

Alliance of Concern-Against Assisted Suicide

Care not Killing Our Duty of Care Catholic Parliamentary Office
Campaign Against Assisted Dying Glasgow Disability Alliance

Many together single voice

Every person deserves to be safe under the law, without exception

Flyer Pack

Simple chat-messaging to be shared with family,
friends, local contacts

Assisted Dying Bill, Scotland Flyer 1

You may have seen TV news stories which highlight emotionally difficult experiences of people dealing with hard situations, who want the law to allow them to end their life. Popular soaps and other dramas often present the impression that allowing people to end their own life should be up to the individual. We are led to feel that it should be their right??

The above bill is now before the Scottish parliament. It proposes that people who are facing a "bad death" due to having a terminal illness, should have the right to be supported in ending their own life.

The bill proposes certain safeguards: 2 doctors must agree that the person is capable and fits legal criteria; a 14 day period to allow a change of mind; a health care professional must assist the "patient" in taking the drugs that will kill them. Some feel this is reasonable and humane??

The gravest concern regarding this bill is not its proposals that might seem reasonable to many, even though they are a concern. It's greater danger lies in what will happen to people in Scotland after it became law, especially those who experience vulnerability or disability in their lives.

Other Countries Where Assisted Suicide is Legal Today

Holland, Canada and some states in USA allow legal Assisted Dying/Suicide. Before the law was changed in these countries, people were given proposals like the Scotland Bill which

- Said the reason for change was only to support a limited number of people facing a terminal illness, from which they had no other escape
- And promised that this act of legal Dying/Suicide would be controlled and supervised

Today the law in these countries is very different from this. It no longer applies only to a small group in the population with terminal illness. Many more, different types of people are now legally killed.

- Holland allowed euthanasia in 2001 when most of 2000 cases were to provide relief of pain/cancer
- By 2019, of the 7000 deaths, more than 500 were due to dementia/psychiatric conditions.
- In 2020 the Dutch government agreed to the euthanasia of children under 12.
- In April 2020 the court in Holland acquitted a doctor of murder who carried out euthanasia on a dementia patient who resisted.

Canadians agreed assisted Dying/Suicide in 2016, for those experiencing suffering near the end of life. They expected this would involve low numbers of people. Over the past 5 years the law there has changed

- The 5 day period to change decision can be removed
- A person can now be considered eligible for Dying/Suicide due to chronic illness, disability, mental illness, or anything that would hinder their full participation in society.

Over time, people use equality laws (which say that everyone has to be able to have what some people have) to widen the use of assisted Dying/Suicide. In these countries, legally assisted Dying/Suicide is now part of the "treatments" offered by health care services. Think about how this changes so many things.

Scotland in the Future

As we have seen from the experience of other countries, legalised killing is a danger to those who struggle or are vulnerable. Giving a person lethal drugs as a way of dealing with their life is always an indication of failure, it does not dignify the person.

In Scotland today carers try to help people face and overcome illness or difficulty in their lives. These other countries show us how legal assisted Dying/Suicide undermines this. It changes the way that people understand and treat others when they are vulnerable. In a number of these countries which now allow assisted Dying/Suicide, many people (especially the vulnerable) agree to this because they "feel as if they are a burden" to others.

Good laws also need other supports in place for people who help others face difficulty or challenges. Helping someone experiencing mental health issues, drugs/alcohol dependency, or a relative facing end of life challenges, need resources. (e.g. Hospices and good quality palliative care can ensure that no person need experience unnecessary pain.)

If this bill is made law it is a danger to Scottish society as a whole. Other countries show us that, what may appear reasonable for a few is bad law for all. Legalised killing as a way of "caring" for people, paves the way for later decisions that change what health care is, and how it is delivered. It affects the role of doctors and nurses. It changes how we value and care about each other.

"Administering death is cheaper and easier than providing care, and it will quickly become the solution for any forms of human suffering, as we have seen in Canada."

Dr Leonie Herx, chair of the division of palliative medicine at Queen's University in Ontario, Canada.

The votes of MSPs decide the laws of Scotland. For an issue like this, they have a responsibility to make laws that look after the good of everyone, especially the most vulnerable. To vote well they should only think about facts, the good of all, and not about opinion polls or popularity. Their vote will leave all people in Scotland with a legacy that will last for a long, long time.

Action – What You Can Do If You Are Concerned

- Copy this document and pass it to family, friends or others, especially in other parts of Scotland. Ask them to share and speak with others, contact their MSP, share concern and ask how they will vote. They can do this online at www.writetothem.com using only their postcode.
- Log on to the website carenotkilling.scot and sign the petition, and find out more facts about this issue. This website can also help you contact your MSPs.
- Invite your MSP (and list MSP's) to a meeting in your area to discuss these matters.

By taking action, you will play an important part in building a network of action across Scotland. Action can bring about a legacy of care for future generations, not killing. Failure to act could leave future generations with a disastrous legacy. Let us know about your contacts with MSPs by phone or txt to the number below.

