

THE BULLETIN

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NEWSLETTER OF THE SOUTH AUSTRALIAN VOLUNTARY EUTHANASIA SOCIETY INC. (SAVES)

Vol 23 No 1 'No price is too great for the privilege of owning yourself' March 2006
Rudyard Kipling

'Suicide law' now enacted

The Criminal Code Amendment (Suicide Related Material Offences Act) 2005 has now been enacted. As discussed in previous editions of The VE Bulletin this makes it a crime to use a 'carriage service' (email, internet, fax, telephone) for accessing, transmitting, making material available, publishing, or distributing information on material that directly, or indirectly, counsels or incites committing, or attempting to commit suicide.

While the Act states that a person is not guilty of an offence if using a carriage service for 'engaging in public discussion or debate about euthanasia or suicide; or to advocate reform of the law relating to euthanasia or suicide', it should be noted that terminology in the Act can be interpreted broadly; for instance the words 'counsel' and 'incite'.

As this newsletter cannot provide more than this brief overview of the Act, SAVES members and other interested parties are advised to refer to a full transcript which is available at:

<http://scaleplus.law.gov.au/html/comact/browse/TOCN.htm>

Newspapers have provided coverage of this law, through articles and letters to the editors.

Cont. p 2.

SA state election: March 18th 2006

*Do the candidates in
your electorate support
voluntary euthanasia?*

Ask!

Auditor / Treasurer needed

SAVES relies on the generosity of many people in undertaking its activities, and is interested in hearing from members who have suitable qualifications to assume the role of honorary auditor or honorary treasurer.

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For instance, Greg Barns made the point that terminally ill patients who in the past may have used the telephone to consult a doctor concerning the practicalities of self-deliverance or aspects of medication now face a \$100,000 fine ⁽¹⁾. He argues that the federal government is justifying implementation of the new law on the same basis that it claims the necessity to sacrifice personal freedoms in the face of potential terrorist acts.

SAVES President, Frances Coombe, had letters published in *The Advertiser*, *The Australian*, and *The Independent Weekly* in response to enactment of the law. She argued:

The Criminal Code Amendment (Suicide Related Material Offences) Act 2005 has now been enacted. This is a blatant assault on our right to freedom of information, prohibiting suicide-related information via the internet, email, telephone and fax. This modern-day book burning cannot protect the vulnerable, and instead disempowers people and forces them to ill advised, pre-emptive action. It is a cruel irony that Prime Minister Howard enabled the overturning of the Northern Territory's Rights of the Terminally Ill Act in 1997, thus causing an explosive drive for self-deliverance information. Now he further compounds people's suffering, by restricting access to this information. Shame, shame on this draconian law we would expect to find only in a dictatorship or theocracy. ⁽²⁾

One correspondent in a national newspaper 'letters page' gave candid words of advice:

As of today, free speech on the net about suicide is subject to the whims of the thought police, so I suggest we copy the spammers. Don't mention suicide. Talk about cashing in the chips, buying the farm, falling off the perch, going to happy valley, giving the kids their inheritance, getting totally and permanently wasted, etc. It's a good

thing I handed my will instructions to my doctor instead of emailing him.

Marshall Perron, architect of the *NT Rights of the Terminally Ill Act*, the world's first voluntary euthanasia legislation, later overturned by the current government, made the following comments on the new law:

As a former politician I know the trade-offs that it takes to make a good idea into law. On the flip side, I am also aware of the dangers of bad laws and the damage that can be done through unintended consequences. The Suicide Related Material Offences Act is modern-day book-burning, yet history tells us that book-burning is the act of the ignorant. ⁽³⁾

As SAVES is a law reform society, it is not involved in the practicalities of suicide (or self-deliverance). However the organisation receives many calls from people seeking a wide range of information. These include people with a general interest in the voluntary euthanasia law reform movement, as well as some desperately and terminally ill people in severe distress who are offered as much assistance with their enquiries as possible. They have generally exhausted all other options in regaining a quality of life that can ever be acceptable to them.

