



Euthanasia Symposium #5

EPC is planning the Euthanasia Symposium #5 in Vancouver on **September 25, 2004**. The Symposium will be held at the Plaza 500 Hotel.

The Euthanasia Symposium will cost **\$25 per person** including lunch. The cost for the Symposium has been reduced to \$25 per person thanks to a donation. We continue to ask our supporters to sponsor a student or a person with a disability.

Euthanasia Symposium Speakers:

Wesley Smith is the legal counsel for the International Task Force on Euthanasia and Assisted Suicide, an award winning author of several books including: *Forced Exit* and *the Culture of Death*, and a senior fellow with the Discovery Institute.

Ian Dowbiggin is history department chair at UPEI and the author of the book *A Merciful End: The Euthanasia Movement in Modern America*.

Halldor Bjarnason is a Vancouver lawyer and the former executive director of the Cerebral Palsy Association of BC.

Hugh Scher is a constitutional lawyer from Toronto, the former chair of the Council of Canadians with Disabilities Human Rights Committee and the legal counsel for the Euthanasia Prevention Coalition.

Please read the Euthanasia Symposium flyer for more information.

Another "Mercy Killing" defense in Canada

New call to change law regarding 'Compassionate Homicide'.

By Alex Schadenberg
Executive Director
Euthanasia Prevention Coalition

On July 31, 2004, police in London Ontario responded to a 911 call from the Holiday Inn on Exeter Road.

David Carmichael was subsequently charged with first-degree murder in the death of his 11 year-old son Ian. Ian was believed to have regular seizures and was diagnosed with an aneurysm in his brain.

Ian was known for his skill at bicycle acrobatics while his father David was a former director at ParticipAction.

An article written in the national post by bio-ethicist Peter A. Singer of Toronto compared Carmichael's murder of his son Ian to Robert Latimer killing his daughter Tracy.

Singer believes that Compassionate Homicide is different than other homicide cases and should receive a lesser sentence. He referred to the 1995 Senate report on Euthanasia and Assisted Suicide which also advocated for 'Compassionate Homicide' as a separate category for murder in the criminal code.

Continued on Page 3

Evelyn Martens case about changing Assisted Suicide laws

Court case funded by American Euthanasia Activists

By Alex Schadenberg
Executive Director,
Euthanasia Prevention Coalition

Section 241 of the criminal code is being challenged by Evelyn Martens, the former membership director and founding member of the Right to Die Society of Canada.

Martens has been charged with aiding and counseling the suicide deaths of Monique Charest who died January 7, 2002 in Duncan BC and Leyanne Burchell who died June 26, 2002 in Vancouver BC. The trial for Martens begins on September 20, 2004 in Duncan. Martens intends to defend herself by asking the jury to ignore section 241 of the criminal code and acquit her on the charges.

Section 241 of the Criminal Code under the title Counseling and Aiding Suicide, states: Every one who (a) counsels a person to commit suicide, or (b) aids or abets a person to commit suicide, whether suicide ensues or not, is guilty of an offence and liable to imprisonment for a term not exceeding fourteen years.

Martens is also responsible for

Continued on Page 2

producing and distributing the "Exit Bag - Suicide Bag" for world-wide use.

The Exit Bag caused the death of people in Canada and world-wide including Rosemary O'Toole of Dublin Ireland. Irish authorities are interested in extraditing Martens in relation to the death of O'Toole.

The Exit Bag is not only a suicide device but also works as a homicide device. On August 31, 2001; Herbert Lerner of Cote-St.-Luc Quebec (near Montreal) was sentenced to five years in prison for suffocating his wife Jenny with a plastic bag (Exit Bag).

Jenny Lerner had been diagnosed a few months earlier with Alzheimer's disease. Her husband maintained that the asphyxiation was a mercy killing. But Quebec Court Judge Pierre Laberge rejected the mercy killing defense, noting that the woman was only at the earliest stages of Alzheimer's disease.

The Exit Bag was shipped to people world-wide for \$32US and included a suicide guidebook for \$10US plus postage. People ordered the Exit Bag through the internet and it was sent to them without any concern for the mental or emotional condition of the person ordering. In fact anti-euthanasia author and lawyer **Wesley Smith** ordered the Exit Bag from the Right to Die Society of Canada with their only concern being the full payment.

