

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

Representative organisation (trade union, professional association)

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).

The Evangelical Alliance joins together hundreds of organisations, thousands of churches and tens of thousands of individuals to make Jesus known.

Representing our members since 1846, the Evangelical Alliance is the oldest and largest evangelical unity movement in the UK.

United in mission and voice, we exist to serve and strengthen the work of the church in our communities and throughout society.

Highlighting the significant opportunities and challenges facing the church today, we work together to resource Christians to act upon their faith in Jesus, to speak up for the gospel, justice and freedom in their areas of influence.

Working across the UK, with offices in London, Cardiff, Glasgow and Belfast, we are committed to fostering strong relationships amongst our membership. Our members come together from across denominations, locations and ethnicities to share fresh ideas, celebrate best practice, and catalyse innovation throughout the evangelical community and beyond. We know that together we can achieve much more than we can ever achieve alone.

The Evangelical Alliance is a founding member of the World Evangelical Alliance, which unites evangelical alliances based around the world, representing up to an estimated one billion evangelical Christians worldwide. This reflects the global reach and influence of evangelical faith, which can also be seen in the huge social and ethnic diversity in evangelical churches within the UK.

Throughout its history, the Evangelical Alliance has been at the forefront of campaigns for Christian unity, religious liberty and social transformation. Today our dedication to serving the church, and society at large, is as strong as ever.

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).

Evangelical Alliance

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 have serious concerns about the Bill for several reasons.

As Christians, we believe that everyone has complete value and dignity simply through being human – created in the image of God. This can never change regardless of age, class, race, gender, disability, sexual orientation, healthcare status or any other characteristic.

We are deeply concerned that there can never be enough safeguards put in place to protect against terminally ill patients feeling pressure or coercion to end their lives. This pressure could come from family, friends or medical professionals within hospitals, and we are especially concerned in the post-COVID world that terminally ill patients could be coerced by someone off-screen in remote video consultations.

Making assisted suicide legal would send the implicit message (even if unintended) to those who are terminally ill that it's something they should consider. This would inherently build pressure on terminally ill patients that doesn't currently exist.

We think that after two years of COVID-19 and all the suffering and death it has caused, it would be highly inappropriate to legalise assisted suicide; rather than leading to less suffering, it would lead to more suffering for patients, families, friends and healthcare professionals. Rather than considering legalising assisted suicide, we should ensure that Scotland's palliative care services improve to be the best they can be.

It is also notable that very few legislatures around the world have legalised assisted suicide. Further, where it has been, it has in almost every case gone further than originally envisaged (such as young adults suffering in their mental health having the option of assisted dying in the Netherlands). As a community of faith, we want to express how wrong we believe these kinds of developments would be for our society and culture here in Scotland.

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.

No. As they receive palliative care, terminally ill patients are at the most vulnerable state they ever will be in their life, and as such should receive the best care and support possible – however long their life lasts. This point was recently made by former Prime Minister Gordon Brown, who argued that legalising assisted dying "gets the balance wrong between individual autonomy and the sanctity of life".

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.

While the steps set out do acknowledge that legislation has to find a way to stop coercion or pressures put onto terminally ill patients (specifically at step one), it is hard to see how this can ever be fully realised. While the consultation makes mention as to steps and further assessment if a patient is deemed not to have capacity there is no similar provision in relation to assessing undue influence. Perhaps this is because it is almost impossible to do but it is striking, nevertheless.

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.

As mentioned above it is very difficult to see how safeguards could ever be fully realised in relation to undue influence. We are particularly concerned that suggestions that medical appointments could be conducted online would offer no safeguards whatsoever in this area as it would be impossible to ascertain that someone else was not present off screen. Even face to face appointments would be challenging in this area where patients could well be of sound mind but have been persuaded that their life is no longer worth living. Indeed, the First Minister made this very point in a previous Holyrood debate on a similar bill in 2010 when she said, "I personally find myself particularly concerned and fundamentally concerned about the difficulty I think would always and inevitably be present in determining that someone choosing to end their life had not been subjected to undue influence." We agree with this assessment.

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

Fully opposed

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

Conscientious objection on this issue should be enshrined in law to ensure that medical professionals don't have to participate against their conscience. We are concerned however that any protection should be broad enough include the full range of staff involved in any process (including administrative staff) and also every aspect of any process itself. We are also concerned that by providing a legal provision for assisted suicide at all it would make any conscience protections very difficult to enforce in practice.

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:

a significant 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 the Bill could be delivered more cost-effectively.

Every possible safeguard should be in place to ensure that even the question of it being cheaper to end life than to provide palliative care is off the table. We object in the strongest terms that the value of any human life could ever be determined by financial costs of care.

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.

• Age: We are struck by the Bill covering children as young as 16 within its scope. This is particularly notable with discussions ongoing about raising the age of marriage in the UK to 18 specifically to tackle issues of undue influence and coercion on 16-17 year olds. While the Scottish Government has yet to legislate in this area it would be remarkable if it was considered that marriage should be reserved for over 18s whilst simultaneously the ultimate life changing decision of assisted suicide was deemed to be appropriate at 16. At the other end of the age spectrum most terminally ill patients will be older, and thus we are deeply concerned that this Bill would lead to a cultural shift whereby those who are older are valued by their utility rather than their inherent worth and dignity. As mentioned at the outset we believe that human worth and dignity can never be lost through age, disability or even terminal illness and a society that values individuals simply by their utility would be a deeply retrograde and regressive step for Scotland.

• Disability: We are very concerned that the passing of this Bill could open troubling conversations in a similar vein towards disabled people. It is worth quoting Baroness Campbell of Surbiton who spoke in the House of Lords debate on assisted dying in October 2021:

"I am not immune to dark thoughts when my health deteriorates and social care fails, or when I am told that I am at end of life and I am in pain—but my experience has taught me that universal patient-centred care is and has to be the first priority. One disabled woman sums it up very well. She wrote to me last week, "I am against this Bill. I have got a terminal illness, but when I am left to spend a painful night in my wheelchair because nobody turned up to put me to bed, I am going to think that assisted suicide might not be so bad after all. Why can't people support us to live first, so that we wouldn't get suicidal?" Is this Bill the best we can offer her?" Once again we agree with the concerns in this assessment.

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 passing of this Bill would not contribute towards a "strong, healthy and just society", it would make that goal much more difficult to achieve for the reasons outlined above – particularly in relation to age, vulnerability and disability. We have spent two years as a society protecting those who are most vulnerable and to suddenly stop this approach, far from promoting a society that is strong, healthy and just, would rather lead to one where the strong are valued over the vulnerable, the healthy valued over those who are terminally ill or disabled and one where injustice and pressure could be brought upon those who are least able to resist undue influence. This is not a Scotland we wish to see.

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)?

No Response