



FINALEXIT™ NETWORK NEWSLETTER

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SUPPORTING THE HUMAN RIGHT TO A DEATH WITH DIGNITY

Georgia High Court Exonerates Final Exit Network's Volunteers

Feb. 6, 2012 — The Supreme Court of Georgia struck down the state's assisted-suicide law, abruptly terminating the Georgia Bureau of Investigation's prosecution of four Final Exit Network activists. The state high court agreed with FEN's argument that the Georgia law violated the free speech guarantees of the First Amendment to the United States Constitution and Georgia's corresponding Constitution.

"We are overjoyed for our friends and colleagues who were so unjustly treated like criminals for three years," said FEN's president, Wendell Stephenson. "These are good and compassionate people who did not break any laws."

FEN's former president Ted Goodwin, 66, its former medical director Lawrence D. Egbert, 84, case coordinator Nicholas A. Sheridan, 62, and an exit guide, Claire H. Blehr, 79, had each been free on \$60,000 bail since their arrest on February 25, 2009. The case never came to trial.

FEN and its volunteers argued that the Georgia law prohibited speech about assisted suicide while doing little to discourage actual assistance in a suicide. The Supreme Court agreed: "Although the State attempts to portray [the statute] as simply a ban on assisted suicide, the clear language of the statute demonstrates otherwise. . . . The State has failed to provide any explanation or evidence as to why a public advertisement or offer to assist in an otherwise legal activity is sufficiently problematic to justify an intrusion on protected speech rights."

Even before the law was stricken down, it was perfectly legal in Georgia for a doctor to write a prescription for lethal drugs to enable a patient to die at the time of his own choosing, so long as the doctor did not "publicly advertise, offer, or hold out" that he would do so. After Monday's decision, physician-assisted suicide is legal in Georgia even if a doctor publicly advertises that he is available to perform this service.

"Aiding" or "assisting" in a suicide is illegal in most states. FEN advertises that it offers only information, education, and emotional support to those who are suffering intolerably. After Monday's decision the state will never get to prove its accusation, hotly disputed by FEN, that FEN's volunteers actually "assisted" in the 2009 suicide of cancer-stricken John Celmer, whose death prompted the criminal charges.

The charge against FEN had been racketeering; against the four volunteers it was offering to assist with commission of suicide, racketeering, and tampering with evidence. All the charges against all defendants will promptly be dismissed as of Monday's ruling.

On April 19, 2011, the trial court judge entered an order denying a motion for all charges against all the defendants to be dismissed. It was this specific order that was on appeal to the Supreme Court of Georgia, which has now ruled that the trial court judge should have granted that motion.

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In their Supreme Court briefs, both sides agreed that the constitutionality of the Georgia statute was “the whole enchilada” — and that if the statute were to be stricken down as unconstitutional

all charges against all defendants would have to be dismissed.

Robert Rivas, FEN General Counsel ■

NO EXIT WOUND: on the Death of Dr. Jack Kevorkian

In the movie, *What Dreams May Come*, Robin Williams' wife commits suicide, and Williams learns that she will be forever imprisoned in a mindset drowning in horror and negativity. I left the theater uneasy, against my better judgment musing that my mother might be in hell. My mother would have appreciated a visit from Dr. Kevorkian. Failing that, she would have appreciated a doctor's prescription for pills sufficient to send her gently into that good night. Failing even that- and in her terminal days with lung cancer she was failing even that - she had a pistol. That is how I lost my mother.

Mother had been my father's wife for 55 years. He was the one who found her. Later, the undertaker explained that someone would have to identify her body...that assurances were needed that we were about to cremate the right person. I wouldn't let my father go through that, so I said I'd go. My wife, working the same logic, said she wouldn't let me do it either. In the end, she went first; then we all approached the coffin. Mom had shot herself in the head.

