

SEPTEMBER-OCTOBER 2017

## The Victorian Government's Voluntary Assisted Dying Bill – a Recipe for Disaster

With much fanfare the Victorian Health Minister launched the so-called Voluntary Assisted Dying bill in the Legislative Assembly on Thurs 21/9/17. The title of the bill is dishonest. We all benefit from assistance in dying when our time to die has come.

Good assistance in dying comes from helping a person to live, even when they are dying. The government's bill is in reality designed to give doctors the power to accede to a person's request to end their life.

It's an Assisted Suicide bill!

**"The bill establishes a mechanism for adults with decision-making capacity, who are suffering from a serious and incurable condition at the end of their life, to be provided with assistance to die in certain circumstances, by means of self-administering a lethal dose of medication\*" and...**

**"Under the bill, only adults with an incurable, advanced, progressive, disease, illness or medical condition that is expected to cause death within 12 months and is causing suffering that cannot be relieved in a manner that is tolerable to the person will be able to access voluntary assisted dying\*"**

What is not recognised is that a person with a disease which can be made terminal by rejection of treatment, eg diabetes, heart disease, Parkinson's, kidney disease, motor neurone disease etc. will be able to make herself/himself eligible for suicide assistance from the doctor.

**"A person with a mental illness alone or a disability alone will not satisfy the eligibility criteria; however, a person with a mental illness or a disability who meets all the eligibility criteria will have the same opportunity as anyone else to request and be assessed for voluntary assisted dying\*"**

This section appears to open the door to suicide for those with mental illness and for disability if they have - as well - an illness for which they reject treatment so becoming terminal. It may well be the mental illness or the disability could be the motivating factor in seeking suicide and the companion illness for which the patient can refuse treatment may not be the real problem for the patient!

Much is made of the importance of the request for suicide being made solely by the patient. A doctor or family member or caregiver must not request it or suggest it to the patient. How would that be policed - occurring as it would in the privacy of the home?

(Continued on Page 5)

*\*Statement of Compatibility-Charter of Human Rights and Responsibilities Act 2006-Voluntary Assisted Dying Bill 2017*

## Letter from the President I never thought it would come to this!



– Margaret Tighe

Dear Friends of life,

I have just returned from a depressing visit to the Victorian Parliament with my colleague Mary Collier where we witnessed the Victorian Minister for Health, Jill Hennessy MLA introducing the so-called Voluntary Assisted Dying Bill 2017.

I say the so-called Voluntary Assisted Dying Bill 2017 because in reality it is a

bill allowing physician-assisted suicide.

Health Minister Hennessy made much of the so-called "safeguards" contained in the bill. The bottom line is that as experience from those few countries that allow assisted suicide shows "the safeguards" are not worth the paper they are written on.

It was quite depressing watching the Minister for Health (!!!) lining up in Queens' Hall for a triumphant photo with her supporters.

However, it's not over till it's over and we simply **MUST** keep on working away until the bill is finally debated on 17, 18, and 19 October 2017. If you are able to attend the debate in Vic Parliament on one of these dates, we encourage you to do so.

We rely on you to keep up the pressure on your MPs. At this stage, if letters appear too onerous, just make that phone call to your MP's office.

We are focussing on the House of Assembly MPs, where the bill has been introduced. It is imperative that the bill is defeated in this house. This means that if you can only make JUST ONE PHONE CALL this is the one to make! Victorians: If you are unsure of the name of your MP please telephone us on (03) 9385 0100.

In life, Margaret Tighe, PRESIDENT

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## Vic Euthanasia Action Campaign marches on...



Mary Collier

We are nearly into our eighth month (!) campaigning against the Victorian Assisted Suicide bill (Voluntary Assisted Dying Bill 2017) introduced last week 21/9/17- into the House of Assembly. It seemed almost impossible to predict which house (Legislative Council or House of Assembly) the bill would be introduced into. The legislation requires the establishment of a "death regulatory panel" which may have influenced the decision. We have now focussed our energies back into lobbying House of Assembly members.

The task of establishing priorities started with an overall plan, which has been modified as data about MPs views was fed back to us. Initially we contacted supporters in the 8-9 marginal seat electorates and now have extended to cover lobbying in all of the electorates. The number of hours spent in contacting our supporters, with individual phone calls has been phenomenal. Our team- Linda, Michael, Mariana, Pat and myself together with valiant members of our Committee have contacted most electorates and in some electorates even a second round of calls is being made, now that the bill has been introduced. A benefit of the telephoning has been that we can update your addresses and other contact details!

