AUTUMN 2020



ALL LIFE Matters

INSIDE THIS ISSUE: PAGE 2 **FROM THE**

PAGE 3 **WE WILL NOT FORGET- VOTE** PROLIFE 2023

CEO'S DESK

PAGE 4-5 CATEGORIES OF WRONGFUL DEATHS BY ASSISTED SUICIDE AND **EUTHANASIA** - PART 2 OF 2

PAGE 6-7 LIFE ISSUES **AROUND** AUSTRALIA

Right to Life Association (NSW) Inc. Suite 11b, Level 12, 37 Bligh Street, Sydney NSW 2000

(02) 9299 8350

office@righttolifensw. org.au



FROM THE CEO's Desk

DR. RACHEL CARLING

Welcome to our first newsletter for 2020. I want to especially thank the 200+ donors who contributed to our Christmas appeal. You have helped us keep our doors open. I am so grateful for your support.

We are now entering a season of Autumn - known as a season of change. I expect that there will be many changes over the next three months within our pro-life movement as we work together to preserve life and prepare for the onslaught of anti-life legislation in our parliaments as well as the increasing apathy towards Life within our community. Parliaments across our nation have resumed and legislation, motions and strategy groups are forming and reforming - both for and against Life. A Shout-Out goes to Minister Marlene Kairouz, ALP front bencher in the Victorian state parliament, for publicly declaring her concern for the number of people committing suicide under the assisted suicide and euthanasia regime in Victoria - pointing out the irony of the government's suicide prevention strategies on one hand and their support for this regime on the other. It takes a brave MP to risk her Ministerial position to Stand for Life! In contrast we note with dismay the actions of Hon Trevor Khan. the Nationals upper house member, who remains desperate to introduce legislation in NSW which is similar to the regime in Victoria.

In the health community, healthcare professionals are continuing to promote abortion for children with disabilities and assisted suicide and euthanasia for the vulnerable - one doctor in Victoria has even described euthanasia as the 'natural progression' to his oncology practice. In direct contrast, we have **Health Professionals Say No** signing up doctors, nurses and allied health professionals who take their commitment to preserving and serving Life seriously. If this includes you, you can sign their public declaration here: http://www.healthprofessionalssayno.info

We are also faced with
Church leaders who deny the
"Sanctity of Life". While we are
a secular organisation we have
long been supported by a variety

of churches and faith groups who believe in the sacredness of life in all its forms. But I will never forget the Uniting Church Minister who so blatantly defended the extreme NSW abortion-to-birth bill in NSW last year. Nor can I dismiss the Anglican Church in a Victorian suburb who promoted a pro-abortion message to be delivered as their Sunday Sermon in January of this year where anti-abortion campaigning was allegedly discouraged openly.

The pro-life community faces opposition on all sides. We had some success in NSW in 2019 and there is no reason why this cannot be replicated and built on both here and throughout our nation

The cost is great. Some of us have lost jobs. Some of us have lost friends. Some of us are even snubbed by family members - and worse - by churches. But we fight on - in our homes, in our churches, in our communities, in our parliaments and in the public square. We will not surrender.

We must continue to come together as a state and as a nation - to Make Abortion Unthinkable and to provide a Voice to the Voiceless in our community in 2020!

Yours in Life,



Dr Rachel Carling

WE WILL NOT FORGET

#VOTE PRO-LIFE 2023

In light of the Abortion Legislation passed late last year, we are aware that our fight to **Make Abortion Unthinkable** has only just begun. We have initiated a **Vote Pro-Life 2023** campaign with the theme **We will Not Forget**. The passing of this legislation will not be forgotten. We will ensure that parliamentarians who voted against the bill are supported at the next election – while we also campaign against parliamentarians who voted for abortion to birth in NSW.

WE WILL NOT FORGET







The Legislative Council or "Upper House" is a very important chamber in NSW. As the house of review it usually spends more time debating bills and motions compared to the Legislative Assembly or "Lower House" where government is formed.

Most of the amendments presented during the Abortion Law Reform bill's debate were presented in the Upper House. More amendments were passed in the Upper House compared to the Lower House

KNOWING PARTY POSITIONS ON LIFE ISSUES IS AN IMPORTANT INDICATION OF HOW MEMBERS WILL VOTE ON ISSUES LIKE ABORTION AND EUTHANASIA.



AUSTRALIAN LABOR PARTY (ALP): 14 MEMBERS

Greg Donnelly & Courtney Houssos stood up strongly against the Abortion Bill. ALL other ALP members voted FOR abortion.

