

Last year, the **Director of Public Prosecutions** [in England] published controversial guidelines on when prosecutions for assisted suicide are likely to be brought. The new rules suggest that prosecutors no longer regard it as a crime to help someone to die for compassionate reasons and recently it was reported that the DPP has declined to bring charges against at least 20 people suspected of helping others to commit suicide, leading one long-term Netherlands aid-in-dying protagonist to point out that this policy - to consider every case of suspected assistance to suicide and leave many of them alone, "shows an astonishing similarity to the Dutch policy before the law was instituted in 2002."

Finally, a new organisation, **Healthcare Professionals for Assisted Dying (HPAD)** has been formed by Dr Ann McPherson who is herself dying of pancreatic cancer. Her organisation believes that in addition to having access to good quality end-of-life care and the right to refuse medical treatment, that terminally ill, mentally competent adults should have the choice of an assisted death. It considers that the law must change. "Evidence and fact must guide end-of-life decision making, not unsubstantiated fears". <http://www.hpad.org.uk/>

RESEARCH FINDINGS

Oregon, U.S.

2010 data - cases of assisted dying remain low

The 2010 Report on the use of the Dying with Dignity Act in Oregon, permitting assisted dying for terminally ill, mentally competent adults, was released on Jan. 26, 2011. It shows that cases of people choosing an assisted death remain low. The report says that there have been no significant changes in the numbers of assisted deaths since 2009, nor in the reasons given for choosing an assisted death. 65 people in Oregon were assisted to die in 2010; this accounts for only 0.2% of the total deaths in Oregon. The report also shows that an overwhelming majority of those assisted under the Death with Dignity Act died at home and were enrolled in palliative care services. The Report makes clear that the floodgates have *not* opened, a slippery slope has *not* occurred and people are *not* being coerced into assisted deaths by greedy relatives.

The Netherlands

Two decades of research on euthanasia practices in the Netherlands have resulted in clear insights into the frequency and characteristics of euthanasia and other medical end-of-life-decisions in the Netherlands. Some conclusions:

- Physicians in general adhere to the criteria for due end-of-life care.
- The majority of physicians think that the euthanasia Act has improved their legal certainty and this contributes to the carefulness and efficiency of life-terminating acts.
- Systematic periodic research is crucial for enhancing the understanding of end-of-life care in modern medicine, in which the pursuit of a good quality of dying is nowadays widely recognised as an important goal - in addition to the traditional goals such as curing diseases and prolonging life

MEDIA SECTION

BOOKS

Several books written by Intensive Care & End of Life specialists have been published recently; here are two which were published in Australia in the last couple of years.

***Saving Life – or Prolonging Death* - Dr Charlie Corke, Erudite Medical Books, Australia 2010** Dr Corke is an Intensive Care specialist in the I.C.U. of Geelong Hospital, Victoria, and in outlining a series of his cases over the last thirty years he points to the changes in medical decisions and medical technology over that time. He says "...the increasing sophistication of machinery that can keep people alive means that death – once the welcome friend of the incurably sick and the very old – can now be thwarted, delayed and prolonged." He strongly advocates early family and friend discussions and Advance Care Planning so that the wishes of the patient are pre-eminent in the decision making. www.eruditemedicalbooks.com

***Vital Signs: Stories from Intensive Care* – Professor Ken Hillman – UNSW Press 2009** Professor Hillman, an experienced Intensive Care clinician, contends that formerly death was treated as a relatively normal and inevitable experience, but: "it is now a highly medicalised ritual...up to 70% of people now die in acute hospitals surrounded by well-meaning strangers inflicting all that medicine has to offer, often resulting in a painful, distressing and degrading end to life." www.unswpress.com.au

Both books demonstrate clearly that health systems in this century are still directed more towards actively *treating* patients rather than *accepting* and supporting people when they are dying; they are indispensable reading for those dealing with, or approaching, end of life care

FILMS

How to Die in Oregon wins top documentary prize at Sundance

In January of this year a new documentary *How to Die in Oregon*, won the U. S. Documentary Competition at the

2011 Sundance Film Festival. Four years in the making, and directed by **Peter D. Richardson**, an Oregonian, the film is described as "compassionate and heartbreaking". It is an account of the process by which several Oregon residents, in particular Cody Curtis, a 54-year-old Portland woman with recurring liver cancer, chose to end their lives with the administration of a physician-prescribed dose of barbiturates.

Derek Humphry, who founded the original U.S. Hemlock Society and is also an Oregon resident, wrote "At a packed Portland Film Festival on Saturday, I saw the best documentary film ever made on assisted suicide for the terminally ill. *How to Die in Oregon*, an intimate and poignant film about the impact of Oregon's 1994 Death With Dignity Act, won the Grand Jury Prize in the U. S. Documentary Competition at the 2011 Sundance Film Festival tonight, one of the most prestigious awards that can be won by a non-fiction film anywhere in the world. "Amidst the sorrows of dying and death there were courageous cameos and plenty of love, laughter and hugs. The film is artistic and tasteful, also showing the huge progress right-to-die has made in America. Physician-assisted suicide for the dying is now lawful in the states of Oregon, Washington and Montana. Only residents may choose to use it. Further attempts to pass similar laws are planned for many New England states this year and next. Within the documentary there is background on the Hemlock Society, which started it all in 1980."

***"You Don't Know Jack"* Al Pacino** won a Golden Globe for best actor at the 68th Golden Globe Awards in January this year. He played Jack Kevorkian in a film entitled *You Don't Know Jack*. **Dr Jack Kevorkian**, now aged 82, is an American pathologist, and a right-to-die activist. He is best known for publicly championing a terminal patient's right to die via physician-assisted suicide and claims to have assisted at least 130 patients to that end. Beginning in 1999, Dr Kevorkian served eight years of a 10-to-25-year prison sentence for second-degree murder. He was released on parole on June 1, 2007, on condition that he would not offer suicide advice to any other person.

NEW WAYS TO CONTACT US

We now have several new ways to help you contact us:

- In **Auckland** the Branch Secretary has a new email address which is auckves@xtra.co.nz. The mailing address is now **P O BOX 210, Ostend, Waiheke Island 1843**.
- In **Wellington** the National Treasurer and the Librarian remain at **PO Box 5677, Lambton Quay, Wellington** and the email address is vesnz@kol.co.nz
- The **Wellington** Branch Secretary is pathubbard@xtra.co.nz. The mailing address is **PO Box 24 270, Manners Street Central, Wellington 6142** Tel: (04) 384 2646.

President: Kevin Brennan, Immediate Past President: Jack Jones, Secretary: Rex Steele, Treasurer: Frank Dungey, Committee: Suzy Austen, Elizabeth Cronje, Janet Marsland, Eric Perrett, Mabel Smith, Newsletter Editor: Beverley Hurrelle