Other than contacting supporters, our main role has been working with different church groups. Michael Fewster has been in contact with churches all around the state, and we have sent letter writing material including sample letters. We have followed up to see how the letter-writing has progressed. Regular contact with other pro-life groups enabled us to share notes, and even divide up tasks to best use resources. We have been in contact with doctors who have, despite busy patient workloads have travelled throughout Victoria to visit MPs. Networking with supporters, doctors and other lobbying groups has been one of the most rewarding parts of the campaign.

A number of MLAs have declared either on internet, radio or newspaper they will vote for the bill, however we are not leaving these MPs out of our lobbying. Some of our supporters are able to write fluently to express logical arguments against the usual arguments of autonomy, dying in pain or the watering down of safeguards.

If you are willing to visit your MP in the next few weeks, we are happy to find another person to attend with you. It may be daunting to telephone your MP but they are a public figure, and should be very happy to hear your views. Just to remind supporters who use Facebook – if your MP has a Facebook account do send him/her a message!

– Mary Collier CEO

## CALLING ALL WEST AUSTRALIANS

### WA Parliament sets up inquiry into "End of Life Choices"

The Parliament of Western Australia has appointed a Joint Select Committee on End of Life Choices to conduct an inquiry "into the need for laws in Western Australia to allow citizens to make informed choices regarding their own end of life choices".

The terms of reference include to:

(b) *review the current framework of legislation, proposed legislation and other relevant reports and materials in other Australian States and Territories and overseas jurisdictions;*

(c) *consider what type of legislative change may be required,*

While neither the title of the inquiry nor the Committee's terms of reference directly mention either euthanasia or assisted suicide it is nonetheless clear that this the reason the Committee has been established is for it to recommend legalising euthanasia or assisted suicide in order to increase the "end of life choices" available to Western Australians.

The Committee is not due to report until 23 August 2018 but it has already called for **submissions which are due by:**

**23 October 2017.**

All Western Australians who are concerned about the dangers of legalising assisted suicide or euthanasia are encouraged to make a short submission to the inquiry.

You may wish to address one or more of the following points using your own words:

- assisted suicide is more often requested for autonomy, feeling a burden or other existential reasons rather than because of physical pain, which can be relieved by gold standard palliative care;
- people with depression or other mental ill health are at great risk of being assisted to commit suicide rather than having their mental ill health treated;
- people with disability are at risk of being seen by others, including family and doctors, as better off dead and discriminately encouraged to opt for assisted suicide;
- elder abuse is widespread, especially by adult children with inheritance impatience. Subtle coercion or bullying cannot easily be noticed and assisted suicide laws put elderly people at risk;
- promoting suicide as a rational, wise, understandable choice for some Western Australians undermines suicide prevention programs for all Western Australians, including young people;
- mistakes in diagnosis and prognosis mean that under an assisted suicide law some people will die unnecessarily when they could have had years to live;
- we resist calls to legalise capital punishment because the danger of one wrongful death is seen as too high a price to pay, the danger of wrongful deaths under an assisted suicide law is much higher and too risky.

Submissions should be sent to: [eolcc@parliament.wa.gov.au](mailto:eolcc@parliament.wa.gov.au) or mailed to Joint Select Committee on End of Life Choices, Parliament House, PERTH WA 6000

**Richard Egan *Defend Human Life!***

# Euthanasia threat is real and dangerous

On 20 September 2017 a bill to legalise assisted suicide and euthanasia was introduced to the New South Wales Parliament by Trevor Khan MLC. Make no mistake, the 'Voluntary Assisted Dying Bill' represents a real and dangerous threat to elderly, disabled and other vulnerable NSW residents.

The measure of a compassionate and just society lies in how we treat the most vulnerable among us. One of the many tragic elements of the euthanasia debate is how advocates of euthanasia talk as if people are trapped into a hopeless choice between suffering in unbearable agony and ending their own lives.

This is simply not an accurate representation of the truth. Where people are terminally ill and in pain, then they don't need euthanasia – they need better pain relief and genuine medical treatment. Instead of looking to give people more ways to end their lives, why aren't we focusing on providing them with more support to actually live out the rest of their lives as well as possible?

