

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

## Ending Life with Dignity Bill 2013: SAVES campaign

The March 2013 VE Bulletin reported that Hon Dr Bob Such (Ind) had presented his *Ending Life with Dignity* Bill to the Lower House on the 7th February and included the summary points of the Bill. SAVES members and supporters of voluntary euthanasia immediately mounted an active campaign in support of the Bill, in both urban and regional centres.

SAVES members were consistently overwhelmed by the obvious level of support for the Bill, in both urban and regional areas.

Members of the public were keen to tell of their often harrowing experiences supporting family and friends through the last stages of a difficult and painful illness. These stories also came from young people who had experienced family members and young friends die in ways that made them committed to supporting legislative change.

In Mt Gambier, local SAVES members were interviewed by the local paper, *The Border Watch*, and provided an important local contact for the media. As a result of the publicity, many people came into town especially to register their support for voluntary euthanasia. SAVES member Melva Whibley was particularly active in raising awareness.

In one instance, a daughter had accompanied her elderly mother to the Mt Gambier town centre so that she could register her support for voluntary euthanasia. Her mother told of the futile and

unrelievable suffering her husband had endured. This particular woman's extended family's experience of loss and grief was reported in *The Border Watch* on April 29th) by journalist Karen Sweeney.

Other people involved included Joanne Dunn, mother of the late Mark Leigep, who lives over on Eyre Peninsula.

SAVES thanks all those members and supporters who are facilitating the campaign in a range of helpful ways. There is still much work to do to responding to questions and queries, countering the lies and misinformation sent to Members of Parliament by those opposed to the *Ending Life with Dignity Bill* and voluntary euthanasia, and ensuring Members of Parliament (MPs) understand that 82% of the public support voluntary euthanasia. As the 2014 State election looms MPs also need to understand that many of the 82% have indicated they would change their vote on this issue (Newspoll 2012).

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## Incorrect and misleading claims made by MP

Leesa Vlahos MP circulated a letter to state MPs on behalf of herself and Hon. Dennis Hood, Martin Hamilton-Smith MP, and Hon. Tom Kenyon which included incorrect or misleading claims about the *Ending Life with Dignity* Bill 2013. SAVES responded to these claims in letters to MPs and some of these responses are included below. This is to highlight the level of misinformation, and at the same time clarify some of the Bill's provisions. The claims made by Ms Vlahos are italicised, followed by SAVES' responses. Space restrictions preclude covering all points raised, or the numerous accompanying references supporting SAVES' responses:

Ms Vlahos:

*The Australian Medical Association (SA) Inc opposes the Bill:*

### Clarification

The AMA nationally has always opposed voluntary euthanasia despite surveys showing majority support for law reform from its membership. Since 1988 medical journals have been publishing surveys of doctors and AMA members which show that doctors are already assisting patients to "hasten death".

*There is no requirement whatsoever that any doctor involved has any past involvement with the patient.*

### This is incorrect

S16(2) (b) requires that at least one of the witnessing doctors must be a treating practitioner.

*Patients suffering from depression, even major depression, still qualify for euthanasia. The expert opinion of a psychiatrist is not required.*

### This is incorrect:

S16(2)(d) requires that, if one of the examining doctors considers that the person making the request is not of sound mind, then, before they can make a request, the person must obtain a certificate from a psychiatrist stating that they are of sound mind.

*Persons as young as 18 years old (including those suffering from depression) can be put to death [sic] just 48 hours after the issue of the certificate of confirmation.*

### This is incorrect

Only an adult of sound mind can request voluntary euthanasia, which cannot be administered until AT LEAST 48 hours after a medical examination by a third, independent medical practitioner – a doctor who was not a witness to the original request; an 18 year old is an adult in SA law.

*If euthanasia is legalised, the elderly will be vulnerable to feelings that they are a burden.*

### This is incorrect

The Bill will only apply to people who have a terminal illness and who are suffering unbearably.

*The doctor who finally kills [sic] the patient need only be a general practitioner.*

### This is misleading

Two medical practitioners and two independent witnesses are required when the request is made, and an additional independent doctor must make a third examination before the request can be implemented by a fourth doctor; this is a greater legal requirement than the treatment of other terminally ill people.

