I refer to the above Bill which has been presented to the Scottish Parliament by Margo MacDonald MSP, a Bill she has proposed, in part, on account of her personal fears regarding her own end of life, fears occasioned by her illness. One has every sympathy for Mrs MacDonald’s personal situation and one can only wish her well in the difficulties she anticipates.

**Murder not Assisted Dying**

Nevertheless, despite my sympathy for Mrs MacDonald, I profoundly disagree with the aims of this Bill. The Scottish Government has already indicated that: ‘Neither suicide nor attempted suicide are criminal offences in Scotland’. This is not so because there is a right to commit suicide but rather because the law reflects society’s acceptance that those who commit or attempt suicide required or require more help than condemnation. The power sought under this Bill is not to be able to commit suicide but rather to seek the assistance of others in ending one’s life. To deliberately assist in or to cause the death of an innocent person is murder or, as the Scottish Government has reminded us: ‘Under Scots law, an act of euthanasia by a third party, including physician-assisted suicide, is however regarded as the deliberate killing of another, and would be dealt with under the criminal law relating to homicide.’

**Couched in euphemism**

The intentional taking of an innocent human life is not only an offence in terms of Scots Law. I would suggest that it is an offence in Scots Law because it is contrary to the stricture of the Decalogue – *Thou shalt not murder.* Such has hitherto been the law in all civilised societies and I can only see grave problems if this fundamental basis of our law is chipped away at – as this Bill undoubtedly proposes to do. It is a mark of all such legislative proposals that they are couched in euphemism. Hence this Bill is not named the *Murder Assistance Bill,* but the *End of Life Assistance Bill.* Great care must be taken to ensure that the reality of what is proposed is not cloaked in euphemism. This Bill seeks authorisation for the murder of innocent human beings and this reality is not expressed in the euphemistic term ‘end of life assistance’ which conjures up an image of loving, palliative care rather than that of a lethal dose.

**Illogical restrictions**

In this Bill the overriding qualification for authorisation of assisted murder is that life is intolerable for the person seeking death, and although this qualification is currently predicated upon a person being diagnosed as

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1 ELA/S3/10/2/1
2 Ditto
terminally ill or permanently physically incapacitated one can see no logical reason why it should be. It is the intolerability of life that is the determining factor in this Bill, and that being the case one can easily see a host of others claiming the “right” to the provisions of this Bill because they suffer from conditions which also make life intolerable. They will undoubtedly ask: Why should only the terminally ill or physically incapacitated be given this “right” if it is the intolerability of life that is essentially the qualifying criterion? And, it is only a small step from there for some to decide that they ought to put others out of their misery on the same grounds – especially where they consider the sufferers are incompetent to make that decision themselves. The Bill if approved would therefore undoubtedly lead to unrestricted euthanasia voluntary or otherwise. Furthermore, there is no legal definition of important key terms in the Bill and thus ambiguity and imprecision are its watchwords. Legislators require to consider the common good of society and such is not attained by making law on the basis of what are presented as hard cases. The adage hard cases make bad law should not be ignored, particularly when considering a Bill as ill-drafted as this.

Cultural Implications

There are serious cultural implications which arise from this Bill. While they are not explicit in the Bill’s provisions, the climate created by a culture of assisted murder will lead to fundamental changes in society’s perception of the vulnerable. Among other things:

- It will imply that it is at least equally meritorious to put to death those whose suffering is intolerable as it is seek to address the needs and concerns of the suffering or suicidal. But it will also, in time, create a climate in which those who impose a burden upon their families or society will be subtly pressured to choose “selflessly” death rather a “selfish” burdensome existence. This will become a growing temptation as the financial and medical burden on society increases as a result of the demographic imbalance in Western societies.

- The medical profession will increasingly become divided between those who are concerned with the health and wellbeing of their patients and those who are prepared to be instruments of their death. If society approves assisted murder of the suicidal this will quickly be seen as a “right”, one that doctors will be expected to satisfy which raises all manner of ethical and professional dilemmas which this Bill does not even try to address – particularly in view of the current opposition of the medical profession to what is proposed.

- If assisted murder is permitted on the basis of hard cases, such as those which are frequently manipulated worldwide by proponents of euthanasia to massage public opinion in favour of legalised euthanasia (another euphemism for murder), then it should not be presumed that the medical profession will maintain its current opposition, nor that the scope of assisted murder will be limited to the categories proposed in Mrs MacDonald’s Bill. The experience of the Netherlands has
indicated that assisted murder extended from so-called voluntary euthanasia to involuntary euthanasia and has included a wider circle of victims in its trail including children.

- If assisted murder becomes an option for the incapacitated and terminally ill then such will diminish the perceived need for palliative care which is often available only through the hospice movement and supported largely by charitable donations.

I ask you to oppose this Bill and to support through the Parliament all measures that will lead to more support for the hospice movement and for palliative medicine to ensure that, whatever their worries, the terminally ill and incapacitated are not driven by despair to seek to end their own lives through the actions of others, and thus weaken the whole foundation upon which our lives depends – respect for the inviolability of innocent human life.

A S Fraser
12 May 2010