That is why the government's announcement in the July budget, of 100 million dollars in extra funding for palliative care, was so welcome. Surely this is where our attention and energy should lie – on ways in which we can genuinely look after and care for people in the last days of their lives.

Not only is the pro-euthanasia side's rhetoric untrue, it is deeply harmful and dangerous. Presenting suicide as an attractive alternative to suffering completely contradicts successful suicide prevention strategies – at a time when they are more desperately needed than ever.

Suicide is the leading cause of death in people under 35 years old. Moreover, a report from Australian youth mental health service Orygen at the end of 2016 revealed that suicide rates for young people (15 to 24-year-olds) are at their highest in 10 years.

The report also highlighted some other highly disturbing findings:

- 41,000 young people aged 12-17 have made a suicide attempt
- Suicide rates have increased for children under the age of 14
- Twice as many 15 to 19-year-old women died by suicide than in 2005
- A third of all deaths of young men are due to suicide
- One-quarter of women aged 16-17 years old have self-harmed
- High risk groups include: Aboriginal and Torres Strait Islanders; the LGBT community; and seriously mentally ill youth.

We should all have deep concerns about a bill which seeks to normalise suicide, and which risks encouraging people to take their own lives.

Now, Mr Khan's bill specifically draws an age-limit of 25 years or older – which is a bit strange, when you begin to question it. I can't think of another area where the law draws the line at 25: not voting, smoking, drinking, driving, or marrying ... a cynical person

might say that Mr Khan is aware of the terrible problem of youth suicide and is trying to avoid being pulled into that conversation. But that kind of weak, arbitrary safeguard is nowhere near enough. We already know that when culture glorifies suicide – in TV shows, or in news stories – that can too often be the trigger. And we also know that young people with mental health problems are at especially high risk. Not to mention, it will be one of the first safeguards to be stripped away in the inevitable slide towards further liberalisation of the law.

Because make no mistake, when it comes to euthanasia the 'slippery slope' so derided by assisted suicide advocates is real and undeniable.

Just look at a country like Belgium, where they have now legalised child euthanasia, for children as young as 12, and euthanasia for adults with dementia. Or how about in the Netherlands, where thousands of people have been euthanised without their consent. Both of these countries once promised 'strict safeguards' on their euthanasia laws, only to see whatever safeguards were once in place either gradually eroded or simply cease to be enforced regardless.

Earlier this year in the Netherlands, there was an appalling case where a doctor and family members held a struggling elderly woman down to administer the legal injection. That doctor was recently cleared by a medical review board because they decided he was acting in "good faith".

In the past year alone, proposed assisted suicide laws have been rejected in South Australia and Tasmania. Assisted suicide and euthanasia are currently illegal in all six Australian states and both territories (after being briefly legalised in the Northern Territory in the 1990s). The message seems pretty clear to me: legalising euthanasia will do nothing to help Australians. Instead it poses a real and dangerous threat to some of the most vulnerable people in our society.

We are expecting the 'Voluntary Assisted Dying' Bill to be debated and voted on in mid-October. There is still time to join our campaign – but no time to delay! Please write to all 42 MLCs, as well as your local MP, outlining the reasons why you are calling on them to vote against this dangerous bill.



Isaac Spencer, Campaigns Manager for Right to Life NSW

*Pregnancy Counselling Australia is soon to be enhanced with the training of two new counsellors to join the roster. Many thanks to Lois Dean, Co-ordinator of Pregnancy Counselling Australia for the commitment given to the training, including working during evening hours. Counsellors will commence taking calls on the telephone lines initially with a four hour segment, which we hope could be increased to assist Lois and Graham Neale in this life-saving work.*



## Doctors Slam voluntary euthanasia bill

Benjamin Preiss – The Age 20/9/17

Three prominent doctors are lobbying members of Parliament to reject proposed voluntary euthanasia laws, warning that Victoria would be heading down a “misguided, dangerous path” if assisted dying were made legal.

The proposed legislation will be introduced on Wednesday, paving the way for MPs to exercise a conscience vote before the end of the year on whether terminally ill Victorians should be able to end their lives.

The three past presidents of AMA Victoria who are calling on MPs to oppose assisted dying legislation. From left: Dr Mark Yates, Dr Mukesh Haikerwal, and Dr Stephen Parnis. While many MPs have already expressed a position on the proposed laws, more than 50 of their colleagues have not yet made clear how they will vote.

