

Proposed Assisted Dying for Terminally Ill Adults (Scotland) Bill

Introduction

A proposal for a Bill to enable competent adults who are terminally ill to be provided at their request with assistance to end their life.

The consultation runs from 23 September 2021 to 22 December 2021.

All those wishing to respond to the consultation are strongly encouraged to enter their responses electronically through this survey. This makes collation of responses much simpler and quicker. However, the option also exists of sending in a separate response (in hard copy or by other electronic means such as e-mail), and details of how to do so are included in the member's consultation document.

Questions marked with an asterisk (*) require an answer.

All responses must include a name and contact details. Names will only be published if you give us permission, and contact details are never published – but we may use them to contact you if there is a query about your response. If you do not include a name and/or contact details, we may have to disregard your response.

Please note that you must complete the survey in order for your response to be accepted. If you don't wish to complete the survey in a single session, you can choose "Save and Continue later" at any point. Whilst you have the option to skip particular questions, you must continue to the end of the survey and press "Submit" to have your response fully recorded.

Please ensure you have read the consultation document before responding to any of the questions that follow. In particular, you should read the information contained in the document about how your response will be handled. The consultation document is available here:

[Consultation Document](#)

[Privacy Notice](#)

I confirm that I have read and understood the Privacy Notice attached to this consultation which explains how my personal data will be used.

On the previous page we asked you if you are UNDER 12 YEARS old, and you responded Yes to this question.

If this is the case, we will have to contact your parent or guardian for consent.

If you are under 12 years of age, please put your contact details into the textbox. This can be your email address or phone number. We will then contact you and your parents to receive consent.

Otherwise please confirm that you are or are not under 12 years old.

No Response

About you

Please choose whether you are responding as an individual or on behalf of an organisation.
Note: If you choose "individual" and consent to have the response published, it will appear under your own name. If you choose "on behalf of an organisation" and consent to have the response published, it will be published under the organisation's name.

on behalf of an organisation

Which of the following best describes you? (If you are a professional or academic, but not in a subject relevant to the consultation, please choose "Member of the public".)

No Response

Please select the category which best describes your organisation

Third sector (charitable, campaigning, social enterprise, voluntary, non-profit)

Optional: You may wish to explain briefly what the organisation does, its experience and expertise in the subject-matter of the consultation, and how the view expressed in the response was arrived at (e.g. whether it is the view of particular office-holders or has been approved by the membership as a whole).

This is submitted on behalf of the Urray and Strathconon Free Church of Scotland -Scottish Charity, SC038130,

Please choose one of the following:

I am content for this response to be published and attributed to me or my organisation

Please provide your Full Name or the name of your organisation. (Note: the name will not be published if you have asked for the response to be anonymous or "not for publication". Otherwise this is the name that will be published with your response).

Urray and Strathconon Free Church of Scotland Scottish Charity, SC038130,

Please provide details of a way in which we can contact you if there are queries regarding your response. Email is preferred but you can also provide a postal address or phone number.

We will not publish these details.

Aim and Approach - Note: All answers to the questions in this section may be published (unless your response is "not for publication").

Q1. Which of the following best expresses your view of the proposed Bill?

Fully opposed

Please explain the reasons for your response.

We are of the view that assisting by the administration of drugs with death being the specific end in view is not a route the country needs to go down nor should it.

1. Palliative care can be enhanced: there is little reason for people to die in pain in these days.
2. Liam MacArthurs language in introducing his bill is most strange using the pandemic as giving us a reason to improve the way people die. It is an altogether dark picture that is painted and his bill brings no light to anyone. It just brings termination of life in this world and a quicker entrance into another which might be worse ,not better. It is surprising that no reference is made in the introduction to eternal matters- perhaps it is assumed that faith matters belong to a different realm when our government could do with being reminded they are appointed to bring glory to God. (Romans ch. 13)
3. It is unlikely as much evidence shows that there would not be mission creep with this bill. For instance if you tell a population that certain individuals have the right to die at a point of their choosing, what is the moral or ethical argument that denies others having the right to choose. Surely good law has to be based on something more than "the government of the land said". Any safeguards built into the law would fall like a pack of cards in the face of a population that has become suggestible to the idea of life being a burden not a gift.