As hard as this is to write, I am impelled by the vision of others who, in the absence of laws to assist the dying, will be forced down the same steps as we have been. For the truth is that at least some people in terminal pain- maybe slowly asphyxiating- are going to do something to end it. They may not be the weak ones at all. I will never know my mother's thoughts, facing her pistol in the middle of the night, but she must have had an iron resolve. I am angry that the courtesies we would show a poodle

in similar distress were denied to her. She deserved better.

A few months after my mother's death, I saw Kevorkian on *60 MINUTES*. There was a moment, when his client agreed to sign a document authorizing his euthanasia, that a smile spread over the doctor's face. It seemed a ghoulish smile, given the moment. So I'm not sure about Kevorkian as a man, but of this I am sure: He was preferable to a pistol. In the real world, the choice is not between a Dr. Kevorkian and no Dr. Kevorkian. Sometimes it's between Dr. Kevorkian and Smith and Wesson.

There are legitimate reasons to fear abuse in assisted suicide or euthanasia: money, hatred, even fatigue and laziness on the part of the caregivers. All are serious reasons for pause and caution. Against these, I weigh the parsimonious approach so many physicians take with pain medication, the cost of aggressive prescriptions for pain when so many people lack the means to pay. And most of all, I weigh the right of people like my mother to still have some small sense of control over what's left of their lives.

Suffering born nobly is surely something to admire, but the nobility of it requires a free choice: to suffer for something or not. When one is condemned to suffer with no possible exit, then all that is left is resignation. I wish my mother had not found her bed to be a torture chamber, but since she did find it so, I have to defend her right to vacate the premises.

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Dr. Jack Kevorkian (Continued)

To feel this way is not to hold life cheap. My mother was not expendable. Eventually, my father wound up in a nursing home less than five minutes from my door. His mind was going; he asked me constantly if I'd seen my mother. Where he lived, I could be reassured that I would not lose him in so violent a way. I never published a piece where he could find it and remember how she died.

So, my father is gone, as is Dr. Kevorkian. You would not know whether he died of a stroke or if the

cancer he'd beaten in his younger years returned to take him more slowly. You will not know whether he begged for escape and found none. God knows, if he did, there was no pistol for him in the nursing home, but neither was there a Doctor Kevorkian.

LAWRENCE BROWN, with permission.
The above article appeared previously in the Cape Cod Times. ■

Another Triumphant Tour in Florida

Jim Chastain and Dick MacDonald traipsed through Florida in late fall, 2011, presenting in 7 cities in 8 days and reaching 600 enthusiastic attendees. Dick's topic was "Critical Choices at the End of Life."

Chastain's creative formula for organizing dynamic, whirlwind tours has borne fruit repeatedly. He first commits a highly-recognized name speaker, then googles "UUA" where he finds lots of choices and details about congregations. He gets a yes for a UU Sunday- morning service as a first venue and then offers an afternoon workshop. Once the first day is locked in, other adjacent dates may be arranged with other churches or libraries. Publicity is crucial to selling those dates: the "name" speaker submits a resume with photo and a blurb about the importance of the topic. When size requires, local members or hotels may be enlisted for stay-over facilities, and a driving itinerary is created for speaker and accompanying organizers.

The effect of publicity was demonstrated ably when Dr. Dick MacDonald, FEN Senior Medical Advisor and the "name" speaker, was interviewed

by Barbara Peters Smith of the *Sarasota Herald Tribune* in advance of his scheduled presentation at a local library, and her article inspired 150 in the community to attend. Dick has been present at about 200 "chosen, hastened" deaths. The following statements are Dick's abridged answers to questions posed by Barbara.

"My first experience at a voluntary death, in 1998, was amazing. The patient had been told in advance what medications to procure, and a compassionate doctor had written the Rx for barbiturates. She had chosen her favorite classical music, and it was an incredibly beautiful thing. She consumed the mixture quickly to insure that death occurred in minutes. (Sometimes with meds it's one to four hours.)