RIGHT TO LIFE NSW RECOMMENDS: PRO-LIFE **VOTERS CAN SUPPORT EXISTING PRO-LIFE** MEMBERS BUT SHOULD AVOID PREFERENCING OTHER ALP MEMBERS



ABORTION AND EUTHANASIA ARE BERAL CONSCIENCE VOTES

LIBERAL PARTY: 11 MFMBFRS

The Liberal Government allowed debate of the extreme abortion laws. They could have stopped the debate but chose not to. The party is divided between proabortion and pro-life MPs in the upper house 4 voted for the Abortion Bill with against 6 voting against. (The President did not vote).

RIGHT TO LIFE NSW RECOMMENDS: PRO-LIFE **VOTERS CAN SUPPORT EXISTING PRO-LIFE** MEMBERS BUT SHOULD AVOID PREFERENCING OTHER LIBERAL MEMBERS



ABORTION AND EUTHANASIA ARE CONSCIENCE VOTES

SHOOTERS. FISHERS AND FARMERS **PARTY: 2 MEMBERS**

Both upper house members voted against the abortion bill in 2019, with their leader Robert Borsak presenting the petition against the legislation on behalf of the pro-life movement. Unfortunately they were unable to influence their lower house colleagues to do the same.

RIGHT TO LIFE NSW RECOMMENDS: PRO-LIFE **VOTER CAN SUPPORT ROBERT BORSAK AND MARK** BANASIAK IN FUTURE.



CHRISTIAN DEMOCRATIC PARTY (CDP): 1 MEMBER

Rev Fred Nile has been against abortion and euthanasia since the beginning of his term

Every member of CDP must believe in the sanctity of life before they can be preselected for a seat.

RIGHT TO LIFE NSW RECOMMENDS: PRO-LIFE VOTERS CAN COMFORTABLY VOTE FOR CDP IN ANY ELECTION.



ABORTION AND FUTHANASIA ARF CONSCIENCE VOTES

NATIONAL PARTY: 6 MEMBERS

Every member of the National party in the upper house voted FOR Abortion in 2019. Since then Niall Blair has resigned and been replaced by Sam Farraway. Farraway is untested on Life issues. Trevor Khan was behind the push for euthanasia in NSW in 2017 and has formed a working group to revisit this issue in this term of parliament

RIGHT TO LIFE NSW RECOMMENDS: AVOID VOTING FOR ANY NATIONAL PARTY MEMBER IN THE STATE AT THIS STAGE.



ANTI-(HUMAN)LIFE PRO-ABORTION PRO-EUTHANASIA

INDEPENDENT: 1 MEMBER

Justin Field - former member of the Greens, now sits as an independent. He continues to hold Greens' policy positions on Abortion and Euthanasia.

RIGHT TO LIFE NSW RECOMMENDS: PRO-LIFE VOTERS CANNOT VOTE FOR THIS INDEPENDENT IN COMING ELECTIONS.



ANTI-(HUMAN) LIFE PRO-ABORTION PRO-EUTHANASIA

ANIMAL JUSTICE PARTY (AJP): 2 MEMBERS

The AJP's policy on abortion advocates for "safe, affordable and accessible" abortion services to be provided by the government. Their policy on voluntary euthanasia supports its legalisation "with appropriate safeguards."

RIGHT TO LIFE NSW RECOMMENDS: PRO-LIFE **VOTERS CANNOT VOTE FOR THE AJP IN ANY** ELECTION.



ABORTION AND EUTHANASIA ARE ATION CONSCIENCE VOTES

PAULINE HANSON'S ONE NATION: 2 MEMBERS

PHON's leader in NSW. Mark Latham. strongly opposed abortion law reform in 2019, contributing significantly to the debate. Federal leader Pauline Hanson supports euthanasia legislation, voting for it in the Senate in 2018 and openly commending its introduction in Victoria.

RIGHT TO LIFE NSW RECOMMENDS: PRO-LIFE VOTERS MUST BE CAUTIOUS OF BLINDLY VOTING FOR PHON. THEIR PROLIFE RECORD IS NOT CONSISTENT.



ANTI-HUMAN LIFE PRO-ABORTION PRO-EUTHANASIA

THE GREENS: 3 MEMBERS

Before the last state election, The Greens actively campaigned for the decriminalisation of abortion and the provision of publicly-funded and accessible abortions. They campaigned against legislation recognising the personhood of "a fetus" claiming this undermines reproductive rights and access to health services.

The Greens NSW policy describes voluntary euthanasia as a "fundamental human right".