*The bill requires that the cause of death be falsely stated in official documents as the underlying disease; this will distort official statistics.*

***This is incorrect:***

The cause of death will be the underlying disease as the Bill will not allow voluntary euthanasia unless the person is suffering from a terminal illness. When death is the result of withdrawal of treatment, the underlying illness is given as the cause of death.

*The bill requires insurance companies to pay on a death claim, even though death is by choice through euthanasia.*

***This is misleading***

Insurance claims for death resulting from withdrawal of treatment or life support are paid by insurers based on the underlying illness; voluntary euthanasia would be the same.

SAVES will continue to monitor and respond to incorrect or misleading information on the issue of voluntary euthanasia law reform.

***Bequest to SAVES***

***Making a bequest to SAVES is one way to make a significant gift furthering the aim of the society. This is to achieve law reform to allow 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.***

**COTA calls for appropriate models for assisted-dying**

The Council for the Ageing (COTA), the peak body for older Australians, has called on federal politicians to explore safe models for assisted-dying. Ms Sue Hendy, the council's chief

executive, stated that the federal government should consider this on behalf of all Australians, even though the debate is generally confined to the state level as it is a state-based legislative issue. Ms Hendy also noted the need to strengthen anti-discrimination laws to protect elderly Australians from abuse and ageism as part of the process:

*We know that in a whole range of ways, people are taking their lives and being assisted, but it's all outside the law and it takes away therefore from ... the quality of death.*

Ms Hendy claimed that although COTA did not support any particular model for reform, the organisation wanted politicians to discuss it and examine models because many elderly people would take comfort from knowing that a peaceful death could be granted if necessary; as long as checks and balances are in place. The Senior, COTA's magazine, also covered the important findings of the Australia 21 Report discussed later in this bulletin.

**References:**

<http://www.thesenior.com.au/News/The-Senior-News/Assisted-dying-laws>

<http://www.thesenior.com.au/News/The-Senior-News/Assisted-dying-laws>

Julia Medew, 'Bid for national euthanasia laws', The Age, April 4, 2013

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**The national scene*****Tasmania***

Positive news from Dying with Dignity Tasmania is that the new *Voluntary Assisted Dying Bill* will be introduced and debated in the Tasmanian Parliament by the end of the year. Labor's Premier, Lara Giddings, and the Greens leader and minister, Nick McKim have joined forces

to back the legislation. The focus will be on promoting a well-informed and rational debate that acknowledges important principles and values and promotes choice. There were over 900 responses to a discussion paper entitled “Voluntary Assisted Dying: A Proposal for Tasmania” that are currently being analysed.

## New South Wales

Regrettably, the *Rights of the Terminally Ill* Bill was defeated in the Legislative Council of the NSW Parliament on the 23rd May. Voting was 13 in favour and 23 opposed. Eight of the 13 ALP members and the five Greens members supported the Bill. Even though a conscience vote was allowed, **not one** Liberal or National Party member supported the Bill. Greens MP Cate Faehrmann, who introduced the bill to the NSW Upper House, stated that people will be ‘screaming out in frustration’.

Even though the result was disappointing, Dying with Dignity NSW stated in a letter to its’ members that there is still reason for optimism, because the last time that a Bill on assisted-dying was presented to NSW Parliament (2002) it only attracted four votes. The 13 votes this time is a significant increase. Several members of both houses of parliament have indicated an interest in working with the society on law reform, and three MPs in the Legislative Assembly are prepared to sponsor a Bill in the Lower House.

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## International news

### United Kingdom

A YouGov poll commissioned for the final 2013 Westminster Faith Debate on Assisted-Dying explains why people support or oppose a change in the law following the overwhelming support for change. Overall, 70% of adults supported change with only 16% opposing and 14% undecided.

### Just a reminder

**SAVES public meetings are held three times a year on Sunday afternoons at the Box Factory 59 Regent St South, Adelaide.**

**This is an important forum for updating members on SAVES’ activities, legislative issues and relevant local, national and international events and initiatives.**

**Guest speakers provide a further informative dimension to these meetings which conclude with informal discussion over tea and coffee.**

**The next public meeting is on the 28th July 2013 at 1.30 pm**

**\*\*\*PLEASE NOTE EARLIER TIME\*\*\***

Eighty two per cent of those who support a change in the law agreed that “an individual has the right to choose when and how to die”. A very high proportion also state “it is preferable to drawn-out suffering” (77%). The minority opponents were clear and unanimous in their reasoning, with the most common concern being the potential for harm and abuse of patients and those who assist them.

