New research finds up to 93% of people consider assisted dying acceptable in at least some situations, even if rarely.

A new opinion poll which tested attitudes to assisted dying in different situations finds strong support for each of four situations presented. Attitudes of respondents who find the practice "always" or "sometimes" acceptable vary between 76% and 87%, depending on the nature of the situation presented. A further 6-12% consider it "rarely acceptable", while only between 7% and 12% felt it was “never acceptable”.

This is very strong support even in the most contentious of the situations presented where the illness will not be the direct cause of death, or where the person has been diagnosed with Alzheimer's dementia, and has asked for assistance to die before losing the mental capacity to make a life-ending decision. The poll was conducted by the National Centre for Social Research (NatCen) and was sponsored by the campaign organisation My Death, My Decision (MDMD).

People were most likely to view assisted dying as acceptable in the scenario where a person was diagnosed with an illness that will eventually cause their death.

Survey participants were shown the following short vignette and asked the extent to which, in their opinion, it would be acceptable for a doctor to assist the person to die.

> *John/Hannah has been diagnosed with an incurable medical condition that will eventually cause his/her death.*
> *He/She is currently mentally competent, and has asked several times to be medically assisted to die because his/her quality of life has fallen permanently below a level he/she is willing to accept.*
> *His/Her case has been approved by two doctors and checked by independent professionals to ensure that this is his/her free and informed choice.*

The vignette emphasised many aspects that are important safeguards in those countries that have assisted dying legislation. It also focuses on the dying person's own assessment of the quality of life they are prepared to tolerate. The selection of gender in the vignette was randomised for each participant. In this scenario, 87% of respondents said they thought it "always acceptable" (47%) or "sometimes acceptable" (40%). Of the remainder, 6% thought it "rarely acceptable" with only 7% saying that it was "never acceptable".

In the second scenario, the phrase "*will eventually cause his/her death*" was replaced with the more restrictive "*will cause his/her death in the next 6 months*". All other aspects were identical. In this case, fewer people (78%) believed this was either "always" (45%) or "sometimes" (33%) acceptable. Of the remainder, 10% thought it "rarely acceptable" and 12% thought it "never acceptable". This is a particularly interesting result as previously proposed legislation for the UK, based on the law in Oregon USA, has included this 6-month restriction. This criterion was what Noel Conway argued for in his recent failed court case.

In the third scenario tested in the poll the requirement of a terminal illness was removed completely. The phrase "*will eventually cause his/her death*" was replaced with "*will **not** be the direct cause of his/her death*". 76% considered this was "always" (32%) or "sometimes" (44%) acceptable, with 12% considering it "rarely acceptable" and another 12% thinking it "never acceptable". There is a notable shift from "always" to "sometimes" acceptable, though the broad level of support is similarly high. This non-terminal illness criterion would include those who are suffering from severe and debilitating long term conditions such as locked-in syndrome, like Tony Nicklinson, Multiple Systems Atrophy like Omid T, and advanced MS like Debby Purdy.

The final category tested concerned those who were suffering from dementia but had not lost the mental capacity necessary to make a life ending choice. Dementia is a terminal illness, though it takes on average 8 to 10 years between diagnosis and eventual death from the illness. The vignette used in this case was:

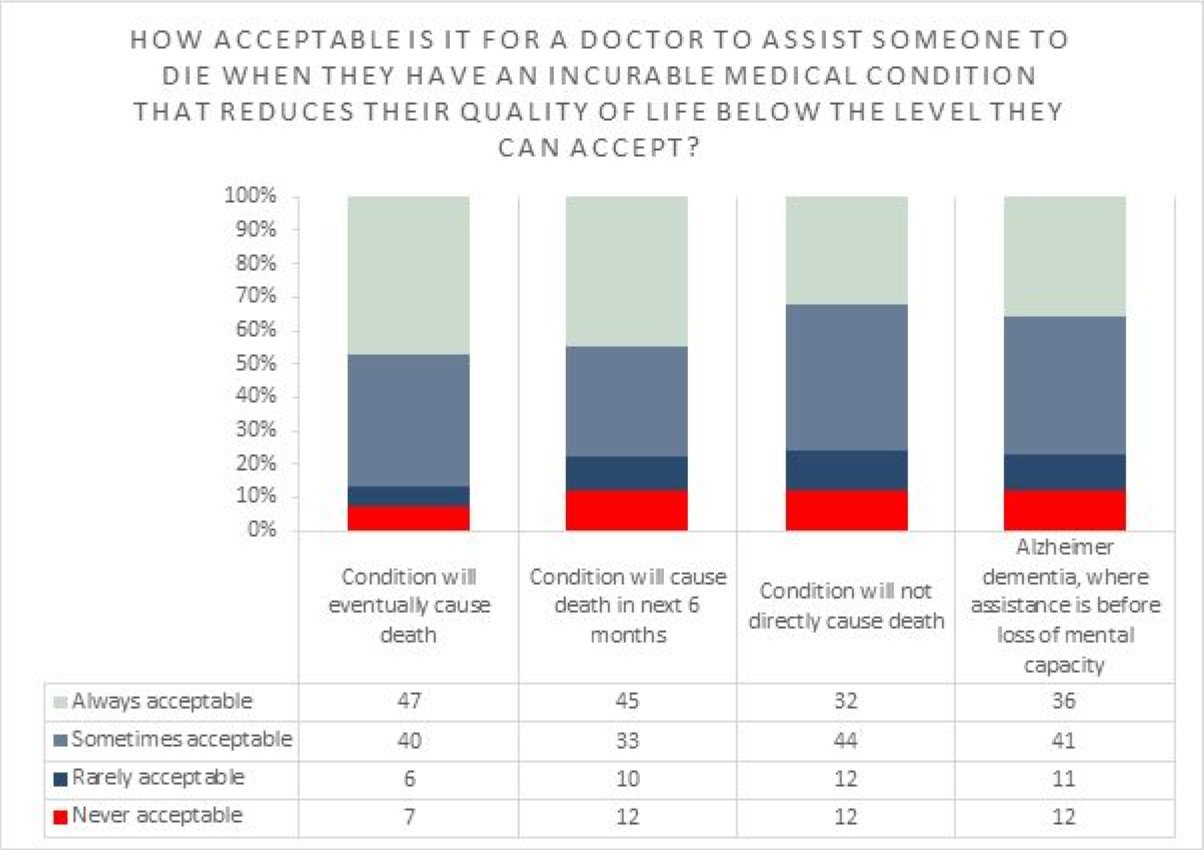
*Steve/Annabel has been diagnosed with Alzheimer dementia, an incurable medical condition that will eventually cause his/her death but may take 7 or more years of decline to do so. Symptoms of late stage dementia include, among others, loss of mental capacity. He/She is currently mentally competent, and has asked several times to be medically assisted to die **before** he/she loses mental capacity and his/her quality of life falls permanently below a level he/she is willing to accept.*

