End of Life Assistance (Scotland) Bill

Mary C McGinley

I would be pleased if you would ensure that my comments are considered as part of the public consultation on the proposed End of Life Assistance (Scotland) Bill.

I previously submitted comments to Margo McDonald, MSP and my own MSP Jackie Baillie at the Draft Bill stage and now wish to bring my comments to the attention of the Committee.

As a Nurse and Midwife I have had the privilege to care for people when they were most in need of care and support. I have worked within the NHS for more than 35 years and feel that the introduction of this Bill would seriously undermine the trusting relationship which exists between those who are ill and those who provide care for them. Vulnerable elderly, the terminally ill and those trying to cope with the stress of incapacity should not be presented with the option of ending their life due to fear of pain or lack of support. We should be seeking to ensure that they have access to counselling, palliative care, and adequate social and home care to help them to cope with the challenges of ill health or disability.

I have been impressed by how well people can deal with ill health and terminal illness once they have had time to come to terms with the illness and have been given appropriate care, rehabilitation and support. As a society we should be seeking to improve our palliative care services to ensure that those who are terminally ill or unable to live independently are able to access the health and social care they and their family need to maximise their quality of life. If people were confident that they would be supported both medically and socially when they were no longer able to care for themselves this would help them to deal with their prognosis rather than to seek to end their lives. It would be wrong to assist people to end their life before that had the chance to realise that they have greater personal resources to cope with their disease once the support and palliative care they need are in place.

I am concerned that this Bill might lead to a situation where elderly, infirm or disabled people will feel that it is their duty to remove a perceived burden on relatives or society by opting to end their life. There is very little doubt that many frail and elderly already feel that no one wants them and that no one cares, some feel that they are nothing more than a burden and have outlived their usefulness. The introduction of a Bill to assist them to end their life would suggest that as a society we support this view.

Terminal illness, disability, and degenerative diseases are all part of the range of health and ill-health experiences which can happen to any one of us or to members of our families. Providing Assistance to End Life as an option to erase the impact of this reality seeks to remove these human conditions from our family and community experiences. Learning to live with and to
support people with and through these ill-health experiences can enrich relationships and help people to recognise that we do all rely on each other.

It would be wrong for us to put in place legislation which allows us to think that only a healthy, independent life is worth living. This Bill would lead to the view that disability, degenerative disease and terminal illness does not need to exist and does not have to be actively and compassionately managed by our health and community services.

If this Bill was to succeed along with the diagnosis of terminal or degenerative disease, you would also be advised that this now makes you eligible to legally terminate your life with the help of your Doctor or Nurse. If you doubt that this would be the case you need only look at what happens now when an unborn baby is identified with a congenital abnormality, the parents are advised that they should consider a termination of pregnancy-abortion, irrespective of the period of gestation. (up to full term abortion is offered).

I hope this Bill does not succeed however if it does the following points have not been adequately addressed and would have to be considered:

- It would also be necessary to ensure all Medical and Nursing Staff were able to exercise conscientious objection to any involvement in the process or procedures.
- There would also require to be investment in Mental Health Services to support the review and consent process.
- There would require to be facilities where the public cannot have access which would rule out the use of our current health care locations.
- The Bill should be more appropriately named "The Termination of Life Bill".

I am also very concerned that a person as young as 16 years would be eligible to access this End of Life Assistance option, surely they should be allowed to reach full maturity before being permitted to make such a decision.

I consider that a society and country are judged on how well it cares for those who are disabled, frail or elderly. I think we would be much poorer as a country and society if we were to allow this Legislation to be introduced. Surely Scotland does not wish to be known as a country that does not value it's weakest members and does not respect and protect human life. Would it not be better for Scotland to be recognised as a centre of excellence in palliative care and rehabilitation rather than a country which offers End of Life Assistance as an option for the terminally ill and disabled.

Thank you for giving me the opportunity to contribute my views on this proposed Legislation.

Mary C McGinley
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