RIGHT TO LIFE NSW RECOMMENDS: PRO-LIFE VOTERS CANNOT VOTE FOR THE GREENS IN ANY ELECTION.

CATEGORIES OF WRONGFUL DEATHS BY ASSISTED SUICIDE AND EUTHANASIA PART 2 OF 2



BY: RICHARD EGAN

Our last edition of ALM 2019 outlined **categories of wrongful deaths** in jurisdictions from around the world where assisted suicide and euthanasia have been implemented:

- A wrongful diagnosis
- A wrong prognosis
- No access to palliative care
- Killed without request (or while resisting)
- Unaware of available treatment
- Denied funding for medical treatment

This edition provides a summary of the remaining categories identified by Richard Egan.

BULLYING OR COERCION

Assisted suicide and euthanasia laws usually require that a request be voluntary and free of coercion. To be truly voluntary a request would need to be not just free of overt coercion but also free from undue influence, subtle pressures and familial or societal expectations.

A regime in which assisted suicide is made legal and in which the decision to ask for assisted suicide is positively affirmed as a wise choice in itself creates a framework in which a person with low self-esteem or who is more susceptible to the influence of others may well express a request for assisted suicide that the person would otherwise never have considered.

Elder abuse, including from adult children with "inheritance impatience" is a growing problem in Australia. This makes legalising assisting suicide unsafe for the elderly.

Evidence from jurisdictions that have legalised assisted suicide or euthanasia show that coercion, including the feeling of being a burden on others, is a real problem.

Some supporters of assisted suicide don't care if some people are bullied into killing themselves under an assisted suicide law.

Simply requiring a physician to tick a box stating the person requesting assisted suicide is doing so voluntarily is no guarantee that the physician has the competence or has undertaken the extensive and careful inquiries necessary to establish that the person is not subject to undue influence or subtle pressure (albeit unwittingly) from family, friends or society to request assisted suicide so as not to burden others. No jurisdiction that has legalised assisted suicide has even made any serious effort to establish a genuinely safe framework in this regard. Indeed no such framework is possible. Any law permitting assisted suicide or euthanasia will inevitably result in wrongful deaths from coercion.

LACKING CAPACITY

A recent landmark study¹ shows that the majority of persons diagnosed with a terminal illness and with less than 6 months to live lack full decision making capacity. Regimes that permit assisted suicide with no requirement for a doctor to be present when the lethal substance is ingested only require assessment of decision making capacity at the time of the request – not at the time it is ingested.

Given that, even if doctors assessing decision making capacity improved their skills beyond the present very poor level, there will still be persons who are mistakenly assessed as having decision making capacity who actually are impaired in their ability to understand, appreciate or make a reasoned decision about assisted suicide or euthanasia, there will inevitable be wrongful deaths from lack of capacity. Additionally, in those jurisdictions which allow persons requesting a lethal substance for assisted suicide to be prescribed and supplied with the lethal substance for later ingestion there is a very real possibility that some of these people will have impaired decision making capacity by the time (perhaps weeks, months or even years later) when they actually ingest it. These too will die a wrongful death.

MENTALLY ILL AT RISK

People with a mental illness are at risk of wrongful death under any law authorising assisted suicide or euthanasia. In the Netherlands and Belgium mental illness is seen as a condition for which euthanasia or assisted suicide is increasingly considered to be an appropriate response. In Oregon and Washington State where the laws provide for optional referral for psychiatric assessment the evidence shows that the gatekeeping medical practitioners very seldom refer and that this results in persons with treatable clinical depression being wrongfully assisted to commit suicide. In the Northern Territory, where euthanasia was legal from July 1996-March 1997, and compulsory screening by a psychiatrist was required, there was a failure to adequately identify depression, demoralisation or other psychiatric issues which may have been treatable in all four cases of persons killed under that regime by former doctor Philip Nitschke.

There is no model from any jurisdiction that has legalised assisted suicide and/or euthanasia for adequately ensuring that no person who is assisted to commit suicide or killed directly by euthanasia is suffering from treatable clinical depression or other forms of mental illness that may affect the capacity to form a competent, settled, determination to die by assisted suicide or euthanasia.

Compulsory referral to a psychiatrist, who may have never seen the person before, for a single brief assessment of whether the person's decision making capacity about assisted suicide or euthanasia is affected by depression or other psychiatric factors is clearly an inadequate safeguard and will not make assisted suicide "safe". This leaves the mentally ill at risk of wrongful death.