Now three past Victorian presidents of the Australian Medical Association – Stephen Parnis, Mukesh Haikerwal and Mark Yates – have united on the steps of Parliament to warn that the laws put the state’s most vulnerable patients at risk. They say they will be lobbying MPs right up until the bill is tabled.



Photo: Jason South

Health Minister Jill Hennessy said the medical workforce had varying views on the euthanasia issue. The position of the three senior doctors puts them at odds with former AMA president and neurosurgeon Brian Owler, who chaired the ministerial advisory panel on the issue.

“This puts the most frail and vulnerable in our community – the dying – at profound risk,” Dr Parnis said. “They are at risk of coercion. They are at risk of not getting the medical care that they deserve and need.” Geriatrician Dr Yates said the government should not be pursuing the “divisive legislation”, and should rather introduce other measures such as a medically supervised injecting room for drug users.

He rejected suggestions the proposed voluntary euthanasia laws represented a “conservative model”, as the legislation proposed in Victoria would allow doctors to administer lethal drugs for people physically unable to take them independently. This, he said, was more permissive than the laws in Oregon, which only allowed

doctors to prescribe the drugs, not to use them on patients.

Dr Haikerwal, who has voiced his support for same-sex marriage, said the proposed legislation would “fundamentally change” the way medicine is practised in Victoria.

“It will fundamentally change the doctor-patient relationship,” he said. He paid tribute to his colleagues working in palliative care for providing “amazing services with very minimal funding”.

Health Minister Jill Hennessy has consistently maintained that strict safeguards will protect patients from coercion, and only adults with decision-making capacity will be able to access the scheme. Ms Hennessy said the issue had “many views”, which was why MPs would be given a free vote before the end of the year.

“Death is an extremely intimate and personal experience, a respectful debate considers all different perspectives – and these doctors are entitled to their views and opinions,” she said. “But their opinions are not representative of the entire medical workforce – like the Victorian community, the medical workforce has varying views on this.” Premier Daniel Andrews said Victoria would be the first state to legalise assisted dying if the bill passed through the Parliament.

“This legislation will deliver the safest model in the world, with the most stringent checks and balances,” he said.



### Vale Jim McCarthy RIP

We are saddened to learn recently of the death of Jim McCarthy of Warrnambool. Jim played a major role in the setting up of our famous Walks for Little Feet which were an effective fundraiser for the work of Right to Life Aust.

The Walks entailed a week long walk of approximately 250 km from a country town in Victoria to Melbourne with almost 100 walkers participating and raising substantial funds for our work. Sadly road safety concerns signalled an end to those Walks.

As Jim’s son Peter conveyed “On behalf of the McCarthy family, I sincerely thank you for recognizing Dad’s contribution/passion/crusade on something that he held so, so dearly”. Our condolences to Jim’s widow and family. May Jim rest in peace.

## Abortion clinic protests could be banned under WA plan

Daniel Emerson (excerpt) Friday, 1 September 2017

WA is likely to ban protests near abortion clinics after WA Labor adopted "safe access zones" as part of its platform at its State conference at the weekend, dismayed pro-life campaigners and the party's Right faction.

Exclusion zones banning any protest within about 150m are in place in other States except WA, NSW and Queensland.

WA Labor for Choice, supported by the party's Left, argued at the State conference that people had the right to access reproductive and fertility health services, "without fear of harassment, fear of being intimidated or public obstruction".

Health Minister Roger Cook, who indicated his personal support for safe access zones before the conference, said through a spokeswoman that he would seek advice from the Health Department on how to implement the zones.

"Proper planning will be conducted to ensure we get any change right," the spokeswoman said.

South Metropolitan MLC Kate Doust, of the party's Right, vowed to contest the move in caucus, saying it was hypocritical of Labor to protect the protest rights of unionists and environmentalists but not pro-lifers.

## Search for "brave" donors to fund abortions for the poor!!

So read the heading in the Age (28/9/17)

This was Australia's abortion provider extraordinaire - Marie Stopes Australia reporting that it will be appealing for funds to make abortions even more accessible for poor women! Abortions are already funded by Medicare and have been for years using our taxes. A serious attempt to prevent this in the Federal Parliament in 1975 failed.