Other organisations which may provide further information include:

Euthanasia Research and Guidance Organisation:

Postal address: 24829 Norris Lane, Junction City, Oregon 97448-9559 USA.

Website: <http://www.finalexit.org/>

E-mail: ergo@efn.org Messages and

FAX: +1 541-998-1873

Dignitas:

Postal address: PO Box 9 CH 8127 Forch
Switzerland.

Website: <http://www.dignitas.ch/>

email dignitas@dignitas.ch

Tel international- 41 44 980 44 59

Fax international- 41 44 980 14 21

Exit International:

Address:

PO Box 37781

Darwin NT 0821

PO Box 124 Capital Post Waterloo Quay
Wellington NZ

Website:

<http://www.exitinternational.net./contact.htm>

Phone:

0500 83 1929 within Australia

61 500 83 1929 International

Fax:

08 8983 2949 within Australia

61 8 8983 2949 International

Email address:

info@exitinternational.net

SAVES again reminds readers of new legal constraints on suicide-related information accessed by any other means than face to face discussion or standard post. Using a carriage service (email, internet, fax and telephone) in contravention of the Criminal Code Amendment (Suicide Related Material Offences Act) 2005 may result in prosecution.

References:

(1) 'New law on suicide attacks freedom', *The Canberra Times*, 6th January 2006

(2) 'Dare not say its name', *The Australian*, 9th January 2006

(3) 'Suicide debate law a blow to free speech', *The Age*, 5th January 2006

Change of meeting date

SAVES members and other interested parties are advised that SAVES' Annual General Meeting, advertised as April 16th in the November VE Bulletin, has been rescheduled for Sunday 23rd April at 2.15 pm. (See page 11)

President's report: November 2005 meeting

SAVES President Frances Coombe warmly welcomed members and guests, extending a special welcome to Maree Day as a new committee member. Frances reported that the Dignity in Dying Bill is currently adjourned pending the 2006 state election, and that the 2005 Shirley Nolan Day was an important event, albeit with a disappointing attendance. She reminded members and supporters that T Shirts are now available from SAVES in red and navy blue for \$15 (plus postage) with the SAVES logo and the words 'Voluntary euthanasia, my life, my choice.'

Frances quoted parts of the dissenting speech by former Democrats Senator, Brian Greig, in respect of the *Criminal Code Amendment (Suicide Related Material Offences) Act 2005*. Mr Greig stated that the Act was 'absurd', and that:

It represents another triumph by the Religious Right which continues to press the government on conservative and symbolic reforms that have little or no impact on reality. This bill illustrates the way in which the Coalition continues to politically gesture to the more extreme church groups, and how Labor has not learnt its lesson in trying to copy the government in this regard, and trying to corral the same voting base. This bill is a victory of style over substance, of superstition over reason, and of ignorance over education. The bill is a fool's illusion, because it does not achieve the outcome it claims to provide for. This bill is not about suicide. It does not address the

causes of suicide or even pretend to address them. At its heart this bill is nothing less than the Religious Right attempting to shut down and censor voluntary euthanasia support and discussion groups in the broader community. And their push for this bill is all about laundering of religious beliefs into a secular argument, hiding church from state, and translating their personal religious views into public policy and then imposing them on all citizens.

Frances noted that Mr Greig had made the important point that the bill does not have international reach, and as the internet is an international medium, it is 'like removing a grain of sand from a beach and claiming that there is now a noticeable difference'.

Frances also spoke of SAVES' decision to initiate correspondence with the Palliative Care Council, and how over the past 23 years SAVES has always worked hard to promote palliative care:

In particular I think I can safely say that our society is one of the strongest promoters of advance health care directives as we always distribute information about these when we give talks to community groups, and that one of our pamphlets acknowledges the importance of palliative care and hospice as concepts of care. SAVES also has palliative care specialist as speakers at general meetings to inform people about the services that are available to them in time of need.