NOTE : Our campaign group is not affiliated to any political party or group, it was formed to respond to this particular issue. For more advice contact
Brian 07947497797 or Noel assishelp04@gmail.com

Assisted Suicide Scotland 2023-28 : Likely Reality

Flyer 2

This follows earlier contact about the Assisted Dying bill which is now before the Scottish parliament. If you read on, you will understand how this bill could change life in Scotland, in ways that will surprise and concern you, if it becomes law.

In 2015 the Canadian parliament overturned a ban on euthanasia, saying it deprived people of dignity and autonomy. In 2016, just like other places where state Dying/Suicide is legal, it accepted ideas similar to those in the Scottish bill by providing **safeguards** and **criteria**. eg it was **only** to be allowed for people suffering from a terminal illness whose death was 'reasonably foreseeable'.

Canada Today

After further debate and legal challenge, today anyone suffering from an illness or disability that 'cannot be relieved under conditions' that he or she 'considers acceptable' can get free state assisted suicide in Canada. In 2024 the Canadian parliament is expected to allow state assisted suicide for people who are mentally ill and even minors (under 12s).

The Daily Mail article below tells the stories of people in Canada today. Their lives have been changed in ways that the safeguards in 2016 promised would not happen.

For example, a 65 year old wheel chair-bound man with diabetes, epilepsy.... who was supported by state benefits. On turning 65, most of his disability benefits ended, so he applied for state assisted suicide. 'I don't want to die but I don't want to be homeless either'.

Poverty is not officially a criteria to receive state assisted suicide, but he says he never hid his circumstances from the doctor. 'He was honest with me. He basically said: 'I can see why you're doing this,' and he told me he'd administered MAiD (state assisted suicide) to people he knew were doing it because of poverty.'

To read the other examples in the article use the link

<https://www.dailymail.co.uk/news/article-11548029>

(to access the article move the mouse over the link and then click – a small hand will appear – then left click your mouse)

Like other places, Canada shows us that allowing state assisted killing to become legal for any single situation opens the door to wider applications. The Canadian bill proposed protective **safeguards** and **criteria**, just like the Scottish bill does today. In Canada, like other countries, these protections were swept aside.

Alison McInness Lib Dem 2015

In the 2015 debate in the Scottish parliament on this topic, Alison McInness Lib Dem MSP explained why state assisted suicide is both dangerous and unfair.

"I come to this debate as a liberal and as a humanist. I do not accept that there is a right to die..... autonomy (personal choice) is not absolute – we are not entitled to exercise freedom that undermines or endangers the freedom of others..... we need to have choice with responsibility."

"....in vulnerable people's minds, the right to die will become a duty to die..... the state must not sanction assisted suicide."

"In elevating the status of individual autonomy, we reduce the status of those who are dependant. Allowing assisted suicide would, over time, change the way we view and treat the elderly, the disabled, and the infirm."

Dr. Will Johnston Family Physician, Professor - Vancouver, Canada

"Few Canadian doctors foresaw that "going neutral" would guarantee the arrival of euthanasia, or that they would have no option but to cooperate with supplying death on demand.

It has become all too easy to end patients' lives.

Learn from our mistakes."

**Canada shows what could happen in Scotland within a few years.
Is this what you want?**

If you are concerned please share this with as many people as you can,
especially in different parts of the country.

Ask them to urgently contact their MSP, and 7 list MSPs,
and share the above concerns.

These MSPs are the people who will make the final decision,
which will affect us all, and those who follow us.

To find out more information log on to carenotkilling.scot

For local advice contact Brian 07947497797 or assisthelp04@gmail.com

Campaign Against Assisted Dying (CAAD) : Our group is not affiliated to any political party or group, it was formed to respond to this particular issue.

Assisted Dying 2023: Do Not Be Deceived

.....Flyer 3

Professor Leonie Herxx is a world famous expert in Palliative Medicine from Canada. When she visited Scotland in 2023 she said "Do not be deceived". Let's explore what she meant.

Introducing Assisted Dying : Canada Experience

Just like Scotland today, Canadians were led to believe that state assisted Dying/Suicide would only be allowed for small numbers of people approaching death, in intolerable pain. In 2016 the Canadian parliament passed a law for this small group. Within 5 years, state assisted suicide is now the cause of more than 3% of Canadian deaths, and rising. How did this happen?

Campaigners for assisted dying in Canada learned from the experiences of other places where euthanasia is now legal. They knew that if it was made law for a small group of people, the principle was accepted. Later this could be used as a stepping stone to allow others to obtain euthanasia.

This happened when a judge decided that the law was unfair to others who wanted euthanasia. In 2021 Canada passed a new law. It removed the need to ensure that only people near death, in intolerable pain could receive state assisted suicide.

The Right to Die Human Rights of Others

Here, people with **mental, physical, learning, communication or sensory impairments** are described as having **special needs**. The state responds to these needs by providing legal, social, educational, financial and other forms of support.

Today, the law in Canada says that **any person whose mental, physical, learning, communication or sensory impairments** hinders their full and equal participation in society is eligible for state assisted Dying/Suicide.