Q2. Do you think legislation is required, or are there other ways in which the Bill's aims could be achieved more effectively? Please explain the reasons for your response.

It must surely be better to provide people with education on what service they still offer to society, to family and friends whilst they are still alive. Better palliative care can surely be developed for those deaths that are claimed to be painful and traumatic.

Q3. Which of the following best expresses your view of the proposed process for assisted dying as set out at section 3.1 in the consultation document (Step 1 - Declaration, Step 2 - Reflection period, Step 3 - Prescribing/delivering)?

Fully opposed

Please explain the reasons for your response, including if you think there should be any additional measures, or if any of the existing proposed measures should be removed. In particular, we are keen to hear views on Step 2 - Reflection period, and the length of time that is most appropriate.

Proponents of this bill must surely recognise "Murphy's Law"-if it can go wrong it will go wrong. When one sees all the safeguards that are being put in place it is only a matter of time before these constraints will be minimised. Familiarity breeds contempt and just as with abortion procedures the pressure on people and healthboards will be to reduce the bureaucracy. A health emergency like covid introduced "abortion at home". It would be the same here. Efficiency will be paramount.

Q4. Which of the following best expresses your views of the safeguards proposed in section 1.1 of the consultation document?

Fully opposed

Please explain the reasons for your response.

If one opposes the premise of the bill then one can hardly support the safeguards!
We do not accept that there could ever be sufficient safeguards. Once the rubicon is crossed and we are able to take command of our destiny regarding our time of death safeguards will be slowly eroded.
Consider this piece
The Dutch ethicist and former member of one of the five Regional Review Committees on Euthanasia in

Q4. Which of the following best expresses your views of the safeguards proposed in section 1.1 of the consultation document?

the Netherlands between 2005 and 2014 where he reviewed over 4,000 cases, Professor Theo Boer, who formerly supported assisted suicide, pleaded to the UK Parliament not to pass Lord Falconer's assisted suicide bill in July 2014. Dr Boer commented (<https://www.dailymail.co.uk/news/article-2686711/Dont-make-mistake-As-assisted-suicide-bill-goes-Lords-Dutch-regulator-backed-euthanasia-warns-Britain-leads-mass-killing.html>) that "In 2007 I wrote that 'there doesn't need to be a slippery slope when it comes to euthanasia . . . But we were wrong - terribly wrong . . . Whereas the law sees assisted suicide and euthanasia as an exception, public opinion is shifting towards considering them rights, with corresponding duties on doctors to act." We must avert the legalisation of assisted suicide which will incrementally but inevitably extend from 'hard cases' to a more holistic provision, despite the best intentions of those arguing in favour of regulated mild reform (<https://philpapers.org/rec/KEOEEA>). Such change would fundamentally alter the relationship between physicians and patients by introducing suicide as an acceptable mode of medicine.

Q5. Which of the following best expresses your view of a body being responsible for reporting and collecting data?

Partially supportive

Please explain the reasons for your response, including whether you think this should be a new or existing body (and if so, which body) and what data you think should be collected.

Data collection would be essential though it is doubtful if many would much care about the data apart from in an academic way. Policy would likely not be affected by it. One can never imagine the government saying there are too many deaths by this method. Imagine the savings to society in being able to assist people to die.

Q6. Please provide comment on how a conscientious objection (or other avenue to ensure voluntary participation by healthcare professionals) might best be facilitated.

There should not be any reason required for a conscientious objector to stay outwith this process. Indeed it should not be mandatory on anyone who is not comfortable with it. Even the GMC guidance quoted

- do not treat patients unfairly
- do not deny patients access to appropriate medical treatment or services
- do not cause patients distress.

is too generous to the requirements of the job as against the personal objections. Lets face it :this is a new kind of medicine that no-one thus far has signed up to It is killing on demand of a patient. No-one should be compelled to assist in it.