"I'm not there as a doctor, I tell them. It's not a process I learned in medical schools. It should be.

"People come to our presentations because they want to know how, if not for themselves, for their loved ones.

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Triumphant Tour in Florida (Continued)

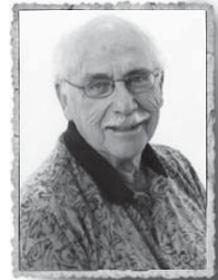
To health-care professionals I stress that our role as physicians is to do what is in the best interests of the patient. If doing so violates our own beliefs, we are obligated to send the person to someone else. There are lots of physicians who help their patients die. As we're speaking, someone is dying in America with the help of a physician.

"I'm personally not at all afraid of dying. I'd like to take a little while-not to drop dead-because I'd like to first have a living wake, with some of the best

single-malt scotch available and champagne for anyone who wants it, before I end my life." ■



Jim Chastain



Dick MacDonald

FEN Wows 'em in Green Valley, AZ

Organizers of the planned talk on 12/8/11 hoped to fill 120 seats, but the crowds kept coming. In the end, 230 people showed up, and others were turned away due to fire codes. Attendees came from distant communities to talk about a subject some find difficult to raise with close ones: choosing your own path right up to, and including, death.

"If you want to suffer at the end of your life, have at it, but some of us want our own choice," said Ila DeLuca, a founding member of Final Exit Network. DeLuca, 87, a former Green Valley resident, now in California, said that the key to remaining in control is to plan ahead: "Not planning can have woeful consequences. Planning for death is not 'if' planning; it's 'when' planning." DeLuca said choosing to end one's suffering is often thought of as cowardly but in reality requires a great deal of courage.

Host and organizer John Fanning read a letter mailed to him the same day a friend took his life. "I lost my ability to function without constant fear," the man wrote. "I could not eat nor sleep. But more importantly, I lost my dignity. I have no reason to suffer needlessly any longer. Today is my day to choose peace over fear and anxiety..." Fanning concluded with the man's written thanks to him

"and to those in Final Exit Network for all they have done for me."

People whose pain and suffering bring them to FEN are screened and are not encouraged one way or the other. "Final Exit's focus is on those suffering in the here and now- and not waiting for legislation," DeLuca said. "Final Exit can give you the information you need to be in control of the end of your life...it's important to act before the window of opportunity closes."

Ila spoke about legal needs: planning for the end of life, including a Living Will, a Durable Power of Attorney, and the choice of the right person who understands your wishes and has the emotional strength to make sure they are honored.



Ila DeLuca

Though many may not agree with Final Exit Network's purpose, DeLuca said, "Too often survivors forget it's your life, not theirs...It's about making peace with dying."

Green Valley News, 12/10/2011.
Ellen Sussman, Reporter ■

When His Anchor Was Gone...

Dr. Morris Chafetz was a physician, renowned for his pioneering work in the treatment of alcoholism. Indeed, the entire medical approach to alcoholism as a disease rather than a weakness of character was established by Dr. Chafetz. On October 13, 2011, his wife of 65 years, Marion, 86, died in an assisted living facility with a variety of ailments, none of which was believed to be immediately life-threatening. On the following day, Dr. Chafetz, 87, elected to take his own life via an overdose of pills.



Janis Landis

Frank Kavanaugh interviewed Morris Chafetz's son Adam and Adam's wife, Lynda in December. What follows is based on that discussion, as well as Mr. Chafetz's biography in the *Washington Post*.

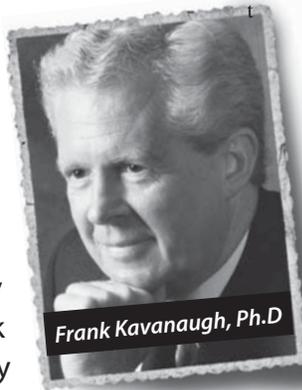
Morris Chafetz by all accounts was a remarkable person, a Harvard-trained psychiatrist who could look beyond conventional wisdom to see what others could not. Working with alcoholics early in his medical training, where others saw only pathetic individuals choosing to drink themselves to death with an inherently evil substance, Dr. Chafetz saw a medical illness that could and should be treated.