The parliament decided that having (what we would call) a special need, can diminish a person's quality of life so much that their best option is to be given state assisted suicide. This was one way the law offered assisted suicide to more people.

Think of how this changes the way that

- A vulnerable person, or a person with disability, sees their own life.
- People understand the value of every person

Case studies/press report Canadian health care workers pressing people of disability to consider euthanasia due to perceived lack of life quality or care costs.

A law which allows a small number of people the right to choose state assisted dying, reduces the equal rights and treatment of the vulnerable.

This bill is not just about limited assisted dying and safeguards. Don't be deceived

Impact on Medicine

Canada's assisted dying laws changed the way a doctor treats patients. The new law says that any person experiencing intolerable suffering, **according to the patient**, has the right to claim access to state assisted Dying/Suicide.

By providing the right to die, the law is directing doctors on how to treat patients.

This applies across Canada. All doctors must inform patients about the government program of assisted dying as a "treatment" option, if their patient

- Has a chronic illness (like arthritis, diabetes, epilepsy, heart disease...)
- Has disability issues (mentioned above)

Think of a doctor whose patient requests euthanasia. They may know of a treatment which can address the cause of the patient's suffering. Under the law, they must support the patient request for Dying/Suicide as the first line of treatment. They should offer 2 additional options, but are not obliged to make sure that these treatments are the most effective or are available.

All healthcare facilities in Canada are expected to support state assisted suicide. A hospice who refused to participate in the program had its state funding withdrawn.

"Administering death is cheaper and easier than providing care, and it will quickly become the solution for any forms of human suffering, as we have seen in Canada." Leonie Herxx

Think how such a law in Scotland would affect

The motivation and role of doctors and their desire to practice care and medicine
The relationship between doctor and patient
The reduction in funding health care

A law which says that doctors must provide death as a form of "treatment", changes the very heart of what National Health and Social care are.
This bill is not just about limited assisted dying and safeguards. Don't be deceived

Please share this with as many people as you can,
especially in different parts of the country.
Ask them to share their concerns with their MSP, and 7 list MSPs,
These MSPs are the people who will make the final decision,
which will affect us all, and those who follow us.

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Being an MSP means doing different things. One of their most serious duties is to decide laws which protect and uphold the rights of all citizens of Scotland. Few laws made during this parliament have the potential to change the lives of all people, as much as the Assisted Dying bill.

Right Use of Law?

This bill wishes to give the state legal power to assist in ending the lives of some of its' citizens. This would allow state employees to act in a way that has never been allowed before. Like most other countries, the law has always seen any attempt to intentionally end the life of another person as being wrong because everyone has the right to life.

The bill suggests that a small group of people with a terminal illness who are near the end of life, are an exception to current law. It promises that only this small group will be allowed state assisted Dying/Suicide in Scotland.

Making national laws which affect all people, to meet the needs of a small group, causes real problems as we shall see.

Learning from Other Countries...

Promises That Cannot Be Kept

Other countries that have done this, show us that such a decision makes a promise that cannot be kept. In these countries, campaigners argued in court that it was unfair to allow only some people the right to assisted Dying/Suicide. These governments were later forced to change the law and introduce assisted Dying/Suicide for others.

State assisted Dying/Suicide may begin as a promise of mercy for a few, but through time it leads to assisted suicide for many. To believe that safeguards could be successful in Scotland is to deny the reality that has happened in other countries.

Changes in the Care for All?

To make the taking of life legal, also causes a disturbing change that affects all people. State health officials who today offer care and support, would be allowed (even obliged at times) to advise some patients, that death is the best "treatment" for their situation because their life is no longer worth living.

Should any state employees have the right to say this,
especially to a vulnerable person?

Some might say it would never happen in Scotland. In 2019 more than 500 Dutch patients were given state assisted death due to their dementia or other psychiatric conditions.

To give state employees power to provide assisted suicide as a "treatment" for health/social conditions changes the security and care of all, especially the vulnerable. Merciful change in the law for the few, results in death as a treatment for the vulnerable, this is not equality.

Other countries show us that allowing the right to die changes the nature and practice of health care. Such change in Canada (eg where state assisted suicide is offered to people with dementia, sight or learning impairments etc...) led Professor Leonnie Herxx, of Ontario to warn us

"Administering death is cheaper and easier than providing care, and it will quickly become the solution for any forms of human suffering, as we have seen in Canada."

Medical care cannot provide the perfect answer in many situations. Research, development and best practice are the normal leaders of change, not law change which alters the reality of care as we know it.

Expectations of the Legislators

The emotive nature of this issue demands much of our MSPs as legislators. Whatever way they vote we hope and expect them to

- Rise above the influence of personal opinion-polls, or party ambition
- Be respectful of the feelings of all but decide based on facts
- Make a decision that will be for the good of all
- Leave a legacy of increased care

Promise and Pledge

As a group we promise that we will inform constituents of

The information given to each of their MSPs

The decision made by each MSP, and the reasons given

We promise to repeat this at the next available election campaign.

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