End of Life Assistance (Scotland) Bill

Effie Alexander

Thanks you for the opportunity to comment on the Bill.

I am a retired nurse having done general nursing, midwifery and health visiting, followed by management in community nursing including as Director of Nursing; and latterly with Lothian Health Board planning older people's and community services. At the same time I was and now continue to be a minister of religion.

In these capacities I have had a lot of experience of terminal care, death and bereavement. Personally I was intimately involved, over prolonged periods of time, in the care and death at home of my nephew who died aged 7 from cancer, my mother who had Parkinson's disease and died aged 66 and my father who had cancer and died aged 84. In all of these situations there was a process of deterioration, increasing weakness and disability and ultimately complete dependency. Yet I witnessed dignity and worth in these people that only increased as the body weakened and was never dependent on physical vigour or other abilities. The meaning that these lives had related to who they were not what they could or could not do. I am deeply concerned that as a society we would begin to think otherwise about people.

I am opposed to this Bill for many reasons and I am sure that the above will indicate some of them, but I realise that the issues are far wider than one person's experience or opinion.

I think that this Bill is vague and that definitions of, for example, intolerable are absent. Understandably this is difficult as an individuals experience of pain and suffering is particular to them and will be different from everybody elses. This leaves implementation of the provisions of the Bill open to use and abuse depending on how a variety of people would interpret it.

I expect many will have noted parallels with the 1967 Abortion Act. We were assured that all safeguards were in place so that only the clearly defined group for whom the measure was intended would have access to abortion. There has now been nearly 7 million abortions in the UK. The safeguards have not worked. Whatever view a person may have of the status of the unborn child there is clearly no doubt about that of the people for whom this Bill is intended. They are alive, of value and should not be assisted to kill themselves. Our efforts and resources in this country must be directed to continuing and expanding end of life care that is compassionate and effective, to supporting people and their carers through the journey of their illness.

I am very concerned: that some older people will feel a duty to die, thus relieving relatives, friends and the system of the 'burden' of care: that the potential for abuse as has been experienced in the Netherlands will be realised and vulnerable people assisted to die against their will because they
were not afforded the voice to fully express their wishes; and that professionals opposed to this will have not be given the right ot opt out of providing this assistance.

These are some of my concerns.

It is poignantly apposite, in view of Margo McDonald's experience and reasons for introducing this Bill, that my mother had parkinson's disease. It was of a particularly aggressive type. Thus I have some understanding and a great sympathy for what lies behind the perceived need for this Bill but again would state my total opposition to it.

Additionally, and from my perspective as a Christian minister, I believe in the inherent sanctity of life and that it is not ours to take in this way. Thank you for your consideration of this submission.

Effie Alexander
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