Donor Families AUSTRALIA

Donor Families Australia NEWS

Spring 2016, Edition 14

HIGHLIGHTS

Herd of Hope

Strategic Planning at DFA

Exciting round of national events for DonateLife THANK YOU DAY

Good Grief - Life After Loss

FROM BOTH SIDES

To understand my sister Jennet's organ donation story, you need to go back to the very beginning. She lived with a rare metabolic disorder, Erythropoietic Protoporphyria, which in simple terms meant that her body reacted to ultra-violet light, causing her to burn. However unlike regular sunburn, the reaction caused an excess of a chemical (protoporphyrin) in her bone marrow, plasma and red blood cells. This would cause severe pain, swelling and blistering internally as well as on her skin. If severe enough, it could cause issues with the gall bladder and in rare situations, liver failure.

Share your story

She was diagnosed when she was two years old and as a girl living on a farm in country NSW in the 1970's there was little information and knowledge about it, leaving my parents to do their best to 'keep her out of the sun', which is the only known effective treatment for this condition.

Despite this, my sister never let her condition stop her from doing things in life. In her short 41 years, she succeeded at school, entering ANU in Canberra where she completed a Bachelor of Science with Honours. Whilst there she had many adventures: skiing, travelling, camping, and making the most of her university days.

Jennet, beloved mum, wife, sister...

After this she applied and received a Rotary ambassadorial scholarship to America. She chose to attend University in Portland Oregon, as the climate was favourable. She had many wonderful experiences and met some lovely people that she had remained in contact with up until her death. Before returning to Australia she had an opportunity to visit Alaska. It was here that she met, Jimmy, on a bus trip into Denali National Park.

It is what storybooks are about: Girl meets Boy on Bus, spend a week together before she leaves for the other side of the world. Before Skype and Facetime, long distance phone calls and letters over the coming months led to Jimmy visiting

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FROM BOTH SIDES

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Australia. Distance it seemed couldn't keep the relationship from blossoming, with Jen returning to the USA and a proposal of marriage from Jimmy. The following year they were married in Australia's outdoors and returned to America.

Both had a desire to study medicine, so their married life began at an international university on the island of Saba in the Carribean! Where else would someone with an inability of being in the sun go?! For the next four years, they studied and had practical placements around different cities within America and a term in Oxford, UK. At graduation, she won the University Medal for her year.

Once qualified, they returned to the scene of their chance meeting, Alaska. It was here they both entered a family medicine training program. During her time in the program, Jennet had become known as a person with great compassion, care and excellence, gaining a position of mentorship in her final years.

After their training program was complete, they moved to the rural seaside tourist town of Seward in Alaska. It was here they expanded their family to include Sam and Will. Work and leisure was rich and full. Professionally Jennet became the director of the local hospital and earned a reputation of being an incredible doctor, teacher and friend. Socially they spent time exploring the Alaskan outdoors, camping in the summer and skiing or skating in the winter.

Jennet actually found the weather and climate in Alaska reasonably manageable. The summers were always hard, with nearly 24 hours of daylight, but given it was relatively short, she managed to work a lot and avoid the sunlight as much as possible. The winter light was kinder on her body and it was easier to cover up and not be so exposed.

However Jennet missed home and wanted to return to Australia for her boys to grow up with the Australian lifestyle. It was a difficult decision and we had many conversations about how she would find the climate. In December 2010, she returned home to Australia and we spent our first Christmas together in a long time, and the first as mothers.

Share your story

Immediately I was drawn back into her world of shade seeking. Watching her fiddling with her long sleeves and hats to cover any exposed skin took me back to our childhood, only now it was worse. She cried with uncertainty of how she was going to do it and be able to be there for her boys.

A month later, Jen came to Adelaide for a job interview. The dream of our families being together was coming true. She needed to return to Albury to pack up the boys who were staying with my mum. The night before she left she felt nauseous but put it down to nerves of the interview and not eating much. We went out to a movie, Black Swan, which was to be her last one. Many times I've thought of this and felt angry that why wasn't it a beautiful romance or wet your pants comedy. But the dark drama was nothing but an indication of the months to come.

What followed seems like a spiralling time warp of hospitals, tests, agony, bureaucracies and red tape, uncertainty, medicines, fear, waiting, lots of waiting. The nausea progressed,

resulting in the horror show that was liver failure.