Dr. Chafetz also saw the teaching of youth to enjoy alcohol responsibly as an untapped opportunity that would obviate the lure of forbidden fruit. These became the two pillars on which he built his reputation as an expert on the treatment of addiction, during his tenure as the first director of the National Institute on Alcohol Abuse and Alcoholism.

With his wife, Marion, Morris Chafetz raised three boys and enjoyed skiing and other outdoor recreations. Individually and together they authored a number of books. For 65 years, they were a team. And when Marion's health dictated

that she move into an assisted living facility, he was a constant fixture at her side.

Age brought health challenges. Marion's were physical, incurring extensive treatment and serious restrictions on her capabilities. But she never lost her zest for life and continued to be a loving and supportive partner for Morris as he dealt with the early symptoms of senile dementia. Marion was the anchor that kept him moored to life. He often discussed with his family his firm belief that an individual should be allowed to chart his own death, when quality of life was no longer sufficient, just as he had forged his own professional career path in opposition to prevailing wisdom.



Frank Kavanaugh, Ph.D

Son Adam and Lynda believe he chose to act on that belief the day after his wife died. Both Adam and Lynda deal with strongly conflicting emotions. They grieve for the additional time they might have had with him, wondering if intervention might have changed his mind. They are resentful that staff in the assisted-living facility, after Marion's death, instructed them to ensure that Morris was not left alone at any time.

But they feel great pride that ultimately he ended his life his way, deliberately avoiding a path into dementia that would rob him of the dignity that he had extended years ago to his own patients.

There has been no judgment or stigma aimed at Dr. Chafetz by family, friends, and neighbors, although some question whether they themselves would have made that decision. They unequivocally express that the right of self-determination for a competent adult is absolute. So in death as in life, Dr. Morris Chafetz continues to inspire dialogue in his wake and to thus advocate and clear a path for those who are suffering.

Janis Landis

When His Anchor Was Gone (Cont....)

Postscript: With Dr. Chafetz's help, in the early 70's I produced an Emmy- Award -winning film: *America on the Rocks*. Hosted by Robert Mitchum, it aired in prime time in 200 U.S. TV markets. Individual stations and medical societies produced a follow-up program on the latest doings in alcohol education and treatment in their community. Morris Chafetz was then Director of the National Institute on

Alcohol Abuse and Alcoholism, which provided part of the funding for the nationwide effort. (That community -based national drive also became the subject of my Ph.D dissertation on alternative health- information dissemination systems)

Frank Kavanaugh ■

Death Tourism

The conversation began like many others "How is your mother?" What followed was unexpected. In perfect English laced with a German accent Deter replied, "Awful. The cancer is progressing, she is mentally out of it and it's terrible to see her this way. You know, Liza," Deter leaned toward me and, speaking quietly and with stark honesty, said "I have a membership, you know. I will never suffer like this."

Since 1941 it has been legal for ill individuals to die assisted in Zurich, Switzerland, if the help is performed by a non-physician who has no vested interest in the death. In May, 2011, the voters of Zurich opposed a ban on assisted suicide, reaffirming their support of "death tourism" in their country. Each year about 200 people, including many foreign visitors, die with assistance in Zurich.

Presently the states of Oregon, Washington and Montana allow physician-assisted dying, and New Hampshire, Massachusetts and New Mexico are considering similar laws. In April, 2011, an Arizona jury found Larry Egbert, a volunteer doctor with the Final Exit Network, not guilty of conspiracy to commit manslaughter by aiding in a suicide, for his role in the death of a terminally ill woman.