Frances reminded the audience that both the Palliative Care Council and SAVES have a shared interest in dignified dying, compassion for suffering, and concern for quality of life. Above all, we share a deep commitment to patient autonomy, to giving patients what they recognise as good for them, rather than requiring them to live (and die) as seems good to others.

She stated that considering the commonalities between the two organizations SAVES feels aggrieved by our exclusion from the 8th Australian Palliative Care Conference, particularly because the theme of the conference was 'Palliative Care: Challenges and Dilemmas'. We were made welcome at the very first conference in Adelaide, when we offered our poster display. SAVES always looks optimistically to a future that will see a working together in advocating for all suffering people.

Frances also spoke about international issues relating to voluntary euthanasia, and these are covered separately in this edition. She then welcomed Emeritus Professor Graham Nerlich as Guest Speaker on 'Leading a Life'.

Guest speaker: Professor Graham Nerlich

As guest speaker at the November 2005 public meeting Professor Graham Nerlich explained why he strongly supports SAVES' aims. He spoke of what he believes it means to 'lead a life', and what happens when one can no longer do so. In a candid discussion of his boyhood Graham recounted how his 'elders and betters' believed in God, but that he found he could not. Instead he understood Sunday school as a game played in the context of myth or legend. He experienced the beginnings of philosophical thought at a young age, having being reproved as an 'unbeliever'. He came to understand that good cannot be delivered solely by commandments, and that ethics is, and must be, created with the help of others; but through mutual guidance rather than through blind obedience.

Anyone who shares this view realises what it means to 'lead a life', a uniquely human capacity. We are, and should be the 'moral captains' of our own lives, just as Socrates was in arguing that the unexamined life was not worth living.

The VE Bulletin - March 2006

In fact Socrates chose to die rather than face exile from Athens, the city that was his life.

Our life is our own work of moral art and when we lose the ability to lead a life our world collapses into mere existence; pain, ethical misery, humiliation and squalor. Professor Nerlich argued that it is therefore profoundly important to have the choice to 'bow out' in our own way; the final choice in 'leading a life'.

Exit International Conference 2005

The 2005 Exit International Conference was held in Brisbane on 5th- 6th November, with SAVES committee members Frances Coombe, Mary Gallnor, Anne Hirsch and Julia Anaf attending.

Canadian Humanist of the Year, Evelyn Martens from Right to Die Canada, and Ludwig Minelli founder of Dignitas (speaking via videolink) were the Keynote Speakers. Evelyn Martens told of her ordeal in facing two charges of aiding and abetting suicide through agreeing to be present at the elected suicides of right-to-die members, and of the police entrapment involved. She was found not guilty of the charge. Ms Martens stated:

The law is an outdated remnant of a bigoted past. Dying should be a social and humane experience with the freedom to choose to die, and a time to die.

Speakers from the political arena included Senators Lyn Allison and Barnaby Joyce, Ian Cohen MLC, and former senator Brian Greig, (Australian Democrats). Dr Philip Nitschke, John Edge, and Dr Wendy Gunthorpe, were Exit International's speakers. Dr Rodney Syme (VESV), Sandra Milne (VESQ) and Mary Gallnor (SAVES), also addressed the conference.

Mary gave an overview of the progress of South Australian legislation from the Natural Death Act (1983) onwards. She discussed SAVES' work in preparing the ground, raising consciousness and lobbying, as well as the role of SAVES' Task Force in bringing strategies to the committee. SAVES new mobile display attracted a great deal of interest, with many people taking notes and making enquiries of the SAVES members who staffed it for the duration of the conference.

Civil rights advocates Terry O'Gorman QC and Greg Barns, and Kep Enderby QC (former President VESNSW and Attorney General in the Whitlam years) also addressed the conference. Bill Godfrey and several members of the Verschoor family spoke from the perspective of family members who have experienced the difficulties involved in helping loved ones find assistance to die with dignity in the face of laws proscribing choice for voluntary euthanasia.