I rushed to her side in Albury Base Hospital where she was jaundiced and in pain. She needed to be transferred to Melbourne but due to the complexities within the health system, she was not critical enough and currently receiving care. Frustrated and confused, we fought for her to be transferred, which she eventually was.

This began the process of finding out what was causing the failure and where to next. Scans, blood tests, doctors and more doctors who had never seen anyone with this condition came. It felt like a circus. What was making life difficult was trying to get the staff to understand that due to her EPP, she was reacting to the fluorescent lighting in the hospital rooms, and she needed to be in darkness.

The test results showed severe liver failure with the only option being a transplant. But they had some time as her bloods were stabilising. Transfer from one hospital to another occurred along with new doctors and nurses who had no understanding of this condition. Due to her sensitivity to light she needed special filters for the theatre lights for her procedures/ operations, which became a big stumbling block. They needed to come from France and despite efforts made they never actually arrived.

In all of the craziness of the ward routines and medical procedures, drugs, pain, and waiting, lots of waiting, was her husband and children, my parents, my own family in Adelaide, my brother who lived overseas, all trying to get on with day to day life. It was hard. Hard to see her own sons too scared to give her a hug because of the scary drips and machines, hard to see Jen sitting in her room waiting and wondering how her boys were and getting to say goodnight on the phone at the end of the day instead of being there to kiss them goodnight. Her boys were her world. Many times she said she was going through with this for them. They were only four and six at the time; too young to lose their mum.

Jennet's condition worsened with her sensitivity to the light so severe her room was blacked out, lights off, even the IV pump machine light and TV screen was causing reactions. One way to reduce the pressure on the liver was to 'clean' her blood of the toxins. Her plasma was black. This was unchartered territory for the medical staff. All the time her other liver function tests were okay. The transplant doctor kept reassuring her that she had time and believed a liver would become available. However what the doctors did not realise were the toxins had started attacking Jennet's nervous system. I recall distinctly the day Jen realised things were critical.

She had been experiencing the odd tingling sensation in her legs or arms, but this particular moment she said to me: "Look Lizzie, I can't puff out my cheeks."

As a doctor she knew this meant there was damage to the nerves controlling her face. What happened beyond this point was a nightmare.

The following day there was weakness to her hands and she said: "I need to write to my boys today because I don't think I will be able to tomorrow."

So we set to work writing what was going to be the most important letters ever written. As you can imagine she was fighting a losing battle, but her spirit was never broken. I have some very precious memories of this time and many more that still haunt me.

The final days Jennet was ventilated in ICU and still receiving treatment until the doctors performed tests on her nervous system. She had developed irreversible nerve damage to her whole body and there was nothing more that they could do for her. Without the ventilator keeping her alive, she would die.

It was then the doctors discussed the possibility of her becoming an organ donor. It wasn't something that I thought would be possible given how sick she was. Also Jen's situation was somewhat different because she wasn't brain dead. She was fully aware of her condition and ultimate fate. She clearly consented to organ donation after cardiac death. For our family, we had to shift our thoughts from being a recipient to donor. Not an easy switch. And so the process began.

We were able to have one last magical moment in all this ugliness. We took her outside to look at the stars, one last time. Bundled up, machines and staff in tow on a beautiful crisp winter evening, we went and sat with her to

FROM BOTH SIDES

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feel the breeze again. It had been months since she had been outside.

Two days later, the lives of three other families changed as well. An older lady received her lungs and two others received her kidneys and I believe are doing well today. We have never heard from the families but through the DonateLife co-ordinators, we have been given updates at our request. Unfortunately the lady who received the lungs passed away but not as a result of the transplant. We believe she felt so grateful as she returned home and spent time with her family and grandchildren. Although you wish everyone's story would be picture perfect, we felt Jennet would be so pleased helping another family be together, even if just a little longer.

Share your story

Our experience of waiting for transplant and then becoming a donor, I think, is unique. It provides me with a greater awareness of the need for organ donors and yet the tragedy that comes with that gift. For this reason I have volunteered with DonateLife in South Australia for the past five years. More recently I have become a member of the DFA family as well as the SA representative role. My experience has given me an appreciation for the need to support families post organ donation and see DFA being a part of this.

Everyone has a remarkable story to tell; this has been mine.