While an Advance Health Care Directive, a Do- Not-Resuscitate statement or a Physicians' Order for Life Sustaining Treatment (POLST) can make one's wishes concerning final procedures clear, they are not related to actual assistance in dying. In most

states, family or caregivers who do offer aid can face arrest, Furthermore, the assister could further face harsh moral judgment by family members who were not informed or who disagree. States offer other repercussions: the California Probate Code, for example, declares that a decedent's killer foregoes the right to inherit property or benefit from the decedent's estate. But wouldn't those who are closest to us – and the natural beneficiaries of our bounty - be most likely the ones to assist in ending our misery?

While electing a hastened death would certainly be a personal and very private choice, at present the choice does not exist in most states. Deter paid a one-time membership fee long ago, and, if he reaches a point where he wishes to elect this option, he will fly to Zurich, check into a hotel and, in a peaceful manner surrounded by people he loves, take the next exit out.

Liza Horvath
Monterey Herald ■



Winnipeg Sun, CN

GLADD No More

It's been a well-publicized story. Sharlotte Hydorn of San Diego, the 91-year-old maker of "exit kits" (AKA "orchid bags," etc.) was raided by federal authorities in May of 2011, who seized her computers, documents and sewing machines and put her out of business. Sharlotte has said her kits were designed to help terminally ill people end their lives with dignity in their own homes. She acknowledged selling the kits for the past 7 years under the acronym and brand name GLADD (Glorious Life and Dignified Death).

During the raid, documents revealed that several kits had been already mailed out; those purchases were intercepted by law enforcement and seized at the Post Office. Some very ill people are likely waiting for their shipment which in all possibility will never be received.

Sharlotte has claimed she made little money from the enterprise, charging \$60 apiece for her hand-sewn apparatus. Her lawyer, Charles Goldberg, said she rarely deposited payments from her patrons, and that FBI agents found hundreds of uncashed checks in her home. (Note: Mine was one of them. When I called Sharlotte to question why my check had not been cashed, she assured me not to be concerned. I did receive the "orchid bag," but the check remained uncashed. It must be stated that many recipients who order the bags are not terminal but do so as insurance against suffering somewhere down the road. Ed.)

Hydorn said that her interest in helping the terminally ill stemmed from the loss of her husband to colon cancer in 1977.

Authorities charged Sharlotte with failing to file tax

returns from 2007 to 2010, a minor misdemeanor. Prosecutors said they would recommend probation and a fine ("on the low end") as punishment for the tax misdemeanor. The income she failed to report, her lawyer stated, was mostly from her retirement pension, Social Security, and rent from two small apartment units. In her plea deal, she agreed to pay any back taxes that are determined to be owed, and to stop making the hoods. (Since no charges except failing to file tax returns had been incurred, why is she being asked to stop manufacturing the hoods? Ed.) As a result of the GLADD shutdown, no current alternative source exists for purchasing the hoods. Derek Humphry offers information on make-it-yourself kits in his addendum; contact ERGO@efn.org The work of Final Exit Network in support of choice in dying continues; we are an independent entity, separate from any other organization.

Hydorn made headlines after one of her mail-order customers, Nicholas Klonoski, 29, whose family described him as "depressed but otherwise healthy," used a GLADD kit to end his life in December, 2010. Outrage over that case led Oregon lawmakers to legislate a hurried ban on such devices. (Oregon is one of the few U.S. states that legalize physician-assisted dying for people with incurable, fatal illnesses.)

Sharlotte Hydorn's sentencing will take place on March 15, 2012, 1:30 P.M. in the United States District Court in San Diego. The hearing is open to the public, and Hydorn's "victims" -- the purchasers of exit hoods -- will be allowed to address the court.

ERGO Listserv ■



New Operations Manager

After much deliberation, our Network board decided we need an operations manager to handle the myriad duties that have been overwhelming our volunteer hierarchy for some time. An extensive and detailed job description included working with member services, administrative functions, finances and public relations. Personal qualities of the OM comprised espousing our basic principles, considerable experience in management, being an effective communicator who is also computer savvy, and ability to work smoothly with our volunteer board.