His/Her case has been approved by two doctors and checked by independent professionals to ensure that this is his/her free and informed choice.
Once Steve/Annabel has lost mental capacity he/she would not be able to have a medically assisted death.

*In your opinion, to what extent is it acceptable for a doctor to assist Steve/Annabel to die at a time of his/her choosing **before** he/she has lost mental capacity and his/her quality of life falls permanently below a level he/she is willing to accept?*

The question was worded carefully to exclude those who had lost mental capacity at the time of their assisted death. This limitation would mean that someone making this choice might need to end their life a few months before they might ideally choose. The question was presented in this way to reflect the option currently available to UK citizens with early stage dementia who choose to go to Switzerland for a legal medically assisted death there. People like Alex Pandolfo for example. Dementia is of increasing importance when discussing assisted dying. In England and Wales 1 in 8 of all deaths is due to dementia. A figure that rises to 1 in 4 of all deaths for women over 80.

In this scenario, 77% of respondents considered a medically assisted death was either "always acceptable"(36%) or "sometimes acceptable" (41%). Similar numbers to the other vignettes thought it "rarely" (11%) or "never" (12%) acceptable.


HOW ACCEPTABLE IS IT FOR A DOCTOR TO ASSIST SOMEONE TO DIE WHEN THEY HAVE AN INCURABLE MEDICAL CONDITION THAT REDUCES THEIR QUALITY OF LIFE BELOW THE LEVEL THEY CAN ACCEPT?

	Condition will eventually cause death	Condition will cause death in next 6 months	Condition will not directly cause death	Alzheimer dementia, where assistance is before loss of mental capacity
■ Always acceptable	47	45	32	36
■ Sometimes acceptable	40	33	44	41
■ Rarely acceptable	6	10	12	11
🟥 Never acceptable	7	12	12	12

Of all the options presented, perhaps the most clear finding is that across these scenarios only 7% to 12% of respondents thought assisted dying was "never acceptable". The current law in the UK prevents legal medically assisted dying in 100% of cases in the UK. MDMD believes this poll adds more evidence for the demand to change that law.

The survey was conducted by NatCen through the NatCen Panel, the only probability-based research panel in Great Britain that is open to be used for data collection by the social research community. A representative sample of 2708 people aged 18+ from Great Britain took part. Respondents completed the survey between 19th November and 16th December 2018 by a combination of Internet response and telephone questionnaire to include the views of those who do not have access to the internet. NatCen were chosen as the polling organisation due to their experience with the highly respected annual British Social Attitudes Survey.

MDMD are grateful to NatCen for their helpful advice in constructing this survey in a meaningful and unbiased way.

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About My Death, My Decision

My Death, My Decision (MDMD) is a right to die organisation which wants to see a more compassionate approach to dying in the UK. It campaigns for a change in the law to enable the option of a medically assisted death to be available to mentally competent adults who, due to incurable medical conditions, find that their quality of life is permanently below the level they are able to accept, provided that this is their own well considered and persistent wish. My Death, My Decision Limited, is a company limited by guarantee, registered in England number 11758121, registered office Unit A 39 Moreland Street London EC1V 8BB.

About the National Centre for Social Research

The National Centre for Social Research, Britain's largest independent social research organisation, aims to promote a better-informed society through high quality social research (www.natcen.ac.uk).

About the NatCen Panel

The NatCen Panel is a research project following around 10,000 people living in England, Scotland and Wales. Established in 2015 by the National Centre for Social Research, it supports the work of non-profit organisations, like government departments, charities, local authorities and universities.