Almost 60% of opponents agree that “vulnerable people could be, or feel, pressured to die”, 55% said that “it places too much of a burden on the person or people who help someone to die”, and 48% stated that “you can never build in enough safeguards.” “Sanctity of life” was joint third in the list of reasons for opposing and was cited by 48% of opponents.

Another finding was that an absolute majority of religious adherents support assisted-dying: excluding Baptists, Muslims and Hindus. Sixty four per cent of all other religious people support a change in the law, thereby rejecting the official message of their religious leaders.

[http://www.religionandsociety.org.uk/events/programme\\_events/show/press\\_release\\_westminster\\_faith\\_debate\\_6\\_should\\_we\\_legislate\\_to\\_permit\\_assisted\\_dying](http://www.religionandsociety.org.uk/events/programme_events/show/press_release_westminster_faith_debate_6_should_we_legislate_to_permit_assisted_dying)

## Vermont

Vermont has joined three other states that permit doctors to prescribe medication to assist terminally ill patients end their lives after the state House approved a compromise bill similar to Oregon's 1997 law. Governor Peter Shumlin was a strong supporter of the legislation and it is the first time a state has legislated for such a measure. The vote (75-65) was a reversal of the defeat of similar legislation in the House in 2007. Barbara Coombs Lee of Compassion and Choices, a national group that campaigns for assisted-dying, stated:

*The bill's passage should enable legislatures in Massachusetts, New Jersey and other states that are considering aid-in-dying bills to approve them.*

AgingCare.com conducted a survey to gauge sentiment among the terminally ill elderly who are near death and without hope of recovery, as well as those who are closest to the patients. More than 1,200 people taking care of elderly parents or family members took part in the May 2013 survey which revealed.

- 65% of caregivers believe that physician-assisted dying should be legal, while 35% are opposed.
- Of the supporters 51% said they would be present as their loved one carried out their choice, while 16% said they would help to administer the medication.
- If roles were reversed and it was the caregiver who was terminally ill and suffering, more than 63% said they would seek physician-assisted dying and, of these, 72% believe their family would be supportive.
- Of the 37% who said they would not seek this as an option for themselves, over 78% cited 'moral' and religious reasons as the basis for their decision.

## Seattle

Recent research has reported the experience of implementing a Death with Dignity program at the Seattle Cancer Care Alliance. The majority of people accessing physician-assisted dying laws in Oregon and Washington State have terminal cancer, and researchers used publicly available data to determine that between 2009 and 2011 38.6% of people enquiring about this specific program eventually chose not pursue it or died before completing it.

The people electing to take the medication were typically white, male, and well- educated who reported that the main reasons for pursuing assisted-dying were loss of autonomy, inability to engage in enjoyable activities and loss of dignity. The researchers stated that patients and families were grateful to receive the medication, regardless of whether or not it was eventually used. They concluded that this particular Death with Dignity program, accounting for 15.7 per cent of people in the Death with Dignity programs in Washington State, has been well accepted by both patients and doctors.

### References:

<http://www.sbs.com.au/news/article/1766204/US-state-of-Vermont-approves-euthanasia>

Vermont. Poised to Allow Lethal Medications for Terminally Ill - ABC News 14th May 2012 <http://abcnews.go.com/US/wireStory/vermont-house-passes-aid-dying-bill-19172787>The Sacramento Bee 9-6-2013 <http://www.sacbee.com/2013/06/04/5469241/more-than-65-of-family-caregivers.html>Loggers, E et al (2013) Implementing a Death with Dignity Program at a Comprehensive Cancer Center ,New England Journal of Medicine 368:1417-1424.

## Authoritative reports recommend law reform

Three recent authoritative reports from Australia, England and Wales, and Canada all recommending assisted-dying law reform are outlined below for readers, along with links to the reports. A brief letter giving links to the three reports was recently sent to all SA MPs. The main focus here is on the Australia 21 Report.