Lizzie Mazur

LETTER TO THE EDITOR

I would like to share with you my experience when my son Ben's recipient passed away. I need to state however that my wife and I met David 2 ½ years after Bens death – but that is another story. From our first meeting, we became great friends with David and the Ridoutt family. So, it was with great sadness when we were told of David's passing after a long struggle with several cancers sadly brought on due to his medication. For Elayne and I, we grieved as we would after the death of a family as we had become very close over the fourteen year friendship. I stress that our grief and sense of loss was for David and not the fact that a part of Ben was now also gone. For us, Ben's donated organs were forever part of his recipients. We did not feel that he was living on in someone else body.

We were invited to David's funeral and sat with the Ridoutt family, and later at his farewell celebration I was ask if I would like to say a few words. It was a very emotional moment for me as I reflected on our 14 years of friendship. I concluded with: "Ben and David, destined never to meet, are now together forever in spirit."

I take with me a comment that David's wife Margaret said to us later – that Ben gave her sixteen additional years with her beloved sole mate and during that time he also became the proudest grandfather to five grandchildren. Seven years on, we continue to keep in contact with Margaret.

Graham Harrison, Kincumber NSW

If you'd like to have your say on any topic, please send us a Letter to the Editor. Letters must be 300 words or less and in submitting your letter, you are giving DFA News permission to publish. Email your letters to admin@donorfamiliesaustralia.com

CHAIRMAN'S MESSAGE

Welcome to our Spring edition and a special welcome to our recent new members to our organisation,it is great to have you on board. It has been a very productive quarter with a number of exciting opportunities within the Organ and Tissue domain. Firstly our DFA committee met face to face recently for the first time at our inaugural Executive Planning Weekend. People we had been skyping with for years for the first time became a face. Congratulations to this wonderful group of people who left their state, families and the weekend to work from 9.00 am to 10.00 pm Saturday and 8.00 am to 2.00 pm Sunday. Absolute champion effort put in by all. There is more on the weekend inside this edition.

Starting this edition we are including a Letter to the Editor. If you want to have your say on any topic please email through your point of view or your story. Please restrict to 300 words or less and also give permission for us to print your view in our newsletter.

DFA has been given a grant from the Organ and Tissue Authority to host the DonateLife Thank You Day events around the country on the 20/11/16. Please keep a look out for the function in your state. If you are a Recipient or a member of the community please come along and say thank you to a Donor Family. Donor Families this is a nice opportunity for you to accept the gratitude, on behalf of your loved one, from the community. More details of the events are included in the edition, check out your state's and keep the date in your diary.

Since our last edition I would like to welcome Rebecca Free from Tasmania onto our committee. We now have every state and territory covered. Given NSW is our largest state we have just added another Donor Family representative to our committee from the Hunter Valley region, Newcastle,Jann Falk Eastley. Good luck to both members; we know that our organisation will only prosper through your efforts.

We are very privileged to feature the more than exciting news of Megan McLoughlin. Megan is a truly motivational person who, from adversity, has gone on to achieve so much. She is now on a mission to help others who have been directly affected by Organ and Tissue donation. We hope we may be able to do a feature story on this remarkable woman in a future edition of our newsletter. Please read the article included in this edition on the Herd for Hope, I am sure you will be equally inspired by this wonderful Aussie and what she has planned in the name of Organ and Tissue Donation. That is another date you need to diarise and come along and support this historic event and its causes.

I look forward to catching up with our many Donor Family and Recipient friends up on the Sunshine coast for the James Ackerman Memorial Shield. This will feature a cricket game and a special race day on the Sunday featuring a Donor Family horse race as a tribute to our Donor Heroes and their families. Congratulations to the organisers for what promises to be a great weekend.

Bruce McDowell

A life that touches others goes on forever

DFA EXECUTIVE STRATEGIC PLANNING WEEKEND

This weekend had been in the planning for months, Graham Harrison, our NSW representative had been put in the position of playing host and what a fantastic job he did. The workshop was held in Sydney, about as central as we could get if you didn't count WA and NT people.

After many hugs and a warm greeting from all we settled into the mornings proceedings. We got a huge amount of pleasure at going over what we have achieved in our three and half years and how the landscape has been affected by our presence.

DFA Executive gathered in Sydney for the inaugural Planning Weekend. L to R: Graham, Philippa, Kelli, Felicity McNeill (CEO of the Organ and Tissue Authority), Lizzie, Bruce, Helen, Holly and Leanne.

Our first highlight was provided by Maria Gomez and Brian Myerson from Share Life. Maria passed on her invaluable experience from her home country Spain and from the work she is doing here in Sydney. From a Donor Family perspective, we were buoyed by the acknowledgment Maria gave to the Donor and Families. Maria showed us a circle of events as they transpire in the hospital. This showed just how crucial it is that Families are treated with respect right from the time they enter the front door. Every stage is crucial she emphasised if a successful outcome is to be achieved.