SOCIAL CONTAGION OF SUICIDE

Legalising assisted suicide for some Australians undermines the commitment to suicide prevention for all Australians.

Legalising assisted suicide has been shown to lead to an increase in the overall rate of suicides of 6.3% and of the elderly (65 years and older) by 14.5%. This outcome is predictable because of the well-known Werther effect of suicide contagion whenever suicide is presented in a positive light as a romantic or rational act.

In addition, the families of those who commit suicide under an assisted suicide law suffer high rates of posttraumatic stress disorder.

Proposals to promote assisted suicide for some people runs an unacceptable risk of undermining efforts to prevent suicide for all other members of the community and of increasing the trauma suffered by families, friends and communities due to the suicide of loved ones.

BETTER OFF DEAD

Legalising assisted suicide poses a direct threat to the lives of some people with disabilities who may be assessed as eligible to request it. Doctors are more likely to agree that they are "better off dead" and to miss signs of depression or

coercion. Legalising assisted suicide for being a burden, incontinence and loss of ability to enjoy activities trivialises issues faced daily by persons living with disability and demeans their courage in facing the challenges of life.

RIGHT TO LIFE NSW thanks, Richard Egan, a researcher who has studied euthanasia and assisted suicide since 1987, for allowing us to summarise his comprehensive work on wrongful deaths. His full research paper can be accessed here: www.australiancarealliance.org.au/wrongful_categories

Voice your opposition to the introduction of Euthanasia Legislation in NSW: Sign the petition included in this newsletter.

LIFE ISSUES around Australia

FEDERAL

I have been advocating in Canberra against federal funding being used for abortions. I have also raised the issue of foreign aid funding being used to fund Planned Parenthood and related entities to set up abortion clinics across the world. I have been engaged in discussions on a federal level regarding how the states and territories can work with a National Pro-life voice on issues such as assisted suicide, euthanasia, abortion and surrogacy. An update on this work will be available in our next edition of All Life Matters.



NEW SOUTH WALES



NSW. We are making a concerted effort to ensure that such legislation is never introduced. Signing our petition (enclosed) is one way of ensuring that the working group led by Hon Trevor Khan is discouraged from proceeding. A petition with just 500 signatures obligates the Minister responsible (usually the Attorney General when laws redefining murder are introduced) to submit a written response to parliament within 35 days of the petition being tabled. Having a negative response to the introduction of this legislation from the government would go a long way in shutting down the debate before it even begins. Submitting a petition with 10,000 signatures triggers a 30 minute debate from the floor of parliament where pro-life members of parliament can highlight resistance within the community.

Late last year the Voluntary Euthanasia Party in NSW rebranded as the Reason Party NSW. The Reason Party (formerly the Sex Party) is led by Fiona Patten in Victoria. Ms Patten was instrumental in pushing for euthanasia legislation in her state. The Reason Party NSW has vowed to campaign for euthanasia in the next state election should legislation not pass this term.

Regulations to 'complement' the abortion legislation have been published by the NSW Health Department, and data collection on abortion is well underway. We are yet to see the full effects of this legislation- especially on our pro-life pregnancy support services.

VICTORIA

The Voluntary Assisted Dying Review Board released its report into the first six months of operation on 19 February 2020.

This is what we learnt

- 43 confirmed dead by means of self-administered medication (assisted suicide)
- 9 confirmed dead by means of doctor-administered lethal injection (euthanasia)
- 52 deaths in total 75% more than first anticipated

Health Minister Jenny Mikakos, ¹ on behalf of the Victorian State Government, has expressed concerns about the difficulty of accessing the regime in regional areas. She is now advocating at a federal level to change their legislation to ensure that euthanasia can be available via telehealth.

And just a reminder: Victoria brought in Abortion-to-birth in 2008. In 2017 (the latest stats we have available): 323 babies were aborted post-20 weeks: 140 for psychosocial reasons (meaning the baby was perfectly healthy) and 183 for congenital abnormality (which means anything from a baby with a terminal condition to one with Down Syndrome) – 28 of whom were born alive. ²



¹ www.theaustralian.com.au/nation/victorian-euthanasia-figures-released-for-first-time/news-story/7b2ae73ae595f7b3b719e8af77b83255

2 These stats can be found in a summary from Real Choices Australia:
realchoices organizes-content/uploads/2019/08/I ate-Term-Abortion-by-Year-CA-vs-PS or

SOUTH AUSTRALIA

I had the privilege of MC'ing the recent Walk for Life in Adelaide which saw over 3,000 people rally against extending abortion legislation to birth. For comprehensive details on this legislation, see: https://saabortionactionforwomen.com/

In late February, the SA state parliament was once again debating 'safe access zone' legislation.