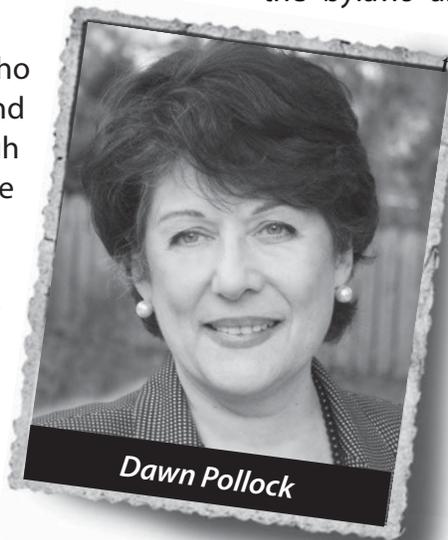
Our search yielded Dawn Pollock, who demonstrates All-of-the-Above and more. Dawn was gracious enough to write the following, to introduce herself to all our members.

"My first few months with FEN have been filled with valuable learning. There were phone conversations with the Board and Advisory Committee members and with others like Fran, Beverly, Rob and Erica. Each took the time to talk with me at length, sharing their reasons for supporting FEN and generously explaining the work each does with the Network. Those calls helped me to determine how I fit into work already going on and to see what my contribution can be to the organization. So, thanks to all for sharing their valuable thoughts and time.

"Through those calls and emails I also discovered that I share the values and the mission of the Network. I believe it essential that people have access to a full range of options in dealing with the end of life. My one experience with the protracted illness of a loved one found me completely unprepared to honor their wishes regarding medical care. In spite of many previous frank conversations and their clear instructions about not using mechanical means to prolong life, I still

lacked the experience to keep my promises. I will always regret that I underestimated how difficult it would be to deal with the hospital, the emotions of other relatives and my own stress and grief. How I would have valued leaning on someone with more experience and knowledge!

"So I welcome the opportunity to work with this exceptional group of volunteer leaders and to enlist my expertise in making the operational machinery of FEN support its goals and mission most effectively. I have been diligently reading the bylaws and past newsletters, exploring the website, learning to navigate the member database, reviewing correspondence, participating in conference calls, reading membership materials, asking lots of questions and getting familiar with how it all fits together. My work over the next few months will include helping the board update the bylaws, coordinating efforts on public awareness, describing roles and responsibilities, cleaning up overlapping functions, and connecting unnecessary gaps in service.



"My credentials include a Master's in Organizational Communication and certification as an Association Executive. Relevant previous experience involves serving as Executive Director of a pediatric association and working with the Florida Department of Elder Affairs, first as State Volunteer Coordinator and later as Staff Director. Currently I'm a Trustee on the Board of the Florida Society of Association Executives Foundation.

"My husband Phillip and our cat and I live in Tallahassee, FL. I love traveling and reading, both of which will have to play second fiddle for a while as I look forward to making a difference in my new position at Final Exit Network."

Dawn Pollock ■

What To Do When Loved Ones Disapprove

The title question poses a serious dilemma for our organization. Suppose we accept a person for an exit, and the family discovers that their loved one did not die naturally? Further investigation may reveal evidence of the Network's involvement. Not surprisingly, the uninformed loved one will likely want revenge on the people and the group they think caused the death that shocked them.

Lest that concern seem academic, our two cases that resulted in arrests stemmed from just such incidents. In Arizona the member specifically did not want her sister informed or present, fearing the sister would "put her away." The Network's involvement was discovered, and as a result, four Network volunteers were charged with crimes. Though the outcome ultimately resulted in a clear acquittal for the Medical Director, no jail time for anyone, and a refinement of our *modus operandi*, the experience was expensive for FEN and a source of extreme and prolonged emotional tension for the four defendants.