### *Australia: Australia 21 Ltd*

This report includes the findings of the Australia 21 Ltd Roundtable that was held in Brisbane in January 2013 under the collaborative sponsorship between the Queensland University of Technology and Australia 21, an independent non-profit body established in 2001 to develop new frameworks of understanding for complex multidisciplinary problems that are important for Australia's future. The briefing paper 'The right to choose an assisted death - the time for legislation?' was the impetus for the Roundtable which brought together a 'think tank' of participants from both sides of the debate on voluntary euthanasia. These included medical specialists, palliative care experts, ethicists, legal specialists, students, opponents of assisted-dying and others. Notably, Mr Paul Russell, spokesperson for HOPE, an organisation founded to oppose voluntary euthanasia law reform, elected not to attend the roundtable. (HOPE states that it is an initiative of the Australian Family Association which is based on the conservative Catholic social teachings promoted by the late BA Santamaria).

Emeritus Professor Peter Baume who announced the findings stated that voluntary euthanasia occurs every day in Australia without the surety of rules, or advice from medical colleagues. The report recommended that state governments craft legislation to allow and to regulate voluntary euthanasia and assisted-dying in prescribed

circumstances; that federal parliament should restore powers to the territories to do the same; and that MPs should consider introducing private members' Bills. Some of the points raised in the report on voluntary euthanasia and assisted-dying include that:

- Although illegal, both activities happen because palliative care cannot relieve all suffering.
- The law is deficient and unfair as it does not treat people equally, with some people able to use knowledge, money and connections to hasten their deaths.
- A very substantial majority of Australians have repeatedly expressed their desire for law reform in public opinion polls.
- A large body of international evidence showing that appropriate safeguards can be implemented.
- Australia is an increasingly secular society. Strong opposition to assisted death by religious groups is not a justification for denying choice for those who do not share that belief.
- The legal framework that operates at the end of life in Australia needs to be reformed.

Quotations in the report attributed to Roundtable participants include the views of Emeritus professor Ian Maddocks AM, who stated:

*Palliative care usually has adopted a confrontational position against voluntary euthanasia, recognising its work as supporting living before death rather than assisting death. Other factors are its historical association with Christian (Catholic) concern to preserve life; and a sense that support for euthanasia is a criticism of palliative care expertise.*

Dr Roger Hunt, Medical Head of Palliative Care at The Queen Elizabeth Hospital and a Senior Lecturer at the University of Adelaide explained:

*I have cared for terminally ill patients who have strongly expressed their wish for help to die. Around 7% of patients with advanced cancer make persistent requests for help to die.*

Ethicist and Honorary Adjunct Research Fellow, Dr Helga Kuhse, argued:

*Existing legal understandings that allow various medical end-of-life decisions, but prohibit “voluntary euthanasia” are unfair and unjust. They treat patients experiencing similar intolerable pain and suffering arbitrarily, in discriminatory ways.*

The authors of the report concluded:

The two major arguments against reform are:

1) concerns that the vulnerable in our community will be placed at greater risk,

2) *the theological view that the divinely*

*conferred sanctity of human life should prevent the intentional taking of life. Neither of these arguments is, in our view, sufficient to resist reform.*

([http://www.australia21.org.au/publications/press\\_releases/13/Apr/d15a2c922442b1985c218a91f4fb4f02.pdf](http://www.australia21.org.au/publications/press_releases/13/Apr/d15a2c922442b1985c218a91f4fb4f02.pdf))

### **England and Wales: The Commission on Assisted Dying**

The Commission on Assisted Dying, chaired by Lord Falconer, engaged a wide-ranging inquiry and concluded that:

- The current legal status of assisted suicide is inadequate and incoherent, distressing for affected people and their families, and is unclear for health staff,
- It is a deeply challenging burden on police and prosecutors.

- The role of any future assisted- dying legislation must be to provide all people with access to high quality end of life care, protect people from social pressure, and provide people with greater choice and control.

(<http://www.commissiononassisteddying.co.uk/the-aim-of-the-commission>)

### **Canada: Royal Society of Canada**

A 2011 report from the Royal Society of Canada Expert Panel entitled ‘End of Life Decision Making’ states that in prescribed circumstances Canadians should have the option of voluntary euthanasia or assisted suicide:

*‘The evidence from years of experience and research where euthanasia and/or assisted suicide are permitted does not support claims that decriminalisation will result in vulnerable persons being subjected to abuse or a slippery slope from voluntary to non-voluntary euthanasia’.*

News was received on 13th June 2012 that the National Assembly of Quebec tabled Bill 52, historic legislation supporting of better end-of-life care, including the right to medically assisted dying for the grievously ill. There was a standing ovation when the bill was tabled.

