

Written evidence submitted by Dr Angelika Reichstein, Associate Professor in Law, University of East Anglia (TIAB79)

As Associate Professor in Criminal Law at the University of East Anglia, my research expertise is assisted dying under the European Convention on Human Rights. After writing my PhD on assisted dying in England and Germany, I went on to publish several articles on assisted dying. In 2018 and 2019, I have published articles on assisted dying generally, and in 2019 and 2023 on assisted dying for prisoners. I have furthermore co-edited a [book](#) published in 2024 on the law and bioethics of end-of-life decisions, containing a national report I wrote on the law and bioethics of end-of-life decisions in England, and a co-authored general report. In my articles on assisted dying I emphasise the importance of dignity, introducing a novel conceptualisation of dignity as a relational concept.

Summary: Assisted dying needs to be legalised to enable suffering individuals to die in dignity. The Terminally Ill Adults (End of Life) Bill is a welcome first step, however, the time frame of six months should be reconsidered. No other European country that has legalised a form of assistance in dying has set a time limit regarding proximity to death, and time limits are neither feasible nor responding to the actual needs of those asking for assistance in dying.

1. The Terminally Ill Adults (End of Life) Bill is a vital piece of legislation on the path to a more compassionate approach towards dying. This Bill should be supported, to enable at least some suffering individuals to die a more dignified death than the one they are facing. However, this Bill cannot be seen as the final puzzle piece that completes the landscape of compassionate care at the end of life.

2. Arguably, the Terminally Ill Adults (End of Life) Bill does not go far enough. Like previously introduced assisted dying Bills, this Bill only applies to terminally ill adults with less than six months to live. This time limit creates problems though. How can we determine how close someone really is to death? Doctors are not oracles. In some cases, it is obvious when someone only has very little time left to live. However, to name a specific number of weeks or months is an imprecise gamble. People have returned from death beds. Others die suddenly. Furthermore, setting a time limit still condemns individuals suffering unbearably – who are not close to death – to live through their unbearable suffering.

3. None of the individuals that have turned to the courts (nationally, or the European Court of Human Rights in Strasbourg), due to not being able to access a legal form of assistance in dying, would qualify under the Bill. [Mrs Pretty](#) was suffering from Motor Neurone Disease, which she was ultimately going to die from, however, when she brought her case, she was seeking reassurance for later in life. This is often seen in countries that have legalised assisted dying, those that ask for permission often do so [as a reassurance](#) without ultimately going through with it. [Ms Purdy](#) was diagnosed with Multiple Sclerosis and in 2009 won her case asking for the Director of Public Prosecutions to clarify their policy regarding individuals that help others commit suicide. She died in a hospice in 2014 after refusing nutrition. [Mr Nicklinson and Mr Lamb](#) were paralysed, Mr Nicklinson additionally was suffering from locked-in syndrome, neither of which would qualify under the 'terminally ill' requirement, and

neither were in the last six months of their lives. Mr Nicklinson refused nutrition and hydration and died of pneumonia, the human rights case was brought by his wife after his death. [Mr Conway](#), like Mrs Pretty, developed Motor Neurone Disease, but at the time of his campaigning was still some way away from the six months mark. While Mrs Pretty and Mr Conway would eventually have qualified for assistance under the current Bill, their requests show that the six months timeframe does not adequately respond to peoples' needs.

4. Unbearable suffering does not adhere to a clear timeframe. Some individuals suffer at the end of their terminal illness. For them, the Bill will be an important and welcome law. However, suffering unbearably is not automatically linked to terminal illnesses. All the European countries that have legalised assisted dying in some form, have done so on a broader basis. While under [Belgian](#) law the patient has to be terminally ill, they do not have to be in the last six months of their life, instead they have to be suffering unbearably. The same holds true for [Luxembourg](#), and the [Netherlands](#). [Portugal](#) has legalised medically assisted dying for the terminally ill who are suffering unbearably. In [Spain](#), assisted dying is available for individuals who are either terminally ill, or are suffering unbearably from a chronic or disabling disease. In [Switzerland](#), assisting someone in committing suicide is legal when done by a physician who does not have a personal motive in doing so. In [Austria](#), assisted suicide has been legalised for those who are either terminally ill or suffering from a serious or long-term illness. Similarly, in [Italy](#), medically assisted suicide is an option if patients suffer from overwhelming pain. In [Germany](#), assisted suicide has been legalised through a Federal Constitutional Court decision, without specific requirements.

5. As this shows, the Terminally Ill Adults (End of Life) Bill is unique in setting a time limit. Rather than setting an arbitrary time limit, the focus should be on the unbearable suffering the individuals are going through in order to enable a dignified death for all.

6. One of the aims in legalising assisted dying is to protect human dignity. Dignity is a subjective concept; we do not all have the same definition of what makes an existence dignified, and at what point it becomes undignified. Consequently, we should accept that it is an individual's determination whether their life has become undignified, and whether they do not wish to live anymore. This view is supported by seeing dignity as a [relational concept](#). In order to live a dignified life, we need others to respect the boundaries drawn by our dignity, but we also need specific actions that enable a dignified existence. This includes receiving assistance in dying – if desired – once an existence is deemed undignified by the person living it. The time limit of the Terminally Ill Adults (End of Life) Bill does not adequately ensure that individuals suffering unbearably can have a dignified end to their lives at the time they deem their existence to become undignified.

7. The Terminally Ill Adults (End of Life) Bill is a good first step in making a dignified death available to more people than can currently access it. However, we need to keep working on making our laws more compassionate still.

14 January 2025