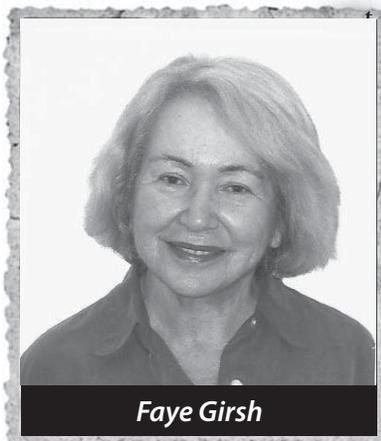
The Network continues to be involved in the Georgia case where a member chose to die without telling his estranged wife, a strongly religious woman. She unearthed the Network's involvement and related this information to the authorities. The Georgia Bureau of Investigation got involved, and – three years later – the court has still to hear this now complicated case. The criminal prosecution of the Network and four of its volunteers has been tabled while they appeal to the Supreme Court of Georgia, arguing that the GA statute against in a suicide is unconstitutional under the First Amendment. (Some of the above paragraph has changed since the recent GA Supreme Court decision. Ed.)

When the loved one lives in the same house or close by and uncompromisingly disapproves not only of the plans but also of the right of the patient to make them, the situation is virtually impossible, and the case must be declined. Often the family simply does not realize the extent of the member's suffering, and when they are brought to understand the misery and deterioration their loved one is experiencing, they may agree to the exit. Though they may not prefer to be present they concur that the death will be reported as natural.

If the relatives live far from the member and there is hesitation to inform them that a planned death is in the works, it is urgent, at least, that they be told about the person's extreme misery and possibly imminent death.

Arguably the decision to die should be an individual one and not dependent on the judgment of others. Such is the assumption in Oregon and Washington and in the Netherlands and Switzerland, where assisted dying is legal. Even then, having the agreement and support of loved ones is preferable, so that family bitterness doesn't survive the death.

Though the Network is convinced that our activities – providing information and support – are legal, we need to exercise caution until it becomes clear that we have not crossed the still-fuzzy legal line of what constitutes assistance. And, since there are essentially 50 different statutes, most of which are vague and few of which have actually been tested, we remain cautious about providing ammunition for a legal challenge while still working with people who need solutions to their suffering.



Faye Girsh ■

FYI

An updated version of the purple tri-fold brochure that describes our mission, our services, lists the Board of Directors and contains a membership application, is available. For copies to distribute at presentations and to your friends and family, please email Erica Twitchell at erica@finalexitnetwork.org or call her at 732-228-0541.

On behalf of Final Exit Network and



Final Exit Network happily announces the marriage of our General Counsel, Rob Rivas and Julia Hanway Rivas, on October 25th, 2011.

its Board of Directors, I'd like to thank all of you who responded to my holiday letter of appeal for donations to our cause. We received many extra donations during the holiday period, and we are most grateful.

Wendell Stephenson,
President, Final Exit Network ■

More GLADD

Um- Wait a tiny minute here- If the authorities accept (and indeed plea-bargained) Sharlotte Hydorn's \$26,000 in outstanding tax, then surely the government is an accessory after the fact. Prosecutors have already clarified that the authorities understand the true purpose of the kits so are not accepting tax on the sale of "orchid humidifiers," "beauty bonnets," or "plastic rain bonnets."

As for Sharlotte's being granted bail on condition

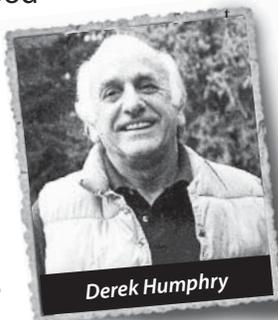
she does not assist in any deaths, what has that to do with the crime of unpaid tax? Yes, she should have paid tax on her skill of stitching up a helium hood, but the authorities are stitching her up like a kipper in a desperate attempt to find her guilty of something. One can just imagine the meetings the prosecutors must have held! Oh, to have been a fly on the wall when someone came up with tax investigation!