Chris Griffith, a journalist with the Queensland *Courier Mail*, gave information around his coverage of the death of Nancy Crick, which won him a 'best feature' award. Janine Hosking gave an introduction to the screening of her film 'Mademoiselle and the Doctor'.

Greg Barns reminded the audience that Australians have no bill of rights protection, a point also raised by Brian Greig who explained how human rights legislation has been 'watered down'. Terry O'Gorman questioned the way in which the Criminal Code Amendment (*Suicide Related Material Offences*) Act 2005 would work in practice. He surmised that powerful opponents would push for prosecutions through ambiguities of terms in the legislation such as to 'incite' and 'counsel'. The audience was also told of the 'Peanut Project', associated with the 'Peaceful Pill' initiative, and how approximately

20 Exit International members participated in an event to learn aspects of making a 'peaceful pill'.

Statement: Exit International

In the January 2006 edition of the Exit International Newsletter Dr Philip Nitschke made the following statements:

- *Exit goes to some length to differentiate itself from traditional Voluntary Euthanasia Societies.*
- *Exit cannot and will not support the medico-legal approach to VE.*
- *Exit maintains that ALL elderly people, not just the terminally ill, have the right to a peaceful death if and when they wish.*
 - *For an organization to focus upon law reform is to condone the paternal role of medicine in everyone's death.*

The above statements represent a change from Exit's earlier position which included a dual focus on legislative reform and 'do it yourself methods'.

Nearly 80% of South Australians support a change in the law to allow choice for voluntary euthanasia under prescribed conditions, and safeguards. SAVES takes the view that doctors have a duty of care in the complexities of dying just as in the complexities of being born. We do not believe that a DIY suicide pill is an adequate substitute for enlightened medical care at the end of life.

Another 'mercy killing' judgment

Another case of mercy killing has been brought before the courts. A Launceston nurse Catherine

Ann Pryor, implicated in the deaths of her parents, had admitted assisting in her father's suicide, but denied the attempted murder of her mother. In the Criminal Court, Acting Justice Michael Hill said it was clear Pryor had a caring relationship with her mother and was not acting out of self-interest. Pryor was sentenced to 18 months in jail for the attempted murder and 12 months for the assisted suicide. Both sentences were wholly suspended. Mrs Grant was 77 years of age and in the early stages of dementia and Dr Grant was 79 and suffering from terminal cancer.

Justice Hill said it was submitted that Mrs Grant shared her husband's views in support of dying with dignity.

He said 'her quality of life was diminishing rapidly', but while Pryor's actions might be understood and accepted by some, the court had to sentence her according to the law and 'not involve itself in any debate on the difficult topic of euthanasia'. He stated 'I do not think the community would demand that an actual period of imprisonment be imposed', noting her time in custody awaiting sentencing.

This judgment follows that of the Godfrey case in 2004 in which Justice Underwood imposed a 12 month suspended sentence on John Godfrey who 'was motivated by compassion and love' in assisting his mother's suicide. Justice Underwood also stated that Australian law discriminated against the elderly and disabled when it came to exercising their right to act upon their end of life choices.

This is another instance of lawmakers speaking out because elected representatives fail to 'grasp the nettle'.

Hobart Mercury 20 Dec 2005

ABC News Monday, December 19, 2005.

End of life interventions

Victorian researcher and Monash bioethicist, Dr Helga Kuhse, is undertaking ongoing research into Australian doctors' attitudes towards voluntary euthanasia. The research has been conducted in 1988, 1997 and 2005. The latest research mirrored a study by Britain's Brunel University which showed that two thirds of all hospital deaths in the UK involved some form of assistance by medical practitioners. (See page 9 this edition)

The Australian study found that 10,000 Victorians die in hospital each year after doctors withdraw treatment or provide pain relief to end the lives of terminally ill patients. The report conducted by Monash and Melbourne University bioethicists revealed that approximately 40 per cent of Victorian doctors were willing to assist patients to die. Dr Kuhse said 'patients had the legal right to refuse treatment, and every hospital in Victoria will withdraw treatment by patient request, or if doctors deem it futile to continue'.

