



Right Reverend Patrick Joseph McKinney

Bishop of Nottingham

Pastoral Letter on Assisted Suicide

**appointed to be read at all Sunday Masses celebrated in the Diocese of Nottingham
on the Thirtieth Sunday of the Year, Saturday 26th and Sunday 27th October 2024**

Dear brothers and sisters in Christ,

A Bill has been introduced to Parliament which proposes a radical change to the law. If passed it will allow a terminally ill person the possibility to seek lethal drugs from their doctor, so as to end their life prematurely. Proponents of this change in the law speak of ‘assisted dying’, but let’s be clear, this Bill isn’t about giving people access to palliative care to relieve their suffering, and it isn’t about a patient having the right to decide to stop life-prolonging treatment; people in this country already have these rights. No, this Bill is about allowing a doctor to assist a person to take their own life, to help someone commit suicide, without criminal consequences. This Bill is about assisted suicide.

As Catholics we can never support assisted suicide, in any situation or any circumstance. The Commandment, ‘You shall not kill’ makes clear that to deliberately kill or assist in the killing of an innocent human person is a grave violation of the moral law. This commandment demands that we value and safeguard human life at every stage of life, until its natural end. It is never permissible to take the life of a human being, even if a person requests it. Life is a gift from God, to be treasured and protected in all its vulnerability, and it is God alone, the author of life, who will call us back to Himself at the appointed hour. This respect for the sacredness of life and the dignity of the human person is foundational to our care for the sick, the aged, and the most vulnerable in our society.

The Church has always been a strong defender of the sanctity of life at all stages, but especially when life is at its most vulnerable: at its beginning and its end. This Bill has the potential to initiate a paradigm shift in how we understand, value, and protect the sacredness of every human life, and so to profoundly affect the very fabric of our society. Laws to legalise assisted suicide strike at the foundation of the legal order; the right to life sustains all other rights, including the exercise of freedom. While real and emotional descriptions of painful suffering in dying and death resonate powerfully with all of us, the ardent desires of a few cannot outweigh our obligations to the greater common good, which includes protecting the lives of all, especially the most vulnerable.

Supporters of this legislation argue that the elderly, disabled and other vulnerable persons will be protected through a careful framing of the Bill, with stringent safeguards and strict criteria. But evidence from other jurisdictions, where assisted suicide has been legalised, shows the very real danger that, once legalised, the initial criteria can quickly become broadened. Canada, with a similar health system to ours, provides a salutary tale in this regard. So called

'medical assistance in dying' was introduced in a similar way to this current Bill, yet five years later it has been rapidly expanded to include chronic illness, disability, mental health, and it has even been offered to patients for reasons linked to old age, disability, and other social issues. In New Zealand, within just a year of being legalised, evidence is emerging that people are choosing euthanasia due to financial concerns, or because they felt a burden to their family, or because they felt alone and abandoned. Once exceptions are made, the evidence is clear that such legislation knows no end.

Furthermore, one can only imagine the moral and emotional pressure this Bill will place on our hard-pressed doctors and other medical professionals. The need for medical care is born in the vulnerability of the human condition, and it encompasses the responsibility to care for and promote human life, underpinned by the principle to 'do no harm'. This Bill risks changing forever the relationship between patients and doctors, those to whom we have always looked for medical advice and care in times of need. Whilst some would argue that doctors have a duty of compassion and a duty to relieve their patients' suffering, incurable cannot mean that care comes to an end, and compassion cannot extend to taking the life of another person. In this respect, palliative care constitutes a precious and crucial instrument in the care of patients during the terminal stages of illness. The excellent work of hospices across our country bears witness to what it means to holistically accompany, and compassionately care for, a person in their final days. Britain founded the modern hospice movement, and so it a very sad reflection on our society that access to hospice care is a postcode lottery, and that hospices in this country are so poorly funded and so heavily reliant upon charitable donations. It should also be noted that in many countries where such laws have been introduced there has been a gradual decline in funding for palliative care.

Whilst it is never morally licit to take the life of an innocent person, whatever the situation or circumstance, we must also be deeply concerned by the particular context in which this Bill is being introduced. It arrives at a time when cost cutting measures are being sought by the government, and public services are under enormous pressure. Our greatly valued NHS is at breaking point, social care provision is struggling, winter fuel payments are being withdrawn from many pensioners, and access to high quality palliative care is at best patchy and seriously underfunded. There is also a growing elderly population who need care and support, many of whom already feel a burden to their families and public services, alongside disabled persons who struggle to get the support they need in daily life. As many have pointed out in this debate so far, a right to die runs the risk of very quickly turning into a duty to die, and even more so given the current state of our society.

In just over a month's time, on Friday 29th November, this Bill will receive its second reading. This is the moment when there will be a general debate, and MPs can vote on it in the House of Commons. So, I urgently encourage you to write to your MP and share your concerns about this Bill. There are tools and resources on the diocesan website to help you to do this.

Please join with me in praying and working to help ensure that this bill will not be passed into law.



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