

## Pess Release: Living and Dying Well's Response to the Health and Social Care Committee's Report into Assisted Dying/Assisted Suicide (29/02/2024)

The Health and Social Care Committee has published its much-anticipated report about its inquiry into assisted dying/assisted suicide (AD/AS). Living and Dying Well welcomes this balanced and comprehensive report into the subject. It provides a sound overview of the topic and explores both arguments in favour and against.

We agree with many of the report's findings and recommendations, including:

- Concerns regarding the Oregon-model of AD/AS, such as the continued lack of transparency in official data, the significant number of people who applied for an assisted death because of financial concerns, and the failure to retrieve unused lethal drugs from the community.
- After hearing from healthcare professionals, "it is clear that there is hesitation around whether it is possible to accurately assess capacity and safeguard the person, in every case."
- Palliative and hospice care services in the UK have been neglected. They are critically
  underfunded and unevenly spread across the country, with two-thirds of hospice funding
  currently relying on charitable donations.

We also note the Committee's exploration the effect AD/AS has had on palliative care services. The Cicely Saunders Institute of Palliative Care, Policy and Rehabilitation at King's College pointed to examples of finds from Canada that, "palliative care resources were disproportionately consumed by MAiD [AD/AS] requests, while non-MAiD patients had reduced access to palliative care". Furthermore, most countries that have legalised AS/AS failed to keep up with the rest of the world in improving the quality of their palliative care services. Between 2015-2021, Belgium fell 21 places in global palliative care rankings.

We do feel that the Committee's concerns surrounding the Oregon model are consistent with those highlighted in the previous select committee report in 2005, such as the increasing number of people applying for AD/AS because they felt like a burden on their family (averaging over 56% of applicants each year since 2012). This main report does not mention the high complication rate (on average 11%) among reported AD/AS in Oregon between since 2010.

The findings of the Health and Social Care Committee's report align with those in the Danish Council of Ethics' report in October 2023. The Council, who were commissioned by the Danish Parliament's Health Committee to investigate AD/AS, went on to recommend that Denmark does not legalise AD/AS.

Overall, we welcome the report's willingness to ask difficult questions, and provide clarity on facts surrounding this complicated discussion.