Perhaps the best was saved for last when Maria presented the idea of hospital certification ie the hospital transplant department being nationally accredited against Australian Standards. In this way all hospitals will need to perform to best practice. As a committee Maria's idea certainly received our recommendation and support.

Brian was able to pass on his experience as a Recipient. Brian has had that wonderful experience of meeting his Donor Family. We heard how that eventuated and how both parties benefitted from the experience. Brian's experience and so many more that we know of in recent times tells us that it is time for governments and the bueararacy to get behind the effort to help Recipients and Donor Families meet when the time is right for both parties.

After lunch the group started the process of looking to the future. This was more finely tuned on Sunday morning when all of the ideas were put to paper and will be communicated in the near future to our members.

Saturday afternoon, we were also fortunate in having CEO of the Organ and Tissue Authority (OTA), Felicity McNeill, join us. Felicity was able to tell our group, the work of the OTA in relation to Donors and their Families. Our conversation touched on a number of important concepts such as appropriate word exchange like the use of the word "harvest." Other words that we hear are "quota" and "recycle." It was strongly supported by all how it is important that everyone in the Organ and Tissue domain are mindful of terminology and show respect to the Donor Family and the Recipient in this very sensitive area.

We discussed the move to a Board of Governance for the OTA. There is currently a draft before the Minister of Organ and Tissue Authority to go before parliament. Questions like: how will the Board be made up won't be answered until the Minister has approved the recommendations. The advent of the Board will relinquish the role of the current OTA Advisory Committee. Our committee thanked Felicity for her time and made a commitment to stay in touch as we formulate our future plans.

After a very full and rewarding day all were happy to get to bed, well after 10.00 pm, knowing we had to be up for an 8.00 am start the following morning.

Sunday morning was the good old "butcher paper exercise" with Holly as our facilitator. The work carried out on Sunday will help define us and what we intend doing into the future. We are very committed to best practice and outcomes for all involved in Organ and Tissue, with a special emphasis on the support and advocacy for families that is so important if we want to have the best system in Australia.

Just when we thought we could start to wind down, Kevin introduced a tonic that left us in a state of excitement, her name is Megan McLoughlin. Remember that name; she is one of the biggest thinkers I have come across. We feature Megan in this edition. Please read her story and be as inspired as we were when she presented. Megan's presentation left us all on such a high, a perfect finale to what was a fantastic weekend.

The Strategic Planning weekend showed how this organisation is only going to go from strength to strength. With people of the calibre and passion as those present, you can be assured that Donor Families will be well served.

Pictured from top: Holly and Maria / "Big Thinker" Megan / Holly

DFA EXECUTIVE STRATEGIC PLANNING WEEKEND

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> “This organisation is only going to go from strength to strength. With people of this calibre and passion, you can be assured that Donor Families will be well served.”

Clockwise from top left: 1. Holly, Kelli, Graham and Helen / 2. Graham, Bruce and Kelli / 3. Kevin, Graham and Brian / 4. Philippa, Lizzie, Leanne and Kelli / 5. Holly and Leanne

HEARD OF THE HERD OF HOPE?

Not yet? We bet you will soon.

In our previous article on the DFA Executive Strategic Planning Weekend, we introduced you to one of our guest speakers, Megan McLoughlin, and sagely advised you to remember her name. Now you’ll see why; this powerhouse of a woman us what she is planning for this coming May, in the name of organ donation across Australia.

Stockmen on horseback will cross the iconic Sydney Harbour Bridge with a herd of Australian Hereford cattle on Sunday 21 May 2017.

Each of the stockmen have been directly connected to a life-changing organ transplant and the “Herd of Hope” cattle drive will promote organ donation across Australia and support regional transplant care and specific mental health services for all those affected by organ donation.

Traffic will be stopped on the Sydney Harbour Bridge for three hours at 7am, bringing the country to the city to represent mateship, life, love and gratitude.

JOIN THE HERD:

We are inviting every member of the public who has been affected by organ donation. This number will consist of loved ones of organ donors, recipients, family members and medical staff who will proudly walk as one as the ‘Herd of Hope’ crosses the Sydney Harbour Bridge as a symbol of encouragement to fellow Australians to support this worthy cause.