I do not think a register which people have to sign up at the start of the year or even the start of their career should be binding. Peoples attitudes will change throughout their career -maybe even flex and the needs of the service should not come first in this instance. The emotional and spiritual health of the practitioner should.

Financial Implications

Q7. Taking into account all those likely to be affected (including public sector bodies, businesses and individuals etc), is the proposed Bill likely to lead to:

some reduction in costs

Please indicate where you would expect the impact identified to fall (including public sector bodies, businesses and individuals etc). You may also wish to suggest ways in which the aims of

Q7. Taking into account all those likely to be affected (including public sector bodies, businesses and individuals etc), is the proposed Bill likely to lead to:

the Bill could be delivered more cost-effectively.

End of life care is increasingly expensive for the individual and the government. The climate of our land will always be -why waste money? To allegedly quote the Prime Minister during Covid discussions -let the bodies pile up. Finance will always have a huge impact on our moral decisions. Caution is required!

Equalities

Q8. What overall impact is the proposed Bill likely to have on equality, taking account of the following protected characteristics (under the Equality Act 2010): age, disability, gender re-assignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex, sexual orientation?

Negative

Please explain the reasons for your response. Where any negative impacts are identified, you may also wish to suggest ways in which these could be minimised or avoided.

When does quality of life become objectionable and by whose definition. Anyone who sees only a dark suffering future which is costly to themselves and others will consider the option to end their life. It saves everyone. The elderly and the disabled are bound to think through these things more than others. As we understand it there are no disability charities who support such legislation.

In Canada there has been a court case where "Disability advocates, including the Council of Canadians with Disabilities, have condemned (<https://cacl.ca/2019/10/04/advocates-call-for-disability-rights-based-appeal-of-the-quebec-superior-courts-decision-in-truchon-gladu/>) the 2019 ruling of the Quebec Superior Court to allow for assisted suicide in cases when death is not "reasonably foreseeable". They have argued (<https://cacl.ca/2019/10/04/advocates-call-for-disability-rights-based-appeal-of-the-quebec-superior-courts-decision-in-truchon-gladu/>) that the decision risks sending the message that "having a disability is a fate worse than death"."

Sustainability

Q9. In terms of assessing the proposed Bill's potential impact on sustainable development, you may wish to consider how it relates to the following principles:

- living within environmental limits
- ensuring a strong, healthy and just society
- achieving a sustainable economy
- promoting effective, participative systems of governance
- ensuring policy is developed on the basis of strong scientific evidence.

With these principles in mind, do you consider that the Bill can be delivered sustainably?

No

Please explain the reasons for your response.

The question itself is objectionable though we grasp it may be routine This should not be about sustainability. We live in a world where there is a reprehensible idea that the production of Children is a bad thing because of the current climate. People are denying themselves the privilege of having children

Q9. In terms of assessing the proposed Bill's potential impact on sustainable development, you may wish to consider how it relates to the following principles:

- living within environmental limits
- ensuring a strong, healthy and just society
- achieving a sustainable economy
- promoting effective, participative systems of governance
- ensuring policy is developed on the basis of strong scientific evidence.

With these principles in mind, do you consider that the Bill can be delivered sustainably?

because of climate fears. Its a small step from that to denying the dying (who may have had a long life) the right to use up resources. After all in economic and environmental terms they can only be a burden.

General

Q10. Do you have any other additional comments or suggestions on the proposed Bill (which have not already been covered in any of your responses to earlier questions)?

The bill seeks to exercise compassion and Mr. McArthur is to be respected for that. It is also coming from a dark place where death is viewed as being better than life in some cases. It doesn't stress sufficiently the importance of the life of the dying to those who love and care for the individual. It puts the individual wishes first rather than any other needs. It neglects in our opinion to recognise that the giving and taking of life is 'beyond our paygrade' and should be left to Divine Prerogative. Death is a horrible aspect of this fallen broken world. Unnecessary suffering is not desired but neither is taking the power into our own hands.

It should be borne in mind that 200 million of citizens in a world population of about 8 billion should give reason for caution: this is not a game of catch up.