The introduction of assisted suicide and euthanasia in SA is rumoured to be part of the new government's agenda however abortion is a higher priority for them.

We stand with our pro-life friends in SA as they face the battle for life on all sides this year.

NORTHERN TERRITORY

NT decriminalised abortion with gestational limits and introduced 'safe access zones' in 2017. The NT Government funds abortion clinics to provide free services to residents. A review of legislation within 2 years of it coming into effect was promised- we must ensure that this territory is not pressured into extending the legislation to birth.

ACT

In 2019 the ACT government renewed calls for the restoration of the territories' rights to legislate on euthanasia. October 2020 is election time in the ACT – it is important to support pro-life MPs and candidates in this election. Closer to the election we will survey members and candidates to assist ACT pro-life residents to deliberately Vote for Life.

QUEENSLAND

The Parliamentary Committee looking into end of life issues reports in late March. This is just six months before the state election, leaving no time to form an 'expert panel' to consult on a government bill. A private member's bill is still possible but the closer we get to an election, the less likely this will be. The state election in October provides pro-lifers in Queensland with a unique opportunity to remember how their MPs voted on Life Issues and vote accordingly.

WESTERN AUSTRALIA

The WA bill on assisted suicide and euthanasia which passed late last year is 'worse' than the Victorian regime. It allows for doctors and nurse practitioners to initiate conversations on access to assisted suicide and euthanasia for example. This law will come into effect next year. Currently the WA government is busy setting up the processes and employing the staff needed to administer the assisted suicide and euthanasia regimes. The WA government is now drafting a 'safe access zone' bill to block pro-life activity near abortion clinics. We anticipate that this will be debated later this year.



3,000 people rally against extending abortion legislation to birth in Adelaide.

TASMANIA

Euthanasia bills have been defeated three times in Tasmania's state parliament. This year another attempt will be made. Independent member Mike Gaffney is currently holding forums to promote his private member's bill on assisted suicide and euthanasia. Mr Gaffney has stated his intention to introduce his bill into the upper house in August.

CONCLUSION

As I was preparing the review of Life Issues around Australia for this newsletter a quote from Winston Churchill, speaking to the House of Commons during World War II came to mind:

"We shall go on to the end, we shall fight in France, we shall fight on the seas and oceans, we shall fight with growing confidence and growing strength in the air, we shall defend our island, whatever the cost may be, we shall fight on the beaches, we shall fight on the landing grounds, we shall fight on the fields and in the streets, we shall fight in the hills; we shall never surrender". - House of Commons, 4 June 1940

Does anyone else feel they can relate to this? We, in the pro-life community, are engaged in a battle where we need the same kind of commitment Churchill expressed:

We need to fight, defend and never surrender!

The cost is sometimes great- it is economically costly, physically exhausting, spiritually challenging, emotionally taxing - but together we can make a difference for Life in Australia.

Thanks for standing with us,

Dr Rachel

WE HAVE MOVED!

SUITE 11 B, LEVEL 12, 37 BLIGH STREET, SYDNEY



After 40+ years in the same location we have moved...
As From Monday 9th March 2020 we can be found at:
Suite 11b, Level 12, 37 Bligh Street,
Sydney

If you want to visit our new locationwe are taking bookings for tours on Fridays: office@righttolifensw.org.au

WHAT YOUR DONATIONS CAN DO



FIGHT until Abortion and Euthanasia are Unthinkable







PLEASE FIND A DONATION ENVELOPE ENCLOSED SUPPORT RIGHT TO LIFE NSW

PREGNANT? NEED HELP?

Ph: 1300 792 298 24hr suport/ 7 days a week

- Supporting Positive Choices
- Face-to-Face Appointments
- Post-Abortion Support
- Material Assistance
- Financial Assistance
- Advocacy with Government agencies

REMEMBER US IN YOUR WILL

Leave a legacy for future generations by remembering Right to Life

NSW in your will.

We cannot provide you with specific legal advice, so please ensure you obtain your own independent legal advice on the most appropriate wording. Here is an example of wording you and your legal advisor may consider when you are preparing or updating your will:

I GIVE, FREE OF ALL DUTIES OR TAXES, THE SUM OF (OR % OF MY ESTATE OR THE REST AND RESIDUE OF MY ESTATE) TO RIGHT TO LIFE NSW (ABN: 144 665 3876) FOR ITS GENERAL PURPOSES