Since that time, the Federal Parliament has opened the door to the use of the abortion procuring drug RU486 and - to add insult to injury - it is now on the pharmaceutical benefit schedule so you can have an early abortion for \$12. As well, major public hospitals like the Royal Women's Hospital in Melbourne also carry out abortions for little or no cost. What is particularly galling for us to read is that recently Marie Stopes Australia has been given tax exempt status for financial gifts to their work! This has been denied Right to Life Australia.

Meanwhile, Marie Stopes says that the money they raise will be able to transport pregnant women to where abortions are available.

As abortions are available all over Australia they are clearly referring to Victoria and Tasmania where abortions can be provided right up to birth!

(Continued from Page 1)

## The Victorian Government's Voluntary Assisted Dying Bill – a Recipe for Disaster

Imagine the subtle pressures that can be placed on a family member by a close relative with their eye on the inheritance!

The role of your friendly family chemist will change drastically as a pharmacy will become the place for preparing the deadly potion. It is suggested that the right combination of lethal drugs will be established - after consultation with universities who train pharmacists. No doubt they will be packaged together and kept under lock and key in a pharmacy in a special cupboard marked "Suicide Powder". It is suggested the lethal potion could be mixed with orange juice to consume. If the patient is unable to consume the potion, the treating doctor will use other means of ending life - presumably by lethal injection or by mixing it with the food being administered by tube.

The Health Minister's claims of so-called "safeguards" are ludicrous! To quote Former Judge Elizabeth Butler-Sloss of the House of Lords comment on the defeated UK Assisted Suicide Bill (The Times 8/9/15):

*"My experience of presiding over the family division of the High Court showed me again and again how subtle and calculated the pressure, coercion and even control exerted on a vulnerable individual can be. The safeguards provide no real protection to the truly vulnerable and they will fall apart if this bill becomes law".*

Margaret Tighe, President

## PUSH FOR EUTHANASIA IN SUNNY QUEENSLAND

Recently the Fraser Coast Chronicle published an article about a great-grandmother Marjorie Lawrence, who became terminally ill four years ago and is pushing for the legalisation of voluntary euthanasia. Margorie Larence is living with terminal pancreatic cancer for the last four years, despite being told she only had months



to live. The Chronicle argued her fear is having no choice but to spend the last weeks or months of her life suffering, which is why she is pushing for the legalisation of voluntary euthanasia. In addition she doesn't want to lose her 'dignity and self-respect'. Once again the

article contains a poll asking the standard question: "Do you believe voluntary euthanasia laws should be introduced for the terminally ill?" [At last glance, the 'no' vote was 68%!]

It is clear euthanasia will be on the agenda as advocates announced they are working on a bill to be introduced to Queensland State Parliament within the next parliamentary term.



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# Three Foundational Points in the Euthanasia Debate

Excerpt from article in *The Australian* 1/10/16

PAUL KELLY - EDITOR-AT-LARGE

....."There are three foundational points in this debate.....

**First**, in relative terms the proportion of people dying in acute pain is declining because palliative care methods have been enhanced. There is wide agreement among experts that most physical pain at life's end can now be managed – this is a critical trend but cannot conceal the fact painful deaths still exist and become the main argument for legal change. But euthanasia should not be seen as a substitute for palliative care—that would be a medical and moral blunder.

**Second**, where euthanasia is legalised the record is clear—its availability generates rapid and ever expanding use and wider legal boundaries. Its rate and practice quickly exceeds the small number of cases based on the original criteria of unacceptable pain – witness Belgium, The Netherlands, Switzerland and Oregon. In Belgium, figures for sanctioned killings and assisted suicide rose from 235 in 2003 to 2012 by last year. In the Netherlands they rose from 2331 in 2008 to 5516 last year.

These figures come from Labor MLC Daniel Mulino's minority report in the recent Victorian parliament committee report recommending euthanasia. His conclusion is that "the negative consequences arising from legislation far outweighs the benefits arising in that minority of cases".

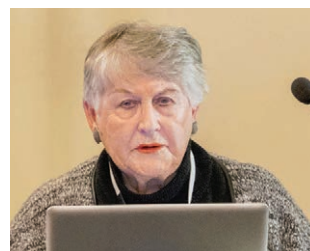
Experience in other jurisdictions leads to the unambiguous conclusion: the threshold event is the original legalising of euthanasia. After this there is only one debate – it is over when and how to expand the sanctioned killings. Claims made in Victoria that strict safeguards will be implemented and sustained are simply untenable and defy the lived overseas experience as well as political reality. There are many questions. If you sanction killing for end-of-life pain relief, how can you deny this right to people in pain who aren't dying? If you give this right to adults, how can you deny this right to children? If you give this right to people in physical pain, how can you deny this right to people with mental illness? If you give this right to people with mental illness, how can you deny this right to people who are exhausted with life?