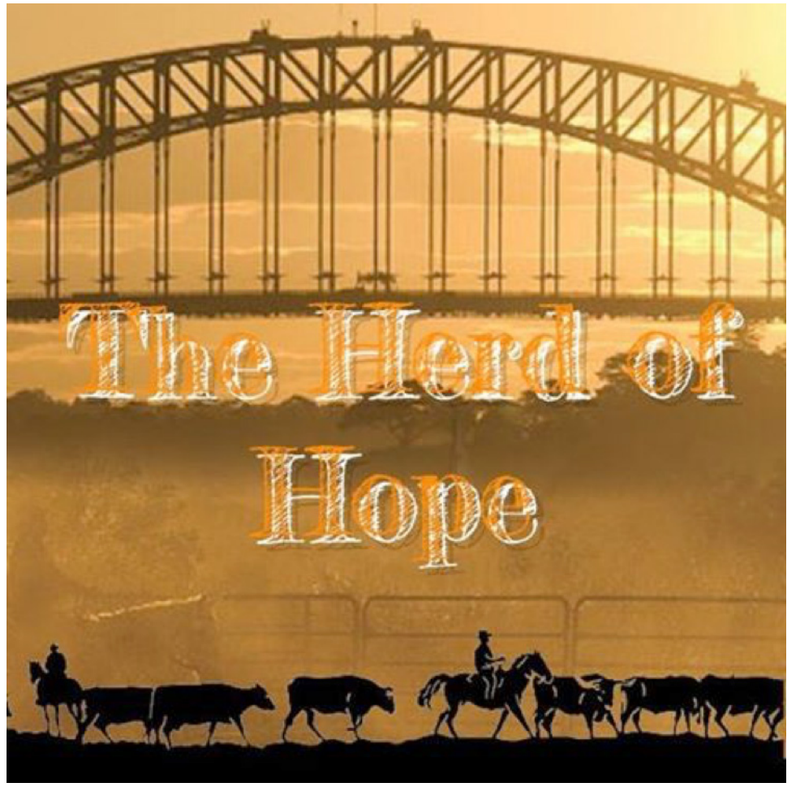
The money raised for the event will go towards areas recently identified by the University of South Australia in a research thesis to include establishing regional transplant care nurses and providing therapy for families and recipients through Beyond Blue.

There is a great team of people involved, some with over 35 years’ experience in film and television animal productions, ensuring a safe and spectacular event.

If you would like to join the herd or sponsor our event we welcome all involvement.

Website:

www.herdofhope.com.au



GOOD GRIEF -LIFE AFTER LOSS

This well-informed article by Marnie McKimmie originally appeared in *The West Australian* on 7 September 2016 and is reproduced here with kind permission.

Now that black is no longer reserved for mourning but considered a high-fashion colour to be worn every day, those who have lost loved ones are turning to new traditions to express ongoing grief and heartbreak.

Tattoos, RIP car window stickers, online or roadside memorial sites, charities, scholarships and fundraising walks are all modern day methods used to honour and remember while attempting to move forward and find ways to cope with loss.

"In the past, there were different things that you would do to denote that you were in mourning. You might have worn black for a certain length of time. But nowadays, we do not have this," says Curtin University grief researcher Lauren Breen from the school of psychology and speech pathology.

"Today, people are often looking for something new to keep the loss alive in other people's memories. To connect, to remember and to honour.

"Sometimes their worst fear is that it may get to the point that no one will remember that the person even existed."

But it's not just how we show our grief that has undergone significant change. In recent years, there have been major shifts in our understanding of what grief is, how it runs its course and how it should be expressed, supported and treated.

For starters, it's now known that the much-held view that grief runs its course in a "set pattern" — from shock through to recovery — is invalid, with recent research showing this theory could not be supported by sound scientific evidence.

"From the 1950s, there was a lot of talk about there being stages or phases of grief," Dr Breen says.

"These generally went from a feeling of shock and denial through to working through the grief and recovery. But more recently when researchers tried to find evidence for a stage-based approach, there was really very little.

"A lot of people were in fact saying 'I never recovered, the grief is with me for ever. It is just that I have learnt to adapt to it or I have accommodated it into my life.'

"Rather than it being a linear process, people reported going back and forward and oscillating between different experiences. An anniversary of the death or a particular type of music or seeing someone in the street who looked similar to the deceased could bring it all back.

"So now, we don't even talk about stages or phases to grief any more."