The VE Bulletin will provide further information on this important research when it comes to hand. Sunday Herald Sun 'Euthanasia alive and well, Suellen Hinde 22nd January 2006

Oregon's assisted suicide law upheld

The US Supreme Court has upheld the Oregon Death with Dignity Act which has been twice approved by voters since coming into effect in 1997. The Bush administration attempted to overturn the law by declaring that assisted suicide was not a legitimate medical purpose under the Controlled Substances Act (1970), and that prescribing federally controlled drugs was against the law.

Oregon's successful challenge mounted in the Supreme Court represented the third victory

against federal interventions to deny citizens of that jurisdiction autonomy in dying. Previous defeats were before a US appeals court and a federal judge. The latest court ruling (6-3) stated that former attorney general John Ashcroft had misinterpreted a federal law in 2001. One of the dissenting judges who sought the overturning of the Death with Dignity Act was newly appointed Justice John Roberts.

Despite this third ruling a White House spokesman claims the US Justice Department will again review the decision, as 'the President remains fully committed to building a culture of life'.

'Bush Defeat on Aided Suicide', The Australian, January 19th 2006.

From the journals North Carolina

Researchers have established that there is little evidence to support the common argument by opponents of choice in dying that legalising physician-assisted suicide would undermine patient trust in doctors. Professor Mark Hall, Professor of Public Health Sciences at Wake Forest Baptist Medical Centre, and Elizabeth Turnage, Professor of Law at Wake Forest University conducted a random telephone survey of 1,117 adults in the USA to understand the range of attitudes on the question:

(Assume for the purposes of this question that euthanasia were legal.) If doctors were allowed to help patients die, you would trust your doctor less?

Fifty eight per cent disagreed, and only 20% agreed with the statement, with no differences noted in attitudes between men and women.

Professor Hall argued that even the Supreme

Court makes an unsubstantiated claim of undermined trust by 'blurring the time-honoured line between healing and harming'. However he also warned against being 'cavalier about potential threats to trust, because once it is lost, it is far harder to rebuild rather than sustain'.

Hall M, Trachtenberg F, Dugan E (2005) 'The impact on patient trust of legalizing physician aid in dying', Journal of Medical Ethics ³ (12) 693-697.

World news

Switzerland

A university hospital in Lausanne Switzerland will allow assisted suicide on its premises for legally competent terminally ill patients who are too ill to return home and have persistently expressed a wish to die. Prior to this, patients had to leave the hospital, but were now allowed access to private doctors or to a member of Exit, the Swiss voluntary euthanasia society.

The decision was made after three years of deliberation. The position reflects the views of both the Swiss Medical Association and the National Committee on Ethics.

BBC news 18th December 2005

United Kingdom

The year 2005 was a significant one for progress in support for choice in end-of-life decision making. The House of Lords Select Committee has undertaken the largest investigation ever into the issue, and a majority of members confirm that they would back an Oregon style bill which is considered to be an example of successful public policy.

The British Medical Association (BMA), the Royal Academy of Colleges and the National Council for Palliative Care, all traditional opponents

to a change in the law, have now adopted a neutral stance. At the 2005 annual meeting of members of the BMA a vote was taken to determine support for the BMA lobbying in favour of choice for assisted dying.

The vote for a complete reversal of the policy position was rejected by a narrower margin than was expected; 58% against and 42% in favour. The subsequent vote on withdrawing opposition to assisted dying was passed by a narrow majority of 53% in favour and 47% against. The BMA stated:

Arguably it can be seen as a sign of the BMA's maturity that it now acknowledges that this controversial issue can no longer be addressed in black and white terms. From the BMA's perspective a neutral position entails a campaign for better palliative care, robust safeguards for patients, training and support for health professionals, and clear conscientious objection clauses (1).

