End of Life Assistance (Scotland) Bill

Kathy Kindness

I feel this bill is important; in so much as it will bring End of Life Care (ELC) into the spotlight and I hope lead to a constructive, ongoing dialogue between all relevant parties.

While I personally, would not like to see the establishment of a “Dignitas” equivalent in the UK, I do believe that we can all (even those of us who work in palliative care) be tempted to turn away from the acute suffering experienced by those who find living has become intolerable. This parallel suffering in Palliative Care workers becomes intensified if medical options have run out. These patients who suffer such profound End of Life existential anguish despite best palliative care can currently offer may be a small minority, but we must look at them (perhaps with the eye of qualitative research) and clarify their needs.

The End of Life Assistance Bill would seem to embody a collective fearlessness of uncertainty and the process of dying, and seeks to “manage” it by controlling the exact timing of death.

There are many complex reasons why a person may wish to die; some medical (i.e. fear of unmanageable pain, or other physical symptoms; some social (fear of being a burden, physically and financially); some psycho spiritual (i.e. shame, guilt, depression, abandonment and hopelessness). From a Macmillan clinical psychology point of view, more psychological and psychiatric input in hospices and Palliative Care to provide robust therapy would help (such input is absent in the Bill’s process)

Everyone recognises the profound ethical, moral and spiritual issues raised by this Bill, this is a debate that should and must continue. I would hope that emphasis on clarifying end of life directive initiatives and resourcing of Palliative Care units may emerge from this, and support for staff who work with and seek to comfort those who are dying.

Kathy Kindness
Macmillan Clinical Psychologist
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