Dr Breen believes grief is better described by the "dual process model", where a person constantly moves back and forward between loss-oriented experiences (such as crying and thinking about the loss) and restoration experiences (like having to pay bills and pick up children from school).

After a while, grieving people tend to find themselves focusing more on the future rather than the loss.

Grief was also now known to be multidimensional, with different thoughts, behaviours and emotions occurring simultaneously.

So sadness, anger and despair could all be felt at the same time over different aspects of the death, she says.

And Dr Breen said it was important for the community to understand that research had revealed that there was no "normal" way to grieve.

"There is no one way to grieve and no right way to grieve," she says.

"It's OK to both cry and not to cry, to want to talk and also to want to be alone with your thoughts.

"Unfortunately, when it comes to grief, we have a lot of these rules or ideas in our head about what we should or should not be doing.

"It's important to be gentle on yourself and realise it's OK to feel how you feel and think how you think.

"Culture, too, can have a significant influence on the way we grieve. In some cultures, if someone was wailing and throwing themselves on the coffin, it could seem strange. But in another, not doing that would be seen as strange."

Upskilling the WA community and boosting grief literacy levels are crucial to ensuring grieving loved ones were better supported and not wrongly judged, Dr Breen says.

Curtin University is working with carers who had lost loved ones to identify changes, improvements and public education opportunities that could aid coping with grief.

Grieving versus depression

Both cause sadness and changes in eating and sleeping patterns but that is where the similarity stops.

Brain imaging scans have recently revealed completely different parts of the brain are involved in grieving and depression, Dr Breen says. Also medications such as antidepressants that work with severe depression have been found not to be helpful with ongoing severe grief.

"It used to be thought that there was a lot of similarity and overlap between grief and depression," she says.

"But now there is all kinds of evidence showing they are not the same thing and that treatments that work for one don't work for the other.

"You can have both grief and depression at the same time but they are two separate things and need to be treated separately."

Offering a simple way to attempt to tell the two apart, Dr Breen says: "With depression, the self looks empty. With grief, the world looks empty."

Beyondblue says other symptoms that suggest it's not grief but depression include an intense sense of guilt, disconnection from others, thoughts of suicide or a preoccupation with dying, feelings of hopelessness or worthlessness and inability to enjoy or find pleasure in things.

Prolonged Grief Disorder

About 10 per cent of bereaved people experience a form of grief that is "unrelenting and ongoing", says Dr Breen.

It is known by several terms — prolonged grief disorder, complicated grief or persistent complex bereavement disorder.

Researchers have identified several risk factors for this "more distressing experience", including a sudden or violent death, death of a child, childhood history of loss or trauma, history of mental illness and limited or no social support.

"But someone can have many of these risk

factors and not develop complications and someone can have none of these and yet still develop them," Dr Breen says. "So it is not a clear link, it seems to be a lot more complicated."

Any loss can have a grief response

Death of a person, house burnt down, loss of a job, loss of identify and country, loss of health, loss of a pet (certain psychologists specialise in pet loss and bereavement support groups are held).

However, prolonged grief disorder is considered only related to the death of a person.

Grief — the impact on your body

Bereavement and other losses can cause stress that leads to changes in the immune system, increasing the risk of illness, Dr Breen says.

"There has also been some research looking at the effect of death on your heart and your cardiac health — this is the idea of dying of a broken heart," she says.

"There is also the potential for people who are not coping to find unhealthy ways to help them cope, such as increased alcohol consumption."

In the short term, beyondblue says grief can cause headaches, nausea, aches and pains. It can affect your thinking; leaving you unable to concentrate or make decisions, forgetful and sometimes causing you to worry that you will never feel better.

Unhealthy ways of dealing with grief

Using alcohol, illicit or prescription drugs, pushing people away.

We need to understand more about what works

Grief counsellors are experts in providing bereavement care but not all people who grieve require specialist counselling, Dr Breen says. But when there are elevated complications and intervention is necessary, a better understanding of what works is needed.

"This is still a developing area," she says. "People initially tried interventions that had worked for depression but found they were not very effective.

"So, now we look towards developing tailored interventions that help with the complications of grief, including psychological and behavioural therapies."

Curtin University had just finished developing and running a metacognitive therapy intervention (a type of cognitive behavioural therapy) that showed positive outcomes in the trial.

Dr Breen says the intervention is part of a PhD project conducted by Jenine Wenn. "It is about getting people to understand the thoughts they have about their thoughts on grief, and then to challenge these maladaptive thoughts and replace them with more adaptive thoughts," she says.