**Third**, culture and values will change to justify the death process. Consider the situation of one of Belgium's most famous doctors, Wim Distelmans, applauded as a human rights champion. Having killed more than 100 patients, he is a celebrity, gives talks around the nation and is lauded as a man who "cannot stand injustice". He told *Der Spiegel* that giving a lethal injection is an act of "unconditional love".....

# Euthanasia debate at Monash Health

Recently Margaret Tighe participated in a debate at Monash Health (Hospital) on the Victorian Government's Voluntary Assisted Dying Bill. Her main opponent was Leslie Vick of Dying with Dignity. Also participating was Associate Professor Leeroy Williams, Palliative Medicine Specialist.

The debate was organised by the 2017 Williamson Leadership Victoria Programme. Mary Collier accompanied Margaret Tighe and made some very useful contacts at the end of the debate.



# In Shocking Vote, British Doctors Endorse Legalising Unlimited Abortions Up to Birth

LifeNews.com STEVEN ERTELT SEP 22, 2017, WASHINGTON, DC (excerpt)

In a shocking vote today, the Royal College of Gynaecologists (RCOG) voted to endorse legalising unlimited abortions up to birth.

The RCOG's General Council voted to support the removal of all criminal sanctions associated with abortion in the UK. Only 33 council members were allowed to vote on this important issue, despite the RCOG having 14,000 members, fellows and associates.

Currently abortion on demand is only legal in Britain up to 24 weeks and late-term abortions on unborn babies after that point are limited. The vote endorses opening up abortion throughout pregnancy for any reason.

Leading pro-life campaigners in Britain were upset by the vote. Clara Campbell of the pro-life group Life told LifeNews: "It is shocking that a mere handful of RCOG representatives have decided such a crucial RCOG policy, while their vast membership were not given a vote. If the measures voted through were to be implemented, and all legal sanctions associated with abortion were removed, there would be no law stopping abortion up to the 7 month of pregnancy, and potentially up to birth if the Infant Life Preservation Act was scrapped also."

**Letter from RTLA supporter to his Victorian MLA and MLCs**

26 July 2017 Re. Euthanasia Bill.

*I write to express my concern regarding the future introduction of a Bill to permit Euthanasia, and I ask that you vote against the Bill.*

*I am of the opinion that while most people may consider the support of such a proposal to be an act of mercy in a person's hour of need, unfortunately the system will be abused by medical staff and families and changes will continue to me made by politicians, as has happened around the world with the introduction of this type of legislation.*

*I was recently a patient in a Melbourne hospital, and outside my door I could clearly hear a doctor talking with a family member concerning the health and prognosis of his father. The family member, who was apparently the son, said to the Doctor, "Dad is in pain and we don't want him to suffer. You should be able to give him something to help him in his last moments. Were all prepared for the end. We know he is sick and won't recover". The son was a tall man, at least 6 foot 6 inches and the doctor rather small and I could see them and hear them and there was clear intimidation of the doctor. The doctor to his credit replied along the lines, "Your father is very ill and I will do everything I can to assist him, keep him comfortable and pain free. But I will not do anything that will deliberately terminate his life. That is not lawful in Victoria."*

*Two days later the father was gone from his room. I asked a nurse had he died and she said "He made a fantastic recovery and walked out the door". I think the father, who was in the next room to me, would have heard what I had heard and decided that if he did not get out of there, his kids would kill him. If the proposed legislation had been in place, would he be alive today?*

*This would not be a rare case and there are examples all over the world, where this terrible legislation has been introduced, of people being killed by their family with the patient not giving consent.*

*In the Netherlands where Euthanasia has been carried out for many years, a study showed that 431 people were killed, without explicit consent, in the Netherlands in 2016. That is over one person every day is being murdered and that murder is being covered up by calling it Euthanasia, where people assume that the patient agreed. They did not.*