If this legislation becomes law, possibly by the end of the year, Quebec will become the first Canadian jurisdiction to legalize medically assisted dying.

([http://rsc-src.ca/sites/default/files/pdf/RSCEndofLifeReport2011\\_EN\\_Formatted\\_FINAL.pdf](http://rsc-src.ca/sites/default/files/pdf/RSCEndofLifeReport2011_EN_Formatted_FINAL.pdf))

***The VE Bulletin is available by email***

***Please consider this option to reduce postage costs. Email: [info@saves.asn.au](mailto:info@saves.asn.au) to receive future editions by email.***

***Thank you***

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## Fourteen years of service and dedication

The SAVES committee has been extremely fortunate in having Hamish Claxton working as Honorary Treasurer since 1999. Hamish has now retired and we extend our heartfelt appreciation for his service, dedication and friendship over a period spanning nearly half of SAVES existence (30 years). We wish Hamish and wife Gail the very best in their 'retirement'.

### *...And welcome Sandy Bradley!*

What a find! Sandy stepped into the breach as our new treasurer with enthusiasm and has already shown strong commitment and zeal. When you see Sandy at our next meeting please give her a warm welcome.

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## Support Group updates

Some of the voluntary euthanasia support groups have provided an update of their activities since the last *VE Bulletin*.

### **SA Nurses Supporting Choices in Dying**

Convenor of the group, Ms Susie Byrne, explains that this group provides a forum for the nursing voice and perspective on the legislation of voluntary euthanasia and other patient choices in end of life care here in SA. She states:

*Our group supports the ability of people to have a choice in the manner and timing of their death. Engaging in the law reform discussion is one way in which we can support that choice. We believe very strongly in our patient's right to autonomy at every stage of life. As many nurses are all too aware, there are some patients whose dying phase can be a protracted one, with unrelieved pain, nausea, anxiety and loss of dignity, despite the very best of palliative care. It is that small group that*

*would benefit from VE legislation, should they so choose.*

Ms Byrne advises that there has been a 'steady stream' of nurses wishing to join the group which has delivered a letter of support to State Parliament in regards to the Ending Life with Dignity Bill 2013.

### **Doctors for VE Choice**

Earlier editions of The VE Bulletin have reported on the national group of doctors who advocate for a change in the law. Co-convenors Dr Rosie Jones and Professor John Willoughby (and co-authors) have both recently had articles published on behalf of the group. Professor Willoughby and his co-authors' publication was in the Medical Journal of Australia. One of the salient points was in the statement:

*We believe that the current situation, in which voluntary euthanasia is illegal, inevitably leads to optimal management being denied to some patients. Some have unrelievable forms of pain; others are forced to endure a wretched but ongoing existence.*

In her online publication in Australian Ageing Agenda Dr Jones explains:

*We are not practitioners of assisted dying. All we are interested in is influencing events to bring about the legalisation of euthanasia... We stand for a group of doctors distressed about the small number of patients, who, at the point of death, get no relief from palliative care... We don't contest the major role of palliative care but do see that assisted dying is a part and parcel of the end [goal] of palliative care.*

### **References:**

Willoughby, J; Marr, R; Wendell-Smith, C (2013) 'Doctors in support of law reform for voluntary euthanasia':

<https://www.mja.com.au/journal/2013/198/4/doctors-support-law-reform-voluntary-euthanasia>

Jones, R: <http://www.australianageingagenda.com.au/2013/03/07/article/Doctors-in-support-of-voluntary-euthanasia/LUDYUSKBCH>

### **Christians Supporting Choice for Voluntary Euthanasia**

*National Coordinator Ian Wood sends this update (edited for length):*

In May I listened to Lyle Shelton, Chief of Staff for the Australian Christian Lobby, debate with Richard Mills, President of Dying with Dignity NSW, at a forum organised by East Sydney Labor. Lyle made many statements that are not supported by facts, and I would like to comment on one of them. A number of times when presenting his case against VE Lyle referred to palliative sedation as being a suitable response by PC doctors when all other methods of controlling the symptoms fail. I asked him afterwards did he actually understand that palliative or terminal sedation means putting a person into a coma until they starve to death. He seemed unsure, and I don't think he had thought through the implications... I then asked why he as a Christian believed it was morally acceptable that the slow death procedure should be legal but not the other? He went off on a tangent... [but in the end] he said he could not answer the question.