Social media — impact on grief

"It's had a huge impact, particularly in regards to how we are informed about a death," Dr Breen says.

"In the past, with an unexpected death, it would almost always have been the police coming to the next-of-kin's home."

But now, because of social media and online news coverage, emergency services were finding it more and more difficult to get to families before they found out through other means.

"And the research shows us that the best way to be informed is still face-to-face by an appropriate person, in a safe place," she says.

Death cafes and conversations about death

To combat a modern reluctance to talk openly about death, Death Cafe events are being held around the globe to enable strangers to gather in a safe place to eat cake, drink tea and openly discuss the impact death has had on them. Run as a "social franchise", with set guidelines and principles, the first Death Cafe was held in the UK in September 2011, facilitated by a psychotherapist. Since then, 3439 Death Cafes are reported to have been held, including in WA (deathcafe.com). Other current public education campaigns on death include Palliative Care week.

Helping others

For advice on how to talk to someone who is grieving, try beyondblue.org.au. Or call:

- Beyondblue: 1300 224 636.
- LifeLine 13 11 14.
- GriefLine 1300 845 745 or (03) 9935 7400.

Original article by Marnie McKimme for *The West Australian*.

Upcoming Events

DFA News is distributed throughout Australia so advertising events across the nation here is a great way for everyone to know what is happening in each State or Territory and the opportunity to join you.

If you have a public event planned in relation to organ and tissue donation, whether you're a Donor Family holding an event in remembrance of your loved one, a Recipient celebrating your gift or honoring your Donor, or you're involved with another organisation's event, please let us know and we can publish your event details.**

To advertise an event, contact us by our website: http://donorfamiliesaustralia.com/contact-us

*We publish quarterly so please allow enough lead time.

*Please make sure the event is yours and/or that you are authorised to advertise the event details.

DonateLife Thank you Day

Sunday 20th November, 2016

Strand Park, Townsville

10am to 12noon

BBQ Brunch – BYO drinks

A national day which recognises and acknowledges all organ & tissue donors and their families who have saved and transformed the lives of others.

There will be an en masse butterfly release in memory of Donor Heroes.

If you would like to release an individual butterfly in memory of your donor hero please contact us so we can arrange this for you

Please bring a chair for your comfort – for the purposes of catering can you please rsvp to soranawh@gmail.com.au

For more information please contact Kelli McDonald 0448 511 705 or Sorana Walker Healy 0468 695 693

This project is sponsored by

Australian Government
Organ and Tissue Authority

donatelife

Donor Families AUSTRALIA

RHINO DIVE

IPN MEDICAL CENTRES

Sunday 20 November 2016

DonateLife THANK YOU DAY

Honouring organ and tissue donors and their families

Donor Families AUSTRALIA

This project is sponsored by

Australian Government
Organ and Tissue Authority

donatelife

Donor Families AUSTRALIA

ACT Government Health

donatelife

Donor Families Australia and DonateLife ACT invite you to join us on DonateLife Thank You Day.

For a special lunch event
with **The Hon Ken Wyatt AM, MP**
Assistant Minister for Health and Aged Care
at the
Margaret Whitlam Pavilion
National Arboretum
Forest Drive, Canberra

from 12.00pm-2.00pm
on Sunday 20 November 2016
Light lunch to be served from 12:30pm.

Sunday 20 November 2016 is a national day to recognise and acknowledge all living and deceased organ and tissue donors and their families who have saved and transformed the lives of others.

RSVPs are required for catering purposes.
Please RSVP by **Wednesday 9 November 2016**
By email: organ.donation@act.gov.au or
Phone: (02) 6174 5625 (please leave a message).

A WARM INVITATION TO JOIN US

Share your experience
with similar people to support those making life changing decisions.
Help us to build a caring community
and to shape the future of this caring national network.

If you would like to find out more about **Donor Families Australia** and how to become a member please visit our website

Individually we do great things and affect those around us.
Collectively we do great things and affect a nation!

www.donorfamiliesaustralia.com

Donor Families AUSTRALIA

Donor Families Australia BBQ

:: South Australia ::

Venue name: Bonython Park

Address: Adjacent Gi3 of Life Garden, Bonython Park (off Port Road) Adelaide SA 5000

Date: Sunday, November 20, 2016

Time: 11:30 am to 12:30 pm

State: SA

Contact: Lizzie Mazur on 0408 072 737

As part of DonateLife Thank You Day, Donor Families Australia (DFA) is holding a BBQ following the DonateLife SA Rose Planting Ceremony.