Martens has indicated that it is her intention to challenge the law and even to bring her case to the Supreme Court of Canada, if necessary. The cost for such a trial is very expensive and a fund-raising campaign was established to raise money for her defense. End of

Life Choices, formerly the Hemlock Society, the largest American group dedicated to legalizing euthanasia are committed to raise money for the Evelyn Martens defense fund. End of Life Choices has 30,000 members in the United States and have built a multi-million dollar yearly budget.

The Martens defense fund is currently working to raise \$200,000 to cover her current legal defense. They are hoping to raise significantly more money to continue her cause to the Supreme Court of Canada.

Martens defense is based on striking down section 241 of the criminal code. Section 241 protects people who experience depression and others from being counseled, aided or encouraged to commit suicide. If section 241 is struck down then the law would be unable to stop people from promoting, encouraging or assisting others to commit suicide. The law would also be unable to stop internet suicide sites from existing in Canada.

The Euthanasia Prevention Coalition is concerned that American euthanasia activists are raising money to overturn Canadian laws in order to make Canada a safe-haven for euthanasia and assisted suicide. Canada would become similar to the reports from Switzerland which indicate that two-thirds of assisted suicide deaths carried out at the Dignatus clinic are international suicide tourists and not Swiss citizens.

If section 241 were struck down by the courts, as Martens is attempting to do, then Canada would be unable to stop suicide clinics from being established, and Canada may become a destination for suicide tourists.

Martens trial will begin on September 20, 2004 and is expected to last 6 - 8 weeks. The Euthanasia Prevention Coalition is developing a strategy that would include a consistent message. By maintaining a consistent strategy that we can ensure a more balanced media representation of the case.

We believe that we are facing the strongest challenge yet to our Canadian laws forbidding euthanasia and assisted suicide.

The Evelyn Martens case contains serious concerns in relation to defending our current law. Martens is currently 74 years old and doesn't appear to be a threat to public safety, both of the women whom she assisted their suicides were believed to be mentally competent, (some of the information indicates signs of depression existed in one or both of the women). The reality is that she is the prime candidate for being made into a media darling.

The Euthanasia Prevention Coalition have organized a Euthanasia Symposium on September 25, 2004 at the Plaza 500 Hotel and Convention Center in Vancouver BC. The cost to attend the Symposium is \$25.00 per person. We are asking supporters to donate \$25.00 if they cannot attend the Symposium allowing students and people with disabilities to attend at no cost. The purpose of the Euthanasia Symposium is to educate, inform, and prepare people and to implement an effective strategy for influence public opinion in relation to the Evelyn Martens case.

The Euthanasia Prevention Coalition is also in need of financial support to enable us to implement an effective strategy. We have been successful in the past by causing the investigation

into the Exit Bag and by having a successful petition campaign opposing the use of the Royal Prerogative of Mercy for Robert Latimer.

To register for the Euthanasia Symposium or support the Euthanasia Prevention Coalition - Evelyn Martens strategy send a cheque to the Euthanasia Prevention Coalition, Box 25033, London Ontario N6C 6A8 or call toll free: 1-877-439-3348.

**Continued from Page 1
- "Compassionate Homicide"**

The Euthanasia Prevention Coalition opposes the creation of a lesser sentence for 'Compassionate Homicide'.

In our presentation to the Senate Committee: Of Life and Death in 2000, we stated that we believe that any change in the law to allow for a "Compassionate Homicide" exemption from the mandatory minimum sentence for murder would lead to less protection and more killing of vulnerable people in Canada. A "Compassionate Homicide" provision would lead to abuses of the present system of justice. Skilled defense lawyers, when possible, will attempt a plea of "compassionate homicide" with the hope of lessening the sentence for their clients.

We also stated that changing the laws to include a provision for "Compassionate Homicide" would create a two-tier justice system. Those who kill vulnerable persons, especially persons with disabilities, would be treated more leniently than those who kill otherwise healthy people.

Finally the Euthanasia Prevention Coalition stated that a "Compassionate

Homicide" provision in the criminal code would result in a challenge in the law to the Supreme Court of Canada based on Section 15 of the Charter of Rights and Freedoms (the equality provision).

In April 2001 (Newsletter #13) the Euthanasia Prevention Coalition reacted to the death of Chelsea Craig by her mother. We called on the justice system to treat Chelsea's death in the same manner as any other child killing. We stated that: people with Disabilities are recognized as equal citizens by the Charter of Rights and Freedoms. The justice system must not decide the fate of Chelsea's mother based on the health of Chelsea but rather on the facts of the case.