Proposals to legalise voluntary euthanasia, where the doctor actually helps a patient die, have been dropped, with the focus now on physician-assisted suicide. Lord Joffe told the BBC:

I feel very strongly about assisted dying. It seems to me to be a human right to make a decision in relation not only to how you run your life, but how and when you die.

Lord Joffe, a former Human Rights lawyer, says his bill is tightly drawn, and there is no room for the courts or individuals to extend the law. That would need new legislation by future governments.

One of Scotland's most senior doctors has backed a proposed bill similar in terms to Lord Joffe's Bill. Dr Gordon Peterkin is the

first medical director to publicly support voluntary euthanasia, saying that many modern treatments to keep patients alive were 'harmful to patients and disruptive to families'.

(1). Somerville, A (2005) 'Changes in BMA policy on assisted dying', *British Medical Journal*, 331: 686-688

Eight patients helped to die each day

Also in Britain a study by Professor Clive Seale of Brunel University has revealed that half of one per cent of all deaths in Britain were assisted by doctors, and research shows that approximately one third of all British deaths during 2004 were hastened using drugs. The research was based on an anonymous survey of doctors. Nine hundred and thirty six of the 585,000 deaths in 2004 were described as voluntary euthanasia, while an additional 1,929 involved 'ending life without an explicit request from the patient' (also known as non-voluntary euthanasia), practices which are illegal.

Professor Seale also said that almost a third of all deaths (191,811) had been hastened by using pain relief, or 'alleviation of symptoms with possibly life shortening effect' (double effect). However the level in the UK is significantly lower than in other countries where this survey has been conducted. While only 14 per cent of surveyed doctors said they were dissatisfied with the current law, Deborah Annetts, chief executive of the Voluntary Euthanasia Society, said: This research proves that some doctors break the law and deliberately help patients die. This is all done in secret and denied in public. This cannot be safe.

See www.worldrtd.net

Change of name for VES UK

The UK Voluntary Euthanasia Society is planning to rename itself 'Dignity in Dying'. While critics have argued that this term reflects the desire of terminally ill people to achieve a higher quality of life rather than calling for assistance to die, Chief Executive Officer, Deborah Annetts states that the name was chosen from the 200 nominations. The proposed change has been well-received by members of parliament and members of the House of Lords.

United States

Members of the board of AUTONOMY, a disability advocate group is in disagreement with the views of the National Council on Disability which opposes choice for legalized assisted suicide. Board Secretary Alan Toy argued that 'physician assisted dying is more about personal choice than disability rights'. He states:

Personal choice is something the disability community is unanimously in favour of when it comes to living...isn't making a well-controlled choice to die a bit sooner in the face of terminal illness, an independent choice made by the living? How dare we take away their choice, based on our fear of being devalued as human beings? We devalue them and ourselves by presuming to make choices for them.

Another board member Karen Hwang claims: Many of us believe the vulnerability argument is inherently discriminatory because it denies our capacity for informed consent, and makes blanket assumptions about the entire disability population's perception of life and death; exactly what proponents of vulnerability decry in the current medical and social establishment.

See *Autonomy Inc website: www.autonomynow.org/*

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In Michigan the attorney for Dr Jack Kervorkian is seeking a pardon and/or commutation of sentence of imprisonment which was imposed nearly seven years ago. This sentence was imposed as a result of giving a lethal injection upon request to a man dying from Lou Gehrig's disease. Dr Kevorkian had filmed the process and challenged the courts to prosecute him. He is now 77 years of age and scheduled for release in June 2007. His attorney claimed that Dr Kevorkian has been imprisoned for an offense for which not one other doctor in the entire United States has ever spent one day in prison.

Denmark

Fleming Schollaart and Dr Tom Olsner are the founding members of En Vaerdid Dod (E.V.D.) the Danish right-to-die organization which is the newest member of the World Federation of Right-to-Die Societies. A survey conducted in the Jutland Post reveals that 68% of the Danish population support legalization of voluntary euthanasia. Forty one of the 46 right-to-die groups in the world are now members of the World Federation.

