



Shlomo Brody
Let's Talk

The assisted dying bill will lead to an immoral and ineffective social experiment

Both reason and religion teach us to stop this from happening

British medical care is on the verge of a radical change unless Jews join other activists to stop parliament from passing the Terminally Ill Adults Bill. Unfortunately, some have presented the debate over physician-assisted suicide as being between progressives in favour of liberty against religious traditionalists opposing change. Rabbi Jonathan Romain, for example, told this newspaper that opposition from Orthodox Jews and the Anglican Church stems from “using an ancient criterion for a modern problem... It’s simply no longer applicable.” In fact, the law should be opposed by all citizens of good conscience because of well-founded concerns for dangerous consequences. Let’s review the evidence.

Proponents of the bill claim that supervising doctors will ensure that patients are aware of other treatment options, including palliative and hospice care. Such promises ring hollow when palliative care is woefully underfunded by the NHS. Already now, there is a lack of palliative specialists and beds to alleviate the suffering of the terminally ill. The Association for Palliative Medicine in the UK has strongly condemned this initiative because of inadequate access to treatment that can alleviate suffering. Similarly, Hospice UK warned in July that one in five hospices were cutting services in the worst funding crisis in two decades. Suicide becomes a palpable option when you are suffering and have no other recourse to alleviate your pain. This is a particularly tragic trajectory since palliative medicine has greatly advanced to help so many patients around the world. Sadly, the NHS has fallen behind.

Naturally, those who are most likely not to receive adequate care are society's most vulnerable citizens: the poor, the disabled, the elderly, and the infirm. These groups already have too many barriers to getting treatments that could help them live out their lives with dignity. Now, a new tempting, cheap, and quick option will be dangled before them. For this reason, a large group of secular human rights organisations have come out strongly against the bill. Their argument is straightforward: Evidence from around the world shows that assisted-suicide laws have harmed the weakest members of our society.

Ten states in America have legalised physician-assisted suicide. The National Council on Disability, an independent federal agency, has documented how negative biases about the quality of life of a person with a disability can result in their disparate treatment. "Safeguards" have regularly failed to protect patients. Medical aid in dying, not living, is soon offered.

A systematic review of twenty-five years of data from Oregon, cited by Romain and others as an example of a system that is "working successfully," in fact points to disturbing trends. The length of the doctor-patient relationship reduced over time, the review shows, falling from 18 weeks, on average, in 2010, to 5 weeks in 2022. The proportion referred for psychiatric evaluation prior to assisted suicide has dropped from 31.3% to 1.1%. This means that no one is truly examining their physical and mental health before providing them with means to take their lives. In 1998, 10 percent chose suicide because they feared being a burden to their family. Today, over 50 percent cite that reason. People are choosing this option because they feel no one is there for them. Is there any reason to think that matters will be better in the overwhelmed NHS system?

More alarming are the trends in Canada, which legalised both euthanasia and physician-assisted suicide in 2016 for the terminally ill. Since then, judges ruled that the criterion must be expanded to include those who have a "reasonably foreseeable death," even if their prognosis was not terminal. Human rights activist and investigative reporters have repeatedly documented how the socially vulnerable and isolated are regularly choosing this option out of desperation. Now, over four percent of all deaths (13, 241 cases in 2022 alone!) in Canada are through the hands of doctors. Polls show that 55 percent of Canadian citizens worry that medical assistance in dying

is taking the place of improvements in social services. This is why key cabinet members like Wes Streeting and Shabana Mahmood say they will vote against the bill.

The doctor-patient relationship, once built on the principle of “do no harm,” is now being radically transformed. Leading organisations like the American Medical Association and the World Medical Association continue to oppose physician-assisted suicide. The duty to heal, as the AMA put it, is “fundamentally incompatible” with assisting in suicide. Instead, physicians must aggressively respond to the needs of patients with palliative treatment as a part of holistic care as nature takes its course.

Jews have always taken pride in our commitment to medical care alongside with protecting society’s most vulnerable citizens. The Terminally Ill Bill will initiate a social experiment that has proven to be immoral and ineffective. If it passes, it will become nearly impossible to turn back the clock. Both reason and religion teach us to stop this from happening.

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