*I have attached for your information a copy of the article from which the above claim was made and it will clearly show that the patient is having very little say in their own death and family and health professionals are playing God and determining who will live and who will die.*

*And finally it is no safeguard at all to accept that this legislation has the strongest safeguards and therefore these abuses will not happen. Things will change over time once the gate has been opened. A classic example of this is the TAB. I am old enough to remember when the TAB first started and*

*there were strict laws to prevent an explosion in gambling. No chairs or tables were permitted in the TAB, to stop you hanging around, a ticket purchased on Saturday and written out by hand, could not be collected until the Monday following. You could only collect your winnings from the same agency that you placed the ticket. There were probably a few other rules that I have forgotten, put in place to protect us from abusing the system. Look what we can do today, with betting on mobile phones, computers, gambling advertising etc. The TAB came in to beat the SP bookie and now the bookmaking companies control about 60% of turnover. The politicians of old would turn in the graves.*

*There is no safe way to introduce Euthanasia and I would urge you to vote against its introduction.*

*Yours sincerely*

### **There is still time to write to your MPs in Victoria - Letter writing hints:**

The basis of objection is that all euthanasia bills legalise patient killing.

- "Assisted dying" is really assisted suicide - helping someone to kill themselves!
- Safeguards have and will fall apart.
- The British parliament in 2015 voted down a euthanasia bill, because of concerns about the most vulnerable in the community.
- Once a bill is passed, the numbers and categories of people who are killed increases. See Holland, Belgium, Oregon.
- Killing people is not medical treatment.
- Doctors cannot adequately predict the end of life.
- Doctors and even psychiatrists admit it can be hard to diagnose depression.
- No bill can stop 'doctor shopping'
- We need better access to palliative care, especially in regional areas and respite for carers.
- Elder abuse and coercion can occur and is occurring overseas.
- Dying with dignity is a euphemism – drugs taken with the specific aim of ending life will have side effects and complications.

**Margaret Tighe  
photographed for  
editorial by  
Farrah Tomazin  
– The Age –  
"Pray and act: Church  
and state collide over  
euthanasia laws"  
17 Aug 2017**







# News from around the World

## CANADA

### Canadian doctors refuse treatment, let man die of bladder infection

SHAWVILLE, Quebec, September 13, 2017 (LifeSiteNews) – A Quebec woman filed a complaint with provincial authorities alleging doctors at the region's only hospital refused to treat her husband's bladder infection because he had cancer.

Herman Morin had a prognosis of more than a year to live and would have begun chemotherapy this month, Mary Lucille Durocher told LifeSiteNews.

But Morin, 65, died five days after he was admitted to Shawville Hospital, according to the complaint Durocher filed July 31 to the Service Quality and Complaints Commissioner (CISSS) of Outaouais.

Dr. Stanislav Drachek told Durocher they would not treat Morin's bladder infection because "they knew that Herman had cancer in the bone and it was spreading to the liver," she says in the document.

The doctor told her was "better to let him die from the infection in a week or 10 days than to allow him to live for a year or more and suffer in the final stages from the cancer," alleged Durocher.

But that was "definitely not mine or Herman's wishes and we very clearly indicated this to the doctor," she wrote.

"Herman's greatest wish was to survive another year in order to watch his daughters graduate from college and university!"

## CANADA

### Canadian Province Will Fund Free Abortions

LifeNews.com MICAH BILGER SEP 22, 2017 OTTAWA, CANADA

Another Canadian province just made it easier for women to abort their unborn babies.

Nova Scotia will begin forcing taxpayers to fund abortion drugs so women can receive them for free through their health plans, according to Canadian Press.

Beginning in November, women with a valid health card will be able to obtain the abortion drugs for free at their local pharmacy with a prescription, Global News Canada reports.

The announcement Friday by the Nova Scotia government comes not long after several other provinces also said they would offer the abortion drugs for free. New Brunswick, Alberta, Quebec and Ontario government officials approved the deadly abortion drugs to be offered for free through their taxpayer-funded health care programs.

## USA

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LifeNews.com STEVEN ERTELT SEP 22, 2017, WASHINGTON, DC (excerpt)

In a shocking vote today, the Royal College of Gynaecologists (RCOG) voted to endorse legalising unlimited abortions up to birth.