In January 2002 (Newsletter #20) the Euthanasia Prevention Coalition published information from research by Professor Dick Sobsey of the University of Alberta which indicated that during the Latimer trial, when pro-latimer media coverage was the greatest, there was a 19.3% increase in deaths of disabled children in Canada whereby the killer was a parent of the child.

The Euthanasia Prevention Coalition believes that people with a disability need more protection under the law not less protection. The law needs to recognize the vulnerable nature of persons with disabilities and prosecute offenders of vulnerable persons to the fullest extent of the law to deter others from abusing people with disabilities.

In the case of a parent who kills a child with a disability, the parent has both killed their child and broke the

trust relationship. A child with a disability trusts that their parent will provide for their basic needs and protect them.

The Euthanasia Prevention Coalition cannot pass any judgement on the Carmichael case until further information is published. Yet, our position on "Compassionate Homicide" is clear. We will defend the right of people with disabilities to receive equal protection before the law.

**Crackdown on suicide
chat rooms in Australia**

Australian IT - August 4, 2004

New measure to make it a criminal offence to use the internet to counsel or incite suicide have been introduced in federal parliament.

The legislation includes a maximum penalty of \$110,000 for an individual.

Parliamentary secretary for finance and administration Peter Slipper said the proposed new offences would cover use of a carriage service, including the internet, to access, transmit or make available material that counsels or incites suicide.

It would also cover material which promoted and provided instruction on a particular method of suicide. Possession, production or supply of that material would also be covered.

"Currently, there are a range of easily accessible internet sites and internet chat rooms that provide explicit instructions on methods of committing suicide and, in the case of internet chat

Continued on back page

**Continued from back page
- Crackdown on Suicide**

rooms, sometimes contain actual discussions where one person or even a group of persons urge another to commit suicide," Mr. Slipper said.

"Studies have shown that in some cases such internet chat room discussions have led to a person attempting suicide, sometimes successfully."

"The proposed offences reflect the harm that can be done by those who use the internet in this way to encourage vulnerable individuals to take their own lives.

Mr. Slipper said merely advocating or debating law reform on voluntary euthanasia or other suicide-related issues would not be affected by the proposed changes.

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**Fears over 'unregulated
euthanasia' in Netherlands**

Expatica.com - August 3, 2004

Raising concern about possible unregulated euthanasia cases, researchers have claimed that Dutch doctors administer "terminal sedation" in 4 - 10% of patient deaths.

Researchers from the Erasmus Medical Centre and the Free University medical Centre in Amsterdam said some of these deaths verge on euthanasia and should possibly come into consideration for assessment as such.

Euthanasia has been legal in the Netherlands since April 2002, allowing assisted suicides if the patient officially requests to die, is suffering from extreme pain or a terminal illness and a second medical opinion has been sought. The Netherlands was the first nation to legalize euthanasia.

In administering terminal sedation, patients who are dying are given sedation that keeps them in a coma until death. They also go without fluid and foods, newspaper De Volkskrant reported on Tuesday.

In contrast to euthanasia, terminal sedation is not aimed at ending a patient's life but the administering of drugs is often part of palliative care to combat pain, fear and distress.

But terminal sedation can result in the death of patients and its application has increased in recent years. It is sometimes an alternative to euthanasia, the newspaper reported.

According to Rotterdam researchers, 43.8% of patient deaths in the Netherlands are the result of a "medical decision". This includes the active ending of a patient's life or deciding to no longer treat a patient. 10% of these decisions can be traced back to terminal sedation.

The researchers - who published their work in the academic periodical Annals of Internal Medicine on Tuesday - based their findings on the third large study into medical decisions around the ending of life. The study was published last year and asked 410 Dutch doctors whether they used terminal sedation and why.

The answers indicated that 52% had applied on occasion terminal sedation and in a large majority of these cases, the sedation was administered partly to hasten a patient's death.

Terminal sedation does not need to be reported to authorities, but euthanasia does. A special commission then assesses the euthanasia case to determine if regulations were breached.

The Dutch public prosecution chief Joan de Wijkerslooth concluded in June that a grey area had developed between euthanasia and terminal sedation and urged for the implementation of better regulations.

• Alex Schadenberg's comment:

On March 18, 2004; Professor Joannes Lelkens, from Maastricht Netherlands, stated in his speech to the International Congress in Rome on Life Sustaining Treatments and Vegetative State that 3.9% or 5460 deaths in the Netherlands were due to the removal of fluids and food from a person who has been sedated in order to cause their death.