



End-of-Life Choice

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Issue 29

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Members can now join the movement on Facebook

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Street, Syme top list of AGM Speakers

The Hon. Maryan Street and Australian surgeon and author Dr. Rodney Syme are the featured speakers at the EOLC 2013 Annual General Meeting on Saturday, 8 June, at The Brentwood Hotel in Wellington. The new AGM format includes a seminar on end-of-life options, following the morning general business meeting. Pre-registration is recommended.

Maryan Street, Labour, has put her End-of-Life Choice Bill in the ballot box, and is a national advocate. Dr. Rodney Syme is a medical practitioner and author of the book, "A Good Death: An Argument for Voluntary Euthanasia." Maryan will speak at the AGM while Dr Syme will address the afternoon session. Both will speak on the topic of end-of-life rights. The seminar will conclude with an interactive panel discussion on assisted dying, presented by Hon. Maryan Street, Dr Rodney Syme with Dr. Jack Havill, Dr. Libby Smales, Very Rev John Murray, Yvonne Shaw of EOLC, and others still to be determined.

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Frequently Asked Questions from Around New Zealand

What do we mean by euthanasia, assisted suicide and assisted dying?

Involuntary euthanasia is the practice of ending another's life, without their consent and perhaps without their knowledge. End-of-Life Choice (EOLC) does not condone involuntary euthanasia, but advocates voluntary euthanasia which is the term used in countries such as Holland and the Belgium. In NZ we would prefer the term End-of-Life Choice.

Assisted suicide is a term we don't use in New Zealand, preferring the term 'assisted dying'. It covers the process of assistance whether or not the person is able to take the medication themselves or needs someone else to help them. Suicide is currently legal in New Zealand, but assisting in a suicide is a criminal offence.

Assisted dying, as proposed by the EOLC Bill, is for those who have a terminal diagnosis or suffering that cannot be alleviated. People in that category do not have a choice in how they live, but with the EOLC Bill, they would have a choice in how they can achieve a peaceful death, surrounded by their family, and supported by the medical community.

Isn't the End-of-Life Choice Bill a path toward a slippery slope? The Slippery Slope argument has been raised by opponents of end-of-life rights whenever and wherever the issue of assisted dying is raised. The argument states that permitting limited assisted dying will then lead to broadening of the acceptability of "killing" and then make an opportunity for broadening the parameters of the laws to make more and more people eligible for the process. The argument claims that normalising assisted dying will legitimise involuntary euthanasia, and then lead to the unwanted

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A message from the President



Ms. Carole Sweney,
President,
End-Of-Life Choice

Dear Members,

As our campaign to turn the End-of-Life Choice Bill into law progresses, there will be much misinformation circulated by those who disagree with it and wish to have everyone else live by their beliefs and values. The views of many opponents come from assumption, not knowledge of the Bill. You can view the End-of-Life Choice Bill through our website ves.org.nz and be a step ahead.

One of the main points of the Bill that we have to stress is that there must be no coercion - of the person making the request for assisted dying, the doctor who may be asked for assistance or friends and relatives who may help out. Choice is available at every stage.

Every individual's personal beliefs and values are paramount. Each must stay true to their own beliefs about how life should or could end when they're faced with a medical condition or terminal illness that makes their life unbearable. Some will wish to use the legislation, others won't. It is their choice, as the name of the Bill makes clear.

We'll hear much about apparent barriers to having a compassionate and workable law. However, other countries have made similar laws work. We've learnt from their knowledge and experience and are confident we have good law in the making.

Carole Sweney,

President EOLC

Visit our Website and Donate to the Campaign Online at: ves.org.nz

And

Join the Conversation on Facebook! <http://www.facebook.com/groups/eolcnz>

AGM Speakers, Continued from Page 1

In addition to his lecture on the topic of the doctors' role in assisted dying, Dr. Syme will conduct a workshop in Wellington and speak with groups in Auckland. Specific dates, times and any costs associated with the events are forthcoming.

The 2013 Annual General Meeting will begin at 9:00 AM, and is free to members. Afternoon sessions are open to the public and require registration, at a cost of \$20.00 to the public with a reduced rate of \$10.00 to EOLC members. Members may join us for lunch for an additional \$15.00. The afternoon panel discussion will end about 5pm.

Out-of-town members could be billeted in Wellington. Anyone interested should contact Suzy Austen on 04-566-4893

Those who wish to book lodging at The Brentwood Hotel in Kilbirnie, Wellington, free phone 04-0508-273-689, should quote the booking number 74727. There are no special rates but the number identifies you as being part of the EOLC seminar weekend.

Pre-registration information for the AGM will be sent to members, along with voting papers, in May.

Volunteers Needed! Do you have some extra time on your hands to dedicate to assisting with the EOLC campaign? We are looking for three people in the Wellington/Lower Hutt area who can assist with data entry, mailings, office work and local events. If this sounds like something you would like to do, then please contact Yvonne Shaw in the Central Office, at 04 938-0317 or via email vesnz.yvonne@gmail.com

Frequently Asked Questions Continued from Page 1

deaths of the most vulnerable among us. In jurisdictions where assisted dying is legal, such as Oregon and Washington States in the U.S. and in Belgium, the statistics do not bear out that argument. After 15 years in Oregon and nearly 12 years in Belgium, for example, the number of patients who request assisted dying remains very low. The Dutch number is less than two percent of all deaths associated with assisted dying. In Oregon and Washington State, it is less than one-half of one percent. There is not much sliding happening in this field.