The RCOG's General Council voted to support the

removal of all criminal sanctions associated with abortion in the UK. Only 33 council members were allowed to vote on this important issue, despite the RCOG having 14,000 members, fellows and associates. Currently abortion on demand is only legal in Britain up to 24 weeks and late-term abortions on unborn babies after that point are limited. The vote endorses opening up abortion throughout pregnancy for any reason.

Leading pro-life campaigners in Britain were upset by the vote.

Clara Campbell of the pro-life group Life told LifeNews: "It is shocking that a mere handful of RCOG representatives have decided such a crucial RCOG policy, while their vast membership were not given a vote. If the measures voted through were to be implemented, and all legal sanctions associated with abortion were removed, there would be no law stopping abortion up to the 7 month of pregnancy, and potentially up to birth if the Infant Life Preservation Act was scrapped also."

## USA

### Major US doctors group opposes physician-assisted suicide

BioEdge - by Michael Cook | 23 Sep 2017

The American College of Physicians, the second-largest physician group in the United States with 152,000 members, has declared that physician-assisted suicide is unethical.

The ACP takes a forthright stand with supporting appendices covering most of the arguments for and against physician-assisted suicide (PAS). Its conclusion is: The ACP does not support the legalization of physician-assisted suicide, the practice of which raises ethical, clinical, and other concerns. The ACP and its members, including those who might lawfully participate in the practice, should ensure that all patients can rely on high-quality care through to the end of life, with prevention or relief of suffering insofar as possible, a commitment to human dignity and management of pain and other symptoms, and support for families. Physicians and patients must continue to search together for answers to the challenges posed by living with serious illness before death.

## USA

### Pro-Life Speaker Ben Shapiro Answers Pro-Abortion Student's Question With an "Epic Takedown"

LifeNews.com MICAH BILGER SEP 15, 2017

Popular conservative author and speaker Ben Shapiro continued to impress his audience Thursday at UC Berkeley when he rapidly refuted a young man's abortion arguments.

Shapiro's speech at the liberal California university drew massive media attention because of the violent protests that have broken out on campus during past conservative speakers' talks. The university and local police increased security, and several people were arrested Thursday.

Inside the sold-out auditorium, Shapiro received a

huge applause when he quickly destroyed a young man's arguments in favour of first-trimester abortions. A video of the exchange received a lot of attention Friday, and some described Shapiro's argument as an "epic takedown" of abortion.

During the question and answer period Thursday, a young man asked Shapiro why he believes abortion is wrong.

"Why do you think a first-trimester foetus has human value?" the young man asked, explaining that he believes sentience is what makes humans valuable.

"Ok, so when you're asleep, can I stab you?" Shapiro asked. The young man said no.

"Ok, if you are in a coma from which you may awake, can I stab you?" Shapiro continued.

Again, the young man said no. "But that's still potential sentience!" he added.

"Do you know what else has potential sentience? Being a foetus," Shapiro said, followed by a massive applause.

Conservatives and pro-life advocates on the internet applauded, too, on Friday with tweets and other messages of support.

## BELGIUM

### Showdown looms over euthanasia in Belgian psychiatric hospital group

30 August 2017 | by Tom Heneghan, the Tablet (excerpt)

Belgium's Brothers of Charity may have to sever ties with their 15 psychiatric hospitals if their lay-dominated board of directors defies an order by Pope Francis to revoke a decision to allow euthanasia on the premises. Rome gave the order's Belgian chapter an ultimatum last month to do so by the end of August. In a terse statement noting "possible measures by the Vatican", the chapter said it would review the decision.

The board's next meeting is scheduled for 11 September, the order's global head Brother René Stockman told the Italian Catholic daily *Avenire*. He was confident the three brothers on the board would follow "the Magisterium of the Church" but not sure the 11 lay directors would also agree.

Former European Council President Herman Van Rompuy, one of the lay directors, cast doubt on Stockman's preferred outcome with a tweet in mid-August that said: "The time of 'Roma locuta, causa finita' is long past". Stockman, who is also Belgian, condemned the chapter's decision soon after it was announced in late April.

Euthanasia has been legal in Belgium since 2002. The board decided to allow it, even for people not in the terminal stage of illness, out of respect for the autonomy of patients who no longer want to live. Stockman said the decision relativised the Church's absolute respect for life and showed Belgium was so secularised that "certain points of Church doctrine are unjustly considered almost outmoded".

"It's almost fashionable today to take leave of one's life with a glass of champagne in one's hand," he told the Belgian daily.