World Federation newsletter December 2005

Israel

After many years of deliberation involving doctors and rabbis, Israeli law now states that a terminally ill person who is in great pain and does not wish to continue to live will not be forced to have their life extended artificially. Twenty two Knesset Members voted in favor, and three voted against the government sponsored Passive Euthanasia Law which will come into effect within a year. Health Minister Danny Naveh described the passage of the law as a historic moment, saying: "This is one of the most important laws passed by the Knesset. Knesset Member

Reshef Chayne (Shinui), who added his own proposal to the law, said during the meeting:

Every person should be able to give written instructions, while being fully aware, in which they can say that if they are in a permanent vegetative state, and dependent on resuscitation, they can be disconnected from life support machines. In a situation of terminal illness, there is redemption in this option, which has been previously denied. Worse, a prolonging of life at times causes suffering to the patient. If it was up to me the same should be true of those in non-terminally ill situations, like a vegetative state.

If a patient is unable to express an opinion, a decision will be taken based on instructions he or she gave to doctors beforehand. If there are no such instructions, a declaration will have to be made by a close relative or custodian. Yitzhak Hoshen, who has handled many requests from terminally ill patients for disconnection from life support, maintains that the law was important, but not sufficient:

This law only deals with a terminally ill patient who has days to live. It doesn't deal with other situations, like when patients with incurable diseases have many years to live, such as those who are in vegetative states.

See World Federation of Right to Die Societies website: www.worldrtd.net

World Federation Conference 2006

The 2006 World Federation Conference will be held in Toronto Canada between September 7th and 10th. Hosted by Canada Death with Dignity it will be held at the Sheraton Centre.

See World Federation of Right to Die Societies website: www.worldrtd.net

NOTICE OF ANNUAL GENERAL MEETING

Of the SA Voluntary Euthanasia Society Inc. (SAVES) at
The Disability Information and Resource Centre (DIRC), 195 Gilles St, Adelaide.

2.15 pm Sunday April 23rd 2006

Business will include presentation of the President's and Treasurer's reports and election of office bearers and other committee members for a period of one year. Written nominations for official positions, signed by the nominating and nominated persons should be received by the Honorary Secretary by 31st March. nominations cannot be accepted from the floor.

Guest speaker will be

Associate Professor Arnold Gillespie, Dept Gynaecology, University of Adelaide on:

"VOLUNTARY EUTHANASIA - ONE DOCTOR'S PERSONAL VIEW"

Tea/coffee and biscuits will be available at the conclusion of the meeting.

Bring your friends. All welcome.

Other public meetings 2006 will be held on July 30th and November 19th .

SAVES is not able to help people end their lives

A Bequest is one way to make a significant gift to further the aim of the society which 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 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*"

Membership Fees	SAVES MEMBERSHIP FORM	Email address if you would like to be advised of special activities
Annual Single \$20 Double \$25 Concession Annual Single \$10 Double \$14 Life Membership Single \$170 Double \$280	New member () Renewal () Date _____ Membership Fees \$ _____ Donation towards the work of SAVES \$ _____ Mr/Mrs/Ms/Miss/Other _____ Total \$ _____ Given name or initial _____ Surname _____ Address _____ _____ Postcode _____ Ph (h) _____ (w) _____	d.o.b. (optional) _____
Annual fees fall due on 28th February.	Please make cheque or money order payable to SAVES and send to Membership Officer, SAVES, PO Box 2151, Kent Town SA 5071. 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 medical judgement and conscience of the doctor.	
SAVES IS NOT ABLE TO HELP PEOPLE END THEIR LIVES		

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 judgement and conscience of the doctor.



Committee:

President

Frances Coombe

Vice Presidents

Julia Anaf

Mary Gallnor

Hon. Secretary

Anne Hirsch

Hon Treasurer

Hamish Claxton

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Marika McKerral

Leonie Moore

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