It is a chance for donor families to connect with each other, chat and enjoy a bit to eat in a relaxed atmosphere following this annual event. DFA and DonateLife SA believe the informal gathering will help families continue to feel supported and will promote a sense of unity.

DonateLife Thank You Day is held each year to recognise the donors and their families who have so generously given the gift of life. The DFA Thank You Day BBQ has received funding through an Organ and Tissue Authority 2016 Community Awareness Grant.

This project is sponsored by

Australian Government
Organ and Tissue Authority

donate life

THANK YOU DAY

20 November 2016

A national day which recognises and acknowledges all organ & tissue donors and their families who have saved and transformed the lives of others

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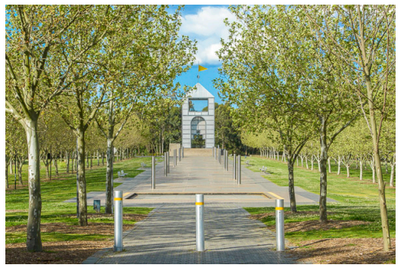
The NSW event will be held at "The Treillage" Sydney Olympic Park, Homebush Bay
Meeting from 3 pm to commence at 3.30 pm until 5 pm.

Donor Families and recipients and their family members, their friends, and members of health institutions are welcome to attend. Thanks will be given by various participants, concluding with Donor Families gathering to release butterflies in memory of their loved ones followed by afternoon tea.



The area has little shade or seating so bring a hat and seat if required. For purchasing butterflies for donor families and catering, please advise your attendance ASAP, indicating whether you are a donor, recipient family or health representative (email: gharrison1953@gmail.com)

For further info, contact Graham on 0421 697 048

Event hosted by

Donor Families AUSTRALIA

This project is sponsored by

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Donor Families AUSTRALIA

THANK YOU DAY VICTORIA

SUNDAY NOVEMBER 20TH 2016

This date is now a National day of recognition where we honour all organ and tissue donors, and their families
OUR TRUE HEROES

The Victorian event will be held at Warringal Park Heidelberg, Beverly Rd, from 12pm.

BYO drinks and chairs, and possibly a dessert to share (only if you wish)

Numbers required for catering so please R.S.V.P. numbers to

Salliegh 0407006505
Or
Robert.johnston04@bigpond.com

Australian Government
Organ and Tissue Authority

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Organ Donation & Transplant Foundation of WA

A Star to Remember

The Organ Donation & Transplant Foundation of WA invites you to a special evening under the stars to celebrate the gift of life and to recognise and acknowledge all West Australians organ and tissue donors.

In association with Perth Observatory's **Adopt a Star** Program a STAR will be dedicated on this night to honour all WA organ and tissue donors. Donor families are invited to view this special **DonateLife Star** through telescopes provided by the Perth Observatory Volunteer Group with the assistance of their volunteers.

Donor families will receive a certificate in recognition of the dedicated star, acknowledging the gift of life made through organ and tissue donation.

Date	**Saturday 10th December 2016**
Time	**6:30pm - 10:00pm**
Venue	**The Old Perth Observatory 4 Havelock St, West Perth (at rear of Dumas House)**
RSVP	**Friday 11th November 2016 odatwa@bigpond.com Phone: 08 9272 7171**

Bring - picnic basket, chair and blanket
MC - Lee Steele, Channel Nine
Featuring a showcase of West Australian musicians and performers including a special guest performance by WA's own Courtney Murphy

A FUNDRAISING SAUSAGE SIZZLE WILL BE AVAILABLE ON THE NIGHT

NATIONAL TRUST

ODAT acknowledges the support of Donatelife WA

Donor Families
AUSTRALIA

Donor Families Australia

is here to:

Care

and support families who have donated their loved ones' organs and tissue

Advocate

and give donor families a voice in all aspects of organ and tissue donation

Educate

the wider community about the benefits of organ and tissue donation whilst emphasising the very important role of Donor Families in this process

Share

your experience with similar people to support those making life changing decisions

Donor Families Australia is a place for Donor Families to go

We want to hear all our Donor Families' stories and experiences

We want to assist all Donor Families with what they are going through

We will always act as a voice for our membership

Help us build a caring community
and shape the future

Join now:

www.donorfamiliesaustralia.com