Why Is the Media Ignoring a Law That Hurts Those With Disabilities?

Speeches by supporters of assisted suicide always include a big shout-out for people with disabilities. Hey, guys, you're top on our list of favs; we're just working out the delicate balance against individual rights. Just hang in there; we love youse all. Which, translated, means that the fears of people with disabilities are going to be ignored.

Unsurprisingly, a major authoritative report by the U.S. National Council on Disabilities, a federal agency, on disability and assisted suicide has been overlooked by the media. Assisted Suicide Laws and Their Danger to People with Disabilities is a scathing analysis of arguments in favour of assisted suicide.

As the report — which was released last week — points out: "Many national disability rights organizations oppose the legalization of assisted suicide. All national groups that have taken a position are opposed." The report finds that safeguards are ineffective and that there is little oversight of abuses and mistakes.

Why wasn't this on the front page of the *New York Times*? Or even on Page 13?

And north of the border, the disabled have even more to fear. Quebec's Superior Court recently struck down a government regulation that restricted euthanasia (known as Medical Aid in Dying, MAID) to persons for whom death is "reasonably foreseeable." Justice Christine Baudouin stated in a case known as Truchon & Gladu that this restriction forces sick people "to endure harsh physical and psychological suffering" which is a violation of one's right to liberty and

security.

But the "reasonably foreseeable" clause in Quebec's legislation was inserted to protect the disabled against pressure for them to choose euthanasia rather than burden their carers or the public health system. Eliminating it could lead to disaster.

Let's look first at the American report.

In eight American states and the District of Columbia it is legal for doctors to prescribe lethal drugs to patients diagnosed with terminal illness and with a prognosis of six months or less to live, if certain procedural steps are followed.

Relief from unbearable pain is often described as the primary motivation for seeking assisted suicide. In its report, <u>Assisted Suicide Laws and their Danger to People with Disabilities</u>, NCD responds that the most common reasons behind a request for assisted suicide are related to unmet service and support needs. These should be dealt with through new laws and more funding, says NCD, not assisted suicide.

"Assisted suicide laws are premised on the notion of additional choice for people at the end of their lives, however in practice, they often remove choices when the low-cost option is ending one's life versus providing treatments to lengthen it or services and supports to improve it," said NCD Chairman Neil Romano.

Closely examining the experience in Oregon, where the practice has been legal for 20 years, NCD found that the list of conditions eligible for assisted suicide has expanded considerably over time, including many disabilities that, when properly treated, do not result in death, including arthritis, diabetes, and kidney failure.

In the report, NCD exposes the limitations of purported

safeguards. It says that:

Insurers have denied patients expensive, life-sustaining medical treatment, but offered to subsidize lethal drugs for them, potentially leading patients to hasten their own deaths;

Misdiagnoses of terminal disease can cause frightened patients to hasten their deaths;

Though fear and depression often drive requests for assisted suicide, referral for psychological evaluation is extremely rare prior to doctors writing lethal prescriptions;

Financial and emotional pressures can distort patient choice;

Patients may "doctor shop" limitlessly to find a physician who will obtain a colleague's concurrence and prescribe a lethal dose

There is evidence of suicide contagion in states where assisted suicide is legal has been found in several studies.

"As someone who has battled cancer and been given weeks to live and am still thriving years later, I know firsthand that well-intending doctors are often wrong," said Mr Romano. "If assisted suicide is legal, lives will be lost due to mistakes, abuse, lack of information, or a lack of better options; no current or proposed safeguards can change that."

The debate comes at a delicate time for Americans. Just as people are campaigning for the right to die, there is a big crack-down on the use of habit-forming opioids. The report points out that "people who depend on opioids to manage pain often find themselves treated like criminals. It may become easier to obtain a prescription to die than one to relieve pain."

Canadians have very similar concerns in a different political context.

The Truchon & Gladu decision has left the disability community in Canada aghast and angry. More than 65 disability organizations across the country <u>have signed an open letter</u> to the Attorney General asking him to appeal the case in the light of the harm that it could do to the disabled.

Steven Estey, National Coordinator of the Council of Canadians with Disabilities, says that "Canada must avoid sending a message that having a disability is a fate worse than death. Canadians with disabilities are already bombarded daily with reminders that we are unwelcome and under-valued."

In another development, <u>260 doctors signed an open</u> <u>letter</u> which claimed that "numerous patients across Canada … have chosen medical assistance in dying (MAiD) due to the suffering caused by a lack of proper supports."

They point out that the MAiD legislation was passed on the understanding that individual rights would be balanced against protection for the most vulnerable. The Truchon & Gladu decision undermines this. "Our neighbours and our loved ones living with disabilities already continually experience the devaluation of their lives. They are frequently told—often bluntly—that they would be 'better off dead'."

In a somber warning to Canada's politicians, the doctors write that: "Without an appeal, Canada will have moved well beyond allowing an autonomous life-ending decision at the end of life into the realm of death on demand—for almost any reason at any time."

It cannot be repeated too often: a civilization is measured by the quality of its care for the vulnerable and handicapped. This principle is being endangered by autonomy fundamentalists who believe that civilization should be measured by access to assisted suicide and euthanasia. Won't anyone heed the anguished protests of the disabled?

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