I have since posed this question to [different] audiences:

“Imagine you were dying, in a [dreadful] state... You have two choices -palliative or terminal sedation, being put in a coma and you die slowly... [or] the same medication in one dose, and die within minutes.”

Not one person opted for the slow death... Lyle, palliative care physicians and MPs, please take note!

Lyle admitted knowing nothing about the Oregon Assisted Dying Act and its operation: a fact I found incredible from a person arguing against the legalisation of assisted dying. He also came across as believing he has a far better knowledge of how the dying person is suffering than the person themselves. He admitted there are extreme cases where suffering could not be adequately relieved, but stated that the existence of such cases was not a reason why assisted dying should become legal.

It is of grave concern that people such as Lyle are seeking to impose their views on us all, though our politicians.

Recent activity for the Group has concentrated on sending Group letters to MLCs in NSW and MPs in the Lower House of SA, and urging and assisting members to send their own individual messages. New members are very welcome.

### **Advance directives research**

On April 11th this year, the *Advanced Care Directives Act 2013* was passed here in South Australia. A Flinders University PhD student Ms Sandra Bradley is undertaking research on the effectiveness of online methods for encouraging ‘Baby Boomers’ to complete advance care directives. Ms Bradley is seeking research participants to assist her in her so please contact her at [sandra.bradley@flinders.edu.au](mailto:sandra.bradley@flinders.edu.au) if you or someone you know might be interested in helping with this.

### **See SAVES'**

***new ‘user friendly’ website hosting an extensive range of information including dozens of fact sheets and articles, information about attempts to change South Australia’s law, and advance directives.***

## Voluntary Euthanasia Support 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.

### *Doctors for VE Choice:*

Website: [drs4vechoice.org](http://drs4vechoice.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](mailto:rosiej@internode.on.net)

#### **Professor John Willoughby**

Mobile 0499 078 938

[John.Willoughby@flinders.edu.au](mailto:John.Willoughby@flinders.edu.au)

### *SA Nurses Supporting Choices in Dying*

Convenor: **Ms Susie Byrne** email: [sanursesupportingchoicesindying@hotmail.com](mailto:sanursesupportingchoicesindying@hotmail.com)

Facebook: SA Nurses Supporting Choices in Dying.

### *Christians Supporting Choice for Voluntary Euthanasia*

Website: [www.christiansforve.org.au](http://www.christiansforve.org.au)

National Co-ordinator:

#### **Ian Wood**

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

Email: [Christiansforve@westnet.com.au](mailto: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) 0402305029

Email: [minister@nabc.org.au](mailto:minister@nabc.org.au), Website: [www.nabc.org.au](http://www.nabc.org.au)

### *Syndicated Voluntary Euthanasia Youth Advocates- 'SAVE-YA'*

Convenor: Ms Amy Orange: [SAVEyouthadvocates@hotmail.com](mailto:SAVEyouthadvocates@hotmail.com)

### *South Coast Support Group*

Convenors: Denis and Pat Haynes [den1929@bigpond.com](mailto:den1929@bigpond.com)

**PLEASE NOTE: EACH SUPPORT GROUP IS STAFFED BY VOLUNTEERS AND WOULD WELCOME ANY FINANCIAL ASSISTANCE TOWARDS OPERATING COSTS.**

## NOTICE OF SAVES PUBLIC MEETING

The SA Voluntary Euthanasia Society Inc. (SAVES) will hold a public meeting at  
**The Box Factory 59 Regent St South, Adelaide on**

**Sunday 28<sup>th</sup> July at 1.30 pm \*\*PLEASE NOTE EARLIER TIME\*\***

Guest speaker will be the **Hon Dr Bob Such MP** speaking on the *Ending Life with Dignity Bill 2013*

Tea/coffee and biscuits will be available at the conclusion of the meetings. Bring your friends. **All welcome!**

**Final meeting for 2013 is Sunday November 10th: 2.15 pm at The Box Factory**

## South Australian Voluntary Euthanasia Society Inc. (SAVES)

**Annual Membership fees: Single \$25.00 (Concession \$10.00), Couple \$30.00 (Concession \$15.00)**

**Life membership: Single \$200.00, Couple \$300.00**

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

**MEMBERSHIP FORM – or you can join online at <http://www.saves.asn.au/samem.php>**

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 - And please return completed form to the above postal address to ensure proper identification of your payment.**

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 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.



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