

ASSISTED SUICIDE AND DISABLED PEOPLE – A BRIEFING PAPER

There have been a number of recent high profile cases where disabled people have sought to legalise assisted suicide. DAA is concerned that should such legislation be introduced, the threat to the lives of disabled people will be greater than ever. We have produced a Briefing paper that outlines the arguments for and against.

Our society today is increasingly seeing impairment, disability and aging as facets of life to be avoided at all costs. We are also a society that, because of medical advances, have grown less and less used to pain and suffering. We expect the medical profession to find a solution to any problem that we may have. Death is an infrequent visitor to families as we live longer and are more likely to survive birth and maternity. Advances in the genetic sciences send out copious messages that we can have impairment free children, that it is quite all right to throw away embryos that have genes that may lead to disabling impairments, that we will get rid of aging and that we will soon be able to alter genes so that all problems will be solved.

We also live with the reality. The medical profession is not infallible and many people do not receive the treatment that they should and do suffer pain and indignity. Disabled people do not have enough support, either financial or personal, and many live highly restricted, solitary and poverty-stricken lives.

Television shows us pictures of these horrors daily. Soap operas turn the reality into drama, so that even if we do not have direct experience of a horrible situation, we know what it is like (or think we do). The media also concentrates on negative images of disabled and old people - on the suffering, the isolation etc. They continually make programmes in which disabled people or older people are either overcoming their tragedy or shown as useless and in need of care and protection or a danger to society and should be locked up.

And one of the greatest messages that comes from our society today is that if you are a disabled person, or a sick person or an older person - you have lost your autonomy - you can no longer have control over your own life. And this is certainly the reality for disabled people, sick people and older people who have difficulty looking after themselves. There is an army of personnel who tell them what to do, where to live, when to get up, when to get food. You cannot speak for yourself, even if you can speak.

But the solution to the fear and repulsion that aging and disability bring is not to eliminate aging and disability but to build a society which sees the benefits that these experiences bring to the individual, their friends and family and to the wider society and ensure that society gives all the support to and protection of

the rights of each and every individual, without discrimination.

Arguments for assisted suicide:

- people have the right to terminate their lives when they feel that their life has become intolerable and for those who cannot kill themselves by their own hand, because of their impairments, there has to be a method of supporting their wish to commit suicide.

- Without legislation assisted suicide will happen anyway, in unacceptable ways such as going abroad, or putting family members and doctors in positions of illegality.

- Many people have experienced watching a loved one die in pain and suffering and do not want it to happen to themselves or other loved ones.

- Hospice treatment does not always work and anyway is not always available.

- An unspoken argument for euthanasia, especially of the elderly and disabled people, is cost.

Arguments against:

- In the UK today people can commit suicide and be free from prosecution as a criminal, but the Human Rights Act, 1998 says (Schedule 1, Article 2.1) that everyone's life shall be protected by law and therefore society has a duty to prevent them from doing so by trying to alleviate the situation that they find intolerable. In the situation of someone wishing to commit suicide because of pain and suffering, it is the duty of society not to help them to die but to alleviate that pain and suffering -to, as Article 3 of the HRA says, protect them from inhuman and degrading treatment.

- Legislation allowing assisted suicide, however tight the controls, inevitably reinforces negative attitudes on the quality of life of disabled people. And in all those countries where assisted suicide has been in place for some time there have been reports of considerable abuse of the legislation, particularly with regard to people with learning difficulties or other conditions where the individual is unable to communicate their wishes. And, as has recently been reported in the UK media, even people with non-life-threatening conditions are being assisted in their suicides in Switzerland.

- Another factor to consider is that many of the people in Holland who have been legally assisted to end their lives had the physical capacity to take their own lives (see published accounts from Dutch doctors who have practised assisted suicide/euthanasia). There has not been anything like enough discussion around this issue - are these suicides really taking control of their own deaths or are they

handing the responsibility to someone else?

- The argument that pain and suffering must be ended is uncontroversial. But this should be done through alleviation of the pain and suffering, not through ending the individual's life. The HRA does give situations where the deprivation of life would not be regarded as in contravention of Article 2.1 but only in cases of self-defence, lawful arrest, escaping detainees and quelling a riot or insurrection. 'Death with dignity' (as euthanasia is so often called by its protagonists) is not one which arises from desperation and by someone else's hand but one where the individual is truly and fully supported to make the most of what life is left to them.

- There is mounting evidence that both the legal and medical professions and society in general believe that disabled people's lives are not worth living and that they should not be subject to the same criteria as non-disabled people. DNR notices are being routinely put on people's notes in hospital - especially the elderly. Parents are being told that the possibility of having a disabled child is unfair on the child and that they will have a life of pain and suffering.

- Put crudely, old people and disabled people are cheaper dead than alive. This is a very real argument in today's climate of soaring health costs and is one that also underpins euthanasia of new born babies and the information given to parents to encourage them to abort a disabled foetus (or a foetus that may have an disabling impairment).

As Dr. Ian Basnett says:

"I became quadriplegic following a sporting accident 17 years ago. I was ventilator dependent for a while and at times said to people, "I wish I was dead!" I am now extraordinarily glad no one acted on that and assisted suicide was not legal. I think the first difficulty I faced was the fact that, like many people, I had a terribly negative image of disability. When you suddenly become severely disabled you still have that viewpoint. Before I was disabled, I was working as a junior doctor. That brought me into contact with disabled people and I remember clerking in a man with quadriplegia. My reaction was, how could anyone live like that? I said to my then girlfriend, "I'd rather be dead, if I couldn't play sport".

Dr. Basnett now knows that there is more to life than sport!

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