Won't those who are vulnerable, have a disability, or are a burden to the family be encouraged to use assisted dying? This is a common and completely false claim. New Zealanders will not support a loosely written, open-ended law. The law's multiple safeguards specifically require and guarantee direct patient involvement. In direct contrast, euthanasia is an ambiguous concept that often implies a person's involuntary death. Oregon and Washington State have two carefully written and regulated Death with Dignity laws. There have been no efforts to expand either law beyond their strict guidelines.

What do you mean by "Safeguards?" Safeguards are points in the Bill that protect not only the patient, but also family members, friends and the medical community. For instance, a written request for medication, signed by two witnesses who will not benefit from the death, insures that patients are not being coerced. Legalising a process and protocol for medications protects the medical community from feeling like they need to participate in illegal activities to alleviate the suffering of some patients. And setting strict parameters and rules for who qualifies for using the law takes the guess-work away from medical care providers and family members. Although assisting in a suicide is now illegal, assisting with a planned death, under the EOLC Bill, would not be. Patients could achieve death with family at their bedside, rather than alone. The safeguards written into the EOLC Bill include three points of protection:

1. The law respect and upholds the integrity of the relationships between medical practitioners and their patients.
2. The law requires that either the patient self-administer the prescribed medication, or that the patient's medical practitioner inject the prescribed medication to hasten death, under strict medical protocols.
3. The law ensures the patient is the driving force, the

ultimate and conscious decision maker in the process.

In addition, the Bill requires the formation of an interdisciplinary review panel; a collective of experts in end-of-life care, who track usage of the law, to insure it is working as it should.

Why can't people just use hospice and palliative care?

Anyone with a terminal illness can-and should- access the best hospice and palliative care available to them. In Oregon, 95% of those who use the Death with Dignity Act are enrolled in hospice care, and benefit from pain and symptom management. However, about 5-10 % of hospice patients around the world do not benefit from modern pain management protocols, because the drugs don't work for them, they are allergic to the drugs, or they cannot be prescribed doses large enough to alleviate pain without leading to an unintended death. There is also the issue of intrinsic pain that can't be addressed with drugs, such as loss of dignity, loss of control and loss of ability to enjoy life. For the patients who fall into these categories, the death experience is tedious and painful.

Are medical practitioners required to assist their patients in this process if it conflicts with their beliefs?

Medical practitioners are allowed to opt-out of the process for any reason, or for no reason. The language of the Bill states that they must refer a patient to another medical practitioner, who will assist. Such requirements are currently the norm in New Zealand.

How does one qualify for using the proposed EOLC Bill to hasten death?

Qualifications include:

Must be a New Zealand Resident

Must be at least 18 years old , with a terminal diagnosis, or medical condition that makes life unbearable.

Two medical practitioners must agree on the diagnosis, and that the patient is within 12 months of death, or is enduring unbearable suffering.

A screening for depression, if deemed necessary by the primary medical practitioner

Can people simply stop eating and drinking to hasten death?

Yes, stopping eating and drinking will hasten a death, eventually. This is the option many New Zealanders use now. However, it is less than optimal, can take days or weeks, and often requires palliative sedation to relieve negative symptoms of the fasting process.

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Upcoming Events

Auckland: Annual General Meeting May 19th 2013 1pm-3pm, at the Ellerslie War Memorial Community Centre, 138 Main Highway, Auckland. Please remember to bring your Nomination Papers for the Election of Your New Committee. Contact Sara Heslop 09-630-7035.

Bay of Plenty Branch Committee meeting: Tuesday 16 April 2013, 7:00-9:00 PM, 7 First Avenue The Bay of Plenty Branch Committee meets on the third Tuesday of the month. This meeting is open to all BOP financial members. Tauranga Area Meetings will be held on the first Sunday of each month. Gold coin donation to cover costs of tea/coffee and biscuits please.

Kapiti-Horowhenua: Annual General Meeting April 27 2:00-4:00 PM at Kapiti Village, Guildford Drive, Paraparaumu. Refreshments followed by business of the meeting, then a Quiz, a DVD by Rosie Mott and members' stories about why they support the *End-of-Life Choice Bill*. A special welcome to our Whanganui and Manawatu members.

Waikato: Annual and General Meeting. 2pm Sunday 28th April 2013

Place: new venue - CCS Building, 17 Claudelands Road, Hamilton

Wellington: Annual General Meeting July 20, details in next newsletter.

South Island: Christchurch 12 April 2013, South Learning Center (Library) 2:15 and 5:15 PM. Oregon Experience, Open to the public.

Whangarei EOLC focus group April 29th @ 10am in the CAB meeting room, Old Town Hall to view the documentary 'A good Way to Die ?' followed by discussion and planning ways in which to inform communities about the Bill and other end-of-life issues.

Visit our website for the latest information and activities in your area

Now Accepting Nominations for 2013-14 National Committee Members and Remits

A call for nominations for officers and elected members for the 2013-2014 National Committee is now under way. If you know of someone who is invested in end-of-life rights, now is the time to put their name forward. Your nomination form allows for nominating one candidate. If you would like to nominate additional candidates, simply photo-copy the form, and complete one form for each person you wish to nominate.

All nominations must have a nominator and two endorsers and be signed by all these members as well as the proposed candidate (nominee). In addition, remits (Rule changes) must also be submitted so they can be included in the voting papers mailed out to members. If you have questions about submitting a nomination or a rule change, please contact National Secretary, James Armour, via the Central Office, at 04 938-0317.

Please post completed nomination forms and/or remits to: The National Secretary, PO Box 22 346, Khandallah, Wellington 6441. Forms must be received by the National Secretary on or before 7 May 2013 so do allow time for delays in the post.

**Show your support for End-Of-Life Choice by writing to your MP.
Share your story and make a difference.**