Anne Dettmer ■

Victims?

Numerous purchasers of helium-hood kits from GLADD in California have received form letters from the FBI offering "Victim Assistance": "You are eligible for Victim Assistance services from the FBI with reference to your rights as a victim in the case against GLADD." While most buyers got the kits for possible future use, some have already died by choice, to escape further suffering.

A terminally ill man in Chicago wrote to ERGO: "I have just received a disgusting form letter from the FBI telling me of my rights as a VICTIM in the case against GLADD. I'm so mad I don't know



what to do with myself. Have others received such notices?" (They have. Ed.)

The FBI web page says this about Victim Assistance: "It's the right thing to do. The FBI is committed to ensuring that victims receive the rights they are entitled to and the assistance they need to cope with crime. Treating victims with respect... helps us build better cases. Our resources include an Office for Victim Assistance at FBI Headquarters and victim specialists nationwide."

Because the customers of GLADD knowingly communicated their informed desire to purchase this equipment, the GLADD affair must be the strangest case of victimization ever.

Derek Humphry ■

Magical Florida Tour with Jim Chastain & Dr. Dick MacDonald



Chastain & MacDonald
Pondering Mighty Questions



Dick at Mike, Jim Fielding
Questions



Dick's Slide Presentation



Dr. MacDonald with SRO
Audience



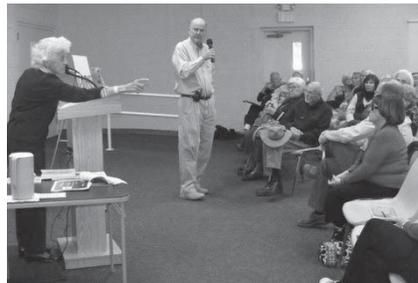
Dr. MacDonald Wooing- Oops!-
Wowing the Women

Photos by Frank Kavanaugh

The Blockbuster Event in Green Valley, AZ, with Ila DeLuca & John Fanning



Pre-Presentation Conference,
Ila and John



Ila DeLuca and John Fanning,
Q & A



Trudy Fanning with
Literature and Smiles



A Light Moment



The Fabulous Flyer



Standing Room Only

Photos by Phyllis Buchanan



FINALEXIT NETWORK

FINAL EXIT NETWORK
P.O. Box 665
Pennington, NJ 08534

Our Guiding Principle

Mentally competent adults have a basic human right to end their lives when they suffer from a fatal or irreversible illness or intractable pain, when their quality of life is personally unacceptable, and the future holds only hopelessness and misery. Such a right shall be an individual choice, including the timing and companion, free of any restrictions by the law, clergy, medical profession, even friends and relatives no matter how well-intentioned. We do not encourage anyone to end their life, do not provide the means to do so, and do not actively assist in a person's death. We do, however, support them when medical circumstances warrant their decision.

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Ila Deluca	
Rosalie Guttman, Ph.D.	
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Newsletter Staff

Ms. Lee Vizer, M.A. Editor

*Winter
2011-2012*

Help Us Help You!

Our members frequently ask what they can do to help relieve the load of an overworked, volunteer board. Please send a short note describing your interests and availability to **Wendell Stephenson**, WenStephenson@finalexitnetwork.org, and **Schera Chadwick**, Schadwick@finalexitnetwork.org.

We offer the following suggestions for starters:

- Host a meeting of your friends and family or ...
- Ask your organization to schedule an event. Size unimportant. We'll provide speaker and topic.
- Submit a Letter to the Editor, or an article.
- Staff an exhibit-booth at a convention near you.
- Write grant applications.
- Serve on- or start- a committee that utilizes your skills.
- Help raise funds.
- Respond to relevant articles in the media.